Module 2 multi-professional training: Domestic violence – dynamics, needs of women and diversity

Timeframe: app. 2 ½ hours

Content:

Topic 1: Dynamics of violence and barriers to leaving a partner
Topic 2: The needs of women
Topic 3: How to identify victims and perpetrators
Topic 4: Domestic abuse and diversity – Women with specific needs
Background information

Topic 1: Dynamics of violence and barriers to leaving a violent partner

There are at least three models commonly used to explain the dynamics of an abusive relationship. Lenore Walker's Cycle of Violence, Landenburger's Process of Abuse, and Duluth's Power and Control Wheel. Although Walker's 'Cycle of Violence' is widely disseminated, in recent years, advocates have started to see Landenburger's model as more closely reflecting women's reality.

The ‘Process of Abuse’ model developed by Landenburger (1989) describes four phases:

**Binding** – Describes the phase when the relationship is new and loving. Women describe using creative and logical strategies to appease the abusive partner during this phase.

**Enduring** – In the enduring phase, women tolerate the abuse because of the positive aspects of the relationship or because they feel somewhat responsible for the abuse. During this phase, women may begin to seek help, but may not disclose their situation out of fear.

**Disengaging** - The disengaging period involves the woman’s recognition of her situation as being abusive and the understanding that she does not deserve such abuse. A turning point may be reached when the woman realizes the danger or the consequences of the abuse to her health and to her children. As the woman struggles with independent living and safety concerns, she may leave and return to the abusive relationship several times.

**Recovery** - After a time of readjustment, and successfully overcoming the many barriers that could trap her in the abusive relationship, the woman may enter a phase of recovery in which she remains separated from the abuser. An important point for health care professionals to realise is that, from the woman's perspective, the abuse was just one aspect of a whole relationship that may still have some positive elements. The woman wants to end the abuse, but wants to maintain the good aspects of the relationship. A diagram called the “Power and Control Wheel,” (see last handout) developed by the Domestic Abuse Intervention Project in Duluth, identifies the various behaviours that are used by perpetrators to gain power and control over their victims. The wheel demonstrates the relationship between physical and sexual violence and the intimidation, coercion, and manipulation of the wife and children that are often used by perpetrators.

Barriers to leaving a violent partner

Providers often feel frustrated when women do not immediately comply with measures to change an abusive situation, such as leaving a violent partner. While the majority of women do leave or manage to make the violence end, there are numerous barriers to leaving an abusive relationship.
Gender Roles and lack of Family Support - Traditional gender roles often contribute to women feeling obligated to stay in a relationship, even if it is abusive. Women are often expected to stay in a marriage, and they may consider themselves a failure if they leave their husband. Furthermore, if they have seen a model of a violent relationship in their own homes when they were children, they may assume that violence is just part of life and marriage. Assuring women that violence is unacceptable can help them overcome the sense of guilt that victims of violence often feel.

Concern for Her Own Safety - Studies have shown that deciding to leave a violent relationship can be more dangerous for the woman than staying in that relationship. Evidence suggests that right after leaving a relationship, women are more at risk of stalking, murder and attempted murder (Campbell 2003). This is one reason why women in situations of violence are probably the best judge of whether and when it is safe for them to leave.

Financial Concerns – As a result of traditional gender roles, men are often the primary earner in their families, and women may not have developed the skills or the opportunities to support themselves financially. In other cases, women earn an income, but their husbands control the couple’s finances and assets. In some places, legislation ensures child support following divorce; in other places, such laws do not exist or are not enforced. Without access to income, women’s options for leaving a relationship are often limited, particularly when there are few services to help women make the transition to economic independence.

Concern for Her Children’s Well Being - In many cases, women may fear for their children’s safety if they decide to leave a relationship. Furthermore, as noted above, men are often the financial providers for their families, and women may feel that they simply cannot support their children on their own.

Lack of Assistance or Services - Even if a woman feels ready to leave a violent relationship, she may not find support or services to help implement this decision. For example, if she does not have family members or friends who will provide housing for her and her children, the woman may need to find a shelter that can guarantee her safety and well being, as well as that of her children.

Contradictory feelings - Often women have loved their abusive partner, and they may want to be with him, holding out hope that he will change. Providers should be careful not to judge the woman for this decision.

Source: WHO Teach Vip Section II. Applied injury prevention, control, and safety promotion, Lesson 2 Advanced Module 9, Understanding gender-based violence as a public health problem and human rights violation
Topic 2: The needs of women

Being able to identify women’s needs is crucial in the process of supporting a woman in her wish to free herself from intimate partner violence. When a woman experiencing intimate partner violence asks for help from services, institutions or officials, she might be at different stages of understanding her situation and the workings of violence. A thorough analysis of her story is always the best way to identify her real resources to effectively protect herself and her children. Being able to identify resources and barriers requires a good knowledge of the dynamics of intimate partner violence, as well as a gender, pro-feminist perspective on the cultural and social aspects of violence against women. Both knowledge and perspective need to be shared by all agencies involved, and are a prerequisite for effective interventions and network cooperation.

Very frequently, women do not approach agencies directly stating they are experiencing intimate partner violence, but somehow expecting their problem is identified and help is offered in a non-intrusive and empathic manner. “A stigma is still attached to bringing charges against a member of one’s own family. That is why it is still so difficult for many women to speak openly about violence and call the police”. (Away from Violence – guidelines for setting up and running a woman’s refuge WAVE manual 2003).

In the case of the police, it is therefore crucial that a number of staff dealing with crime reports is trained to identify intimate partner violence from what a woman says and offer her the chance to speak out without putting pressure to bring charges, as well as referring her to other specialised agencies. All professionals from other agencies need to be able to refer the woman to each other’s services according to the need expressed by her directly or identified while talking to her.

Experts have identified the different needs of women experiencing intimate partner violence on the basis of their day-to-day work in this field. Every woman having to deal with a violent partner finds herself asking the services she contacts the following:

- PROTECTION/SAFETY
- CONFIDENTIALITY/ANONIMITY - RELATIONSHIP OF TRUST
- COUNSELLING AND SUPPORT
- EMPOWERMENT/ADVOCACY
- SUPPORT IN FINANCIAL MATTERS, HOUSING, HEALTH, EMPLOYMENT AND TRAINING
- SOLIDARITY
- LONG-TERM SUPPORT AND THERAPY
- SUPPORT AND PROTECTION FOR CHILDREN
- WITHHOLDING OF CUSTODY AND VISITING RIGHTS FOR VIOLENT FATHERS
- WORKING WITH PERPETRATORS

WOMEN’S NEEDS ARE BEST MET BY NETWORK COOPERATION
Cooperation among all services is more effective when systematic and not limited to exceptional cases. Best results are obtained when all of the following services and agencies work together with coordinated strategies and protocols:

- Women’s shelters, women’s associations etc...
- Child protection services
- Social welfare services
- Support services for migrant women
- Migrant authorities
- Health care services
- Police
- Legal system
- Housing authorities
- Political institutions

Source: Away from Violence – guidelines for setting up and running a woman’s refuge, WAVE manual 2003

**Topic 3: How to identify victims and perpetrators**

Victims of intimate partner violence may approach different agencies for reasons apparently not related to the behaviour of their violent partner. At the same time, perpetrators may be approaching agencies presenting the situation from their point of view. Well-trained professionals ought to be able to identify indicators of intimate partner violence whether they are approached by the victim or the perpetrator. More often than not, a woman may not be showing direct consequences of violence, and knowledge of indirect consequences for the victim’s health or behaviour is essential if protection is to be provided promptly. Also, early signs can be detected in the perpetrator’s behaviour if he is accompanying the woman or approaching agencies himself.

A woman experiencing intimate partner violence may not necessarily bear the physical signs of aggression, but she may well be distressed and confused about her situation. Professionals must be aware of the many consequences the perpetrator’s strategies may be provoking, including the woman’s indecision and a certain resistance to act against her partner. Fear of repercussions may be influencing the woman, and she may not be aware she is experiencing domestic violence. Empathy and understanding are prerequisites to building her trust in professionals. The dynamics of domestic violence should not be “taught” to her by an expert, possibly perceived as an outsider, but carefully worked out by listening to her story. She may report problems with other relatives, or with her daily life,
her work environment or the care of the children, without necessarily disclosing mistreatment by her partner. She may refer to medical professionals or welfare services accompanied by the perpetrator, and therefore be unable to disclose violence. In these cases, professionals should be prepared to provide a proper setting for a private conversation, while watching out for the perpetrator’s reactions, which may include being aggressive or impatient, answering questions directed to his partner, or showing excessive worry or attention towards her.

Identifying factors include self-blaming, shame, fear, shock, distress, loss of self-esteem, depression, emotional incapacity, isolation, sleep or eating disorders, nightmares, phobias, panic attacks, weight problems, chronic headaches, or Post Traumatic Stress Disorder, etc. Children also very often show signs of the abuse if they witness violence against their mothers at home: fear, nightmares, hyperactivity, depression and isolation and a number of other symptoms or behaviours may indicate they are living in an environment where domestic violence happens.

**Topic 4: Domestic abuse and diversity – Women with specific needs**

Domestic abuse happens to women from every background, religion, culture, class, age group. Young and old women, working class and middle class women, disabled and non-disabled women, black and white women, lesbian, bisexual and heterosexual women may all experience domestic abuse. However, research and experience have clearly illustrated that, although any woman may experience domestic violence and will face difficulties getting help, these difficulties are compounded and heightened by additional discrimination faced by black and Asian women, older women, younger women, lesbian women, those with a disability, sex workers, travellers, asylum seekers, those who misuse drugs or alcohol, and those with mental health needs. These women may experience stereotyping and prejudice, and/or face practical difficulties that further impede their escape from domestic abuse. They may be more dependent on statutory services or more visible within them. Sometimes abusers may use their “difference” to abuse them further – for example by making fun of their disability, calling them discriminatory names, emphasising stigma and exacerbating feelings of shame.

Trainers may want to ensure participants understand that

- the barriers and pressures lie within society rather than within the woman herself;
- women are not a homogeneous group, and categories such as ‘black’ (which includes many ethnicities) and disabled (not just wheelchair users) are also heterogeneous categories;
- a woman may belong to more than one marginalised group, e.g. both black and lesbian, or both a drug user and a prostitute;
- a woman might experience additional pressures if her abuser is from a marginalised sector;
- professionals’ awareness of equality and diversity issues with respect to domestic abuse can affect their understanding and identification of women at risk, and their response;

PRO TRAIN: Improving multi-professional and health care training in Europe – Building on good practice in violence prevention
• offering the same service to everyone might leave some women disadvantaged;
• professionals should work toward making services accessible and sensitive to need;
• there should be a local equal opportunities policy;
• local services specific to marginalised groups may be needed.

Source: Lorraine Radford - Domestic Abuse Training Manual for Health Practitioners - National Domestic Violence Health Practice Forum
Practical part

Topic 1: Dynamics of violence and barriers to leaving a violent partner

The two exercises are very important for trainees to get an understanding as to why women stay in an abusive relationship. This question arises in all professions.

Timeframe for both exercises with inputs: 70 – 90 minutes (depends on the length of inputs from the trainer)

Topic: Barriers to leaving an abusive partner – Why do women stay in abusive relationships!

Exercise: work place case
Aim of the exercise: trainees learn that there are as many reasons for women to stay in an abusive relationship as there are to leave the abusive partner.
Objectives: empathy for victims and their difficulties in leaving an abusive partner
Timeframe: 30 Minutes
Method: two small groups and discussion
Material:
- Green Din A 4 sheets with case study and the question: Which arguments are for giving notice (these are for half of the trainee group)
- Red Din A 4 with case study and the question: Which arguments are against giving notice (these are for half of the trainee group)
- Flip chart
- Red and green pen

Notes for trainer:
- Trainer gives half of the group the green sheets and half of the group the red sheets
- Trainees are invited to read the work place description (5 Minutes) and take some notes
- Trainees have five minutes to discuss the arguments with their neighbours
- Trainees with green sheets write down their arguments for giving notice
- Trainees with red sheets write down their arguments against giving notice
- After five minutes discussion with neighbours the trainer gathers the arguments/reasons for giving notice from the group with the green sheets and writes them on the flipchart with the green pen
- Trainer gathers the arguments/reasons against giving notice from the group with the red sheets and writes them on another sheet of the flipchart with the red pen
- It shows that in almost all cases there are nearly the same number of reasons for and against giving notice
- Trainer pins both sheets of the flipchart to the wall so that everyone can see that there are many reasons to stay or to quit the job.
- Trainer summarises the results and shows the ambivalent situation of women thinking about separation
• Trainer gives information on barriers to leaving an abusive partnership or add arguments that have not been worked out in the group
• Trainer gives information on the risk of homicide or serious violence in times of separation (see slides or ppt.)

Topic 1: Dynamics of violence and barriers to leaving a violent partner

Handout for the exercise 1:

Please read the following work place description. Put yourself in the situation of the case study and take some notes.

Please think of a situation at your work place. Your chief/boss alternatively praises you for your work and promises to raise your salary – and then fiercely criticises you. He/she embarrasses you at staff meetings in front of your colleagues, but says after the meeting that he/she meant no harm to you. You shouldn’t be so sensitive. He/she also bad-mouthes you behind your back – but expects one hundred percent loyalty from you. Sometimes he/she is very nice and invites all colleagues for a coffee or a glass of wine after work is finished.

Your work is interesting and you actually like it. You certainly do not want to loose your job because you are over 40 and it would not be easy to find another job in this area of expertise with the same salary. Furthermore you have to care for your children and to pay for a loan for your car.

Please take five minutes to discuss the following question with your neighbour:

What speaks for giving notice? (green sheets)
What speaks against giving notice? (red sheets)
Exercise 2: Gloria’s story

Timeframe: 40 minutes

Aim: This is a simple scenario that describes a possible real-life situation. It is intended to elicit a discussion that results in understanding the difficulties survivors face.

Objectives: empathy for victims and their difficulties in seeking and finding help and support

Methods: scenario and group discussion

Material: one short and 8 long ropes (150cm), text for all active participants as below, enough space for a group of 9 people to stand in a circle, handout

Description of the exercise (for this exercise notes for trainer are necessary before the scenario is described) individuals’ scenario responses should be placed on cards for participants to read.

- Print off the responses, cut them and tape or laminate onto 3” x 5” index cards to give the volunteers to read prior to the training.
- Prior to reading the scenario, ask for nine volunteers (Gloria, Oliver and 8 community individuals) and distribute the response cards randomly among the participants.
- Have the volunteers come up to the front of the room.
- Form a circle and have Gloria stand in the centre of a circle made up of the other community individuals and Oliver.
- Give the circle of volunteers including Oliver each a 4 to 6-foot length of rope (or a 4 to 6-foot length of tissue paper –easily found in most conference settings) to hold between themselves and Gloria.
- The narrator/instructor should begin the exercise once the circle has been formed, and the individuals forming the circle are “linked” to Gloria through the lengths of rope.
- Ask them to read out loud the card when you prompt them.
- After they have read their response have them drop the rope (or tissue paper) and return to their seat. Gloria continues to hold on to the pieces of rope (or tissue paper).
- After everyone has responded, only Oliver will remain still ‘linked’ to Gloria by the piece of rope.
The narrator/instructor begins by stating:
"To begin this exercise, we will meet Gloria, a victim of domestic violence. As we listen to Gloria’s story, take special notice of how she reaches out time and time again for help. When I refer to the person on the card such as landlord or doctor, please read the response written on the card."

Gloria will read the following out loud:

“My name is Gloria. I am 38 years old and I have been married for 9 years. My husband Oliver is a successful businessman. We have two children the age of 6 and 9 years. I have a part time job at an office. My friends think I am lucky with my family and a husband who is so charming. Instructor: Gloria says to her sister…

Gloria: Oliver isn’t the same as he used to be.

Instructor: And her sister says…

Sister: You’re so lucky to have Oliver. I’m so lonely now that my husband is gone.

Instructor: Gloria says to her friend…

Gloria: Oliver doesn’t like it when I go out at night; he likes me to stay home, when he comes back from his work.

Instructor: And her friend says…

Friend: You should be glad that he wants to see you in the evening.

Instructor: Gloria says to her neighbour…

Gloria: You are already back from your holidays.

Instructor: And her neighbour says…

Neighbour: You had another loud argument last night. I couldn’t sleep.

Instructor: Gloria says to law enforcement…

Gloria: I’m afraid of my husband.

Instructor: And law enforcement says…
Law Enforcement: Unless there’s physical proof of an assault, fear isn’t enough.

Instructor: Gloria says to the teacher of her son…

Gloria: My husband doesn’t want my son to take part in the theatre workshop.

Instructor: And the teacher says…

Teacher: I’m sorry. This could be quite interesting for your son, he’s often reclusive.

Instructor: Gloria says to her banker…

Gloria: I’d like to talk about my account. I need a bank card.

Instructor: And her banker says…

Banker: We sent the card to you some time ago.

Instructor: Gloria says to her doctor…

Gloria: I’ve been feeling stressed lately.

Instructor: And her doctor says…

Doctor: Well, your heart checked out okay, you seem nervous and depressed. I suggest we try a well proven medicine.

Trainer notes for group discussion:
The trainer asks the group: “How do you think Gloria feels now.” After some responses the trainer asks Gloria how she feels. Then the trainer asks Oliver about his situation and then the other role players should talk about how they felt. The trainer asks the audience what they experienced during the role play when the different reaction happened.

After discussion, summarise key learning points.

Complete the discussion with a summary comment:
“Often, we only know a little of the whole story. People in abusive situations may often reach out to many people and get just such responses.”

“Think about anyone in this kind of a situation. How do you suppose Gloria or anyone else feels as they reach out for help, support or affirmation? Fear, embarrassment, shame,
confusion? When they receive insensitive responses, non responses, victim blaming responses, how likely are they to keep reaching out?”

Source: 

**Topic 2: The needs of women**

This exercise with case study is important for trainees in order to discuss the needs expressed by women and the resources that they can help women find in order to be able to protect themselves from their violent partner.

**Timeframe** 15 to 20 minutes

**Topic: Identify the specific needs expressed by the woman**

**Exercise: Case study.**  
**Aim of the exercise:**  
trainees learn that in a domestic violence case specific needs of the victim are to be identified and thoroughly considered  
**Objectives:** identify possible community/institutional response  
**Method:** small groups and discussion  
**Material:**  
- Handout with case study (trainer’s choice)  
- Flip chart

**Notes for trainers:**  
- Trainer asks one trainee to read out loud the case study  
- Either asks trainees to form two groups for discussion or facilitates discussion with all the participants  
- Gives feedback using the case as a prompt  
- If two groups are working, sums up conclusions by each group  
- Sums up points on flipchart

**Trainer notes for group discussion:**  
Trainer summarises key learning points after discussion.
**Topic 3: How to identify victims and perpetrators**

**Timeframe** 20 to 45 minutes

**Topic:** Identify indicators of violence in the behaviour of victim and perpetrator

**Notes for the trainer:** Choose one of the following exercises

**Aim of the exercises:** trainees learn how to recognise signs of violence in a woman talking to them or a man accompanying her

**Objectives:** Making early recognition of situations of domestic violence possible

**Exercise 1:** Recognise indicators

**Method:** Presentation/Discussion or group work

**Material:** List of indicators (see appendix)

**Notes for trainer:**
Discuss list of indicators and give information. Indicators may also be the result of an exercise in groups, where participants list indicators according to their experience/awareness and then report to the plenary for discussion and trainer’s suggestions.

**Exercise 2:** Case study

**Method:** Group work/Discussion

**Material:**
- Handout with case studies (see appendix)
- Flipchart

**Notes for trainers:**
Ask groups to identify signs of violence in case studies, then ask questions reported in handout for discussion. Results will be summarised on flipcharts.
Physical indicators of domestic violence

- Unexplained burns or bruises
- Bruising patterns indicative of abuse
- Area of erythema consistent with slaps
- Multiple injuries in various stages of healing
- Repeated or chronic injuries
- Injuries in areas of the body inconsistent with falls or other explanation offered
- Injuries to the breast, chest and abdomen – abused women are particularly likely to be injured here
- Injuries to face, head or neck
- Perforated eardrums, detached retinas
- Evidence of sexual abuse or frequent gynaecological problems
- High incidence of miscarriage, terminations, preterm labour
- Frequent visits with vague complaints or symptoms
- Frequent use of pain medication or tranquillisers
- Damage to sutures following operation or delivery

Emotional indicators including

- Panic attacks, symptoms of anxiety
- Depression
- Feelings of isolation

Behavioural indicators

- Alcohol or drug use
- Suicide attempt
- Self harm
### Behavior that may alert you to domestic violence

<table>
<thead>
<tr>
<th>Patient</th>
<th>Partner/perpetrator</th>
</tr>
</thead>
<tbody>
<tr>
<td>May cover body with clothing injuries</td>
<td>May encourage patient to hide scars, bruises or injuries</td>
</tr>
<tr>
<td>Attends late, cancels or misses appointments</td>
<td>Partner cancels on her behalf</td>
</tr>
<tr>
<td>Fails to complete treatment</td>
<td></td>
</tr>
<tr>
<td>Patient attends frequently with vague symptoms</td>
<td>Partner always attends with her and never leaves her side</td>
</tr>
<tr>
<td>Seems frightened of partner</td>
<td>Seems to bully</td>
</tr>
<tr>
<td>Seems passive</td>
<td>Seems over-protective</td>
</tr>
<tr>
<td>Evasive or embarrassed about any injuries</td>
<td>Similarly evasive</td>
</tr>
<tr>
<td>Inconsistent explanations</td>
<td></td>
</tr>
<tr>
<td>Evades discussion of home situation</td>
<td>Adamant about cause of injury</td>
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<tr>
<td>Vehement denial or minimisation of violence</td>
<td>Vehement denial or minimisation of violence</td>
</tr>
<tr>
<td>Suicide attempts</td>
<td></td>
</tr>
<tr>
<td>Repeated depression, anxiety or self harm</td>
<td></td>
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</tbody>
</table>
Topic 3: How to identify victims and perpetrators/Exercise 2

Handout

Indicators of Domestic Abuse – Case Studies

Mrs Patel is 32 years old. She attends ante natal clinic wearing trousers and a long sleeved top. She has a cut on her lip and some bruising around it. She avoids eye contact and you are concerned that she is not telling you what has actually happened. She is six months pregnant.

Miss Reed is 19 years old and 16 weeks pregnant with her second child. Her two year old son accompanies her to the surgery. You notice that she has bruising on her abdomen. When you ask her about the bruises she says her friend’s toddler clambered on to her lap and was very boisterous and the bruising is a result of those kicks.

Mrs Williams is 69 years old. She suffers from severe arthritis. She lives alone with her adult son who helps with her personal care. You see Mrs Williams in a hospital emergency unit, where she is accompanied by her son. There is a severe burn on her forearm. You notice that Mrs Williams has attended hospital emergency previously but for an unrelated reason (abdominal pain).

Mrs Chang is 22 years old and is suffering from depression following a miscarriage last year. She lives with her husband and his parents. She has been complaining about difficulty in sleeping and feeling dizzy. She missed two of her previous appointments. You see her at the surgery today with her mother-in-law. She has lost a lot of weight and admits that she has not been eating properly.

You go to visit Mrs Woods and her newborn baby. The baby is thriving but Mrs Woods is grimacing in pain when she lifts the baby. When you ask her what is wrong she says that she tripped and twisted her back. Mrs Woods’ husband suddenly appears from the kitchen and Mrs Woods looks nervous and says that she is tired and if that is all, she would like to be left alone to be able to rest.

1. What are the possible indicators of domestic abuse?
2. What issues would you want to explore further?
3. What would you say and what would you do?
Topic 4: Domestic abuse and diversity – Women with specific needs

**Timeframe:** 30 minutes

**Topic: Equality and diversity**

**Aim of the exercise:** To illustrate visually and experientially the obstacles facing women from different groups.

**Method:** Role play followed by discussion

**Materials:** A large room is needed for this workshop, sufficient for a person to take 25 steps forward from one end of the room to the other.
- Handout 1 photocopied and cut into strips, each with one identity to give to individual participants.
- Questions (below) for trainer to read out.
- Copies of Handout 2

**Notes for trainers:**
Ask participants to stand in line at the end of the room.

Give each participant a strip of paper showing them their identity. Each participant only knows their own ‘identity’, not that of anyone else. Stand at the front of the room. Tell the participants that you are going to read out a list of statements. They can only take a step forward if they can answer ‘yes’ to the statement.

Before starting check everyone understands the instructions e.g. say ‘If I say you are a woman, would you take a step forward or not?’

Read out each question (below) in turn, slowly and clearly. Allow participants time to consider their responses before moving on to the next question.

When all the questions have been read out, ask the participant(s) who has taken the most steps to reveal their identity. Ask how they feel.

Follow this by asking the participant(s) who has taken the second most steps to reveal their identity. Ask how they feel.

Repeat this for the third most advanced participant, and then for the last three (furthest from the trainer) or if time allows, ask all participants in descending order, until all the identities have been revealed.

Focus the discussion on the difficulties faced by particular groups throughout the feedback.

**Trainer’s notes for inputs:**
- Institutional racism can isolate a woman seeking help;
- Nationality status can increase pressure due to the threat of deportation and lack of recourse to public funds;
- Reluctance of staff to use National Interpreting Service, Language Line or local interpreters;
Discrimination of women from different classes can include telling professional women that no one will believe they are being abused; 
Age discrimination of older and younger women: her age may be used to justify abuse; 
Discrimination of women with disabilities can include threatening them with institutional care, making them feel guilty for their ingratitude or labelling the woman as the disability; 
Homophobia against lesbians and bisexual women: their sexual orientation may be used to justify the abuse.

Exercise 2: Trainer’s statements: Equality and diversity exercise
(to be read aloud to the group each holding their statement from the handout below)

- The police represent a source of support to you and you feel relatively comfortable about calling them.

- If you go to the housing department, it is likely that you will find assistance from a member of staff like yourself.

- If you wish to complain about a service and you ask to see the manager, it would be reasonable to expect them to be like yourself or understanding of your situation.

- You are confident that Social Services will have no particular concerns about you raising your children.

- You can afford to use a solicitor.
- You are entitled to welfare benefits if you leave.
- You can get information in your first language.
- The neighbours may call the police on your behalf if they hear you being hurt.
- If you leave, you are reasonably confident about keeping residence of your children.
- If you leave, the local authority will be able to find you suitable temporary accommodation.

- When thinking about being permanently re-housed, your only safety concerns are about being found by your abuser.

- If you go to a refuge, your abuser would find it difficult to track you down.
- You will benefit financially or be no worse off if you leave.
- You can use a telephone in an emergency.
- You have some knowledge of how the ‘system’ works.
- If you disclose the domestic violence, people will usually believe you.
• Members of your community will support you if you decide to leave.
• If your abuser applies for contact with the children but you do not think it is safe, the court will believe you and refuse contact.
• You can apply to the court for a non-molestation order.
• If you go to a refuge, you are likely to find a woman like yourself.
• If you leave, you will not be at risk of deportation.
• You can live independently without help
• More than one person is at risk if you leave
• You are at risk from more than one person
• You are confident that the health services can help you
Handout 1

**Identities: Equality and diversity exercise**

1. You are a 41-year-old white woman. You are a successful businesswoman and in addition have a private income. You have one daughter, aged 14. You and your husband jointly own two houses that are paid for.

2. You have been in the UK for six months, after coming from Thailand to marry your British husband. You do not yet have indefinite leave to remain in the UK. You do not speak much English.

3. You are a white Australian woman, on a work permit for a further six months. You work as a teacher. You are renting a property from your boyfriend’s parents.

4. You are a white woman with learning disabilities. You have a council property in your sole name. You are in rent arrears through not paying your heating charge because your boyfriend wanted money.

5. You are a 34-year-old white woman. You have one child, aged three years old. You are a wheelchair user. You have a joint tenancy on a council property, which has wheelchair use.

6. You are a black woman, married to a police officer and live in police accommodation. You have three children aged one, three, and six.

7. You are a 70-year-old white woman, married for 50 years. You have lived with domestic violence all your married life. You have one son who gets on with his father.

8. You are a 30-year-old black woman who is profoundly deaf. You can lip read and use sign language. You live with your (hearing) husband in a jointly owner-occupied house. You work and have an independent income. You have no children.

9. You are a 50-year-old white woman with a severe visual impairment, using a guide dog. You live with your (sighted) husband and three teenage children in a council property.

10. You are a 40-year-old Asian lesbian, trapped in an abusive heterosexual marriage. You and your husband have two children aged 3 and 6 years old. You jointly own your home but wish to leave with the children to set up home with a new (female) partner.

11. You are a white woman, 16 years old who has recently moved in with your boyfriend. He is the father of your three-month-old baby.

12. You are a 25-year-old white woman and have six children, all less than 10 years old. You are a travelling woman. You have difficulty with reading and writing.
13. You are an Asian woman, living over the shop that you and your husband run. Your mother lives with you and she speaks no English. You have some other properties and savings in joint names.

14. You are a 20-year-old white woman and have spent most of your childhood in care. You have a one-year-old daughter whose father has never lived with you but he calls around sometimes and is very threatening.

15. You are a 26-year-old Vietnamese woman. You are pregnant. You cannot speak English. Your husband claims Income Support for you both.

16. You are a 21-year-old Asian woman with three children under five years old. You live with your husband and children in his parent’s house.

17. You are a 62-year-old white woman, with a flat in your own name. Your son, whom you help out with money, is physically abusing you.

18. You are a 19-year-old white lesbian with one child, aged two. You work as a live-in nanny to your partner’s children. Neither of you is ‘out’ about your sexuality.

19. You are a white woman aged 32. You have two children, aged seven and ten years old. You live on Income Support. You are not in a relationship, but an ex-boyfriend is harassing you badly.

20. You are an African-Caribbean woman with a hearing impairment. You have three children, aged two, four and five years old. Your husband works.

21. You are a Turkish woman, aged 39 years old. You have three sons aged less than 10 years. You and your husband live on Income Support. The council flat you live in is in your husband’s name only.
Handout 2

ASIAN WOMEN

Why might an Asian woman experiencing domestic abuse not approach agencies for help?
- Might not know where to go for help
- Fear of racism in mixed/mainstream refuges.
- Agencies are predominantly white-led; lack of specialist support services and may lack understanding
- There is a low level of awareness among these women about the existence of refuge services
- Agency workers may not be able to speak Asian community languages
- Even if Asian, workers might not speak right language, agency may not be able to access interpreters
- Interpreters may be male or may be from the same community and may not be properly qualified
- She may fear that her confidentiality would be broken by interpreter
- Agencies may be racist
- May be lack of cultural awareness in agencies
- May fear religious and cultural stereotyping by individuals and agencies
- May believe it is not acceptable to talk about her business outside of the family/community
- May fear being reported to Home Office if has unsettled immigration status

What might stop her from leaving an abusive relationship?
- May not have access to information about support services
- May have no recourse to public funds, unsettled/insecure immigration status and fear being deported
- Abuser may have essential documents such as passport, marriage certificate, correspondence from Home Office
- May be under pressure from family/community/elders/religious leaders not to leave
- May fear loss of community support and social networks – being ostracised or isolated
- May believe that wherever she goes, he will find her through community networks by word of mouth or because ethnic minority women more visible in different communities
- She may be being abused by in-laws and kept isolated
- May believe that she will be a burden on her family if she leaves
- Betraying the family honour (izzat) and shame (sharam)
- To leave will affect the honour of other family members who are already married and those who are not
- Lack of awareness of country systems
- Abuser interprets religious teachings to suit his own ends
What stereotypes and discrimination might she face?
- Certain religions say it's okay to chastise your wife
- Seen as foreigners and therefore don't have same rights as local citizens
- Asian women are submissive/tied to the home
- The Asian community polices itself
- They should keep it in the community
- Black men are more violent/aggressive
- What do you expect from arranged marriages

What specialist services are available to Asian women locally/nationally?
(Fill in according to country)

AFRICAN CARIBBEAN WOMEN AND DOMESTIC ABUSE

Why might an African-Caribbean woman experiencing domestic abuse not want to approach agencies for help?
- Fear of racism, based on experience e.g. of discriminatory work practices, harassment
- Racist treatment by agencies: inadequate housing, inaccessible protection
- Fear of cultural stereotyping
- Most agencies are white-led; lack of specialist support services
- Language may not have a term for domestic violence (e.g., French) which impedes asking for help
- May fear that agencies won’t be aware of cultural issues
- May fear being judged
- Only a small number of Black-led agencies
- May fear betraying partner if she goes outside family/community
- May believe it is not acceptable to talk about family business outside the family
- May fear children being removed

What might stop her from leaving an abusive relationship?
- Might not know where to go for help
- Abuser might threaten to tell family/community/church that it is her fault if she leaves
- Fear that she is betraying partner, family, community
- If partner is Black, fear that he might be more severely dealt with than if he were white
- Fear of losing support of partner, family and community especially in dealing with effects of living in racist society
- Feeling responsible for protecting a community already subject to racism
- Being classed as mentally ill
- Fear of deportation, the slow asylum-seeking process, curtailed right to claim benefits
What stereotypes and discrimination might she face?
- African Caribbean women are strong and feisty
- African Caribbean women give as good as they get
- The African Caribbean family is matriarchal
- African Caribbean men are violent and aggressive so what do you expect
- It's normal in those communities - let them get on with it
- Disproportionate number of black people sentenced to prison

What specialist services are available to African-Caribbean women locally/nationally?
(Fill in according to country)

DOMESTIC ABUSE AND ISSUES FOR WOMEN WHO USE DRUGS OR ALCOHOL

Why might women who use drugs or alcohol not want to approach agencies for help?
- Fear that she won't be taken seriously
- Fear that she won't be believed
- Fear that she will be seen only in terms of her drug or alcohol use
- Treated by agency only in terms of her drug or alcohol use
- Fear that she will be labelled
- Fear that nobody will help her
- Believes that she doesn't deserve to be helped
- Abuser might make counter-allegations against her
- Agencies believe that she is as bad as him and don't help
- Believes agencies won't take women in who use drugs/alcohol and are in chaos or don't have support for drug/alcohol use

What might stop her from leaving an abusive relationship?
- Her abuser may be her supplier
- Fear that she may lose her supply and have to face withdrawal
- Fear that the children will be removed
- Fear that once the agency get to know about her drugs/alcohol use, they will withdraw their support
- She believes or is told that there is nowhere to go that can help her
- Fear of leaving support and social networks
- Unable to transfer to a drug or alcohol programme in a different area
- Abuser forces her to take drugs/alcohol to get her addicted and more dependent on him
- Abuser threatens to tell other people about her drug/alcohol use
- Abuser controls her by controlling her drug/alcohol use
- May be so out of it on drugs/alcohol that can't seek help
- Scoring drugs/alcohol may feel more important than getting help

What stereotypes and discrimination might she face?
She's low life
She's disgusting
She's a bad mother
It's her fault
It's only men who use alcohol or take drugs and her use is invisible
She's irresponsible

Specialist services: (fill in according to country)

ISSUES FOR LESBIANS LIVING WITH DOMESTIC ABUSE

Why might a lesbian experiencing domestic abuse not want to approach agencies for help?
- Homophobia and fear of homophobia
- Belief that agency will assume she's heterosexual
- Fear that agency won't believe that domestic violence occurs in lesbian relationships
- Fear that the agency will judge her
- Not wanting to reinforce prejudice against lesbians – e.g. that all lesbians are violent, or “masculine”
- Fear that she might lose her children, that courts will give residence to father/husband
- Might be faced with agency assumptions and stereotypes about lesbians, e.g. that they are white, hate men, wear trousers and have short hair etc
- May not know which agencies to approach
- Fear of AIDS might be heightened within bisexual relationships (Letellier, 1996)

What might stop her from leaving an abusive relationship?
- Partner might threaten to 'out' her to family, friends, children, community and workplace
- Female partner might accuse her of being abusive too
- Taboo of domestic violence in lesbian community so might not receive support
- Shared circle of friends means escape from violence equates with loss of community
- Female partner might approach same agency for help
- May fear that the family courts will judge her ability as a mother based on their stereotypes of her as a lesbian (Mullender, 1996)
- Fear of being easily found / tracked by mixing in lesbian/gay communities
- Fear of not being taken seriously if she approaches agencies
- No specialist refuges for lesbians
- Internalised social homophobia, perhaps adding to a sense of shame, guilt or powerlessness
- Sense of duty to protect the community by keeping silent about domestic violence

What stereotypes and discrimination might lesbians face?
- Lesbians don't abuse each other
- It’s just a cat fight (downgrade the severity)
- She's just being hysterical
She brought it on herself
Don't rock the boat in the community
They're both as bad as each other
If she has previously had a male partner, look at what he's had to put up with
She just needs a good ****
Lesbians are bad mothers and will pervert their children
Children need fathers
Pressures to deny sexuality
Experience of emotional abuse and humiliation

Specialist services: (fill in according to country)

DOMESTIC ABUSE AND MENTAL HEALTH

How might domestic abuse affect a woman's mental health?
- May become depressed or anxious
- May feel worthless and have low self-esteem
- May feel or become suicidal
- May self-harm
- May become more isolated
- May develop an eating disorder

How could an abuser use a woman's mental health issues to further abuse her?
- Might tell her nobody will believe her
- Might tell her (and others) that she is mad
- Tell her she could not cope on her own
- Refuse to let her go anywhere on her own, and say it's for her own good
- Might threaten to have her sectioned (detained, under Mental Health Acts, for hospital treatment)
- Might threaten to tell Social Services she can't look after the children
- Might withhold her medication
- Might give her an overdose of her medication

Why might a woman with mental health issues not want to approach agencies for help?
- Fear of not being believed
- Lack of confidence: maybe she IS the one with the problem?
- May have panic attacks when she goes out
- May fear that she will be seen only as a 'mad' woman
- May fear that children will be removed
- May fear that she'll be made to see a psychiatrist or even sectioned (detained, under Mental Health Acts, for hospital treatment)
- May fear that things will be taken out of her control once she has told people
- May fear that people will be sympathetic to abuser and see her as the cause of the problem

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What might stop her from leaving an abusive relationship?
- Fear
- May not know where to go
- May not be unable to find a suitable refuge place
- May believe no refuge will take her
- May believe that she is the problem and that the abuse is her fault
- May feel dependent on abuser
- Fear of repercussions
- Fear of being found
- Fear of losing children

What prejudice might she face?
- 'She's the problem'
- 'She's a nutter'
- 'She's hysterical'
- 'You can't blame him. Look at what he has to put up with'
- 'He's better off without her'

Specialist services: (fill in according to country)

YOUNG WOMEN AND DOMESTIC ABUSE

Why might young women find it difficult to approach agencies for help?
- Lack of trust in an adult dominated society
- Fear they may not be believed
- Don't know where/who agencies are
- No transport
- No money
- Lack of entitlement to benefits and tenancies (16-18 year olds)
- They may feel intimidated by agencies or their GP
- Fear of being 'caught' asking for help
- Peer pressure to have boyfriend
- Passing the problem between agencies; lack of specialist support

What attitudes, stereotypes and discrimination might young women face?
- The relationship/problem is not serious as they are just kids
- They are making it up as a form of attention seeking
- Go home to your parents
- There are 'plenty of fish in the sea'
- There may be a high regard for the perpetrator in the community
- She deserved it because she is a slag, flirt etc
- Financial discrimination imposed by government restrictions on benefits
- Age discrimination involved with being homeless
- He is only young and may grow out of it, 'phase'
- My son would never do a thing like that
- It is only domestic violence if you are living together, married.

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Friend dismissive or 'I told you so' attitude
Feeling that police will not assist because of age

What other issues might young women face?
- Abuser may be older and better able to manipulate and exert power
- Health, contraception, and parents or others knowing GP or that GP might tell
- Trying to complete education
- Housing
- Money
- Job or training
- Lack of awareness about the issue in school, youth clubs, etc.
- Immigration status may be dependent on perpetrator
- It doesn't happen to my friends, therefore it must be me
- Fear of parents finding out and imposing restrictions, or shame, especially if they disapproved of the relationship
- Abuser offered an escape route from family or isolation in care system

Specialist services: (fill in according to country)

OLDER WOMEN AND DOMESTIC ABUSE

Why might an older woman experiencing domestic abuse not want to approach agencies for help?
- Lack of knowledge about welfare benefits and support services
- Most service providers are younger
- Most service users are younger
- Feel embarrassed about disclosing to much younger women
- Lack of specialist support services
- May feel the pressure to offer stability to those around her

What might stop her from leaving an abusive relationship?
- May feel there is no point in trying to leave now
- May feel she cannot leave after having built up home and possessions over so many years
- Pressure by others including grown up children
- Harder to imagine the possibility of ‘future’ relationships

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May feel the pressure to conform to traditional stereotypes of passivity
May feel she won’t fit in within a refuge, and/or will find it harder to cope with lack of privacy, noise, and other women and children
Her abuser may also be her carer
May lose pension rights if has to give up job
May have no independent pension provision of her own and fears loss of share in partner’s pension
Belief that marriage is for life

**What stereotypes and discrimination might she face?**
- Disbelief by others that older men can be abusive
- Disbelief by others because violence has been hidden for so long
- Marries/remarries late in life and may feel foolish at “not choosing more wisely” at her age
- Disbelief that a parent would not have control over her children
- The hidden nature of institutional abuse

**Specialist services:** (fill in according to country)

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**WOMEN WITH DISABILITIES AND DOMESTIC ABUSE**

Why might a disabled woman experiencing domestic violence not want to approach agencies for help?
- Lack of accessible services
- Agency may not be able to locate accessible accommodation suitable to woman's needs
- Fear that agency will place her in residential care
- Fear of bureaucracy and delays around applying for funding from Social Services if she wants to live independently
- May need to recruit personal assistants if wanting to live independently
- Agency may collude with abuser
- Agency may not believe her
- Fear of children being removed
- Specialist disability services may not be aware of domestic violence
- Domestic violence services may not be aware of disability issues

What might stop her from leaving an abusive relationship?
- May not know where to go for help
- May fear that she won’t be believed or treated as credible
- He may have total power and control over her access to outside world
May not be able to get help because agencies are inaccessible
May believe it's her own fault
Loss of employment or community group (e.g. deaf community) geared to meet her needs, particularly if partner is part of community
If abuser is her carer, she may be totally dependent on him for care
Fear of not being able to look after children if abuser also her carer and father of children
Her home has been specially adapted to meet her needs
Refuges and other safe accommodation that have accessible accommodation may not be right for her needs

What stereotypes and discrimination might she face?
- She's always falling over; She bruises easily
- What a saint he is looking after her like he does
- You can't blame him if he gets a bit frustrated at times
- Prejudice/disbelief, especially if abuser also has disability
- Being labelled as asexual or tragic or burden to society
- Disability is some kind of punishment for evil behaviour
- Disability is an impairment the individual should overcome by effort, or be seen as ‘apathetic’
- It is the individual who is at fault, not society

Specialist services for women with disabilities (fill in according to country)

CLASS AND DOMESTIC ABUSE

Working class Women

Why might a working class woman experiencing domestic abuse not want to approach agencies for help?
- Previous experience of class discrimination
- May feel daunted about approaching professionals
- May feel frustrated or patronised in the past
- May feel inferior, unworthy or self-doubt reinforced by negative attitudes from professionals

What might stop her from leaving an abusive relationship?
- Less access to employment prospects
- Less educational opportunities
- Further financial challenges for single parent
- Day to day struggles of dealing with poverty, childcare, bad health, bad housing take precedence

What stereotypes and discrimination might she face?
- The effects of living on a low income
Forced or encouraged to lower aspirations
Attitudes can be patronising and judgmental
Lower expectations for her quality of life
Lower expectations of her capacity to make informed decisions
Stereotyped as inarticulate, aggressive, unable to cope, unwilling to change

**Middle class Women**

**Why might a middle class woman experiencing domestic abuse not want to approach agencies for help?**
- Reluctance herself to believe ‘I am that type of woman’ (her belief in a stereotype that violence is a working class phenomenon)
- She may fear she will not be believed by others – particularly if her abuser is a respected member of the community, e.g. minister of religion, G.P. or surgeon, M.P., etc.
- Lack of knowledge of support services, welfare services and benefits available
- (More likely to approach health suffering from depression than refuge providers asking about domestic violence)
- Embarrassment and shame

**What might stop her from leaving an abusive relationship?**
- Home and standard of living dependent on abuser’s income
- Private schooling for children dependent on abuser maintaining payment
- Used to staying at home; employment prospects daunting or curtailed
- Reluctance to get caught in the poverty trap

**What stereotypes and discrimination might she face?**
- Disbelief by others including service providers that upper/middle class men can be violent (due to their ‘respectability’ or profession e.g. teacher, policeman, doctor, priest, lawyer)
- Pressure to be grateful for expensive holidays, ‘being so well off’

**TRAVELLER WOMEN AND DOMESTIC ABUSE**

**Why might a traveller woman experiencing domestic abuse not want to approach agencies for help?**
- Her community’s previous experience of the police
- Fear of the way police would treat the perpetrator
- Civil remedies inappropriate
- On-going treatment by society e.g. that place her community on municipal sites alongside industrial units, factories and waste tips; poor facilities in a brutalised environment
What might stop her from leaving an abusive relationship?
- She would have to leave her community
- She may lose the protection of her extended family
- Loss of her status as a married woman
- Difficulty in attending social occasions (dances, weddings, christenings)
- She would have to adapt to a ‘settled’ lifestyle
- Loss of her way of life and security
- ‘Marriage is for life’ prevalent belief in travelling community
- It is rare for women to live as a single parent in a travelling community

What stereotypes and discrimination might she face?
- Insults, lack of respect
- Objections to her presence in a refuge from other residents
- Prejudice and hostility from the settled population
- Difficulty adhering to her high standards of cleanliness in a communal kitchen

Specialist services: (fill in according to country)

WOMEN WORKING IN THE SEX INDUSTRY AND DOMESTIC ABUSE

Why might a woman working in the sex industry and experiencing domestic abuse not want to approach agencies for help?
- Previous lack of support, history of abuse
- Isolation
- Disrespect from authorities, e.g. being addressed by a court as ‘Mary Smith, common prostitute of (address)’ – the only defendants in the British Justice System to be addressed and treated in such a way
- Forced drug addiction

What might stop her from leaving an abusive relationship?
- Financial pressures
- Fear of the perpetrator who has immense power over a number of women
- Fear of her children being removed
- Fear that she would suffer discrimination both in a refuge or elsewhere
- Difficulty in obtaining employment: lack of references, educational qualifications and training
- Addiction to drugs and difficulty in obtaining effective treatment
- May be unable to find place in a refuge – or may fear that refuge will not take her because of her sex work and/or drug use.

What stereotypes and discrimination might she face?
- Inappropriate advice from professionals who do not understand her living circumstances

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Judgment and condemnation for her ‘life-style’
Women in the sex industry should expect assault and rape
Women in the sex industry do not experience the effects of violence to the same extent

Specialist services: (fill in according to country)

24 hour National Domestic Violence Helpline: (fill in with telephone number according to country)

Source: Lorraine Radford - Domestic Abuse Training Manual for Health Practitioners - National Domestic Violence Health Practice Forum
Duluth Model, Domestic Abuse and Intervention Programs