“Let me see tomorrow”

A report based on interviews with women who were nearly killed by their intimate partners

New Jersey Domestic Violence Fatality and Near Fatality Review Board
October 2010
“Let me see tomorrow”

A report based on interviews with women who were nearly killed by their intimate partners

October 2010

Sue Rovi, PhD
Assistant Professor, Department of Family Medicine, New Jersey Medical School, University of Medicine and Dentistry of New Jersey, Newark, NJ

Erica Olson, MSS, MLSP
Principal, Anassa Consulting

Sharon Miller, DVS
Manager, New Jersey Address Confidentiality Program

Maggie-lou Mari, MPA
Program Director, New Jersey Domestic Violence Fatality and Near Fatality Review Board

James Murphy, MA
Retired Deputy Police Chief, Washington Township, NJ
Adjunct Professor, Law and Justice Studies, Rowan University

Laura Cerminara
Forensic Administrator, New Jersey Office of the State Medical Examiner

Shamita Das Dasgupta, PhD, DVS
Co-Founder, Manavi, Inc.
Clinical Adjunct Assistant Professor of Law, New York University Law School

Anna Trautwein, RNC
Manager, Continuous Survey Readiness, Saint Peter’s University Hospital

Carol Vasile, MPA
Acting Director, New Jersey Division on Women

In addition to their primary affiliations listed above, all authors of this report are current or former members of the New Jersey Domestic Violence Fatality and Near Fatality Review Board.

This project was sponsored by the New Jersey Domestic Violence Fatality and Near Fatality Review Board, and supported by grant number 08-VAWA-06 awarded by the Violence Against Women Grants Office, Office of Justice Programs, United States Department of Justice and administered by the State Office of Victim Witness Advocacy, Division of Criminal Justice, Department of Law and Public Safety. Points of view in this document are those of the research investigators and do not necessarily represent the official position or policies of the New Jersey Domestic Violence Fatality and Near Fatality Review Board, the United States Department of Justice or the New Jersey Department of Law and Public Safety.
ACKNOWLEDGEMENTS

The Survivors
The authors of this report sincerely appreciate the courage and insights of the women who shared their experiences with us and who put their trust in us to tell their stories.

The title of this report “Let me see tomorrow” is from a quote by one of the survivors, Rose, who referred to it as her “theme”. It reflects her fear of being killed by the abuser, a fear that was voiced by all of the women throughout the interviews. It also embodies a plea for help as well as hope for a future:

So all of this that I was doing, like calling the police, was just the determination to live the next day.

Rose later elaborated:

Give them [abused victims] a lifeline so that they have no reason to go back. …let them be able to see tomorrow is not bleak. There’s a future tomorrow. There’s hope for tomorrow.

We gratefully acknowledge the women’s struggles and their strengths. They have earned our respect and admiration for their participation in this project to improve the safety and well-being of women and children who are in abusive relationships.

The New Jersey Coalition for Battered Women and New Jersey’s Domestic Violence Service Programs and Shelters
Arrangements for the Domestic Violence Service Program sites for the conduct of the interviews were made with the assistance of the New Jersey Coalition for Battered Women. The project would not have been possible without the help of the Coalition and the generosity of the service programs throughout the state.

Sandy Clark, DVS, Executive Director of the New Jersey Coalition for Battered Women. Sandy Clark reviewed the report for accuracy and provided important information and commentary during the entire project. Although not listed as a co-Investigator, Sandy was considered a critical source of support both intellectually and emotionally. We cannot thank her enough.

Other acknowledgements: We would also like to acknowledge and thank several people who reviewed, commented on and improved our understanding of various aspects of this report.

- William J. Zaorski, Esq., Deputy Attorney General, Division of Criminal Justice, Department of Law and Public Safety
- Jane Sweeney, Former Administrator, Office of Domestic Violence and Family Support Services, Department of Children and Families

The transcribers
Accurate transcription is crucial to good qualitative research. While several of the authors also transcribed interviews and proofed all of them, the bulk of transcription was conducted by three women: Katherine Blum, BA, Kristyn Brandi, BS and Lauren Griffin, BA. The authors sincerely thank them for their dedication to the task.
# TABLE OF CONTENTS

**Executive Summary** | 1  
--- | ---  
**Report** | 35  
**Purpose of Research Project** | 35  
**Background** | 35  
**Methods** | 41  
**Findings** | 43  
  - The Survivors' Histories and Experiences | 45  
  - Considerations for a New Conceptualization of “Near Fatality” | 59  
  - Introductions of the Survivors who Participated in this Study | 62  
  - Asking for Help: Survivors’ Experiences and Recommendations | 68  
  - Diversity of New Jersey and Jurisdictional Issues | 69  
  - Family and Friends | 72  
  - Law Enforcement and the Judicial Systems | 76  
  - Domestic Violence Service Programs/Shelters | 124  
  - Health Care | 158  
  - Other Potential Sources of Help | 166  
  - Survivors' Experiences After Escape / Separation from Abuser | 174  
**Conclusions** | 191  
**Appendices** | 200  
- Danger Assessment (Instrument)  
- Research Methods Details Not Included In Text  
- Danger Assessment Scoring by Investigators
“Let me see tomorrow”

A report based on interviews with women who were nearly killed by their intimate partners

EXECUTIVE SUMMARY

Purpose of Research Project
Our goal was to hear about the experiences of women who were nearly killed by their intimate partners and to learn what increased or decreased their safety. We also wanted to hear what these survivors would change in the way New Jersey and its communities respond to victims of domestic violence and their families.

The ultimate goal of the sponsor of this research, the New Jersey Domestic Violence Fatality and Near Fatality Review Board, is to save lives, reduce injuries and abuse by recommending changes in the way law enforcement, the legal and health care systems, domestic violence victim advocates and others respond to victims and perpetrators of domestic violence in New Jersey. These responses can be a matter of life or death.

Background
Domestic violence victims and their families need help in communities throughout New Jersey.

- Every year, most of the state’s domestic violence homicide victims are women who were killed by current or former male intimate partners.
- In 2008, there were 57 domestic violence murders in the state.¹
- Also in 2008, over 70,000 domestic violence offenses were reported to law enforcement throughout the state of which 75% of victims were women.
- Over 3,300 women and children found refuge in domestic violence shelters in 2008, while another 3,300 women and children were turned away because of lack of availability.²
- Compared to domestic violence homicides of women, one estimate suggests that nine times as many women are nearly killed by current or former intimate partners.³⁴ And many more are injured and/or suffer from both physical and non-physical forms of abuse and coercive control.

Domestic violence fatality review is a national initiative that began in the early 1990s to investigate the deaths of women murdered by their intimate partners, i.e., husbands, boyfriends, ex-husbands, and ex-boyfriends. Review teams or boards have been established in most states, including New Jersey.⁵ Reviews are intended to prevent future deaths through retrospective analysis of the circumstances prior to the fatalities, investigation of potential gaps in service provision, and by making recommendations for systems and policy changes that might better help domestic violence victims and their families.

⁵ For more information on Domestic Violence Fatality Reviews, see the website for the National Domestic Violence Fatality Review Initiative at http://www.baylor.edu/ndvfri/ Last accessed September 1, 2009.
Review and research of near fatalities is in its infancy. Few reviews of near fatalities have been conducted because of concerns about survivors’ well-being as well as legal issues; and research on near fatalities to date is sparse. Survivors of near fatalities can help in the formulation of policies to better protect victims of domestic violence by adding to the accuracy of information on abuse that is otherwise unavailable. In 2004, New Jersey’s Board expanded its scope to include domestic violence near fatalities. In 2007, the Board decided to sponsor research of near fatalities. The Board strongly believes that it has a responsibility to hear victims’ stories, learn from their experiences, and use the information they provide to work toward change that will improve the lives of families experiencing domestic violence.

**Methodology**

The research was designed as a pilot study to learn from survivors who were nearly killed by their intimate partners about how New Jersey’s systems and communities respond to victims and perpetrators of domestic violence. Using qualitative research methods, interviewers conducted in-depth, in-person interviews with 11 survivors. Potential participants were recruited from the New Jersey Address Confidentiality Program (ACP). The ACP exists to improve the safety of victims and their families by providing a post office box for participants to use thereby keeping their actual address confidential. Since most victims of domestic violence are women, all participants were women. Confidential interviews with the women took place at domestic violence service program sites and shelters throughout the state in order to better ensure the safety and well-being of the participants. The interview guide was designed with open-ended questions to allow the survivors to tell about their experiences in their own words and to learn what they identified as helpful to their safety and what was less helpful.

Most definitions of near fatalities for review or research use legal and/or medical criteria such as police or hospital reports. Initially, the researchers of this study similarly defined near fatalities. However, we quickly learned from participants the limits of the medical-legal definition as will be discussed below. After the first interview, the research team decided to continue the recruitment process in a way that would enable survivors to participate in the shaping of the definition of near fatalities. The survivors, who agreed to participate in this study, identified themselves as victims of domestic violence who were nearly killed by a current or former intimate partner. These survivors then shared information and insights from their experiences that might not appear in medical and legal reports.

The interviews were recorded and transcribed, and then the transcriptions analyzed using established qualitative methods and software tools to identify similar as well as unique experiences and to highlight quotes for inclusion in this report. Members of the research team read the transcribed interviews and met periodically to discuss each survivor’s experiences and recommendations. In addition, to conservatively assess participants’ risk factors when they were still in the abusive relationships, researchers retrospectively applied the Danger Assessment instrument developed by Jacquelyn Campbell.6

The Institutional Review Board (IRB) of the University of Medicine and Dentistry of New Jersey approved of the study’s research protocol.

---

6 For more information, see the Danger Assessment website, last accessed January 1, 2009: http://www.dangerassessment.org/WebApplication1/
SUMMARY OF FINDINGS

Overview of the Survivors’ Histories and Experiences
This section provides general context about the survivors, their relationships, their children, and the abusers, as well as about the abuse the survivors experienced, and the reasons they stayed with the abusers and the reasons they left them.

The Survivors: The women’s ages ranged from 29 to 45 years. The women are African American or Black (7), White (3) and Latina (1). Several women are immigrants. Most of the women worked in a range of occupations that reflect the all-inclusiveness of domestic violence and many were employed full-time when their relationships began. The impact of the abusive relationship left most of the women without homes and jobs, and at the time of the interviews, many were struggling financially to find employment as well as safe and affordable housing.

The Relationships: The intimate partners were husbands or boyfriends. Of the 11 women, six were married, several for at least five years. For some, the relationships and the abuse lasted for years, spanning over a decade. Several women referred to the abusers as a “monster” and some abusers were described as “Jekyll and Hyde” or as having a public guise or role that masked their private abusive nature.

The Abusers: Like the women, the men’s employment reflects that intimate partner violence affects all strata of society. While several men held fulltime professional jobs, at least four were unemployed during some or even most of the relationship. Unemployment is the “strongest sociodemographic risk factor for intimate partner femicide.”7 Although the interviewers did not ask about the men’s histories, some information about the men was revealed including that at least three men had criminal histories.

While the women live in fear for their lives and remain under the increased protections offered by Address Confidentiality Program, at the time of the interviews, all of the women said that as far as they knew, the men were not incarcerated. As one woman lamented, “I’m running for my life…and he went off scot-free.”

The Abuse: Typically, abusers use multiple forms of coercive behaviors to control the victims. The forms of coercive control are physical and non-physical.

Non-physical coercive control is often categorized as verbal, psychological and/or emotional abuse. For the women interviewed, these forms of abuse included: isolation from family and friends, intimidation, putdowns, name calling, humiliation, jealousy, denying or limiting access to money and employment, stalking, stealing from the women and destruction of their property, and threats to kill the women, their children, other family members, and to commit suicide.

“I don’t call anybody. I report to him, anything I need, even for tampons, or sanitary towels, I have to ask him for money. I had to do my hair or to do anything, he has full control.”
Rose, a survivor

All the women told of the abusers’ threats to kill them: threats that kept them from leaving the relationship and/or contacting the police, while living in fear. Abusers’ threats to kill and threats with a weapon were reported by Campbell et al. as “associated with substantially higher risks for femicide.” Such threats then are red flag indicators of the potential for the woman to be killed.

“He told me that if I leave him he would kill me. … ‘Cause he would always told me that ‘if I ever go to jail for hurting you, I’m gonna get out and kill you’. And that plays with your psyche.” Megan, a survivor

According to the women, all but three of the men had access to guns. Possession of a gun is another major risk factor for femicide. Several men brandished guns when threatening the women. More typically, weapons of convenience were held to the women’s necks or over their heads, including knives, tools, scissors, a shard of glass, and a telephone.

Physical and sexual abuses: For the women interviewed, physical forms of abuse included: hitting, punching, strangling (or choking), biting, shoving, kicking and sexual violence. Eight women related at least one episode of ‘choking’ which they often described as severe enough to leave bruises, damage vocal cords, and nearly lose consciousness. Plus, strangling (or choking) is among the risk factors considered in assessing the danger of homicide for abused women.

Many if not all of the women most likely experienced sexual violence within the relationships but understandably, abused women have difficulty talking about this form of violence perpetrated by one’s husband or boyfriend. Three women did however speak about sexual abuses within the relationships, with one woman plainly stating, “He raped me.”

The Children: Children were often used by the abusers to control the woman and keep them from leaving. There were 19 children ranging from newborns to teenagers living at home during the abusive relationships. Most of the women had children with the abusers; and some had children who were not the abusers’. Most of the children most likely witnessed the abuse in their homes, which can have a long-term negative impact. Imagine a mother having to tell her child, as did at least one of the mothers: “If Daddy is killing Mommy, call 911.”

So he starts to beat me and the children are there and that’s when he tries to strangle me. He has me in that choking grip and I scream to my son and he runs to call 9-1-1.” Rose, a survivor

---

10 Victims often refer to strangulation as “choking”. A discussion of the significance of these terms is in the full report.
12 See the Danger Assessment, last accessed Jan 1, 2009: http://www.dangerassessment.org/WebApplication1/
Some women told how the children would try to intervene with the abuser during assaults, and how the women also protectively intervened between the abuser and the children. Nonetheless, several women related incidents in which their children were abused by the men. A discussion of the impact of domestic violence on children is in the full report.

Reasons the Women Stayed: Domestic violence advocates and the research literature have elucidated the many reasons that women stay in abusive relationships. There is almost never a single reason, but rather many reasons for each woman. The following list provides some of the most important reasons for staying that the women in this study shared.

- The women feared the abusers (i.e., they feared retributions including that they might be killed), such that staying seemed safer than leaving.
- There was an erosion of family support.
- The abuse was cyclical, i.e., a period of tension building might precede an incident which might then be followed by a period of remorse by the abuser along with efforts to make up.
- The women thought the abuser would change, and/or the women had made a commitment to being a family, and/or they stayed for the children.
- The abuse was financial, with the women uncertain about where to go, and included fear of becoming homeless.
- The women did not know how to leave safely.
- Escalation of the abuse was gradual, increasing over time and wearing the women down.
- Responses to requests for help, both formal and informal, were inadequate.

The women’s words best express their reasons for staying or for not leaving, and as will be evident in the quotes in the full report, the reasons for not leaving are multiple and complex and reflect the controlling nature of the abusers. The women’s words demonstrate their thinking and the difficult decisions they faced in regard to the safety and future for themselves and their children.

Reasons the Women Left: Many victims of domestic violence do escape abusive partners. The why and when vary based on each woman’s individual circumstances. Survivors spoke of cumulative, multiple factors that influenced their thinking about when to permanently flee from their partners. The tipping point or final straw for most of the survivors, if they identified such a moment, often occurred not around a life-threatening injury but during other moments, or feelings about the batterers and/or their situations. Two common themes emerged from their experiences: a) fear and a sense of danger and/or certainty that things had escalated to a point that someone would die soon, and b) concern for their children.

a) Fear and a sense of danger and/or certainty of dying: What stood out from these interviews was the depth of fear and death ideation these survivors recounted in conjunction with the verbal threats and abuse. Many of the survivors reported a time when they sensed their situation had changed and reached a point when they felt their partners would kill. As already stated, nearly all of the women reported that their partners threatened to kill them, and again, threats to kill have been recognized as a risk factor for lethality, and should be taken seriously.
“I knew it was time for me to, like, I knew I needed to leave because I knew it was going to escalate to, um, either me dying or him doing something very vicious to one of my children.”

Gwen, a survivor

All but one woman was in ‘severe’ or ‘extreme’ danger. As described in the Methods section, the investigators completed the Danger Assessment instrument for each woman after the interview. Based on the investigators’ scores, all the women were at some level of danger. While the investigators strongly believe that the scores underestimate the danger the women were in, they found that all but one woman scored in the range of ‘severe’ or ‘extreme’ danger.

b) Concern for their children: Some survivors described concerns for their children as a tipping point for leaving. All the participants who were mothers spoke of the toll domestic violence took on their children, and how their love and concern for their children was a strong motivational factor in making the dangerous attempt to leave for good.

Even when many of the survivors left their partners, the abusers continued stalking, threatening and terrorizing them. Domestic violence does not end when a victim leaves her partner; in fact the danger and violence typically escalates at that point. The belief that if a woman would ‘just leave’ the violence would stop is both simplistic and inaccurate, and perpetuates the myth that victims, not abusers, control the abuse. This is not to say that service providers and helping systems should not focus on helping battered women get out and stay out of abusive relationships, but to emphasize that leaving a batterer is only one step in achieving and sustaining safety for battered women and their children, and it must be achieved carefully with detailed safety planning and support.
Consideration of a New Conceptualization of ‘Near Fatality’

Rather than the typical medical and/or legal definitions, the researchers decided to use self-identification as the definition of ‘near fatality’ in this study. That is, survivors who believed that they were nearly killed by their intimate partners were included in this study. Limitations of the medical and/or legal definitions of near fatality for research and case reviews are discussed in the full report. Although a new definition of ‘near fatality’ is not being proposed here, the researchers do recommend broadening the definition to better fit survivors’ perceptions and experiences of danger and fear. Whether engaging in case reviews or research, professionals should use a framework for defining near fatalities that incorporates survivors’ perceptions of their risk of being killed by their intimate partners. This expansion has the potential to promote improved identification and intervention in cases where women and their children are at high risk of serious injury or death.

Several factors might be considered in addition to the medical-legal criteria for defining near fatality: batterers’ expressed threats to kill, death ideation, and measures taken for safety.

Expressed Threats to Kill: Abusers threats to kill are an established risk factor. It is worth repeating that all 11 participants reported that their partners threatened to kill them, and most were threatened frequently. Survivors reported they disclosed these threats to helping professionals. Furthermore, they described these threats to the researchers as central, important facets of their fear and certainty that their partners would kill them.

Death Ideation and Sense of Fear and/or Certainty around Dying: All 11 survivors expressed ideation around death and dying, and specifically that the abusers would kill them. Several women even mentioned how the news article of their murders might read.

Many of the survivors even had thoughts about how the batterer would kill them. These women felt a deep certainty about their partners’ abilities to murder them and that they were very close to death.

Measures Taken For Safety: The survivors in this study were, and continue to be, so fearful and certain they could be murdered, they have taken extraordinary steps to enhance their safety and keep their physical whereabouts confidential. For most, their physical safety has come at great economic and/or emotional costs. As discussed elsewhere, all of the women are currently in the Address Confidentiality Program. All the survivors took enormous risks and losses to be able to escape and stay hidden from the batterers. These actions are beyond difficult or disruptive to daily living; they are monumental barriers and stressors for these women and their families, often resulting in poverty, debt, housing instability and frequent moves to shelters or other temporary housing.
In sum, several issues arose with using the medical and/or legal definitions which prompted a reframing of near fatality for this study.

- First, even though most of the survivors did not disclose a life threatening injury, all were at significantly increased risk of injury or death based on their experiences and the investigators’ analyses of scores on the Danger Assessment. The women’s scores compared similarly with the scores of attempted femicides in the study conducted by Campbell et al. Yet, the survivors in this study would have been excluded from sharing their experiences and insights if we had continued to rely on a strictly medical-legal definition of near fatality.

- The second issue arose from the fact that the survivors self-identified as near fatalities during recruitment and during the interviews, even though post-interview their disclosed experiences did not always meet the strict medical-legal definition of a near fatality. Interviewers discussed the importance of survivors’ perceptions of their proximity to death/dying. By not incorporating victims’ perceptions of when they feel close to being killed into a definition of what constitutes a near fatality, negates the knowledge and experiences of victims.

- Lastly, ethical concerns for the well-being of survivors have led researchers to use medical-legal sources for recruitment or studies, which then further supports recommendations and policy/programming that may not fully take into account the experiences of survivors who were nearly killed by their intimate partner. In addition to safety, members of the Institutional Review Board, and researchers and advocates of this study worried that talking to survivors of near fatalities about the past might cause re-evocation of trauma symptoms such as flashbacks, nightmares, recurrence of depression or suicidal thoughts. This project demonstrates that researchers can take effective measures to protect the safety, confidentiality and well-being of survivors of near fatalities while still recruiting and partnering directly with survivors and direct service programs.

Thus, the researchers of this study chose to modify the definition of near fatality. Participants, who self-identified as survivors of near fatalities: a) demonstrated similarities to the attempted femicide survivors in the Campbell et al. study, b) reported experiencing risk factors consistent with other survivors at high risk of or experiencing near fatal assaults, and c) scored at increased, severe or extreme risk of lethality on the Danger Assessment. Broadening the medical-legal definition typically used for research and case review holds potential for more insightful, victim-centered findings, policy and service improvements for a broader array of survivors and their families, and more effective programs and services aimed at assisting and protecting victims of domestic violence.


14 One protective resource the researchers found helpful was to obtain a Certificate of Confidentiality through the National Institutes of Health. For more information, refer to the following brief: Rovi, S. and Olson, E. “Obtaining an NIH Certificate of Confidentiality to Protect the Identities of Research Participants.” Violence and Victims. 2009; 24:3 414-416
ASKING FOR HELP

The Survivors’ Experiences and Recommendations

All of the women in this study asked for help in trying to leave the abusers. Not all responses were lacking and many were helpful, but for abused women, even one negative response can keep her from asking again. Frequently feeling isolated, fearing injury or death, battered physically and emotionally and with low self-esteem, it is a tribute to these women that they found the strength to persevere. Each sought help in different ways and from different sources including looking to families and friends, calling the police, getting a restraining order and seeking refuge in shelters. It is also a tribute to those who did respond to these women’s needs and helped them get away from the abusers.

For contextual reasons, the researchers provide two overarching issues that were integral to the women’s experiences in asking for help: 1) the challenges of diversity and 2) jurisdictional concerns.

The Challenges of Diversity
New Jersey is a diverse state. Cultural, racial/ethnic and socio-economic differences exist among its population of nearly 9 million residents that reside in localities that range from rural to urban. New Jersey has 21 counties that contain over 500 incorporated municipalities. Within these many municipalities and counties, services and resources differ for victims and perpetrators of domestic violence. The diversity of New Jersey is reflected in the diversity of domestic violence victims, their experiences and their needs. The 11 participants in this study reflect New Jersey’s diversity. The cultural, racial and ethnic backgrounds of participants can affect not only the needs of the women but also the responses from the various helping agents and may explain the women’s different experiences. However, it was beyond the scope of this pilot study to investigate how culture, race and ethnicity related to the actions or lack of actions by the various systems and communities. The researchers found that just as all victims are not alike, the systems and communities that the study participants/survivors reached out to for help are not all alike. Our diversity then presents challenges to the state and its communities to meet the diverse needs of victims appropriately and with sensitivity.

Jurisdictional Concerns
Jurisdictional issues were problematic for most of the women in our study. The women told of difficulties in reporting incidents of abuse and restraining order violations to police and in getting social services when they crossed state or county lines. Several women were told by law enforcement in New Jersey and neighboring states that the police could not take a report of a domestic violence incident that took place in another state because it was “out of their jurisdiction.” And some women were told by police to wait until something happens in their jurisdiction, which for these women meant, “wait until he kills you.” Social service agencies also proved problematic by cutting off benefits when some survivors, often for safety reasons, moved across county lines. An important exception was the shelter system: no women reported refusals of services from domestic violence shelter programs because they crossed county or state lines. Jurisdictional issues are among the many barriers for victims of domestic violence to get help and live more safely. These issues need to be addressed by state and local agencies in a way that provides coordinated services for victims and their families.
Survivors’ Recommendations (Selection from the full report)
A note on Survivor Recommendations: A selection of recommendations from the survivors appears in the Executive Summary, whereas, the Full Report has a more thorough compilation of survivors’ recommendations which are followed when needed by an elaboration by the authors of the report.

- In an effort to enhance victim safety, enable victims to obtain or maintain services when they cross county lines or relocate to another state.

- Enable victims to cross county lines to file police reports and to have their cases heard in a new venue when “there’s been a political tie or governmental tie or police department tie.”
Asking for Help: Family and Friends

Some families were supportive. Some of the women’s families provided important support. Six of the 11 women mentioned their mothers as particularly supportive, often by providing a place to stay and childcare. These sources of support are provided everyday to victims trying to get away from abusers temporarily or permanently. One woman acknowledged that she had a “wide support system” but she also said that she was not “ready to walk away” from the abuser. Leaving is a process which includes the women thinking the abuser will change and that she can help him. This can be frustrating for families and friends who think the answer is simply to leave the abuser.

Some families were not supportive. Not all of the women were fortunate to have the support of their families. For several women, the abuser threatened to kill the victim’s mother, and so even family members were fearful of the abusers.

Some women were isolated from their families. Several women had little or no family to rely on for various reasons including that they were immigrants and their families were in other countries, and/or the abuser had isolated the woman from her family and friends. Some family members were frustrated because they could not understand why the woman could not just leave the abuser. One participant’s sister could not understand how the survivor stayed in an abusive relationship and she in turn, refused to take her in.

Few friends provided help. Very few women mentioned friends or neighbors who might have listened and provided some help. Typically, most people do not want to get involved and often do not know how to help. Several women mentioned that they were too embarrassed or ashamed to tell friends or family members. A notable exception was a co-worker who provided information about the Employee Assistance Program to one survivor interviewed. In so doing, this co-worker may well have helped save the survivor’s life and/or helped get her out of the abusive relationship.

Families had histories of domestic violence. Five women mentioned family histories of abuse in which they witnessed their mothers being battered. However, they also related how the abuse was not talked about within the family. Consequently some women did not know what a non-abusive relationship would be like and/or how to get out of the abusive relationship they were in. Living in families where there is domestic violence and witnessing abuse can result in social learning that abusive relationships are normal.

Familial collusion was a significant problem for many of the women. Six women mentioned that the abuser’s family knew about the violence. Four of these women told how family members colluded to keep the abuse quiet, to keep the victim from reporting the abuse, and to keep the abuser out of jail. One woman described how the abuser’s family colluded in a doctor’s office when the abuser hurt her child and his family created a story about how the injury occurred. This survivor told the interviewers:

“My family knew. … I believe they were waiting for him to kill me. … She (her sister) was telling me just to leave, but it wasn’t that easy. … I even asked her if I could come and stay with her for a couple of days and she made every excuse in the world.” Megan, a survivor

“Even though I had family members that been through it, it was like a secret. Why is it a secret?” Barbara, a survivor
“They cover for each other…they clean each others’ messes up. So I’m thinking she’s helping. She’s perpetuating the cycle.”

Similarly, another survivor’s mother-in-law not only bailed the abuser out of jail when he was arrested for domestic violence offenses and restraining order violations, but his mother also would ‘baby-sit’ the survivor when the abuser was on a ‘binge’. In addition, the mother-in-law would come when the survivor was too badly beaten to care for the children, which was an effective method for keeping the victim home, preventing her from obtaining medical care, telling anyone about the abuse, and especially from calling the police.

Sadly, the participants in this study demonstrated what is fairly well known now, that families often perpetuate the cycle of violence, and that abusive relationships are often learned.

**Survivors’ Recommendations** *(Selection from the full report)*

- Education about the dynamics of domestic violence is needed for families and friends of victims.
- Public education about domestic violence is needed and should be provided at more public places and events.
Asking for Help: Law Enforcement and the Judicial System

According to the New Jersey State Police’s 2008 Uniform Crime Report, 71,613 domestic violence offenses were reported throughout the state, which on average is over 200 reports a day. As first responders to the scenes of domestic violence incidents, law enforcement officers have an important role in the protection of victims. They are the gatekeepers of the law enforcement and judicial systems’ responses to acts of domestic violence. Informed, compassionate and helpful responses by the police can mean that victims have access to the resources provided by law through these systems.

Of the 11 women interviewed for this project, all but one woman called the police for help because they were being abused by a current or former intimate partner. Some women contacted the police many times over the course of weeks, months or years. The women called during or after assaults and to report restraining order violations by the abusers. When these 10 women were asked if police responses were helpful or not, most provided instances in which the police actions were appropriate, but all related incidents in which they felt the police failed to protect them or could have done more to help them. Throughout the interviews, the police responses differed within police departments and within counties as did law enforcement and the judicial systems’ responses generally.

“Some of them (police) were just more compassionate and more sympathetic to the situation, more understanding. They seemed to be more educated on the background of domestic violence and why it’s not as easy to leave, and then you had police officers that just were, ‘why do you stay’. They just didn’t care. …if you’re looking to make progress, the police really need to be educated.”

Carolyn, a survivor

Helpful experiences with law enforcement

Of the 10 women who called the police for help, each called 9-1-1 at least once. Several women used the strategy of secretly dialing 9-1-1 during an assault by the abusive intimate partner, and leaving the line open so the police could respond to the location. One woman related, “I just dialed 9-1-1 and I hung it up, I didn’t speak to anybody. Then the knock came, the cops came.” Notably, there were no complaints from the women about their calls to 9-1-1.

Some women commended the police responses to their calls for help. One survivor called 9-1-1 during an assault. She told us that police found her on the floor of her home beaten and semi-conscious:

Although they got some things wrong, I hold them in high regard. Number one: I remember when the officers finally came, and there were so many of them, I swear it was like a swarm of bees when they came in the house the first time.

They arrested the abuser, and despite the physical state of the victim, he was released later that same day. Significantly, the interviewers did not hear from any of the survivors of an instance when the police failed to respond to their calls for help. Unfortunately, the responses did not

---

15 “Reports” in the New Jersey State Police’s Uniform Crime Reports are not the same as the number of calls for assistance received locally. The actual number of calls for police assistance is likely many times the number of reports that are officially recorded.
16 One woman was too fearful of what the abuser would do to her and her family if she called the police.
often meet the women’s expectations, and it is hoped that this report will prompt more dialogue of how victim’s needs might be better met.

**Less helpful experiences with law enforcement**

For victims of domestic violence, the police are often the first call for help as a number of the women made apparent during the interviews. They were putting their trust in the police to help them from being beaten, terrorized, harassed, stalked and/or possibly killed by current or former intimate partners.

Several women related incidents in which the police left without making an arrest or even escorting the abuser off the premises. In one incident, the victim called the police after the abuser had threatened to kill her and was about to hit her in the head with a phone. She explained what happened the “first time the police came”:

> He had me over a desk and my head was gonna get cracked open. …I do look back and say how could you have walked into that house and allowed me to say ‘No, no, everything’s okay’ when you could see everything was not okay. … I had to think that they knew there was something wrong there.

According to the victim, the room was a mess and she had bruises on her arms; the police officers did not separate her from the abuser and they left without doing anything. The victim spent the night at a nearby relative’s home.

**Victim’s perceptions of why the police did not arrest the abusers**

While relating their experiences with the police responding to their calls for help, the women also gave their perceptions of why the police did not arrest the abusers.

**a) The women felt silenced when the police did not separate them from the abusers.**

Most of the women told of instances in which the responding police officers did not separate them from the abusers. Women’s fear of retribution by the abuser, and the abuser’s threats to kill her and her children, were powerful disincentives to tell the police what happened, even if seemingly given the opportunity to do so. The dynamics of domestic violence include coercive control through fear, intimidation and isolation, such that women were effectively silenced by the abusers.

> “The police came, and um, I told them everything’s alright, we’re just arguing about something of the kids, and I had to, ‘cause he’s standing right there.” Alice, a survivor

**b) The women felt they were not believed and/or they were not taken seriously.**

Even when women did tell the responding police officers what happened, they were not always believed or they were not taken seriously. One victim told the interviewers of how she felt when the police did not believe her: “It’s the worst thing to not be believed. I can’t even explain it ‘cause you’re so needing help so bad.” Another victim who was severely beaten by her husband said,

> I never trusted that an officer would help me ‘cause I don’t think they really see domestic violence as a serious crime. You know, breaking into a car is a serious matter, but you smack your wife or kids around, she might have done something. I still think it exists, I really do.

In fact, most of the women spoke about the problem of not being believed by the police and others throughout law enforcement and the judicial systems.
c) **Victims with no visible physical injuries were less likely to be helped.**

Among the reasons that the police and others may not have believed the women at times is the prevailing belief that domestic violence is about physical abuse and the victim should have visible injuries. One survivor suffered from her boyfriend’s coercive control that included threats to kill, jealousy, possessiveness, isolation from others, as well as physical abuse. She said she called the police in one town at least five times and related the following:

> He [the abuser] told me that if I leave him he would kill me. We actually moved. He wanted me away from my people. … when the police would come out, they really didn’t believe what I was saying because I wasn’t physically hurt. Emotionally I was tore up, but they didn’t see any physical signs of me being beat. I thought that right there was something that the police should have looked into a little more. ‘Cause they’ve seen me, I was shaking, I couldn’t stop running to the bathroom, and they wanted me to stay still but I couldn’t. But they just, they left. They didn’t even try to look into the situation anymore. They just, they just left.

Abuse can be physical, and also invisible, because batterers know how to ensure the abuse will not be seen. Non-physical forms of abuse can be as coercive and controlling as physical abuse. Police officers are instructed to interpret the statutory language of ‘signs of injury’ liberally and to make a mandatory arrest just as if visible signs of injury were present. Yet, arrests did not seem to happen in most of the incidents in which the police were called according to the women interviewed.

d) **The women believed the police became frustrated over time, and lost sympathy.**

A number of the women expressed their frustrations with the police response because they wanted the police to do more to protect them from the abusers. One victim said, “I feel they just didn’t care anymore, and they were just like, oh well.” Another described her feelings about the police response:

> I was tired. If someone cared or knew enough or just created a space like you said, it would have been enough to say, yeah, he did this. You know, and I think that was part of the problem with the police, the first couple of incidents they created that space so I could talk to them but later on I remember one officer said to me, ‘How many times are you gonna keep doing this?”

When victims contact the police for help, police officers should remain open to victims disclosing to them regardless if it is the first time they are responding or subsequently and they have responded multiple times and the abuse has escalated. Sadly, the investigators heard these women conclude that the police “enabled him to continue to terrify me” and that it was “useless to call the police.”

**Charges (or the lack of charges) for domestic violence offenses**

During the interviews, the women told of numerous domestic violence offenses against them by the abusers. About half of the men were taken away from the scene by the police, and some men were arrested and charged with an offense. Most men returned home the same day. Nearly all of the women expressed their wishes that the police had investigated more and done more sooner. One survivor complained about the lack of penalties despite that she had experienced years of abuse and repeated calls for help to the police:

> I was disappointed in the police, the police are the ones there, if they would’ve been stronger with what they would charged him with, and been more firm with him it could have stopped it earlier, that’s key, that’s so crucial for police to really make a strong penalty the first time they
ever see marks on somebody, and put some fear in to ‘em so they don’t do it again. … I look back, I think they just didn’t care about me, they didn’t because how could there be that many [reports] and he never went away for long, he should have been in prison.

Despite the advice: **if you are in danger, call the police**, in many instances, the victims of domestic violence who were interviewed for this study, remained in danger after calling the police, and they felt they were not sufficiently helped by responding officers. At times, standard operating procedures were seemingly not followed or police did not appear to sufficiently investigate the circumstances or provide appropriate advice to victims. It must be acknowledged that the women were not always able or ready to accept help offered often because of their fear of the abusers but also because the help may not have matched their needs. Understanding the dynamics of domestic violence could improve the police response to victims and better meet victims’ individual needs. Improved training in domestic violence and communication of procedures might have made a difference for these women and their families.

---

**A note on Domestic Violence Response Teams (DVRT)**

Among the services provided to victims of domestic violence in New Jersey is the opportunity to meet with a member of DVRT. Members are local citizens who respond to victims at police departments. Teams are trained and supervised by the local (county) domestic violence service program. The potential impact of these community-based teams is increased communication about the law enforcement procedures and options for victims of domestic violence. By 2009, DVRTs were operating in most police departments throughout the state. For the 10 women who sought help from the police, DVRTs may not have been active yet in their localities. DVRTs have an important role in offering assistance and information to victims at the local level, increasing services to victims and decreasing domestic violence in their communities. Appropriately provided, such help can improve victim safety.

---

**Less helpful experiences with the Court System and Judges**

Nearly all of the women had been in one or more courts throughout the state for domestic violence offenses committed against them, restraining order applications and violations by the abusers, divorce proceedings, spousal and/or child support, visitation applications by abusers who fathered children with the victims, and other legal matters. Many of these women had safety concerns with how the courts, and in particular judges, handled these legal matters.

**a) Abusers used the courts to further harass and control the victims.**

Several women voiced their concerns that the abusers used the legal system to continue to harass them while also putting the women at risk by being forced to repeatedly return to court and be confronted by the abusers. For these women, it seemed that no one saw the big picture or the pattern of abuse against them as well as the men’s abuse of the court system. The abusers were in control and not held accountable or deterred from continuing to harass the victims through the judicial systems. A more coordinated response might address this problem for some cases of domestic violence and better protect victims such as those interviewed for this study.

> “Somebody needs to put the pieces together. What’s going on in custody? What’s going on in this divorce? What’s going on in this domestic violence case and this domestic violence case? And what’s this charges on kidnapping, and then what’s this assault? If somebody could look at the whole thing, there’s a glaring picture. But municipal court doesn’t know what the county is doing. Family court doesn’t know what the criminal court does. So they see a snippet. They see he knocked you down in the driveway. Like, no, look at the other stuff that’s going on here. There’s a huge pattern.”

> Tess, a survivor
b) Risks in granting abusers visitation with the children of domestic violence victims

Of the women who had children with the abusers, six expressed their fears related to visitation of the children with the abusers. In particular, several women expressed concerns about the judges’ understanding of safety issues for themselves and the children. Court-ordered visitation can compromise the victim’s and children’s safety in several ways. Keeping in mind that the women continue to have restraining orders against the abusers, visitations must often be arranged in courthouses or police stations or other special county facilities. Yet, abusers can threaten and assault women in these seemingly safe locations, and the women feared going to them. Plus, visitation is always a threat to confidentiality because children are no match for the abusing parent who often uses manipulation and intimidation to garner information about the victim.

Overall, the victims often did not believe that judges and the legal profession on the whole understood their circumstances and domestic violence generally. Again, in cases of domestic violence, a more coordinated and comprehensive approach might truly be in the best interests of the children and their families.

Restraining Orders

Restraining orders are secured by victims of domestic violence to stop abusers from coming near them. Nine of the 11 women had restraining orders against the abusers. The survivors’ experiences with obtaining restraining orders were problematic for two safety related reasons.

a) Regrets about asking the judge to drop the restraining order

Judges have standard procedures to determine if a permanent restraining order should be approved or dropped which include questions put to the victim. Despite these standard procedures to try to ensure that the courts are responsive to victims, several women told the interviewers of their regrets about asking the judge to drop the restraining order. One survivor expressed her discomfort about the order being dropped: “I didn’t feel OK in my soul with dropping the restraining order, but I did it.” Another related how: “the judge was asking if you were getting pressured and I’m like ‘no’, and in my mind I’m like ‘yes’.” Both survivors continued to be harassed, assaulted and threatened by the abusers, and eventually they obtained permanent restraining orders and went into the Address Confidentiality Program.

Consideration should be given to how the women’s conflicted feelings about dropping the restraining orders might be better addressed. In particular, if victims better understand the law enforcement and judicial systems and the processes that affect them, they might be less conflicted about whether or not a restraining order is in their best interests. Based on what some of the women told us, victims could also benefit from greater availability and accessibility to advocates in courthouses.

b) When victims and abusers are not separated in the courthouse

Several of the women who went to the courthouse for restraining orders and other domestic violence related matters were confronted by the abusers in the courthouse. They were often in the same general holding area with the abusers while waiting to be heard by the judge. Even walking into the courthouse from the parking area provided another way for abusers to threaten, harass, intimidate and harm them. In fact, several women recounted how the abusers were able
to come up to them in the waiting area and then tried to speak to them or threatened them, even though it violated their restraining orders and courthouse police were present.

Courthouses in the state are designed and operated differently. Another survivor related that the courthouse where she went for her restraining order managed to keep the abuser away from her: “I don’t think they wanted us in the same place at the same time ‘cause they kept us separate.” Undoubtedly, this is a practice that all courthouses should adopt for the safety of victims of abuse and eventually this may be the norm. As with the police who respond to domestic violence calls, courthouse personnel should be trained in the dynamics of domestic violence and recognize victims’ fear of abusers, abusers’ ability to intimidate and threaten victims, and the very real risk that abusers will try to harm or kill the victim. Therefore, keeping victims and abusers separate and providing safe entrance and exit to courthouses is necessary.

Restraining Order Violations
Served with a restraining order, there are abusers who do stay away for fear of arrest and jail time and the impact it would have on their lives. To be clear, restraining orders can and do protect victims. However, of the nine women in this study who had restraining orders against their former intimate partners, all complained that the abusers violated the orders, often multiple times and in multiple ways, including breaking into their homes, driving up and down the women’s streets, calling the women, following or stalking them, and confronting and attacking them. The women further complained that when they reported a violation, by the time the police arrived, the abuser was gone and the police could not take any actions. Therefore the women had to be ever vigilant, ever fearful, as they attempted to live their lives, not knowing where or when the abuser might show up.

Moreover, the consequences for violating restraining orders were often inconsequential in these cases. Abusers who violate restraining orders are often charged with lower level offenses that are typically heard in municipal courts. One survivor related how several violations were combined, thereby enabling the abuser to get probation instead of jail:

_I have a problem with the prosecutor who said we’re gonna combine these two. He would have had two violations on the restraining order. He would have had three, but they combined the first two into one charge so he got probation. Basically, walked away again. This is what they allow. … how many women will have to die?_

The problem of enforcement of restraining orders for most of the women interviewed in this study was a major obstacle to their safety. While it is important to repeat that restraining orders can keep victims safer because many abusers do not violate these orders of protection out of fear of being arrested and jailed, the investigators are concerned about the number of abusers in this study who violated the orders and often without consequences according to the women, resulting in greater risk of harm to them and their children.

In sum, the investigators found that too often law enforcement and the judicial systems’ responses to these victims of domestic violence did not decrease their fears or risk of harm from the abusers. By taking into account the experiences and perceptions of these survivors,
members of law enforcement and the judicial systems may get a better understanding of, and appreciation for the reality of victims’ everyday lives. This in turn might lead to consideration of more helpful responses and advancement of a consistent statewide response to domestic violence offenses.

The authors recognize that domestic violence is among the many offenses reported to New Jersey’s law enforcement and adjudicated through its court systems. According to the 2008 New Jersey State Police’s annual Uniform Crime Report, the state’s total crime index was 227,177 of which 28,281 were violent crimes. In this report, we presented statistics for the state’s judiciaries which show that in 2008, over 6 million cases were heard in our municipal courts with over a million trial court filings in our superior court system, i.e., criminal, civil and family. To handle such a workload, considerable knowledge and expertise is required for those employed in New Jersey’s law enforcement and judicial systems. Therefore, the experiences and perceptions of the participants in this study and their recommendations must be understood with this larger backdrop in mind. It is important to remember that the law enforcement and the judicial systems meet the policing and legal demands of the state’s over 8 million residents.

The participants of this study were asked for their recommendations for changes and thus, the most egregious interactions might dominate the experiences they related to the researchers instead of the more positive ones. Plus, it deserves repeating here that this was a pilot study of 11 domestic violence survivors who were nearly killed by their intimate partners and their experiences with New Jersey’s law enforcement and judicial systems do not necessarily represent those of all domestic violence victims. Instead the experiences, perceptions and recommendations of these eleven survivors inform our understandings of victims’ needs, and especially those at high risk, and further the intent of this report, which is to improve our systems’ responses to all victims of domestic violence.

Survivors’ Recommendations (Selection from the full report)

Recommendations for the Police

- When police are called for a domestic violence incident, they need to provide information to victims and recognize that victims may not identify themselves as a victim or they may be ashamed to acknowledge their victimization.

- Police officers need more training to better respond to domestic violence calls. They should investigate more thoroughly by:
  a) Recognizing the victim’s fear of the abuser, and separate the victim from the abuser so that the victim may be less afraid and more likely to disclose the abuse.
  b) Remaining aware that domestic violence takes many forms and they need to investigate even if there are no bruises or obvious physical injuries.

- Police should charge abusers with the highest supportable offense in domestic violence cases.

- Ensure that police departments are utilizing Domestic Violence Response Teams.

---

Recommendations for the Courts, Judges, Prosecutors and Attorneys

- Three Survivors Recommended: Separate the victim and the abuser in courthouses, including areas inside and outside the courthouses, except during legal proceedings.

- Judges, prosecutors and attorneys need more education about domestic violence in order to see patterns of abuse which includes abusers’ use of the court system which enables them to continue to harass victims.

- Judges need to impose stronger penalties on domestic violence offenders.

- Judges need to learn more about domestic violence when making decisions about parental visitation by:
  a) Understanding the problems with visitation rights for abusers, especially the safety concerns for victims and their children.
  b) Taking into account the past history of domestic violence when considering the father’s request for visitation.
  c) Listening to children in order to do a better analysis of what is in their best interests when making visitation decisions.

- Prosecutors should not combine charges for multiple violations of restraining orders since this often results in reductions of penalties.

- Prosecutors should request substantial bail and appropriate sentencing for abusers.
Asking for Help: Domestic Violence Service Programs/Shelters

Throughout the country, every day of the year, domestic violence service programs are helping victims, their families and communities. All 21 New Jersey counties have at least one Domestic Violence Service Program that provides the following core services:

- Emergency response through 24 hour hotlines and shelters
- Advocacy (e.g., legal, financial and housing)
- Counseling for victims and children (i.e., individual, group and family)
- Children’s services (e.g., recreation/childcare, education support)
- Community networking and education

These services are provided to those living in shelters (or temporary housing) or transitional housing as well as non-residential victims and others.

All 11 women interviewed for this project reached out to one or more of New Jersey’s Domestic Violence Service Programs. Most of the women (8 of 11) were sheltered in at least eight different county programs, with four women staying in more than one shelter. Some stayed for a few days, and others stayed several months or longer. Four women brought their children into the shelters. At least one woman sought refuge in a homeless shelter because she could not initially get into one of the domestic violence shelters. Three women did not go into shelters, however they used the non-residential services of the domestic violence service programs. One woman who sought shelter with her young children said during the interview:

I thank God I went there. ..if it weren’t for them I don’t know what would have happened to me because at that point I had no mind. The abuse was going on pretty much heavy every weekend.

Shelters serve a critical need for victims seeking refuge from abusers. In 2008, the number of women and children sheltered in New Jersey was 1,550 and 1,836 respectively, or a total of 3,386. Unfortunately, almost the same number of women and children that were provided shelter were turned away from shelter (3,364) because of lack of space.

As was requested by the interviewers, the women who participated in this study recounted both helpful and unhelpful experiences in their quest for safety from abusive men.

Helpful experiences

Of the most helpful experiences the women recounted was feeling safe from the abusers, which is the priority of the programs/shelters. Once safely housed, most of the women and children seeking refuge were provided with living space, food and the basic necessities, as well as counseling that included the following depending on the needs and goals of the women: “empowerment, support, education, options, advocacy/referral and safety planning.” Throughout the interviews, the women related numerous examples of the various advocacy services provided to them. These included but were not limited to the following assistance:

---


19 This is roughly double the number turned away in 2007 and 2006 (1,793 and 1,594 women and children respectively) which probably reflects the economic crisis, and therefore may represent a trend for concern in 2009 and 2010. The numbers sheltered in 2007 and 2006 were 3,270 and 3,623 respectively, which indicates that for these 3 years (2006-2008), approximately the same numbers of women and children were sheltered annually.

20 Programs offer additional support and referral services that the survivors may not have mentioned during the interviews.
Several women described the shelters as “homes” and the staff and other residents as “family” where the women and their children could live in a safe and healing environment in which they could begin to re-make a life for themselves. Of utmost importance in the experiences the women had with the programs/shelters was to feel safe and to have the time to regroup. All the other types of assistance, although also vital, were in addition to these overarching needs.

**Less helpful experiences**

Less helpful were experiences that included the inability of three of the eight women to get into shelter when they tried to, although they did eventually get into shelters. The lack of access to shelter was because of lack of availability or lack of help accessing available shelter which was sometimes in a different county from the one the women were in at the time. Also several women left shelters or complained about their stays because of needing to adapt to communal living and shelter rules; and two women even likened the shelters to “prisons”. A few women remarked that shelter staff lacked compassion and were judgmental. And, some shelters were unable to meet the needs for counseling or advocacy for reasons that included lack of funding and/or an inability to individualize services or referrals that were less typical of most shelter residents in the community served.

Some women complained about the lack of or inadequate counseling for themselves or their children. Since counseling is a core service of programs/shelters, the investigators considered several reasons for this anomaly that emerged from scrutinizing the interviews.

- Staff is trained to provide crisis counseling which is not always recognized as such and is distinguished from the more intensive therapeutic counseling, with the latter not usually available on-site, often because of budgetary limitations.
- On-site counseling is often on-going throughout the day and can include advocacy on a variety of topics, and again may not always be recognized as such.
- Non-residential group counseling, which at least two women received, was considered very helpful. Group counseling sessions are scheduled and agendas may be provided to participants.

At the time the survivors were in shelters, counseling for children may not have been as readily available at most shelters as it is today because of the introduction of a special program: Peace:

“They made it seem as if you were home. This is your home. This is your safe haven, this is somewhere you don’t have to worry about anyone finding you….If you needed to talk, no matter what time it was, day or night, somebody was there to talk to you….I mean, it was just a place where you can go and just sort out everything, you know, just be at ease, and get your life together.” Megan, a survivor
A Learned Solution (PALS). PALS is an evidence-based nationally recognized therapeutic program that provides counseling for children who have witnessed domestic violence.

Last, the experiences of the survivors suggested a great need for legal services but also a shortage of such services being provided by the programs, especially pro bono attorneys and court advocates/accompaniments. Only a few programs have pro bono attorneys available for women who qualify for their services. At least five women told interviewers that they had to hire attorneys at considerable costs, possibly because the program did not have a pro bono attorney or they did not qualify for one. Court advocates or court accompaniments can assist victims by providing emotional and legal support such as help in understanding the legal processes and discussions of options available to domestic violence victims.

Not all shelters are alike
As evident from the contradictory experiences of the women outlined above and described in more detail in the full report, it must be acknowledged that not all shelters are alike. Four women stayed in more than one shelter and their comparisons of the shelters highlight the differences. Two women referred to a shelter they stayed in as “home” compared to another shelter they stayed in which they described as a “prison”. Here is how one woman contrasted two shelters:

_The one in [home town], I didn’t care for. It was s’more like a dormitory. You know, you go in there and you feel like, it’s a women’s dormitory, but you’re in prison, you’re in solitaire [sic] or something. It was scary. It’s very scary there. Also, been to the one in [another town]. That one’s like home. The one’s that are more like home is where you’ll get more progress._

There are many reasons that explain differences among programs/shelters throughout the state:

- Funding of programs/shelters differ from county to county and from year to year.
- Some programs/shelters have more capacity to research and apply for funds, thereby enhancing their program’s ability to secure funding and provide services.
- Programs/shelters may be located in communities that have better resources, providing not only additional financial support but also a volunteer base to assist with the direct services for victims and others.
- Most shelters were not built for the purpose of sheltering victims and their families. Some were previously private homes and some are within institutions or government buildings.
- Program/shelter staff has a high turnover rate due to low pay and burn out.

These variations and others among programs/shelters can explain why some women who were interviewed for this project reported differences which resulted in the authors’ conclusion that not all shelters are alike. Such variations can positively and negatively affect victims’ options when they are trying to safely leave an abusive relationship.

The survivors’ experiences and recommendations demonstrate that there could be improvements in services.
Domestic violence service programs are called upon to provide not only immediate and transitional housing, but a comprehensive program of direct services and advocacy to women and their children. In addition, the service programs also lead community training on domestic violence. Providing shelter, counseling and advocacy for victims requires significant expertise not only about domestic violence, but also the laws, policies and systems that impact survivors. The incredible work of program/shelter staff and volunteers goes on 24 hours a day, everyday.
The survivors’ experiences with programs/shelters demonstrate victims’ needs for services that can best ensure their safety and well-being. Programs and their staff should be commended in their efforts to meet the complex and multiple needs of victims.

Program services cannot be addressed without recognizing the disparities in populations served as well as financial and community resources for each individual program, combined with the fact that domestic violence service programs/shelters have long been under-funded and/or funded in piecemeal fashion. Understanding the complexity of providing shelter, counseling and advocacy services is critical to developing recommendations for improving services to survivors and their families.\footnote{21}

The challenge for programs/shelters and other helping agents is to respond appropriately and effectively to the individual needs of victims. While victims share similar reasons for seeking help or shelter regardless of their different backgrounds, we are mindful that one’s racial/ethnic and socioeconomic backgrounds provide the lens through which a victim views her experiences and the responses to her needs and whether she is helped or not. However, as stated previously: it was beyond the scope of this pilot study to investigate how culture, race and ethnicity relate to the actions or lack of actions by the various systems and communities.

The women interviewed for this report were specifically asked for their recommendations for possible improvements, and therefore, negative experiences may appear to dominate their stories. Their experiences are recounted to improve a system that already meets the needs of thousands of victims annually. The full report best captures this important context of the women’s experiences and their resulting recommendations.

Survivors’ Recommendations (Selection from the full report)

- **Add more capacity to the existing shelter network for victims of domestic violence so that victims are not turned away or asked to return home.**

- **Improve access to domestic violence shelters for victims.**
  - a) In general, victims need more help locating available shelter.
  - b) Financial resources are needed to help victims find shelter, including help in making calls, and possibly with specially designed cell phones that call 9-1-1 and 800-shelter numbers or domestic violence hotlines that can make calls on behalf of victims.
  - c) Victims need transportation to shelters or money to get public transportation to shelters.
  - d) A more coordinated response is needed to meet the needs of victims seeking shelter.

\footnote{21 During the economic crisis, the authors acknowledge that shelters and domestic violence agencies across the country are suffering budget problems that impact on service provision for victims, families and communities. New Jersey’s county programs/shelters that are less well funded are likely experiencing even greater budget problems.}
Asking for Help: Health Care  “Nobody asked”

Every day in the U.S., health care providers miss opportunities to identify victims and provide intervention, referral and treatment. The physical and mental health consequences associated with domestic violence are well-documented, allowing for increased interactions between victims and health care providers. During the time of the interviews, nearly all of the survivors in this study recounted numerous encounters with health care providers during the abuse for routine visits for themselves and their children as well as for injuries and conditions related to the abuse they were experiencing. For example, most of the women had at least one child during their relationship with the abuser and therefore they saw providers before, during and after the birth of their children, including children’s visits to pediatricians. And three women told of hospital visits during their pregnancies for bleeding or potential complications resulting from beatings and/or repeated abuse. One woman told us: “I was in the hospital like 8 times during my pregnancy, did it not occur?” The women’s accounts repeatedly demonstrated missed opportunities for health care providers to identify victims of abuse and intervene for the well-being of the women and their children.

Most women were not asked about abuse. Despite the many opportunities for health care providers to inquire about abuse and perhaps intervene on behalf of these women, only one participant in this study said she was asked questions about domestic violence, and she was the only participant who said she disclosed her abuse in a health care setting. Rather, providers did not ask most of the women about abuse, and the women who sought help for injuries were just treated and released. Studies show that most women, including victims, support health care providers asking about domestic violence. Even so, victims are uncertain and fearful of disclosing their abuse to providers, even if asked, because they are ashamed or embarrassed, they fear it will get back to the abuser and he will retaliate, and uncertainty about how the provider will respond, among other reasons.

Women would not disclose the abuse out of fear of retaliation. While most of the women interviewed were not asked about abuse, some said they “lied” when providers inquired about an injury. When one woman was asked by her gynecologist about a bite from the abuser, she related,

_I actually lied to him, I told him I was out and I don’t know the person, it just happened, was in a wrong place. ‘Cause I was scared, I was scared._

The women would not disclose the abuse out of fear and safety concerns, and often because the abuser was in the exam room with the victim. One survivor was taken to the hospital by the abuser and she described what happened.

_No, he wouldn’t leave me, ‘cause he knew once they got me alone that I would open up... I definitely would have been scared. You know, I would have been very scared. ‘Cause he would always told me that ‘if I ever go to jail, for hurting you, I’m gonna get out and kill you’. And that plays with your psyche._
Several women told of assaults while pregnant. One survivor, who was pregnant at the time of one beating and was taken to the hospital emergency room by the abuser, told how she feared retribution if she did disclose or tell the truth so she said she fell off a chair.

The women were unsure what health care providers could do for them if they disclosed. Numerous studies have found that providers who routinely ask about abuse significantly increase the numbers of victims who will disclose. Health care settings that provide pamphlets or posters on domestic violence send the message to their patients that they are open and prepared to discuss abuse.

Children were also victims and some were injured by the abuser and needed medical attention. Two women shared their experiences with health care providers when their children were hurt by the abuser. Here again, there were missed opportunities for health care providers to help victims of domestic violence. One woman and the abuser took their toddler to the hospital for the second time, for a second serious and painful injury. The survivor felt that “there was beginning to be a trail” because there were two injuries to the same child who was taken to the same hospital. The survivor hoped that these incidents might be connected and investigated:

So we go to the emergency room because she is in pain, she is screaming, the doctors there say ‘what happened?’ You know, he [the abuser] is right there, they asked who was the daughter in care of and I said she was in his care. And that’s how I put it, let him explain himself.

According to the survivor, the health care providers (i.e., the emergency room physicians, nurses and staff) did not contact a social worker or child protective services, despite the mandate to report even the suspicion of abuse.

In this study, numerous health care providers evidently missed opportunities to ask victims about abuse and offer appropriate help and support.

Survivors’ Recommendations (Selection from the full report)

- Training of health care providers in domestic violence is needed.
- Health care providers should ask patients about domestic violence in confidence and separated from the abuser.
- Health care providers should have domestic violence informational and educational materials (e.g., brochures or cards) available and on display in their offices.
Mental Health

In addition to physical health problems, domestic violence can cause short and long term psychological, emotional and behavioral trauma for survivors and their children. Psychological and behavioral effects have been well established in the literature and include nightmares, flashbacks, anxiety, depression, suicidal ideation, substance abuse, and Post Traumatic Stress Disorder (PTSD). Mental health practitioners can play a significant role in identifying and intervening in abusive relationships.

Mental Health Services for Survivors
The participants in this study reported a variety of symptoms indicative of emotional and psychological trauma. Some survivors used counseling services available through the domestic violence service programs/shelters which is addressed in the Program/Shelter section of this report. Two survivors told interviewers about their experiences with private mental health practitioners. One saw several mental health practitioners, including a counselor, a social worker, and a psychiatrist. Although she did not initially begin counseling for domestic violence, she disclosed information that prompted the psychiatrist to ask if her husband was hurting her and suggested that the survivor consider getting her assets in order and contacting an attorney. The survivor recommended that it would be helpful if mental health practitioners would identify and address domestic violence with a patient if it sounds like the client is experiencing abuse:

So maybe that person sitting there saying ‘it was not OK that he did that to you, this is domestic violence’, you know, saying specific, calling it out for what it is.

Another survivor was diagnosed with PTSD and told interviewers that seeing a trauma specialist in concert with a psychiatrist “has been so much of a help.” This survivor was hospitalized for her PTSD as a result of the domestic violence. She explained that information on psychological abuse was helpful to her in terms of recognizing it as part of a pattern of the domestic violence she had experienced. She also stated that such information validates the real harm and pain caused by psychological abuse and reassures survivors that they are not “going crazy”.

Mental Health Services for Perpetrators
Mental health practitioners also see batterers, although not necessarily for domestic violence. Again these interactions offer opportunities to identify and address domestic violence. Five survivors stated that their partners were seen by a variety of mental health providers, including private psychiatrists and through substance abuse programs. The women echoed two similar issues: (1) batterers often began mental health treatment to appease the survivors and as a means to get them to stay, but rarely completed a program or stuck with individual therapy, and (2) the batterers did not disclose and/or hid their violence against their partners from their therapists. According to one survivor whose husband saw a private practice psychiatrist, “I don’t know what they’re teaching them [psychiatrists] in school, but he manipulated them very well.”

Most of the participants shared their experiences with the mental health system, either for themselves or for the abusers. Further insight and information from survivors and possibly from perpetrators would be helpful in evaluating how mental health service providers can best serve individuals and families experiencing domestic violence.

Survivors’ Recommendations (Selection from the full report)

– Mental health practitioners should identify and discuss domestic violence if patients talk about experiencing behaviors that encompass abuse.
Other Potential Sources of Help

In the State of New Jersey and its communities, there are numerous other potential sources of help for victims and perpetrators of domestic violence. Because of the limited scope of this pilot study, the interviewers did not specifically ask about any interactions the women may have had with all possible systems or sources of help. Even so, the openness of the interviews allowed the women to talk about what they felt helped or did not help them. Included among the other potential sources of help mentioned by the women were: a) faith communities, b) the educational system and c) immigration services. The women’s experiences with these sources are described in the full report.

In brief, these victims did not receive much if any help from these sources, and worse, they may have been harmed by the lack of help and/or the lack of understanding about domestic violence. For the most part, their experiences are similar to those with health care professionals and can best be summed up as ‘missed opportunities’ with the need for more education on domestic violence and training on how to intervene effectively.

Survivors’ Recommendations (Selection from the full report)

- Teach about healthy relationships in religious and educational institutions.
Survivors’ Experiences After Escape/Separation for the Abuser

The goal of this project was to hear about the experiences of women who were nearly killed by their intimate partners and to learn what actions and referrals were involved in increasing or decreasing their safety, with a primary focus on several systems: law enforcement and the judicial systems, the domestic violence service programs or shelter system and the health care system. However, the interviewers quickly realized that the realities of the women’s everyday lives, since separating from the abusers, were what the women also wanted to talk about; and that the women continue to have safety concerns. Indeed, the women remain very fearful of the abusers. The abuse continues to impact the wellbeing of the women and their children, including their emotional and physical health, and their financial status. In this section, we present some of the women’s experiences, but we support future in-depth inquiry into the survivors’ experiences after separation from the abusers.

Fear of abusers continue for the women
All of the women spoke of their continuing fear of the abusers. Several women described nightmares of the abuse or of the abuser finding them, and most spoke of needing to be hyper-vigilant.

Abuse continues: “A million battles”
Most of the participants in this study had to leave their homes, communities and jobs. They were usually forced to start over, often with few if any resources, or depleted resources because of legal and other debts. For these women, life after separation is a continuation of the fear and a continuation of the abuse, although often the abusers are now the systems they look to for assistance, such as state and community service agencies.

As described in the Methodology section, all of the participants in this study were recruited through the Address Confidentiality Program (ACP). ACP is a statewide program available to victims of domestic violence who continue to be at risk of further violence and who need to keep their home address confidential from the abuser. Through ACP, eligible victims of domestic violence are provided a substitute mailing address that allows them to receive mail while keeping their actual address confidential. All state and local government agencies are required to accept the substitute address. However, private agencies or companies are not required to accept the ACP address. Regardless if public or private entities, all ACP participants in this study reported problems with acceptance of their ACP address. One survivor we interviewed summed up best the experiences of the women with staff at public agencies and private companies who refused to accept the ACP address or failed to cooperate and even at times denigrated the women:

“I sometimes have nightmares that he’s in my hallway. … It’s amazing that it just never goes away, just thinking about it still gets you upset. And I wonder if that will ever go away.”
Tess, a Survivor

Examples of the “battles” the women experienced included:

- Public utilities, such as gas and electric, and telephone services appeared to be among the most mentioned because of problems the women had with acceptance of their ACP address.
- Public assistance staff challenged several women by demanding their actual address.
• The state unemployment program was mentioned as problematic; and the state disability program was mentioned as giving one woman the run-around. Even a state employment program with staff trained in domestic violence and the ACP, showed their lack of understanding and compassion. One survivor told interviewers,

*I told her my address has to be confidential, because of domestic violence. [She] had me wait to speak to the lady that deals with domestic violence, and when I spoke to her ... she said ‘if I’m able to move around, I’m not in any danger, I’m not fearful.’*

Private agencies and businesses are not required to accept the ACP address and therefore, participants reported having to do without services such as credit cards, bank accounts, insurance, and even employment.

And several of the women mentioned the problem of the Internet for their security. One participant visualized her address as *“floating out there.”* Personal information on the Internet and computer networks are major concerns for most of us because of identity theft, let alone for victims of abuse. Indeed, this is a lesson many of us are learning in the age of the Internet. One survivor remarked, *“Once it’s in the system, you cannot get it out of the system.”* However, for women who live with the threats of abusers, it is critical for their safety to protect their information and hence themselves.

Despite the risks, problems and hassles of the women being in ACP, for now, the New Jersey Address Confidentiality Program remains among the best ways for some victims of domestic violence to try to keep their location confidential from the abuser. However, as already evidenced in the discussion above, the women in this study had to deal with the continuing impact of the abuse.

**Continuing Impact of Abuse**

**Impact on emotional and physical health of women**
In most of the cases, the women have been out of the abusive relationships for more than a year, yet the emotional and physical impact continues to be evident. Most of the women remain traumatized and at least four women were on disability at the time of the interviews; and many bear the scars from the abuse. These are only some of the emotional and physical assaults on these women’s minds and bodies that may last a lifetime and especially without sufficient time and help for healing.

**Impact on emotional and physical health of children**
The women frequently mentioned the impact of the abuse on their children’s well-being. One survivor said *“I feel my kids lost their childhood.”* In the women’s efforts to keep themselves safe and protect their children, they often had to do without some of the experiences and possessions that other children take for granted. For example, when the women were forced to move, the children had to change schools, thereby potentially losing out educationally as well socially.

**Financial Impact**
There are nightmares that wake victims as described above and then there are the nightmares of everyday reality. One woman related that, *“When you leave the abuser, people think it’s over at that point, it’s just begun, it’s another nightmare.”* Most of the women left their homes with few of
their belongings to go into shelters or to stay with relatives or friends. Several of the women still had jobs and/or resources, but even so, they needed to take time off from work in order to hide from the abuser, and figure out how best to provide for themselves and their children. As already mentioned above, a number of the women had to hire attorneys or private detectives to deal with the courts, divorce proceedings, challenges for custody and other energy and financially draining legal matters.

**Public assistance**

Public assistance exists to help individuals and families through difficult times. For some people it is a last resort because of the stigmatization often associated with taking public assistance. Many abused women can find themselves financially destitute, needing to rely on handouts from the shelters and others. As single parents, they look to social services for assistance, often for the first time. The women in this study related their experiences in this regard.

- Of the women on public assistance, all said that it was insufficient to meet their needs. At the time of the interview, one survivor was receiving less than $500 per month for herself and her children. Another explained, “There’s not a great deal of help because it’s financially not enough to provide …there’s really no incentive because it’s not enough.” By saying there is “no incentive”, this survivor meant that there is often no incentive not to return to the abuser, because of lack of support, financial and otherwise, to care for herself and her children.

- Most of the women spoke of difficulty finding safe and affordable housing. Victims of domestic violence who leave their home because of the abuse need to find some place else to live temporarily at least. Even for women who go into domestic violence shelters, they eventually need to leave after a specified amount of time, which for some is 30 days. At that time, they must find their own place to live. A number of options exist to help the women with housing, although not all are viable options. Some women must return to their homes and to the abuser.

- Once separated from the abuser, and preparing to start a new life without the abuser, often as single parents, some women went through state and local employment programs. Recall from the overview of the women earlier in this report that most were employed prior to their relationships with the abusers. Two women related their experiences with the state’s employment services, which could not have been more different. One woman encountered a staff person who was “encouraging” and the other woman experienced staff who was abusive, uninformed and potentially discouraging.

**Child Care Issues**

At least half of the women had children of an age that required childcare that is safe and affordable for them to go to work or school. While this is a situation that many women and families face, for victims trying to reestablish homes for themselves and their children, childcare issues represent another way that abusers continue to negatively impact the women they abused and their children.

**Women’s Strengths Through Adversities**

Through the adversities, the women’s and children’s strengths and resiliency were still very evident. First and foremost, the women found the strength to leave the abuser, even when their futures were uncertain. Throughout the interviews, all of the women cried but almost all laughed.
and showed a sense of humor that was nothing short of amazing. While the women continue to fight “a million battles” to better themselves and their children, their statements throughout the interviews reflect their courage and commitment to a new and better life. For many, there came a turning point or a final straw when they realized they had to free themselves from the abuse and the abuser. One woman told interviewers,

“There’s a time where I got back my spirit and I started fighting back.”

Let us reiterate once again, because it is an important point about the research presented here. These women’s experiences are not likely generalizable to those of all domestic violence victims/survivors because it is a small select sample of women in a state program, the Address Confidentiality Program, who agreed to be interviewed by the researchers. In addition, they may differ from other victims/survivors because they sought help from law enforcement, the courts, the shelters, and/or public assistance programs. We applaud their tenacity in the experiences revealed here in which they had to repeatedly ask for help. Such daunting hurdles were jumped many times to free themselves from abusive men and they continue to fight for what they and their families need to live violence free.

Survivors’ Recommendations (Selection from the full report)

- More training is needed about the Address Confidentiality Program for any systems or individuals involved with domestic violence victims.
- Financial assistance for victims is needed to provide temporary subsistence and education and training for long-term self sufficiency.
- Remove victims’ information from public records for their protection.
- Make support services more readily available that can help a woman leave and not feel trapped in an abusive relationship.
- The State needs to recognize the actual costs of housing and provide sufficient funds for victims to rent housing in safe areas.
- Make leave time from work available for victims so they can take care of matters related to the abuse such as having to go to court.
CONCLUSIONS

The survivors of abusive and controlling intimate partners who were interviewed for this study shared their experiences, thoughts and needs with us. The investigators learned that too often, state and local public servants and professionals in legal, medical, religious, educational and community organizations, among others, failed to help the women who participated in this study.

We respectfully recognize and commend the help that the women did receive and that victims benefit from everyday throughout the state of New Jersey; however, the lack of responses, or inadequate or inappropriate responses to these women, may have put them and their children in greater danger from their abusive partners. Our goal is to improve the safety and welfare of domestic violence victims and their families and prevent domestic violence related murders. The following recommendations by the investigators emerged from listening to these 11 survivors who were nearly killed by their intimate partners.

**Investigators’ Recommendations**

- Research with survivors of near fatalities should consider including women who believed they were almost killed by an intimate partner but who do not fit the medical-legal definitions used thus far by other researchers.
- A coordinated response is needed for complex and high risk domestic violence cases.
- Professional training and public education about domestic violence are needed.

**Recommendations for Law Enforcement and the Judicial Systems**

- Standard operating procedures should be developed for the separation of abusers from victims in all venues.
- Survivor recommendations to hold domestic violence offenders accountable for each act of offending should be supported.
- Conduct research on the domestic violence offense of stalking in New Jersey and assess law enforcement and the judicial systems’ responses to it.
- Assess communication of information provided to victims about the processes throughout all aspects of law enforcement and the judicial systems for possible improvement.
- Assess police training and adherence to standard operating procedures for possible improvements.

**Recommendations for Domestic Violence Service Programs / Shelters**

- Greater support / funding is needed for New Jersey’s Domestic Violence Service Programs / Shelters.
- Assess Domestic Violence Service Programs for possible improvements.
Recommendations for Domestic Violence Response Teams (DVRTs)

- An expanded role for DVRTs should be considered after an assessment of their current activities in helping victims.

Recommendations for “After Survivors Escape”

- On-going safety planning is needed for victims and families after separation from the abusers.

Study limitations: All research studies have limitations. This study is a pilot research project of 11 survivors of domestic violence, recruited through the Address Confidentiality Program. Participants, all women, self-identified as near fatalities of intimate partner violence. Based on in depth interviews, the report presents the women’s experiences and perceptions as told to the interviewers. Strengths of the study include the focus on learning from the participating women about responses from various systems and individuals when the victims asked for help. The study demonstrates the importance for our understanding of unique experiences of each woman as well as similarities and differences among the women. In addition, the investigative team is multi-disciplinary which better ensured that the participants’ experiences and recommendations were related as accurately as possible and their meaning interpreted through multiple lenses. The research protocol is also a model for future research with survivors of domestic violence in which there was an emphasis on ensuring their safety and giving voice to their experiences.

In sum, the investigators hope that this report sheds light on what helped, what did not help, and what might help victims of domestic violence and their families. Victims do not choose to be abused, and we hope readers learned that women might stay in abusive relationships for reasons demonstrated throughout this report which include fear of retribution from the abusers, lack of options, and inadequate responses to their needs. In the future, let us make sure that each response to domestic violence victims helps them become survivors living violence free.

Some final words from the participants: By telling their stories, all of the women who participated in this study wanted to help other victims of domestic violence. One survivor said, “I was happy that I got out of it [the abusive relationship], and that I’m here and I can tell the story. You know, and anyone that I could help, I’m willing to help.” Many of the women stated that they plan to volunteer with the shelters that helped them or with the Domestic Violence Response Teams so that they can help other women. The reliving of their experiences for this study was not easy for the women and nearly all cried during the interviews, and some then apologized for being emotional. Here is what one survivor told us at the end of the interview:

Thank you for putting up with my emotional outbursts but like I said I haven’t gotten to the point where I can’t do that yet, I’m trying but I apologize, I really do for that, but like I said, I hope I gave you some information, I hope it helps in some way.

The investigators want to assure these brave women that their voices will be heard. We sincerely thank them for their help.
“Let me see tomorrow”

A report based on interviews with women who were nearly killed by their intimate partners

Purpose of Research Project

Our goal was to hear about the experiences of women who were nearly killed by their intimate partners and to learn what increased or decreased their safety. We also wanted to hear what these survivors would change in the way New Jersey and its communities respond to victims of domestic violence and their families.

The ultimate goal of the sponsor of this research, the New Jersey Domestic Violence Fatality and Near Fatality Review Board, is to save lives, reduce injuries and abuse by recommending changes in the way law enforcement, the legal and health care systems, domestic violence victim advocates and others respond to victims and perpetrators of domestic violence in New Jersey. These responses can be a matter of life or death.

Background

As in the world, the State of New Jersey is under the pall of economic crises that are straining budgets including those that impact the services and resources for victims of domestic violence and their families.

- In 2008, the New Jersey State Police (NJSP) reported 57 domestic violence murders, representing a 50% increase compared to the previous year.22
  - Of the 57 murders, four out of five or 45 were women.
- The NJSP further reported that there were 71,613 domestic violence offenses reported, of which 75% or 53,810 victims were women.
- Also in 2008, the New Jersey Coalition for Battered Women (NJCBW) reported that the number of women and children sheltered in New Jersey was 1,550 and 1,836 respectively, or a total of 3,386.23
  - Almost the same number of women and children that were provided shelter were turned away (3,364) because of lack of space. This is nearly double the number turned away in 2007 (1,793 women and children).

---

See the on-line report for additional crime statistics, methodology and limitations of UCR data.

Victims of domestic violence, who are mostly women and their children, are in need of state and community assistance. Helping agencies including law enforcement, the courts, domestic violence service programs and others are challenged to meet the diverse needs of victims. This report is designed to share the experiences of 11 New Jersey victims of domestic violence and their families in an effort to better meet their needs.

**Definitions of Domestic Violence and Intimate Partner Violence**

The definition of domestic violence is still not standardized and differs from state to state for legal matters. For researchers, advocates and others, domestic violence also differs in its conceptualization (i.e., meaning) and operationalization (i.e., measurement). The following is the legal definition of domestic violence according to New Jersey statutes and the Centers for Disease Control's classification of intimate partner violence, which is one type of domestic violence.

According to New Jersey statute, **“Domestic Violence”** means the occurrence of one or more of the following acts inflicted upon a person by an adult or an emancipated minor: 1) homicide, 2) assault, 3) terroristic threats, 4) kidnapping, 5) criminal restraint, 6) false imprisonment, 7) sexual assault, 8) criminal sexual contact, 9) lewdness, 10) criminal mischief, 11) burglary, 12) criminal trespass, 13) harassment and 14) stalking. As defined by NJSA 2C:25-79d, a “**victim of domestic violence**” includes any person who is 18 years of age or older or who is an emancipated minor and who has been subjected to domestic violence by a spouse, former spouse, or any other person who is a present or former household member. "Victim of domestic violence" also includes any person, regardless of age, who has been subjected to domestic violence by a person with whom the victim has a child in common, or with whom the victim anticipates having a child in common, if one of the parties is pregnant. "Victim of domestic violence" also includes any person who has been subjected to domestic violence by a person with whom the victim has had a dating relationship.

**“Intimate Partner Violence”** is one form of domestic violence. The Centers for Disease Control (CDC) describe four main types of intimate partner violence: physical violence, sexual violence, threats of physical or sexual violence, and psychological/emotional violence. Financial abuse is a form included with psychological/emotional violence.

The problem with the legal definition of domestic violence is that emotional, psychological and financial abuses are not recognized as criminal behaviors in most states including New Jersey. However, all types of abuse are considered to be coercive, negatively impacting victims’ lives and sometimes leading to their deaths. As described by Evan Stark (2007), while “assault is an essential tactic” used by abusers, “three equally essential tactics are intimidation, isolation and control,” with the key dynamic of “coercive control” being subordination. Non-physical coercive control can be as devastating as physical abuse and it demands our attention.

For this report, the term domestic violence is used most often, although all cases discussed here represent intimate partner violence. Plus, although we acknowledge the legal

---


definition of domestic violence in New Jersey, the experiences related in this report include all forms of coercive control used by the perpetrators against the victims.

**Domestic Violence Fatality Review**

Domestic violence fatality review is a national initiative that began in the early 1990s to investigate the deaths of women murdered by their intimate partners, i.e., husbands, boyfriends, ex-husbands, and ex-boyfriends. Review teams or boards have been established in most states, including New Jersey. Similar to medical morbidity and mortality reviews and child fatality reviews, domestic violence fatality reviews are intended to prevent future deaths through a retrospective review of the circumstances prior to the fatalities. Domestic violence fatality reviews are not about blaming individuals or systems but involves finding gaps in service provision. Based on reviews, recommendations are made for systems and policy changes.28

The New Jersey Domestic Violence Fatality Review Board was created in 2000 by Executive Order (No. 110). The Board’s purpose is to identify and understand the circumstances surrounding fatal acts of domestic violence in the state of New Jersey. In 2004, New Jersey Domestic Violence Fatality Review Board’s scope, purpose and membership were expanded under N.J.S.A. 52-27D-43.17 and it was permanently established as the New Jersey Domestic Violence Fatality and Near Fatality Review Board. The purpose of the Board is to study domestic violence related fatalities and near fatalities in an effort to understand and prevent such deaths in the state of New Jersey through systems changes, education and public policy. According to legislation, the Board is comprised of twenty-one (21) members from public and private agencies. In addition, the Board’s review of domestic violence fatalities and near fatalities has been enhanced by research and data analysis.29

**Research on Domestic Violence Fatalities / “Femicides”**

As with fatality review boards, research has focused primarily on domestic violence related homicides and homicide-suicides in order to describe victims and perpetrators but also to identify risk factors that precede these deaths. For example, the most common risk factor is prior intimate partner violence. Among the most prominent researchers in this area is Jacquelyn Campbell, PhD, who is an expert on “femicide” and its risk factors. The term “femicide” is often used because most domestic violence victims are women who are killed by male intimate partners. In the 1980s, Campbell began development of a tool to assess the danger or risk of femicide. This tool was to help health care providers, law enforcement and domestic violence advocates identify the level of danger for women in abusive relationships. See Appendix A for the current version of the Danger Assessment instrument and the risk factors being assessed.

In the last two decades, studies using the Danger Assessment and other instruments have begun to hone in on the most significant risk factors for femicide. In a multisite study in 11 cities, Campbell et al. compared 220 cases of domestic violence related fatalities with 343 cases of abused survivors, i.e., as a control group.30 Cases for the former or femicides were

---


identified through law enforcement reports and medical examiners records, and for the latter, the abused survivors, or control group, through random digit dialing. Proxy informants (i.e., relatives or friends of the victim) were interviewed in femicide cases which included asking about the risk factors on the Danger Assessment tool. For the abused controls, direct interviews were conducted. Findings indicated identifiable risk factors for domestic violence related femicides that included among other factors, the batterer’s access to guns, previous threats with weapons, perpetrator’s stepchild in the home, estrangement, stalking, forced sex, and abuse during pregnancy, among others. Unemployment of the abuser was the strongest socio-demographic risk factor. For more information about the Danger Assessment instrument and risk factors, see the Danger Assessment website.\textsuperscript{31}

\textbf{Research on Domestic Violence Near Fatalities}

In contrast to the considerable research on domestic violence fatalities, near fatality research remains in its infancy. In the few studies that have been conducted, near fatalities or cases of domestic violence-related attempted femicides have been identified from law enforcement, prosecutor or medical files. Thus, the scant research on near fatalities is comprised of cases primarily where law enforcement charged a batterer with an act of physical abuse rising to a specific legal standard of evidence, i.e., attempted murder, or where a survivor was subjected to physical injuries deemed life-threatening or potentially life-threatening by health care standards.

Three studies conducted on near fatalities demonstrate the methods used and the findings are briefly reported below.

First, Farr conducted a qualitative study in which she interviewed survivors who were victims of an attempted homicide in one West Coast city.\textsuperscript{32} She identified 30 survivors from police reports and interviewed 8 of the survivors by phone. Farr used a medico-legal definition of “attempted homicide”. Findings revealed that near fatal attacks were accompanied by patterns of increased tension and violence and victim distress; many survivors felt shock at the attempt on their lives, and that factors contributing to victims’ stress included batterers’ substance abuse or mental health problems, their access to guns, batterers’ prior violence and the women’s personal life stressors such as income or housing instability or health problems. Although Farr did not use the Danger Assessment tool, her study provides important information about the near fatal attacks, the post attack experiences, including the ongoing struggles faced by these women because of “employment, financial and residential instabilities.”

Second, Nicolaidis et al. interviewed 30 women who survived an attempted homicide.\textsuperscript{33} Survivors were identified from law enforcement and prosecutors’ files, and researchers also worked with domestic violence programs during recruitment. Following the interviews, the Danger Assessment tool was completed by researchers retrospectively, i.e., it was not asked directly of the survivors. Significantly, results support the risk factors identified for femicides by Campbell et al (2003). In addition, researchers found that the majority of the attempted homicides occurred around relationship change, that half of the survivors did not recognize their lives were in danger, and that controlling or coercive behaviors by batterers featured prominently in the majority of the participants’ lives prior to the near fatal assault. The

\begin{thebibliography}{9}
\bibitem{danger} The Danger Assessment website, last accessed Jan 1, 2009: \url{http://www.dangerassessment.org/WebApplication1/}
\end{thebibliography}
researchers found a “wide spectrum of abuse” for the near fatal attacks that was based on the severity of violence and control and the number of risk factors. A few women who were nearly killed were at either extreme on a “continuum” of abuse, although most women were reported to be somewhere in the middle.

Third, Campbell, Webster and Glass reanalyzed data from the multi-site study mentioned earlier, separating the abused survivors, or control group, into attempted femicide cases versus no attempt. Attempted femicides were identified through the district attorney’s office, law enforcement, community domestic violence advocacy or trauma centers in an urban setting, using a medical-legal definition of near fatality. Researchers demonstrated that femicides and attempted femicides had similar scores on the Danger Assessment, and that it was highly predictive (90%) in identifying potential lethality at the severe or extreme danger levels. These scores were also shown to be twice as high as that of the abused survivors or controls. And in regard to social-demographic characteristics, near femicides more closely matched femicides compared to abused women in the control group: the femicides and near femicides were more likely to be Black or African American, less educated and unemployed, among other factors.

All three studies identify prior domestic violence as a major risk factor for lethality and highlight that the risk of severe or lethal violence increases around changes in the relationship. The two studies that reviewed or utilized the Danger Assessment found it to be a valid instrument in assessing risk of lethality. Finally, the research demonstrated that while victims’ perceptions are important in assessing danger and safety planning, victims’ perceptions should be only one factor considered in assessing lethality, as many victims do not accurately identify their risk of being killed.

In addition to the recent efforts in research on attempted femicides, fatality reviews have also begun to look at near fatalities. As states have established domestic violence fatality review boards, several have been formalized through legislation establishing definitions, authority, scope and protections under which those boards may operate and conduct reviews. Few states have branched out to reviewing cases of near fatalities for various reasons, including lack of access to records, lack of immunity and/or confidentiality protections, and funding. Two states that plan to review cases of near fatalities, New Jersey and Maryland, use a medico-legal definition of what constitutes a near fatality for identification and review purposes. The statute establishing the New Jersey Domestic Violence Fatality and Near Fatality Review Board defines “near fatality” as: “...a case in which a victim of domestic violence is in serious or critical condition, as certified by a physician.”

Until now, the Board has rarely had the victim’s voice at reviews, e.g., only through statements made prior to her death such as in earlier police reports. However, the Board is ever mindful of keeping the victim central during the review process. Victims/survivors can help in the formulation of policies to better protect victims of domestic violence by adding to the accuracy of

35 For more information on domestic violence fatality review, see the National Domestic Violence Fatality Review Initiative at www.ndvfr.org
36 Maryland’s Domestic Violence Fatality Review Teams’ governing statute is based on medical and legal foundations, defining near fatalities as cases of “serious physical injury” based on their state’s Criminal Code. According to § 3-201 of the Criminal Law Article, “Serious physical injury” means physical injury that: (1) creates a substantial risk of death; or (2) causes permanent or protracted serious: (i) disfigurement; (ii) loss of the function of any bodily member or organ; or (iii) impairment of the function of any bodily member or organ.”

“Let me see tomorrow” A Report of Interviews with Survivors of Near Fatalities
information on abuse that is otherwise not available. The Board strongly believes that it has a responsibility to hear their stories, learn from their experiences, and use the information they provide to work toward change that will improve the lives of families experiencing domestic violence. In 2007, the Board decided to sponsor research that would provide an opportunity for the women’s experiences to be valued. Interviews were conducted in Spring 2008 with women who were nearly killed by their intimate partners and the report that follows is based on these interviews.
Methods

The investigators used qualitative research methods for this pilot project. Additional methodological details are in Appendix B. The research design was for the conduct of in-person in-depth interviews with women in New Jersey who were nearly killed by a former intimate partner. Although at the time of the interview, the experiences related may have been of a then current intimate partner. The women were asked to describe their experiences with law enforcement and the judiciary, e.g., police, judges, attorneys, domestic violence service programs/shelters, e.g., advocates, the health care system and other service providers. The survivors were also asked what services, if any, increased or decreased their safety, and for suggestions of what might prevent domestic violence-related fatalities and near fatalities. The Institutional Review Board of the University of Medicine and Dentistry of New Jersey approved of this study’s research protocol.37

Near fatality defined: The study team began with the definition of a domestic violence near fatality or attempted femicide as “a gunshot or stab wound to the head, neck, or torso; loss of consciousness from strangulation, trauma, or attempted drowning; other severe injuries that could have led to death; and/or verifiable evidence of unambiguous intent to kill the victim,”38 We decided a priori to include cases that were ‘close enough’, i.e., if there was ambiguity such as the women were severely abused and they were in the New Jersey Address Confidentiality Program at the time.

However, after the first interview, the research team met to discuss the interview in general, and especially because the first participant did not meet the medical-legal definition of near fatality used by other researchers. In fact, she would not have been identified as a near fatality according to our own methods. See discussion in Background section. This first participant/survivor was physically, emotionally and financially abused for years; the abuser had threatened to kill her while wielding a weapon; she had filed reports of domestic violence offenses with the police, and she had frequently escaped the abuser by going into domestic violence shelters with her children. In addition, the survivor identified herself as a near fatality, and specifically as a victim of domestic violence who was nearly killed by her intimate partner. Following a discussion, the team decided to continue the recruitment process because as described in the Background Section, research on near fatalities is in its infancy, and, therefore the revised research design would enable survivors to participate in the shaping of this definition.

Recruitment: Participants were recruited through the New Jersey Address Confidentiality Program (ACP). ACP is a statewide program available to victims of domestic violence who continue to be at risk of violence from the batterer and who need to keep their home address confidential. Through ACP, victims of domestic violence are provided a substitute mailing address that allows them to receive mail through the U.S. Postal Service while keeping their actual address and location confidential. ACP is crucial for victims of domestic violence by providing a legitimate address that the women need to be employed, vote, get drivers’ licenses and other documents, and to work with the legal system to obtain restraining orders, child custody and financial support. In 2008, New Jersey’s ACP had approximately 200 participants.37

37 Such review is necessary but also welcome because an Institutional Review Board’s (IRB) mission is to ensure the protection of individuals who participate in research. To learn about IRBs, see the UMDNJ IRB website: http://www2.umdnj.edu/irbweb/aboutus/index.html
Logistics of interviews: Arrangements for sites for the conduct of the interviews were made with the help of the New Jersey Coalition for Battered Women. The project would not have been possible without the help of the Coalition and the state’s domestic violence service programs.

Interview Guide: The primary instrument was an interview guide with open-ended questions that allowed participants to tell us about their experiences in their own way. The interview guide is available upon request from the Principal Investigator. In New Jersey, various systems and service professionals are available to assist victims of domestic violence, including law enforcement, courts, attorneys, health care providers, domestic violence advocates, and other social service providers. Some victims may utilize these systems while others may use few or none. We asked participants about their experiences with systems/service providers to learn if the response was helpful or not helpful, and what gaps or unmet needs did they find that might have impacted their safety. The interview guide was designed to learn about providers and systems the survivors identified that were important to them.

Danger Assessment (Instrument): As described in the Background Section, the Danger Assessment was developed by Jacquelyn Campbell, PhD, RN to help law enforcement, health care providers and domestic violence advocates identify the level of danger for women in abusive relationships. For the study presented here, the Danger Assessment was not done during the interview. Instead, and similar to the approach used by Nicolaidis et al. (2003), the investigators used this instrument after the interview, to assess risk factors for domestic violence homicide that were mentioned by participants as present during the abusive relationship. The second part of this instrument consists of 20 items that asked each woman about whether or not her partner owns a gun, her partner’s employment status, whether or not he has ever threatened to kill her, etc. See the Danger Assessment in Appendix A. The Principal Investigator was trained and certified in administering and scoring the Danger Assessment. For our purposes, the instrument was used to aid the investigators in recording risk factors and describing the danger these women were in before they escaped.

Data: For this pilot study, 22 women were invited to participate by the ACP administrators, 15 agreed to participate, and 11 of the 15 women were interviewed. Of those who declined to participate (7), five women did not self-identify as survivors of a near fatality. Interviews were conducted in eight counties throughout the state during the Spring of 2008. Most were held in private conference rooms at domestic violence service programs and several were in the living areas of domestic violence shelters. Without the help of the advocacy community, we could not have conducted this research project.

Data Analysis: Interviews were recorded using digital voice recorders. The recordings were then transcribed, and the transcriptions (also referred to as text or data) analyzed using established qualitative analytic methods and software tools designed to identify unique and similar experiences and highlight illustrative quotes for inclusion in this report. Following transcription, the team of investigators met to discuss each survivor’s experiences. The multi-disciplinary team of investigators ensured that the survivors’ experiences and recommendations were related as accurately as possible and their meaning interpreted through multiple lenses.

Limitations: As with all research studies there are limitations to this study; and these are acknowledged and addressed in the Conclusions of the report.

39 See the Danger Assessment website, accessed Jan 1, 2010: http://www.dangerassessment.org/WebApplication1/
Findings

The findings are presented in the following sections:

- First, a summary or overview of the 11 participants’ experiences as related in the interviews is presented to provide context for the findings on the various systems and their helpfulness to the women. While every woman’s story differs, similarities are also highlighted in this section.

- Next, the 11 women are introduced individually by providing some of their stories and experiences. Their names have been changed and identifying details about them and their experiences have been altered to protect their identities.

- Third, the diversity of New Jersey reflects the diversity of survivors, their experiences and their needs as well as access to resources. Also in this section, jurisdictional issues are briefly discussed.

- Fourth, we present the women’s experiences in asking for help from a) families and friends, b) law enforcement and the judicial systems, c) the domestic violence service programs/shelters, d) the health care system, and e) other potential sources. The women’s recommendations are at the end of each subsection. Some of the women’s recommendations were excluded based on criteria developed by the investigators: a) if the recommendation might compromise safety, broadly defined, b) if the team was concerned about unintended consequences that could impact victim safety, and c) if the recommendation was already law or policy. For the last criterion, some recommendations were not excluded even if policy or law exists because the survivor’s experiences indicated that practice may not measure up to policy. When required, survivors’ recommendations are followed by investigators’ commentary or elaboration; otherwise, the investigators felt the survivors’ recommendations speak for themselves and needed no elaboration.

- Fifth, the women did not only tell about the abuse and their efforts to seek help to safely escape the abusers, they also related their experiences after separating from the abuser and the problems they encountered in trying to make a new life for themselves and their children. To understand the significance of the problems, it is necessary to continue to look at their experiences and the longer-term impact of the abuse on their health and financial wellbeing and also that of their children.

The Editing of Quotes: In general, the exact words of the women are provided as much as possible to illustrate the findings in the report. Quotes are typically indented and in italics. Shorter quotes may appear in text with quote marks and in italics. For the summary overview, numbers linked to the individual women appear in parentheses following the quotes because we have not yet introduced the women and this section presents findings in the aggregate. In subsequent sections, the fictitious names of the women are used to enable the reader to relate the specific quotes with their stories. The editing of quotes is minimal and mostly to protect the confidentiality of the women, and at times to improve readability. Ellipsis (…) are used to replace phrases or sentences omitted from quotes.

41 The pros and cons of editing quotes is the subject of considerable debate among researchers. Suffice it to say, the spoken word differs from the written word, hesitations and incomplete sentences are typical and can reflect emotion, editing can change meanings, and speech patterns can provide important cultural context, among other issues. See the following short article on these pros and cons, last accessed December 21, 2009:
**Note on Frequency Counts:** Counts are typically provided for the reader such as the numbers of women who had the experience being described, i.e., one woman, two women, to all or 11 women. At times pronouns are used instead such that a ‘few’ means 2 to 3 women, ‘several’ or ‘some’ means 3 to 4 women, ‘half’ means 5 to 6 women, ‘many’ or ‘most’ means 7 to 10 women. While it is important to show patterns through such counts, a woman’s unique experience has great significance for understanding the needs of victims of domestic violence.
The Survivors’ Histories and Experiences

This section provides general context about the survivors, their relationships, their children, and the abusers, as well as about the abuse the survivors experienced, the reasons they stayed and the reasons they left the abusers. It is not meant to be a review of all there is to know about domestic violence. It is intended to help the reader better understand these women’s experiences when they asked for help.

The Survivors

At the time of the interviews, all 11 women were in the Address Confidentiality Program (ACP). The women’s ages ranged from 29 to 45 years. The women are African American or Black (7), White (3) and Latina (1). Several women are immigrants. Most of the women work in a range of occupations that reflect the all-inclusiveness of domestic violence, and many were employed full time when the relationships began. Four women had purchased homes prior to their relationships with the abusers. The impact of the abusive relationship left most of the women without homes and jobs, and at the time of the interviews, many were struggling financially to find employment as well as safe and affordable housing.

The Relationships

The intimate partners of the women were husbands or boyfriends. Of the 11 women, six were married, several for at least five years. For some, the relationships and the abuse lasted for years, spanning over a decade or more. The women often described their intimate partners as “charming” at the start of the relationship, and then later with labels such as “Jekyll and Hyde”, “monster” or “the Hulk” that reflect the men’s deceptive, manipulative and abusive natures. The women would also describe the abusive intimate partners as having a public guise or role that masked their private abusive nature. Here is what one survivor told the interviewers:

When people see what a beautiful, what a loving father, what a wonderful family. And I’m like, in my mind, if only they knew. When he’s outside he’s the doting father, he’s the doting husband, and oh how lucky you are. People would stop us at the church and say that you are an example to other families. (#10)

The women also expressed embarrassment for being in abusive relationships and shame for the abusers. Several of the women described the men’s behavior as a mental illness, however, it is important to note that the perpetration of domestic violence is a choice that it is not caused by mental illness. According to the National Institute of Justice’s review of domestic violence research, “Batterers are no more likely to be mentally ill than the general public.”

The Abusers

Like the women, the men’s employment reflects that intimate partner violence affects all strata of society. While several of the men held fulltime jobs, including in law enforcement and the military, at least four were unemployed during some or even most of the relationship. According to Campbell et al, “unemployment is the “strongest sociodemographic risk factor for intimate

partner femicide.”

Although the interviewers did not ask about the men’s histories, some information about the men was revealed, including:

- Three men had criminal histories, and two had spent years in prison.
- Six men abused alcohol and/or drugs and several were dealing drug.
- Five men abused other women previously or during the time of the relationship with the victim.
- Five men spent time in counseling for alcohol or drug abuse, and/or saw psychiatrists for mental disorders and/or evaluations, and at least one attended anger management or a batterer’s treatment program during the relationship.

While the women live in fear for their lives and the lives of their children and remain under the increased protection offered by ACP, at the time of the interviews, the women reported that as far as they knew, the men were not incarcerated, although most of the women still had restraining orders against the men. According to one woman, “I’m running for my life…and he went off scot-free.”

The Abuse

The abuse experienced by these 11 women was often specific to their relationships, but most were subjected to many of the abuses that are often categorized as verbal, psychological, emotional, physical and sexual. However, the reality of abuse defies categorization as the women’s words demonstrate. To understand battering, it is important to see it as patterns of coercive behaviors by the abuser, designed to control the victim. By looking at domestic violence as “coercive control” (Stark, 2007), both the physical as well as the non-physical forms of violence are exposed and more ‘visible’ for examination.

Non-physical coercive control is often categorized as verbal, psychological and/or emotional abuse. For the women interviewed, these forms of abuse included: isolation from family and friends, intimidation, putdowns, name calling, humiliation, jealousy, denying or limiting access to money and employment, stalking, stealing from the women and destruction of their property, and threats to kill them, their children, other family members and to commit suicide. While all of the women told about this form of abuse, below are several selections from the interviews that illustrate some of the forms of non-physical coercive control used by the abusers: intimidation, isolation and financial control:

*He would stay up at night and watch me. Just sit across from me and watch me with an angry look on his face. I didn’t know what he was thinking. I mean, he would just stare at me and I would wake up and he’s just sitting there, staring. That was scary for me. That was very scary. (#9)*

*I don’t call anybody, I report to him, anything I need, even for tampons, or sanitary towels, I have to ask him for money. I had to do my hair or to do anything, he has full control. (#10)*

In addition, all of the women told of the abusers’ threats to kill them: threats that kept the women from leaving and/or contacting the police and living in fear. Abusers’ threats to kill and threats with a weapon were reported by Campbell et al. as “associated with substantially higher...”


“Let me see tomorrow” A Report of Interviews with Survivors of Near Fatalities
risks for femicide.”46 Such threats then are indicators of the potential for the victim to be killed.

Below are just a few of the abusers’ threats that the women recounted:

He’d act like he’d have one of his guns and he would make a snapping sound at my ear or at my head. And I was scared. ...He told me that if I leave him he would kill me. ... ‘Cause he would always told me that ‘if I ever go to jail, for hurting you, I’m gonna get out and kill you’. And that plays with your psyche. (#9)

Jealousy, often referred to as ‘morbid’ jealousy’, is when a man says he cannot live without the woman, and threatens to kill her, himself and even the children.47,48 Several women related threats or incidents that reflect this level of jealousy.

I didn’t realize that sometime we were intimate and he would tell me ‘you better not ever leave me, if you leave me, I’m gonna kill you. I’m a find you and kill you. If I ever catch you with another man, I’m a kill you and him.’ Now this is during intimacy. I had no idea until after I’m out of the relationship that he was mentally abusing me, even in bed. (#4)

Threats to victims also included threats to their homes, property and family members as recounted by this survivor:

...always threatening that ... ‘You’re gonna be gone all day, your house is gonna be burnt down when you come home.’ Or, ‘you’re gonna be gone all day, and your mother’s around the corner,’ and, ‘if you don’t do this, you’re gonna have consequences to pay when you,’ so there’s more, I was just afraid of him. (#7)

According to the women, all but three of the men had access to guns, and several brandished their guns when threatening the women. More typically, weapons of convenience were held to the women’s necks or over their heads, which included knives, tools, scissors, a shard of glass and a telephone. Most incidents happened in the privacy of homes, sometimes with children witnessing the abuse, such as one woman related “he held knives to my throat, um, in front of my children.” (#11) However, other than the children, there were typically no witnesses, leaving the women feeling alone and uncertain, and the abuser to reinterpret or twist the incident.

There was another time he was violating his restraining order. I was in the backyard, doing something with tools... There’s nobody around where I live, and he picked up a [tool] out of my toolbox and had me against the shed. And he had the [tool] in my eyes ‘Go tell that to a police officer.’ And then you go, and what do they do? There’s nobody to prove that it really happened ... I reported that to the police too, but they couldn’t do anything about it ‘cause there’s no witnesses. (#7)

Nearly all the women narrated more than one incident when the abuser stole or destroyed property in their homes, and five women related stories, in which the men broke into the women’s homes to threaten them, steal from the women and intimidate them. Several women also reported phones being destroyed and phone lines cut or yanked out by the men to keep the women from calling for help. Here is what one woman told us:

I was more concerned of trying to shelter the baby and close the windows and lock the doors but I didn’t call the police and I figured if I did, what does it matter anyway, he’s gonna be in before they get here anyway. Um, he came in, he was famous for pulling my phones out of the walls the second he gained access to me. He would break cell phones like they were whatever, you know, like nothing, just throw the cell phone so that broke, they would shatter into a million pieces, and the phones, not just unplugged outta the wall, like ripped, wires, ...he wanted to make sure there was no way of making a connection. (#11)

Physical and sexual abuse. For the women interviewed, these forms of abuse included: hitting, punching, strangling (or choking), biting, shoving, kicking and sexual assault. One woman told of numerous beatings over years and she related one incident in which the police were called:

One of the earlier was he had punched me in the nose and cracked my nose, he broke my nose, and the arguing and the fighting, the punching ...I didn’t feel pain because I remember fists coming at me but I don’t remember hurting, I don’t, I didn’t, wasn’t feeling them anymore, I was anesthetized, I didn’t feel, time kind of slows down, this weird thing, ... I wasn’t feeling it but I remember the blows, and he grabbed me by my neck, and when the police did come, um, and I had a red mark on my neck ... the police officer said ‘your nose is pushed over.’ He goes ‘you better sign this, like enough’ and when he said, ‘your neck looks a little red’ but later on I don’t know if it was that night or the next morning, it was a complete black hand print, it was like he dipped his hand in ink and put it on my neck, you could see every finger, everything on it, on my neck. That’s how hard he choked me. (#1)

In this incident, when the police officer told the woman “enough”, he was relaying that the abuse had gone on long enough. However, for this woman and her children, the abuser continued to come after the woman in her home despite police reports and a restraining order.

Eight women related at least one episode of strangling (or choking), which they often described as severe enough to leave bruises, damage vocal cords, and near loss of consciousness. Although strangling is the appropriate term for compression of the neck which can lead to unconsciousness or death, victims typically say they were “choked”. Strangulation should be used in reports by law enforcement and medical staff because use of the appropriate term may increase the likelihood of criminal charges and further assessment of potential sequelae following attempted strangulation.49 Significantly, strangling (or choking) is among the risk factors considered in assessing the danger of homicide for abused women.50

50 Campbell’s Danger Assessment acknowledges the more common usage by asking victims: “Does he ever choke you?” See the Danger Assessment, last accessed Jan 1, 2009: http://www.dangerassessment.org/WebApplication1/
described how the abuser started strangling (or “choking”) her when she wanted to end the relationship.

_He’s like ‘you can’t, you’d be out ch’your mind if you think I’m gonna let you be with somebody else’... so I’m talking to him and telling him, ‘we don’t need to be together, stuff like that’ and all of a sudden, he just started choking me._ (#8)

Another woman related the constant fear she was in with the expectation of beatings at night after her children were in bed. Unable to call the police because of her fear of the abuser’s criminal history, she told how she prepared for the assaults:

_That anticipation of when nighttime come and when the kids go to bed, I already knew what was going to happen. It had gotten to the place where I would sleep in my clothes, because the tussling, and, you know always got to just fight somebody off of you like that...He would always like punch me ...on that side and I don’t know what’s on your left or your right, but that really hurt, because how he punched me made me just go like it, I lost my legs._ (#5)

Many if not all of the women most likely experienced sexual violence within the relationship; however, abused women understandably have difficulty talking about this form of violence perpetrated by one’s husband or boyfriend. Instead women may use more ambiguous terms such as “being jumped”, 51 or as the woman quoted above who would sleep in her clothes because she anticipated the “tussling” and having to fight with the abuser when she went to bed. Sexual violence within these relationships may become normalized in the sense that the women expect it as part of the intimate, abusive relationship. Two women described experiences within their relationships that rape care advocates would recognize as forms of sexual violence. A third woman plainly stated, “He raped me.”

**The Children**

_So he starts to beat me and the children are there and that’s when he tries to strangle me. He has me in that choking grip and I scream to my son and he runs to call 9-1-1._ (#10)

Imagine a mother having to tell her child, as did at least one of the mothers: “If Daddy is killing Mommy, call 9-1-1.” Most of the women had children with the abuser. Only two women did not have children. Some of the women had children who were not the abusers’ biological children, and some of these children were over 18 and no longer living with their mothers. There were 19 children ranging from newborns to teenagers living in the home during the abusive relationships. Although we cannot know about all of the children that the abuser might have fathered with other women, the women mentioned at least 6 children: one of whom died, and one who came to live with the abuser and the survivor. Most of the women’s children would have witnessed the abuse in their homes, which research has shown can have long-term negative impacts. A mother of three young children told how one child cared for her after a beating:

---

51 The phrase “being jumped” was used at a presentation as an example of the ways victims might describe a sexual assault. Presentation by Catherine Cerulli “Prosecuting and Adjudicating IPV: Implications for Safety” at the NIJ conference, 2009, June 15-17, Arlington, VA,
I was laying on the floor bleeding and my little one, my middle one went to the refrigerator and got ice out, at three years old, and brought me a towel full of ice cubes, too many, and put it on me and would sit and pet my head cause I couldn’t get up. (#1)

Several women related incidents in which their children were also abused physically. They told how the children would try to intervene between the abuser and them during beatings. Or, as described by one woman, she tried to stop the abuser from beating her son:

He punched and kicked [son’s name], hit him with a table lamp across the face and tied a sheet around his neck to choke him. When I went to jump in, I hit him in the head with the lamp that he hit my child with, and he punched me in the face and took his thumb and tried to gorge my eye out. When I fell to the floor, he kicked and stomped and spit on me, threatened more punishment if I didn’t help him get up and beat my oldest son. So I got beat ’cause I didn’t beat, I didn’t spank my oldest son. …And, when it was over I couldn’t even tell you, our faces were unrecognizable, nose and cheek were swollen, his lip was split, neck and back were grotesque, I was horrified. And my husband fell into a drunken sleep. (#6)

Along with abuse of children and threats to kill them, this woman and another woman related how the abuser would sometimes hold the children hostage and even threaten to kill them as another way to control the women and keep them from leaving. After the beating of the woman and her son just described above, she went on to relate how she started planning to escape:

I realize going back that each time I tried to leave, one of the kids was basically held hostage. The slowest one got caught and it was ‘If you don’t come back he’ll be dead and it’ll be your fault.’ (#6)

A second woman describes the abuser’s technique for controlling her through her children by another man:

He’d threaten me with my children. He used to kidnap them. He would take them. He would leave the baby because that was his but he would take my other children because he knew that that would cause trouble for me with their father and he would disappear with them, and it would be like just on the heels of me being ready and brave enough, concerned for them to pick up the phone and call the police to report it, he would walk through the door with the kids. (#11)

Studies show that children in the home who are not fathered by the abuser are at greater risk of abuse and also generally increase the risk of domestic violence in the home. According to Campbell et al, “having a child living in the home who was not the abusive partner’s biological child more than doubles the risk of femicide.”  

As evidenced from the quotes above, an abuser poses a danger to the children in their home. According to the Advisory Council on Domestic Violence, “historically the needs of a

---

victim and the needs of her children have been addressed separately.\textsuperscript{53} Whereas there are civil and criminal actions that can be imposed on an abuser to protect the adult victim, protections afforded to children have come in the form of child protective services via the Division of Youth and Family Services (DYFS). It is not uncommon when DYFS and/or law enforcement agencies initiate an investigation in response to allegations of child abuse or neglect that the culpability of both the parents becomes the focus of the investigation, despite the father being the documented abuser. The societal expectation is that a mother should protect her children from abuse, and she is often seen as equally or more culpable than the abuser because of her ‘failure to protect’ the child from the abuse. It is this construct of child abuse or neglect that leaves mothers vulnerable to being identified as abusers even if they are not directly responsible. As a result of this perceived ‘failure to protect’ one’s child, the non-abusive parent may suffer negative legal consequences which include the loss of custody of their children and criminal prosecution. It is the fear of losing custody of one’s children that keeps many abused women from reaching out to resources for assistance and trapped in a cycle of violence.

The Reasons the Women Stayed

Domestic violence advocates and the research literature have elucidated the many reasons why women stay and do not leave abusive relationships. There is almost never one reason, but rather many for each woman. The following list provides some of the most important reasons the women in this group shared for why they stayed or why they did not or could not leave.

- The women feared the abuser (i.e., they feared retributions including that they might be killed), such that staying seemed safer than leaving.
- There was an erosion of family support.
- The abuse was cyclical.
- The women thought the abuser would change, and/or the women had made a commitment to being a family, and/or they stayed for the children.
- The abuse was financial, with the women uncertain about where to go, and included fear of becoming homeless.
- The women did not know how to leave safely.
- Escalation of the abuse was gradual, increasing over time and wearing the women down.
- Responses to requests for help, both formal and informal, were inadequate.

The reasons for not leaving are multiple and complex and reflect the controlling nature of the abusers. The women’s words best express their reasons for staying or for not leaving, as evident in the quotes. They also demonstrate the women’s thinking and the difficult decisions they faced in regard to their safety and future and of their children.

\textit{Fear of retributions and being killed.} All of the women feared what the abuser might do, including killing them, if they tried to leave, disobeyed him, or sought help from others, especially the police. Their past experiences with the abusers controlled the women decision-making, as one survivor made evident to the interviewers:

\begin{quote}
I didn’t want anyone to see what he did because I knew if he got put away, I knew he’d punch me more if the police came, this was part of the dynamics of it, if you get hit and beat up, when you tell somebody, even if it was a neighbor, he’d hit me more. If you told
\end{quote}

the police you got hit harder, it was a harder beating. If he went to jail, it was worse. Do you know what I mean that, it was gauged on what you did and you’re a traitor, like you’re not protect, he would, it was that, and you get in that mindset. (#1)

All of the women believed the abusers’ threats to kill or harm them and they feared for their lives and their children’s lives. Since the abusers knew the families of the women, the women also feared that the men would go after their family members. “If I left, he would terrorize my relatives until we came back.” (#6) By ‘we’ this woman was referring to her children and herself.

There was an erosion of family support. While several women had supportive families who would take them into their homes when they needed to escape the abuse, most of the women were less fortunate. One woman felt her family “knew” but “didn’t care”; another said the abuser had moved her away from her family, thereby “isolating” her. A third woman related how her abusive husband had manipulated her parents until they were estranged, and some women mentioned that family members were understandably fearful of the men. Thus, many of the women could not ask for help from their families or friends.

The abuse was cyclical. Many readers of this report have probably heard about the cycles of abuse that include ‘the honeymoon period’. After a beating, there follow apologies and promises of ‘never again’ from the abuser and even steps taken to get help. In effect, the abuser says and does anything to keep the woman from leaving. One woman described it this way:

But again I fell for the crap and I fell for the crying, he was very good at the tears and the ’I’m gonna get help, and I’m going to get better’ and he actually does go into treatment. He goes into it and he manipulates the doctors so well. (#6)

Abusers tend to be very good at manipulating others. This manipulation is combined with the women’s belief that at least for a time, the abuse will stop and the abuser will change. The peaceful phases of the cycles gave the women hope that the abuse would stop. Yet not all abusive relationships have cycles, sometimes the abuse and especially the coercive control is constant. The abuse or coercive control is often cumulative. It is important to realize that not all abusers are alike and the forms of violence can differ within abusive relationships. The abuse can even become routine with familiar patterns that become harder to see.

The women thought the abuser would change, and/or they had made a commitment to being a family. Most of the women mentioned that at some times during the abusive relationships, they hoped the man would change, and the women wanted to believe he could change and not be abusive. Here again, we see the lengths that the men would go to in their attempts to keep and control the women:

There’s always that period when they come back and they say that they’re sorry and they’re never gonna do it again and they make you all the promises that you want to hear and different things, ‘I’ll get treatment, I’ll go to AA [Alcoholics Anonymous], I’ll do this, I’ll do that, I’ll do whatever it takes’. They threaten to kill themselves, they threaten to cause harm to you or your children or they’ll say whatever it takes to convince you to just take them back and that things would be better and they’re gonna get help and counseling, and do whatever, and it’s lies. And it’s not just the first time. They have this thing, this way to convince you every time and it takes a very long time for us not to be convinced anymore, to say that you don’t believe it. But I think deep down inside we want to believe it. (#11)
And for some women, their religious beliefs also kept them in abusive marriages. One woman told of her struggles: “See I am Catholic, we don’t believe in divorce. I thought he would change. After seven years? I said yes, people change.” (#10)

There are many religions with different beliefs and practices, and some preach the sanctity of marriage and that the man is the head of the household. Several of the women in this study spoke about their interactions with religious leaders and several of the women’s experiences with faith and religious leaders will be related in a subsequent section.

**Women stayed for the children.** Some women stayed because they believed in the father-child relationship, and one woman said, she “felt guilty that your kids, you know, like you’re taking your kids away from their father.” She elaborated,

> To understand why like, with me I don’t even know, I’d stay mostly, I know this, because of my children ... a lot of women stay because of financial reasons, they don’t support themselves, they depend on a man. In my case it wasn’t like that ‘cause he never really worked much. I did all the work. He would take care of the kids sometimes or they’d be in daycare ... but I supported myself. I guess I stayed because of my kids, and, and because of fear in leaving. (#8)

In this woman’s elaboration of her reasoning, she voiced some of the reasons women stay or leave, including fear of leaving. Advocates and others often warn that separation from the abuser can be a more dangerous time for victims with estrangement among the risk factors for femicide.54 Others stayed because they felt they would not be able to take care of the children alone, without the financial resources of the abuser. One participant explained her and other women’s thinking about staying because of the children:

> How am I going to feed them? How am I gonna keep a job? Who is going to help me with this? Who’s going to help me with that? And by the time they think of all that they stay back. (#10)

**The abuse was financial, with the women uncertain about where to go, and included fear of becoming homeless.** Women’s concerns about leaving and how they will manage on their own is warranted. All of the women in this study are separated from the abuser, and for many, their financial situations are dismal as will be related more fully in a subsequent section. For the purpose of understanding why women don’t leave, listen to one of the women, who has several children and was married for over a decade, as she assesses her financial situation:

> I wanna decent place to live again, and my goal personally is, because I don’t have enough job skill to go out there and make more than minimum wage and when you add that up, I mean I could make 7 or 8 dollars an hour, ... say 10 if I was lucky....I’m not stupid but I’m not trained. Um, that’s 400 a week, times 4 is 1600 a month.... There’s my rent. How will I eat, how will I pay electric and, and a car. Like I don’t have enough to function and that’s what’s so scary. That’s why women don’t go. (#1)

---

Also keep in mind that for women escaping an abusive relationship, child support from an abusive ex-spouse or ex-boyfriend is typically not an option. In fact, some women forego such support rather than expose themselves and their children to the abuser. As some of these women related any interactions with abusers can raise safety concerns, even in police station and courthouses as will be discussed later.

Homelessness is also a possibility for these women. At least one of the women interviewed escaped to a homeless shelter because she had nowhere else to go, she had no money or resources, and she could not find a bed in a battered women's shelter.

**The women did not know how to leave safely.** Despite increased awareness about domestic violence, many of the women interviewed did not know what to do, who to call for help, and how to safely leave the relationship. Family and friends get frustrated when victims do not leave abusers but they also are fearful for their own lives. One woman reflected on her thoughts about leaving:

> And I just didn’t know at that point what else to do. Do you keep running? Where do you run? Who do you go to? My family’s fed up. It’s not like Mom with unconditional love, it’s aunts and cousins, they have their own lives. So what am I gonna do? Where am I gonna try and stick this out. (#6)

**The abuse was gradual, often increasing over time and wearing the women down.** Although a few of the women could pinpoint when the abuse began, e.g., the beatings began when one man learned the woman was pregnant, others’ stories indicate the abuse was more subtle at first and took over their lives gradually, and typically increased in intensity and severity. Women lost their self-esteem and even became convinced that they deserved the abuse, and that they were the problem and not the abuser. Because it is important to understand the women’s situations, the words of three women describe this gradual process of coercive control by the abusers, which according to one woman leaves you “broken.”

> ...the first one, then he apologizes, he would never hit a woman in his life, he would never touch a woman in his life. He doesn’t know what I did. It must have been what I did, I made him so upset. ...So it goes back to me. ...and then, gradually your self esteem goes down. ...but they are so subtle in what they do that sometimes it is such a gray area that you really begin to question yourself. Did, I really do something wrong here? ...you are like, okay, maybe I am part of the problem, you are being abused and you feel you deserve it, gradually. So I try to be good, do everything he asks me to do. I don’t call anybody, I report to him. (#10)

Another woman described her experiences in an abusive relationship as one of “tunnel vision” which resulted from abuse over time; it is difficult to see beyond the moment and beyond the victim’s immediate need to avoid more harm:

> I think part of domestic violence gives you tunnel vision, so I know after having several concussions like, I can see that much right now. Um, and if there’s no one to open that vision up to you, you just see that, and it paralyzes you, so we do what we did, we cleaned up the house ‘cause God forbid he comes home and the blood that he shed was anywhere ‘cause he doesn’t want to see what he did. He wants it nice and pretty and perfect. (#6)
And one woman reflected on conversations that she had with the abuser who had convinced her that she was at fault because she was too thin; that in effect, she bruised too easily:

*How did I stand in the mirror, looking at my arms with bruises on them. ...And I can remember showing him, saying ‘look at my arms, you bruised my arms’. [Woman said abuser’s response] ‘Well, you’re too skinny’. Thinking, yeah, I guess I am. How do you accept that as an excuse? How? But I did.* (#7)

Several women provided analogies of the gradual process or the wearing down of the woman by the abuser. Here is one:

*I think sometimes people think it’s them or, am I going crazy or whatever and they don’t see it as a pattern. What is that saying? You can throw a frog in hot, in boiling water, it will jump out, but if you turn up the heat slowly, they’ll just stay and die. I think that so many of us just stay and die because it’s so subtle, little by little.* (#3)

Given the fears, concerns, and gradual wearing away of self, the difficult decision to leave and the actions to leave may best be seen as a process. Since the coercive control is often gradual, getting out of an abusive situation may take place over time. According to one woman, “It was 5 years we were together. It was a lot of off and on, break ups, get back together, break up, get back together.” (#4) Women would return to the abuser after spending time in shelters and seeking help from the police and courts.

*The duration of the whatever legal battle you go through to get your restraining order and to get your rights enforced, it’s important. And of course you’re gonna have a certain percentage of people that go back... ’cause I went back to my husband. I went back to him, however many times...and it’s gonna be like, ‘oh well, we’re wasting our money, she went back, she took him back’. But you can’t decipher when a person’s ready to leave.* (#2)

Leaving can be a complicated process for many of the reasons that have been illustrated above. It is not a simple decision as some might believe, but rather a difficult one that many women weigh heavily as they try to determine when it is safe to leave, as demonstrated in this survivor’s words:

*You just don’t know until it’s too late, and then it’s getting out that’s the issue. Leaving and knowing when the time is right and safely leave, no less leave with kids and one on the way, makes it much more difficult.* (#11)

**Responses to requests for help were inadequate.** Some abused women go through the various processes in trying to leave including: going to the police, getting a restraining order, and seeking refuge in shelters. However, for reasons already mentioned and others, the women sometimes returned to their homes and/or the abusers:

*I did get a restraining order, then I dropped it. I went through all that, going to the [domestic violence shelter], {and then} getting out of the [shelter], with having the restraining order, dropping the restraining order, going back to him. Couple of months, everything’s fine, then it starts all over again, doing the same thing all over again.* (#9)
Through the telling of their stories, the women provide numerous examples of the inadequate responses they experienced when asking for help. Not all responses were lacking, and many were helpful, but for an abused woman, even one negative response can keep her from asking again. Often feeling isolated, fearing injury or death, battered physically and emotionally, with low self-esteem, it is a tribute to these women that they found the strength to persevere as well to those who did respond to these women’s needs to help them get away from the abusers. The following list of examples is partial and these and other inadequate responses related by the women will be elaborated on in the pages to follow.

- Most of the families, friends, co-workers and others did not understand the dynamics of domestic violence and therefore they were unable to offer appropriate help to victims.
- Police officers responding to 9-1-1 calls from the women did not always separate the women from the perpetrators, thereby not allowing them to feel safe enough to tell the officers about the abuse and for the victims to learn about their options.
- Restraining orders were often difficult to enforce when abusers were intent on violating them by stalking, approaching or breaking into the homes of the women.
- The women frequently did not feel believed by the police, prosecutors, judges and others.
- Domestic violence shelters did not always have sufficient space to accommodate the women when they were seeking refuge from the abusers.
- Most health care providers and other professionals are not trained in domestic violence and/or did not ask about abuse or respond appropriately to help victims from continuing to be abused.
- And if a woman did leave, often with few, if any, financial resources, the maze of public assistance was typically unwieldy, uncompromising, with staff lacking compassion and understanding for victims of domestic violence who were seeking their help.

Any one of these responses might be enough to further demoralize and sap the energy of a woman in an abusive relationship, and too many of the women we interviewed had several and even many experiences when the help they needed was wanting and inadequate to make them feel safe.

The Reasons the Women Left - ‘Tipping Points’

Many victims of domestic violence do escape their abusive partners. The why and when vary based on each woman’s individual circumstances. Unlike participants in earlier studies of attempted femicides that were discussed in the Background section of this report, most of the participating survivors in this study did not suffer an assault that caused life-threatening injuries concurrent with the typical medical or legal/criminal definition. All participants did, however, experience physical abuse ranging across a spectrum from abuse with no lasting pain or injury to serious injury. Additionally, all experienced various levels of controlling behavior by their partners. Even when many of the survivors left their partners, the abusers continued stalking, threatening and terrorizing them. Domestic violence does not end when a victim leaves her partner; in fact the danger and violence typically escalates at that point. The belief that if a woman would ‘just leave’ the violence would stop is both simplistic and inaccurate, and perpetuates the myth that victims, not abusers, control the abuse. This is not to say that service providers and helping systems should not focus on helping battered women get out and stay out of abusive relationships, but to emphasize that leaving a batterer is only one step in achieving and sustaining safety for battered women and their children, and it must be done carefully with detailed safety planning and support.
Survivors spoke of cumulative, multiple factors that influenced their thinking about when to permanently flee from their partner. The ‘tipping point’ or final straw for most of the survivors, if they identified such a moment, often occurred not around a life-threatening injury but other moments, or feelings about the batterers and/or their situations. Deriving meaning from these changes or moments was rooted in the context of survivors’ individual lives. At the same time, a few common themes emerged from their unique experiences: a) fear and sense of danger and/or certainty that things had escalated to a point of someone dying, and b) concerns for their children.

a) Fear and sense of danger and/or certainty of dying
What stood out from these interviews was the depth of fear and death ideation these survivors recounted in conjunction with the verbal threats and abuse. Many of the survivors reported a time when they sensed their situation had changed and they reached a point when they felt their partners would kill. As described above, nearly all of the women reported that their partners threatened to kill them, and again, threats to kill have been recognized as a risk factor for lethality, and should be taken seriously. One woman told the interviewers:

>I knew it was time for me to, like, I knew I needed to leave because I knew it was going to escalate to, um, either me dying or him doing something very vicious to one of my children. (#5)

What factors constituted the tipping point differed for each woman, yet they often centered on a deep fear and sense of certainty. For example, two survivors reported that they had a sense something had changed when their batterers went “blank”. One stated her most frightening moment was when she woke up to see her batterer staring at her, reporting that she felt he was thinking about “taking her out”, while the other survivor described that she saw in her husband’s eyes that he was just ‘gone’ and she described seeing her own demise. A third survivor reported that the last incident that occurred before she and her son escaped to a shelter was when her son threatened suicide and her partner egged him on.

For other women, their tipping points centered on uncovering new information that signaled further danger. One woman explained:

>I’m cleaning the house up trying to get some furniture out and patch all the holes in the wall so I can show the house for sale, and behind my bed I find a knife. He was gonna kill me. He was gonna stab me in cold blood with my child in the house. An open knife like, this big. And it became really more real for me then. (#2)

For others, a change in the pattern or type of abuse was the tipping point when they felt certain they would be killed. One survivor recalled the last time her partner assaulted her before she escaped. Her boyfriend punched her and she fell to the ground. He then started rummaging around in a drawer that held knives, ordering her to get up:

>I tried to stand up the best I could… and he goes to me ‘You better get up off that floor’. So that time, I just, in my head thought he was going to stab me; and that’s why I just opted to get up, because he never went to that drawer before, he was a puncher, so I thought he went in that drawer to just finish me off on that floor. (#5)
Another survivor reported that her abusive husband’s threats to kill her changed from verbal threats to taking out a life insurance policy on her and the children and showing her news reports about men who killed their families.

Related to survivors’ fear or certainty that their situations had become potentially lethal is the sense expressed by many that no one can protect them. Participants reported negative experiences that influenced their decision to stop trying to get help in resolving the violence within their relationships, believing that the only choice they had for safety was to leave. Participants openly shared their fear and certainty that their partners would have killed them if they did not leave. Furthermore, like the survivors interviewed by Farr in her research on attempted femicides, many of the women in this study felt they could only rely on themselves and their “inner strength” to get out and stay safe.55

The women all feared their abusers and over time recognized the danger they were in and the possibility that they might be killed. As described in the Methods section above, the investigators completed the Danger Assessment instrument for each woman after the interview and assessed the levels of danger the women were in prior to leaving the abuser. A full discussion of the findings from this assessment is in Appendix C. Based on this assessment, all but one woman was in ‘severe’ or ‘extreme’ danger. Furthermore, and as explained in the Appendix, the investigators assert that the scores underestimate the danger the women were in.

b) For the children
Some survivors described concerns for their children as a tipping point for leaving:

"It actually took him getting ready to hit my son in order for me to wake up. That’s when I had the willpower to say ‘oh no, you can hit on me but you won’t hit him.’ And I’m ashamed to say it took that for me to wake up. (#9)."

One participant who did fit a medical-legal definition of a near fatality and had suffered years of severe physical abuse reported that she left for her children. She focused a great deal on her concern for the safety of her children and the consequences of being trapped in a violent relationship where her partner was abusive to her and the children. This survivor shared how her husband abused her and her children and sabotaged her numerous attempts to escape by filing custody or kidnapping charges to bring her into court, stealing money, keys and holding one child hostage if she managed to flee with the others. Her tipping point was when her son tried to kill himself due to the domestic violence:

"He (her son) had a knife. We’re in the kitchen and he picked it up, and he went to cut his wrist and I said ‘No don’t.’ And that’s when I got it – it’s not just you. It’s not. It’s them, too. (#6)"

One survivor explained what she felt when she came home to find her infant daughter bleeding from an assault by the abuser, who was trying to prevent her from taking the infant to the hospital:

"If this child bleeds to death, I will call the police, I will, I will talk. So that was the turning point for me. That was, seeing my daughter bloody, crying; his shirt all messed

up and he had no feelings, he didn’t care. I said no, I wouldn’t stand back and let this happen, if I have to die for it, let me die for it. (#10)

All the participants who were mothers spoke of the toll domestic violence took on their children, and how their love and concern for their children was a strong motivational factor in making the dangerous attempt to leave for good.

**Considerations for a New Conceptualization of “Near Fatality”**

The researchers decided to move from the more typical medical-legal definition of near fatality and adapt one that accepted survivors who self-identified as being nearly killed by their intimate partners. Use of a medical-legal definition for near fatality has limitations for research and case reviews. First, it limits the pool from which participants or cases can be identified and/or recruited to those obtained from police, shelter or hospital records. Previous research indicates that some victims experienced no physical abuse prior to an attempted homicide or who did/could not report their abuse. Targeting policies and programming efforts only to victims who actively sought help from professionals, risks missing potential victims at high risk for femicide. Second, by using a narrow objective framework of what constitutes being near death for a victim, researchers and practitioners could miss opportunities to serve a greater number of at-risk women. Farr reminds us that case studies that relied heavily on the voices of victims informed the early development of domestic violence programs. Last, restricting the definition of near fatality to a medical-legal framework denies survivors the ability to define their experiences for themselves and to share valuable information and insights that might otherwise not be included in medical or legal reports.

Although a new definition of “near fatality” is not being proposed in this pilot study, the researchers do recommend broadening the definition to better fit survivors’ perceptions and experiences of danger and fear. When engaging in case reviews or research, particularly with the goal of impacting policies and programs for survivors, we encourage professionals to broaden their framework for what qualifies as a near fatality by incorporating survivors’ subjective perceptions of when they considered themselves near death. This expansion has the potential to promote improved identification and intervention in cases where women and their children are at high risk of being killed. During thematic analysis of the interviews, several potential factors might be considered in addition to the medical-legal criteria for defining near fatality: a) batterers’ expressed threats to kill, b) death ideation, and c) measures taken for safety.

**a) Expressed threats to kill**

Again, abusers’ threats to kill are an established risk factor, and it is worth repeating that all 11 participants reported that their partners threatened to kill them, and most were threatened frequently. Survivors reported they disclosed these threats to helping professionals. Furthermore, they described these threats to the researchers as central, important facets of their fear and certainty that their partners would kill them.

**b) Death ideation and sense of fear and/or certainty around dying**

All 11 survivors expressed ideation around death and dying. Several women even mentioned how the news article of their murder might read. Here is one:

---

Many of the survivors even had thoughts about how the batterer would kill them. One survivor imagined the batterer being able to stab her with a pen in court; and another believed her husband was going to stab her with scissors. One woman feared the batterer could throw her over a railing in the courthouse. Thoughts around death and being killed permeated survivors’ lives during the abuse and their memories afterwards. These women felt a deep certainty about their partners’ ability to murder them and that they were very close to death. Three women slept with their clothes and shoes on in case they needed to escape during an assault, and one survivor began sleeping with car keys around her neck and her wallet with vital documents. The certainty of being near death was tangible for these survivors:

...that’s why I know if he finds us, its not gonna be, well he’s gonna beat me up – there’s no way. If he ever finds us that’s gonna be where we’re all executed...I have no doubt in my mind. I’m positive...more than a hundred percent. Not 99.9, one hundred...absolutely he would finish us. I have no doubt. (#1)

But it was at that point that I realized...it’s too late. Like, it’s too late now. You waited too long...he said ‘you’re going to die when we get home.’ Like, well, I’m ready now, because there’s no one to help me. (#6)

**Measures Taken For Safety**

The survivors in this study were, and continue to be, so fearful and certain they could be murdered, that they have taken extraordinary steps to stay safe and keep their whereabouts confidential. For most of the participants, their safety has come at great economic or emotional cost. As discussed elsewhere, all of the women are currently in the Address Confidentiality Program where they have a legal alternate address and their mail is routed to them securely, keeping their actual physical address protected. This safety measure entails a time lag for mail delivery and survivors reported running into bureaucratic difficulties in situations where they are required to give a physical address, such as dealing with child support, new schools or working with insurance companies, among others. All the survivors took enormous risks and losses to be able to escape and stay hidden from the batterers. These actions are beyond difficult or disruptive to daily living; they are monumental barriers and stressors for these women and their families often resulting in poverty, debt, housing instability and frequent moves to shelters or other temporary housing.

Safety also often came at an exacting emotional cost in that many survivors could not be with or near their families without putting them at risk of harm. A couple of survivors disclosed how batterers would hold their children hostage. Thus, the battered mothers were faced with the wrenching dilemma of whether to return to the batterer, knowing they would be beaten and possibly killed, or leave their child with him and live, knowing that staying alive meant they could later try and get their child back. One woman told the interviewers about the time one of her children refused to go with her when she was fleeing the abuser:

*Do I go get him or do I leave him? And I said ‘I’m gonna leave him’ because he’s one person and I got other kids and myself, and I left him. (#5)*

Several issues arose with the use of a medical-legal definition, which prompted a reframing of near fatality for this study. First, even though most of the survivors did not disclose
a life threatening injury, all were at increased risk of danger based on their experiences and analyses of scores on the Danger Assessment. In fact, 10 out of the 11 survivors scored as being in ‘severe’ or ‘extreme’ danger when researchers applied the Danger Assessment (DA) post-hoc. Survivors in this study scored similarly or higher on the DA as did the participants identified as survivors of attempted femicide in Campbell et al.’s multi-site study (2003). In addition, the participants in our study experienced known risk factors associated with an increased risk of lethality or attempted lethality, as discussed in the above “Abuse” section. The survivors in this study, however, would have been excluded from sharing their experiences and insights if we had continued to use a strictly medical-legal definition of near fatality even though they scored at high risk levels on the DA and their situations were similar to those identified as attempted femicides in Campbell et al.’s study (2003).

Second, the participants/survivors self-identified as near fatalities during recruitment and interviews, even though post-interview their disclosed experiences did not always meet the strict medical-legal definition of a near fatality. Interviewers discussed the importance of survivors’ perception of their proximity to death/dying. Adhering to a strict medical-legal definition for near lethality did not allow survivors to define for themselves whether they felt they experienced a situation or relationship in which they were nearly killed, or take into account their intuition and knowledge that was validated by their high risk scores on the Danger Assessment. By using an outsider-derived definition of near fatality, we effectively silence survivors, and potentially miss critical information that could help reduce the number of women seriously injured or killed every year. Batterers perpetrate psychological abuse and enhance their physical violence by attacking and undermining victims’ sense of self-agency and judgment. Not incorporating victims’ perceptions of when they feel close to being killed into a definition of what constitutes near fatality risks compounds the negative impact of interpersonal violence on a social level.

Last, ethical concerns for the well-being of survivors have led researchers to use medical-legal sources for recruitment for studies, which inadvertently further supports outsider-based recommendations and policy/programming. In addition to safety, members of the Institutional Review Board, researchers and advocates on this study worried that talking to survivors of near fatalities about the past might cause a re-evocation of trauma symptoms including flashbacks, nightmares, depression or suicidal thoughts. This project demonstrates that researchers can take effective measures to protect the safety, confidentiality and well-being of survivors of near fatalities while still recruiting and partnering directly with survivors and direct service programs.57

Thus, the researchers of this study chose to modify the definition of near fatality. Participants who self-identified as survivors of near fatalities, a) demonstrated similarities to the attempted femicide survivors in the Campbell et al. study, b) reported experiencing risk factors consistent with other survivors at high risk of or experiencing near fatal assaults, and c) scored at high risk of lethality on the Danger Assessment. Broadening the medical-legal definition typically used for research and case review holds potential for more insightful, victim-centered findings, policy and service improvements for a broader array of survivors and their families, and more effective programs and services aimed at assisting and protecting victims of domestic violence.

---

57 One protective resource the researchers found helpful was to obtain a Certificate of Confidentiality through the National Institutes of Health. For more information, refer to the following brief by the authors: Rovi S, Olson E. Obtaining an NIH Certificate of Confidentiality to Protect the Identities of Research Participants. Violence and Victims. 2009; 24:3 414-416.
Introducing the Survivors Who Participated in the Study

The survivors of near fatalities who agreed to participate in this study are courageous women because they were willing to revisit some of the most painful times in their lives in order to share their knowledge and wisdom by seeking to improve system responses to victims of domestic violence. While these women are not defined solely by their victimization, it is their experiences as survivors of domestic violence that are the focus of this study and from which effective, victim-informed practices can evolve.

It is a nearly-impossible task to communicate the full context and richness of these women’s stories in this report. Furthermore, the research team pledged to preserve the women’s safety and confidentiality, and for this reason, details of their stories have been altered. In this section, we do our best to introduce you to these incredible women – who risked their lives to save themselves and their children, and who have risked being judged as they opened up their lives to bring about social change. It is the research team’s hope that you may get a sense of both the shared and unique circumstances of each woman, as well as bear witness to their pain, sufferings, and triumphs.

~ ALICE ~

Alice is a White woman, who earned a high school degree and worked for several years before marrying and having children. While working she bought a car and a house.

For years, Alice suffered from her husband’s threats and physical abuse. She filed over 30 domestic violence reports, and had a permanent restraining order against her husband, which he violated often. He would break into their home and terrorize the family. She tearfully recounted how she slept with her shoes on and tried to stay awake all night so that she could flee with the children or call for help quickly. She often sought safety in local domestic violence shelters. The most dangerous time, she recalled, was when her husband threatened to kill her and the children. As he attempted to stab her, one of the children came into the room and screamed, “Don’t kill Mommy, PLEASE!”

Because of the abuse, Alice lost her home, her possessions and her car, and was forced into poverty. She has had little coordinated help in finding safe and affordable housing or assistance with critical needs including food, medical care and transportation. Alice describes her struggles to provide for herself and her children as a “million battles.”

~ JACKIE ~

Jackie is an African American woman and a mother, who has worked for over a decade in a demanding career. Like several other participants, Jackie survived more than one abusive relationship.
After she divorced an abusive husband, Jackie found companionship with a friend, who also became abusive. He sabotaged her ability to work, destroyed and stole her property, and physically attacked her at her workplace. He continually threatened to kill her, brazenly repeating these threats to a Prosecutor. Jackie obtained a restraining order, which the abuser violated multiple times. Her efforts to be safe included seeking help from the police, shelter staff, attorneys, judges and prosecutors, her employer, her pastor and advocates. Jackie shed light on the economic and emotional toll of the abuse, saying, “It’s hard to cry all night and then go to work.”

As a result of the abuse, Jackie had to stop working for a time, and accumulated debt from legal fees. Jackie has worked hard to recover and rebuild a safe and stable life for herself and her family.

~ NORMA ~

Norma is multi-racial. She married a man from another country and then sponsored her husband’s application to migrate to the U.S. and become a citizen.

A few years into their marriage, Norma’s husband told her that theirs was a “green card marriage,” meaning that he married her to immigrate to the U.S. He had been emotionally abusive early in the marriage, but then the abuse escalated and became physical when Norma began the legal process for divorce and sought to withdraw her permanent residency sponsorship of him. The most dangerous and frightening incidents Norma described was when her husband strangled her and then fired a gun at her as she tried to get away from him. At the time, Norma lived in another state, and she reached out to law enforcement, prosecutors, attorneys, a local shelter and immigration officials. She eventually fled to New Jersey and sought help from local law enforcement because her husband continued to threaten and stalk her.

Norma has been involved in long-term counseling/therapy as a result of the abuse and was seeing mental health providers at the time of the interview. She is making great strides towards healing fully and she is considering writing a book on domestic violence and immigration issues.

~ BARBARA ~

Barbara is an African-American woman and a mother. After ending the relationship with her children’s father, she began dating a man whom she felt would “blend” with her family.

After they married, he became obsessively jealous, destroying property and perpetrating emotional and verbal abuse. He started pushing and shoving her and during intimate moments, he threatened to kill her if she ever left him. Barbara escaped to the only place she could find at the time: a homeless shelter. She told us, “I was faster to get help as a homeless person.” However, her husband stalked her, threatened to kill her outside her workplace, and found her at the shelter and forced her to move. His pursuit of her was
relentless, and he even followed and threatened her inside a police station. Barbara said reaching out for help was difficult because of the physical and emotional energy required as well as money necessary to safely get from place to place, along with the words she heard too often: “We can’t help you.” Barbara reached out to the police, prosecutors, court personnel, domestic violence advocates, health care providers and homeless shelters. She was able to obtain a restraining order against her husband and eventually divorced him.

Although at the time of the interview, Barbara was out of work due to health reasons, she hopes to advocate for battered women and is writing a book on her experiences as a survivor of domestic violence.

~ GWEN ~

Gwen is African American and a mother. As a child, she witnessed her mother being abused.

To permit a relationship with the father of one of her children, Gwen re-established contact with him after his release from prison for a violent crime. However, he became obsessed with Gwen. When she refused his advances, he became abusive. Because he would break into her home and assault her, she would sleep in her clothes so that she might quickly escape. Fearful of his past and present violence coupled with his threats to kill her and her family if she called the police, Gwen turned to a domestic violence program for safety. The only available shelter was in another state. She described how it felt to be forced to flee to a shelter: “You be so broken. You have a house one day, next day you have nothing, you don’t even have food, you don’t have clothes.”

Initially, Gwen and her children faced impoverishment because she was not able to work since her professional license could not be transferred across state lines. But she persevered, redoing coursework in order to obtain a new state license in her field. At the time of the interview, Gwen was working, had enrolled her children in counseling, and had plans to work as an advocate for battered women.

~ SARAH ~

Sarah is an African American woman and the mother of several children. Her husband convinced Sarah to quit her job to stay home with the children, which made her economically dependent on him.

Often when he was drunk Sarah’s husband beat her. During one of the most lethal assaults, he strangled her until she became unconscious. He repeatedly threatened to kill her and her children if she ever tried to leave him or report his abuse to the police. Her husband also became abusive towards her children, hitting them and beating her when she tried to intervene. Sarah tried to escape multiple times with her children, but the batterer arranged it so that he always had a child with him and threatened to kill the child if she tried to leave or did not return. Despite his threats, Sarah bravely reached out for help to the police, her
church, her family, health care practitioners and domestic violence advocates, but found little help in obtaining permanent safety. Eventually, she managed to escape with her children but her ex-husband harassed and threatened her family, friends and employer, and continued to get to her and the children by instigating numerous court filings and delays.

Sarah found safety through a shelter and has continued to keep herself and her family safe. Sarah hopes this report will improve people’s understanding and response to battered women with children.

~ TESS ~

Tess is a White woman, whose husband worked in a position with power and influence which he used to intimidate and control her, and to shield him from the consequences and punishment of his abuse of her.

Tess’ husband was physically, psychologically and emotionally abusive. She survived physical assaults, including attacks that left her so bruised she couldn’t go out in public, as well as death threats against her and her family. Tess related two potentially lethal assaults where she said she looked into his face and realized his humanity and ability to feel was “just gone.” He even blamed her for the abuse, telling her she was crazy and threatening to have her committed. Tess had to take a leave from her job due to the negative health effects of the abuse, which increased her dependency on her abusive husband. Tess called the police and reported his abuses but due to her husband’s influence, many individuals in law enforcement and the judicial systems refused to help or protect her. Tess also contacted domestic violence programs, attorneys, doctors and therapists. After she managed to leave him, he continued to stalk, harass, and threaten her and her family. Like other survivors, he uses the court system to harass, control and economically abuse her.

Tess hopes that by speaking out, she can help improve system responses to battered women whose abusive partners are in positions of power.

~ HELEN ~

Helen is a Black woman who was born outside of the U.S. She is also a mother, and she has survived several abusive relationships.

Focusing on the partner she believed almost killed her, Helen described how he went from being emotionally abusive, possessive and jealous to physically abusing her. He hit her, strangled her, threatened to kill her if she left him or reported the abuse, and at least on one occasion, wielded a weapon. After having children together, Helen explained that she was deeply conflicted about staying in the relationship versus leaving due to her cultural values about family as well as needing his help with child care while she worked. As the abuse escalated, Helen told her family, “if anything happens to me, he did it.” Helen found
herself at a point where she sensed the risk of being killed was too great to stay. When the
police did not arrest the batterer after one potentially lethal assault, Helen managed to
escape with the help of her family. Helen shared her experiences with the various resources
she utilized in trying to stay safe and financially stable, including shelter, police, the courts
and social service programs. Helen’s ex-boyfriend is allowed contact with the children, and
he uses that opportunity to continue to threaten her.

At the time of the interview, Helen was working and taking classes. She hopes by
participating in this study, her story and experiences can help other battered women find
hope and safety, particularly those who share her cultural background.

~ MEGAN ~

Megan is an African American and a mother. She shared her history of physical and sexual
violence, beginning with leaving home as a young teen to escape an abusive parent.
Without any solid support, she soon became dependent on an abusive boyfriend and then
an abusive husband who attacked her during her pregnancy.

Megan left her husband safely, and through friends, met her next partner, who also abused
her. She described how he was jealous, possessive and violent. He punched and beat her,
burned her, threatened her with a weapon and abused her sexually. He often threatened to
kill her if she ever tried to leave. He moved her and her child several times in order to
isolate them. During the abuse, Megan sought help from the police, health care providers,
advocates and shelters. She bravely escaped after the batterer attempted to assault her
child and lived in several shelters to stay hidden from him. She obtained a restraining
order against the abuser.

Today, Megan is employed and planning to get involved with anti-domestic violence efforts
in her community.

~ ROSE ~

Rose is an African woman and a mother. Born in another country, she married a man
whose family immigrated to the U.S. from that country.

For years, Rose’s husband abused her physically and psychologically, often relying on
distorted cultural norms and beliefs as a basis for his abuse and to shame her into
obedience. He set up elaborate rules and punishments, withheld money from her for basic
needs, and sabotaged her employment and education. He beat, strangled and raped her.
The beatings increased in frequency, and he threatened to kill her and the children if she
tried to leave him or if she ever told anyone about the abuse. He also engaged in culture-
specific acts that indicated to Rose that he was planning to murder her. She started to sleep
with her children as well as her car keys and wallet in case she needed to escape quickly.
Rose explained how she told her children, “If Daddy is killing mommy, call 9-1-1.” During a
brutal, potentially lethal assault, one of the children did call the police, however, her
husband was not arrested. But Rose knew she needed to escape then with the children and
managed to do so safely. She obtained a restraining order and found help through personal contacts and a local domestic violence shelter.

Today, Rose is successfully pursuing an advanced graduate degree, and continuing to remain safe with her children.

~ CAROLYN ~

Carolyn is a White woman with several children. Like many other survivors in this study, Carolyn witnessed domestic violence between her parents. She also survived childhood abuse.

Carolyn dated a man who turned abusive once she became pregnant with their child. He shoved her against walls, punched her, broke her ribs, strangled and threatened her with weapons. Her boyfriend threatened to kill her on numerous occasions, destroying phones to prevent her from calling 9-1-1. Similar to Sarah, Carolyn’s boyfriend would hold her children hostage and threaten to kill them unless she stayed with him. Carolyn reached out for help on numerous occasions by calling the police and obtaining restraining orders. The batterer was charged for assault, but he pressured Carolyn into having the charges dropped. Carolyn cited her dependency on him for household income and child support as factors that compelled her to agree to probation instead of a jail sentence for him. Post-release, his abuse escalated, but with the help of a social service professional, Carolyn managed to escape with her children.

Although her ex-boyfriend continues to victimize Carolyn through the courts via custody hearings, Carolyn and her children have stayed safe in shelters. She and her children have received therapy, and Carolyn has recently been working with a local shelter and community leaders to become a public education advocate for ending domestic violence.
ASKING FOR HELP

The Survivors’ Experiences and Recommendations

All of the women in this study asked for help in trying to leave the abusers. Not all responses were lacking and many were helpful, but for abused women, even one negative response can keep her from asking again. Frequently feeling isolated, fearing injury or death, battered physically and emotionally, and with low self-esteem, it is a tribute to these women that they found the strength to persevere. Each sought help in different ways and from different sources including looking to families and friends, going to the police, getting a restraining order, and seeking refuge in shelters. It is also a tribute to those who did respond to these women’s needs and helped them get away from the abusers.

For contextual reasons, the researchers provide two overarching issues that were integral to the women’s experiences in asking for help: 1) the challenges of diversity, and 2) jurisdictional concerns.

Then, the following subsections are provided as outlined earlier:

a) Family and Friends

b) Law Enforcement and the Judicial Systems

c) Domestic Violence Service Programs/Shelters

d) Health Care

e) Other Sources of Help: Faith, Education System and Immigration Services
Diversity of New Jersey reflected in diversity of survivors, their experiences and needs as well as available resources

The diversity of New Jersey is reflected in the diversity of domestic violence victims, their experiences and their needs. This diversity presents challenges to the state and its communities to meet the varied needs of victims appropriately and with sensitivity.

New Jersey’s diversity can be appreciated in the following illustrative facts:

- New Jersey is over 7,495 square miles with a population of nearly 9 million. It is the most densely populated state in the country. The state is geographically diverse, ranging from rural farmlands to major cities, with large suburban areas.
- According to the 2008 New Jersey Census, its population was estimated to be 76% white, 14.5% Black, 7.1% Asian, and almost 2% Native Hawaiian, other Pacific Islanders, American Indians or Alaska Natives. Over 16% of the population is Hispanic or Latino and over 17% is foreign born, with 25% of New Jersey residents reporting that they speak another language other than English at home.
- In 2007, the year when the current economic crisis was just beginning, 8.5% of residents were living below the poverty line. In 2009, when the economic downturn was referred to as the ‘great recession’ and nationally the unemployment rate went above 10%, the number of persons living in poverty in New Jersey also increased.

Just as there is considerable geographical and socio-economic diversity, there is structural diversity in New Jersey such that it has 21 counties containing 566 incorporated municipalities, with different resources within counties and municipalities. There are over 500 law enforcement agencies in the state; and each county typically has one domestic violence service program and shelter. It is important to note that because the counties and municipalities have different resources and structures, the availability and provision of services to domestic violence victims is likely to differ also. For example, the police response to an abuse victim’s 9-1-1 call for help can be better or worse depending on if they are in a rural or urban area, if the police departments are small or large, and/or if the police see greater or fewer numbers of victims. In a similar vein, domestic violence shelters may be better or worse equipped to respond to victims’ diverse needs depending on where they are located. Shelters in the 21 New Jersey counties have different resources and funding streams, and different numbers of staff and volunteers. Therefore, the actions or lack of actions by state and community systems, and others reflect geo-political and socio-economic realities. Victims have different needs and just as ‘all victims are not alike’, you will also see illustrated in the remainder of this report, that the systems and communities the women reached out to for help were also not all alike.

It is also important to repeat that the 11 participants reflect New Jersey’s diversity. Most participants (7) are Black or African American, and some immigrated to the U.S. The cultural, racial and ethnic backgrounds of participants can affect the needs of the women but also the responses from the various helping agents and may explain the different experiences that will be described in this report. The researchers acknowledge that any explanation of differences among victims’ needs and the responses to them is incomplete when culture, race/ethnicity are not taken into account; however, there was insufficient time during the single interview to question participants about their perceptions in these regards. Follow-up interviews were considered but it was decided that future studies would need to investigate these issues.

Jurisdictional Issues

Jurisdictional issues were problematic for most of the women in our study. The women told of difficulties in reporting incidents of abuse and restraining order violations to police and in getting social services when they crossed state or county lines.

An important exception was the shelter system. At least six of the 11 women crossed state lines to flee or hide from the abusers. Two were seeking shelter while living in a neighboring state and found refuge in New Jersey. One of these women was told by the neighboring state’s domestic violence program staff to call back the next day to see if shelter would be available. None of the women reported refusals of services from domestic violence service programs in New Jersey when they crossed county or state lines.

Law Enforcement: “Out of their jurisdiction”

Several women were told by police in New Jersey and neighboring states that they could not take a report of a domestic violence incident that took place in another state because it was “out of their jurisdiction.” And some women were told by police to wait until something happens in their jurisdiction, and for these women this meant “wait until he kills you.” Here is what Norma heard when she went to the police in New Jersey after an incident with her husband in a neighboring state:

I went to the local police department and they said they can’t do anything until he threatens me in New Jersey, and [the neighboring state] authorities weren’t doing anything... Nobody would believe me. Or, people would say ‘my hands are tied, wait until he kills you, then maybe we could do something,’ you know, like, come on.

Relocation of victim and families

Abusers often stalk their victims and can be determined to find them. Geo-political barriers to victims seeking help from law enforcement and service agencies can increase victims’ risks and the women’s challenges in trying to escape from the abusers. By moving from a county or state, a woman’s safety might be increased as was pointed out by one of our participants. Relocation of the victim and her children is one option that could allow them some protection from abusers. This means that the women and their children have to leave their homes, their families and friends, their jobs and schools. However, Alice explained what happened with her social services when she sought shelter in another county:

They [social services] knew I lost my house and everything in it ‘cause I told them. At every step when I was losing my house I asked them for help to keep it, they wouldn’t. Then I ended up fleeing, when I fled they cut me off. Then when I was in a new place, they told me they were gonna cut me off and they wouldn’t keep me on there even though the lawyer [at the domestic violence service program] was telling them to. They wanted me to file up north. They cut me off.

Jurisdictional issues are among the barriers for victims of domestic violence to get help and live more safely. These issues need to be addressed by state and local agencies in a way that provides coordinated services for victims and their families.
Survivors’ Recommendations
(Survivors’ recommendations are followed by a commentary or elaboration if required.)

In an effort to enhance victim safety, enable victims to obtain or maintain services when they cross county lines or relocate to another state.

One survivor related: “...when I went up there, social services had cut me off and the [domestic violence program] lawyer made it that my benefits stayed in that county no matter where I would move. She wanted one person working on my file ’cause you’re gonna get different people, you don’t know who they know. This family [the abuser’s] that was doing this to me was from that county and had lot of connections, so she felt that it was best that one person handle it, it would be in lock down, they would keep me there no matter where I was placed and make it look like I was there.”

A second survivor lamented: “It’s a shame states didn’t send people to each other, like New Jersey sent to P.A. or Maryland, just transfer, take one, give another, just get them out, get them away, cause I’m too close to where this happened, its less than an hour. There’s constant fear. Oh let me add this, public assistance would not relocate me in any way, never give me housing of any sort to relocate, and when I wanted to and begged them if I go to another state where I have a girlfriend that I’ll have a support.”

Investigators’ Comments: Effectively, the first survivor and an attorney associated with a domestic violence service program, were asking for a more coordinated response for victims, such that one person in one county processes the records for a woman’s case and assists her in getting social services, thereby increasing services and simultaneously decreasing the chances that information about the woman may be mishandled and possibly inadvertently exposed to the abuser. A third survivor asked for a “closer knit” among agencies in the interests of the victim’s safety. To assist victims and their families relocate to another state would also require a coordinated response between states and among New Jersey’s agencies. The second survivor also related that the social service’s response to her request to relocate to another state was: “They said they would pay for the bus tickets for us, that’s it.”

Enable victims to cross county lines to file police reports and have their cases heard in a new venue, when “there’s been a political tie or governmental tie or police department tie.”

This survivor felt that in certain circumstances, such as hers, victims should be allowed to go out of their county of residence in order to get the case “out of that circle of influence.” By “circle of influence”, she was referring to cases “...where there’s been a political tie or governmental tie or police department tie.” To better serve and protect the victim, the service responses to victims in such cases need to be handled out of county.

Investigators’ Comments: Some women are battered by men who have formal and/or informal ties to government, law enforcement or other forms of power and influence. The formal ties often place those tasked to help victims and hold batterers accountable in a position that allow batterers to receive special treatment, thereby compromising victims’ safety. Informal influences, for example personal or professional relationships that can interfere with a sense of duty or impartiality for those responsible for holding the batterer accountable. The effect of both of these scenarios is to embolden batterers and re-victimize victims. Victim safety must be of primary concern. The investigators recommend that a committee look at such scenarios, i.e., where the victim asserts that formal or informal influences or conflict have compromised the police, prosecutorial, or judicial response to a case of domestic violence, and determine how best to help victims be safe and enhance their ability to seek justice.
Asking for Help: Family and Friends

The women in this study did ask for help during the abusive relationships. As will be discussed in the remainder of the report, the women asked for help from those who are in a position to render assistance to victims of domestic violence: law enforcement, the courts, and domestic violence service programs and shelters. However, it is expected that a logical first place for the women to seek help would be from their families and friends.

Some families were supportive. Some of the women’s families provided important support. Six of the 11 women mentioned that their mothers in particular were supportive, often providing a place to stay and childcare. One woman stayed with her sister for several months. Another had her children stay with her grandparents for a time. These sources of everyday support are provided for victims trying to get away from the abusers temporarily or permanently. In general, little is known about how much support families provide to family members experiencing abuse.

Carolyn acknowledged that she had a “wide support system” but she also said that she was not “ready to walk away” from the abuser. Furthermore, Carolyn recognized that her abusive husband had “something wrong with him.” In her words,

I had people that supported me... you think that they [the abusers] will get better or things will change. Your focus changes to helping them instead of helping [yourself] ... there’s nothing wrong with me but there’s something wrong with him, and despite the fact that I did have a wide support system, I had to be ready. It had to be me, not what people told me. I knew what all the facts were. I grew up in a home where there was violence, and so I knew, but you have to personally be at a point where you’re ready to walk away. People can tell you and put you and take you and move you and you’re gonna go back if you think that there’s any hope or chance that there’s gonna be a difference.

As discussed in the previous section, leaving is a process that includes victims thinking that the abuser will change and that they can help him. This unfounded optimism can be frustrating for families and friends who think the answer is simply to leave the abuser.

Some families were not supportive. Not all of the women were fortunate to have the support of their families. For several women, the abusers threatened to kill the victims’ mothers, and so even family members were fearful of them. Barbara related how her family responded when she needed a place to stay:

I even turned to family members and they just don’t have room in their house because they taken on other members or its just they don’t wanna be involved with that situation because they know this erratic person will come and harass them.

Some women were isolated from their families. Several women had little or no family to rely on for various reasons including that they were immigrants and their families were in other countries, and/or the abuser had isolated the woman from her family and friends. Furthermore, some family members were frustrated because they could not understand why the women did not leave the abusers sooner. Megan’s family could not understand how she stayed in an abusive relationship and thus, her sister refused to take her in:
My family knew. They didn’t care… I believe they were waiting for him to kill me. …when you get into something that you think is gonna be good for you and it turns out to be terrible, sometimes it’s hard to, very, very hard to get out. She [her sister] was telling me just to leave, but it wasn’t that easy. It wasn’t that easy at all. I even asked her if I could come and stay with her for a couple of days and she made every excuse in the world.

Few friends provided help. Very few women mentioned friends or neighbors who might have listened and provided some help. Typically most people do not want to get involved and often do not know what to do in such situations. Several women mentioned that they were too embarrassed or ashamed to tell friends or family.

A notable exception was a co-worker who provided information about the Employee Assistance Program. By going through this program, Tess met with social workers and therapists, and was eventually directed to a county Domestic Violence Service Program:

I guess it was fortunate that my company had this program set up... I don’t think I knew that we even had it at the company. But I didn’t have my own office, I shared an office with one other woman, who actually was the one who said ‘you really need to call this number that we have here in the company’.

Employee Assistance Programs (EAPs) “are employee benefit programs offered by many employers, typically in conjunction with a health insurance plan. EAPs are intended to help employees deal with personal problems that might adversely impact their work performance, health, and well-being. EAPs generally include assessment, short-term counseling and referral services for employees and their household members.” 59

For Tess, her co-worker may very well have helped save her life or at least helped her get out of an abusive relationship. The EAP referred Tess to a counselor who helped her recognize that she was being abused and to connect with the local domestic violence service program.

Family Histories of Domestic Violence. Five women mentioned family histories of abuse in which they witnessed their mothers being abused. However, they also related how the abuse was not talked about, possibly resulting in that some women would not know what a non-abusive relationship would be like and/or how to get out of the abusive relationship they were in. Barbara said, “Even though I had family members that been through it, it was like a secret. Why is it a secret?”

Then Barbara elaborated that she didn’t understand the dynamics of domestic violence such as when abusers isolate the women from others to control them, and that she had to come to her own recognition of what was happening because it was a “live through” process:

But that was his way of, what you call that? Pulling you away? The isolation process, to get you to stop speaking to people. To get you to not even look at other people so you are too isolated and then he has all this control over you. But I didn’t know that at the time. My family, my mom and my sisters also lived through abusive relationships but it was never anything anyone talked about so I didn’t know it. No one told me if a guy says this

like that, or if he say certain questions, or certain demands, get away from him. They didn’t tell me none of that. It was a live through process. You live through it and learn. If you live through it, you learn, put it that way.

And once again, Barbara's reflection is very telling of her fear of being killed by the abuser as she ended by emphasizing and restating her point, “If you live through it, you learn, put it that way.”

Living in families where there is domestic violence and witnessing abuse can result in social learning that normalizes abusive relationships. In addition to growing up in an abusive family, at least three women were in abusive relationships previously. More education on domestic violence and earlier interventions can help to break these cycles of abuse.

**Familial Collusion.** Six women mentioned that the abuser’s family knew about the violence, and four told of how family members colluded to keep the abuse quiet, to keep the victim from reporting the abuse, and the abuser out of jail. Sarah saw the abuser’s family collusion in a doctor’s office when her son was hurt by the abuser. A story was created to deceive the doctor about how the injury occurred:

...not really knowing the dynamics of their family, this is what they do, they cover for each other. See, the mother covers, the brother covers. ...They clean each others’ messes up. So I’m thinking she’s helping. She’s perpetuating the cycle.

Sarah thought the abuser’s family had rallied because the child was hurt, but she realized that they had come together to protect the family secret of abuse.

Similarly, Carolyn’s mother-in-law not only bailed the abuser out of jail when he was arrested for domestic violence offenses and restraining order violations, but she also would “baby-sit” Carolyn when the abuser was on a “binge” or Carolyn was too badly beaten to care for the children. This was also an effective method for keeping Carolyn home and not telling anyone about the abuse, and especially, not calling the police. Carolyn told us,

...usually some of the fights would start either after or before when he had the urge to go on a binge and disappear for a couple of days. It was a very sick situation because he would have his mom come and baby-sit me, so that I wouldn’t, despite the fact that there are many police reports, to try to prevent there being any kind of charges or anything pressed or for me to go through with anything, he would have usually his mom come. And usually I was beat up to the point where, there were children in the home to be taken care of and if I couldn’t move somebody had to be there to take care of the kids, so he made it seem like he was doing it so that it was for the kids but really, I was being babysat.

Carolyn’s story is among the most egregious of familial collusion. Sadly, the participants in this study demonstrated what is fairly well known now, that families also can perpetuate the cycle of violence and that abusive relationships are often learned.
**Survivors’ Recommendations**

*(Survivors’ recommendations are followed by a commentary or elaboration if required.)*

**Education about the dynamics of domestic violence is needed for families and friends of victims.**

“There needs to be more, whether it’s seminars or things that people could attend and be participating in, because when it comes to your family and friend[s], they just don’t understand it. But [others said], ‘He hit you? Leave.’ ‘I can’t.’ ‘Well, why the hell not? Leave. What’s wrong with you? Leave. You need to leave. Why, you can’t just leave? Yes you can, you pick up your stuff and you walk out the door.’ No, you can’t do that because they will kill you. No, they don’t understand.”

**Public education about domestic violence is needed and should be provided at more public places and events.**

“It does need to become known that it does happen to the girl next door. It does happen to the school teacher and sometimes even the doctor or whatever. It happens to everybody. There’s nobody that is exempt from the circumstances that involve domestic violence and I don’t think that people are aware of that. And, there needs to be different things where everybody could be educated, and you don’t have to be a victim to be educated on it.”

**Investigators’ Comments:** In its 2006 report “Responding to Victims”, The New Jersey Domestic Violence Fatality Review Board (DVFRB) recommended that the DVFRB coordinate with the New Jersey Division on Women, other government entities and the New Jersey Coalition for Battered Women towards the creation of a statewide public education campaign promoting awareness of domestic violence in a manner that is culturally sensitive and linguistically appropriate to the diverse communities within New Jersey.60

---

60 Last accessed August 2, 2010:
Asking for HELP: Law Enforcement and Judicial Systems

“Domestic violence is a crime. If you are in immediate danger, call the police.”

Of the 11 women interviewed for this project, all but one woman called the police for help because they were being abused by a current or former intimate partner. Some women contacted the police many times over the course of weeks, months or years, and others contacted the police only several times. The women called during or after assaults and to report restraining order violations by the abusers. When the 10 women were asked if police responses were helpful or not, most provided instances in which the police actions were appropriate, but all related incidents in which they felt the police failed to protect them or could have done more to help them. The police responses to these women’s calls for help differed by individual police officers. Carolyn’s statement epitomizes what most of the women told the researchers:

Some of them [police] were just more compassionate and more sympathetic to the situation, more understanding. They seemed to be more educated on the background of domestic violence and why it’s not as easy to leave and then you had police officers that just were, ‘why do you stay?’ They just didn’t care. Like, ‘well if you want to stay, then I dunno what you want me to do because we have to keep coming back’. They’re just very cold at times. …if you’re looking to make progress, the police really need to be educated.

In nearly all of the interviews, the police responses differed within police departments and within counties as did law enforcement and the judicial systems’ responses generally. Throughout the interviews, the women described incidents in which the system responses were seemingly inconsistent, such that the women were unsure of how they would be treated when they asked for help. It is therefore understandable that some of the victims were reluctant to call for help because they could not depend on a response that was consistent and helpful.

Although one woman was too fearful of the abuser to call the police, the other 10 women reached out to New Jersey’s law enforcement and judicial systems.

- Ten women called the police asking for help, usually for the police to come to their homes. After at least one incident, the ten women who called the police, lodged complaints against the abusers.
- Nine women took out restraining orders against the abusers.
  - Four men countered by taking out restraining orders against the women.
- Six men were escorted from the scene of the domestic violence offenses or they were arrested for making terroristic threats against the women, assaulting the women and/or violating restraining orders.
- Six men were probably jailed for domestic violence related offenses but jail stays were typically several hours. (The women’s understanding was that the men were jailed but the women were often uncertain regarding the specific charges that triggered the incarceration and even whether the men were actually charged and spent time in jail. The women’s uncertainty may indicate poor communication between the victim and the police, as well as their confusion about what happened during various incidents.)

61 “Domestic violence is a crime. If you are in immediate danger, call the police.”
At least three women met with a member of the Domestic Violence Response Team (DVRT) at the police station. *(Not all municipalities had DVRTs at the time of some of the incidents.)*

Six women said they spoke with prosecutors about the crimes committed against them, but none reported positive interactions. *(It was unclear if the women spoke to the county prosecutors, assistant prosecutors or municipal prosecutors.)*

Ten women appeared before a judge because of domestic violence offenses committed against them, restraining order applications, restraining order violations by the abusers, child visitation requests from the abusers, as well as other reasons such as the abusers' efforts to continue to harass the victims through the court system.

In this section, the women’s experiences with law enforcement, judges and the legal profession will be described along with the women’s recommendations for what might have been helpful and what might have improved their safety then and other victims' safety now.

**Overview of Law Enforcement and the Judicial Systems’ Responses to Domestic Violence**

**The Prevention of Domestic Violence Act**

Law enforcement and the judicial systems' responses to domestic violence are predicated on the *Prevention of Domestic Violence Act (PDVA)*. The PDVA is an umbrella law that includes the following offenses: homicide; assault; terroristic threats; kidnapping; criminal restraint; false imprisonment; sexual assault; criminal sexual contact; lewdness; criminal mischief; burglary; criminal trespass; harassment and stalking. Persons committing acts of domestic violence can be charged with the offenses enumerated above rather than charged under the PDVA.

The PDVA has requirements for law enforcement and the courts concerning responses to domestic violence incidents which also delineates specific victim’s rights.  

- Law enforcement officers are mandated by the statute to arrest the perpetrator if the officer finds probable cause that an act of domestic violence has been committed and if the victim exhibits signs of injury caused by domestic violence, or a warrant is in effect, or there is probable cause that a perpetrator violated a restraining order, or a weapon was used in the commission of a domestic violence offense. Both the guidelines and police training stress the mandatory arrest provisions of state law.

---

62 Information about the Prevention of Domestic Violence Act can be found at the New Jersey Judiciary’s website: NJCOURTSONLINE.COM. Last accessed May 10, 2010. [http://www.judiciary.state.nj.us/family/fam-06.htm#act](http://www.judiciary.state.nj.us/family/fam-06.htm#act)

63 The legislative intent of the PDVA requires law enforcement personnel responding to domestic violence to prioritize enforcing the law and protecting victims of domestic violence. It acknowledges that law enforcement and the judicial systems have treated the fourteen enumerated offenses under the PDVA differently when they occur in the context of domestic violence as compared to similar crimes outside the context of domestic violence. [http://www.state.nj.us/lps/dcj/agguide/dvpolrsp.htm](http://www.state.nj.us/lps/dcj/agguide/dvpolrsp.htm)


65 Police also are instructed that the *Prevention of Domestic Violence Act* requires that they not arrest a victim who uses force in self defense. If police arrest the victim, they may have legal remedies against the officer, such as lawsuit for false arrest, false imprisonment, violation of civil rights, etc. Also included in the guidelines is a provision that if a police officer arrests both parties, the officer must state in the officer's incident report the probable cause for arresting each person and that this must be approved by the officer's supervisor. Officers are taught in training how to determine who is the predominant aggressor and this general criteria is also included in the guidelines.
The law enforcement officer must sign a criminal complaint when the above circumstances exist. Absent the aggravating factors described above, arrest is discretionary. This action takes the burden of signing a complaint from the victim and highlights the seriousness of the offense while leaving the victim less vulnerable to pressure or reprisal from the perpetrator.

**Probable cause** depends on the totality of circumstances confronting the officer. In essence, it is a complex subject that is fact centered. Police officers are instructed on the criteria for determining probable cause in the academy recruit class and in in-service training. The U.S. Supreme Court has defined probable cause as a "fair probability" that the person committed a crime. It also has been defined as "reasonable grounds to believe" that a person has committed a criminal offense.

Law enforcement is required to explain and to disseminate a victim notification card, written in Spanish and English, outlining the rights of a victim of domestic violence, including the process for obtaining a temporary restraining order. Also, the officer is required to assist victims who may want a temporary restraining order by explaining the relief that can be provided by the court and by contacting an on call judge who can issue a temporary restraining order. Law enforcement officers are also required to write a police report when responding to a domestic violence incident.

To protect victims of domestic violence, the PDVA requires that officers responding to the scene question the persons present to determine if there are weapons on the premises. The law further provides that the officer must seize any weapon the officer reasonably believes would expose the victim to a risk of serious bodily injury. If the weapons are not on the premises, the officer may obtain an administrative search warrant to search for and seize the weapons.

As first responders to the scene of domestic violence incidents, law enforcement officers have an important role in the protection of victims. They are often considered the gatekeepers of the law enforcement and judicial systems’ responses to acts of domestic violence. The lack of an informed, compassionate and helpful response by the police may cause victims to reject the resources provided by law and those who the law enforcement and judicial systems’ employ to assist victims. An element of faith or trust can be essential to the future of the victim and their children in proceeding safely toward removing themselves from the violent environment. The officers should be the eyes and ears of the prosecutors and the judges in determining what bail conditions may be imposed against the batterer, and what charges should be filed. Officers often are key witnesses in the State’s prosecution of batterers.

**Guidelines for New Jersey’s Law Enforcement Response to Domestic Violence**

The state’s law enforcement community is comprised of the New Jersey State Police (NJSP), 474 full-time municipal police departments, one part-time municipal police department, and 76 municipalities without local police services that are serviced by the NJSP. There are also 15 police departments that contract with other municipalities to provide services. In addition, there are 21 county prosecutors’ offices and 21 sheriffs’ departments, one county police department, three county park police departments, and 14 college campus police departments. Collectively, there are a total of 546 law enforcement agencies in the state.66

New Jersey's law enforcement system is responsible for protecting the public and enforcing the law throughout this geographically diverse state with demographically diverse communities. Although the PDVA does not specify a detailed, uniform statewide standard operating procedure (SOP) for the law enforcement response to incidents of domestic violence,

---

each local police department and the NJSP have developed their own SOP’s with some issues considered to be standard police practice in any police response. Guiding this process is the Domestic Violence Procedures Manual, issued under the authority of the Supreme Court of New Jersey and the Attorney General of the State of New Jersey. This manual promotes a uniform approach to incidents of domestic violence that each department’s procedures should incorporate. Given the diversity of New Jersey, the sizable law enforcement community and that some latitude exists in the development and implementation of SOPs by the local police departments, differences in responses to domestic violence are likely. However, such differences can negatively impact victim safety.

Since 1983, the New Jersey State Police (NJSP) has compiled statistics on domestic violence from most of the law enforcement agencies in the state and published a separate chapter within its annual Uniform Crime Report (UCR). The data in the chapter reflects what’s being done by law enforcement throughout the state with statistics provided by county and municipality on domestic violence offenses, arrests, homicides, etc. According to the 2008 UCR’s Domestic Violence Statistical Summary:

- There were 57 domestic violence murders, which represent a 50% increase compared to 38 murders in 2007.
  - Of the 57 murders, four out of five or 45 were women.
  - The elderly were victims in 21% of incidents.
- There were 71,613 domestic violence offenses reported, of which 75% or 53,810 victims were women.
- Of the legally reportable domestic violence offenses, assaults and harassment accounted for most of the reports: 43% (30,429) and 43% (30,023) respectively.
- Arrests were made in fewer than a third of offenses (31% or 21,665).
  - Of the 30,429 assaults reported, roughly half (15,017) resulted in an arrest.
  - 2,966 arrests involved domestic violence restraining orders, of which most or 1,793 were arrests for restraining order violations only, and the rest included an offense arrest.
- The number of domestic violence complaints that had prior court orders issued against the offenders was 15,481.
  - Over a quarter (27%) of all complaints resulted in injuries, and serious injuries represented 1,497 offenses.

The statistical summary shows that domestic violence murders and other criminal offenses are mostly perpetrated by men against women, and that arrests were made in less than a third of reportable offenses. Also note that UCR statistics are based on the legal definition of domestic violence provided in the Background section of this report; and therefore, these statistics do not include the coercive control tactics employed by abusers such as psychological, emotional and financial abuse. For other limitations of UCR data, see the annual report cited above.

The increase in domestic violence murders in 2008 is especially concerning and may be related to the economic crisis. Nationally, some states and cities are reporting increases, e.g., Wisconsin and Philadelphia, for 2009 and the advocacy community is experiencing surges in

---

calls for information and shelter. Given the continuing economic crisis, including increases in unemployment which is among the risk factors for domestic violence femicides, the negative impact on victims nationally and in New Jersey might be expected to persist through 2010 at least. However, advocates and others point out that the economic crisis or unemployment do not cause domestic violence but can exacerbate existing violence in the home.

**Overview of New Jersey Courts**

The New Jersey court system is comprised of four types of courts: 1) Municipal courts, 2) Tax Court, 3) state Superior Court, which includes the trial courts, and 4) an Appellate Division and the New Jersey Supreme Court. Domestic violence cases may involve both civil and criminal law and they are predominantly handled in local, municipal courts and the state's Superior Courts.

There are over 500 Municipal Courts or local courts throughout New Jersey. According to the 2008 Municipal Court Statewide Statistics, of the over 6 million cases that were heard in Municipal Courts, approximately 85% were for parking or traffic offenses, over 417,000 cases were for disorderly and petty disorderly persons offenses, i.e., domestic violence, and another 206,000 were indictable offenses which are serious criminal matters that are transferred to Superior Court, and which include domestic violence related cases. An example of a domestic violence case that may be heard in municipal court is when the batterer is charged with 'simple assault' that caused bruising or broken bones to the victim.

New Jersey's Superior Court system or trial courts are composed of over 400 judges based in the 21 counties. These courts conduct criminal, civil and family-law trials. In one year, there are over a million trial court filings and over a million resolutions of cases, resulting in a relatively low backlog of cases. Criminal, civil and family cases are heard in the trial courts, more than half of which are civil cases. According to the 2008-2009 Annual Report for New Jersey Courts, 55,677 domestic violence cases were heard in the Family Division. No statistics were provided for the numbers of domestic violence related cases heard in the Criminal or Civil Divisions, which had over 50,000 and 560,000 cases respectively.

**Determination of charges**

In most counties, the police officer who responds to a domestic violence incident determines what charges against the defendant are appropriate. In only one county in New Jersey, the police must have the approval of an assistant prosecutor before they can file charges against a person. The officer completes the Criminal Complaint against the defendant and either releases the person without bail if a summons is required by Court Rule or contacts the judge if a warrant is appropriate and bail is to be set. Court Rules regulate the process.

---

70 New Jersey Courts Overview. Last accessed 5-11-2010. [http://www.judiciary.state.nj.us/nj_overview.htm](http://www.judiciary.state.nj.us/nj_overview.htm)
In Superior Court, the County Prosecutor has ultimate jurisdiction over the presentation of a case and only the prosecutor can dismiss the charges. The victim may have input but in a criminal case, the State is the victim. The injured party is not legally the victim. The prosecutor also determines the ultimate charges against the defendant. The prosecutor is not bound by what the officer charged. In some cases, the prosecutor may charge a higher degree offense if the evidence warrants it or reduce the charge(s) or dismiss the charge(s), again depending on the evidence. In Municipal Courts, charges may be amended or dismissed by the Municipal Prosecutor.

The information above provides a brief overview of law enforcement and the judicial systems’ responses to domestic violence as context for the remainder of this section in which the survivor’s experiences with law enforcement, judges and the legal profession will be described, followed by the women’s recommendations for what might have been helpful and what might have improved their safety then and other victims’ safety now.
The Women’s Experiences with New Jersey’s Law Enforcement and Judicial Systems

Law Enforcement: Calling the Police for Help

For victims of domestic violence, the police are often the ‘first call for help’ as a number of the women made apparent during the interviews. They were putting their trust in the police to help them from being beaten, terrorized, harassed, stalked and/or possibly killed by current or former intimate partners. Recall the title of this report: “let me see tomorrow”, which reflects Rose’s fear of being killed by the abuser, a plea for help, as well as hope for a future. In effect, Rose’s reason for asking the police for help: “So all of this that I was doing, like calling the police, was just the determination to live the next day.”

Calls to 9-1-1

Of the 10 women who called the police for help, each called 9-1-1 at least once. Several women used the strategy of secretly dialing 9-1-1 during an assault or home break-in by the abusive intimate partner so that the police could respond to the location. For example, Helen related, “I just dialed 9-1-1 and I hung it up, I didn’t speak to anybody. Then, the knock came, the cops came.”

Two women told how they called 9-1-1, and by leaving the line open, the abuser’s threats to kill the victims were overheard. Sarah said they got him on tape saying, “you call the cops on me – now bitch you gonna die.” And while Norma barricaded herself in the bedroom as her husband tried to bang down the door, she said, “the 9-1-1 operator was on the phone with me for 10 minutes until the police came.” At least one victim’s child called 9-1-1 for help. Notably, there were no complaints by the women about calls to 9-1-1. However, Carolyn commented about the time for the police to respond after calling: “It’s like being on death’s door, waiting for help.”

In a rare case, an employee at a local business, who witnessed a husband verbally and physically abusing his wife called the police. It is disconcerting to also have learned from these 11 women that only one woman said a neighbor called in a report to the police. Too often, people do not know what to do and/or do not want to get involved in domestic disputes.

When Police Respond to a Domestic Violence Call

All but one woman called the police. Some called them several times, and about half called numerous times, during or after an assault. Alice estimated that there were “thirty something domestic violence reports in my town [that] documented” [the abuse]. Women’s injuries, fear of the abuser, broken phones and other reasons often made it impossible for the women to contact the police. Nearly all of the women took out restraining orders against the abusers and then called the police when the abusers violated the restraining order, frequently by showing up at the home. Calls for restraining order violations will be discussed later in the section.

There were three responses by the police when these women called for help during or after an assault: 1) the police arrested the abuser and/or took him to the police department; 2) the police came and left without making an arrest, or 3) the police escorted the abuser off the premises.
1. Police “arrest” the abuser

According to the NJSP’s Uniform Crime Report cited above, arrests were made in less than a third of domestic violence offenses. Of the survivors interviewed who called the police to the home during or after an assault, and the men were taken away, sometimes in handcuffs or arrested later because they had fled the scene, the women were uncertain if the men had actually been arrested. Four women recalled probable arrests for crimes of simple assaults or terroristic threats. Alice tried to recall what happened after one of many assaults by her husband and after calling the police for help: “It’s hard to remember if he, I think he was taken to the police station but then they let him go, he was home the same day.”

While the women’s recollections may be faulty because of the trauma and stress they were living through, their statements point to a greater need to ensure that victims understand what is happening. Helping agents, in this case the police, may need to confirm that they are communicating the procedures that affect victims and their safety.

Victims of crimes have numerous rights including that in most circumstances, they are to be notified upon release of the offender. In New Jersey, there is a statewide victim notification program. However, during the interviews with the women in this study, none recalled being notified of the men’s release. Several women related their shock at seeing the abuser show up at the home seeking forgiveness or trying to talk the women into dropping the charges. And one woman specifically said that after two assaults and arrests of the offender she had received no call from the “victim notification program.” Both times she said this without being asked by the interviewers, and it was clear that she had expected to be notified upon the release of her abusive ex-boyfriend. Therefore, it appears that domestic violence victims are not automatically registered into the notification program and that there are circumstances when the system is not activated.

Regardless, it is difficult to understand why the men were released so quickly. The abusers who were arrested according to the women were released the same or the next day. For these abusers, the consequences for the violence perpetrated appear to be inconsequential.

---

75 Among the reasons why there may not be more arrests recorded in the UCR is that the offense report may be recorded and arrests may be made subsequently, i.e., the offense is recorded but the arrest is not. However, this may be less likely with domestic violence offenses in which the perpetrator is known. See the UCR using the link above for such limitations of UCR data. Even if the ratio of domestic violence crimes to arrests is 2:1, the differences are problematic for the accountability of abusers.


77 Court rules mandate that defendants for certain crimes are to be released on own recognizance (ROR) except in limited circumstances where an arrest warrant would be issued and bail set. In some of these situations where defendants could not post bail, they would be sent to the county jail, which then would be required to notify victims of defendants’ release. The failure of notification about the Victim Information and Notification Everyday (VINE) System could have been because this system is only activated for those victims whose offender has been arrested and lodged in a county correctional facility. The procedure for informing victims when a defendant is released ROR is covered in the Training Guide for Completing the Victim Notification Form, Rev. 4/05, where it provides that if the police officer knows that a defendant will be released ROR, the officer should explain this procedure to the victim when the officer is talking to the victim. The Training Guide further provides that no further notification regarding defendant’s release will be made to the victim.
In contrast, Carolyn’s experiences with the police response to assaults by the abuser seemingly differed from that of the other women interviewed. Carolyn was battered for years by her husband. As related in an earlier section of this report, sometimes Carolyn’s injuries were so severe that her mother-in-law came to “baby sit” her, and care for the children, but also to make sure that Carolyn did not contact the police. Carolyn feared what the abuser would do if she did report him, and she was concerned about her financial well-being if she lost the abuser’s support. As Carolyn told the interviewers, there was also a time when she was not ready to leave the relationship. However, the abuse progressed when Carolyn was pregnant and eventually the police arrested him and charged him with aggravated assault. Carolyn’s understanding of the process of arrest and charges seemed better than that of most of the other women, possibly because of better communication between the police and the victim. Carolyn provided this version of the ‘probable cause’ for a police arrest and charging of the abuser:

They told me that all they needed to do was to show if there were any sign that there was domestic violence …anything that showed that there was any kind of like ruckus or um, anything that they would then, it was within their power to press charges. I didn’t have to press charges. I never pressed charges. They always did it on my behalf.

As described above, the police have guidelines and training in making arrests for probable cause, and in most counties, the responding police officer determines the appropriate charges against the abuser, e.g., assault, harassment, stalking, etc. However, none of the other women spoke of the police ‘pressing charges’ or of ‘probable cause’. Its unclear if this county or municipality differed from other counties, and if so in what ways: e.g., greater domestic violence training of police and their adherence to standard operating procedures. It is also unclear how a victim’s race might be a factor in the police response, since Carolyn was one of three participants in these interviews who was white. However, for this pilot study, the impact of race/ethnicity was not examined. For whatever reason, Carolyn’s experiences differed from the other women’s, who came from different counties in the state. Again, better communication of the procedures and processes by the police with the victim is believed to have been a factor in Carolyn’s more positive experiences with law enforcement.

2. Police arrive and leave without making an arrest

Several women related incidents in which the police arrived and talked to the couple, and then left without making an arrest or without at least escorting the abuser off the premises. In one incident, Tess called the police after the abuser had threatened to kill her and was about to hit her in the head with a phone. The room was a mess and she had bruises on her arms:

... the first time the police came... He had me over a desk, and my head was gonna get cracked open. ...That was my first experience ever having to call for help like that....I do look back and say how could you have walked into that house and allowed me to say ‘no, no, everything’s okay’ when you could see everything was not okay. ... I had to think that they knew there was something wrong there.

Tess said that she tried to get a restraining order that night, but that the police made reference to the time of night and she didn’t get one, and Tess lamented, “In hindsight, I do fault the police for that.” Overall, the police response to Tess’ call for help was not helpful. Tess ended up staying at her mother’s house that night as the abuser continued to threaten her ‘You come into the house, I’m gonna kill you’; and then when she returned home days later, the abuse continued.
to escalate. Eventually, Tess did get a restraining order. However, it is important to realize that restraining orders are not panaceas as will be demonstrated below.

### 3. Police arrive and escort the abuser off the premises

Several women related incidents in which the police arrived, asked some questions, talked to the abuser and escorted him off the premises. Rose, who was threatened and beaten by her husband for years, called the police for the first time after she was nearly strangled by the abuser. Rose escaped to a neighbor’s house with her children and called 9-1-1. She related what happened when the police arrived:

_They walk him out. [The police asked Rose:] ‘Do I feel safe?’ I say, ‘No, I don’t feel safe.’ ...They call him to the side and they tell him, ‘...if you agree to leave the house and not return, we won’t arrest you.’... And I have gotten into the habit of not speaking._

According to Rose, the police did not tell her about filing a domestic violence complaint or obtaining a restraining order and they did not give her any domestic violence information. This appears to be in direct violation of the requirements for police responding to domestic violence calls as described above.

Helen on the other hand was forthright with the police. She called them after her boyfriend threatened to kill her with a knife, which should indicate an arrest of the abuser. However, a single police officer arrived, who Helen felt was more interested in her pet, and she referred to him as the “worst cop.” The officer did not separate the couple, and Helen related how the officer did not talk to her:

_‘Cause sometimes you can’t talk with the abuser there. ‘Cause the first thing he [the abuser] said was ‘everything’s okay’. Course everything’s okay, because that’s what you saying. But did I get to talk that day? I just blurted something out, but he didn’t speak to me when all the police told him ‘ get your stuff and go take a walk. Cool yourself off._

So even though Helen told the police what had happened on the 9-1-1 call, the single responding officer at the scene did not listen to her and Helen was afraid to talk with the abuser right there.

Although it was not always clear if there was more than one police officer who responded to the scene of these crimes when the women called for help, in most instances it sounded as if two officers responded. However, in this incident described by Helen, there was clearly only one responding officer, which made it impossible for him to safely separate the victim from the abuser, thereby limiting the officer’s response to Helen’s call for help.

According to the domestic violence training for law enforcement, it is emphasized for officer safety that two officers respond to a domestic violence call to physically separate the parties in order to ensure that no further acts of domestic violence occur and so the officer can interview each party without the one party hearing what the other party is saying. According to an In-Service Training for Police Dispatchers provided by the Department of Law and Public Safety’s Division of Criminal Justice, dispatchers are trained to make a determination about domestic violence calls and prioritize them when warranted the same as any other life...
threatening call. The instructions further state that “Whenever possible, two officers should be dispatched to the scene.” However, in some small departments and with State Police jurisdictions, the timely arrival of a second officer is not always feasible. Thus, those agencies should provide alternatives, such as mutual aid agreements in their response procedures. In some cases, responding officers cannot wait for a back-up unit to arrive at the scene so they have to respond immediately, and at increased risk, to protect the victim.

**Victim’s Perceptions of Why the Police Did not Arrest the Abuser**

During the interviews, the women related their experiences with the police responding to their calls for help and their perceptions of why the police did not arrest the abusers. Their experiences may lead to discussions for changes in the police response to domestic violence victims’ calls for help. These experiences and perceptions include:

a) The women felt silenced when the police did not separate them from the abusers.

b) The women felt they were not believed and/or not taken seriously by the police.

c) Victims with no visible physical injuries were less likely to receive assistance.

d) That the police became frustrated with the women over time, and lost sympathy.

In addition, many of the survivors related that the men were relentless in their abusive behaviors, and that they were arrogant about the possible consequences, i.e., arrest and incarceration.

**a) The women felt silenced when the police did not separate them from the abusers.**

Most of the women told of instances in which the responding police officers did not separate them from the abusers, or the police officers did not provide sufficient space for the women to tell them what happened. Alice said,

_The police came, and, um, I told them everything’s alright, we’re just arguing about something of the kids, and I had to ’cause he’s standing right there._

By not separating the victim from the abuser, the women were not able to be forthright about the abuse because they were afraid of the abusers and what they might do, if not at the time, then later after the police were no longer there. Recall what Alice said about the abuser’s response if the police came and if the abuser was arrested:

_I knew he’d punch me more if the police came, this was part of the dynamics of it, if you get hit and beat up, when you tell somebody, even if it was a neighbor, he’d hit me more. If you told the police you got hit harder, it was a harder beating. If he went to jail, it was worse._

Women’s fear of retribution by the abuser, and the abuser’s threats to kill them and their children, were powerful disincentives to tell the police what happened, even if seemingly given the opportunity to do so. The dynamics of domestic violence include coercive control through fear, intimidation and isolation, such that women were effectively silenced by the abusers. Listen again, to Rose’s words, **“I have gotten in the habit of not speaking.”**

---

Also, consider the reasons why Tess, Alice and other women interviewed told the police, “everything’s okay”. During Tess’ first call to the police for help, she did not fully understand that she had been and was being abused. Tess told the interviewers that she was:

... a good wife and have a job, and this doesn’t happen, how could this happen, I’m not that stupid. How could this happen to me? ...there are other people that this happens to.

Like Tess, some women initially may not believe they are in an abusive relationship and/or they try to deny it as long as possible because of shame, not knowing what to do, and/or wanting to believe that the abuse will not be repeated. But Tess also was not separated from the abuser on her first call for help, and she elaborated on why she told the police “everything’s okay”:

If I go back to the first time when the police came and I didn’t file the order, that would have been the time when you need somebody to take you aside and say ‘this is what’s happening, not any right or wrong, this is your option, maybe you need to head out for a night or maybe you need to talk to this’, or somebody to take you away from your husband who’s ten feet away from you and the police officers.

In hindsight, Tess felt that the police should have created more space between her and the abuser to allow her to disclose the abuse, and that the police or ‘somebody’ should have told her that she was experiencing domestic violence, and provided options to improve her safety.

A number of the women expressed their frustrations with the police response because they wanted the police to do more to protect them from the abusers. Sadly, Tess concluded that the police “enabled him to continue to terrify me” and that it was “useless to call the police.” Alice expressed similar sentiments, “I feel they just didn’t care anymore, and they were just like, ‘oh well’.”

b) The women felt they were not believed and/or they were not taken seriously.

Even when women did tell the responding police officers what happened when they arrived on the scene, most told the interviewers that they felt they were not always believed or they were not taken seriously. Alice told the interviewers,

It’s the worst thing to not be believed. I can’t even explain it cause you’re so needing help so bad and when you’re pleading for and then someone [the police] looks at you and they just don’t, and there’s nothing left, who else was going to protect me.

Most of the women spoke about the problem of not being believed by the police and others in law enforcement and the judicial systems. Sarah, who was severely beaten by her husband said,

I never trusted that an officer would help me ‘cause I don’t think they really see domestic violence as a serious crime. You know, breaking into a car is a serious matter, but you smack your wife or kids around, she might have done something. I still think it exists, I really do.

Two women felt the police were less willing to believe them and take them seriously because they were hysterical when the police arrived on the scene. Two other women said they were finally believed when the police heard the abuser’s threats to kill them over a 9-1-1 phone call.
c) Victims with no visible physical injuries were less likely to be helped.
Among the reasons that the police and others may not have believed the women is the prevailing belief that domestic violence is about physical abuse and the victim should have visible injuries. As previously discussed, in most states, including New Jersey, the legal definition of domestic violence is that emotional, psychological and financial abuse are not criminal behaviors; however, these less visible, non-physical forms of abuse can be as coercive and controlling as physical abuse. When Norma first called the police because her husband was trying to kill her, she felt that the police “look for bruises” and she recalled them telling her, “lady we can’t help you, you know you look fine.” Thus, the police may only be looking for obvious, legally defined criminal acts, and especially physical injuries.

As described in regard to the PDVA, police officers are mandated to arrest someone who they believe injured someone else, even when injuries are not visible or believed to be internal and/or for probable cause;79 however, arrests are probably most likely when there are visible injuries. It is important to note that bruises or hematomas often take time, i.e., 24 hours or more, to become visible on dark skin, i.e., brown or black. Thus, darker skinned women may be less likely to be believed if police officers are looking for visible marks of abuse at the scene.

Megan suffered from her boyfriend’s coercive control that included threats to kill, jealousy, possessiveness, isolation from others, as well as physical abuse that included beatings, being burned with a cigarette, branded and bitten. Megan called the police in one town at least five times:

He [the abuser] told me that if I leave him he would kill me. We actually moved. He wanted me away from my people and we were in the woods. And even then, when the police would come out, they really didn’t believe what I was saying because I wasn’t physically hurt. Emotionally I was tore up, but they didn’t see any physical signs of me being beat. I thought that right there was something that the police should have looked into a little more. ‘Cause they’ve seen me, I was shaking, I couldn’t stop running to the bathroom, and they wanted me to stay still but I couldn’t. But they just, they left. They didn’t even try to look into the situation anymore. They just, they just left.

As with most of the other women, Megan was not believed and to her disbelief, the police “just left”, without even escorting the abuser off the premises. Abuse can be physical, and also invisible, because batterers often know how to ensure the abuse will not be seen. Police officers are instructed to interpret the statutory language of ‘signs of injury’ liberally and to make a mandatory arrest just as if visible signs of injury were present. Yet, arrests did not happen in most of the incidents related by the women in which police were called. And it bears repeating, that non-physical abuse can be just as harmful to the well-being of victims and their children.

d) The women believed the police became frustrated over time, and lost sympathy.
Like Alice, Sarah also was battered to the point of exhaustion and reflected that although she was not ready to leave earlier in the abusive relationship, she changed over time as the abuse got worse and then she wanted help to get away from the abuser. However, Sarah felt that the police became frustrated with her. In effect, they changed their response to her in ways detrimental to Sarah getting the help she needed from the police at the time she needed it:

I was tired. If someone cared or knew enough or just created a space like you said, it would have been enough to say, yeah, he did this. You know, and I think that was part of the problem with the police, the first couple of incidents they created that space so I could talk to them but later on I remember one officer said to me ‘how many times are you gonna keep doing this?’

This may happen to other victims who contact the police for help and therefore it is important for police officers to remain open to victims’ disclosing to them the full extent of the abuse and what the women need when the abuse escalates. Sarah did go on to say that one officer, who responded to her home following a brutal assault, warned her:

‘You know, you’re only one light away.’ And I looked at him and he says ‘we got here pretty quick this time but you’re like one light away, do you realize that?’ And I’m looking at him not really understanding. He said ‘if there’s a light that we can’t get through quick enough or the traffic delays us at an intersection, you’re one light away - from dying.’

Again, nearly all of the women interviewed expressed their wishes that the police had done more and sooner. Alice expressed it well, directing not only the police but also the judges to act sooner and provide harsher penalties, concluding that if they did, then there would probably be increased safety for victims:

I think it’s in the police hands first, they’re the ones coming on that scene, if they need to zing him, like come down hard. If they’re [abusers] putting their hand on somebody, they [law enforcement and the judicial systems] gotta make it severe enough so they think about ever doing that again. Then you go to the judges, but I think once you see that doesn’t work. I think it’s sad there has to be a program like ACP [the Address Confidentiality Program]. ACP only exists because they’re not taking care of business in the courts.

Reflecting on the women’s experiences and their perceptions of the police responses to their calls for help, most of the women spoke about and even made recommendations for more training and education on domestic violence. Recall again, Carolyn’s words at the beginning of this section: “… if you’re looking to make progress, the police really need to be educated.”

By understanding the dynamics of domestic violence, the physical and non-physical coercive control tactics of the abusers and the cumulative effects on victims and victims’ fears, responding officers might be better able to believe the women, and investigate the situations more, even if there are no visible signs of abuse, and provide sufficient space and protection for victims to disclose the abuse to them. As we hear in Alice’s words above, if the law enforcement responses to her and so conceivably other victims of domestic violence were consistently more helpful, then victims like Alice, and the other women in this study, might not be living in constant fear of the abuser killing her and her children.

Through the women’s words, it became evident to the researchers that most of the women said they wanted the police to help them more than they were able to express to the responding officers, usually out of fear of the abuser as demonstrated throughout this report. Listen again to what Megan said. “They didn’t even try to look into the situation anymore. They just
And Alice who was beaten by her husband for over a decade and called the police numerous times, expressed her need for the police to do more to help her, as she has come to understand it today:

*Don’t ask that person what they want. They can’t answer you right, they can’t. They’re not in the mental, if they’ve got battered woman syndrome, they’re never gonna say put ‘em away, they’re never gonna. …They [the police] should do it because you really can’t.*

Domestic violence advocates strongly support empowering battered women to make their own decisions because the women are likely to know how best to keep themselves safe. Although police are not domestic violence advocates, in calling them for help, nearly all these women told the interviewers they wanted the police to investigate more and/or to do more to help them.

It is important to note here that this was a pilot study of 11 domestic violence survivors who were nearly killed by their intimate partners. Although their experiences and recommendations can inform our understanding of victims’ needs, they should not be generalized to all victims.

**Some men were ‘relentless’ in their abuse of the victims and arrogant about the consequences.** Just as all victims are not alike, abusers can differ markedly. Half of the women interviewed described the men as being relentless in their need to control and abuse them and that often the men seemed arrogant about the possibility of being arrested and/or jailed for domestic violence. This is contrary to research that shows that arrest can be a deterrent for abusive behaviors because abusers want to avoid arrest and incarceration. Barbara said, *“He has so much experience with being locked up, he didn’t care.”* Alice related that her husband saw the police being called to the home as a “joke”:

*He was like, ‘ha, ha, ha, I got through, I beat even the police.’ He got an actual high off of doing things right under their nose and they could never catch him. …He didn’t pay attention to anything legally.*

The combination of the men’s attitudes about being arrested and/or going to jail along with threats to harm or kill the women in retribution would have been substantial disincentives for the women to call the police for help. Carolyn related her ex-husband’s attitude about arrest and jail, and that it just made him *“mad”:*

*He didn’t care if he was gonna go to jail, he would state that. ‘Cause all that matter to them at that point is regaining the power and the control over you and that’s all that matters to them. That’s why he would get arrested and within a couple hours he’d be out. And pretty much what it comes down to is we’d just make them mad.*

Megan, who like Alice and Barbara had called the police numerous times, related her boyfriend’s attitude and response to the police and that she was scared of his threats to kill her if he does go to jail:

*And they came out and he still, he acted crazy. He was in the [a branch of armed forces] and he did not care. He didn’t care at all. They would come out, he would curse ‘em out. They would put him in handcuffs. I think they took him away at least three times. ... I would have been very scared ‘cause he would always told me that ‘if I ever go to jail for hurting you, I’m gonna get out and kill you.’*
Thus, it may be important to take into account the seeming arrogance or disdain for law enforcement by some of the abusers at least some of the time. While such attitudes may speak to the character of some abusers, it also speaks to the system response to domestic violence as experienced by the women interviewed, such that there was a lack of consequences when these men were challenged for abusing the women. Despite that arrest may often be a deterrent for abusers, it was often not the case for some of these abusers.

In sum, the authors of this report find that often the police response to these women’s calls for help did not appear to be uniform or representative of consistent application of the law or recommended domestic violence response procedures. It often appeared dependent upon the responding officer’s approach to domestic violence rather than the approach recommended or required by law. The authors submit that by taking into account the experiences and perceptions of the survivors, law enforcement’s understanding of, and appreciation for, a consistent statewide response to domestic violence offenses, that meets legal expectations, might be advanced, and more helpful responses considered and championed in the future.

Law Enforcement: When Victims Went to the Police Department

In this section, we relate the women’s experiences when they went to the police departments to: file complaints against the abusers for domestic violence offenses, meet with Domestic Violence Response Team members (if active and available at the time the women were interviewed), obtain temporary restraining orders, and/or to report restraining order violations.

All 10 women who contacted the police went to the police departments in various municipalities throughout the state. Although domestic violence victims do not have to go to a police department to file a report of a domestic violence crime against them, this appears to be the case most often. Reports might follow an assault or for other domestic violence crimes such as harassment, terrorist threats, stalking, etc. The police officers at the station take the reports, and the officers may then secure a charge against the abuser and issue a warrant for the perpetrator’s arrest if the abuser is not already in custody. At that time, victims can also apply for a restraining order. Subsequently they might come to the police department to report restraining order violations and or additional domestic violence crimes against them by the abusers.

Some of the women in this study were brought to the police department by police officers who arrived on the scene following an assault, although sometimes the women would go by themselves to file a report. Although it is likely that the response is appropriate for many domestic violence victims who go to police departments for help or to file a report, most of the women interviewed in this study related negative experiences. In contrast, Norma had praise for the way she was treated by New Jersey police officers when she went in to report harassment by her husband following an attack in their home in a neighboring state:

*I found the police helpful, but once again their hands were tied. But, the fact that they would even listen to me was such a big deal. So things like that really mean a lot. I stopped by and told them what happened, I said I’m afraid... I found that the training of the officers in New Jersey that I had come across very, very helpful, very sympathetic, very understanding, and willing to refer me to certain resources. He [an officer] gave me*
an attorney at the local shelter, and then with the state program for address confidentiality which was so huge.

However, the New Jersey police told Norma that they could not do anything for her because the attacks by her husband had taken place in another state and the case was therefore outside of their jurisdiction. (This was one of several instances when jurisdictional issues presented barriers to women seeking help and as mentioned in a previous section, these issues should be examined to see how they might be resolved to improve victims’ safety.) Despite feeling that “their hands were tied,” Norma related how good she felt that the police officers listened to her and offered her alternatives, thereby demonstrating the importance of the law enforcement officers being supportive to victims as well as making referrals to other service providers.

Unfortunately, not all police responses were helpful. Other women related experiences of going to police departments for help that were much less positive. Their stories can assist in addressing service gaps that may exist in some police departments’ responses to victims asking for help.

First, several women were confronted by the abusers in police departments.

- Barbara went in to file a report and was followed by the abuser who threatened and harassed her as she waited in line to speak to a police officer. The officer did nothing for the half hour that Barbara waited for her turn:

  I was in the police precinct standing in line to file a report, and my husband was standing next to me threatening me and telling me what he’s gonna do, and telling me to get out of the line and leave out of there. …The police officer behind the desk can see and hear what is going on. He never came out from behind the desk to say ‘get away from her’ or ‘stop causing anything, don’t be here threatening people’, nothing. … And at that time if he [the abuser] wanted to do something to me, he was able to. …And it just surprised me that the police didn’t even, you know they ignored what was going on until we got closer to where I’m ready to make my report. …in the meantime I’m standing in line for maybe 30 minutes being harassed.

- Tess went to the police department to complain about her husband stalking and harassing her, only to have him appear there, claiming it was public space and therefore permissible for him to be there despite a restraining order that he keep a specified distance from her. The police talked to him but in the end Tess had to walk to her car unescorted while the abuser waited in the parking lot.

In both cases, it would appear that the police officers were not taking the danger to the women seriously or possibly assuming that the abusers would not try anything in a police station. Once again, it is evident that separation of victims from abusers should be the rule regardless of the location.

Other incidents that occurred when the women went into police departments for help as reported by the women, deserve mention and our attention.

- Rose went into the local police department to report that her passport had been stolen and that she believed her husband had stolen it. Here was an opportunity for the police
to see Rose’s complaint as a possible red flag of other troubles in the home, for at this time the abuse had escalated and included weekly beatings, financial abuse, threats to kill, isolation from her family, among other abuses. Indeed, the taking of one’s passport or other travel or identification documents is another controlling behavior by abusers. However, as Rose relates, the police officer’s questions effectively silenced her:

*The police are part of the problem. Because one of them, when I told them that I think it was my ex, he said ‘But what is he going to do with it? Why would he take your passport?’ You know all of those kinds of questions, and then you just close your mouth.*

- After a brutal assault in her home by her husband in which Sarah was rescued by the police after she called 9-1-1, Sarah was not taken by them for medical attention even though she later learned that she had a concussion:

*My only critique is that I was hurt and the police never took me to the hospital when I asked. They’re like ‘you have to do this, you have to fill out this, you have to go to court for that, and then come back to our office and talk to a detective’, but I’m hurting. He broke my glasses, so I had cuts all over my face, my lip was split. I had bruises that’ll never go away on my neck, marks, like, please somebody. And to stand there in front of a judge and explain what happened.*

Providing medical attention to victims should be a priority, and police officers are apparently taught that they have an obligation to care for, or seek assistance for, victims; and it is included in the list of standard police practices. Specifically, in cases where there are no visible signs of injuries but alternative indications of injury are present, such as complaint of pain, officers are instructed to strongly suggest that victims seek medical assistance. Thus, it’s unclear why the police would not have been more sensitive to Sarah’s medical needs.

- Last, at least one woman related that when she went in to file a report against her husband for his abuse of her, she was talked out of filing the report by the police. Alice, who certainly needed the police to help her, given the beatings had become regular and so had her calls to the police for help and stays in shelters with her children, was talked into agreeing to drop the charges by the police. According to Alice,

*I know one time he had to go to court, and the cops said’ if I would say it’s alright that I forgave him and he’s getting help, they’d drop the charges’, and they did. And I hadn’t, like again, I didn’t want to do these things, but if I didn’t, I would get hurt worse.*

Despite the advice: “If you are in danger, call the police”, in many instances, the victims of domestic violence who were interviewed for this study, remained in danger after calling the police, and they were not sufficiently helped by responding officers. It must be acknowledged that the women were not always able or ready to accept help offered often because of their fear of the abusers but also because the help may not have matched their needs. Understanding the dynamics of domestic violence could improve the police response to victims and better meet victims’ individual needs. However, these women’s experiences indicate that police responses often did not decrease the danger the women and their children were in from the abusers. At times, standard operating procedures were seemingly not followed, or police did not appear to sufficiently investigate the circumstances or provide appropriate advice to victims. Improved
training in domestic violence and communication of procedures might have made a difference for these women and their families.

**Commendations**
A few women did commend the police response and one in particular deserves mentioning. Although, as just described, Sarah did not have her medical needs addressed after police responded to her 9-1-1 call during an assault, she had this to say of her rescue:

...although they got some things wrong, I hold them in high regard. Number one: I remember when the officers finally came, and there were so many of them, I swear it was like a swarm of bees when they came in the house the first time.

Police caught the abuser in the act of assaulting Sarah, who was laying on the floor nearly unconscious. Police arrested him and took Sarah to the station to file a report, although the abuser was released later that same day.

Furthermore, interviewers did not hear from any of the survivors that the police failed to respond to their calls for help. Unfortunately, the responses did not often meet the women’s expectations, and it is hoped that this report will prompt more dialogue on how victim’s needs might be better met.

**Law Enforcement: Domestic Violence Response Teams**

Among the services provided when domestic violence victims go to police departments in New Jersey, especially today, is the opportunity for the victim to meet with a member of the Domestic Violence Response Team (DVRT). DVRTs respond to victims at police departments. Members are local citizens, who are trained and supervised by local domestic violence service programs. Among the potential impacts of these community-based teams is increased communication about the law enforcement procedures and options for victims of domestic violence.

“The Domestic Violence Response Team” program was state mandated in 2000 with the knowledge that victims of domestic violence are often isolated and trapped in abusive relationships. Studies demonstrate that victims of domestic violence are three times more likely to return to their abusers if they are provided with little or no support. Police officers provide protection to victims of domestic violence by arresting and processing the batterer, while volunteers help the victim to feel less isolated and alone. DVRT volunteers respond to the police department to provide emotional support, information on domestic violence, community resources and a safety plan.”  

Teams are composed of citizens who respond to police departments on an “on-call” basis. Volunteers are screened and trained to be able to speak to victims in a confidential nature. The goals of DVRT are to:

- Decrease the emotional trauma experienced by victims by providing the victim with an opportunity to express her or his emotional response to the crisis and educating her about the dynamics of domestic violence.
- Increase a victim’s ability to make an educated decision about her options by increasing the victim’s awareness of available community resources and legal options and her understanding of the legal process.
- Increase the victim’s access to community resources by providing the victims with the necessary information to access available community resources and assisting them in contacting those resources.

---

By 2009, DVRTs were operating in most police departments throughout the state, and their assistance has been important in strengthening and diversifying victims’ support systems. For the 10 women in this study who sought help from the police and went in to the police department to file a report, only three had any interactions with a member of a DVRT. It might be assumed that for the other seven women, DVRTs were not yet active in their localities.

Of the three women, there were both reports of satisfaction and dissatisfaction with the DVRT responses. Following an assault, Megan found the DVRT team member “very helpful” even though she was not ready at the time to leave the abuser:

“They were very helpful. They gave you a lot of information, you know, the signs to look for. Lot of groups to go to, a lot of groups to go to with your children if you had them. But if you’re not ready to leave that person, the only thing you’re gonna do is go back into harm’s way, and that’s what I did.”

As Megan described her interaction with DVRT, it appears to have functioned as intended by providing education to her on the dynamics or ‘signs’ of domestic violence, and support groups in the community. For Megan and victims who are not ready or able to leave the abuser, DVRTs can provide information on how to be safer if they decide to stay in their home.

While some women, like Megan, may not be ready to leave the abuser and use the information offered by DVRTs at that time, Jackie explained why she was unable to hear what the DVRT member was saying: she was too afraid of the abuser even though he was locked up at the time, and she was thinking of the consequences of having reached out for help:

“The cop finally locked him up. They take him to jail. I go fill out the report, the domestic violence lady comes. She talks to me but my mind is moving a hundred miles an hour. I got a business I gotta deal with, I got a small child, he’s only gonna come kick my door in. He don’t care nothing about nobody, and now he’s probably mad.”

Jackie elaborated on what she felt she needed, which was a follow-up call the next day when she might have been more able to take in the information that DVRTs are supposed to provide:

“I think the Domestic Violence Response Team that comes out to talk to you, you’re in such a high emotional place right then, that you’re not equipped to sometimes, I guess to take it seriously or realize what you really need. They need a follow up. They need to call you two days from now and say, ‘look how are you doing? What can we do for you now?’ ‘Cause you know, calm down a little bit. But at the police station you’re still scared ‘cause you know he’s somewhere around there. Yeah he’s locked up, but he’s still somewhere around there.”

Jackie revealed once again how important it is for the police and the DVRTs to realize that despite the abusers being taken into custody, victims remain fearful because of the nearness to the abusers even in the police department.

As to DVRT members making follow-up calls, it is against DVRT policy for several reasons. First and foremost, there are safety issues. The abuser may be in the home at the time of the call and the call could trigger an abusive episode. Second, the DVRT member who speaks to the victim in the police station should provide referrals to the local domestic violence
service program, where trained staff can offer the victim counseling, advocacy and shelter if needed. DVRT members receive limited training compared to program staff. Effectively, DVRT members are trained to respond to the immediate crisis only.

Helen expressed dissatisfaction with the DVRT because shelter was the only option discussed with her. Since she had recently been in a shelter, she did not want to go in to another shelter:

> When I went there [to the police department], the only thing that she [DVRT member] offered me was shelter. Which is good...[but] I had not too long came out of that so I didn’t wanna go back into shelter again. ... But I wasn’t offered groups, I was offered shelter.

Additionally, Helen was only given pamphlets to read and safety planning was not done. Safety planning is among the primary functions of the DVRTs and this lapse was a missed opportunity to offer assistance to the victim. As the interviewers learned, safety planning should be an ongoing process because a victim’s and the abuser’s situations change and safety planning must meet the current needs of victims and their children. Plus, Helen was not offered information about groups, although eventually she learned about support groups through the local domestic violence service program. *Helen told interviewers that the group counseling was helpful as will be discussed in the Domestic Violence Service Program Section that follows.*

Interestingly, one of Barbara’s recommendations was for “a special unit to help women”, which sounds like a DVRT, even though at the time, she was not aware that DVRTs existed:

> In my opinion, and I really believed that in the police department when a woman is going for help there should be maybe a special unit or something to help women.

DVRTs have an important role in offering assistance and information to victims at the local level, increasing services to victims and decreasing domestic violence in their communities. Appropriately provided, such offers can improve victims’ safety.

**Charges for Domestic Violence Offenses**

Although about half of the men were taken away from the scenes of domestic violence offenses against the women, only a few of the women could elaborate on the charges, if any, filed against the men.

- Alice thought that her husband was once charged for simple assault after one of many beatings when the police were called and the abuser removed from the premises. Another time she thought he had been charged for making terroristic threats. However, she could not recall if he went to court or was convicted of these crimes against her and served any time. And we learned from Alice that for at least one incident, the police talked her into dropping the charges.

- After Sarah’s husband beat her severely, he was arrested by the police but she explained that it “got him a simple assault. He was out within 24 hours and I was on the road to [another state] because I had enough.” Therefore, Sarah was unaware if her husband ever
went to court or jail even though the police found her unconscious from being strangled and beaten by him.

- Carolyn told of the charges of simple and aggravated assault filed by the police against her husband for beatings. However, she lamented “It’s keeping those charges pressed.” She explained that her husband would be bailed out by his mother and be free within 24 hours, and have time to talk her into supporting that the charges be dropped before the court date. Note that although Carolyn’s perception is that she dropped the charges, this is determined in court: “…he knew between that night and the court date, he would have convinced me to drop the charges and bail went right back anyway, so it didn’t make a difference.”

Despite numerous domestic violence offenses against these women and arrests for some of them, few succeeded in penalizing the abusers with any time in jail. Some of the women would consent to the charges being dropped because of fear of the abusers and/or being talked into it by others including the police, the abusers and the abusers’ families. Some women were also concerned about how they would manage financially without the abusers’ support. Alice complained about the lack of penalties despite that she had experienced years of abuse and repeated calls for help to the police:

> I was disappointed in the police, the police are the ones there, if they would’ve been stronger with what they would charged him with, and been more firm with him it could have stopped it earlier, that’s key, that’s so crucial for police to really make a strong penalty the first time they ever see marks on somebody, and put some fear in to ‘em so they don’t do it again. … I look back, I think they just didn’t care about me, they didn’t because how could there be that many [reports] and he never went away for long, he should have been in prison.

In general, the majority of charges for domestic violence offenses are simple assault and harassment, which are heard in municipal court and very likely to be dismissed. According to the women in this study, this seems to also be the case. However, since these women are likely in greater danger from the abusers than many other domestic violence victims, the legal consequences for the abusers, especially given repeated offenses, did not improve the women’s safety or reduce their fears of future offenses against them.

**Restraining Orders**

Restraining orders are secured by victims of domestic violence to stop abusers from coming near them, i.e., a no-contact order. A restraining order can have various provisions designed to protect the victim from the abuser, such as seizing an abuser’s weapons, mandatory counseling for the abuser, and/or granting temporary custody of children to the nonabusive parent, etc. A temporary restraining order (TRO) can be secured if the abuser has committed an act of domestic violence against the victim. Acts include those enumerated earlier in this section.

---


82 From Department of Community Affairs website “On getting a Restraining Order”. Last accessed Nov 16, 2009. [http://www.state.nj.us/dca/womdvcr.htm](http://www.state.nj.us/dca/womdvcr.htm)
such as harassment, assault, etc. A court hearing is scheduled about 10 days after a TRO has been issued at which time a judge determines if the TRO should be changed to a final restraining order (FRO).

Restraining order violations may or may not be criminal. Violation of the no-contact order is typically considered criminal contempt and the police can arrest the abuser after determining whether or not the order has been violated. Violations which are not criminal, such as failure to pay child support, may result in a court hearing instead of an arrest.

A restraining order can only be dismissed by a judge. The victim or the restrained person, for our purposes, the abuser, can ask that the RO be dismissed. The court must then determine if there is good cause to dismiss the RO by considering factors such as whether the victim consents to having the RO dismissed, whether the victim fears the abuser, among other factors. And, the judge must further determine whether the victim has been coerced into requesting or consenting to the dismissal of the RO.

Nine of the eleven women obtained restraining orders against the abusers; and most of the women continued to have permanent orders at the time of the interviews. Several women applied for orders, and then for various reasons decided to drop the temporary order, but secured a permanent order later as the abuse escalated. Among the reasons that women dropped the temporary order was that the abusers would talk them out of following through with the order and even talk them into getting back together. Additionally, some women dropped the TROs because they were concerned about how they and their children would manage without the support of the abuser. Sometimes the judge would not grant a permanent order.

**Going to Court for a Permanent Restraining Order or to Drop a Restraining Order**

As specified above, once a temporary restraining order has been issued, the applicant, in this case the domestic violence victim must go to the county courthouse to meet with a judge to have it become a permanent order or to have the order dropped or vacated. The survivors’ experiences with obtaining a restraining order provided three issues that were problematic for them.

a) Victims and abusers were not separated in the courthouse.
b) Victims asked that the restraining order be dropped, but had regrets about doing so.
c) Abusers sometimes countered by filing a restraining order against the victim.

**a) Victims and abusers were not separated in the courthouse.**

Several of the women who went to the courthouse about the restraining order or for other reasons related to domestic violence charges or their relationship with the abuser (e.g., spousal support, visitation rights, or other legal matters) told interviewers how frightening it was because they were often confronted by the abusers in the courthouse. Megan explains her fear of the abuser in a courthouse:

> When you go for the final restraining order, it’s kinda fearful because you see the other person. I don’t know if there’s a way where you don’t have to see the other person. I know that they have metal detectors, but you never know. ‘Cause if this person’s out to get you, he’ll stab you with a pen if they want to. It’s a way to get somebody, anyway you want if you want to. That right there is kinda scary.
Several women spoke of the problem that the victim and abuser were often in the same general holding area while waiting to be heard by the judge, and that even walking into the courthouse from the parking area provided another way for the abuser to threaten, harass, intimidate and harm the victim. Sarah found that “most times the sheriff’s officer will walk me out to my car” unless he was “busy.” Jackie described the problem,

We’re in the friggin’ courthouse downtown. I’m looking around. Why would they have both of us come to the same place anyway? That doesn’t work. You need to have a separate holding area for the victim in the courthouse. ‘Cause you can get killed in the courthouse. ... you need to have some type of parking arrangements ‘cause I’m walking across the parking garage [when she is confronted by the abuser] ... ‘Cause the judge says okay. I said, ‘I’m not dropping it, get away from me.’ I go find somebody and they say, ‘just sit down there.’ Have you seen the courthouse downtown? They could throw you right over the railing. That’d be a hell of a way to die.

In fact, several women related how the abusers were able to come up to them in the waiting area and tried to speak to them or threatened them, despite that it was a restraining order violation and that courthouse police were present. Rose elaborated,

I notice when I’m in the court room, I will be on one side, he will go to the side where I am, then I would have to call the policeman and say, ‘this man, I have a restraining order against and I fear for my life, he is right behind me.’ And they say ‘its okay, we are in the court room here.’ It shouldn’t be so, he should be on that other side where he’s supposed to be. Why should he come, you know, behind me? I would have to be the one to get up and then move over to the other side. ...it’s always on the woman, why shouldn’t he move to the other side, why do I have to keep moving? And it’s the same thing in real life outside of the courtroom.

These women’s fear of meeting the abusers in the courthouses was very apparent. Three women related how they envisioned that the abuser might harm or kill them in the courthouse. Megan thought the abuser might stab her, Jackie thought he might shoot her or push her over the railing to the floor below, and Rose thought he might throw acid on her.

Courthouses in the state are designed and operated differently, and Barbara related that the courthouse where she went for her restraining order managed to keep the abuser away from her: “I don’t think they wanted us in the same place at the same time ‘cause they kept us separate.” Undoubtedly, this is a practice that all courthouses should adopt for the safety of victims of abuse. This problem has not gone unnoticed and changes are being made. Today, many, if not most, New Jersey courthouses have separate waiting areas.

As with the police who respond to a domestic violence call or bring victims into the police department, courthouse personnel must be trained on the dynamics of domestic violence and recognize victims’ fear of abusers, abusers’ ability to intimidate and threaten victims, and the very real risk that abusers will try to harm or kill the victim. Therefore, keeping victims and abusers separate and providing safe entrance and exit to courthouses is necessary.
b) Victims asked that the restraining order be dropped, but had regrets about doing so.
Judges have standard procedures to determine if a permanent restraining order should be approved or dropped that include questions put to the victim. Megan related what the judge sought to know before an order was dropped:

...wanted to make sure that I wasn’t threatened, wanted to make sure that this was my decision, that I wanted to drop the restraining order. Let me know that I could always come back to get a restraining order if I needed it. But basically to make sure I wasn’t forced.

In addition, the procedures include telling victims about domestic violence services and that they can speak to an advocate as well as their attorney before signing a “Certification to Dissolve a Restraining Order.” The procedures are meant to ascertain that the victim is making the request to drop the restraining order voluntarily and that the victim has not been coerced.83

Despite these standard procedures to try to ensure that the courts did what the victims wanted, several women told interviewers about their regrets. Megan expressed her discomfort about the order being dropped:

“I felt okay with it, but I didn’t feel okay in my soul with dropping the restraining order, but I did it. Some of the things I look back on that I did, I just shake my head.”

Like Megan, Helen also expressed how conflicted she was about dropping the restraining order. In Helen’s case, she asked the judge to drop the order because the abuser manipulated the situation by playing on her sympathies in regard to the children seeing their father. However, visitation can be arranged even if there is a restraining order. As with Megan, Helen did not feel comfortable with the decision:

He’s saying ‘sorry’, but he was saying to me, and I guess I let my guard down again, that he needs to see the kids and he can’t see the kids if there’s a order, so I should drop it, and that’s what I did. ... the judge was asking if you were getting pressured and I’m like ‘no’ and in my mind I’m like ‘yes’, but I’m saying ‘no’, and I did.

Both Megan and Helen continued to be abused and threatened by the abuser until they eventually got permanent restraining orders and went into the Address Confidentiality Program. Recall that the dynamics of domestic violence sometimes manifests as cycles such as described below by Megan:

I did get a restraining order, then I dropped it. I went through all that, going to the [domestic violence shelter], getting out of the [shelter], with having the restraining order, dropping the restraining order, going back to him. Couple of months, everything’s fine, then it starts all over again, doing the same thing all over again.

Consideration should be given to how the women’s conflicted feelings about dropping the restraining orders might be better addressed. In particular, if victims better understand the process, and the dynamics of domestic violence, they might be less conflicted about whether or

not a restraining order is in their best interests. Megan did say that “this lady when I was walking in there, this lady is saying, don’t do it, don’t do it, don’t do it.” The “lady” might have been a victim witness advocate or representative who works for the prosecutor or a domestic violence service program advocate, but it’s unclear. Based on what some of the women told us, victims could benefit from greater availability and accessibility to advocates in courthouses.

c) Abusers sometimes countered by filing for a restraining order against the women. Notably, at least four women told interviewers that the abusers countered the women getting restraining orders by applying for restraining orders against the women. In all of the cases, the abusers’ petitions were not granted. This tactic by abusers can be seen as another way for them to harass and control the victims. For Jackie, it meant a delay in approval of her permanent restraining order that also resulted in a threat to her job. The judge decided to hear both the abuser’s and her application on another day, thereby forcing Jackie to return to the courthouse again and be confronted again by the abuser. For Tess, this tactic by the abuser was devastating because the judge decided not to grant her the permanent restraining order:

   The day before the hearing, he filed the restraining order against me. I hadn’t seen him now for three months. He said I was stealing his mail. That was the basis of his complaint. ...it then makes you both guilty. ...he was back in the house before I could even get home.

Although the judge did not even allow the abuser’s application for a restraining order against Tess, he also denied Tess’ application even though she provided evidence of his threats against her. Eventually Tess was able to get a permanent restraining order that she had at the time of the interview because the threats, harassment, and stalking escalated as did Tess’ fear that the abuser would kill her. The courts responses to this counter tactic by abusers should be looked into and how it impacts victims’ safety.

Restraining Order Violations

Domestic violence victims get restraining orders because they fear the abusers and want the abusers to stay away from them. Served with a restraining order, there are abusers who do stay away for fear of arrest and jail time and the impact it would have on their lives. To be clear, restraining orders can and do protect victims. However, of the nine women in this study who had restraining orders against their former intimate partners, all complained that the abusers violated the orders, often multiple times and in multiple ways, including breaking into their homes, driving up and down their streets, calling them, following or stalking them, and confronting and attacking them. The women further complained that the problem with restraining order violations is that when they reported a violation to the police, by the time the police arrived, the abuser was gone and the police could not take any actions. In one incident, Jackie’s ex-boyfriend was arrested for violating a restraining order, and Jackie thought he was in jail. To her shock, he was no longer in custody and was already violating the restraining order again by coming to her home:

   He gets somebody to bail him out. The witness notification program, they don’t call. He’s driving around my house. He’s calling me, [quotes boyfriend] ‘Why we can’t talk about this?’ I’m saying why is he out of jail? He violates the restraining order by riding around my house. I call the police. By the time the police get there, he’s gone.
In the experiences related by the women, they were at increased risk of harm because the abusers were angry and dangerous. Yet in too many of the women’s stories, the police were unable to protect the women from the abusers who violated restraining orders. Tess recalled being told,

> Until we find him on your property, standing over you with a baseball bat, there isn’t anything that they’re gonna do. That they can do. That came out of a police officer’s mouth.

Therefore the women had to be ever vigilant, ever fearful, as they attempted to live their lives, not knowing where or when the abuser might show up.

And as stated above, most of the abusers appeared to be impudent about the possibility of being caught by the police and arrested. Carolyn said her husband saw restraining orders as a “joke”; and that he violated them “like I took showers, on a daily basis. It just was like they don’t mean anything.” And Carolyn’s husband sometimes did get arrested, but the arrest and bail were inconsequential for her husband and other abusers we learned about in this study:

> They [abusers] come regardless of a restraining order. It really means nothing because they [abusers] know, ‘I’m gonna violate it, I’m gonna get arrested, and in a couple of hours I’ll be walking the streets again, and I’ll be doing the same thing all over again.’ There’s no true consequence to violating a restraining order because as soon as they post bail, they’re walking right out the door.

The lack of consequences for the abusers in this study meant that some of the women saw restraining orders as a “piece of paper” and a law that is not enforced. Rose explained how she saw the restraining order:

> She [the victim] wants no contact, that should be put in place, that should be enforced. Enforcement means that if it’s breached, you have a consequence. What is a law if there’s no enforcement? It’s just on paper there. And that’s what many people call the restraining orders, pieces of paper because they’re hardly enforced.

Indicative of these violations is that several of the women mentioned collecting “pink slips” which is apparently the color of the copy of the report of a restraining order violation that is given to the women. For some of these women then, restraining orders were not seen as effective in helping them feel safer from the abusers.

And once again, the women remarked that they were not being taken seriously when they went to the police for help and protection. Barbara expressed it this way,

> I really wish that if a woman is complaining, that the seriousness of protection is taken to another level than handing her a piece of paper and saying ‘okay, the restraining order is gonna protect you’ because it really doesn’t.

Jackie related the circumstances when she was finally taken seriously. Her ex-boyfriend had violated the restraining order at least a half dozen times and he had been arrested several times, including most recently at the courthouse, and so Jackie thought he was in jail. But he
showed up at her house, and once again, without any victim notification of his release, and Jackie called the police:

_The police come, real quick this time, but he's in the house. They pull up lights flashing. He's like [quotes boyfriend] 'You bitch you called the police.' He turns around and punches me with everything he has in my face. My whole eye was black all around here. I got stitches... So with my black eye and all I go to court and finally they take me seriously. The prosecutor takes me seriously. They lock him up._

Again, we see that victims with visible physical injuries are more likely to be taken seriously than abusers’ threats, harassment, intimidation and other forms of abusive and controlling behaviors even though these behaviors can also have devastating long-term consequences for victims.

**In these cases, the consequences for violating restraining orders were often inconsequential.** Several women mentioned that the abusers were charged with lower level offenses, called non-indictable offenses that are typically heard in municipal courts. Sarah related how several violations were combined, thereby enabling the abuser to get probation instead of jail:

_I have a problem with the prosecutor who said we're gonna combine these two, he would have had two violations on the restraining order, he would have had three, but they combined the first two into one charge so he got probation, basically, walked away again. This is what they allow. ...how many women will have to die?_

Women obtain restraining orders, also known as orders of protection, to stop the abuse and to keep the abuser away from them; however, enforcement of these orders for most of the women interviewed in this study was a major obstacle to their safety. While it is important to repeat that restraining orders do keep some victims safer because many abusers do not violate these orders of protection out of fear of being arrested and jailed, the investigators for this study were concerned about the number of abusers who violated the orders as was related by these victims and the effects of these violations on the women’s safety.
The Legal Profession: Prosecutors, Attorneys and Judges

Prosecutors

Six women mentioned that they spoke with prosecutors. Three women related instances that may represent problems victims encounter with prosecutors. Two were already described above in regard to other issues and they are only summarized here. Basically, these victims believed that domestic violence offenses are not always taken seriously.

- Sarah had a problem with the prosecutor because he combined three offenses into two, and it was her perception that this enabled the batterer to get probation instead of jail time.

- Jackie believed she was not taken seriously by the prosecutor until the abuser punched her in the eye, requiring stitches. She also related another instance when the prosecutor finally called her after not having returned her calls to him. The prosecutor had spoken to the abuser who said (among other statements), ‘I love her, I’ll never leave her alone, if she’s not gonna be with me, I’ll kill her.” Afterwards the prosecutor took her complaints seriously and according to Jackie, he told her, “I really feel like he’s gonna do something to you. So we need to do whatever we can to protect you.”

In both cases, the men abused and threatened to kill the women, but neither served any jail time. However, the women were forced to leave their homes, families and communities, and in effect, rebuild their lives with the apprehension that the abusers may find them.

- Carolyn had a meeting in the prosecutor’s office about various outstanding offenses but she felt forced into supporting a ‘plea bargain’ for her husband because she said that he was the “sole provider for our family at the time and if he went to jail I would be left alone with the kids.” The abuser got three years probation instead of jail time and was ordered to complete an anger management program.

Women’s fear of their abusive partners and other factors often result in their staying in the relationship. Eventually Carolyn left and went into the shelter and then the Address Confidentiality Program because the abuse continued.

The challenge for prosecutors and the legal profession in general is to recognize the different needs of victims at different times and through a better understanding of the dynamics of domestic violence meet the needs of victims better and help them live safely away from the abusers.
Attorneys

At least five women retained private attorneys to get a divorce, pursue litigation on their own against the abusers, fight charges filed against them by the abusers and/or fight visitation requests by the abusers. However these attorneys were almost always costly. Few attorneys do pro bono (or free or sliding scale) legal work in domestic violence in the state. At least two women were helped by attorneys available through the domestic violence service programs. (Both were very satisfied with the attorneys as is discussed in the Service Program/Shelter section.) And Rose was able to get an attorney through another agency. Of the women working with private attorneys, few were satisfied with suits against the abusers.

- Norma described the legal profession in general as “pretty crappy”. She related how the attorney’s focus was “all about money” or spousal support but that the attorney did “not get it” when it came to her concerns about the domestic violence, and fears of being stalked, harassed and/or killed by her husband.

- Similarly, Tess referred to attorneys as “abominable” and “disgusting” and that they did “not buy into the domestic violence piece at all” despite her effort to tell them about her fear of the abuser and that he was constantly stalking and harassing her.

These are strong indictments of the private attorneys who were retained to help these women and speak to the women’s perception that the attorneys lacked knowledge about domestic violence. Norma suggested that training of the legal profession about domestic violence would enable attorneys to understand the dynamics of domestic violence and therefore the very real fears of the women that the abusers might kill them:

\[I\text{ think a lot of times when we’re in that state, we’re not coming in very rational, nor should we be. My husband just tried to kill me. I think it’s more so that they [legal profession] either need to look for the signs or they need to understand. ...And rather than apply your legal expertise, maybe you need to gear them toward other resources. And I don’t think that’s asking too much, because if you’re going into family law, you need to deal with DYFS, child abuse, you need to deal with a whole host of emotional, societal issues, and that [domestic violence] needs to be one of them.}\]

The legal profession would do well to heed Norma’s advice and provide domestic violence training or better, insist on it for all legal professionals. At the least, Tess asked what the criteria are, if any, for attorneys to advertise that they can handle domestic violence cases:

\[You look in the phone book and they all say domestic violence, but what’s the criteria for putting that into a phone book? Is it just words or do you have any kind of specialization in it? Are you trained, do you really recognize? ...I would think that there would be something that they should be required to do in order to put that credential in their advertising.\]

To our knowledge, there are currently no criteria for attorneys’ advertisements that claim expertise in domestic violence or that the attorneys are capable of handling domestic violence related cases. Victims might be well advised to seek referrals for legal help from domestic violence service programs that may have familiarity with those attorneys who do have domestic violence expertise. Lack of knowledge about domestic violence may result in legal advice or actions that put victims in greater danger from the abusers.
Judges

The New Jersey Constitution determines how people become Supreme Court justices or Superior Court or Tax Court judges. Under this process, the Governor nominates a person to be a justice or a judge. The Governor submits the nomination to the state Senate, which then votes whether to confirm the nominee for the position. If confirmed by the Senate, the nominee is sworn in for an initial term of seven years. After seven years, justices and judges can be reappointed. Again, the Governor submits a nomination to the state Senate, which votes whether to confirm the nominee for reappointment. Justices and judges who are reappointed have tenure, which allows them to remain in their posts until they reach the age of 70, when the New Jersey Constitution requires that they retire. The appointment process and tenure strengthen judicial independence.84

Municipal Court judges are appointed by the town’s governing body. Terms are for three years. Municipal Court judges may be reappointed, but there is no tenure.

Nearly all of the women had been in one or more courts throughout the state for domestic violence offenses committed against them, restraining order applications and violations by the abusers, divorce proceedings, spousal and/or child support, visitation applications by abusers who fathered children with the victims, and other legal matters, such as property or tax issues. Many of these women had safety concerns with how the courts and in particular the judges handled these legal matters. First, several women voiced their concerns that the abusers used the legal system to continue to harass them while also putting the women at risk by being forced to return to court and be confronted by the abusers. Second, most of the women who had children with the abusers had to respond to requests for visitations that again put the women and children at risk of harm from the abusers. The women’s fears were so great that several said they would forego child and/or spousal support to avoid further contact with the abuser that puts their children at risk of abuse or death.

1. Abusers used the courts to further harass and control the victims

Several of the women complained that they believed the abusers used any opportunity or ruse to further harass and continue to control the women and to get access to them. Sarah, who was exasperated with going to court once the divorce was finalized, asked:

*Why am I coming back to court for it? Why are you as a judge not smart enough to see this is just ...say enough is enough, that’s it. It’s been decided. We’re getting ready to go back to court now ’cause he says I owe him [money].*

Similarly, Tess lamented how her husband was able to “totally use the system”. This abuser repeatedly filed the courts for information from the victim such that a large file had developed that was confusing and intimidating because it had been handled by a number of judges and in a number of courts. The abuser’s evident attempts to continue to control and abuse the victim were difficult to see because claims were submitted piecemeal. Tess insightfully described the problem:

*Somebody needs to put the pieces together. What’s going on in custody? What’s going on in this divorce? What’s going on in this domestic violence case and this domestic*

---

As a victim, Tess was able to see her husband’s harassment and abuse of her and of the system more clearly than anyone. For these women, it seemed that no one saw the big picture or the pattern of abuse against them and the court system. The abuser was in control and not held accountable or deterred from continuing to harass the victims and use judicial systems. A more coordinated response might address this problem for some cases of domestic violence and better protect victims such as those interviewed for this study.

2. Visitation for Children of Domestic Violence Victims and Abusers

Throughout the interviews, six of the women who had children with the abusers expressed worries about the issues related to visitation of the children with the abusers. Among their fears were safety issues for themselves and the children. The women expressed their concerns about the judges’ understanding of these issues based on their experiences of going before the judges.

a) “Benefit of doubt syndrome”

It is a common belief that judges are reluctant to revoke parental rights, and that in most cases, fathers will get some form of visitation rights. There were a number of women who expressed their fears that the abusers were capable of killing them and the children and yet the men were still granted visitation rights. Several women felt the judges were not taking into account the best interests of the children by granting visitation rights to fathers. Sarah related her experience when she presented a letter her son wrote to the judge explaining why he did not want to see his father. However the judge’s position, according to Sarah was, “The abuse is between you, you and the father, the mother and the father, and he has every legal right.” In effect, the judge deemed the domestic violence as completely separate from the child’s experiences with his father, and children’s welfare as separate from their mother’s welfare. This position may be contrasted with cases in which mothers have their children removed from the home because they are faulted for not protecting the children from observing the abuse suffered by the mothers.

During the interview with Carolyn, she expressed great concern about the likelihood of visitation rights with one of her children and the abuser. Her concerns exemplified yet again, that some judges may not take women’s fears seriously. First, the judge did not acknowledge that Carolyn had been the sole provider for her children for years since separating from the abuser. Instead, the judge provided the abuser with what Carolyn called “the benefit of doubt syndrome” and congratulated him for “stepping up to the plate to be a dad”. And although the judge asked Carolyn if she had concerns, to which she responded “everything you’ve read in that file”, the judge gave her little time to speak and said only “we’ll take it into consideration.” Carolyn described her experiences before the judge as a “cold experience” and she believed that despite her repeated beatings by the abuser, the judges would support the abuser’s rights as a father:

> It will come down to the fact that I have to just hand her over to him because in the court’s eyes, despite his history and the things that he’s done, he’s the father and he has rights.
In addition, Carolyn said that the last four times she had been to court over visitation, she had three different judges, thereby demonstrating a lack of consistency and any coordinated effort. Carolyn felt that the judges appeared to get “tired of listening to you” and that judges “have to be willing to go above and beyond, or it’s not the profession for you.” Carolyn was also concerned about the psychological well-being of one of her children who was seeing a therapist because of his fears of what the abuser might do. She asked that the judge take into account that “the welfare of the children is the first priority.” At the time of the interview, court-ordered re-unification (see box below for explanation of visitation and reunification) was being planned for Carolyn’s child.

Several survivors asked that the judges listen to the children. Along with Sarah, who asked the judge to take into account a letter her son had written about not wanting to see his father, Rose and Carolyn also asked the judges to listen to the children and to ask them what they want, because the children were afraid of the fathers and did not want visitation.

Similar to Carolyn’s experience before the judge about visitation, Rose was recently ordered to bring in her children for supervised visitation. She was dissatisfied with the judge in general, although he had required a psychological evaluation of the abuser prior to unsupervised visits with the children:

Even though the judge was bad he couldn’t just give him the rights...because the evidence is too much. ...what the judge wants is a psychological evaluation of him.

Since the abuser has refused a psychological evaluation, there was a “stalemate” at the time of the interview. For the time being, the children were only visiting with their father in a special county facility and under supervision. Like most of the other women, Rose fears what the abuser might do to the children, including killing them:

It haunts me every momen, that his threat will come true and right now he has no visitation rights. He’s fighting for that...but when all eyes are off him he will go ahead and do what he wants, he will kill the children. He’ll kill them to get at me. He will even kill them to punish them.

At least at the time of the interview, there were no unsupervised visitations until the abuser undergoes a psychological evaluation.

Court-ordered visitation can compromise the victim’s and children’s safety in several ways. Keeping in mind that the women continue to have restraining orders against the abusers, visitations must often be arranged in courthouses or police stations or other special county facilities. Yet, it has already been shown that abusers can threaten and possibly even assault women in these seemingly safe locations, and that women fear going to them. The children’s fears would also be heightened as Carolyn explained: “even though it’s a safe situation, there’s five hundred cops around us, that’s still not safe to them.” When judges order visitation, the women’s and children’s fears of being harmed or killed need to be taken into account.

Sarah highlighted one judge’s lack of understanding about the abuse she experienced when he insisted that she provide her address. Recall Sarah and the women in this study are in the Address Confidentiality Program (ACP) because they fear the abusers and want to keep their home addresses secret from them to increase their safety. The women carry a special ACP card that provides a post office box address and explains ACP to authorities requesting an address from the women:

_The judge told me that, after I even showed them the card, I needed to give them a physical address. He [the abuser] has every right to know where his kids live._

Although, case law has since decided that a ‘best interest of the child test’ should determine whether or not to reveal the non offending parent’s physical address, the court compelled Sarah to disclose her address without first conducting a best interest analysis. 86 Then Sarah had to ask herself,

_Do I move? I’m sick. Where am I going? How many times am I gonna change my kids? You know, run them here, run them there. I’m tired of running. I’m tired._

Each time an abuser learns the woman’s address, the woman must find another home along with all the complications such a move entails, i.e., changing services such as electricity and heat, plus transferring the children to different schools which could be difficult for the children and detrimental to their education. Working women might have to change jobs, and the women and children would need to learn about a new community. Several women had to move several times in a year, disrupting their lives and their children’s lives and reinforcing their fears.

Because of visitation with the fathers, several women voiced concern that the children pose a security risk because they might inadvertently tell the father some information that will provide him with the home address, such as the school they attend, upcoming doctor visits, or other typically innocuous information. For these women, providing this information to abusers can affect the safety of the women and their children, and be a matter of life or death. Gwen told us,

_I don’t know how he found out where I worked and that’s probably through kids. Kids are innocent, sometimes kids just say things and not even think._

86 Sacharow v. Sacharow A-113-01 Appellate Court Decision, 177N.J.62, 826 A2nd 710
The women also worried that the children might get angry with them or the situation and tell their fathers information that could affect their safety. This is understandable because they are children experiencing life under volatile and dangerous circumstances. At the very least, if the abusers learn information from the children, the women and children may have to move, but at worst they are in danger of harassment, stalking and being harmed or killed. Victims’ concerns and fears should be addressed by the courts and the judges when granting parental rights and visitation to abusers. In general, for participants in the Address Confidentiality Program, visitation is always a threat to confidentiality because children are no match for the abusing parent who often uses manipulation and intimidation.

Again, in cases of domestic violence, a more coordinated and comprehensive approach might truly be in the best interests of the children. In this regard, a recent directive from the Administrative Office of the Courts provides operational guidance when domestic violence and child abuse co-occur. This document includes that a family be assigned to the same judge for consistency, that domestic violence advocates help develop service plans, that staff monitor and enforce domestic violence defendants’ compliance with orders to attend counseling and batterer’s intervention programs, among other determinations. Moreover, the directive “seeks to avoid re-victimizing the non-offending parent” by “keeping the child and non-abusive caregiver together” and “keeping the child and the non-abusive caregiver victim safe.” Although this directive is for the co-occurrence of child abuse and domestic violence, it recognizes the need for a more coordinated response that is in the best interest of children and victims of domestic violence.

b) Victim’s Safety: the Quandary of Child Support

To further underscore the women’s fears and concerns regarding their safety and visitation, at least four of the six women said they would prefer to cut all ties with the abuser even if this meant there would be no child support. Although the women certainly needed the financial support, Rose stated, “Life is more important than money.” Rose felt the judge was more concerned about child support, and she countered,

So if I don’t care, if I’m taking him to court that should tell whoever that I don’t care if he’s thrown in jail. Because I know what happened to me. I’m running for my life.

Alice felt the same way, especially since she had never seen any child support anyway, and her preference was for “peace”.

He never paid the child support, he never paid one cent of the Te[vis], and I’ve never called about it to get it. I just, the reward I want from this is total peace from him forever. We’ll do without the money, [victim crying] just stay away.

On the one hand, child advocates and others argue that it is not the battered woman’s decision to forego child support because the children should not go without. On the other hand, advocates for battered women and their children posit that the issue of safety is tantamount and the women’s fears about the abusers should be taken into account.


88 In 1979, the New Jersey Supreme Court decided the case of Tevis v. Tevis which established the right of a physically abused spouse to make a claim in a divorce case and seek monetary damages from the spousal abuser.
The women’s need to break all ties with abusers also extended to spousal support.
Barbara was denied any support by the divorce court judge because even though the marriage had lasted for years, the relationship was often sporadic, which was likely associated with domestic violence cycles. Barbara reflected on this outcome as positive, but still feared for her life:

I couldn’t get any help from him which now that I look back at it, I’m glad I didn’t because that would have been a reason in his mind to aggravate me, pursue me, because he had to. So to cut all ties, you know, give me a clean slate, period. Still didn’t give me total piece of mind because he still pursued me. Even after the divorce, with the restraining order, and no monetary obligation, no obligation to children, or anything, I think it was just a control thing and what he said to me was just because I’m leaving him, he wanted to hurt me, he wanted to kill me.

For judges determining the future relationships of victims of domestic violence with the abusers, it would be important to have an understanding of the depth of women’s fears of the abusers and their need for support and "peace."

Carolyn summed up the need for judges to take into account each woman’s individual circumstances and needs and to respond accordingly including allowing sufficient time to hear about the history of the abusive relationship:

I think each case needs to be heard as an individual thing and not as a generalized situation. My situation may not necessarily be the same situation you experience and it might not be for the person next to me. And they need to take into consideration that it might not just be like a 10 minute in and out type deal, that there could be a lot of history …and there doesn’t seem like there’s enough time for that.

Carolyn also astutely remarked that different counties have different resources, and different case loads of different types that can affect the way a judge or court organizes schedules and makes rulings, and these differences should be investigated to see their impact on the adjudication of domestic violence and related cases such as visitation of children with domestic violence abusers.

In sum, the women interviewed were critical for the most part, of the judges, attorneys and legal professionals generally, whose actions or lack of actions, they felt increased their fears and danger from the abusers. The women’s experiences and perceptions included:

- The abusers were not appropriately penalized for their offenses.
- Some of the abusers used the courts to further harass and control the victims.
- Visitation rights for abusers did not take into account the child’s wishes, or the danger to the women and children when visitation is granted.

Overall, the victims often did not believe the judges, prosecutors and attorneys understood their circumstances in particular and domestic violence in general.
Some Observations on the Women’s Perceptions of the Impact of Gender, Race and Class on Law Enforcement and the Judicial Systems’ Responses to their Calls for Help

The interviewers did not specifically ask most of the participants about biases related to their gender, race, class or immigrant status. One woman, Helen, was asked if she felt that being from another country positively or negatively affected any of the services or the way people responded to her, to which she responded, “It wasn’t a factor... I didn’t feel any different being from somewhere else. I think I was respected and treated the same.”

This survivor’s positive experience in regard to her treatment by helping agencies, including law enforcement was good to learn. Future research should ask victims about their perceptions of others’ actions based on their gender, race, class and other demographic characteristics. The researchers did note that throughout the interviews, comments about gender, race, and class peppered the women’s telling of their stories. Examples of these comments are provided here and reflect the women’s perceptions even though they cannot be correlated with any specific actions by the police, attorneys, judges and others.

Gender: Police officers are predominantly men and many of the women expressed their feelings of gender biases by the policemen. For example, Alice referred to law enforcement’s lack of response to her calls for help when her husband beat her as “good ole boy mentality.” Alice elaborated,

*Why are we treated less, like women don’t matter. I just can’t believe the mentality still today that they just excuse it, men stick together and just excuse that behavior, like its okay to do that to a girlfriend or wife, its not so bad, they really don’t look at it, the change is not progressive enough.*

Barbara’s perceptions were that the “policemen” provided little support for her to leave the abusive relationship:

*All men, all the policemen felt like I was at fault. That’s the way they made me feel. I can’t say that’s what they were thinking but it was the perception of the situation like I shouldn’t have even came to them. So I don’t know what training they have going on now that can help them make a woman feel like she’s doing the right thing when she come and ask for help. Or, like, it’s okay to try to leave the situation. They actually make you feel like you need to just go ahead and put up with this stuff. That’s the feeling you get. And if you don’t have resources to get out of it, you feel even more compelled to go back into it.*

Race: It is often easier for people in general to comment on gender differences or biases than racism. Only one woman expressed her belief that race was a factor in the police response to her call for help. As a woman of color married to a white man, Norma was asked to leave the home after calling the police for help. Norma explained what happened:

*A lot of things are racial, a lot of things aren’t, but they see this tall, thin white guy and outside [a city] in a very white town, and they see me, distraught freaking out, and they told me I would have to leave my home if I didn’t feel safe and that there was nothing that they could do.*
None of the other women mentioned race despite that this sample of 11 survivors had 8 women of color. Researchers have long known that interviewers’ race and other factors can affect participant responses. In this study, two of the interviewers were white and the other African American, which could have been a factor in the survivors not mentioning race or ethnicity in their stories. Plus, specific questions about race and racial biases were not asked. Future research should look at victims’ perceptions about the possible impact of race/ethnicity as they relate to actions. It is important to consider how race may have factored into the responses to the women’s calls for help.

**Class:** Socioeconomic or class biases were mentioned by several women. For example, one survivor believed the police saw her in relation to her husband as “low life” and “they didn’t care.” Jackie, a woman of color and a professional with resources, spoke of how the police perceived her at different times and that the police should receive “sensitivity training” for domestic violence victims:

> I mean the cops, some of them need sensitivity training because if I got on sneakers and sweatpants, they’re looking at me one way, if I got on this [a uniform] or I’m driving a better car, they look at me completely different, and it’s all still the same abuse.

Last, Rose related her experiences in court when she felt her “credibility was on the stand.” As a highly educated woman, Rose was asked about her schooling and degrees and then asked how she “stayed with this man who was beating you?” Her decision to stay with the abuser was considered incredulous due to the court personnel’s lack of knowledge about domestic violence and its many and diverse victims.

The authors of this report acknowledge that New Jersey’s diversity may present challenges to law enforcement, the judicial systems and other helping agents to provide appropriate assistance and justice to the communities and residents of the state. Nonetheless, it is the obligation of these agents of the state to respond appropriately to every resident of every community, regardless of their gender, race, class, age, sexual orientation/preference or religious beliefs. An important way to improve state agents responses to victims of domestic violence and their families is through cultural competency training.
The focus of this report is on domestic violence. However, the authors recognize that domestic violence is among the many offenses reported to New Jersey’s law enforcement and adjudicated through its court systems. According to the 2008 New Jersey State Police’s annual Uniform Crime Report, the state’s total crime index was 227,177 of which 28,281 were violent crimes. In this report, we presented statistics for the state’s judiciaries which show that in 2008, over 6 million cases were heard in our municipal courts with over a million trial court filings in our superior court system, i.e., criminal, civil and family. To handle such a workload, considerable knowledge and expertise is required for those employed in New Jersey’s law enforcement and judicial systems. Therefore, the experiences and perceptions of the participants in this study and their recommendations must be understood with this larger backdrop in mind. It is important to remember that the law enforcement and the judicial systems meet the policing and legal demands of the state’s over 8 million residents.

The participants of this study were asked for their recommendations for changes and thus, the most egregious interactions might dominate the experiences they related to the researchers instead of the more positive ones. For example, Sarah described the law enforcement response as a “swarm of bees” when she called for help during a brutal assault; and Rose told of a judge who was insisting on a psychological evaluation of the abusive husband before considering unsupervised visitations with their children. Plus, it deserves repeating here that this was a pilot study of 11 domestic violence survivors who were nearly killed by their intimate partners and their experiences with New Jersey’s law enforcement and judicial systems do not necessarily represent those of all domestic violence victims. Instead the experiences, perceptions and recommendations of these eleven survivors inform our understandings of victims’ needs, and especially those at high risk, and further the intent of this report, which is to improve our systems’ responses to all victims of domestic violence.

---

Survivors’ Recommendations
(Survivors’ recommendations are followed by a commentary or elaboration if required.)

Survivors’ Recommendations for the Police

When police are called for a domestic violence incident, they need to provide information to victims and recognize that victims may not identify themselves as a victim or they may be ashamed to acknowledge their victimization.

And, the police need to separate the victim from the abuser.

“If I go back to the first time when the police came and I didn’t file the order, that would have been the time when you need somebody to take you aside and say ‘this is what’s happening, not any right or wrong, this is your option, maybe you need to head out for a night or maybe you need to talk to this’, or somebody to take you away from your husband who’s ten feet away from you and the police officers.”

Investigators’ comments: This system change recommendation, in addition to survivors’ reported needs regarding effective crisis management when law enforcement is called out, is substantiated and reinforced by the findings from case reviews conducted by the New Jersey Domestic Violence Fatality and Near Fatality Review Board. See “Findings and Recommendations of the NJ Domestic Violence Fatality & Near Fatality Review Board (December 2009)”: http://www.nj.gov/dca/divisions/dow/publications/pdfs/2009findingsandrecom.pdf

Recommendation 16

The New Jersey Domestic Violence Fatality and Near Fatality Review Board recommends the Office of the Attorney General, in collaboration with the New Jersey Coalition For Battered Women, revise the Model Standard Operating Procedure on Domestic Violence Crisis Intervention Teams to include criteria requiring a mandatory call out of a team member when certain criterion is met. Revisions to operating procedures should also require law enforcement officers responding to a domestic violence incident document in the officer’s incident report if the victim was informed of the services that can be provided by a crisis response team and the victim’s response to this service. See below for additional survivor recommendations for Domestic Violence Response Teams.

Investigators’ comments on the separation of victims from the abusers: Most of the women related instances when the police and others did not separate them from the abusers or provide space for the victim’s safety and/or to enable the victim to feel safe in disclosing abuse. The investigators strongly support standard operating procedures for the separation of victims from abusers throughout their experiences with law enforcement and the judicial systems. See Investigator Recommendations in the Conclusions of this report.

When police officers respond to a domestic violence call, they need to continue to ‘create a space’ for victims to disclose, even if they have created that space before and the victim has not disclosed.

“I was tired. If someone cared or knew enough or just created a space like you said, it would have been enough to say, yeah, he did this. You know, and I think that was part of the problem with the police, the first couple of incidents they created that space so I could talk to them but later on I remember one officer said to me, ‘how many times are you gonna keep doing this?’”

Investigators’ comments: Over time, the law enforcement response to a domestic violence victim’s calls for help may involve multiple numbers of officers and supervisors over numerous responses. Officers often receive information from Computer-Assisted-Dispatch (CAD) entries that prior responses have occurred. With the knowledge that victims often require several responses before they take full advantage of the protection of the law enforcement and judicial systems, police officers must treat every response to an incident of domestic violence, even knowing that multiple responses have already occurred, as if it is an initial response to a victim.
that will at some point invoke the protections that the law provides. Training and protocols must reflect this process and it must be embraced in the field.

Police officers need more training to better respond to domestic violence calls and they should investigate more thoroughly by:

a) Recognizing the victim’s fear of the abuser, and separating the victim from the abuser so that the victim may be less afraid and more likely to disclose the abuse.

b) Remaining aware that domestic violence takes many forms and they need to investigate even if there are no bruises or obvious physical injuries.

One survivor recommended that police: “Ask more questions. Take the person to the side and don’t ask them directly with the person, the abuser there. … [police officers need] more orientation, more training, more something, you know. I don’t know, they need to get serious about stuff like that. Even if it’s the hundredth time the person call, ’cause sometimes you call and they’re either like ‘okay, them again’, you know. ‘Cause you never know. ‘Cause sometimes you can’t talk with the abuser there. ‘Cause the first thing he [the abuser] said was ‘everything’s okay’, you know. Course everything’s okay, because that’s what you saying. But did I get to talk that day? I just blurted something out, but he didn’t speak to me when all the police told him ‘get your stuff and go take a walk. Cool yourself off.’”

Another survivor said: “I will also have to say that as far as law enforcement, even though they don’t see a woman with bruises on her, or even him…even if it’s a man in the same situation. Still look into it. Or call the appropriate people who’ll look into it. Yeah, dig deeper because there’s definitely something going on. Definitely something going on and whether it’s her hurting him or him hurting her, you know, before it even starts or if even if it did start, be the one to finish it.”

A third survivor related: “He [the abuser] told me that if I leave him he would kill me. Um, we actually moved. He wanted me away from my people and we were in the woods. And even then, when the police would come out, they really didn’t believe what I was saying because I wasn’t physically hurt. Emotionally I was tore up, but they didn’t see any physical signs of me being beat. I thought that right there was something that the police should have looked into a little more. ‘Cause they’ve seen me, I was shaking, I couldn’t stop running to the bathroom, and they wanted me to stay still but I couldn’t. But they just, they left. They didn’t even try to look into the situation anymore. They just, they just left.”

Investigators’ Comments: Police should investigate in a manner consistent with investigations for other serious offenses including photos, crime scene sketches, gathering and documentation of physical evidence, witness statements and all other procedures commonly used to enhance criminal investigations.

Survivors’ Recommendations for Domestic Violence Training for Police:

a) Some police need to be more “educated” about domestic violence that could result in more “compassionate”, “sympathetic” and “understanding” responses.

One survivor said: “Some of them [police] were just more compassionate and more sympathetic to the situation, more understanding. They seemed to be more educated on the background of domestic violence and why it’s not as easy to leave and then you had police officers that just were you know, well, ‘why do you stay’. They just didn’t care. Like, ‘well if you want to stay, then I dunno what you want me to do because, you know, we have to keep coming back’. They’re just very cold at times. …if you’re looking to make progress, the police really need to be educated.”
Another said: “I don’t know how to explain it, it happens gradually and it just sucks you in and you just don’t see right and that’s part of the sadness is police officers lose sympathy for you ‘cause they see you getting, they know what’s going on but then they’re like, ahh, she doesn’t want to do anything. But they need to understand I think, that’s just what happens, you just, you lose yourself, you’re lost. It’s not that you don’t deserve help and they shouldn’t be doing something and acting because you’re not asking for it, they should do it because you really can’t, you just, you can’t.”

b) Police need domestic violence sensitivity training so they better understand victims’ perspectives and the training should include the participation of victims.

“Maybe they need people that actually were in the situation. You know, to talk to them, and let them actually see what is. I don’t think a lot of the police officers understand it. I don’t think they understand it at all. It’s just a job to some of them.”

c) Police need cultural competency training.

“I mean the cops, some of them need sensitivity training because if I got on sneakers and sweatpants, they’re looking at me one way, if I got on this or I’m driving a better car, they look at me completely different, and it’s all still the same abuse.”

Investigators’ Comments: By law, there is an annual four-hour training on domestic violence for New Jersey police. The curriculum for this training and whether or not it is evaluated is not known.

In response to one survivor’s comment that “it’s just a job to some of them”, while it is true that it is a job, it is also a duty. Impartiality is essential in any law enforcement response. Once a victim is identified, sworn personnel are duty-bound to ensure that victims are afforded safety and vital information, and that offenders are charged and criminally processed in accordance with statute(s).

Police should charge abusers with the highest supportable offense in domestic violence cases.

“I was disappointed in the police, I mean the police are the ones there, if they would’ve been stronger with what they would charged him with, and been more firm with him, it could have stopped it earlier, that’s key. I mean that’s so crucial for police to really make a strong penalty the first time they ever see marks on somebody. Do you know what I mean, and put some fear in to ‘em so they don’t do it again. But it was just a joke, it just kept happen… I look back, I think they just didn’t care about me, they just didn’t because how could there be that many [reports] and he never went away for long, he should have been in prison.”

The victim and perpetrator should be separated in the police station.

“I was in the police precinct standing in line to file a report, and my husband was standing next to me threatening me and telling me what he’s gonna do, and telling me to get out of the line and leave out of there. ...The police officer behind the desk can see and hear what is going on. He never came out from behind the desk to say get away from her or stop causing anything, don’t be here threatening people, nothing. ... And at that time if he wanted to do something to me, he was able to....And it just surprised me that the police didn’t even, you know they ignored what was going on until we got closer to where I’m ready to make my report. ...I mean in the meantime I’m standing in line for maybe 30 minutes being harassed.”

Investigators’ Comments: As stated above, victims should be separated from abusers in all venues as standard operating policies. Also see Investigators’ Recommendations in the Conclusions of the report.
There is a need for advocates at police stations and courthouses to support victims through the processes of filing reports and obtaining restraining orders.

“Well, with the restraining order, you have to fill out paperwork. And sometimes having someone there, I mean, even if it’s an advocate, just someone there, like if you need help or just support, while you’re there filling out the paperwork, it’s helpful, because you’re writing all these painful information down and usually you don’t have anybody there with you when you go. Some people do, some people don’t.”

Investigators’ Comments: Advocates are available for assisting survivors with legal, medical and human service needs in each county. For more information, refer to the New Jersey Coalition for Battered Women at www.njcbw.org.

As already referenced above, the New Jersey Domestic Violence Fatality and Near Fatality Review Board recommends that when certain criteria are met, it should be mandatory standard operating procedure that a crisis response team member be called out to meet with the victim. This survivor’s recommendation echoes this need regardless of the location of a survivor at the time of the response.

Ensure that police departments are utilizing DVRTs.

“I do think there should be a level of monitoring of the local police department activity [in regard to utilization of DVRTs]. Something that makes sure that they are really doing what that program (DVRT), are they really calling, are they really offering it?”

Domestic violence training for law enforcement officers and their families is needed.

“Law enforcement officers are more prone to violent behavior, I guess because of the stress of police officers, corrections’ officers, sheriffs’ officers. There may need to be some type of training incorporated into their academy which is more than just how often, how long you have to report and what domestic violence consists of and that you’ll loose your job. Some type of sensitivity about, you need to go debrief yourself before you go deal with your wife. You need to understand that grabbing [a perpetrator] is way different than grabbing your wife.”

Investigators’ Comments: In 2006, the New Jersey Domestic Violence Fatality and Near Fatality Review Board developed a model policy and protocol for the response to and investigation of acts of domestic violence involving law enforcement personnel entitled, Model Policy on Domestic Violence in the Law Enforcement Community. The policy has been reviewed by the Attorney General, the office staff and the county prosecutors and as a result of this policy the Attorney General in December 2009 issued a model police department policy for handling domestic violence incidents that involve law enforcement officers.

The New Jersey Domestic Violence Fatality and Near Fatality Review Board’s model policy can be viewed at http://www.nj.gov/dca/divisions/dow/publications/njdvfnfrbreports.html

Survivors’ Recommendations for Courts, Judges, Prosecutors and Attorneys

Three Survivors Recommended: Separate the victim and the abuser in courthouses including all areas inside and outside the courthouses, except during legal proceedings.

“A holding area at the courthouse, separate ...I’m standing by the rail and I’m like he could just throw me over this rail. He’s strong as an ox...and I mean how many people you seen on the news where people get shot in the courthouse? ... ‘Cause if I died it would have been 10 articles in the paper. If he had thrown me over the court house steps or over the railing in the court house, it would be fenced in. They would have changed the policy by now.”

“When you go for the final restraining order, it’s kinda fearful because you see the other person. I don’t know if there’s a way where you don’t have to see the other person. I mean, I know that they have metal
detectors, but you never know. ‘Cause if this person’s out to get you, he’ll stab you with a pen if they want to. I mean, it’s a way to get somebody, anyway you want if you want to. That right there is kinda scary.”

“And I think about that, that’s why I don’t like getting close up with him. He could throw anything; he could throw acid in your face ...I notice when I’m in the court room, I will be on one side, he will go to the side where I am, then I would have to call the policeman and say ‘this man I have a restraining order against and I fear for my life, he is right behind me.’ And they say ‘its okay, we are in the court room here.’ It shouldn’t be so, he should be on that other side where he’s supposed to be. Why should he come, you know behind me? I would have to be the one to get up and then move over to the other side. ....And it’s the same thing in real life outside of the courtroom. Why do I have to be the one to keep moving?

Investigators’ Comments: As stated above, victims should be separated from abusers in all venues as standard operating policies. Also see Investigators’ Recommendations in the Conclusions of the report.

Judges, prosecutors and attorneys need more education about domestic violence in order to see patterns of abuse which includes abusers’ use of the court system which enables them to continue to harass victims.

Also, judges and others need to consider the costs for a victim to hire an attorney.

One survivor recommended: “Somebody needs to put the pieces together. What’s going on in custody? What’s going on in this divorce? What’s going on in this domestic violence case and this domestic violence case? And what’s this charge on kidnapping, and then what’s this assault? If somebody could look at the whole thing, there’s a glaring picture there. But municipal court doesn’t know what the county is doing. Family court doesn’t know what the criminal court does. So they see a snippet. They see he knocked you down in the driveway. Like, no, look at the other stuff that’s going on here. There’s a huge pattern.”

A second survivor asked: “...why am I coming back to court for it? Why are you, as a judge, not smart enough to see this is just... say enough is enough, that’s it. It’s been decided. We’re getting ready to go back to court now ‘cause he says I owe him [a sum of money].” ...Are you kidding me? You set a court date for this? You, you’re joking, right? Like who was the happy go-lucky judge that day? I’ve even said to judges, you are giving him the ability to see my kids? I was like, did you read the case file? Did you read it? Before you gave him the ability to see these kids, did you read what his kids said he did? You gotta file a motion. Well, how do I know? I ran outta, I have no money now, I can’t even hire an attorney. And guess what? There no pro bono attorneys in New Jersey in [her county]. [DV legal organization name] have been trying to help me. There are none in our county”

Investigator’s comments: In connection with the first survivor’s recommendation that there be collaboration between judicial personnel on multiple cases involving the same victim and defendant, the New Jersey Domestic Violence Fatality and Near Fatality Review Board made a supporting recommendation based on case reviews.

Recommendation 14
The New Jersey Domestic Violence Fatality & Near Fatality Review Board recommends the Office of the Attorney General facilitate annual education on domestic violence for all assistant prosecutors. Further, the county prosecutors should promote ongoing collaboration between the domestic violence assistant prosecutors and all assistant prosecutors where the victim-assailant relationship falls within the legal definition of domestic violence as provided by N.J.S.A. 2C:25, the Prevention of Domestic Violence Act.

Judges need to impose stronger penalties on domestic violence offenders.
― "...to stop it you need strong police I think to make the charges heavy, then you need the courts to back it up and put 'em away when they get there, not just keep shipping 'em out. They get there and they don't really penalize 'em, it's like they get a slap on the wrist and it was so serious, and you, the person can't do it.... I couldn't protect myself."

Judges need to learn more about domestic violence when making decisions about parental visitation by:
- Understanding the problems with visitation rights for abusers, especially the safety concerns for victims and their children.
- Taking into account the past history of domestic violence when considering the father's request for visitation.
- Listening to children in order to do a better analysis of what is in their best interests when making visitation decisions.

One survivor recommends: "My son, I have a letter here that he wrote to Judge [name of judge] as to why he did not want to see his father. The thinking is that the abuse is between you and the father, the mother and the father, and he has every legal right. But when a child takes the time to write you a letter to tell you this is what I lived through when my dad comes to pick me up, you know, he terrorizes us to tell him where mom is, you’d think the judge would get it. And I think the judges need to be educated, maybe part of legal training, if it starts as a lawyer maybe they would understand domestic violence sitting on the bench. Sometimes I think they get cold”.

Another survivor said: “The judge will sit there and say ‘Well, congratulations, you’re [the abuser] stepping up to the plate to be a dad’ Like are you kidding me? Like, get to the bottom of the story, look at the history, ... this is a child we’re dealing with, and it has to be a very slow process. I told them that when they brought up the re-unification and everything. [The judge] asked ‘do you have any concerns?’ And I said, ‘my concerns are everything you’ve read in that file.’ ...they’re like ‘Okay, well, we’ll take it into consideration’ and they don’t give you much time at all....I can’t be taking them there, even though it’s a safe situation, there’s five hundred cops around us, that’s still not safe to them....and you know, that was just the one thing that I really needed them, if at all anything, to take into consideration, the welfare of the children is the first priority well, then, we’re gonna find out, you need to stand by your word. But now here I am, going again, different charge. Four times to court, alright I’m three different judges. ...I think the benefit of the doubt syndrome needs to go away. They [the abusers] should have to prove themselves because you know what, if I had things and I was trying to get my kid back, I would have to prove that I’ve made changes and done the steps and whatever....I just don’t understand how they could just like throw these kids at these people that they don’t know after six years.”

And a third pleaded: “They have to listen to children, number one... Don’t try to cajole the children to go to him. That’s wrong. The children are reacting in the right way. They are running from the abuser because that’s the natural sense God put there. To run away from the person that’s hurting you. You are trying to reverse it by making them go back to the person that’s hurting them. ...But I was thinking about it the other day because my children were involved, and it was like, how, because my son was asking a lot of questions and I didn’t think. And he was like ‘Mommy, but why are they making me go to him? You don’t go to him. Why are they making me go to him?’ I’ve told them everything he did to me. ‘Why are they making me go to him?’ And I was like, trust the system. There is no trust here because that’s wrong. ...So he has to from a very young age, he has to begin to think about his rights.”
Judges need to ensure that abusers fulfill court ordered participation interventions or conditional programs such as batterer’s intervention programs before allowing visitation rights.

“...the one thing that bothers me, is that he already did. He did these things, but he did them back when she was a baby. So it’s like well over five years that he went to [domestic violence counseling], that he did any kind of drug program, that he’s gone to AA [Alcoholics Anonymous], that you know there’s been any kind of anger management or, he, been a parent. He should have to re-do these things ...you haven’t had the pressure and having to deal with a child having a temper tantrum.”

Judges need to allow sufficient time and patience to hear what victims have to say about their individual situations and to adequately review case files.

“I think each case needs to be heard as an individual thing and not as a generalized situation. ... And they need to take into consideration that it might not just be like a 10 minute in and out type deal, that there could be a lot of history ...and there doesn’t seem like there’s enough time for that. ...it seems almost like they get tired of listening to you after a period of time and they’re ‘okay, we get the picture’ and ‘okay, we hear the story every day’ type of deal. And, either that or rotate the judges or something so it’s not like the same old unfortunately it, stories are gonna be very similar and it is gonna be the same old but you need to find the people that are not gonna get tired. That’s the problem. You can’t get tired.”

Prosecutors should not combine charges for multiple violations of restraining orders since this often results in reductions of penalties.

“I have a problem with the prosecutor who said we’re gonna combine these two, he would have had two violations on the restraining order, he would have had three, but they combined the first two into one charge so he got probation. Basically, walked away again. This is what they allow.... how many women will have to die?”

Prosecutors should request substantial bail and appropriate sentencing for abusers.

“I just think that when there is a prosecution there should be, like I guess, like a stronger punishment. It seems like they just get little slaps on the wrists and they’re set free or when they are arrested, there should be higher bails or more of a retention so that they don’t get back to us so quickly.”

The legal profession needs training to better understand the emotional impact of domestic violence on victims.

“I think a lot of times when we’re in that state, we’re not coming in very rational, nor should we be. My husband just tried to kill me. I think it’s more so that they [legal profession] either need to look for the signs or they need to understand. ... And rather than apply your legal expertise, maybe you need to gear them toward other resources. And I don’t think that’s asking too much, because if you’re going into family law, you need to deal with DYFS, child abuse, you need to deal with a whole host of emotional, societal issues, and that [domestic violence] needs to be one of them.”

Investigator’s comments: This system change recommendation is substantiated and reinforced by findings from case reviews conducted by the New Jersey Domestic Violence Fatality and Near Fatality Review Board. See “Findings and Recommendations of the NJ Domestic Violence Fatality & Near Fatality Review Board (December 2009)”: http://www.nj.gov/dca/divisions/dow/publications/pdfs/2009findingsandrecom.pdf

Recommendation 4b
The New Jersey Domestic Violence Fatality and Near Fatality Review Board recommends the New Jersey Supreme Court, as part of its mandatory continuing legal education program, require all attorneys be trained to recognize the indicators of domestic violence and be educated on their ethical obligations to clients who are victims. Such specialized training programs should stress the importance of incorporating legal advice and practices that do not compromise victim safety. The program should be conducted by professionals with a demonstrated expertise in domestic violence and victim safety.
**Recommendation 4c**
The New Jersey Domestic Violence Fatality and Near Fatality Review Board recommends the New Jersey State Bar Association, Family Law Section, offer domestic violence training for attorneys conducted by domestic violence experts and developed with the guidance of the American Bar Association, Commission on Domestic Violence manual entitled: *The Impact of Domestic Violence On Your Legal Practice: A Lawyer’s Handbook (2nd Edition).*

**Recommendation 5**
The New Jersey Domestic Violence Fatality and Near Fatality Review Board recommends the New Jersey Supreme Court require criminal court judges receive annual domestic violence education. The education, at a minimum, should consist of an explanation of the dynamics of domestic violence, the impact of domestic violence on society, statutory and case law concerning domestic violence, available sanctions and intervention options, and information regarding available community resources and support services.

An audit needs to be conducted of attorneys who claim domestic violence expertise to determine their training and certification.

“You look in the phone book and they all say domestic violence but what’s the criteria for putting that into a phone book? Is it just words or do you have any kind of specialization in it? Are you trained, do you really recognize? But I would think that there would be something that they should be required to do in order to put that credential in their advertising.”


**Recommendation 4a**
The New Jersey Domestic Violence Fatality and Near Fatality Review Board recommends the New Jersey State Bar Association, Family Law Section, in conjunction with professionals with a demonstrated expertise in domestic violence and victim safety, create a specialty area of practice in domestic violence in order to increase the pool of attorneys who have an expertise in this area.

**Survivors’ Recommendations for Domestic Violence Response Teams**

**Investigators’ comments:** As reported in the text, by 2009 Domestic Violence Response Teams (DVRTs) were active in most police departments throughout the state; however, they may not have been active in some of the participants’ localities at the time of their domestic violence incidents.

For other recommendations on improving DVRT’s response, refer to the New Jersey Domestic Violence Fatality and Near Fatality Review Board’s publications at [http://www.state.nj.us/dca/divisions/dow/publications/njdvfnfrbreports.html](http://www.state.nj.us/dca/divisions/dow/publications/njdvfnfrbreports.html)

DVRTs should follow-up with the victim because the victim may be afraid and may not be able to hear the information and options immediately following the assault; and the victim may have made a possible connection with the DVRT member. This survivor also suggested using a separate place away from the police department where the abuser is being booked.

“I think the Domestic Violence Response Team that comes out to talk to you, you’re in such a high emotional place right then, that you’re not equipped to sometimes, I guess to take it seriously or realize what you really need. They need a follow up. They need to call you two days from now and say look how are you doing? What can we do for you now? ‘Cause you know, calm down a little bit. But at the police
station you’re still scared ‘cause you know he’s somewhere around there. Yeah he’s locked up, but he’s still somewhere around there.... They give you the [shelter name] information but if you don’t know anybody at [shelter name], you know what I mean, you’re like, it’s embarrassing. Embarrassment and shame probably is what gets people killed.”

**Investigators’ Comments:** As related in the text, the policy is that DVRT members do not make follow-up calls for several reasons. First and foremost, there are safety issues. The abuser may be in the home at the time of the call and the call could trigger an abusive episode. Second, the DVRT member who speaks to the victim in the police station should provide referrals to the local domestic violence service program, where trained staff can offer the victim counseling, advocacy and shelter if needed. DVRT members receive limited training compared to program staff. Effectively, DVRTs respond to the immediate crisis only.

**DVRT members should include domestic violence victims.**

“They should consider people that have a history [of domestic violence] opposed to somebody that just took a class ‘cause it really can’t understand how somebody that doesn’t know what’s it’s like to be in that situation, how they could really be sympathetic to something they learned from, you know, a book, opposed to being there and experiencing it.”

**Investigators’ Comments:** Victims are not excluded from being on a DVRT because they are victims; however they may be deferred from joining until they have been out of the abusive relationship for a certain amount of time, e.g., one county program set the time at five years. All applicants for DVRT should be screened for appropriateness, and in particular for victims, it should be determined where they are in regard to their own recovery.
Asking for Help: Domestic Violence Service Programs

Throughout the country domestic violence service programs help victims, their families and communities. Among the many services provided by programs, a ‘core’ or primary service is temporary housing or shelter. These ‘safe houses’ serve a critical need for victims seeking refuge from abusers. A recent one day “census” of over 1,500 US domestic violence programs reported that 30,433 victims were being sheltered. Alice, who was traumatized by repeated abuse, went into shelter with her children and said:

I thank God I went there. ...if it weren’t for them I don’t know what would have happened to me because at that point I had no mind. The abuse was going on pretty much heavy every weekend.

While safety is the priority of shelters, at their best, they are also “homes” for victimized families as some of the women in this project told the interviewers. Megan explained that the shelter was a place where you could “get your life together”:

They made it seem as if you were home. This is your home. This is your safe haven, this is somewhere you don’t have to worry about anyone finding you....If you needed to talk, no matter what time it was, day or night, somebody was there to talk to you....I mean, it was just a place where you can go and just sort out everything, you know, just be at ease, and get your life together.

All of the 11 women interviewed for this project reached out to one or more of New Jersey’s Domestic Violence Service Programs. The women’s experiences with seeking access to shelters, their stays in the shelters and their comments on residential and non-residential services provided by the programs will be described below followed by the women’s recommendations.

Overview of New Jersey’s Domestic Violence Service Programs

All 21 New Jersey counties have at least one Domestic Violence Service Program that provides the following core services:

- Emergency response through 24 hour hotlines and shelters
- Advocacy (e.g., legal, financial and housing)
- Counseling for victims and children (i.e., individual, group and family)
- Children’s services (e.g., recreation/childcare, education support)
- Community networking and education

Services are provided to those living in shelters (or temporary housing) or transitional housing as well as non-residential victims and others.

---

Since 1978, the New Jersey Coalition for Battered Women (NJCBW) has provided a statewide coalition of the domestic violence service programs whose purpose is to end violence in the lives of women. The Coalition’s guiding principles include batterer accountability, recognition of the impact of domestic violence on children, need for a coordinated community response to domestic violence, belief in the need to empower battered women, equality, the provision of quality services and meeting the special needs of victims.  

NJCBW provides “Domestic Violence Program Standards” (hereafter referred to as the “NJCBW Standards”) that are designed to ensure that safe and high quality services are available through the programs for victims of domestic violence throughout New Jersey. The foundation of the implementation of the NJCBW Standards has as its guiding principle the facilitation of empowerment. The Standards address a range of needed services (both residential and non-residential) and the quality of those services. Although individual programs will vary in their ability to provide all the services and meet each of the quality standards, the Coalition expects its member programs to demonstrate efforts to meet these standards.

The NJCBW Standards include:

- That facilities/sites ensure safety and security for everyone using the services.
- Itemized services for programs to strive to provide for victims and including outreach education and training.
- Guidelines for residences that “reflect an empowerment philosophy and keep the number of inflexible rules to a minimum.”
- Guidance on confidentiality, diversity and staffing and evaluation.

The expectations for the domestic violence service programs are high, and the challenges in meeting them great, but the rewards for victims and our communities warrant them.

Annually, NJCBW collects data from the state’s Domestic Violence Service Programs. Excerpts from the 2008 Statistical Summary include the following:

- The number of women and children sheltered in New Jersey was 1,550 and 1,836 respectively, or a total of 3,386.
- The services provided most often to residential victims were individual counseling (42,617), followed by housing advocacy (40,969) and other financial advocacy (36,313).
- The Coalition and its member programs responded to 58,783 calls for domestic violence information.
- Non-residential victims were also provided the services of housing advocacy (48,933) followed by financial advocacy (51,654) and individual counseling (48,847).

---

93 Excepted verbatim from “Domestic Violence Program Standards.” Contact the New Jersey Coalition for Battered Women for information on obtaining a copy.  
95 Two male victims were sheltered in 2008.
The Coalition and its member programs provided 3,345 community education opportunities to 127,083 people, a third (38,521) of which were presentations in schools to students, teachers and staff. Additional presentations were made to court personnel, police, faith-based organizations, health care organizations, mental health agencies, human service agencies (including DYFS and welfare), attorneys, crisis intervention teams, community organizations and volunteers and others.

Services provided most often to sheltered children were recreation/childcare, individual counseling and group counseling.

Ten Coalition member programs provided batterers’ intervention programs.

Programs served victims who spoke at least 9 languages, of which the top four were Spanish, Hindi, Russian and Arabic.

As evident in these excerpts, the state’s domestic violence service programs are serving the needs of many victims/survivors, their families and communities. However, not everyone’s needs can be met. In 2008, almost the same number of women and children that were provided shelter were turned away from shelter (3,364) because of lack of space. This is nearly double the number turned away in 2007 and 2006 (1,793 and 1594 respectively, which includes both women and children) and probably reflects the economic crisis, and therefore a trend that may continue in 2009 and 2010.

The National Network to End Domestic Violence (NNEDV) conducted a National Census of Domestic Violence Services in 2008, a one-day review of services for battered women and their families across the United States. The 2008 Census offers good insight into the daily work of programs/shelters, what needs are being met and what needs are not being met. The census provides a separate accounting for each participating state. On the day of the 2008 census, 21, or nearly all, New Jersey domestic violence programs participated. The following are highlights of New Jersey’s service on that date based on the Census:

1,112 victims served in one day
- 445 domestic violence victims residing in emergency shelters or transitional housing provided by the domestic violence programs
- 667 adults and children received non-residential assistance and services, including individual counseling, legal advocacy, and children’s support groups.
- 586 hotline calls answered providing support, information, safety planning and resources,
- 294 educated in prevention and education trainings,

However, there were also 274 unmet requests for service reported, including 69 from victims seeking shelter.

In this section of the report, the experiences of the women, who participated in this study, with New Jersey’s Domestic Violence Service Programs will be recounted, both the helpful and the unhelpful. These will be followed by the women’s recommendations for changes in the programs/shelters. Of the most helpful was that safety was the priority of the programs/shelters. Once safe, most of the women and children seeking refuge were provided with living space, food and the basic necessities as well as counseling and advocacy on a wide

---

96 The numbers sheltered in 2007 and 2006 were 3270 and 3623 respectively, which indicates that for these 3 years (2006-2008), approximately the same numbers of women and children were sheltered annually.
97 Snapshots of the reports for individual states (last accessed on July 7 2009) can be found at: [http://www.nnedv.org/docs/Census/DVCounts2008/DVCOUNTS08_STATESNAPSHOTS_ALLSTATES_BW.pdf](http://www.nnedv.org/docs/Census/DVCounts2008/DVCOUNTS08_STATESNAPSHOTS_ALLSTATES_BW.pdf).
range of topics dictated by their individual needs. For several women, the shelters were "homes" that allowed them to begin the healing process, and make a life for themselves. Less helpful were instances when women were unable to get into shelter (usually because of lack of availability or lack of help), communal living and shelter rules that were too rigid for some women, staff that lacked compassion and were judgmental, and shelters that were unable to meet individual needs for counseling or advocacy for reasons that include lack of funding.

Before reading about their experiences, keep in mind that most victims who reach out for help from domestic violence programs/shelters, most likely have positive experiences, and that the women interviewed were asked for their recommendations for changes, and therefore, negative experiences may dominate their stories. Their experiences are related here to improve a system that already meets the needs of thousands of victims annually.

The challenge for programs/shelters and other helping agents is to respond appropriately and effectively to the individual needs of victims, even as it is true that all victims seeking help and/or shelter share that they are escaping an abusive relationship. One survivor, Jackie, said it best:

When you get in there you don’t care what somebody’s race is, you don’t care what their size is, you just love these people ’cause you know what, you know all you guys are the same and you know all, y’all feelin the same, like hurt. You feelin the same hurt. There’s no second guessing why you in a women’s shelter for abuse. You know why you’re in there. And you see people come in with stitches, you see people come in with black eyes, you see people come in limping and there is no judgment. There is, you embrace, you just, you just embrace, you just embrace one another.

Nonetheless, while victims share similar reasons for seeking help or shelter regardless of their different backgrounds, we should be mindful that one’s racial/ethnic and socioeconomic backgrounds provide the lens through which victims view their experiences and the responses to their needs and their assessment of whether or not they were helped. However, as stated previously, "it was beyond the scope of this pilot study to investigate how culture, race and ethnicity related to the actions or lack of actions by the various systems and communities."
The Experiences of the Women and Their Children with the New Jersey Domestic Violence Service Programs

As described earlier, the 11 women interviewed for this project reflect the diversity of New Jersey in race/ethnicity and socio-economic status. In addition, most women, but not all, had children. Most, but not all, had jobs, although some women were forced to leave their jobs because of the abusers. The women had differing familial support and financial resources. In most cases, battered women’s resources fluctuate due to the abuse itself and the batterers’ level of control, such as their ability to isolate the women from their families, control transportation or deny victims access to money. Given these differences, the victims’ needs for assistance differed, as did their experiences with the domestic violence service programs. For example, it makes sense that women with the fewest resources (e.g., familial or financial) are typically more likely to stay in shelters and for longer periods of time.

Eight women were sheltered through at least eight different county programs. Some stayed for a few days, some stayed several months or longer. Four women brought their children into shelter, while others found alternative places for their children to stay, e.g., with family. At least one woman sought refuge in a homeless shelter because she could not initially get into one of the domestic violence shelters. Three women did not go into shelters, however they used the services of the domestic violence programs. Of the five women who did not go into shelter or stayed only a few days, all had significant familial support and/or financial resources. None of the women were staying in shelters at the time of the interviews.

“Not all shelters are alike.”

The women’s experiences with the programs sometimes differed markedly, leading the researchers to coin the phrase ‘not all shelters are alike.’ Four women stayed in more than one shelter and their comparisons of the shelters highlighted the differences. For example, Megan contrasted the two shelters she stayed in like this:

_The one in [home town], I didn’t care for. It was s’more like a dormitory. You know, you go in there and you feel like, it’s a women’s dormitory, but you’re in, you’re in prison, you’re in solitaire [sic] or something. It was scary. It’s very scary there. Also, been to the one in, in [another town]. That one’s like home too. The one’s that are more like home is where you’ll get more progress._

Megan’s contrast of the two shelters is stark: “prison” versus “home” and her last statement is powerful and bears repeating: “_The one’s that are more like home is where you’ll get more progress._”

There are many reasons that might explain differences among shelters throughout the state. First, funding of programs/shelters can differ from county to county and from year to year. County programs/shelters most likely to receive funds from the federal Family Violence Prevention and Services Act, which are administered through the New Jersey Department of Children and Families.98 Most also compete for a variety of funding from the Violence Against Women Act (VAWA), the Victim of Crimes Act (VOCA), and the New Jersey Department of

Community Affairs. Second, some programs/shelters have more capacity to research and apply for funds, thereby enhancing their program’s ability to secure funding and provide services. Third, programs/shelters may be located in urban, suburban and rural areas and in communities that have better resources and/or that embrace the programs, providing not only additional financial support but also a volunteer base to assist with direct services for victims and others. Fourth, most shelters were not built for the purpose of sheltering victims and their families. Some were previously private homes and some shelters are within institutions or government buildings. These variations in funding, resources and locations, among others, can explain why some women who were interviewed for this project reported differences resulting in the authors’ conclusion that not all shelters are alike.

Accessing Shelter

“You can’t afford to go on ifs and maybes.”

Domestic violence service programs/shelters provide safe havens for many of the thousands of victims and their children who need to flee batterers annually in New Jersey. Many survivors, however, fail to get into shelters for a variety of reasons. Some of the obstacles faced by the women we interviewed included:

- Lack of availability in the shelter contacted, typically local shelter
- Help getting into shelters was lacking, e.g., responses were inadequate
- Lack of resources to access shelters, including no access to phone or money for pay phone; lack of emotional stamina or time to contact multiple shelters post-trauma

No Space Available

In 2008, several thousand women and children in New Jersey were turned away from domestic violence shelters because of lack of space. The lack of space in shelters can mean that women must return home to the possibility of more abuse. If a local shelter is full and unable to accommodate an eligible victim, shelter staff will contact neighboring shelters to find space for the victim. However, it is often difficult for abused women without resources to travel, especially without their own means of transportation, to more distant shelters. Women also have other reasons for wanting to remain local. For example, Alice was trying to maintain ‘normalcy’ for her children who were attending local schools. Alice’s experiences illustrate not only her problems but the problems for shelters with a limited number of beds:

A lot of times they were full and they’d say you have to go to [another city], and I couldn’t go. I didn’t have transportation, or you’d have to go, they’d give me another name to travel to and I had no way to get there so I just wouldn’t go and I’d end up staying up all night, so a lot of time the availability wasn’t there.

Unable to get into shelter, Alice would stay up all night because she needed to be prepared to flee if her husband came home, despite a restraining order against him. Alice related,

For a long time, I slept with shoes on ‘cause I’d always have to, when I heard the noise, I would try to take off but its hard to take off when you’ve got [toddlers and a baby], how many can I carry?

For victims in need of refuge, getting into a shelter can be a matter of life and death.
Help getting into shelters was lacking, e.g., responses were inadequate
Most people today know that domestic violence exists. Even so, most of the women in this study related instances when they did not identify themselves as victims in abusive relationships, and that they did not know what to do about it, who to call for help, what services might be available and how to access them. Gwen did not call the police for help because the abuser was too dangerous, instead deciding that escaping and hiding was the best strategy for her, her children, and other family members to be safe. Here are Gwen’s reflections on how she found help by calling one state’s Department of Human Services (DHS):

I’m like, okay, you hear about this all the time, I know women stay, but I know you ain’t supposed to stay. Like where’s the hotline numbers, like what am I supposed to do? ... I called, uh, DHS. I knew that was for children, so I knew if it worked for children they would have something for me. It was a connection.

Gwen was in a neighboring state and she was fortunate to make a “connection” with a domestic violence program’s hotline through information provided by the state’s DHS. Gwen’s call to the domestic violence program in a neighboring state to ask for shelter was less fortunate:

And I called that lady when I got to work and I said, ‘look, you have got to get me out this situation’ and she said to me, she said ‘I’ll look for you’, she said ‘but I’m not sure we’re going to have anything in [name of county in neighboring state].’ And she called me back and she said, ‘we have nothing in [name of county in neighboring state].’ I said ‘look you cannot send me back to that house.’ She said ‘I’ll tell you what you do, you go home,’ she sent me home, she said ‘you go home, you make a safety plan,’ she said ‘and you call me tomorrow,’ she said, ‘and I’ll have something for you tomorrow.’

Gwen confirmed during the interview that she was not offered any other resources and the woman on the hotline did not try to find her any other accommodations for that night. Like other victims across the country, Gwen was forced to return home to potentially suffer more abuse.

Unlike Gwen, Barbara sought help first from the police. As related in a previous section on the law enforcement response to victims, the police did take Barbara’s report and assisted her in getting a restraining order against the abuser, but the police were less helpful in meeting Barbara’s need for shelter where the abuser would not find her. The police provided Barbara with a list of numbers for her to call to see if beds were available. As Barbara made the calls, she kept being told that space was not available. She related how she “broke down crying most of the time, but I just had to go to the next one on the list.” Barbara also said,

If someone is calling and saying we need help, you don’t have time to go through a 100 list to find somewhere to go that night. That’s another reason why a lot of people end up returning to wherever they trying to get away from, because the sources that they run into is saying we can’t help you.

These words, “we can’t help you” and Barbara’s experiences personify one of the answers to the question often posed: ‘why do the women stay in abusive relationships?’ Sometimes the answer is that there was not enough help for the women to leave safely.


**Lack of Resources Impact Getting Into Shelters**

Barbara further explained the difficulties in making calls that included not only that she was in ‘distress’ but that the abuser may also control the finances so that the victim does not have any money to make calls:

> Actually, when a woman is in distress, to have to make calls which she may not even have money to do because that’s one of the things they [abusers] control you with, it’s very difficult and to keep being told we’re full, or, um, try back tomorrow, ...when you out there or you trying to flee a situation where you feel your life is at risk, you really need to, um, have definite sources of, um, assistance. You can’t afford to go on ifs and maybes. ...It’s an escape for you, because when you keep hearing, no I can’t help you. ...You don’t know that when you go to the police department. You don’t know that when you talk to the hotline because they have this sheet of paper. I know the hotline was lookin at the same printout the police handed me. And they’re recommending I call, they’re not calling for me.

In addition, today, cell phones are taken for granted, and Barbara reminds us that abusers can use cell phones to track and control victims:

> Because you know most the time you don’t have money, you don’t have a cell phone. People think because cell phones are so popular, everyone has one. Believe me, in a domestic violence relationship you’re likely not to have one. If you have one, your sources are probably limited so that only your abuser can reach you and if you have more sources where you can use them, you don’t wanna use them, you scared to use them ’cause he’s gonna check to see who you been talking to, how long you been talking.

Eventually, Barbara found shelter in a neighboring state, but it was not a domestic violence shelter. Barbara found a place to stay in a homeless shelter:

> I was faster to get help as a homeless person, and that’s not saying it’s not urgent, but it’s not the urgent level of fleeing someone that is gonna hurt you or kill you.

Numerous studies have confirmed the connection between homelessness and domestic violence.99 “When women flee domestic abuse, they are often forced to leave their home with nowhere else to turn.”

Although Barbara finally found space in a domestic violence shelter, she faced yet another obstacle: transportation to safety. Barbara needed to get to the shelter using public transportation, and then find a phone to call the shelter to pick her up from the bus stop. In the age of cell phones, however, working public phones are rare. It is a testament to Barbara that she persisted under the circumstances but it also underscores her fear of the abuser:

> It was a domestic violence shelter where I called from the prosecutor’s office. That’s another source that gave me a number. I called and was able to speak to someone and they told me they had a bed available for a single woman. Um, I had to meet someone once I got to [a New Jersey city] I had to be able to call them again, um, once again you

---

have to have money for phones. ... Now I was blessed that there was a pay phone that worked where I got off the bus at.

Eventually, Barbara was able to get into shelter and she relates how comforting it was once she got there:

Once I was able to find a place to go, once I got there, it was very comforting to know that all my needs were met. If I had just left the house with nothing I would have had all my needs met, the clothes, the food. That was reassuring. Yes. That helped a lot.

Access to shelters when needed by victims of domestic violence is critical for their safety. Of the eight women in this study who went into shelters, three women spoke of their difficulties in accessing shelter. The other five women may not have had problems getting into a shelter when needed but this can only be deduced because the interviews were conducted in such a way as to allow the women to tell their stories, their way. Suffice it to say that the women’s experiences reflect national and state findings that show that many women and children do not have their immediate needs for shelter met and barriers to access, including greater availability of beds must be addressed.

Along with shelters, domestic violence service programs also provide substantial services that are needed by victims and their families. In the following pages, the survivors interviewed for this study share their experiences with programs/shelters, how they met their needs, and sometimes how they did not meet their needs, and what might have been helpful to them.

In Shelter: Safety as the Priority “You feel real safe.”

The safety of victims and their children as well as the staff is the priority of the domestic violence service programs/shelters. Earlier in this section, Megan referred to the shelter as a “safe haven” and “somewhere you don’t have to worry about anyone finding you.” Gwen, who feared her abuser so much that she was afraid to go to the police, said of the shelter:

Like in there you feel real safe, you feel real safe. Once that door’s shut its like, phew. You know? And you know can’t nobody get in ‘cause they got the cameras, so you just like, phew. You feel real safe.

It is important for women in shelters to feel safe, and while shelters are not impervious, they are designed, and staff trained, to prioritize safety. Gwen’s experience after she arrived at the first shelter illustrates that safety is the priority. Gwen learned that the abuser was attempting to access her cell phone account on-line. When she reported this to shelter staff, they immediately moved her and her children to another shelter. While it was unlikely that the abuser could have accessed the account and then learned the location of the shelter through the telephone numbers, he might have learned about her general location from the area codes of the numbers that Gwen called near the shelter. Shelter staff took Gwen’s concerns seriously and took immediate steps to ensure her safety. A fitting saying of shelter philosophy could be ‘better safe than sorry.’
In Shelter: Basic Needs “We walked in with nothing”

Most of the women who went into shelters commented on their satisfaction with the programs’ in meeting their basic needs for shelter by providing a safe space with a bed and food. Several women further related how they arrived at the shelters with nothing and they were provided with clothes and toiletries for themselves and their children. One non-residential victim with children, who was staying with her sister, was also helped by a local program with food and clothing for herself and her children, including diapers for her youngest child. Rose, who went to shelter one winter night, told the interviewers:

The shelters were helpful in that they provided that basic shelter. You know, like me with children, I was worried about what would they eat, where would they stay? It was cold and you worried about injuries to the children while you are in flight. So, that was a very good thing. Um, I mean in fact that made me so happy.

Many women leave their homes with little or nothing since it is a decision that may be made quickly and without preparation. Shelters provide one solution for some women, although it is not without impact. Gwen eloquently provides her reality of going into shelter:

Like you go through that you be so broken. You have a house one day, next day you have nothing, you don’t even have food, you don’t have clothes, like we only went with what we had on. And you have nothing; you go from nothing, you just like, we had nothing. And I just don’t think people understand the impact of it, like I think we focus on the physical, the punches and the, this, but like your finances is gone. Your family is gone. Your clothes, everything is gone. You’re wearing the same thing over and over and over or you got to wear something somebody give you. ...It’s so quick, I left my cat, I left everything.

Gwen’s insights into what it means to go into shelter speak to the difficulty of making the decisions to leave the abuser and her home. As Gwen makes evident, women seeking shelter or escape from domestic violence often have to give up their jobs, homes, families and friends, and start over to rebuild a life that is free from abuse for themselves and their children. Programs/shelters need to be prepared to meet the basic needs of victims arriving at any time, and then meeting their needs for counseling and advocacy as will be demonstrated later in this section.

There was also some dissatisfaction expressed with the shelters in regard to meeting the basic needs of victims for food and a clean living space. When Gwen arrived at the first shelter in New Jersey before being moved to a second shelter for security reasons, she described it this way:

We didn’t have any food and at this particular shelter you needed to buy your own food. I didn’t have no money, everybody in there had like food stamps, they had their name written all over their food. So, me and my son is already in the shelter now and we look like beggars because they had their own. The shelter had their own food but ...then it was certain time that the kitchen closed. And they didn’t have curtains up to the windows, they had like sheets. And they had all these roaches in there. Oh my God, and my son who is not a crier, he was just like crying, he was like, he just said, ‘Mom, I don’t know why you in this shelter and I don’t know why you didn’t stay [in their home].’
Gwen and her son arrived on a holiday, which may have had an impact on the number of staff working. Also shelters have food budgets and they need to secure food so there is enough for all residents. Nonetheless, there can be little rationale for no food being offered when Gwen arrived with her son or for the condition of the shelter. In this shelter, Gwen's basic needs for food and adequate shelter were not met. In contrast, Gwen said of the second shelter, “I really loved [name of 2nd NJ shelter]. It was really nice.” Gwen's contrast of the two shelters further confirms that 'not all shelters are alike.'

Children in Shelter

If I didn't have the shelter, my kids wouldn’t have Christmas.”

Of those women who brought their children into shelter, nearly all were adolescents or younger. Some of the women made statements such as “My kids still feel that that's their home.” Nearly all of New Jersey's domestic violence service programs reported that for 2008, they provided recreation and childcare, and most provided children with educational support. Services for younger children may be more available however, than for older children.

Although Alice described negative experiences at the first shelter, including that the staff would “get annoyed cause I had a baby crying”, Alice's experience at the second shelter was so positive that she would visit there with her young children even after they moved into nearby transitional housing. Alice noted,

The plus was that when we would go there, they made the kids feel welcome and they liked to go. They would call it the big house and they used to say can we go to the big house, so ...I would put them all in a stroller and we would go, you know, on our little trip there, and they’d always leave with a little toy which made them happy and they got attention there and they had someone like the, the counselor for them.

In contrast, Gwen expressed her dissatisfaction with services for teens, and in particular her teenage son. While several women interviewed brought their younger children into shelter with them, only Gwen brought an older child. And while most shelters report that they provide counseling for teens, Gwen said,

There was nothing, even for, um, the meetings, they didn’t have anything for teen children. They had art therapy; you try to get a fifteen year old to go to art therapy. And he was very, I don’t know, he was very like to himself.

It is important to note that many shelters do not allow male children past a certain age into the shelter for a variety of reasons. Teenage male children are often physically large and stronger than most of the other residents in the shelter. They may have learned and adapted the batterer’s behaviors and tactics of control. Shelters are a communal living situation and it may be inappropriate for teenage boys to share a room with other adults and children. Most programs offer an option of sheltering male victims and women with teenage male children in motels. However, this may not be a secure option for many battered women. Motel rooms are often isolated, with no one available to intervene or call law enforcement should the batterer arrive. Motel operators and guests have no reason to protect the confidentiality of families staying there and may actually assist the batterer in locating his victims. Women then, are faced with the choices of leaving a child behind and possibly in danger, remaining with the batterer until they can find other sanctuary, or a temporary stay in an isolated motel room where they
may receive little support and may still be in danger. Shelters must weigh the concerns
associated with having teenage males in the shelter with the need to keep families safe and
together.100,101

In general, however, domestic violence service programs and shelters often go beyond
the basics of safety and physical shelter to help make the lives of their clients better. For the
women with children, most remarked that the programs or shelters provided extra things,
especially presents for the children on holidays and birthdays. Carolyn showed her appreciation
when she said,

If I didn’t have the shelter, my kids wouldn’t have Christmases. They wouldn’t have
birthdays, they, you know, there, there wouldn’t be those things.

Four women said that the programs/shelters continue to provide these gifts for their children
even after they left the shelters. Alice spoke of other gifts from the shelter after she left that
helped her out financially and made her children’s lives better:

They were so great ...and I’d bring it [food donated to the shelter by a local restaurant]
home for the kids, and they’d give them tickets to the circus once in a while, they got to
go. The movie passes, and they were finally living like they should. They asked if the kids
wanted haircuts. They would do things like that, that you couldn’t afford but made you
feel like everybody else.

Whether in shelter, after leaving shelter, or non-residential victims seeking services, programs
try to provide various services for children and often are able to give meaningful extras that the
mothers cannot afford at this time. Survivors spoke of the ‘normalcy’ and comfort such services
gave them and their families, and how powerful that was in rebuilding healthy, stable lives.

In Shelter: “Rules”

“He had to follow me, I had to follow him.”

For most of us who have never had to flee our homes for shelter, it is important to shed light on
how difficult it can be to adjust to such living quarters. Shelters are communal in nature, and due
to their primary purpose, must establish rules and practices that promote the safety and welfare
of all survivors seeking services. Such ‘house rules’ often include curfews, check-in/check-out
policies, rules regarding confidentiality, health screening/testing and rules regarding visitors,
drug and alcohol use. Due to the communal nature of shelters, there are also policies regarding
kitchen use, cleaning responsibilities, sharing bathrooms and other communal areas such as a
TV room or computer room, and policies regarding clients’ children. Lastly, there are often
programmatic rules/policies, such as intake and shelter exit procedures and mandatory program
attendance. The New Jersey Coalition for Battered Women (NJCBW) has guidelines regarding
residential Domestic violence services. According to the NJCBW Standards.102

   Patterson for the Washington State Coalition Against Domestic Violence. October 2003. Last accessed August 23,
102 Excerpted verbatim from “Domestic Violence Program Standards.” Contact the New Jersey Coalition for Battered
   Women for information on obtaining a copy.
Residential Guidelines shall be developed to help produce a safe, consistent and effective residential environment for residents and staff. They should reflect an empowerment philosophy and keep the number of inflexible rules to a minimum. Mandatory participation in programming and mandatory drug testing are examples of non-empowering rules.

Guidelines should address the following information to help the resident adapt to new living environment, know what is expected of her and her children, and what she has a right to expect from the program/staff:

- Communal living rights/responsibilities, e.g., chores, house meetings conflict resolution, bedtimes
- Program/service functioning, e.g., meetings with counselors, group times, transportation procedures, case management planning

Implementation and enforcement of Guidelines should be done in consideration of the need for safety and consistency, as well as the physical and emotional needs of each individual resident.

Of the women interviewed in this study, the researchers learned some of the reasons why not all who sought shelter could adapt to communal living and shelter rules and consequently their stays were short, often because they had resources that allowed them to leave. Some women stayed in more than one shelter and reported that shelters differed in the way they operate and it is expected that these differences will affect whether or not the women stayed or left. And, the researchers also consider how there were communication disconnects in regard to the rules that affected the experiences the women reported.

**Not all women seeking shelter can adapt to communal living and shelter rules.**

Adapting to communal living, even if temporary, can be difficult. Two women only spent a few days in shelter because the shelters did not fit their needs. Although both women were appreciative of the support they received from the shelters, both found the shelters and their rules too restrictive for them.

Rose and her children stayed in shelter only three days, although she was pragmatic about the rules and the overriding needs for safety. Rose said, “It’s very restricted. But that’s fine. You know, the main thing is safety.” Rose provided an example of her perception of a rule in which she felt the residents in the shelter had to be out by 9 or 10 in the morning. Since this sounded more like the rules for a homeless shelter, the interviewer confirmed with Rose that she was in a domestic violence shelter:

> Yeah, you have to be doing something, you have to help support, that’s what they tell you, you have to support yourself because everybody has to be out of the shelter maybe by 9, 10? They don’t want people in the shelter. They want you out. They don’t want, because that’s the message they give you, because you are not allowed to go to the kitchen to make food at a certain time. Yeah, um, yeah, you are not allowed to cook at a certain time. So, I think by those times what they’re telling you is you have to be out doing something. You know so that’s, that’s the sense, that was the sense of what I got.

Even after clarification that Rose was talking about a domestic violence shelter and not a homeless shelter, the researchers were unclear if this was Rose’s perception of the need to leave at that time or a shelter requirement. Rose had sufficient resources to leave the shelter with her children and stayed in a motel until she could make other arrangements.

Similarly, Jackie stayed for only a few days. Jackie had a full time job although she was also an entrepreneur with her own company that she was in the process of dissolving because
of the abuser. When she went into shelter because she was no longer safe in her home, she left her young child at her mother's house. Jackie related her experience with the shelter rules:

*I actually ended up leaving not because they weren’t nice enough, but like, I couldn’t fit in there. I was only at the shelter for 3 days ’cause I couldn’t get anything done. They had a curfew time. And even though they let me, because I worked later hours, even though I wasn’t working I still like couldn’t work with it. They had house chores. Okay, I understand the whole community thing of it but I don’t get in ‘til 11 or whatever, and I ain’t, can’t be doing no house chores. I’m out at 6:30 in the morning, um, they had a mandatory meeting that you have to be at. I couldn’t be at the meeting ’cause I’m out trying to handle my business my way. And I understand, you know, like it just wasn’t a comfortable situation. They didn’t try to make it uncomfortable.*

Like Rose, Jackie was also pragmatic about the need for rules: “*I understand the whole community thing of it*”, but the hours that she was outside of the shelter made it difficult for her to take part in the shelter activities which are designed to provide counseling and advocacy to residents as well as maintain a safe, clean and healthy environment for the residents and staff. And like Rose, Jackie had sufficient resources that enabled her to leave the shelter after a few days.

**Other women reported on differences between shelters.**

Megan and Alice in particular stayed at several shelters and for extended periods of time, and their similar responses to the shelters are noteworthy in two ways. First, like Megan, Alice stayed in two very different shelters, and also like Megan, Alice described one shelter like a “prison”:

*I felt it was like prison, female prison, you had to check in, check out. I know they have to have rules but it was just the atmosphere, there were people that automatically were giving me a hard time, ... and its like I didn’t feel welcome by the people in there.*

As with Jackie and Rose, Alice recognized the need for rules but her description suggests an especially harsh environment. And second, like Megan, Alice described the second shelter that she stayed in with her young children, like “*home.*” Thus, their disparate images of shelters as “*prisons*” versus “*homes*” suggest that the shelters operated very differently.

Recall Gwen also stayed in two shelters and described the conditions of the first rather bleakly with cockroaches and the lack of food. Gwen and her son stayed in the second shelter for several months and she found a temporary home there. As is often the case in communal living, families typically share a room. Gwen and her son slept in the same room and shared a bathroom with other residents. That his Mom would come into the room shortly after showering was embarrassing to this teenage boy. Also, according to the “*house rules*”, Gwen said that her son “*had to follow me, I had to follow him*” and that he was not allowed in the kitchen:

*...he should have been able to make his own bowl of cereal, but he couldn’t because that was the house rule. That was the house rule, no kids in the kitchen.*

Gwen was the most vocal of the women interviewed about shelter life; and, her voice throughout this section tells us what worked for her and what did not work for her and others. Gwen’s insights into shelter life and adjusting to not living in your own home included the following:
You don’t have your choice of, um, just being able to just get up and just go, I don’t know, the stuff you just take for granted. You can’t get up, you can’t go to the store, you gotta lights out, you gotta shower with, or use showers with strangers. I mean it’s just, it’s a bigger picture than the punch... like your finances is gone.

Despite that some shelters may be like ‘homes’, we should all be mindful that victims and their children have been uprooted from their own homes, live in fear of the abusers, and must adapt to communal living and shelter rules.

**The need for women in the shelter to feel “normal.”**

Under the circumstances, it is understandable that the desire for normalcy came up frequently during the interviews. For some women, their experiences with shelters that were designed more like homes helped to make them feel more normal. Jackie suggested something that might easily be done:

> You have women there who were used to putting on make-up everyday. Not that a shelter is a place where your life is going to be the same, we all know that, but I’m saying trying to keep it close to that as possible. ...These are just the things that women were saying, while we were in there ...I just think that a lipstick, a little complimentary bottle of perfume, something that would just make you feel a, a little bit normal.

Shelter residents must make many accommodations to their circumstances if they are to stay in shelter and safe.

**Communication Disconnect**

The researchers began to consider that there might often have been ‘communication disconnects’ such that the reason for some rules were not clear to the women, or sometimes to the researchers as they were related by the women. There appeared to be either a lack of understanding about the reason for certain rules or inflexible rules applied by shelter staff. These ‘communication disconnects’ may be among the reasons that women leave shelters as was possibly the case with Rose and Jackie as described above. According to the current NJCBW Standards, a shelter’s guidelines “should reflect an empowerment philosophy and keep the number of inflexible rules to a minimum.” Also according to the Standards, residents should be well-informed of the rules and know how to negotiate them.

A final example demonstrates how the communication disconnect can cause complaints about the rules and concerns for others staying in the shelter. In this case, Gwen complained that there was no network among the women staying in the shelter such that if a woman went out and did not come home or was missing, the other residents did not know what happened to her. Gwen further explained how the women bonded and why she felt a network among the residents would be helpful:

> You had the network amongst the staff, but we didn’t have that amongst one another. So, if a girl went out and she didn’t come back, we sitting down in the room and we just like, ‘cause we all know we in there for domestic violence but we don’t know if she got snagged out there. And then it’s like, when they come walking through the door we are like, ‘Yay!’ like, you know, hugging and stuff, like, ‘Wooooo!’ ... And it’s sad when people leave. It’s sad when they leave ‘cause you don’t know what they leaving to. And
However, the confidentiality of residents is sacrosanct in the shelters such that if a client leaves for any reason (e.g., to return home to the abuser, or to move to another shelter), she may not want the other residents to know and it may not be safe for her if they do know. Therefore, the reasons for the rules may need to be better explained or explained many times since it is not always easy to comprehend under the circumstances in which these women find themselves. Even if shelter staff must keep information confidential, these women’s reflections indicate that having a group meeting or carving out time to allow the remaining women an opportunity to discuss their feelings in general would help alleviate anxiety or other concerns that come up for residents. Some shelters may already be doing something to address shelter residents’ anxieties when other residents leave the shelter.

**Program/Shelter Staff**  

**“Staff is staff” versus “Oh, I just loved them”**

As in any profession, the knowledge, experience and training of staff in domestic violence shelters and direct service agencies can differ vastly. Typical positions for staff include crisis counselors, therapists, case managers, hotline staff and advocates assigned to liaison with other agencies or offices such as courts or human service offices, and those positions have their own unique education and experience requirements. Staff is required to complete a certain number of hours of training on domestic violence, and each agency typically offers their own training, as does NJCBW. Staff who work in shelters must often work overnight or take on-call shifts outside of typical daytime working hours. Domestic violence hotlines are available 24 hours a day, every day of the year, and advocates must sometimes find an additional counselor or translator for clients calling who do not speak English as their primary language. Plus, many of the county 24 hour hotlines are answered at the shelters. The demands placed on shelter staff are great, yet the positions are often lower paying with limited benefits compared to the for-profit sector. According to the 2008 Census of participating New Jersey programs, “The average starting salary of a full-time, salaried front-line advocate is $28,094.” In addition, the work can be demanding, especially emotionally, and staff burnout and/or turnover are staffing concerns. Also recall that the Census stated that “lack of staffing was a reason” that programs “could not meet domestic violence victims’ request for services.”

The women participating in this project provided mixed reviews about the staff at the programs/shelters. Carolyn provides a clear commendation of the response victims receive when they call the programs/shelters:

> And I mean a lot has changed, a lot of staff, they come and they go, things change and people move on, but old or new it doesn’t matter. Like they don’t even know me and you call up and they’re right there to make whatever needs to happen, happen. And it’s, um, night or day, they’re there. You always have that comfort that, you know, an un-judgmental ear is there to help you through any situation.

The programs/shelters strive to ensure that staff is available 24 hours a day and seven days a week year-round, who can speak with victims and others needing help regarding domestic violence, provide support as needed and respond to queries on a wide range of topics.
Of the women who stayed at more than one shelter, we heard contrasting views of the staff at the different shelters, affirming once again that ‘not all shelters are alike.’ Of the staff at the first shelter where Gwen and her son stayed briefly, she said,

The staff was okay … I just think the staff is staff. They were young, so they didn’t have the compassion that you need, they didn’t have that ear. They just didn’t have that, I don’t know. It was just a job to them, you know? …I just think if you are in that position, like you need to be, I don’t know, not actually go through that but it might be helpful to have somebody on staff that has gone through that. So that you can give the people coming through like um, some encouragement, like you go through that you be so broken.

In sharp contrast, at the second shelter, Gwen exclaimed “Oh, I just loved them.” And then she went on to explain,

What I liked about the staff at [name of 2nd shelter] is because we had meetings that we had to attend. And even though I didn’t have any small kids like the um, the people that worked would watch the small kids and cook with the small, like you know, like making it as much a family as they could. And, we would talk about stuff during the day. Sometimes the staff would even come in and watch TV with us, and you know try and incorporate all of those different families, different life styles, and, because all of us in there were already broken, so we didn’t need to be in there trying to further break each other down. So you had the staff in there bridging the gap. I really loved [name of 2nd NJ shelter].

At the second shelter, where Gwen and her son stayed for a longer time, the staff appeared to be closely involved in the day to day activities with residents, including the children. The shelter is considered a home and the staff and residents are family. Gwen also recognized the need for staff to “bridge the gap” between residents. According to the recent shelter survey conducted by Lyon and Lane in collaboration with the National Resource Center on Domestic Violence “conflicts with other residents were the most common conflicts identified, affecting three in ten survivors” living in shelters in eight states.103 However, other than this mention by Gwen of staff at this shelter who appeared to be taking steps to avoid problems developing among residents, there was no other mention among the women interviewed for this project about the need for conflict resolution among shelter residents. Conflict resolution is among the critical skills needed by staff, because of the communal living, diverse populations in shelters, and stressful circumstances among other factors.

Discontent with Shelter Staff

Two women were dissatisfied with staff at the shelters where they stayed. Both women had resources that may have distinguished their needs from many of the other residents.

First, there was Rose, who was a graduate student, studying for a professional well-paying occupation. She found the domestic violence service program she contacted overly focused on providing specific resources for their more typical clients:

What they had in the shelter was to go stand in line for food stamps, you know, I mean and that’s what I did. So, I stood in line for food stamps… and what else did they have, uh, unemployment office then, and I told them, actually, I, I’m telling them, ‘No, I’m a student. I’m not, I’m not doing it, I’m not here because I don’t have a job. I’m a student.’ Yeah, they [staff] know, ‘forget about your studying.’ ‘your life is more important’ you know. I said ‘No, I can’t forget about this. I have to study.’ And, but I want to make sure I’m safe I was the only one there with a car and everything, I had my own food.

Depending on the location and sociodemographics of a community, shelters may cater to a majority of clients with similar needs. However, domestic violence does not discriminate in regard to race or socioeconomic status, and thus, shelter staff must take into consideration whether they are offering resources and an empowering environment for clients with diverse needs. This is especially true when counties have diverse populations from which victims come, and victims may end up in a shelter in another county than their own or even another state. As Rose saw it, the staff needed to be “more educated” and needed to provide Rose with other possible resources, and in general, staff needed to provide more direction to victims, such as asking questions and providing answers:

‘Look where are you now?’ ‘You got your restraining order?’ ‘This is where you go.’ ‘This is the office you go to.’ ‘This is, if it doesn’t work call this person.’ It gives that person a sense of structure because when they leave you’re like, you have no structure, you don’t know what next to do. So they, that woman needs a sense of structure, you know, tailored to her educational level and what she was before.

In effect, each victim’s needs must be assessed and advice provided that is ‘tailored’ to meet that victim’s needs with recognition that victims can have differing goals. Rose explained further:

So you need to have somebody there who will hear it, who will tailor whatever it is for that person, ‘what do you want us to do with you now?’ ‘What is most important to you now?’ I want to be safe. I want to get back into my house. Or I want to leave the state. Or, you know, everybody’s goal at that time is very different.

The tailoring of services for victims most likely goes on every day at domestic violence programs/shelters across the country and throughout New Jersey. To provide tailored services for victims requires training and experience. All staff are required to receive a minimum of 40 hours of training, however, again, the relatively low wages and difficult nature of the work often means high turnover rates and consequently, fewer staff to accumulate experience. To supplement the paid staff, programs rely on volunteers to do a range of jobs. Volunteers are also required to take a minimum of 40 hours of training. And like paid staff, turnover among volunteers is also high. Thus, the experience necessary for paid and volunteer workers at programs/shelters to address the needs of all victims and to tailor services accordingly can be challenging.

Sarah felt that she had been treated unfairly by staff at the shelter. She believed there was a “mindset” or bias against victims who had some resources of their own. She told the interviewers,

Um, as far as services, there’s a mindset that if you are little more affluent you don’t need help. ‘Why should we help you?’ ‘You could help yourself.’ And that’s what I was
When asked to elaborate with examples, Sarah said:

Yeah, little things. Like, in shelter, they filed this [housing] program [application] for everyone. They didn’t file paperwork for me. ...one of the stipulations [for transitional housing] is that you had to have a car and you have to either work or go to school, and I didn’t get to complete my bachelor’s. I wanted to go to enroll in [a community college], they told me ‘no, that wasn’t an option.’ Um, so I signed up for [a business school] and I went. And most of the girls were given grants or loans or, um, a lot through a foundation that helps people of domestic violence, women and their children with tuition. I have a loan, they would not do the application for me.

Historically, domestic violence agencies and shelters have been underfunded, and it may be that agencies, as within any other field, which can afford to pay more will be able to attract and retain better staff as well as an adequate number of staff in relation to the number of clients needing services in their respective communities. Notwithstanding, survivors again and again discussed how important it was to them to have compassionate, non-judgmental professionals who were able to validate and respond to their unique needs. Staff who have these qualities are more likely to have a positive impact on survivor’s emotional well-being.
Counseling Services ‘empowerment, support, education, options, advocacy/referral, and safety planning’

Counseling for victims is a core service of domestic violence service programs. All 27 New Jersey domestic violence service programs provide individual counseling for victims. The definition of counseling services used by shelters for many years is the following:

“Counseling services provide a specialized intervention which is of vital importance in dealing with both immediate and long term emotional impacts of violence at home. Victims need help in dealing with the immediate crisis, fear, and low self-esteem, which results from abuse.” 104

The focus of counseling based on this early definition is on the emotional impact of the abuse for victims that can be profound and long-lasting. Alice equates her feelings at the time she went into the second shelter in another county as similar to the post-traumatic stress that soldiers experience:

‘Cause you can’t function, you can’t, you’re there and at that level I was at, I just shut down, I couldn’t, I couldn’t function. ...but this has changed me so much, like I kind of compare to guys that go to the war and they’re shot at, and they’re, you, when you get that fear so many times over and over, I don’t know if you can ever heal it. You can learn to function again I’m sure, but you never, it changes you so much, it changes your fiber. You’re never the same. And to this day I have trouble with really enjoying life.

That abuse ‘changes your fiber’ evokes the long-term consequences for victims and illustrates the need for counseling to deal with these life changing experiences.

Counseling was provided: “guiding” and “strengthening”

Alice was very grateful to the shelter staff for “guiding” her when she was no longer able to “function” and because they provided counseling for her and her children. Describing herself as a “zombie” and “anorexic,” she was no longer able to care for herself and was doing her best to take care of her young children:

It was like my body moved around and I took, I always dressed the kids and hair was done and I fed them but I didn’t take care of me at all and I don’t know what was going on around me, it was like I was a zombie. I just made sure they were all right and that’s all I could do. It was all I could manage to do. And they got me in counseling and, um, I had lost so much weight, they told me you know like I gotta eat better, they like guided me, and I did, I put on weight, once I was out of it, I got better ‘cause I looked anorexic.

Victims of domestic violence are often physically and emotionally drained of energy. Poor emotional or psychological health often results in poor physical health for abuse victims. Alice’s insights give us an idea of how difficult it can be for victims of abuse to leave their home and escape with their children into a shelter, and how leaving is often just a beginning in terms of

104 NJCBW. Personal communication. October 2009.
dealing with the aftermath of violence. Counseling victims becomes a critical need that shelter staff is trained to provide and it is critical for survivors’ healing and a stable life free of abuse.

While counseling in programs/shelters continues to take on the emotional impact of the violence with trained counselors on site to talk with victims, the counseling of victims is more extensive today and includes discussions of options such as what the victim wants/needs to do, what problems she is having and how the program can help her. There is often an overlap between ‘counseling’ and ‘advocacy’ which are both provided through domestic violence service programs. According to the NJCBW Standards, “individual counseling should include: empowerment, support, education, options, advocacy/referral, and safety planning.” Megan said of the counseling she received:

They were there to assist you and help you and give you information and, you know, strengthen you, give you a backbone, and, you know, send you on your way.

For Megan, the shelter staff was there to support her and to empower her by ‘giving her a backbone’ and then ‘sending her on her way’ to hopefully live free from interpersonal violence. The aspects of her counseling mentioned by Megan fit with the NJCBW goals for counseling.

**Complaints of no counseling or inadequate counseling**

Given that the counseling of victims is among the core services provided by domestic violence service programs, it was somewhat surprising during the interviews when several women who went into shelters complained that they did not receive counseling or the counseling was inadequate. Alice related to the interviewers that when she went into the first shelter, the counseling was insufficient. Given the especially abusive episode that she and her children had just experienced of being held hostage for hours by her husband, Alice felt that the need for counseling was immediate for all of them:

We didn’t even talk to anybody until like four days later, which, we were a mess, the kids were hyper, ‘cause of what happened, they were like super charged, they had so much adrenaline I guess, and I remember they were so abnormal cause they were bouncing all over the place, and I was just shot after that happened, emotionally, I just needed something and we didn’t get counseling. They asked us a little bit of what happened but they said, you’ll have therapy once it’s over— the holiday, everybody’s back, but I thought for what just happened, yeah, it wasn’t enough.

Like Gwen, Alice entered the shelter over a holiday when there may be fewer staff. Nonetheless, Alice’s description of their need for counseling at that time is compelling. Inadequate shelter conditions, as in Gwen’s experience, or insufficient counseling as Alice related, might be due to understaffing during holidays or weekends, although these are often the times when the need for shelter is greatest. However, survivors experienced issues with quality as well as availability of counseling services.

Barbara felt the counseling at one shelter was insufficient. Instead of the counseling that she expected, staff asked her what seemed to be more like a “questionnaire” that included:

‘How you feeling? And how you feeling today and what about yesterday and what do you want to do tomorrow?’ It’s little bit of emotional recognition but it wasn’t any action taken.
When Gwen was asked by the interviewers about counseling at the shelter for herself and her son, she replied that they did not have counseling on-site but she did go off-site at one point:

*None of us have. I went to one [off-site counseling place] and her name was Mrs. [last name of woman] but this is what I was trying to tell my therapist in [name of 2nd New Jersey shelter]. I didn’t want to start the story all over again. And I had to start the story all over again with the lady in the [off-site counseling place] and she wound up leaving so now I’m like I can’t start this story over again. Like I’ll never get beyond where does I need to be if you keep taking me back to the beginning. So I haven’t started the story over again.*

Gwen’s insightful comments underscore the importance of continuity for counseling victims, as well as how draining it can be to discuss the same trauma over and over again. Additionally, Gwen and Barbara suggest alternative ways of thinking about these women’s complaints of whether or not counseling was provided in the shelters.

Consider that Gwen saw counseling as that which took place off-site and by appointment. Recall that Alice said “they got me into counseling.” And, Barbara wanted more than the ‘questionnaire’ she was asked, although her description of the questions she was asked appear to be at least suggestive of shelter counseling that seeks to determine what the victim needs and wants. It’s possible that counseling for several women may have been seen as special on-site or off-site sessions with therapists and not the ongoing crisis counseling or advocacy that may be likely when victims go into shelter. It may be that shelter staff need to clarify for survivors which services they can and cannot provide in terms of counseling and advocacy, and ensure there is a mutual understanding about services available and survivor expectations.

**Non-residential group support counseling**

Interestingly, two women who did not go into shelters but who both used the non-residential group support counseling offered by all of the county domestic violence service programs spoke very highly of their experiences with the groups. Tess related what she experienced when she first went into a group provided by her local program:

*Well, I think the big eye-opener for me was when I sat in this room and there were 12 other women in there. ‘Cause I’m thinking I come from a good family, this isn’t reflective of my family, they never did this to me, and shame on me for being judgmental but this doesn’t happen to me. I go to school. I work every day. I get dressed. I try to be a good wife and have a job, and this doesn’t happen, how could this happen, how, I’m not that, I’m not that stupid. How could this happen to me? It doesn’t happen to me. And then to come into this room and there’s, you know, wives of doctors and school teachers and there’s other people that are like me also. That was probably one of the most shocking benefits that I got coming into this room to say, ‘Oh my God, it isn’t just, there are other people that this happens to.’ It’s still, when I think about it, amazing to me. But I think that was probably one of the best things that could have happened was to say ‘Okay, [Tess], you really weren’t crazy.’ ... ‘Okay, you’re right, you [referring to her husband] didn’t lay your hands on me.’ ‘The bump on my head was just because you shouldered...*
According to the NJCBW Standards: “Group counseling shall include all elements listed for individual counseling: empowerment, support, education, options, advocacy/referral, and safety planning, with groups serving to decrease participant isolation, provide peer support and validation, and enable victims to recognize similarities in the experiences of battered women.” This fits with Tess’ reflections of her group counseling experiences where she learned that she should not feel ashamed, “stupid”, “crazy” or alone. Helen, who also did not go into shelter and also attended her local program’s group counseling, echoes Tess’ sentiments about her experiences in the group:

Just hearing other people’s stories and knowing you’re not the only person that’s going through that…And being able to actually voice how you feel, and getting feedback from the counselors, their warmth and it’s, they seem very empathetic, you know, that they wasn’t judging you.

With the non-residential group sessions, victims may have a clearer understanding of what the counseling was meant to achieve, and that a ‘counseling session’ had taken place.

Counseling in shelters may be more fluid
In contrast to non-residential group counseling, counseling that is conducted in shelters is likely to be more fluid. According to Megan, “If you needed to talk, no matter what time it was, day or night, somebody was there to talk to you.” Counseling may be less likely to be formal sessions; and it might be at anytime and on a variety of topics. This may lead to misunderstandings about what is involved in counseling victims in shelters. Plus, while there is on-site counseling provided by trained staff counselors, some victims appear to expect therapeutic counseling or therapy. More general comments from several women who stayed in shelters indicate how much the shelter staff helped them. Recall again that Alice said the staff “guided” her when she was a “zombie” after years of abuse; and of the importance of the supportive environment in the shelter, she said, “...when you have that environment you can start healing and getting better. If you don’t, you’d never start getting better.”

Women who stayed in shelters longer may have realized greater benefits, especially if they were immersed in a healing environment. Although even Jackie, whose stay in shelter was brief, said:

The counselors at [shelter name] were good. I wasn’t able to, like, go to the counselor as long as I wanted to because I had to work and I worked 2-10 at the time, and that’s not the, you know, didn’t work well with their hours....Well, that [shelter name] helped me. They did. Like I said, everything didn’t work perfectly but they really did help me.

Therefore, there may be several plausible explanations why counseling, which is among the priority and core services of programs/shelters, was considered inadequate or not provided by some of the women interviewed. Programs/shelters provide more than counseling, they also provide advocacy. These services may be difficult to distinguish when provided on an on-going and informal way but that would seem to be the more realistic method for providing services for shelter residents, compared to more formal, scheduled sessions. Staff may not be distinguished by residents according to titles or competencies, given the 24 hours per day, 7 days per week
operational schedule of shelters, and therefore the delivery of some services may not have been as apparent. Finally, it bears reminding that the focus of this project may have been more likely to elicit problems the women experienced and less likely to commend programs/shelters for all that they do for victims.

**Counseling for Children**
Counseling is central to child survivors’ healing and well-being. Studies show that counseling, particularly play therapy, can benefit children who have experienced domestic violence and other traumas.\(^{105}\) The impact on children of witnessing or experiencing domestic violence at the hands of the abusive parent is well documented.\(^{106}\) However, children can also be very resilient. Early and effective counseling for children can decrease the impact of domestic violence.

Most of the children of the victims in this project almost certainly needed some type of counseling. Of the nine women who had children, many told of the psychological trauma experienced by their children. Before leaving the abusive relationship, one adolescent boy reportedly acted out in school and was getting into fights with the other children; another child took to hiding in a closet, and one son was mimicking his father’s behavior by kicking and throwing things, cursing and “demanding me [the mother] to do things like ‘fix my food’.” Several women also spoke of more long-term psychological consequences including diagnoses such as post-traumatic stress and dissociative disorders.

Like counseling for victims, individual counseling for children is a core service of domestic violence service programs. Of the 27 programs in the state in 2009, 20 offer individual counseling for children, 17 of which provide teen counseling, and 10 county programs have Peace: A Learned Solution or PALS program.\(^{107}\) Based on the 2008 NJCBW Summary Statistics, 1,836 children were sheltered and most (79%) were under 10 years old. Individual counseling was among the top three services for children provided by programs, with 4,093 sessions reported for children in shelters and 3,854 reported for children through non-residential services.

**Inadequate or no counseling provided to children**
Of the women in this project, recall that two women did not have children, one had children over 18 years and living on their own, and one had a toddler who stayed with the victim’s mother during the brief time she was in shelter. Of the rest (7), two reported no counseling being provided or offered to their children while in shelter. Gwen’s teenage son was not provided any counseling or other services by the shelter. Rose said that neither she nor her young children received any counseling during their three day stay in one shelter. Sarah did not bring her children into shelter, and she told us that because her children were older teenagers, she had to leave the shelter to visit with them as they were not allowed to come into shelter. Furthermore, she did not mention anything about counseling for them as non-residential children of victims.

---

\(^{105}\) Association for Play Therapy – [http://www.a4pt.org/ps.index.cfm?ID=1653](http://www.a4pt.org/ps.index.cfm?ID=1653) (see website for links to multiple studies)


Helen, who did not stay in shelter but relied on the non-residential services provided by the local program, said that no services were offered for her young children. At the time of the interview, Helen was trying to figure out how to help her children understand the situation:

> As far as our children, they never got any kind of help. At least I got some type of help for it. ‘Cause I had the groups and stuff, they didn’t. So they don’t understand a lot of stuff. Like I said, he [the abuser] still calls and speaks to them. But they don’t understand like the depth of stuff. Like my daughter might say stuff, ‘cause I was keeping stuff from my kids for a while but now I try to tell ‘em a little bit of why they can’t see him. I wish I had a different way to do it, you know. So that my daughter, she blurs out, ‘yeah, Daddy’s trying to kill my Mom’. I’m like you should have another way [to provide counseling for the children]. Some, I dunno how. But they should have some other way to, as far as the kids. They wasn’t really too young. At least so they could understand, you know?

During the interviews, several women said that they tried to hide the abuse from their children, especially the youngest, and consequently, the children were having trouble understanding the abuse their mother experienced, the reasons for going into shelter and/or leaving and hiding from the batterer, who was often their father. Some women related that their children were angry about being in shelters. Their anger can be especially problematic because it can potentially pose safety concerns for the women if their children disclose their location. Many of the children were still in contact with their fathers. In some cases, this was because it was court ordered, but some women also felt it was appropriate for the children to have a relationship with their fathers. Children’s feelings towards their mother and/or having to stay at a shelter are often based in their knowledge, perceptions and understanding (or lack thereof) of the batterer’s violence. Conflicting emotions and perceptions can be difficult for mother and child to navigate, and they can impact survivors’ safety planning. One survivor, Helen, allowed the children to talk to their father on a cell phone because she believed this enabled her to better know where the abuser was and what he might be thinking since she listened in on these conversations. This unique strategy however, could potentially put Helen and her children at increased risk of additional emotional or physical abuse. Survivors reported these scenarios and others which support the need for counseling children and providing age-appropriate education about domestic violence and safety planning.

**Counseling for children was provided or offered**

Not all of the survivors’ had problems with counseling for their children. Carolyn, for one, reported that both she and her children received counseling and she had “no complaints” about the shelter’s services. Carolyn’s son was seeing a therapist at the time of the interview and he was experiencing fear and anxieties about his father because of an ongoing custody battle. Alice sought safety through the same shelter and spoke of counseling, evaluation and diagnostic services for the children. Of the counseling for her children, Alice said,

> They needed it so bad. The oldest especially just couldn’t, she was diagnosed with a [disorder] because of it. She was only [very young], and they were the ones to diagnose it...For a long time she wouldn’t sleep near a window because he [the abuser] would always pick her window, got it the most where he would bust in and come crashing through and wake her up.
Megan, whose son stayed with his biological father (i.e., not the abuser) while she stayed in shelter, felt that counseling was offered and referrals provided for him. At the time of the interview, she had not yet brought him in for counseling.

Despite the resiliency of children, it is clear from the interviews and research reports that there can be short and long-term impacts of abuse for children experiencing violence in their homes, and that counseling and education about domestic violence is needed for these young witnesses and survivors. Also, while PALS was available in about a third of the programs in 2009, PALS was most likely not available for many of the children of the women interviewed for this study, and counseling for children may not have been as rigorous in the years prior to the interviews.

Advocacy Services

“Oh God, to have someone behind you when you had nobody”

Advocacy is another core service of domestic violence programs. All of the New Jersey programs offer legal, financial and housing advocacy. However, the specific services offered may differ from program to program because of funding and the needs of the populations and communities they serve. For example, nearly all offer court accompaniments but only nine have a pro-bono attorney service. Annually, programs provide residents and non-residents in New Jersey with thousands of advocacy services. In 2008 for example, over 50,000 legal options sessions were conducted by programs, and there were nearly 100,000 housing advocacy contacts.

The needs of the women interviewed emphasize the importance of advocacy services. All 11 women used the advocacy services of the domestic violence programs whether they were in shelters or as non-residents. All of the women relied on the programs to assist them in applying for the Address Confidentiality Program since these applications must be submitted through domestic violence programs.

Throughout the interviews, the women provided numerous examples of the various advocacy services provided to them. These included but were not limited to the following assistance:

- obtaining a restraining order against the abuser
- applying for and maintaining benefits (e.g., social services, welfare/TANF)
- applying for housing
- accessing legal advice
- court accompaniments
- resume preparation and job application/training
- application for college or other educational pursuits
- home economics including budget preparation, cooking, etc.
- assistance establishing a home, including providing furniture

Programs offered additional support and referral services that the survivors may not have mentioned during the interviews.

There were few complaints from the women about the advocacy services provided by the programs as most were very appreciative of the advice and support. Two specific problems with advocacy services mentioned by the women were the lack of pro bono attorneys and staff for court accompaniments.
The lack of *pro bono* attorneys
Many victims require some form of legal assistance, and nearly all of the women interviewed mentioned the need for an attorney. Attorneys are needed to file for divorce, custody hearings, spouse and child support, and many survivors would have liked an attorney to assist in obtaining permanent protective orders. Free or sliding scale legal services are rare. Some outside organizations, such as Legal Services of New Jersey, provide free legal advice and representation in certain cases. Some private attorneys agree to donate a certain number of hours a month free to non-profit organizations. But again, only a third of programs reported that they provided free (*pro bono*) legal services. Furthermore, according to the 2008 national census, of the programs that participated in the census from New Jersey, only 10% (or two programs) “reported being able to regularly connect a victim requesting legal assistance with an attorney.”

Of the 11 women, five told us they hired private attorneys to assist them, often at considerable costs. Jackie in particular complained about her mounting legal debts, even with her well paying job, and that the attorney referred by the domestic violence program was $225 per hour. Norma eloquently elaborated on how interrelated legal services are to a comprehensive service approach in helping a survivor achieve permanent safety and heal from her abuse, and she illustrates as well, how survivors need different services at different times:

*Initially everybody just kept saying ‘you need a good psychologist’ and I remember thinking I don’t need a damn psychologist, I need a damn good attorney. You know? I need some, I need him [the abuser] to stop stalking me, I need him to stop threatening me, I need him to stop messing with the finances, you know. I knew the line that I just needed a good attorney, and a good, somebody to actually protect me. I don’t need to talk about this and feel better, you know. Um, and then later I realized, now I need a good shrink. I so need a good shrink.*

However, there were several instances related by the women in which programs were able to provide attorneys to assist them. For instance, Alice related how the attorney from the domestic violence program was able to ensure that she kept her welfare benefits even when she moved from one county to another:

*They [social services] told me they were gonna cut me off and they wouldn’t keep me on there even though the lawyer was telling them to, they wanted me to file up north. They cut me off. Then the lawyer went back ... it was like they were barracudas, they fought her, it was so frustrating and this is all while I was totally shut down, like I said if that would’ve happened to me here [a different county], I, God knows, I don’t know what would’ve happened to me and the kids. That woman fought for me when I was flattened, when I couldn’t function. I’ll remember her as long as I’ll live.*

At the time of the interview, Alice had moved to another county. She expressed her concerns that due to the move, her benefits may be cut off by the county social service office. Alice does not know what will happen because the county domestic violence service program where she relocated, most likely does not have a *pro bono* attorney available to fight for her. Again, not all shelters are alike; and most programs don’t have *pro bono* attorneys to represent survivors in
legal matters or offer free legal advice. Alice further speaks to the help she received from the shelter and the pro bono attorney:

*The lawyer there at that wonderful place [the shelter] ...made it that my benefits stayed in that county no matter where I would move. ...she felt that it was best that one person handle it; it would be in lock down, they would keep me there no matter where I was placed and make it look like I was there, so,’ cause you figure if he’s always stalking and in the house and watching places I went, if he knows what county I’m in? How many schools are in one county? He could sit in front of each one and wait for my daughter to come out.*

In effect, this jurisdictional battle is also a security issue. When women are in the process of escaping from their abusers, their risk of being stalked, injured or murdered is greatly increased. One avenue for protecting a victim’s safety once she has escaped is to limit the number of individuals who know her address, including workers involved with handling the application and distribution of benefits for victims. Victims are further protected when they have financial stability, which can be strengthened by policies that enable victims of domestic violence to apply for and collect benefits regardless of the county.

In another instance, Gwen was going to lose her housing because she feared returning to the city in which her abuser lived in order to file required documents. The domestic violence program covered the legal costs of an attorney filing the documents and made sure that the paperwork was submitted quickly and safely:

> They were in communication with, um, [name of city in neighboring state] housing and Jersey housing, and, um, they deemed it too dangerous for me to go do that. So they were able to, I had to go to [name of city in neighboring state] one time. But I went straight to the housing, um, building to sign my papers and run back to Jersey. Yeah, so they, they, legal got me around that. Yeah, yeah, yeah, yes. I was so happy.

These are but a few examples of victims needs for legal representation. Programs/shelters’ efforts to provide these services are laudable given the costs for legal services.

**Lack of court advocate or accompaniment**

Despite the fact that most programs offer some court advocacy services, several of the women interviewed who had to go to court for various reasons mentioned, or responded when asked about their experiences with advocacy during their court hearings, that they did not have an advocate with them. Megan was one victim who did not have an advocate although she felt she needed one for support when she filed an application for a restraining order in which the applicant is required to describe the reasons for the application including instances of abuse:

> Well, with the restraining order, you know, you have to fill out paperwork. And sometimes having someone there, I mean, even if it’s an advocate, just someone there, like if you need help or just support, while you’re there filling out the paperwork, it’s helpful, um, because you’re writing all these painful information down and usually you don’t have anybody there with you when you go. Some people do, some people don’t.

In contrast, Alice was fortunate enough to have an advocate, leading her to exclaim: “Oh God, to have someone behind you when you had nobody.” And Jackie said that just the advocate’s presence
in the courtroom was helpful. “The [shelter name] counselor that sat in the back of that courthouse, she didn’t say a word but just the fact that she was there.” And Sarah who had been beaten by her husband and had a head wound that had yet to be attended to, eventually had a program advocate assist her in filing for a restraining order:

The officer? No! He dropped me off there [at the courthouse]. He said something to the woman at the window and she’s like, ‘you fill these papers out’ and I must’ve been there ‘cause I didn’t know what else like, I did not know the process of what to do or finally after I guess they got sick of me they went and got the [shelter program] person and she came and started like spoon-feeding me for a lack of a better word ‘cause I really, I think I might have been more, had more of a concussion at that point.

In general, the experiences of the women interviewed suggest a great need for legal services but also a shortage in some services, especially pro bono attorneys and court advocates/accompaniments.

Considering the cultural, racial, ethnic and socioeconomic diversity of New Jersey, assisting just one survivor and her children can be incredibly complex. An advocate and survivor may have to become involved with a labyrinth of systems in order to effectively establish safety apart from the abuser. A woman and her children may have to navigate several or all of the following: the criminal and civil courts, the child welfare system, public agencies that can provide assistance with food, clothing, diapers and utilities, health care and insurance systems, the public housing system and working with immigration authorities. All this work is in addition to finding or maintaining child care, employment and transportation. Leaving an abusive partner is not a simple task, but often a gargantuan undertaking for both the survivor and the advocate.

Continued Contacts with Programs/Shelters

Not all of the women continue to be in contact with the domestic violence service programs, even though they remain in the Address Confidentiality Program (ACP), and most still have needs that might be met by the programs. Only several women mentioned that they continued to stay in touch with programs/shelters at the time of the interview. Gwen said “Oh I loved them at [name of 2nd shelter] And I still call them from time to time too.” Carolyn maintains a close relationship with the shelter and is still receiving counseling there, and she said,

My kids still feel that that’s their home. You know, we’re always kept 110% in the loop of everything. We’re invited to things like we’re family.

When Helen was asked about her safety plan and if she had a friend or someone to call if she felt threatened, concerned, or just wanted to talk with someone, she responded,

I’ll call here [the program where we met for the interview]. That’s all I’m calling, I’m, but you know, I got nobody else to call. I can’t go by any of my friends. That’s the safest place I could be I think. You know, that’s where I’m calling.

Several women appear to be relying on other resources including families and may be less in need of the programs at the time of the interviews. Several did not mention if they were continuing to contact the shelters.
At least two women expressed problems with the program staff that presented barriers to accessing some services. Sarah had indicated that there were bad feelings between her and shelter staff as described earlier. When Alice was asked if she was currently working with any of the domestic violence programs, she said,

No, when I came here and they told me ‘just give this [name change] up’. ‘Cause when social security wouldn’t bend and motor vehicles, they were like ‘you should just go out there’ and, just, you know, ‘it’s not gonna work’. That didn’t go over well with me, ‘cause I wasn’t ready at the time to give it up. ...but then I just didn’t come back [to the program] because I felt there was not the support I needed to, to get what I felt needed to be done, done. So I just didn’t come back. No hard feelings, I mean they never were mean to me or anything, but it’s just they didn’t think I should go any further with it. ...like I said, if he came back, I’m not even in fear of that because I know it would be to end us. How could I, how, see people, this is what I’m saying they don’t get it and that made me disappointed that here [at the program] I got that. So I just didn’t go back.

At the time Alice had relocated and sought support from the local domestic violence service program because she was interested in getting a name and social security number change to help keep herself and her children safe from her ex-husband. Subsequently, the difficulties with such changes have come to light. However, the local program’s support of her exploring these options was important to her and without it she found it difficult to go there even though she needed the services provided by the program.

Providing shelter, counseling and advocacy for victims requires significant expertise not only about domestic violence, but also the laws, policies and systems that impact survivors. Programs and their staff should be commended in arranging to meet the complex and multiple needs of victims. Domestic violence service programs are called upon to provide not only immediate and transitional housing, but a comprehensive program of direct services and advocacy to women and their children. In addition, domestic violence service programs also lead community trainings. We cannot address improving shelter and advocacy services without recognizing the disparities in populations served as well as financial and community resources for each individual agency, and the fact that domestic violence service program/shelters have long been under-funded and/or funded in piecemeal fashion. A domestic violence service program in an urban, suburban or rural setting, for example, will have different levels of demand for services, different client populations, and different access to resources such as funding, shelter space and transportation for clients. Understanding the complexity of providing shelter, counseling and advocacy services is critical to developing recommendations for improving services to survivors and their families. The survivors’ experiences as related during the interviews demonstrate there could be improvements in services as can also be seen in the survivors’ recommendations that follow.

During this economic downturn, the authors acknowledge that shelters and domestic violence agencies across the country are suffering budget problems that impact on service

---

For information on the “Myths and Realities of Identity Change, link to the National Network to End Domestic Violence (NNEDV) website: http://www.nnedv.org/docs/SafetyNet/NNEDV_IdentityChange_MythsAndRealities.pdf Last accessed 12/01/2010.
provision for victims, families and communities. This at a time when there is increased risk of domestic violence and therefore increased demand for services. New Jersey's domestic violence programs/shelters that are less well funded are likely experiencing even greater budget problems. The survivors’ experiences with programs/shelters demonstrate victims’ needs for services that can best ensure their safety and well-being.
Survivors’ Recommendations
(Survivors’ recommendations are followed by a commentary or elaboration if required.)

Add more capacity to the existing shelter network for victims of domestic violence so that victims are not turned away or asked to return home.

“I don’t think you should ever send anyone back, because you know, domestic violence is one of them things when you out, you good, but when you in there you might not get out, so for her [a domestic violence counselor in neighboring state] to say to me, we don’t have anything today but you just go home, and try to make it one more night, and you try to be safe just one more night At the time I didn’t think it was something that I could do. Like I didn’t think I could walk back, chance it one more night and try to make it out. But I did and I just think it should be something in place. Um, even if it’s not where you’re requesting, it needs to be something just set up for those instant moments when a woman can’t go back. ... For a woman that need it like right then. I don’t ever think you should tell a woman to go back.”

Investigators’ Comments: Findings from case reviews conducted by the New Jersey Domestic Violence Fatality and Near Fatality Review Board mirror national evidence that a victim’s risk of serious injury or death is when she attempts to leave the batterer. Shelter for victims can therefore be a matter of life or death. See the Board’s reports:
http://www.state.nj.us/dca/divisions/dow/publications/njdvfnfrbreports.html

As related in the text, the state’s domestic violence service programs/shelters provided shelter for 3,623, 3,270 and 3,386 women and children in 2006, 2007 and 2008 respectively. In 2006 and 2007, 1,594 and 1,793 women and children were turned away; however, in 2008, almost the same number of women and children that were provided shelter were denied shelter (3,364) because of lack of space. This suggests that New Jersey’s domestic violence shelter system is reaching capacity annually and is unable to keep up with victims’ needs for refuge. Sadly, the 2008 increase in women and children who were seeking shelter and turned away, probably reflects the economic crisis, and therefore a trend that has likely continued in 2009 and 2010.

New Jersey domestic violence shelters have an agreement that if a woman from their county calls for shelter and the shelter is full, shelter staff will advocate with neighboring shelters to find space for the victim assuming she is eligible for shelter. Therefore, eligible victims would not be turned away and calls would be made on their behalf to locate shelter.

Improve access to domestic violence shelters for victims
a) In general, victims need more help locating available shelter.
   b) Financial resources are needed to help victims find shelter, including help in making calls, and possibly with specially designed cell phones that call 9-1-1 and 800-shelter numbers or domestic violence hotlines that can make calls on behalf of victims.
   c) Victims need transportation to shelters or money to get public transportation to shelters.
   d) A more coordinated response is needed to meet the needs of victims seeking shelter.

‘Once you’re identified as a domestic violence victim and you’re trying to get around, there should be phones available to you to be able to reach shelters if you have to make these calls. They should be some type of network to connect them into the resources of the shelters or the people that can help them. But in all honesty, a person shouldn’t have to go through all of these um different steps and be told ‘okay, we’re a shelter for single women’ or ‘we’re a shelter for women with children so you single we can’t take you.’ It really should be a little more, uh, organized, everyone need to get together because you all focusing on the same thing but everyone is all on they own. So nobody’s getting together and then when the victim that really needs the help, she has to go out fishing, fishing, fishing, fishing which she don’t really have time or the emotional capacity to handle at the time. I know I just... I went through a lot of crying spells at the time. I wasn’t the only one. I mean, you scared out of your wits to begin with. Then if you actually leave I don’t know if you ever felt where you could just faint and collapse that overwhelming weakness comes through your entire body once you actually leave. So making decisions and in being able to
continue calling people and explain your story over and over again to ask for a place to stay or some type of help, that’s a very overwhelming thing especially if you’re repeatedly turned down, several times before you find somewhere where you can, you know, be accepted.”

**Investigators’ Comments:** See above investigators’ comments on New Jersey’s shelter staff helping victims find shelter.

**There is a need for more immediate counseling on entering shelter for some victims and their children.**

“We were there after that happened with being held hostage, and it was a holiday, and then a weekend, and we didn’t even talk to anybody until like four days later, which, we were a mess, the kids were hyper, cause of what happened, they were like super charged, they had so much adrenaline I guess and I remember they were so abnormal cause they were bouncing all over the place and I was just shot after that happened emotionally, I just needed something and we didn’t get counseling. They asked us a little bit of what happened but they said ‘oh you’ll have therapy once it’s over—the holiday, everybody’s back’ but I thought for what just happened, yeah, it wasn’t enough. … I don’t think there was enough with counseling there to help.”

**Domestic violence service programs/shelters need to provide more counseling for children.**

“As far as our children, they never got any kind of help. At least I got some type of help for it. ‘Cause I had the groups and staff, they didn’t. So they don’t understand a lot of stuff. Like I said, he [the abuser] still calls and speaks to them. But they don’t understand like the depth of stuff. Like my daughter might say stuff, ‘cause I was keeping stuff from my kids for a while but now I try to tell ‘em a little bit of why they can’t see him. I wish I had a different way to do it. So that my daughter, she blurts out, ‘yeah, Daddy’s trying to kill my Mom’. I dunno how. But they should have some other way to, as far as the kids. They wasn’t really too young. At least so they could understand, you know?”

**Investigators’ Comments:** While PALS was available in about a third of the programs in 2009, it was most likely not available for many of the children of the women interviewed for this study.

**Shelter staff needs to be more compassionate.**

“The staff was okay. … I just think the staff is staff. They were young, so they didn’t have the compassion that you need, they didn’t have that ear. They just didn’t have that, I don’t know. It was just a job to them, you know? …I just think if you are in that position, you need to be, I don’t know, not actually go through that but it might be helpful to have somebody on staff that has gone through that. So that you can give the people coming through like um, some encouragement, like you go through that you be so broken.”

**Shelter staff needs to provide more tailored counseling.**

“You need more educated, you maybe need a social worker with a degree, who is exposed, who is educated, who has, like a hotline there, who has all the numbers that matter. ‘Look where are you now?’ ‘You got your restraining order?’ ‘This is where you go.’ ‘This is the office you go to.’ ‘This is, if it doesn’t work, call this person.’ It gives that person a sense of structure because when they leave you’re like, you have no structure, you don’t know what next to do. So they, that woman needs a sense of structure, you know, tailored to her educational level and what she was before. So you need to have somebody there who will tailor whatever it is for that person, ‘what do you want us to do with you now?’ ‘What is most important to you now?’ I want to be safe. I want to get back into my house. Or I want to leave the state. Or, you know, everybody’s goal at that time is very different.”
Shelters should provide as “normal” a home environment as possible for victims.
“I don’t think it has to be um, so businessy [sic], I think it should be more family, geared towards um, compassion. There’s not enough compassion. And women coming through there are broken… you have women there who um, were used to putting on make-up everyday. Not that a shelter is a place where your life is going to be the same, we all know that, but I’m saying trying to keep it close to that as possible. There was no lipstick for those women, like no feminine touch… And these are just the things that women were saying while we were in there. But those were things that I think that even though we all were broken that I just think that a lipstick, a little complimentary bottle of perfume, something that would just make you feel a, a little bit normal.”

Shelters need to provide more services for teenagers.
“…like for my son there was nothing for him. There was nothing. He had to follow me, I had to follow him. And there was nothing, even for, um, the meetings, they didn’t have anything for teen children. They had uh, art therapy; you try to get a fifteen year old to go to art therapy. And he was very, I don’t know, he was very like to himself. And I can understand this part, you um, children weren’t allowed in the kitchen, but at fifteen, yeah, he should have been able to make his own bowl of cereal, but he couldn’t because that was the house rule, no kids in the kitchen.”

Shelter meetings should provide more information about what happens after victims leave the shelter, and be more motivating.
“We had um, we had meetings once a week, but our meetings were umm, they were informative, they weren’t motivating. It was giving us information on stuff we didn’t have, like ALL [emphasis by survivor] of domestic violence stuff. But there wasn’t really, I’m not gonna say there wasn’t an ear for it cause there was an ear for it, but I just think within that group of women that we wanted that but we wanted something else too. And we didn’t get that something else. Like we didn’t get that um, so how do we, so how do we take care of kids now? So how do we not live in what happened to us but how we move forward now? Like in, what’s gonna happen to us once we get out of here? Like we didn’t talk about being scared once we got out. Like in there you feel real safe. You feel real safe but we didn’t learn how to deal with that anxiety once we had to go out and look for a job, once we had to take our kids to school, like that was an issue, like going out that door I never knew my head could just like move so good, and my big eyes was just like on everything moving, but like that’s anxiety and we didn’t deal with that.”

Make sure that victims who are given the 9-1-1 cell phones know how to use them.
“He stole my cell phone. I got a phone from here, one of those donated phones that have 9-1-1 on it, which was great. He’d cut the phone lines to my house, …I left my house through the back door and I closed the door and locked it, and he was standing in the bushes. …and I was like sort of cornered because I couldn’t go back into the house, I had just locked it. And I had the phone, however, it was the first time I was looking at it, and he’s standing there, and I didn’t know how to work the phone. …I ended up running the other direction and getting to another house to use a land line. I couldn’t operate the phone, so I would say ‘great, you got these phones here and that’s a, could be a life-saver for somebody, don’t let them walk out the door without saying ‘here’s the send’. Yeah, really basic.”
Asking for Help: Health Care

The physical and mental health consequences associated with domestic violence are well-documented.\textsuperscript{109-110} The American Medical Association and other national medical and advocacy organizations support domestic violence screening in health care settings.\textsuperscript{111-112} Yet, every day in the U.S., health care providers miss opportunities to identify victims and provide intervention, referral and treatment.

During the time of the abuse, nearly all of the survivors in this study recounted various and numerous visits to health care providers. These accounts demonstrate ‘missed opportunities’ for health care providers to identify victims of abuse and intervene for the well-being of the women and their children. Examples include:

- Seven of the women had at least one child during their time with the abuser and therefore saw providers before, during and after the birth of their children, including children's visits to pediatricians.
- Three women reported hospital visits during their pregnancies for bleeding or potential complications resulting from beatings and/or repeated abuse. Sarah told us: “I was in the hospital like 8 times during my pregnancy, did it not occur?”
- Two women reported injuries to children that also required emergency medical care.
- One woman had a chronic medical condition and regularly saw her health care provider.

Most women were not asked about abuse. Despite the many opportunities for health care providers to inquire about abuse and perhaps intervene on behalf of these women, Helen was the only participant in this study who said she was asked questions about domestic violence and the only participant who said she disclosed her abuse in a health care setting:

> They'll ask you if you’re in an abusive situation or you’re fearful going home and stuff like that. ...I was always open to ask for any kind of help or speak to anybody willing to tell me, give me some insight of what to do.

Although Helen was asked about abuse and even if she would like to speak with a “domestic violence worker”, it was not evident how the disclosures affected her safety and well-being. Helen even told interviewers that she disclosed that she thought her intimate partner might kill her:

> He had punched me in my head and I was bleeding and everything, went to emergency room, spoke to the advocates there and everything, and I’m I think I gotta go before this man kills me.


Rather, most of the women were not asked by providers about abuse, and the women who sought help for injuries were treated and released. Here is what Sarah said, “As many times as I was at [hospital name] and he [the abuser] would take me, nobody asked. Just treat the symptoms and that was it.”

Studies show that most women, including victims, support health care providers asking about domestic violence. However, both providers and patients report that the majority of providers don’t ask about abuse. Among the reasons that providers don’t ask patients about abuse are competing demands, lack of training in how to ask and respond, uncertainty that domestic violence should be addressed as a medical problem, their own experiences with domestic violence, and frustrations when victims do not take their advice. Plus, victims are uncertain and fearful of disclosing their abuse to providers, even if asked, because they are ashamed or embarrassed, they fear it will get back to the abuser and he will retaliate, and uncertainty about how the provider will respond, among others.

**Women did not disclose the abuse out of fear of retaliation.** While most of the women interviewed were not asked about abuse, some said they “lied” when inquiries about the nature of the injuries were made by providers. (Several participants used the word ‘lie’.) The women would ‘lie’ or not disclose the abuse out of fear and safety concerns, and often because the abuser was in the exam room with the victim. Sarah’s abuser stayed in the room with her and when asked if she might have disclosed if she had been asked and she was separated from the abuser and she felt safer, Sarah said: “Earlier on maybe not, but when I got sick and tired, yeah.” Sarah’s response suggests that providers who routinely ask about abuse increase the possibility that some women will disclose the abuse eventually.

Several women felt that the providers knew but that they said and did nothing, possibly because they did not want to get involved or because they did not know what to do. Megan described injuries from her fiancée that resulted in a trip to the hospital:

> We were at my grandmother’s house. I can’t remember what exactly happened but he punched me in the face and my lips were really bruised and swollen. And I went to the hospital. I lied of course. I said he was fixing the cabinet and I got in the way and his elbow hit me. Um, but they knew I was lying.

---


114 Numerous research articles have looked at the reasons providers don’t ask about abuse. Among the earliest:


Others include but are not limited to:


115 Researchers have asked victims why they might not disclose abuse even if asked. This research includes:


For Megan, the health care providers did not offer her any help. Like Sarah and other women we spoke to, Megan was also not separated from the abuser in the hospital:

*No, he wouldn’t leave me, ‘cause he knew once they got me alone that I would open up... I definitely would have been scared. I would have been very scared.*

Megan’s abuser not only wouldn’t leave her alone, and threatened her if she told, but he even made her change her doctor. Little research exists on an abusive partner’s interference with the victim’s health care; however it is likely that abusers’ need to control their victims can extend into all aspects of their lives. Changing health care providers is one way an abuser might attempt to keep patterns of abuse from being recognized. When Megan’s gynecologist did ask her about a bite she presented with, she ‘lied’ out of fear and said a stranger had done it rather than disclose the truth that her fiancée had bitten her:

*I actually lied to him, that I told him I was out and I don’t know the person, it just happened, was in a wrong place. ‘Cause I was scared, I was scared.*

Several women told us of beatings while pregnant. Carolyn’s resulted in a hospital emergency:

*During the pregnancy I got hurt, and it was a case of needing emerg, like immediate care but he [husband] went with me to the hospital and told me to tell them that I fell off of a chair or ladder or whatever, hanging curtains. I was never left alone and if I were, just the fear of what would happen when he found out.*

Like other women, the abuser did not leave Carolyn alone and she feared retribution if she did disclose or tell the truth about what happened to her: that her husband had beaten her.

**The women were unsure what health care providers could do for them if they disclosed.** Some women commented on their uncertainty about what health care providers could do if the women disclosed the abuse. Megan reflected:

*I felt comfortable with my OB/GYN but it was just like what can an OB/GYN do for you in that type of situation? ‘Cause you think about what they do and you think about what you’re going through and you don’t see the connection. But I guess it is a connection.*

Providers can help victims by being supportive and non-judgmental and by making referrals to assist victims in contacting domestic violence advocates with expertise in options and safety planning. Numerous studies have found that providers who routinely ask about abuse significantly increase the numbers of victims who will disclose. Health care settings that provide pamphlets or posters on domestic violence send the message to their patients that they are open and prepared to discuss abuse. In this study, numerous health care providers evidently missed opportunities to ask victims about abuse and offer appropriate help and support.

---

Survivors’ Recommendations
(Survivors’ recommendations are followed by a commentary or elaboration if required.)

Training of health care providers in domestic violence is needed.
‘My recommendation is that, at some point, how many women will have to die before those, like I said, the insurance, the medical community. My doctor, [after this survivor was divorced from the abuser] we were talking one day, my gynecologist, and by then I was very open and I explained to him and he says ‘now it all makes sense.’ Like, you’re a doctor! You don’t know signs of a domestic violence incident?’
‘I’ve had these doctors from the time I moved into [town]. Like, they just didn’t get it. You could cover it with makeup, and the bruise on your body, you can cover it with clothes. But psychologically, my doctor, after we were divorced and I was telling him why, [related what the doctor said] ‘[ex-husband’s name] was such a great guy, and he was so funny, and blah, blah, blah’ and I’m like yeah, well he beat the shit out of me and [related doctor’s response] ‘Wow, now it makes sense.’ Maybe I should get ... a different doctor because you would think maybe you didn’t see anything? I was in the hospital like 8 times during my pregnancy, did it not occur?’

Investigators’ comments: The New Jersey Domestic Violence Fatality and Near Fatality Review Board has recommended mandatory training of health care providers on the identification of victims in health care settings.

Recommendation 2:
The New Jersey Domestic Violence Fatality and Near Fatality Review Board reiterates its recommendation found in its Responding to Victims Report (2006); that the New Jersey Legislature pass legislation mandating domestic violence training and education of health care providers on identifying patients in health care settings who may be victims of domestic violence. This legislation should include adaptation of culturally sensitive screening and intervention protocols in all health care settings, including home health care.

Health care providers should ask patients about abuse.
‘I know there’s a fine line and boundaries...but I would just be suspicious of everything. Any sign, investigate it, don’t let it go unaddressed. Get to the bottom of it. Don’t just like, you know, ‘I walked into a door’. Isn’t that like the common every day, ‘yeah, I got a black eye, yeah, I walked into the door’.”

Health care providers should ask (e.g., have a “conversation”) about domestic violence in confidence and separated from the abuser for the victim’s safety.
One survivor: “It should be a conversation that takes place in a confidential setting, you know. So if he’s there with you or somebody’s there with you, it’d be policy that you’re spoken on a one to one situation, that that other person can’t be present to be intimidating in any way.”
Another survivor: “It would have been helpful for someone to ask. The manner in which the person asks is very important because the most important thing to you at the time is confidentiality. You wanna make sure that that information you are giving out never gets to the person who is sitting back there. You wanna make sure that in any shape or form that future dealings with him show that you let out something. So whoever is asking you has to ask you in a way that they can convince you that they are not going to tell him. But if you just ask it off hand, like it’s a regular question the answer will be no. Are you under threat? No. Is everything fine? Yes! Because you asked it in a way just like a check off mark, and I am thinking the next moment she go and be telling him something and then I am in trouble.”

Investigators’ comments: Some health care providers use the technique of simply saying that it is their policy to always examine the patient alone, which can make it difficult for the abuser to object to being asked to leave the exam room. The setting for asking about abuse should be private. This can be difficult in busy emergency departments where only a cloth curtain separates patient beds. Nonetheless, it is important that when health care providers suspect abuse, they provide privacy from others, and especially the abuser who may be accompanying the patient.
Health care providers should have domestic violence informational and educational materials (e.g., brochures or cards) available and on display in their offices.

“If you would go into your OB/GYN and if they had pamphlets about domestic violence, like they have on breast cancer and you just have everything out there in the open. And, you may ask a question about ‘oh’, ‘what is this? How can I?’ You would feel comfortable talking to one of the nurses or talking to the receptionists or somebody there. But they don’t have that type of stuff. Maybe you would feel comfortable, or maybe you won’t, maybe you’ll pick it up and put it in your purse, and use it when you want. But, you know, they don’t have that stuff.” ... “Or even if you, you know, pick up the brochure and sometimes when they pick up the brochure and have it to the side of their purse or have it in their hand because they want somebody to see them with it and ask them a question. They want that help, you know. But, they don’t, a lot of places don’t have that.”

Investigators’ comments: There is ample domestic violence material available for health care providers and others from various sources including domestic violence advocacy organizations as well as health care organizations. An excellent source of provider and patient materials can be found at the Family Violence Prevention Fund’s website: http://endabuse.org/content/features/detail/790/117

As suggested by this survivor, when health care providers have these materials available, they serve to provide an opening for a conversation about abuse with patients on domestic violence prevention or intervention.

A suggestion on how health care providers might ask about abuse. The survivor began by saying: “I don’t think anyone ever asked me that question.” And then she demonstrated through the following commentary that there may not be one way to ask about abuse. She felt that to ask ‘are you being abused’ may be too “abrupt” for some women.

“But that would be one of those leading questions, that’s what I’m saying. Put the thought in your head. I never thought about it.

And then I’m going to contradict myself. The other side of that is if I told the police I was fine, don’t do anything about it, if a doctor were to say to me ‘are you safe at home’ my first answer is going to be ‘yes, of course I am’. So, whereas I was just saying maybe they should be more direct and say ‘this is what this is’, maybe sometimes also being that direct, you’re, ‘by the way does he...’, ‘no, of course I’m safe at home’. Is there a more indirect way of getting that or less abrupt way of asking the question?

Maybe it’s the opposite of the question. So not the, um, my, I was thinking, you know, ‘so, is your husband gentle with you’? You know, kind of in a positive, soft way.

The other thing that you could always gauge is, ‘what is it like when you come home’, for me anyway. Coming home, it was always, what’s it gonna be? I never knew what the evening was gonna be like until the minute I walked through that door. Like the tone at the house. It’s gonna be okay or is it not? Do you have to be quiet [lowers her voice]. ‘So what’s it like when you come home?’ Do you hug your husband? Do you say hello to each other? How do you leave the house?”

Investigators’ comments: Some health care providers find that different patients and circumstances may dictate different ways of asking and that providers need to develop a style that works for providers and their patients. No matter what style a provider adapts, routinely asking questions can increase a women’s comfort in disclosing and a provider’s comfort in asking. Expertise and training are crucial for recognizing domestic violence and intervening appropriately.

Health Care: Children

Children were also victims and some were injured by the abuser and needed medical attention. Two women shared their experiences when their children were hurt. Sarah told us,

It got to the point my son needs medical treatment, I need to get him there, and the dentist is asking, actually my sister-in-law came and she took him, not really knowing the dynamics of their family, this is what they do, they cover for each other. See, the mother covers, the brother covers, they clean each other messes up. So I’m thinking she’s helping. She’s perpetuating the cycle, ‘cause well now the dentist wants to know what the hell happened to this kid, and they concoct a wonderful story, and its fine, my son got the treatment, and it looks okay, and he’s [the abuser] back in counseling, and that’s okay. But it’s not okay, ‘cause no one’s dealing with the issue.

If the provider, in this case, a dentist, was suspicious of child abuse, he or she did not pursue it, although providers are supposed to report even their suspicions of child maltreatment. Here again was a missed opportunity for a health care provider to intervene with victims of domestic violence.

Rose and her abusive husband took their toddler to the hospital for the second time, for a second serious and painful injury. Rose felt that “there was beginning to be a trail” because there were two injuries to the same child who was taken to the same hospital. The survivor hoped that these incidents might be connected and investigated:

So we go to the emergency room because she is in pain, she is screaming, the doctor’s there, say ‘what happened?’ He [the abuser] is right there, they asked ‘who was the daughter in care of?’ And I said ’she was in his care.’ And that’s how I put it, let him explain himself.

However, again the health care providers, emergency room physicians, nurses, staff, did not contact a social worker or Child Protective Services, despite the mandate to report even the suspicion of abuse.
Mental Health

In addition to damaging physical health problems, domestic violence can cause short and long term psychological, emotional and behavioral trauma for survivors and their children. Psychological and behavioral effects have been well established in the literature and include but are not limited to nightmares/flashbacks, anxiety, depression, suicidal ideation, substance abuse, and Post Traumatic Stress Disorder (PTSD). Mental health practitioners can play a significant role in identifying and intervening in abusive relationships. For this study, ‘mental health practitioners’ are counselors, therapists, psychologists, social workers, and psychiatrists whose primary work is to provide mental or behavioral health services.

Mental Health Services for Survivors

The participants in this study reported a variety of symptoms in regards to emotional and psychological trauma. Some survivors utilized group and individual counseling services available through the domestic violence service programs/shelters which was addressed in the that section of this report. Two survivors, Norma and Tess, disclosed their experiences with private mental health practitioners.

Norma was diagnosed with PTSD and shared that seeing a trauma specialist in concert with a psychiatrist “has been so much of a help.” Norma has seen other counselors but stated that for her, a trauma specialist was key to her healing. When asked what in particular, in addition to specialization, was positive about her experience with mental health care, Norma related that practitioners who were “non-judgmental” were a crucial component to effective treatment. When Norma utilized hospital services for her PTSD as a result of the domestic violence, she explained that information on psychological abuse was helpful to her in terms of recognizing it as part of a pattern of domestic violence. She also stated that such information validates the real harm and pain caused by psychological abuse and reassures survivors that they are not “going crazy”:

I remember I was in the hospital and we did this whole thing about physical abuse and psychological abuse and so there was this chart about psychological abuse and I thought that was very helpful because it helped me map out the pattern. I think something like that would be very helpful because I think sometimes people think it’s them or, you know, am I going crazy or whatever and they don’t see it as a pattern.

Tess also told the interviewers that she saw several mental health practitioners, including a counselor, a social worker, and a psychiatrist. Although she did not initially begin counseling for domestic violence, she eventually disclosed some information that prompted the psychiatrist to ask if her husband was hurting her. While Tess did not feel comfortable at the time in fully sharing about the abuse she was suffering, her psychiatrist picked up on there being an issue and suggested that Tess consider getting her assets in order and contacting an attorney. Tess recommended that it would be helpful if mental health practitioners would identify and address domestic violence with a patient if it sounds like the client is experiencing abuse:

So maybe that person sitting there saying ‘Tess, it was not okay that he did that to you, this is domestic violence’, saying specific, calling it out for what it is.

118 For more information, refer to the Family Violence Prevention Fund’s website at www.endabuse.org
Mental Health Services for Perpetrators
Mental health practitioners also see batterers, although not necessarily for domestic violence. However, these interactions offer opportunities to identify and address domestic violence. Batterer treatment programs started in the late 1970’s and they are often part of sentencing should a batterer be convicted or plead to domestic violence offenses. Only one participant told interviewers that her partner attended a batterer treatment program but she did not comment in regards to its efficacy. Five other survivors stated that their partners were seen by mental health providers, including private psychiatrists and through substance abuse programs. The women echoed two similar issues: (1) batterers often began mental health treatment to appease the survivors and as a means to get them to stay, but rarely completed a program or stuck with individual therapy, and (2) the batterers did not disclose and/or hid their violence against their partners from their therapists. According to Sarah whose husband saw a private practice psychiatrist, “I don’t know what they’re teaching them [psychiatrists] in school, but he manipulated them very well.”

Most of the participants shared their experiences with the mental health system, either for themselves or for the abusers. Further insight and information from survivors and possibly from perpetrators would be helpful in evaluating how mental health service providers can best serve individuals and families experiencing domestic violence.

Survivors’ Recommendations
(Survivors’ recommendations are followed by a commentary or elaboration if required.)

Hospital psychiatric or mental health care units should offer educational information on psychological abuse to domestic violence victims.
“I remember I was in the hospital and we did this whole thing about physical abuse and psychological abuse and so there was this chart about psychological abuse and I thought that was very helpful because it helped me map out the pattern….I think something like that would be very helpful because sometimes people think it’s them or, you know, am I going crazy or whatever and they don’t see it as a pattern”

Mental health practitioners should identify and discuss domestic violence if patients talk about experiencing behaviors that encompass abuse.
“So maybe that person sitting there saying ‘it was not okay that he did that to you, this is domestic violence’, saying specific, calling it out for what it is.”
Other Potential Sources of Help

In the State of New Jersey and its communities, there are numerous other potential sources of help for victims and perpetrators of domestic violence. Because of the limited scope of this pilot study, the interviewers did not specifically ask about any interactions the women may have had with all possible systems or sources of help. Even so, the openness of the interviews allowed the women to talk about what they felt helped or did not help them. Included among the other potential sources of help mentioned by the women were: a) faith communities, b) the educational system and c) immigration services. The women’s experiences with these sources are described below. In brief, these victims did not receive much if any help from these sources, and worse, they may have been harmed by the lack of help and/or the lack of understanding about domestic violence. For the most part, their experiences are similar to those with health care professionals and can best be summed up as ‘missed opportunities’. Their experiences highlight the need for more education on domestic violence and training for all other potential sources of help on how to intervene effectively with victims and their families.

A) Faith Communities

The faith or religious community can be a source of solace for victims of domestic violence. Studies show that religious leaders are among the professionals that women might seek advice from and help about the abuse they are experiencing.119,120 However, like health care and other systems, there are often missed opportunities or inadequate responses that can ‘silence’ abused women.121 Religions are complex and researchers and others have shown that religious leaders and some interpretations of scriptures can negatively impact victims of domestic violence.122,123 For example, some religions have patriarchal bases whereby the man is the head of the household and women must obey their husbands. In effect, the message for victims is to remain in abusive relationships. In addition, while religious leaders may not condone domestic violence, they may not speak out against it because of lack of awareness or training.

Again, the research team did not plan to ask about the role of faith and/or religion in the experiences of the survivors; however, trust in a higher power and/or contacts with leaders or members of the women’s religious communities were mentioned by half of the survivors during the interviews.

Help Sought Through Prayer. Several women mentioned that they sought help through prayer. They prayed the abuser would change, and that they would make it through the night without being beaten or killed. Through tears, Barbara told us: “I did a lot of crying and praying and hoping he would change.” Megan experienced physical and emotional abuse and after leaving home for a time, she returned to learn firsthand of her husband’s affair, and she feared for her life: “I prayed for God because that night I really didn’t know what was going to happen.”

The women also related that they believed God would keep them, and their children, safe. For example, Barbara woke up to find the abuser staring at her in the middle of the night, at a time she believed he might have been planning to kill her:

> And I don’t know why I woke up. Nothing made any noise to disturb me or anything, to shake me, I guess it was just God waking me up, but it probably was good timing.

Such intimidation tactics by the abusers kept the women hyper-alert and fearful for their safety. When Rose was asked if she had a safety plan if her ex-husband were to show up at her place of employment, she said,

> I pray a lot. That’s my number one plan, pray to God who has kept me alive today. And because I pray and I have that deep faith that God is the author of our life and he is the one keeping us alive now.

In this case, this woman was reminded by the interviewers that her own actions had also kept her alive and that seeking help in making a safety plan would still be important for her to do.

**Help Sought Through Religious Communities.** Three women told us about their experiences with their religious leaders and church members who knew about the abuse in their relationships. For example, the pastor and church members from Alice’s church came to her home because of the abuse. Alice felt they tried to help by talking to the abuser, but still the abuse did not stop:

> I think they tried, I think he [Alice’s husband at the time] just wasn’t a willing participant. I think you can only do so much...They let him know that they were there.

Even well-intentioned efforts may be inappropriate if clergy are not adequately trained in spousal abuse. Counseling a couple together may not be effective and may very well be a threat to the victim’s safety.

Alternatively, Jackie felt supported by her spiritual leader and that he knew something about domestic violence:

> My pastor, he was very helpful, he was very knowledgeable... he said, ‘I don’t have to put up with it.’ He said, ‘you don’t, but you have to get smart now.’ He said, ‘change your bank account’.

Unfortunately, the abuser withdrew the money from Jackie’s account before she had a chance to follow her pastor’s advice. Jackie’s pastor continues to counsel her today.

Sarah’s experience demonstrates the depth of the need for religious leaders to learn about domestic violence and how to respond to it among their congregations. In the following exchanges with the interviewer, confirmation was sought from Sarah that it was the church leaders who saw her as a “security risk.”

> Sarah: “I was a security risk at church. They asked me not to come back ‘cause he [the abuser] came to church and went off, totally flipped out. I had to call [local town] police.
I was a security risk. Church didn’t want me there. They told me to’ go on the internet, maybe you [the victim] should enjoy us from there.’”

Interviewer: Who told you that at church?

Sarah: “Several people. One of the guys who does security for the church. He’s an adjunct to the bishop, and another guy who works the counseling center for the church. I was a security risk.”

Interviewer: So there were folks in the counseling center at the church that knew of your situation?

Sarah: “Yeah, I have never been to church again. I have not. I have not. And I don’t know when I will at this point ‘Cause if you can’t go to your church, and I understand those people were afraid, they were afraid, but so am I.”

Sarah’s experience with her church was not helpful but hurtful instead, and the church leaders did not address her abuse or her safety. Sarah remains bitter about it today. “That’s exactly what I was told. And it left me very bitter. Very bitter.”

For Sarah, her church leaders failed her by further isolating her from the potential support of her religious community. Of the women who told us that they turned to their religious community for help with the abuse, several felt that their experiences were somewhat supportive; however, it appears that the faith communities could have been better prepared to offer help to victims of domestic violence and their families.

Confidentiality Concerns: For safety reasons, victims of domestic violence are reluctant to confide in anyone about the abuse, even their religious leaders. For example, Rose told us:

If I went to confession, the same priest would hear his [the abuser’s] own confession. How was I sure that the priest wouldn’t counsel him [the abuser] with what I told him [the priest]? And then he would have a sense that I said something to the priest.

Rose’s concern was that the Church saw the public face of the abuser as the “doting father” and “doting husband.” Without sufficient training in domestic violence, religious leaders may put abused women and their children at greater risk of harm from the abusive partner.

Survivor Recommendation

Teach about healthy relationships in religious and educational institutions.

“Start teaching about relationships in schools, churches. If you can get funding to go out and let people know and in the school system, or like I said, churches, I think that would be a good start. I think it would be a very good start.”

Investigators’ comments: Teaching about relationships in religious and educational institutions and schools should include both positive aspects of relationships and how to recognize and respond to abuse and control in relationships.
B) Educational System

Children are too often the overlooked victims of domestic violence. Children may witness the domestic violence in the home; and research indicates there is frequently a co-occurrence of domestic violence and child abuse. One system that might be expected to interact with families experiencing domestic violence is the educational system.

Among the survivors and abusers in this study, there were 19 children living in the home when the domestic violence was happening, who were of school age or younger. We have already heard from the women that many of the children witnessed the domestic violence at home, and some were harmed by the abusers. Several women mentioned instances of interactions with school personnel. The investigators propose that the educational system represents another potential source of help for victims and their children, however these women’s experiences suggest that school personnel ‘missed opportunities’ to intervene on behalf of the children and their mothers, who together are victims of domestic violence. Worse, some of the women’s experiences with school personnel may have actually increased the women’s risks of the abuser finding them and their children.

Lack of education and protocols on domestic violence: According to the New Jersey Coalition for Battered Women’s 2008 Statistical Summary, advocates provided domestic violence preventive education and training to 1,072 schools (pre-school through college), reaching approximately 38,521 educational personnel and students. The New Jersey Department of Children and Families provides printed information at least on how to report child abuse and neglect, although domestic violence appears not to be addressed. In effect, many school personnel are probably not receiving sufficient, if any, education on domestic violence; and most schools probably do not have sufficient, if any, protocols in place for protecting the confidentiality of domestic violence victims and their school-age children and for intervening appropriately on their behalves.

Alice had several negative interactions with the school systems. All happened after she had separated from her abusive husband and she and her children were in the Address Confidentiality Program. It is important to note that Alice needed to relocate a number of times, primarily for safety reasons.

- Therefore, the children had to change schools; and documents and transcripts needed to be obtained for transfers:

  The school gave me a hard time, we moved so many times when [her daughter] was little, she was in a different school, we moved and moved again, and then one [school] would refuse to give me the transcripts without knowing where they were going next...Yeah, they gave me a hard time.

  While school systems are mandated to keep track of the children who are in their charge,

---


victims of domestic violence must be concerned for their own and their children’s safety. Understandably, Alice did not want the schools to have her new address on file. At the time of the interview, Alice was getting ready to move again and she asked for help getting the children from one school to another without leaving behind a paper trail:

*I need somebody I can call...I have to sign them in a new school, can you vouch for me that they’re not supposed to ask the last school, just take the kids in, that’s it’s okay, and that I’m not, I didn’t hide them and steal them from somebody, they know it’s legitimate. Coming from me, they step all over me, and I think if someone with some power stepped in on a higher level I think they’re more apt to listen.*

- Alice’s concerns are well founded because Alice also experienced breaches of confidentiality in one school concerning her situation that embarrassed both Alice and her daughter and put them at increased risk of being found by the abuser:

*Somehow word got around and its because I think that they list on their attendance card, father, restraining order, dit, dit, dit, da, and I think different people work in there, and in and out, different moms and I think it got around...One said to my daughter ‘you’re the one with the mom that’s in hiding from your dad, right?’ Oh, it’s ruined here where I am, it’s ruined. They don’t know who we are, but they know the situation. ...it’s happened a couple times with mothers that have said something to me. So I don’t even feel totally safe and I was trying to hang on here, I was hoping we could stay one more year ‘cause [her daughter] graduates in one more year and she’s like ‘please don’t move again’, she’s the one having the hardest time with it.*

Gwen also expressed her distress that the school in which one of her children was enrolled was insisting on their actual physical address and the school personnel would not accept the Address Confidentiality Program’s address for victims. Gwen was certain that there would be breaches of confidentiality and that the school personnel did not understand her fears and danger for victims of domestic violence:

*Schools aren’t very, everybody asks for this physical address. ...because they don’t understand, they don’t have the fear of what’s really going on. ... I don’t think you should press me for a physical address because we all know once somebody get their eyeballs on something, then it’s ... ‘Oh she lives here and her kids, oh, their P.O. box is this but their address is that.’ And you don’t know who people know, like people know people all over the world. And my fear was with the schools is that them records, being transferred from my son’s school, see sometimes you talk, and through conversation you can get certain stuff out of people, so that was my fear. So like I fought them tooth and nail on that, and they still made me give them a physical address. [Imitating school administrative person] ‘We won’t use it, no, we won’t use it but we, we need.’ Well if you’re not gonna use it, then why do you need it on paper, because you’ll be tempted to use it at some point. And sure enough, they were tempted to use it at some point. And my mail should have been going through, um confidentiality [ACP] and here I had mail for my son sitting in my mail.*

So despite arguing with school personnel to keep her address confidential, the school ended up using the actual physical address anyway, which indicates that no protocol for confidentiality
was in place or the protocol was not followed. Gwen’s safety concerns understandably increased after this incident. Remember that these women are certain that the abusers could kill them and their children.

**Lack of response to children of domestic violence by school personnel:** It is not much of a stretch to consider that among the children attending schools while living in homes in which men, who were sometimes their fathers, were abusing their mothers, that these children might show some signs of witnessing the abuse, such as acting out or underperforming, or even signs of being abused themselves. If the school personnel observed these signs and took steps to intervene, the women in this study did not mention them, leaving the researchers to assume that there were missed opportunities to help the children and their mothers.

Sarah told us about her son who was acting out but apparently school personnel did not intervene. Specifically, her son was getting into fights at school and according to Sarah he had “zero self esteem.” In her words,

> I don’t know if it was really the children, which there were some kids that tried to bully him, but I think some of it was due to the fact that he had zero self esteem. He was so far in the deficit and then on top of that, having this bully at home and a bully at school, it’s like, oh no, no more, you know, no more. So he got into fights.

Once when the boy’s teacher called and asked that a parent come and pick the son up after he had been acting out, the father went and according to Sarah:

> They’re walking out of school and he punched [the son] in the face and stomach and dragged him to the car. Two hours later I got a call [from the abuser] saying ‘I think I killed him, you better get your ass home.’

Of course, it is possible and even probable that no one saw the father beat up his son outside the school, because abusers know how to keep their abusive behaviors out of sight. Sarah went on to relate that when she arrived home, her son was unconscious and bleeding from the head. Injuries to children should be red flags for school personnel. Research is needed to understand New Jersey’s educational system’s response to domestic violence.

**Survivor Recommendation**

**Teach about healthy relationships in religious and educational institutions.**

> “Start teaching about relationships in schools, churches. If you can get funding to go out and let people know and in the school system, or like I said, churches, I think that would be a good start. I think it would be a very good start.”

**Investigators’ comments:** The New Jersey Domestic Violence Fatality and Near Fatality Review Board has recommended domestic violence training in schools of teachers and staff.

**Recommendation 6:**

The Domestic Violence Fatality Review Board recommends that the Department of education with Local Boards of Education conduct domestic violence training in the schools, giving faculty and staff the ability to identify children at risk of physical and emotional harm. All professionals who have student contact should be trained to look for indicators of domestic violence in the family, actively provide information and hand out brochures on resources for confidential assistance such as adolescent pregnancy programs and school-based intervention services for children with problems. The educational programs should utilize the resources of experts in the field of domestic violence who can be recommended by the New Jersey Association of Domestic Violence Professionals.
Responses from the New Jersey School Board Association and the Commissioner of the Department of Education can be read in “Findings and Recommendations of the NJ Domestic Violence Fatality & Near Fatality Review Board (December 2009).”  

In general, the Investigators support teaching about healthy relationships in educational and religious institutions such that both positive aspects of relationships and how to recognize and respond to abuse and control in relationships are taught.

C) United States Citizenship and Immigration Services (USCIS) 
(formerly the Immigration and Naturalization Services (INS))

The U.S. government has long been aware of individuals who marry U.S. citizens (USC) or permanent residents (PR) to secure their permanent residency in the U.S., and which are commonly dubbed ‘green card marriages’. In 1986, Congress passed the Marriage Fraud Amendments (IMFA) to end such fraudulent marriages. By this Act, the non-citizen spouse has to be sponsored by the USC/PR spouse for permanent residency and is then issued a 2-year conditional “green card.” After the 2-year period, the spouses have to prove to the immigration services (formerly INS and reorganized in 2003 as USCIS under the Department of Homeland Security) that the marriage is bona-fide and apply for the removal of the conditions. The removal of the conditions has to be initiated by the USC/PR spouse. This Act is still in effect.127

The Violence Against Women Act (VAWA), passed in 1994 (Title IV of the Violent Crime Control and Law Enforcement Act), addressed immigrant battered women’s increased vulnerability to threats of deportation by their abusive husbands under the IMFA. VAWA offered the option of self-petitioning to battered women.128 However, the responsibility of substantiating abuse for self-petitions and meeting other evidentiary requirements rest on battered women.129

Of the survivors in this study, one contacted the USCIS as a battered spouse. In contrast to the more typical scenario, Norma, a U.S. citizen, married a non-citizen. She told interviewers that around the time of their second anniversary, her husband announced that theirs was a “green card marriage”. For reasons of confidentiality, Norma’s story cannot be fully told.

At the time Norma lived in a state neighboring New Jersey. She filed for separation, and sought to revoke her sponsorship of her husband. When she informed her husband of her intentions, he became violent and tried to strangle her. She reported this to the police but for reasons that are unclear to the authors, no action was taken against the abuser, and the prosecutor in the neighboring state to New Jersey decided not to pursue the complaint. Norma

127 The only relief IMFA provided for immigrant battered women, who wanted to stay in the country, was a ‘hardship waiver’, which required the victims prove that extraordinary hardship would result to them and their children if they were deported. IMFA was revised by the Immigration Act of 1990 (IMMACT) where foreign-born battered spouses could circumvent their USC/PR husbands’ sponsorship through a ‘battered spouse waiver’. To achieve this waiver, women had to prove their victimization by offering expert evidence of physical abuse or extreme cruelty. The evidentiary requirements for the waiver were complicated and impossible for many immigrant women to achieve. 128 VAWA Self-Petitions required foreign-born battered women to substantiate their claims of abuse, along with affidavits of extreme hardship which deportation would produce. VAWA II, passed in 2000, has eliminated the extreme hardship affidavit requirement for self-petitioning and added the relief of the U and T visas. U visas are available to immigrants who are victims and/or have information about serious criminal activities and are essential for the successful prosecution of a felony or indictable offense. T visas are available to individuals who are victims of severe forms of trafficking in person, specifically for the purposes of sexual or labor exploitation. 129 In the 2005 reauthorization of VAWA, battered spouses (H-4) of H-1B visa holders are allowed to apply for work authorization on the basis of abuse by their spouses, which were unavailable to them up to that point.
then moved to her mother’s home in New Jersey and when she contacted law enforcement officers here, she was told since the incidents happened outside their jurisdiction, there was nothing they could do.

For Norma, the fact that her husband waited two years to show his true colors is critical because during the conditional time period, or the first two years of marriage, the immigrant spouse is on a conditional visa and deportable if the citizen spouse withdraws sponsorship. However, after two years, the conditions are removed and deportation is difficult. *(Removal of conditions is not a gradual process. It happens in the USCIS office interview.)* Norma contacted the USCIS, but she thought that because of VAWA, abused immigrant spouses had more protections than battered citizen spouses. In truth, the only right that abused immigrant spouses might access through VAWA is permanent residency by self-petitioning without their citizen spouses’ sponsorship. Also critical for Norma was the lack of action by law enforcement against the abusive spouse. Although her spouse’s residency status was no longer dependent on Norma’s sponsorship, her spouse was still vulnerable to deportation if charged with a crime. It was up to the law enforcement officers handling her case to charge him with an indictable offense. Once charged, Norma’s abuser would have been deportable.

When asked if the immigration officials offered her any assistance or domestic violence resources, Norma said, “They offered me nothing.” Even though Norma told them that he was threatening to kill her, she recalled being told, “Just move on with your life. Just leave him... There’s nothing we can do.” Norma concluded, “…the immigration service has been no help whatsoever.” Even though it is not the responsibility of the immigration services to pursue domestic violence complaints, immigration officials might be trained to make referrals to domestic violence advocacy organizations that could provide victims with options as well as support. In general, domestic violence education should be provided for immigration officials throughout the state, if it is being not provided already.

**Survivor Recommendation**

**An abused citizen spouse should be allowed to rescind the immigration petition.**

“The abused spouse needs to be protected above and beyond all else…. The abused spouses should be allowed to rescind their immigration petition. Period. …protect that abused spouse whether it be through deportation or some type of federal restraining order or something to keep that immigrant spouse away from the American one. And vice versa which VAWA does help with the vice versa … and then the other thing is, marriage shouldn’t be the easiest way to get into the county.”

**Investigators’ Comments:** It is important to mention again that Norma’s experiences as a battered woman differed from the more typical scenario in regard to immigration because a man, who sought to immigrate to the U.S by marriage, abused her. Most advocates of immigrant battered women would not support a recommendation for deportation that Norma sought because such an action would open up the possibility of loss of residency for many immigrants. An abuser could falsely accuse a victim of violence and/or coerce the victim to participate in illegal activities and seek his/her deportation. Furthermore, such actions may make immigrant communities more vulnerable to ICE (Immigration and Customs Enforcement) raids than they already are.

There are organizations working on battered immigrants’ rights:

Survivors’ Experiences After Escape / Separation From the Abuser

The goal of this project was to hear about the experiences of women who were nearly killed by their intimate partners and to learn what actions and referrals had an impact on their safety, with a primary focus on several systems: law enforcement and the judicial systems, the domestic violence service programs/shelter system and the health care system. However, the interviewers quickly realized that the women also wanted to talk about the realities of their everyday lives since separating from the abuser; and that they continue to have safety concerns. Indeed, the women remain very fearful of the abusers. The abusive relationship continues to impact the wellbeing of the women and their children, including their emotional and physical health, and their financial status. The authors encourage future inquiries into survivors’ experiences after separating from abusive partners. For now, we provide some glimpses into the women’s experiences after they escaped from the abusers.

Fear of abusers continue for all of the women

All of the women spoke of their continuing fear of the abusers. Alice said she has “no doubt” that should she be found by her ex-husband, she and the children will be murdered and that he might commit suicide:

If he ever finds us that’s gonna be where we’re all executed, I have no, maybe himself too, I have no doubt in my mind.

At least three women mentioned nightmares they have periodically about seeing the abuser. Jackie described her experiences: “Nightmares, can’t sleep, re-live the whole thing.” When Tess related one of her nightmares, she cried:

I sometimes have nightmares that he’s in my hallway. ... It’s amazing that it just never goes away, that this far away, just thinking about it still gets you upset. And I wonder if that will ever go away.

Most women also continue to be hyper-vigilant. Several women said that they find themselves looking over their shoulders. Some mentioned that they fear just running into him somewhere unexpectedly and that they purposely avoid their old communities. In this regard the women’s understandable fears keep them from their relatives, evoking the feeling that Gwen expressed, as being in the ‘land of the lost’. In her own words,

All my family is there, and I don’t know nobody here. So sometimes I feel like I’m in the land of the lost here. And I miss a lot of family functions ‘cause I don’t want to push the envelope too much because where they have ‘em at [family functions] is too close to where he is. So I can’t go ‘cause, you know, people walk through the neighborhood. ‘Eh, you know, I seen her car around there’ and then here he comes trying to finish me off.

Most of the women in this study had to leave their homes, communities and jobs. The women were usually forced to start over, often with few if any resources, or depleted resources because of legal and other debts. For these women, life after separation is a continuation of the fear and a continuation of the abuse, although often the abusers are now the systems they look to for assistance, such as state and community service agencies.
The Address Confidentiality Program (ACP)

Recall that all of the participants in this study were recruited through the Address Confidentiality Program (ACP). ACP is a statewide program available to victims of domestic violence who continue to be at risk of further violence and who need to keep their home addresses confidential from the abusers. Through ACP, eligible victims of domestic violence are provided a substitute mailing address that allows them to receive mail while keeping their actual address confidential. Helen described her appreciation of the ACP:

*I love the system, the ACP. I love that. Very helpful, very helpful. ‘Cause I felt a sense of security. ...I felt safe, like nobody knows where I am. They’ll think I live in there [in the city where the post office box is located], but I’m not there.*

Victims interested in the Address Confidentiality Program must apply through a local domestic violence service program. While most of the women in this study learned about the ACP through their local programs or shelter advocates, one woman was told about ACP by a police officer and another woman said her attorney encouraged her to apply for it. Megan said the application was “easy” and that a case worker helped her complete the necessary paperwork.

All state and local government agencies are required to accept the substitute address. The substitute address will appear on participant documents instead of their actual address. For example, an ACP participant’s driver’s license will have the ACP substitute address. However, private agencies are not required to accept the ACP address, although they often do accept it after speaking with the ACP staff. Regardless if public or private entities, all ACP participants in this study reported problems with acceptance of their ACP address.

Alice, who had been in the ACP longer than the other 10 participants interviewed, summed up best the experiences of the women with staff at public agencies and private companies who refused to accept the ACP address or failed to cooperate and even at times denigrated the women: “*But these are all like a million battles that I’ve come across, really I can’t recall them all.*”

“A Million Battles”

Public Utilities, Public Agencies and Staff

- Public utilities, such as gas and electric, and telephone services appeared to be among the most mentioned because of problems with having an ACP address. While it is true that they need to know where the utilities physically exist in order to turn them on and measure usage, for mailing purposes, they could use the ACP address and keep the actual address confidential. Participants often have to ‘battle’ with utilities companies and others to maintain this protection. Sometimes the women had to figure out how to work around a problem. For example, with telephone service, Carolyn opted to purchase a pre-paid cell phone to avoid the hassles of having to provide her address to the telephone company.

- Public assistance challenged several women by demanding their actual address. Helen related how employees of social services would not take the P.O. box:
Some places I can’t use that address, especially with human services, social services and stuff like that, they don’t want the P.O. box number, address. …So some mail is still coming normal. So I’m like, can he find out that way? I don’t know.

Public assistance staff even terminated one participant’s benefits, including coverage for medicine for the victim and her children because she refused to give her actual address. Alice was told that she “must provide proof of living arrangements.” She was also denied support for utilities and other assistance including financial benefits on numerous occasions because she would not provide her actual address. She related that “one [public assistant] was bold enough to say we don’t think you should be helped if you don’t say where you are.” At the time, she was also requesting beds for her children:

I’m telling you we were sleeping on the floor. And I looked at her …coming like a beggar for help and it was so hard to ask and then I got humiliated even more and she goes, ‘well I’ve got news for you, we’re not, there’s nothing we can do, you don’t say where you are, we don’t know what you have’ and she goes, ‘and frankly I don’t believe that.’

- The state unemployment program was mentioned by Gwen as problematic; and the state disability program gave Alice the runaround. Even a state employment program, with staff trained in domestic violence and the ACP, showed their lack of understanding and compassion. Helen told interviewers:

Work First New Jersey. ‘Cause that’s when you go on welfare or something they usually send you out to work, ‘cause I was on it for like a month. I told her my address has to be confidential because of domestic violence. Had me wait to speak to the lady that deals with domestic violence, …she said ‘if I’m able to move around, I’m not in any danger, I’m not fearful.’ I’m like how could you tell if somebody, if they’re fearful or not? You can’t, you don’t know somebody’s feelings. I could be bouncing off the walls and acting normal and be scared, but that’s just how I am. But she didn’t see that side.

- Judges demanded the actual addresses of victims. When Sarah was in shelter, the judge even threatened her with contempt, and later when she was in ACP a judge insisted on Sarah stating her address in front of the abuser because Sarah was told by the judge that the abuser “has the right to know where his kids live.”

- Public schools wanted the physical address according to at least two participants. Gwen tried to argue with school officials to keep it out of their records:

Everybody asks for this physical address because they don’t understand. They don’t have the fear of what’s really going on. …See sometimes you talk, and through conversation you can get certain stuff out of people, so that was my fear. So like I fought them tooth and nail on that. And they still made me give them a physical address. [School administrative person said], ‘We won’t use it, no, we won’t use it.’ Well, if you’re not gonna use it, then why do you need it on paper, because you’ll be tempted to use it at some point. And sure enough, they were tempted to use it at some point. And my mail should have been going through, um, confidentiality and here I had mail for my son sitting in my mail box.

Gwen’s point is well taken and deserves repeating. “If you’re not gonna use it [her actual address], then why do you need it?”
Private agencies and businesses

Private agencies and businesses are not required to accept the ACP address and therefore, participants may have to do without services such as credit cards, bank accounts, insurance, and even employment to name a few mentioned by the women interviewed. One woman said that sometimes you need to be “imaginative” such as providing a relative’s address instead of your actual address, or instead of getting a credit card, you might purchase a debit card. Private services that many of us take for granted are difficult or even impossible to obtain without an actual address, i.e., a post office box is not acceptable. Gwen provided several examples that highlight the women’s problems with private agents and her reasons for not wanting to provide them with her actual address:

Employment period, does not accept that P.O. box. But if I’m trying to be safe, I just think there should be exceptions, I really do. I think there should be exceptions to when you are allowed to use a P.O. box on different forms. Because once you put that address on there it’s privy to a lot of people. Even hospitals, they do not want you to use that P.O. box. And computers are networked in so many different ways that if you deny me to use my P.O. box then you’re saying, you’re safe here but you’re not safe here. Because with [name of a large insurance company], it’s a big umbrella.

Employers, hospitals and insurance companies are among the private agents or companies that refuse to accept post office boxes as addresses from potential employees, patients or clients, regardless if they are victims of domestic violence. There is no requirement that an exception be made for victims of domestic violence who live in fear of their abusers even if they are in a state supported program to keep their addresses confidential. Each may have legitimate reasons for requesting the actual addresses. For example, several women who mentioned insurance companies recognized that rates are set based on where you live. However, the women’s safety is at stake and safer methods are needed.

Computers and the Internet  “My address is floating out there.”

Gwen identified a major problem for the women’s safety when these systems keep actual addresses but may not have the resources or wherewithal to keep those addresses confidential. Gwen states “computers are networked in so many different ways” and information is shared in ways most consumers and users are unaware and uninformed about by companies. Insurance companies have often been described as ‘black boxes’ with regard to the information they collect on the insured, and Gwen’s concern is well-founded in recognizing that many insurance companies are “umbrella” companies for different entities that may share information.

Several of the women mentioned the problem of the Internet for their security. Helen visualized her address as “floating out there.” Personal information on the Internet and computer networks concerns most of us because of identity theft, let alone for victims of abuse. Norma related how she had applied for public utilities and then learned that her address was showing up in her credit reports:

Yeah, but to hook up service it means it’s in their database and that’s all that needs to happen. It just needs to show up in their database. And then they could, you know, quickly put you and where you are on your credit report. It showed up on my credit
report. So then I had to petition the credit agency saying please strike this, so that if somebody runs my credit, it won’t show up exactly where I’m living. But those are the little, they’re small little mundane things but once it’s in the system, you cannot get it out of the system.

Indeed, this is a lesson many of us are learning in the age of the Internet that “once it’s in the system, you cannot get it out of the system.” However, for victims who live with the fear of abusers finding them, it is not ‘mundane’ but critical for their safety to learn how to best protect their information and hence themselves. In this regard, the National Network to End Domestic Violence (NNEDV) has worked on this issue and produced educational and training programs on the ways for victims and advocates to strategically use technology.130

Abusers Do Get the Women’s Addresses

Several women spoke of methods the abusers had used to locate them. In at least one case, the abuser had a job that enabled him to request information such as credit checks or motor vehicle records, while another had a relative who could gather similar information. As former intimate partners who lived together, the abusers may have documents with the women’s social security numbers and other individual identifiers that could give them access to her whereabouts. Sarah’s ex-husband and his attorney hired a private detective to find her and she was subpoenaed at her home. Sarah had to decide whether or not to move and change her children’s schools again. During the interview, Sarah said she was “tired of running”. But if Sarah and her children don’t move, they will be at great risk because of the abuser’s threats to kill them. This is true for all the women who participated in this study: If they are discovered by the abusers, they need to decide whether or not to move. Some of them have moved several times in a year, with two women moving as many as nine times during several years in ACP.

Changing Name, Social Security Number and Identity

Some women mentioned that they were encouraged by some to change their names and social security numbers. Similar to relocation of witnesses in federal protection programs, the women could obtain new identities. However, unlike the federal protection program which is better resourced and can set up witnesses in other states, victims of domestic violence who might pursue this option would have to do so using their own resources. The realities of a victim changing her name or social security number is not a panacea. For example, by changing your name and social security number, you no longer have an education or employment history, or for that matter a birth certificate. Domestic violence advocates, victims and others have realized that for most women, name and social security number changes are not the answer. For information on the “Myths and Realities of Identity Change” link to the National Network to End Domestic Violence (NNEDV) website: http://www.nnedv.org/docs/SafetyNet/NNEDV_IdentityChange_MythsAndRealities.pdf131

Despite the risks, problems and hassles of the women being in ACP, because of obsessed abusers, for now, the New Jersey Address Confidentiality Program remains among the best way for victims of domestic violence to try to keep their location confidential from the

---


131 Last accessed December 1, 2009.
abuser. However, as already evidenced in some of the discussion above, the women in this study had to deal with the continuing impact of the abuse and abuses from systems that their situations required them to interact with, in some cases, many times.

**Continuing Impact of Abuse**

**Impact on emotional and physical health of women: “You be so broken”**

Gwen said several times during the interview that she felt “broken” after escaping the abuse, while Alice said “it changes your (very) fiber.” Carolyn seemed to accept that it meant “a lifetime of emotional attachment,” while Tess wondered if the memories of her experience and the fear “will ever go away.” In most of the cases, the women have been out of the abusive relationships for more than a year, yet the emotional and physical impact continue to be evident.

- Most of the women were traumatized with two who realized they suffered from a form of post traumatic stress disorder (PTSD) similar to that experienced by soldiers returning from war.
- At least four women were on disability, two with serious heart ailments.
- One woman had been on the verge of a nervous breakdown and hospitalized as suicidal.
- Another woman said she was being regularly tested for sexually transmitted diseases because her ex-husband had been sleeping with other women and having unprotected sex.
- Many bore the scars of the abuse, with one woman having poor eyesight because of a beating and another concerned that her memory problems were because of her husband’s attempts to strangle her.

These are some of the emotional and physical assaults on these women’s minds and bodies that may last a lifetime, especially without sufficient help to foster healing.

**Impact on emotional and physical health of children**

The women frequently mentioned the impact of the abuse on their children’s well-being. Alice said “I feel my kids lost their childhood.” In the women’s efforts to keep themselves safe and protect their children, they often had to do without some of the experiences and possessions other children take for granted. For example, when the women were forced to move, the children had to change schools, thereby potentially losing out educationally as well socially. Gwen explained:

> Domestic violence is one of them things where I think we focus on the bigger part of domestic violence, but domestic violence it trickles down to your kids. Like my one son has just not been the same since we came here. ... He had to make new friends, like try to fit in.

Among the physical and emotional impacts of living in a home with an abuser that were mentioned by the mothers were the following:

- Several of the children were diagnosed with serious physical and emotional problems such as heart ailments, attention deficit disorder, fears and anxieties, and like the mothers, PTSD.
- At least three women related that their children were acting out, such as emulating the abuser, throwing tantrums, fighting in school, and one took to hiding in a closet out of fear.
• About half the mothers said the children would get angry with them because of their situation. As mentioned earlier in this report, their anger might increase safety risks because they might say something inadvertently or out of anger to the abuser about their location.

Some may argue that the impacts described here for both the women and their children may not necessarily be related to the domestic violence experienced and/or the children witnessed. However, significant research exists on the negative health consequences for victims of domestic violence and their children.

Financial Impact “…it’s another nightmare”

There are nightmares that wake you as described above and then there are the nightmares of everyday reality. Alice said, “When you leave the abuser, people think it’s over at that point, it’s just begun, its another nightmare.” Alice elaborated,

You know, cause if you don’t have, like I said, if you come from well-off or if you have people around you, but if you have no support, you’re lost.

Most of the women left their homes with few of their belongings to go into shelter or to stay with a relative or friend. Gwen reflected on how she felt after she and her son fled from the abuser:

You have a house one day, next day you have nothing, you don’t even have food, you don’t have clothes, like we only went with what we had on. And you have nothing.

Several of the women still had jobs and/or resources, but even so, they needed to take time off from work in order to hide from the abuser and figure out how best to provide for themselves and their children. As mentioned above, a number of the women had to hire attorneys or private detectives in order to deal with the courts, divorce proceedings, challenges for custody and other energy and financially draining legal matters.

Many abused women often find themselves financially destitute, needing to rely on handouts from the domestic violence service programs and others. As single parents, they looked to social services for assistance, often for the first time. The women in this study related their experiences in this regard.

Public assistance

Public assistance exists to help individuals and families through difficult times. For some people it is a last resort because of the stigmatization often associated with taking public assistance. Rose, a highly educated women, recalled standing in a food stamp line with her children in winter:

I remember when I was standing in the food stamp with the children, they were like, ‘Mommy, why do we have to come here, you know, why do we have to wait here Mommy?’ I was waiting for the food stamps and I said, ‘this is how we are going to eat.’ But that’s one of the other things that women have to deal with, finances.

The assistance mentioned by the women in this study includes public assistance or welfare to help with the costs of living such as for food and necessities, as well as unemployment/employment programs, housing programs and Victims of Crime Compensation.
Alice’s experiences with public assistance were among the worst, possibly because she was in ACP the longest and had more interactions with more systems than the other participants in this study. For the sake of brevity, only some of her experiences are highlighted here.

- Alice said she was often treated by the public assistance staff like she was a “faker” and “that I didn’t really need to be on it [public assistance]” and basically as someone who did not really need help.

- Alice elaborated on what the social service staff would ask her and how the staff kept demanding her address even though Alice was in ACP:

  They would ask me questions: where I lived and who I’m with, if I have anybody, and they make all kinds of references, they’re checking your nails... and I never lived with a boyfriend... I’m not that type. ...They definitely were combative with me. Definitely. And abusive. ...I’m coming there for help and they’re telling me no, no, no to everything I say ‘cause the more I would say I won’t tell you where I am, the more they would say ‘we’re just not helping you.’

- Alice described that she was forced to beg and often went without necessities because they were denied. She also described the staff as “burnt out”, “abusive” and “nasty.”

  Or if they’re so burnt out from what they do that they have no emotion left and they just don’t care, but like I said a lot of ‘em not even are just, they’re abusive towards you, they’re nasty the way they talk to you. It just isn’t right because you’re getting, you just, how do I explain it, when you’re going through it, like I said, you’re begging ‘cause you have no other way. It’s the most helpless feeling in the world to not be able to feed your kids or have a house on your own, you know you can’t function without it, and you’re going there saying please and they’re rejecting you and you feel like an animal ‘cause you don’t know how you’re going to get it and they’re saying ‘no we won’t’. And I feel it till this day because we’re constantly, we just had no water, for I don’t know how many days. ‘cause the hot water heater where I am broke, and there was no way I could fix it. And you just have to wait, you go without, go without laundry detergent, go without shampoo, you use soap. It’s like constant, constant struggle.

Monetary and other assistance was insufficient to meet the needs of women with children. At the time of the interview, Alice was receiving less than $500 per month. Carolyn explained how tight a budget she was forced to live on with her children:

  There’s not a great deal of help because it’s financially not enough to provide. Like, you really have to learn how to budget to the penny. There’s no extras. There’s no nothing. ... There’s really no incentive because, it’s not enough. It’s really a financial burden. I mean, my own experience, when I did leave and I did need to go on, you know, they do help you with food and whatever and there are programs, but financially, to pay your bills, it gets based on a family as a unit. So if there’s four people, you get X amount of dollars, and, you have to take into consideration there’s diapers and this and that and all kinds of stuff and it’s hard to be able to provide for that amount of people and not have an adequate amount of money to do so.
When Carolyn says there is “*no incentive*”, she means there is often no incentive not to return to the abuser because of lack of support, financial and otherwise, to care for herself and her children.

### Housing

Victims of domestic violence who leave their home because of the abuse need to find someplace else to leave temporarily at least. Although domestic violence shelters seem like the first choice for victims, after friends and family, victims can be housed in various places including homeless shelters. Even for women who go into domestic violence shelters, they eventually need to leave after a specified amount of time, which for some is 30 days. At that time, they must find their own place to live. A number of options exist to help the women with housing, although not all are viable options. Some women find there is no alternative but to return to their homes and to the abuser.

**To help relocate**, some women apply for and receive funds from Victims of Crime Compensation (VOCC). Among the women who mentioned VOCC, only one, Rose received financial help from VOCC to relocate. Three other women mentioned that they were rejected. Jackie said that because she had a job and a salary, she was deemed ineligible, even though she was in debt for legal costs related to dissolving the relationship with the abuser. Barbara also was rejected as not eligible but she did not understand why. The women who were ineligible had to pay any costs associated with relocation, which then added to their debts and financial burden. The criteria for acceptance or rejection were not clear to the women.

**Section 8** is a rental assistance program that provides housing vouchers to help with the cost of renting an apartment. At least four women mentioned Section 8, of which three were approved for it. Of those, Carolyn complained about landlords who refused to accept government vouchers, and she also complained about the lack of safe and affordable housing. Carolyn said:

> We’re in danger because we’re not in a good neighborhood. You know? I can’t go home. My kids wanna go back home. I can’t go home because I can’t afford to go home because I have Section 8.

Alice was not initially approved for Section 8 because technically she still owned a house. The house was in foreclosure and she had to walk away from it for financial reasons but more so for safety reasons to be away from the abuser. When she applied again she was told there was a “5 to 8 year waiting list.” The reasons why some women were able to quickly get Section 8 while Alice had a long wait are not known.

**Hospitality Networks** are another option for victims. The networks are non-profit, interfaith organizations that provide shelter, meals and assistance to homeless families. Overnight lodging is provided temporarily while guests seek permanent employment and housing. On a long wait list for Section 8 housing, Alice mentioned the Hospitality Networks as an option:

> The only alternative is those church programs, they refer you to where you go like two weeks, you rotate churches, you get shuffled, which is great if you’re a single person, but that is not the answer for kids, they’re so unsettled, they need a home, they need to be in
Homeless shelters are also an option for domestic violence victims. Recall that earlier in this report, in the section on programs/shelters, Barbara recounted how she ended up going to a homeless shelter because she was unable to get a bed in a domestic violence shelter. As mentioned then, domestic violence victims may go to homeless shelters initially because of faster access to them, or victims may go after they have exhausted the time allotted in domestic violence shelters and they have been unable to take advantage or been rejected from other housing options. According to the ACLU’s Women’s Rights Project, a review of various studies throughout the nation indicate that anywhere from a quarter to a half of the women in homeless shelters are there because of domestic violence or they had experienced domestic violence in the past year. Sufficient research suggests that domestic violence is a primary cause of homelessness nationally.\textsuperscript{132}

Shelter Exit Program (SHE)\textsuperscript{133} & Transitional Housing are also options available to domestic violence victims. Victims typically apply through domestic violence agencies and eligibility is determined.

“The Shelter Exit Program (SHE) provides security deposits and rental assistance to victims of domestic violence and their children who are currently living in shelters or in transitional housing facilities. Its main goal is to move women living in shelters and transitional units into permanent housing - a place they can call home and a place to start their lives over, free from domestic violence.”

Employment

Recall from the overview of the women earlier in this report that most were employed prior to their relationships with the abusers. Several were asked, or forced, to quit working by the abusers, and several had small children and the women stopped working to care for them. Several women had to stop work because of the abuse, and even give up entrepreneurial businesses they had established. And we knew of at least four who were on disability. Once separated from the abuser and in ACP and preparing to start a new life without the abuser, often as single parents, some women went through state and local employment programs.

Two women specifically mentioned their interactions with social service workers around employment. Gwen’s experience was positive but only because of a fortunate coincidence:

You know what was helpful and so ironic, that I had a person who was a domestic violence person. That was the compassion, um, and she did everything that she possibly could with putting domestic violence on there. ...my code the [unemployment code] usually presents a problem for some reason. And they have to put it in a different space or whatever. But somehow she was able to make that thing work. ... And she wind up encouraging me, ‘You know what, keep your head up, this is not the end of the world. You


\textsuperscript{133} State of New Jersey, Department of Community Affairs. "Shelter Exit Program (SHE).” Last accessed December 12, 2009. \texttt{http://www.state.nj.us/dca/divisions/dhcr/offices/she.html}
know things really do get better. I know it's hard for you.' And, um, unemployment was good, only I think because I had somebody who could relate.

Gwen’s experience with employment personnel was positive because the woman on staff was ‘a domestic violence person.” It is not known if the social service worker was a victim herself or if she had sufficient education about domestic violence to be compassionate and helpful to victims.

As already mentioned in this section, Helen’s experience with employment staff was the exact opposite, such that the staff person had no compassion or understanding about domestic violence, the ACP and the danger that Helen lives with daily:

*I let them know that I’m a victim of domestic violence. I let them know all that. I spoke to someone, the lady told me ‘if you’re able to go to school and able to go to work, you’re not in no type of harm’. That’s what she tells me. I said well I don’t want him to know where I live. She’s like ‘well I can’t do anything about that’, she says ‘either go to [domestic violence shelter name], you go into the shelter and you’ll be considered I guess, a victim of domestic violence’ but as far as she see it, I’m not, because I’m going to work and I’m going to school, I’m not fearing for my life. I say ‘yes I am, I’m still fearful’.

The two experiences could not have been more different. The first staff person was informed and “encouraging” and the second was abusive, uninformed and potentially discouraging. Education about domestic violence for social service staff and how best to assist victims evidently differs in New Jersey, resulting in victims getting a continuum of assistance ranging from helpful to unhelpful.

**Education**

At least five women mentioned education they pursued after separation from the abusers as a way to try to get out of the circumstances they were in. Rose was nearly through a graduate program and determined to finish and she had sufficient resources, even if through educational loans, so she was able to stay in school. Rose was fortunate to have supportive school administrators and professors, once she disclosed her situation to them. Gwen successfully completed recertification in order to take up her profession in New Jersey and she too was fortunate to have a teacher that praised and encouraged her:

*I went back to school and, and my teacher said ‘I have never seen’....and he’s been teaching for forty years, and he said ‘I’ve never seen a student with so much compassion for this industry as yourself.’

The other three women were in school for various occupations, but each was struggling because of difficulties with obtaining financial and other assistance to enable them to stay in school. For Helen, the staff person in the employment office described just above as potentially discouraging and lacking in education about domestic violence, also commented on Helen going to school. But listen to how Helen would not be discouraged:

*She [staff person] said, ‘if you’re able to go to school, ‘cause people who are fearful for their life pretty much don’t come out their house.’ I said ‘I’m not gonna let him [the
The public service employee’s statements to Helen that victims stay housebound out of fear and that therefore Helen could not be a victim, showed the staff person’s lack of understanding about domestic violence and the need for education of public servants.

Child Care Issues

At least half of the women had children of an age that required childcare in order for the women to go to work or school. Jackie mentioned that she was fortunate because she had family who could help care for her toddler while she worked:

...then of course the child care issues. I mean I was blessed I had a mother and sisters that lived local but I could imagine a child in this situation being a nightmare, especially for these women if they’re trying to find a job.

Most of the women faced the problem of finding safe and affordable child care that would enable them to go to work without worrying about their children. This is a situation that many women and families face because there is a lack of affordable childcare for single working women making minimum wages and/or families living at or near poverty levels. For victims trying to reestablish homes for themselves and their children, childcare issues represent another way that abusers continue to negatively impact the women they abused and their children.

Women’s Strengths Through Adversities

Through the adversities, the women’s and children’s strengths and resiliency were still very evident. First and foremost, the women found the strength to leave the abuser, even when their futures were uncertain. Throughout the interviews, all of the women cried but almost all laughed and showed a sense of humor that was nothing short of amazing. While the women continue to fight “a million battles” to better themselves and their children, their statements throughout the interviews reflect their courage and commitment to a new and better life. Here are just a few examples of their courageous statements.

Barbara described her fear when she decided to leave but also her commitment to getting out of the relationship:

I went through a lot of crying spells at the time. I wasn’t the only one. I mean, you scared out of your wits to begin with. Then if you actually leave I don’t know if you ever felt where you could just faint and collapse, that overwhelming weakness comes through your entire body once you actually leave. So making decisions and being able to continue calling people and explain your story over and over again to ask for a place to stay or some type of help, that’s a very overwhelming thing especially if you’re repeatedly turned down, several times before you find somewhere where you can, you know, be accepted.

Some women acknowledged that they are still in pain but they are working through it. Like Jackie who said, “I talk a good game or whatever but underneath it all it does, it hurts.”
And similarly Norma said, “I try and put on my educated face, and say you know this is wrong, fight for justice, you know. But I’m also the victim.”

Helen realized that she needed to get out of the relationship and not wait until the children were older, and that like Barbara, she was not going to let anything stop her:

But I wasn’t staying. I was like no, ‘cause I even said to myself, I was like, ‘I’m gonna try to put up with this for 18 years, at least until my kids get,’ you know, ‘until my kids’, and then something just hit me like, ‘you have to be crazy. You don’t have to stay.’... you can’t, I would be miserable for the rest of my life, going through this. Or I may not even get to see them reach 18. Ah, well, I’m a go-getter, so nothing really [laughs], nothing really stopped me.

The women we interviewed were all fighting a “million battles” to live free from abuse. For many, like Helen, there came a turning point or final straw when they realized they had to free themselves from the abuse and the abuser. Rose said, “There’s a time where I got back my spirit and I started fighting back.”

Let us reiterate once again, because it is an important point about the research presented here. These women’s experiences are not generalizable to those of all domestic violence victims/survivors because it is a small select sample of women in a state program, the Address Confidentiality Program, who agreed to be interviewed by the researchers. In addition, they may differ from other victims/survivors because they sought help from law enforcement, the courts, the shelters, and/or public assistance programs. We applaud their tenacity in the experiences revealed here in which they had to repeatedly ask for help. Such daunting hurdles were jumped many times in order to free themselves from abusive men and they continue to fight for what they and their families need to live violence free.
Survivors’ Recommendations
(Survivors' recommendations are followed by a commentary or elaboration if required.)

More training is needed on the Address Confidentiality Program (ACP) for any systems or individuals involved with domestic violence victims.
“I think everyone should get trained on it (ACP), ’cause it’s serious. I didn’t die from it [domestic violence], but there’s people that has, you know.”

Investigators’ Comments: ACP has authority over state and local government agencies, and its administrators try to work out a solution with others to provide access to participants when needed. Training is also provided to state agencies to help them understand how the ACP works and also to domestic violence service programs that have the designated applications’ assistants for the ACP. According to the ACP administrator, “while there have been some problems with agencies accepting the substitute address, there has been a great deal of support and cooperation from state and local agencies who have worked closely with the ACP to resolve problems faced by participants.”

Train social service staff about domestic violence and the needs of victims and their children.
“They would ask me questions: where I lived and who I’m with, if I have anybody, and they make all kinds of references, I mean, they’re checking your nails, they’re checking, like they wanna know if it’s a boy…, and I never lived with a boyfriend, never lived with anybody, man in that kind of capacity at all. I’m not that type. But they make inferences. They also think you’re doing things dishonest. I think they should be trained not to treat people, that maybe there are some that do that, but out of even the ones I saw in shelter, there were a lot of legitimate cases, way more than ones that weren’t. So why treat the whole as they’re like that they’re driving a nice car and they’re wearing nice clothes and they’re trying to get away with something. They definitely were combative with me. Definitely. And abusive.

Education about domestic violence, the Address Confidentiality Program and the challenges faced by victims and their families is needed for the families of survivors after separation from the abuser, along with ongoing safety planning for all involved.
“There also needs to be some type of support for the family after. Not just the person but the family, for them to understand what a big toll this takes, it changes you. …It’s like somebody else to make them understand so you don’t have to feel like you’re pushing it on ‘em. You understand what I mean? Like there needs to be some type of forum where the family of the person who survives this can kinda be debriefed. To understand why we need to do the things that we do. Why my mail comes to a PO box before it comes to me.”

For some victims of domestic violence, there needs to be a coordinated effort or “liaison group” that works with the various systems to keep the victim’s information confidential.
“’Its so limited, I mean, I think ACP needs to cover, somehow protect the name, not only the address, the social, the name, I mean it’s multi-faceted, there’s gotta be protection….So I think that there should be like a liaison group, maybe ACP or someone else that is in charge of that client if it’s severe. …it’s gotta be a certain level of domestic violence and once it is they shouldn’t need to know where that person is and put it on all their systems because they don’t keep it confidential. And saying if you don’t tell us there’s no other way you’re not gonna get, like just pressuring me that they’re not gonna budge unless I do it their way. And their way isn’t safe and it isn’t right. If they had a liaison group, making sure the situation is legitimate and they know if you come to my house, this is where she lives and we know how much she’s paying, we’ve seen that, we’ve seen, you know.”
It should be easier and less expensive for domestic violence victims to change their names or social security numbers, i.e., their identities.

“Actually I wanted to change my name and if I change my name I wanted to change my Social Security number and it was like I had to go through approval from Social Security. And um not for the name change, but you know, whatever connects to it. It should be a little easier if you need to change your ID especially from this standpoint of domestic violence. There should be a way without long wait and red tape to be able to say I’m changing who I am. I’m going to a different place and become a different person. I don’t know how to do that, but it should be a shorter process, either inexpensive or free.

Because of the situation and like I said, most of the time, people in this situation don’t have money.”

Investigators’ Comments: As discussed in the text of this section, advocates for domestic violence victims, victims themselves and others have now realized that changing the victim’s name and social security number is not realistic for most victims. Victims who might pursue this option would have to do so using their own resources. By changing your name and social security number, you no longer have an education or employment history. At the least, it is then difficult to get jobs. For information on the “Myths and Realities of Identity Change, link to the National Network to End Domestic Violence (NNEDV) website:

http://www.nnedv.org/docs/SafetyNet/NNEDV_IdentityChange_MythsAndRealities.pdf

Financial assistance for victims is needed which provides temporary subsistence and education/training for long-term self-sufficiency.

“I think I covered everything that I wanted to, just the regular living issues when they relocate, I think that’s important, and giving them the basic necessities and then also education because like I was saying, at my best, the money I would make still wouldn’t boost me off social services, still rely on them and they need to do something so you get off of it, you don’t wanna still be using it, its gotta be where there’s training or education to get people off of it.”

A fund should be set up to help victims financially that is paid for by domestic violence abusers.

“Compensation is not available to these people [victims]. I don’t understand. Most of these abusers have good income like my ex-husband had a lot of money and for a woman to be able to start over, if she was able to get that funding put into like a trust fund that maybe your agency can funnel to her and no one can trace where it’s coming from but maybe she get a monthly stipend or something to help her restart her life. Something like that needs to come about because a lot of women give up their careers, jobs, whatever, to be homemakers and uh or for whatever reason these men get us to give up our finances and they end up controlling everything so between the abuse that we take and everything we endure from beginning to end, we really deserve some help getting back on our feet. Why not make the abusers pay one way or another. And it doesn’t have to be spousal support, it could be just because he put her in that position there should be some type of thing set up where they make men pay like, um, when they do crimes sometime they make them pay the victim of a crime. I would appreciate seeing something like that implemented to a victim of domestic violence. They need to start paying for this stuff they doing. Other than getting psychotherapy. It should be mandatory that when they start being abusive to women and children like that it should just automatically be part of their sentence, but most of the time they don’t even get a sentence for anything.

The court system should not expose victims to security risks by providing their physical addresses to abusers.

“I think the loopholes with the court system have to be closed. I think the judges are too independent of what’s going on. You have a case file that says domestic violence and you have a man who, you know,

134 Last accessed December 1, 2009.
this year he dropped their insurance again. So we’re fighting the same issue. So then he postpones and then - it’s like each time I have to see him. Do you know the security risk you’re putting me in? You’re putting me in a security risk. And then, because he has to file this motion and notify me, well how do you...they’re coming to my house to notify me. You know, if they sent it through ACP and they know they sent it to me and I got notice, maybe I would feel a little better, but the judges aren’t doing that. There’s no enforcement. So, there’s a domestic violence order, okay, we gotta think of how we serve this person, and I mean, I don’t have all the answers, I’m just exposing where those loopholes are.”

Remove victims’ information from public records for their protection.

“They told me a long time ago that eight entities which I still don’t know all eight, it’s IRS, motor vehicles, social security, public assistance, they’re all linked on a FAMIS system, they all share to some degree, files, and nobody ever tells you that when you go for a driver’s license or a social security card, that when you give one that all these people are going to have that information, it’s never, it’s not common knowledge, so it was very surprising to me. I never thought of it, never had to but then once I learned that, made me very nervous and those are things that I think would, people in ACP, they should take them off that system, but I think, women gotta get together and change it.”

Investigators’ Comments: The Department of Human Services’ Division of Family Development oversees Temporary Aid to Needy Families (TANF), otherwise referred to as welfare, and Food Stamps by working with county welfare agencies that administer benefits to qualified applicants. Data entry workers at the county welfare agencies enter information from applicants for TANF and Food Stamps into a computer system known as the Family Assistance Management Information Services or FAMIS. With relevant information entered about applicants, this system determines program eligibility and benefit amounts.

Make support services more readily available that can help a woman leave and not feel trapped in an abusive relationship.

“But I just think that making services available upon request of a woman is the biggest door opener that you can give a woman. It’s to let her know that if she wanna leave, she can. Instead of feeling trapped ‘cause most time that’s what we feel.”

Investigators’ Comments: Support services include affordable housing and housing assistance, employment services, job training, educational programs, energy assistance, nutrition programs, etc.

The State needs to recognize the actual costs of housing and provide sufficient funds for victims to rent housing in safe areas.

One survivor told interviewers: “I think they need to consider the fact that things are more expensive, I think they’re still working on when I was a kid. I dunno, times change, prices go up, but the system’s prices don’t change. I’m right now experiencing the fact of moving and prices for apartments they rise. And we have assistance with our rent, but their assistance is at the same level it was three years ago when I moved. Rent is not the same rate that it was three years ago, so trying to find a landlord that’s not looking to really make his living off of renting an apartment. For whatever reason he keeps his houses, you have a very difficult time. And you’re limited, you have sixty days to find a place and convince somebody to take this help and not everyone wants to do it. It has a very bad name. And, unfortunately, if you try to gain their sympathy and tell them your situation, tell your story, or get them to understand that you’re not trash or from the hood or whatever. That becomes even more of an issue because then they’re afraid that you’ve got this big bad monster that’s gonna come and blow your house down. And, it creates a security and safety issue for them and they become concerned for their property. So, less is better sometimes. It’s learned the hard way.”

Another complained: “They’ll come right out and tell me ‘well I don’t take that, I don’t deal with the government, I don’t deal with getting checks like that’. I’m like, I don’t understand that because it’s
guaranteed rent. If I lose my job, you’re still gonna get paid. So you would think it’s the opposite. But unfortunately there’s a bad rap that goes along with what it is or whatever, and then they don’t want to have to deal with the inspections and stuff like that and the up-keep of giving you a decent home to live in and stuff and everything. One of the reasons why I’m moving now is because my landlord didn’t want to fix a mold situation in my apartment, so it’s become a health issue and I have to move. I don’t want to move. I, I have to move.

Make leave time from work available for victims to take care of matters related to the abuse such as having to go to court.

“Making them understand that, okay, now they have family leave. I don’t know if this is one of the things covered under family leave act. I don’t have family leave but being able to say you know what we need to approve these three days for court. Have to give three days for your court date because you need one to prepare mentally, one to get through it, and the next day to just probably...recover, to rest afterward. People don’t understand that. And I mean it’s not something I ever hoped to ever go through again. But I’m sure somebody’s out there doing the same struggle, you know what I mean.”

Investigators’ Comments: Legislation is pending, The New Jersey Security and Financial Empowerment Act that states:

“Any employee of an employer in this State shall be entitled to leave of 20 days in any 12-month period as needed for the purpose of engaging in any of the following activities as they relate to an incident of domestic violence or a sexually violent offense of which the employee or the employee’s family or household member was a victim:
(1) seeking medical attention for, or recovering from, physical or psychological injuries caused by domestic or sexual violence to the employee or the employee’s family or household member;
(2) obtaining services from a victim services organization for the employee or the employee’s family or household member;
(3) obtaining psychological or other counseling for the employee or the employee’s family or household member;
(4) participating in safety planning, temporarily or permanently relocating, or taking other actions to increase the safety of the employee or the employee’s family or household member from future domestic or sexual violence or to ensure economic security;
(5) seeking legal assistance or remedies to ensure the health and safety of the employee or the employee’s family or household member, including preparing for or participating in any civil or criminal legal proceeding related to or derived from domestic or sexual violence; or
(6) attending, participating in or preparing for a criminal or civil court proceeding relating to an incident of domestic or sexual violence of which the individual, or the family or household member of the individual, was a victim.

For more information, see the pending legislation, last accessed July 5, 2010.
http://www.njleg.state.nj.us/2010/Bills/A0500/451_I1.HTM

Provide financial assistance to victims for legal expenses related to domestic violence.

“But they like I said the whole legal aspect. I would have probably lost my job if I hadn’t taken an attorney to deal with the criminal side of it. I couldn’t afford an attorney. By the grace of God I had good credit, but what of the ladies that don’t have established or good credit do. That’s not fair. It’s not fair to want to leave and try to leave, and I’m not saying anyone should pick up the tab for all my mistakes but at the same time like, the legal portion of it. I would hate for somebody to go back or not get a restraining order that really needed it because they didn’t have a lawyer. So, I don’t know this legal defense apply or well legal defense applies within salary requirements. I made [amount of money] a year so I didn’t meet the requirement, but I needed money. I didn’t have any money. My bank account was drained. What are they gonna do, tell him to pay it back?”

“Let me see tomorrow” A Report of Interviews with Survivors of Near Fatalities 190
Conclusions

The survivors of abusive and controlling intimate partners who were interviewed for this study shared their experiences, thoughts and needs with us. The investigators learned that too often, state and local public servants and professionals in legal, medical, religious, educational and community organizations, among others, failed to help the women who participated in this study.

We respectfully recognize and commend the help that the women did receive and that victims benefit from everyday throughout the state of New Jersey; however, the lack of responses, or inadequate or inappropriate responses to these women, may have put them and their children in greater danger from their abusive partners. Our goal is to improve the safety and welfare of domestic violence victims and their families and prevent domestic violence related murders. The following recommendations by the investigators emerged from listening to these 11 survivors who were nearly killed by their intimate partners.

Investigators’ Recommendations

Research with survivors of near fatalities should include women who believed they were almost killed by an intimate partner but who do not fit the medical-legal definitions used thus far by other researchers.

The investigators acknowledge that the participants in this study did not fit previous conceptualizations of near fatalities. Instead, the women we interviewed self-identified as near fatalities because they believed that they were almost killed by abusive and controlling intimate partners. Their experiences indicate that most were physically abused including being strangled, severely beaten, threatened with violent death, and/or emotionally, psychologically and financially abused. The researchers also found that nearly all of these abused women were in severe or extreme danger according to post hoc analysis and conservative scoring of Campbell’s Danger Assessment. (See Appendix C for details of analysis.) Moreover, most of the participants related their continuing fear of the abusers, including their fear of being killed by them. Since Campbell et al (2003) reported that about half of the participants in their study did not recognize that their lives were in danger, women such as those in our study who do perceive the danger they are in, have much to tell us, including what factors increased their fear enough to escape from the abuser in time. Therefore, we submit that the experiences and recommendations of these participants inform our understanding of the experiences and needs of other domestic violence near fatalities and of battered women generally.

We recommend future research be conducted on victims in abusive relationships who recognized the danger they were in and who fled in time. At the very least, it would be important to understand their ‘tipping points’ which resulted in the women’s determination to escape from the abusers.

A coordinated response is needed for complex and high risk domestic violence cases.

All of the participants in this study interacted with multiple state and community agencies and organizations in their efforts to live violent-free lives. But most of the women complained that these agencies and organizations did not work together to help them. One survivor told the interviewers:

Well, the law enforcement, the police, the domestic, they gotta I guess get a closer knit. ‘Cause I don’t think they work together that well. ... but I’m being threatened and the fear is there, but it’s like, they can’t do much. And they shouldn’t have so much
jurisdiction, they should have a way, like, seeing that he’s in a different state but there should be a way they could come together some how ... What do I have to do? Go down there to the police station in [state name]? Make no sense. I have family there and I won’t even go ’cause I don’t even want him to spot me.... ’Cause you can’t tell someone it has to be a homicide in order for you to go over there. What sense that make? So I have to be dead, then what justice do you get then?

Before and after separating from the abusers and after entering the Address Confidentiality Program, many of the women related numerous instances when they had to negotiate among various agents to build a life for themselves and their families. Recall that one survivor likened her dealings with social services agencies and others to “a million battles.” The investigators learned that this group of victims does not feel safe to use benefits or services to which they are entitled for fear that their identifying information might become available to abusers.135 It became evident during our examination of the women’s interviews and discussion with the ACP’s administrator of the need for a higher level of involvement from government agencies that could meet the needs of victims facing increased levels of danger.

To bridge this gap, the investigators recommend that New Jersey government expand and build upon the existing services offered by the ACP by assessing the additional needs of ACP participants which government agencies can address, and then by creating a high level task force to collaboratively meet the identified needs, and thereby provide a coordinated response. Although these complex and high risk cases may represent a relatively small segment of all domestic violence victims, it is expected that the work of the expert panel would impact all victims.

Training of professionals and public education about domestic violence are needed.
The survivors interviewed for this report provided numerous examples of professionals they encountered in their efforts to get help to stop the abuse or to safely escape from the abusers. Many of these professionals had seemingly little, if any, understanding of domestic violence. Even those who might have been expected to have some understanding, too often appeared to lack sufficient knowledge about the complexity of domestic violence to respond appropriately to the women’s needs. It is therefore not surprising that throughout the interviews, the survivors recommended education and training of professionals including law enforcement, judges, attorneys, health care professionals, educators, religious leaders and public servants as well as recommending education of the public about domestic violence.

The sponsor of this report, the New Jersey Domestic Violence Fatality and Near Fatality Review Board has repeatedly recommended a statewide public education awareness campaign; and over the past decade, the Board has made numerous recommendations for increased training about domestic violence for professionals including health care providers, educators, legal professionals, law enforcement and others.136

135 According to a fact sheet on Address Confidentiality Programs authored by the National Coalition Against Domestic Violence, one of the most common ways that abusers find information about victims is by accessing records from state and county government agencies. Last accessed October 23, 2010. http://www.ncadv.org/files/ACPPrograms.pdf

The authors of this report support the survivors and the Board’s previous recommendations for training professionals and educating the public about domestic violence. Too often, training on domestic violence is limited to short annual sessions that are redundant and do not get at the complex issues of domestic violence, thereby failing to provide sufficient knowledge of how to help victims safely leave violent relationships. A coordinated statewide domestic violence campaign might address the educational needs of professionals and the public.

**Recommendations for Law Enforcement and the Judicial Systems**

**Standard operating procedures should be developed for the separation of abusers from victims in all venues.**
Throughout the interviews, the survivors provided numerous instances when professionals did not separate them from the abusers, often silencing the women. Out of fear that the abusers would harm or kill them if they spoke out, failures to separate victims from abusers resulted in the women remaining in danger. The survivors recommended separation of abusers from victims during field responses by the police, stationhouse interviews, court appearances, and court mandated programs and events.

The investigators support development and enforcement of standard operating procedures for the separation of victims from abusers throughout the victims’ experiences with law enforcement and the judicial systems. We recognize that officers are trained to separate the victim from the abuser during responses to domestic violence incidents; and that today, many, if not most, New Jersey courthouses have separate waiting rooms. The guiding principle must be that the victim is always at risk and measures such as escorts, roving patrols or surveillance methods must be employed to enhance victims’ safety, confidence and level of cooperation and participation in interventions offered by law enforcement and the judicial systems.

**Survivor recommendations to hold domestic violence offenders accountable for each act of offending should be supported.**
Of the 71,613 domestic violence offenses reported in 2008, arrests were made in less than a third of them (31% or 21,665). 137 This percentage of arrests seems low, given that the nature of domestic violence crimes is such that the offenders are known, unlike most other crimes in which perpetrators are typically not known and arrests might be less likely. 138 Through the participants in this study, we learned that responses to their calls for help to police did not often appear to result in an arrest and may not even have resulted in a report of a domestic violence offense. In order to hold domestic violence offenders accountable, arrests must be made when offenses are reported.

Once arrests are made, recall the recommendations made by survivors for how law enforcement and the judicial systems might respond better and enhance their safety:

---


138 Among the reasons why there may not be more arrests recorded in the UCR is that the offense report may be recorded and arrests may be made subsequently, i.e., the offense is recorded but the arrest is not. However, this may be less likely with domestic violence offenses in which the perpetrator is known. See the UCR using the link above for such limitations of UCR data. Even if the ratio of domestic violence crimes to arrests is 2:1, the differences are problematic for the accountability of abusers.
• Police should charge abusers with the highest supportable offense in domestic violence cases.
• Judges need to impose stronger penalties on domestic violence offenders.
• Prosecutors should not combine charges for multiple violations of restraining orders since this often results in reductions of penalties.
• Prosecutors should request substantial bail and appropriate sentencing for abusers.

Most of the participants in this study had many interactions with law enforcement and the judicial systems. Yet we learned from the women that as far as they knew, the men were not incarcerated; and one woman’s lament describes many of the other women’s feelings: “I’m running for my life…and he went off scot-free.” Furthermore, most of the women expressed their shock when abusers were not arrested, showed up soon after being taken away by police following an incident, and/or violated restraining orders taken out by the victims against the abusers. In effect, the consequences of the abuse against the victims often seemed inconsequential for the abusers.

The investigators recommend holding offenders accountable for each and every act of offending, thereby making the consequences of their violence appropriately punitive with a greater likelihood of having deterrent effects for them continuing the abuses.

Conduct research on the domestic violence offense of stalking in New Jersey and assess law enforcement’s and the judicial systems’ responses to it.

Stalking is among the 14 offenses within the Prevention of Domestic Violence Act (PDVA). Prior to entering the Address Confidentiality Program, most of the women in this study described abusers’ behaviors that are consistent with stalking, and half of the women said that the abusers were ‘stalking’ them. Yet only one woman related that a prosecutor included stalking among the offenses committed by her ex-boyfriend.

New Jersey’s anti-stalking law was enacted in 1993. According to calculations based on the New Jersey State Police’s annual Uniform Crime Reports, from 1995 to 2008 the mean number of stalking offenses each year is 313, which is a small fraction of the average total number of annual domestic violence offenses of 78,687. Roughly 90% of charges are for assault or harassment, and the remaining 10% are mostly for the offenses of terroristic threats and criminal mischief. In contrast, less than one half of one percent of charged offenses each year is for stalking. Therefore, either the offense of stalking is relatively rare, which is contradicted by our findings in this study, or it is not often charged as a domestic violence offense.

According to the National Crime Victimization Survey, an estimated 3.4 million people aged 18 or older were victims of stalking during a 12 month period, thereby indicating that stalking is not rare. Women are more likely to be stalked than men and their stalkers tended to be current or former intimate partners. In a study by McFarlane, Campbell and Watson, when abused women who were killed or nearly killed by their intimate partners were compared with a control group of abused women, the former were twice as likely to have been stalked by their

---

139 The numbers of stalking offenses and domestic violence offenses are relatively constant by year. For stalking offenses and total offenses, the standard deviations are 31.9 and 4760 respectively, and the ranges were from 239 to 353 and 70,613 to 86,348 respectively. For the 1998 through 2008 New Jersey State Police’s Uniform Crime Reports (last accessed August 28, 2010): http://www.state.nj.us/njsp//info/stats.html

This number is consistent with the experiences of the victims of this study. Indeed, stalking behaviors are among the risk factors in Campbell’s Danger Assessment. When the authors of this report used the Danger Assessment to retrospectively identify risk factors for our participants, we found that for 10 of the 11 women, the abuser “followed or spied on her, left threatening notes or messages on answering machine, destroyed property, or called her when she didn’t want him to” See Appendix C, Item #19. Clearly, stalking is a predictive as well as current indicator of abuse and/or violence and is psychologically devastating to victims. Stalking charges should be employed more frequently and prosecuted more seriously when abused women seek help from law enforcement and the judicial systems.

The investigators recommend that research be conducted of victims’ experiences of being stalked by abusers, and whether or not New Jersey’s law enforcement and judicial systems are taking stalking seriously and reacting appropriately to stalking offenses when they are reported.

Assess communication of information provided to victims about the processes throughout all aspects of law enforcement and the judicial systems for possible improvement.

The survivors’ stories were peppered with uncertainties about what happened when they asked the police to help them, such as whether or not abusers were arrested, charged and/or jailed for the offenses perpetrated against them. Often traumatized by long-term physical and mental abuse as well as the assaults that prompted the victims to call the police, the women understandably might not be able to readily comprehend the actions of the police, prosecutors/attorneys or judges. Too many of the women had expectations that the abusers were in jail and/or that someone would call them when the abusers were released, however instead the abusers returned sometimes within hours.

The investigators recommend that communications with victims be assessed to ensure that victims comprehend the processes of law enforcement and the judicial systems that affect them and their safety. In particular, the investigators recommend that victim notification be assessed and communication of the process of notification be clearly communicated so that victims know when the abusers might return.

Assess police training and adherence to standard operating procedures for possible improvements.

The law enforcement response to domestic violence in New Jersey is provided through guidelines’ documents and procedures’ manuals and annual four-hour training for police. The intention is that police will follow standard operating procedures (SOP), and thereby provide a uniform and consistent response to domestic violence. Yet in the survivor interviews the responses to their calls for help appeared at times to be inconsistent and contrary to SOP. Examples include that victims were silenced because they were not separated from abusers (as outlined above), and as perceived by the victims, the police did not arrest abusers even when there was probable cause, or charge abusers with domestic violence offenses. Also, the women often did not feel believed by responding officers and some related how the police seemed to lack sympathy and understanding for their circumstances and were consequently less helpful. Since all but one woman had called the police to help them, often frequently, an appropriate and consistent police response is necessary to ensure victim safety.

The investigators do not know the content of the four-hour curriculum for the annual domestic violence training of New Jersey police or if the training is evaluated. As stated above

the investigators are concerned that short annual training sessions may contain redundant content and trainees may not develop an understanding of the complex issues involved in domestic violence incidents, thereby not acquiring sufficient knowledge of how to help victims safely leave violent relationships. Thus, the investigators recommend that police training on domestic violence be assessed for ways to improve the law enforcement response for both victims in need and offenders.

Recommendations for Domestic Violence Service Programs / Shelters

Greater support / funding is needed for New Jersey’s Domestic Violence Service Programs / Shelters.

As evident from the interviews, the NJCBW Summary Report, and the National Census’ one-day snap shot for New Jersey, the state’s domestic violence service programs/shelters are providing thousands of victims, their children, and our communities with significant services. However, annually, thousands of victims and their families are also turned away from shelters because of lack of space. Each year, New Jersey’s shelters surpass maximum capacity and the current national recession is likely making the situation worse because the need for shelter increased substantially in 2008. (See the program/shelter section for details.) Victims who cannot get into shelters are often forced to return to abusers to suffer assaults on their minds and bodies.

The investigators strongly recommend increased support/funding for New Jersey’s Domestic Violence Service Programs and Shelters. With additional funding and support, we would also expect inequities among programs/shelters to be addressed such as those related in this report which lead us to conclude that ‘not all shelters are alike.’

Assess Domestic Violence Service Programs for possible improvements.

As described in the previous recommendation, domestic violence service programs and shelters provide crucial services to victims and communities, even as they are typically underfunded and understaffed. Also, demand for services exceeds the capacity of the shelters, more so in the current economic crisis. Nonetheless, in this project we asked participants what was helpful and not helpful and for their recommendations for improvements including in the service programs/shelters where they sought refuge and assistance. In addition to the recommendation above for increased support/funding for programs/shelters, survivors recommended more immediate counseling on entering shelter as well as more counseling for children and services for teenagers. They also recommended that shelter staff be more compassionate and provide more tailored counseling that better meets the needs of diverse client populations. Having established that not all programs/shelters are alike, we recognize that differences among the programs/shelters, which are surely impacted by funding differences, mean that all of the survivors’ recommendations may not apply to all of the programs/shelters.

While many of the survivors’ recommendations might be addressed through more funding and support for programs/shelters, the investigators recommend that an assessment be conducted of New Jersey’s Domestic Violence Service Programs/Shelters to gather experiences and recommendations for changes from clients, i.e., victims, their families and others who rely on the programs’ services. Additionally, the assessment could look at ‘best practices’ that might help to address the inequities among programs/shelters as well as at communication disconnects. Communication disconnects were identified by the investigators when survivors related instances in which their understanding of shelter services or rules would be improved through better communication between clients and staff. We recommend the assessment be conducted by researchers with expertise in domestic violence.
**Recommendations for Domestic Violence Response Teams (DVRTs)**

An expanded role for DVRTs should be considered after an assessment of their current activities in helping victims.

During group review of interview transcripts, the investigators often discussed the possibility of an expanded role for DVRTs in helping victims and communities. The investigators recommend DVRTs be evaluated to determine current activities and the potential for expansion of their role in victim advocacy.

**Recommendations for “After Survivors Escape”**

**On-going safety planning is needed for victims and families after separation from the abusers.**

During interviews, the investigators realized that many of the women did not have sufficient and ongoing safety planning after separation from the abusers. When asked, most participants were not always clear when and what safety planning they had received, despite their fears of the continued danger of harm from abusers. While ACP offers a degree of safety because abusers do not have victims’ home addresses, the risks of being located by abusers are ever present. Add to the danger that precautions, which are somewhat unique compared to the needs of most domestic violence victims, must be taken to ensure safety. Examples of the special needs that were mentioned in the report include that abusers can be relentless in their pursuit of their victims, and abusers who still have contact with their children may learn information from them that will help in locating the victim, such as the schools they attend or upcoming doctor’s visits.

The investigators urge that safety planning for ACP participants be done on an on-going basis by domestic violence specialists or advocates with equivalent experience, who have the expertise to handle the complexity of such cases and the danger in which the victims and their families live.
Limitations of the Study
The study has limitations. First, this was a pilot study of only 11 domestic violence survivors. However, the researchers quickly learned that the qualitative design of the study enabled participants to provide information that was extremely rich in improving our understanding of victims’ experiences in general and with specific systems in particular. In addition, this pilot study provides a protocol for ensuring the safety of battered women who participate in research projects.

Second, participation was based on a convenience sample of women recruited through the New Jersey Address Confidentiality Program (ACP). Women in the ACP may differ from other survivors of domestic violence because ACP participants may be more likely to seek help, i.e., to have ‘help seeking behaviors’ and thus, be more likely to have accessed state or community resources. As such, these women may have different needs from other survivors; and their experiences and opinions may not be generalizable to all battered women. Even so, this study was designed to shed light on the experiences of individual women who were almost killed by their intimate partners and their experiences with accessing and utilizing services available to domestic violence victims. In a future study, the researchers would be interested in interviewing survivors of near fatalities who are not in the ACP program.

Third, the participants did not fit previous conceptualizations of near fatalities. However, and as explained above, the researchers submit that the experiences and recommendations of these participants inform our understanding of the experiences and needs of other domestic violence near fatalities and of battered women generally.

Fourth, participants were asked to tell their stories, and therefore the ‘data’ in this report are based on the women’s recollection of events and there was no confirmation of facts or of systems accessed. Their experiences and opinions give voice to battered women. During interviews, the women were asked open ended questions and encouraged to tell their stories in their own way. This interview strategy resulted in significant findings. In addition, the multi-disciplinary team of investigators is a strength of this research and likely ensured that the participants’ experiences and recommendations were related in this report as accurately as possible and their meaning interpreted though multiple lenses.

Fifth, sampling of diverse groups of women was not practical for this pilot study. We were unable to include women who represent the full range of diversity in New Jersey, such as older women, Asian women, and undocumented, immigrant women among others. Additionally, two interviewers were white and one African-American, and this may have affected the lack of spontaneous communication of participants experiences related to their race/ethnicity when they sought help. Nonetheless, participants did differ by age, race/ethnicity, education and occupation, and they presented significant diversity in their experiences, thereby enabling the researchers to better answer the primary research question: to learn what services increased or decreased victims’ safety and well-being. We support the conduct of future studies that investigate the impact of victims’ race/ethnicity and other factors on services in regard to victim safety.

In sum and despite limitations, the protocol provides a model for extending this research to interviews of more survivors of domestic violence with an emphasis on ensuring their safety and giving voice to their experiences.
In sum, the investigators hope that this report sheds light on what helped, what did not help, and what might help victims of domestic violence and their families. Victims do not choose to be abused, and we hope readers learned that women might stay in abusive relationships for reasons demonstrated throughout this report which include fear of retribution from the abusers, lack of options, and inadequate responses to their needs. In the future, let us make sure that each response to domestic violence victims helps them become survivors living violence free.

**Some final words from the participants:** By telling their stories, all of the women who participated in this study wanted to help other victims of domestic violence. Helen said, “I was happy that I got out of it [the abusive relationship], and that I’m here and I can tell the story. You know, and anyone that I could help, I’m willing to help.” Many of the women stated that they plan to volunteer with the shelters that helped them or with the Domestic Violence Response Teams so that they can help other women. The reliving of their experiences for this study was not easy for the women and nearly all cried during the interviews, and some then apologized for being emotional. Here is what Alice told us at the end of the interview:

*Thank you for putting up with my emotional outbursts but like I said I haven’t gotten to the point where I can’t do that yet, I’m trying but I apologize, I really do for that, but like I said, I hope I gave you some information, I hope it helps in some way.*

The investigators want to assure these brave women that their voices will be heard. We sincerely thank them for their help.
APPENDIX A:

DANGER ASSESSMENT
Jacquelyn C. Campbell, Ph.D., R.N.
Copyright, 2003; www.dangerassessment.com

Several risk factors have been associated with increased risk of homicides (murders) of women and men in violent relationships. We cannot predict what will happen in your case, but we would like you to be aware of the danger of homicide in situations of abuse and for you to see how many of the risk factors apply to your situation.

Using the calendar, please mark the approximate dates during the past year when you were abused by your partner or ex partner. Write on that date how bad the incident was according to the following scale:

1. Slapping, pushing; no injuries and/or lasting pain
2. Punching, kicking; bruises, cuts, and/or continuing pain
3. "Beating up"; severe contusions, burns, broken bones
4. Threat to use weapon; head injury, internal injury, permanent injury
5. Use of weapon; wounds from weapon

(If any of the descriptions for the higher number apply, use the higher number.)

Mark Yes or No for each of the following. ("He" refers to your husband, partner, ex-husband, expartner, or whoever is currently physically hurting you.)

1. Has the physical violence increased in severity or frequency over the past year?
2. Does he own a gun?
3. Have you left him after living together during the past year?
4. Is he unemployed?
5. Has he ever used a weapon against you or threatened you with a lethal weapon?
6. Does he threaten to kill you?
7. Has he avoided being arrested for domestic violence?
8. Do you have a child that is not his?
9. Has he ever forced you to have sex when you did not wish to do so?
10. Does he ever try to choke you?
11. Does he use illegal drugs? By drugs, I mean "uppers" or amphetamines, "meth", speed, angel dust, cocaine, "crack", street drugs or mixtures.
12. Is he an alcoholic or problem drinker?
13. Does he control most or all of your daily activities? For instance: does he tell you who you can be friends with, when you can see your family, how much money you can use, or when you can take the car? (If he tries, but you do not let him, check here:___)
14. Is he violently and constantly jealous of you? (For instance, does he say "If I can't have you, no one can.")
15. Have you ever been beaten by him while you were pregnant? (If you have never been pregnant by him, check here:___)
16. Has he ever threatened or tried to commit suicide?
17. Does he threaten to harm your children?
18. Do you believe he is capable of killing you?
19. Does he follow or spy on you, leave threatening notes or messages on answering machine, destroy your property, or call you when you don't want him to?
20. Have you ever threatened or tried to commit suicide?

_____ Total "Yes" Answers

Thank you. Please talk to your nurse, advocate or counselor about what the Danger Assessment means in terms of your situation.
APPENDIX B. RESEARCH METHOD DETAILS NOT INCLUDED IN TEXT

Participant inclusion criteria
- Adult women, 18 years of age or older, who were the victim of a near fatal attempt on their lives by an intimate partner (e.g., husband, ex-husband, boyfriend, ex-boyfriend).
- The women must have been living in New Jersey at the time of the near fatality, be New Jersey residents and currently participating in the New Jersey Address Confidentiality Program.
- The women must be English-speaking; otherwise, all races/ethnicities were eligible to participate.
- The incident or most recent incident must have taken place within the last 10 years, i.e., since 1997.

Participant exclusion rationale
Men were excluded because it is mostly women who are killed by their current or former male intimate partners. Because this was a pilot study, we excluded non-English-speaking women; however we are cognizant of the need to include non-English speaking survivors in the future. Participants were also asked if they had pending legal cases at the time of interview because their attorneys may have advised them not to discuss issues regarding their abuse.

Recruitment
As described in the Methods Section, participants were recruited through the New Jersey Address Confidentiality Program (ACP). For more information about ACP see the NJCBW website: http://www.njcbw.org/legaladdress.htm

Additional comments about recruitment process: Although some women in ACP rarely contact the program administrators, others frequently do. Recruitment of participants through ACP was important for this project. First, confidentiality and safety are core values of ACP. It would not be as safe to contact domestic violence victims/survivors who are not in ACP because the victims may still be living with the abuser, and/or the abuser may find out. Second, the administrators of New Jersey’s ACP, who are also investigators on this project, have formed trusting relationships with many of the participants, and they knew of survivors who would be interested in sharing their experiences. Women in ACP would be unlikely to participate in a research project that does not come through their program administrators.

A phone script was developed for recruitment purposes that ACP program administrators used when participants called in. The script was designed to begin the process of informed consent and to ensure that potential participants had sufficient information about the research project to make an informed decision to meet with investigators. A formal consent process was conducted by an ACP administrator just prior to the interview. In brief, the consent process includes the purpose and procedures of the study and the potential risks of participation. For these women, the issue of confidentiality was the primary concern. Among the steps taken to protect participants’ confidentiality:

- The statute that governs the NJ Domestic Violence Fatality and Near Fatality Review Board protects against forced disclosure of participants identities.
- A Certificate of Confidentiality from the National Institutes of Health was obtained that provided another layer of protection from forced disclosure of a participant’s identity.
- The sites of the interviews were state supported domestic violence resource centers/shelters with expertise and experience in the absolute need for confidentiality and privacy of client information.
- For reports such as this one, participants are ‘disguised’ by altering specifics about them and any aspects of their experiences that could possibly identify them.

Women were given a stipend of $100 for their time and expenses associated with their participation such as travel or childcare.
Logistics of interviews
Arrangements for domestic violence program sites for the conduct of the interviews were made with the help of the New Jersey Coalition for Battered Women. Domestic violence service programs throughout the state volunteered to provide secure, private rooms. The domestic violence program sites were especially important for the conduct of these interviews because

- ACP participants were often already familiar with the program sites.
- The program sites have their own safety and confidentiality protocols in place.
- There are sufficient sites throughout the state to provide convenient meeting locations for participants.
- The program sites are prepared to address the needs of study participants and/or to assist with other needs of domestic violence victims that may come up during the course of the interview.

The specific sites of the interviews were determined by the ACP administrators and potential participants. Three investigators were present at all interviews. All three have experience working with victims of violence. An ACP administrator obtained informed consent and one interviewer took the lead in the conduct of the interviews.

DATA ANALYSIS

Interviews were recorded using digital voice recorders. The recordings were then transcribed, and the transcriptions (also referred to as text or data) analyzed using established qualitative analytic methods and software tools (Atlas.Ti.5.2) designed to identify unique and similar experiences and highlight illustrative quotes for inclusion in this report.

The approach to the text was three-fold.

First, the investigators used thematic analysis. This is typical for qualitative analysis. The investigators immerse themselves in the transcripts/data and see what ‘crystallizes’, i.e., what themes emerge from the data. This technique is especially important for approaching the data with an open mind, and setting aside preconceptions. During this step, it is important to listen carefully to what participants have to say. As a team, we met and reviewed each interview transcript and discussed themes.

Second, and simultaneously, a codebook was developed of predetermined codes based on the literature and the expertise and experience of the investigators. This codebook was augmented as text was analyzed in an iterative and collaborative process.

Third, the importance of a single case was acknowledged. Each survivor has unique personal circumstances and experiences with community resources. The NJDVFNFR Board has already recognized the importance of individual cases.

142 Qualitative software (AtlasTi) is a tool that assists investigators in organizing texts and coding categories into meaningful concepts.

143 One of the earliest cases for fatality review was the Charan Investigation. In brief, in 1990, Veena Charan was murdered by her husband who then took his own life. For well over a year, this California couple was known to police and other agencies because of prior arrests of the husband for ‘wife-beating.’ Numerous agencies were involved but none were able to protect Veena Charan. Similar cases happen daily in the US. The Charan Investigation looked into the details of this case and identified essential gaps in service delivery that might have prevented the deaths. (17) Fatality review teams across the country have learned the importance of the findings from one fatality and that one case can result in a number of recommendations for policy implementation or change.
Appendix C: Danger assessment scoring by Investigators

As described in the Background Section, the Danger Assessment was developed by Jacquelyn Campbell, PhD, RN to help law enforcement, health care providers and domestic violence advocates identify the level of danger for women in abusive relationships. For the study presented here, the Danger Assessment was not done during the interview. Instead, and similar to the approach used by Nicolaaidis et al (2003), the investigators used this instrument after the interview, to assess risk factors for domestic violence homicide that were mentioned by participants as present during the abusive relationship. The second part of this instrument consists of 20 items that ask women about whether or not their partner owns a gun, their partner’s employment status, whether or not he has ever threatened to kill the woman, etc. See the Danger Assessment instrument in Appendix A. The Principal Investigator was trained and certified in administering and scoring the Danger Assessment. For our purposes, the instrument was used to aid the investigators in recording risk factors and describing the danger these women were in.

Again, the Danger Assessment was not asked of the women during the interview but it was completed and discussed by at least 4 of the investigators during team reviews of the transcripts of the interviews. According to the instructions for scoring, the 20th or last item is omitted, resulting in a total of 19 items maximum for scoring. In addition, 2 of the 19 items (#1, #3) were not applicable for this study because they are both questions about an ongoing relationship and the participants in this study were no longer in the abusive relationship. This results in an even lower total possible maximum score of 17. In brief, to score the Danger Assessment, each item is counted if it was determined by the investigators to be a factor for the participant/survivor. The 17 items were totaled, providing a raw or an ‘unweighted’ score. According to the scoring instructions however, ‘weighted scores’ should be calculated and used because they better reflect the actual level of increased risks or greater danger. In effect, certain items ‘weigh’ more or increase the risk based on the literature and statistical analysis conducted by Campbell. This means that instead of a score of one for an item, the item is ‘weighted’ such that it gets a higher score. Examples of weighted items include: if the abuser “owns a gun” (item #2) or if the abuser was “unemployed” (item #4). Both are factors that can greatly increase a woman’s level of risk.

The scores presented here are conservative. If the interviewers had asked the women the danger assessment, we would expect higher scores, i.e., assessment of the women’s danger, or risk of being killed by the abuser, to be much greater. Also, the maximum score possible for these women is 17 instead of 19 because we did not do the assessment with the woman while she was still with the abuser.

The scoring results are presented in the table below. In column 1, the four categories of the Danger Assessment scoring are provided and in column 2, there are the meanings of these scoring categories. Column 3 presents the the number of women in each category based on the unweighted scores or raw counts as described above; and also as described above, column 4 provides the number of woman in each category based on the weighted scores. The investigators include an additional set of scorings because for each item, investigators were also asked if they felt the item should be included in the count but for various reasons it was not included. Reasons that an item was not counted included that the woman mentioned an item but not all of the investigators agreed that it was a factor and so the item was left out of the initial count. Nonetheless, the investigators believe the second set of scores is likely more

144 For more information, see the Danger Assessment website, last accessed January 1, 2009: http://www.dangerassessment.org/WebApplication1/
reflective of the danger the women were in at the time they left the abuser. Without hesitation, the investigators believe that all of the scores provide an underestimation of the danger the women were in.

In sum, based on these scores, all the women were at some level of danger and all but one according to even the conservative scores (i.e., underestimated counts) indicate that the women were in ‘severe’ or ‘extreme’ danger.

### TABLE C-1: Danger Assessment scoring completed and discussed by investigators after the interviews for the 11 women.

<table>
<thead>
<tr>
<th>Ranges for Categories of Danger Assessment Scores</th>
<th>Categories of Danger Assessment based on ranges of scores</th>
<th>Number of women based on counts of items (unweighted)</th>
<th>Number of women based on Weighted Scores</th>
<th>Number of women based on counts of items that include investigators’ additional counts (unweighted)</th>
<th>Number of women based on Weighted scores that include investigators’ additional counts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 8</td>
<td>Variable Danger</td>
<td>5 (5-7)</td>
<td>0</td>
<td>4 (5-7)</td>
<td>0</td>
</tr>
<tr>
<td>8-13</td>
<td>Increased Danger</td>
<td>6 (8-13)</td>
<td>4 (11-13)</td>
<td>5 (9-13)</td>
<td>1 (11)</td>
</tr>
<tr>
<td>14-17</td>
<td>Severe Danger</td>
<td>0</td>
<td>4 (14-16)</td>
<td>2 (14-15)</td>
<td>4 (15-17)</td>
</tr>
<tr>
<td>18 or more</td>
<td>Extreme Danger</td>
<td>0</td>
<td>3 (22-26)</td>
<td>0</td>
<td>6 (20-30)</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>11</td>
<td>11</td>
<td>11</td>
<td>11</td>
</tr>
</tbody>
</table>

Notes:
- The range of scores are in parentheses below the number of women in the category.
- Item #7 (In most cases, the investigators were uncertain and/or disagreed how to score this item, i.e., on whether or not the abuser "avoided" being arrested for domestic violence.

**Scoring of individual items:**

Note: Items 1 and 3 are not applicable to this retrospective approach to scoring by investigators.

- Four women made statements that the abuser owned a gun, and two made statements that lead the investigators to believe he did. (Item #2)
- Four women stated that the abuser was unemployed. (Item #4)
- Seven women told of incidents in which the abuser “used a weapon against her or threatened her with a lethal weapon” (item #5).
- All 11 women related how the abuser had “threatened to kill her” (item #6).
- The investigators were uncertain about the scoring of Item #7 which asked if the abuser “avoided being arrested for DV?” As discussed in the full report, some women felt the abusers appeared almost nonchalant about being arrested. However, arresting an abuser is believed to be protective in that it reduces the risk of abuse. Based on what the women told investigators, 5 men avoided being arrested at some time and 4 others may have.
- Seven women had a child that was not the abusers (item #8).
- Three women spoke of being forced to have sex (item #9), and as discussed in the full report, this can be difficult for battered women to disclose.
• Eight women related incidents in which the abuser “tried to choke her” (item #10),
• Three women mentioned that the abusers “use illegal drugs” (item #11).
• Three women also mentioned that the abuser was “an alcoholic or problem drinker” (item #12).
• Four women said the abuser “controlled most or all of her daily activities” (item #13).
• Four women said the abuser was “violently and constantly jealous” of her (item #14).
• Four women told of at least one instance and some several when the abuser beat her while she was pregnant (item #15). More than half of the women (6) were not pregnant when they were with the abuser.
• At least two men threatened to commit suicide (item #16).
• At least six women told us that the abuser “threatened to harm her children” (item #17).
• Ten women believed the abuser was capable of killing her (item #18) and although one women did not make any statement as such, she feared the abuser would harm her and had a restraining order against him (item #18).
• For nearly all the women (10), the abuser “followed or spied on her, left threatening notes or messages on answering machine, destroyed property, or called her when she didn’t want him to” (item #19).