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Culture, Language, and Gendered Violence in Southern Nevada

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Lincy Institute Fellowship Program

<u>Final Report</u>

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Thanks and gratitude to the Lincy Foundation for supporting this preliminary research and to the providers, S.A.F.E. House, Safe Nest, the Shade Tree, and the Rape Crisis Center for opening your doors and records. I am especially appreciative of those who took the time to share their thoughts and perspectives, as difficult as it may have been.

TABLE OF CONTENTS

LIST OF TABLES AND CHARTS

Culture, Language, and Gendered Violence in Southern NV

I. Project description

The objectives of this project are to:
- To identify the needs and concerns of communities for whom English is a second language with regard to gendered violence
- To identify service providers' current ability to respond to the needs of victims of gendered violence for whom English is a second language
- To increase the ability of providers to provide culturally and linguistically relevant education, outreach, and services

The primary anticipated audience of this project will be service providers and policymakers that fund and support programming to address gendered violence. Findings will be provided to service providers, ethnic community leaders, and policymakers and also submitted for publication in a scholarly peer-reviewed journal.

II. Research methods

- **Providers**
  Data from identified providers (S.A.F.E. House, Safe Nest, Shade Tree, and Rape Crisis Center) were reviewed to assess their capacity to provide linguistically and culturally relevant services to Asian and Spanish-speaking clients, and utilization rates
  - o A research team of four students worked to develop a plan for reviewing each agency, and in teams they did site visits. Each provider was very open and willing to collaborate and share data with our team.
- **Communities**
  Surveys and in-person interviews
  - o The project included surveys and in-person interviews with key informants. Focus groups were eliminated due to difficulty with organizing focus groups in Filipino and Spanish-speaking communities

- **IRB**
  All members of the research team completed the CITI certification for OPRS

III. Engagement with the community-based organizations and providers

- Local providers included: S.A.F.E. House, Safe Nest, Shade Tree, and Rape Crisis Center
  - o All four providers were responsive and open to collaborating on this project.
    - ▪ I met with each provider, the Executive Director was present at all except for one meeting (Safe Nest) however she knew of the project and was fully supportive.
      - • The providers were excited about the project and welcomed the availability of data from the community that might increase their ability to serve the Asian and Spanish-speaking communities
- Nevada Council for the Prevention of Domestic Violence (NCPDV)

- The Council invited me to be the "guest speaker" to talk about my work through the Lincy Institute and were in full support of the project.
- Ethnic community-based organizations: Bamboo Bridges, Latin Chamber of Commerce, Luz Coalition, Asian Chamber of Commerce, OCA
  - Contact was made with these organizations, as well as ethnic churches and other community-based organizations to advise them of the project and to solicit support for interviews and focus groups. We received positive responses, however the delay in the IRB approval posed a challenge to maintaining momentum.

IV.   Budget

ITEM	PROJECTED	ACTUAL	DESCRIPTION
Supplies, copying, etc.	$800	$517.98	Copying costs for surveys, supplies for focus groups [to include markers, flip charts, digital recorders (4), paper, pens, snacks, and qualitative software)
Mileage/transportation	$200	0	Reimbursement for gas/mileage for PI and interpreters/translators
Bilingual research assistants (x4)	$8,000	$4,000.00	Bilingual Korean, Mandarin, Cantonese, and/or Spanish
Research assistant	0	0	MSW independent study student (Spanish bilingual)
PI course release/summer salary	$11,000	$7,843.51	One three (3) credit course (calculated utilizing Faculty Effort Buyout formula)
TOTAL	$20,000	7,638.51	

V.   Provider Data

There are various organizations which address gendered violence in Southern Nevada, but the most well-established include: S.A.F.E. House, Safe Nest, Shade Tree, and Rape Crisis Center (RCC). S.A.F.E. House and Safe Nest are the two domestic violence providers that offer a continuum of services from shelter care to batterer intervention to education and outreach. Shade Tree is a homeless shelter for women and children, approximately one-third of their population are domestic violence or human trafficking victims/survivors. The Shade Tree is the largest shelter of its kind in the state and the only 24-hour accessible shelter designed specifically to meet the needs of women and children in Southern Nevada with 364 permanent beds, The Shade Tree provides over 100,000 nights of shelter each year. The Rape Crisis Center, the oldest of these organizations has been providing services for up to 38 years. All of the providers recognize a need to increase accessibility to underrepresented groups in Southern Nevada as reflected in the Nevada Stop Violence Against Women Program (2009-2011) Implementation Plan which identified a funding priority to "Improve culturally specific services for victims, including . . .Asian . . ." and to hire and retain bilingual advocates (p.12).

Each of the agencies provided client data and information about their materials and staff. There was significant variance between providers with regard to the methods and type of data collected (i.e. fiscal

v. calendar year), as well as consistency of complete data. Therefore it is important to be cautious about making comparisons and/or conclusions based on the data.

S.A.F.E. House

- Services

S.A.F.E. (Stop Abuse in the Family Environment) House provides counseling, advocacy, education, crisis intervention, and shelter services for victims of domestic violence.

- Client data

S.A.F.E House provided data from 2005-2010 for counseling services, however the availability and accuracy of data varied. Data reported here is limited to a) gender, b) race/ethnicity of primary victim, and c) age. Data regarding relationship to batterer and marital status are not collected. S.A.F.E. House collects cumulative data, and does not have a breakdown on gender or age by race/ethnicity.

Table 1a: Gender of primary victim- S.A.F.E House

	2005		2006		2007		2008		2009		2010		TOTAL	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%
Male	36	10.8	22	6.0	45	12.0	34	10.9	43	15.8	42	13.9	222	11.3
Female	298	89.2	347	94.0	330	88.0	279	89.1	229	84.2	260	86.1	1,743	88.7
TOTAL	334		369		375		313		272		302		1,965	

S.A.F.E. House's counseling numbers from 2005 to 2010 has been fairly stable, ranging from 272 in 2009 to 375 in 2007. Overall females comprise almost 90% of S.A.F.E. House counseling clients; however there appears to be an increase in males served from 10.8% in 2005, up to 15.8% in 2009.

Table 1b: Race/ethnicity – S.A.F.E House

	2005		2006		2007		2008		2009		2010		TOTAL	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%
Caucasian	184	55.1	231	57.9	233	62.1	160	51.1	110	40.4	142	46.3	1,060	53.0
Black	39	11.7	51	12.8	53	14.1	61	19.5	35	12.9	58	18.6	297	14.9
Hispanic/ Latino	19	5.7	55	13.8	63	16.7	55	17.6	58	21.3	93	30.3	343	17.2
Asian/PI	20	6.0	23	5.8	14	3.7	3	1.0	10	3.7	3	1.0	73	3.7
Native	8	2.4	4	1.0	5	1.3	1	0.3	2	0.7	1	0.3	21	1.1
Mixed/ Biracial/Other	4	1.2	35	8.8	4	1.1	4	1.3	8	2.9	10	3.3	65	3.3
Unknown	0	0	0	0	3	0.8	0	0.0	0	0.0	0	0.0	3	0.2
Unaccounted	60		[30]				29		49		[5]			
TOTAL	334		399		375		313		272		307		2,008	

The "unaccounted" were not recorded by S.A.F.E. House.   It is assumed that the accompanying dependents/family members of the primary victims were not counted since the category is limited to race of "primary victim." Similarly, the highlights and brackets indicate that the number of victims by race/ethnicity total more than the overall reported number as reflected by gender. Although there is a clear inconsistency, the data for 2006 and 2010 were included for continuity purposes.

During the six years of data presented, the majority of the counseling clients were Caucasian, with the exception of 2009 and 2010, there appears to be a notable gradual increase in Hispanic/Latino victims served from 5.7% in 2005 to 30.3% in 2010.

Table 1c: Age –S.A.F.E House

Years	2005 #	2005 %	2006 #	2006 %	2007 #	2007 %	2008 #	2008 %	2009 #	2009 %	2010 #	2010 %	TOTAL #	TOTAL %
<13	27	8.1	26	7.0	30	8.0	34	9.8	47	17.3	59	19.5	223	11.2
13-17	23	6.9	23	6.2	36	9.6	16	4.6	17	6.3	29	9.6	144	7.2
18-29	96	28.7	99	26.8	94	25.1	78	22.5	49	18.0	46	15.2	462	23.1
30-44	148	44.3	153	41.5	139	37.1	132	38.2	113	41.5	115	38.1	800	40.0
45-64	39	11.7	64	17.3	67	17.9	48	13.9	41	15.1	49	16.2	308	15.4
65+	1	0.3	4	1.1	9	2.4	38	11.0	5	1.8	4	1.3	61	3.1
Unaccounted	0		0		0		[29]		0		0			
TOTAL	334		369		375		346		272		302		1,998	

The highlight and bracket for 2008 indicates that the number of victims by age totals more than the overall reported number as reflected by gender.

Data has been consistent over the six years, with clients between the ages of 30 to 44 comprising the largest group of clients in shelter, followed by young adults (18-29). The smallest groups are seniors over 65 and children under 13 years old.

- Agency materials and staff

S.A.F.E House has approximately a 1:3 staff to client ratio. They have staff members who speak English and Spanish, for any other language they use either the language line or an interpreter. S.A.FE. House reported that the majority of their clients are English and Spanish-speaking and that they encounter other languages at such low frequency that they on the Language Line or interpreters.

Most of S.A.F.E. House's materials are either printed in English and Spanish. They have previously printed materials in other languages, but due to costs they now only have materials in English and Spanish. They reported that they have the capability to provide their materials in other languages when it is needed.

<u>Safe Nest</u>

- <u>Services</u>

Safe Nest provides confidential assistance in the form of shelter, food, clothing, counseling, education, as well as other services, to individuals experiencing domestic violence. Its stated commitment is to offering comprehensive services, increasing accessibility, advocating for public policies, implementing preventative measures, educating the public, increasing community involvement, and providing leadership.

- <u>Client data</u>

Safe Nest provided information from 2005-2010 for clients who sought counseling services, but did not provide shelter data. Age and race/ethnicity for primary victims that received counseling services is compiled below, however Safe Nest collects cumulative data and does not have a breakdown of age by race/ethnicity.

Incomplete and missing data:

- o June 2008 – all race and age data missing
- o July 2008 – age data incomplete
- o October 2010 - all race and age data missing

The provided data indicate a dramatic increase, eight-fold, in number of clients served over the six reported years. However, it is difficult to determine the accuracy of data and whether the increase reflects an actual increase or missing data.

Table 2a – Age of Primary Victims - Counseling Services – Safe Nest

Years	2005		2006		2007		*2008		2009		*2010		TOTAL	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%
<13	2	0.3	0	0.0	3	0.4	4	0.4	6	0.7	22	1.7	37	0.7
13-17	39	6.5	51	8.7	45	6.7	64	7.1	54	5.9	144	11.4	397	8.0
18-29	214	35.7	183	31.2	232	34.6	318	35.1	322	35.3	481	38.2	1,750	35.5
30-44	265	44.2	242	41.2	283	42.2	396	43.7	392	43.0	451	35.8	2,029	41.1
45-64	73	12.2	91	15.5	84	12.5	99	10.9	129	14.1	157	12.5	633	12.8
65+	4	0.7	14	2.4	8	1.2	3	0.3	9	1.0	4	0.3	42	0.9
Unknown	3	0.5	6	1.0	16	2.4	23	2.5	0	0.0	0	0.0	48	1.0
TOTAL	600		587		671		907		912		1,259		4,936	

Generally victims between the ages of 30 to 44 sought counseling services at a higher rate. Young adults (18-29) were the next largest group, with only 5-10% difference from the 30 to 44 year olds, except in 2010 when Safe Nest saw more young adult clients (although data was incomplete for 2010). Similar to S.A.F.E. House's shelter data, children under 13 and seniors over 65 were the least likely to seek counseling services.

Table 2b: Race/ethnicity of primary victim – Counseling Services - Safe Nest

	2005		2006		2007		*2008		2009		*2010		TOTAL	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%
Caucasian	235	39.2	206	35.1	209	31.1	302	33.3	311	34.1	429	34.1	1,692	34.3
Black	92	15.4	85	14.5	84	12.5	151	16.6	146	16.0	232	18.4	790	16.0
Hispanic/ Latino	224	37.4	224	38.2	289	43.1	359	39.5	371	40.7	483	38.4	1,950	39.5
Asian/PI	28	4.7	19	3.2	14	2.1	17	1.9	26	2.9	39	3.1	143	2.9
Native	1	0.2	6	1.0	4	0.6	5	0.6	12	1.3	9	0.7	37	0.7
Mixed/ Biracial/ Other	5	0.8	14	2.4	10	1.5	25	2.8	24	2.6	57	4.5	135	2.7
Unknown	14	2.3	33	5.6	61	9.1	49	0.0	22	2.4	10	0.8	189	3.8
TOTAL	599		587		671		908		912		1,259		4,936	

The majority of Safe Nest's counseling clients are Hispanic/Latino. Between 2005 and 2010 the only year that Safe Nest saw more Caucasian clients was in 2005. Generally Hispanic/Latino and Caucasian clients comprise 73.8% of their counseling appointments. Consistently African Americans were the third largest group and Native Americans the smallest group. Overall the numbers of Asian and/or Pacific Islander and mixed/biracial/other separately comprised less than 3% of the total number of counseling clients.

- Agency materials and staff

Similar to S.A.F.E. House, Safe Nest have staff members who speak English and Spanish, however they rely on the language line for other languages.

Most of Safe Nest's materials are available in Spanish, and due to budget constraints they do not print materials in other languages.

The Shade Tree

- Services

The mission of the Shade Tree is "to provide safe shelter to homeless and abused women and children in crisis and to offer life-changing services promoting stability, dignity, and self-reliance." The current facility houses 364 beds.

In addition to the Transitional Housing (TH) and Emergency Shelter (ES) programs, a day shelter provides escape from the harsh heat of the Las Vegas summers. Other programs that help to break the cycles of abuse and homelessness are: the Services for Victims of Violence Program; a job development skills program; an activity and educational program designed for children; and Shade Tree is a designated "SAFE Place" for all community youth.

The Services for Victims of Violence Program helps women develop a safety plan and provides transportation and assistance in completing/obtaining temporary protective orders (TPO) through

law enforcement channels. Victims of violence often state that their reason for returning to their abuser is because of financial dependency. Therefore, Shade Tree provides an in-house job development skills program that helps women gain the ability to be independent. Collaboration with the Urban League provides a GED preparation class.

- Client data

The Shade Tree provided utilization/statistical data for four fiscal years (July – June). The four periods that were analyzed are as follows:

Period I - July 1, 2006 to June 30, 2007
Period II – July 1, 2007 to June 30, 2008
Period III – July 1, 2008 to June 30, 2009
Period IV – July 1, 2009 to June 30, 2010

The data reported is limited to the Emergency Shelter (ES) program (includes children) and reflects all clients provided shelter regardless of their status; i.e. homeless or victims of domestic violence. There was no reliable method to differentiate the domestic violence (DV) victims from the general homeless population with the data provided. The Shade Tree collects cumulative data and does not have a breakdown of gender or age by race/ethnicity.

The number of clients receiving shelter from Period I to Period IV appeared to be fairly consistent with a difference of less than 500 from the highest census in Period II to lowest in Period III. The number of clients in shelter is always determined by the number of beds available, therefore variability is limited.

Table 3a: Gender – Shade Tree

	2006/7		2007/8		2008/9		2009/10		TOTAL	
	#	%	#	%	#	%	#	%	#	%
Male	470	18.2	429	15.2	241	10.4	213	9.0	1,353	13.4
Female	2,114	81.8	2,392	84.8	2,081	89.6	2,144	89.6	8,731	86.6
TOTAL	2,584		2,821		2,322		2,357		10,084	

The majority of clients served by Shade Tree are female, which reflects its policy of referring males to Catholic Charities. The only males admitted are children (under 18) of women seeking shelter.

Table 3b: Race/Ethnicity – Shade Tree

	2006/7		2007/8		2008/9		2009/10		TOTAL	
	#	%	#	%	#	%	#	%	#	%
Caucasian/white	1,765	68.3	1,155	40.9	975	42.0	970	41.2	4,865	48.2
Black/AfAm	578	22.4	994	35.2	795	34.2	811	34.4	3,178	31.5
AfAm & white	34	1.3	56	2.0	53	2.3	59	2.5	202	2.0
Hispanic	112	4.3	269	9.5	266	11.5	276	11.7	923	9.2
Asian	32	1.2	39	1.4	32	1.4	29	1.2	132	1.3
Asian &white	4	0.2	14	0.5	8	0.3	18	0.8	44	0.4

	2006/7		2007/8		2008/9		2009/10		TOTAL	
NH/PI	9	0.3	32	1.1	30	1.3	24	1.0	95	0.9
AI/AN	31	1.2	33	1.2	16	0.7	27	1.1	107	1.1
AI/AN & black	8	0.3	69	2.4	25	1.1	20	0.8	122	1.2
AI/AN & white	3	0.1	26	0.9	10	0.4	14	0.6	53	0.5
Other/ multiracial	8	0.3	122	4.3	79	3.4	94	4.0	303	3.0
No data	0	0.0	12	0.4	32	1.4	15	0.6	59	0.6
TOTAL	2,584		2,821		2,321		2,357		10,083	

Abbreviations were used to fit data into table:
Black/AfAm – Black/African American
NH/PI – Native Hawai'ian/Pacific Islander
AI/AN – American Indian/Alaskan Native

The designations used by Shade Tree for race/ethnicity more closely reflect federal categorizations, with Hispanic not included as a "race" and biracial categories separated. Caucasian comprise the largest group provided shelter by Shade Tree, although the numbers have notably decreased from 68.3% in Period I to only 41.2% in Period IV, while the number of Hispanics have increased from 4.3% to 11.7%. The second largest group is African American, while Asian and Asian/White comprise less than 2% with no significant growth over the four years. Native groups containing American Indians and Hawai'ians in total comprise less than 4%.

Table 3c: Age – Shade Tree

	2006/7		2007/8		2008/9		2009/10		TOTAL	
	#	%	#	%	#	%	#	%	#	%
<1	0	0.0	1	0.0	1	0.0	6	0.3	8	0.1
1-4	68	2.6	204	7.2	192	8.3	199	8.4	663	6.6
5-9	259	10.0	341	12.1	173	7.5	183	7.8	956	9.5
10-13	174	6.7	183	6.5	120	5.2	88	3.7	565	5.6
14-17	143	5.5	161	5.7	84	3.6	64	2.7	452	4.5
Add'l child	68	2.6	39	1.4	15	0.6	1	2.7	123	1.2
18-24	119	4.6	151	5.4	208	9.0	251	0.0	729	7.2
25-34	372	14.4	461	16.3	417	18.0	435	10.6	1,685	16.7
35-44	412	15.9	505	17.9	401	17.3	413	18.5	1,731	17.2
45-54	391	15.1	450	16.0	427	18.4	419	17.5	1,687	16.7
55-64	201	7.8	239	8.5	212	9.1	222	17.8	874	8.7
65-74	57	2.2	56	2.0	49	2.1	51	9.4	213	2.1
75-84	12	0.5	7	0.2	7	0.3	9	2.2	35	0.3
85+	1	0.0	3	0.1	4	0.2	1	0.4	9	0.1
Add'l adult	146	5.7	0	0.0	0	0.0	0	0.0	146	1.4
Unknown	117	4.5	5	0.2	3	0.1	3	0.0	128	1.3
Missing	[44]		[15]		[9]		[12]	0.1	80	0.8
TOTAL	2,584		2,821		2,322		2,357		10,084	

Each of the reported years had data missing as indicated in brackets. No explanation was provided as to why the data was missing. Also, Shade Tree has categories of "additional child" and

"additional adult." It appears that the additional adult may be someone other than the primary victim who accompanied her to shelter, however it is less clear why ages of "additional" children were not recorded.

The majority of Shade Tree's shelter clients (50.6%) are between 25 and 54 years old and approximately 25% are children accompanying a mother.

- Agency materials and staff

There are over 50 staff at the Shade Tree, some have language proficiency other than English. They are able to provide assistance in the following languages: English, Spanish, Tagalog, Persian, Hindi, and Laotian. Whenever there is a need for translation beyond the staff's capacity, they often seek the assistance of volunteers or in-house clients. In the event that there are no physical resources, the staff will utilize the internet-based translator Babelfish, and as a last resort, police translation services.

The lack of printed brochures, pamphlets, and literature for clients is a staff-identified as a shortcoming.

The Rape Crisis Center

- Services

The RCC serves all of Clark County, Nevada providing crisis intervention, primary prevention/education, advocacy, and support to those affected by sexual violence. Services provided free to victims include hospital accompaniment, court accompaniment, medical and legal advocacy, counseling, assistance in filing for Victims of Crime Compensation, and referrals to community services. In addition to staff, RCC trains a core base of volunteers to man the hotline and as advocates.

- Client data

The data provided by RCC was limited to hotline calls between 2007 and 2009. Data from 2010 and 2011 were incomplete and therefore not included, perhaps due in part to changes in administration. The Rape Crisis Center collects cumulative data and does not have a breakdown of gender, age, or marital status by race/ethnicity. The number of callers from 2007 to 2009 gradually decreased from 751 to 718.

Table 4a: Race/ethnicity of callers

	2007		2008		2009		TOTAL	
	#	%	#	%	#	%	#	%
Caucasian	438	58.3	495	55.2	369	51.4	1,302	56.8
African American	123	16.4	126	17.2	128	17.8	377	16.4
Hispanic/Latino	136	18.2	118	16.1	153	21.3	407	17.7
Asian	24	3.2	33	4.5	29	4.0	86	3.8
Bi-racial	17	2.3	35	4.8	33	4.6	85	3.7

	2007		2008		2009		TOTAL	
Native/unknown/other	12	1.6	12	1.6	12	1.7	36	1.6
TOTAL	751		733		718		2,293	

The majority of callers to the hotline from 2007 to 2009 were Caucasian (56.8%), followed by
Hispanic/Latino (17.7%) and African American (16.4%). Overall the numbers of Asian and Bi-
racial separately comprised less than 5% of the total number of hotline calls. The smallest number
of callers fell in the Native/unknown/other group.

Table 4b: Age of callers

	2007		2008		2009		TOTAL	
Years	**#**	**%**	**#**	**%**	**#**	**%**	**#**	**%**
<10	4	.5	14	1.9	9	1.3	27	1.2
10-12	7	.9	14	1.9	12	1.7	33	1.5
13-15	82	11.0	77	10.7	97	13.6	256	11.7
16-19	144	19.3	128	17.7	127	17.8	399	18.3
20-25	210	28.2	170	23.5	187	26.2	567	26.0
26-30	97	13.0	108	14.9	106	14.8	311	14.3
31-40	109	14.6	126	17.4	85	11.9	320	14.7
41-50	62	8.3	58	8.0	56	7.8	176	8.1
51-60	16	2.1	22	3.0	28	3.9	66	3.0
61-70	2	0.3	2	0.3	3	0.4	7	0.3
71+	7	0.9	0	0.0	4	0.6	11	0.5
Unknown	4	0.5	4	0.6	0	0.0	8	0.4
TOTAL	745		723		714		2,181	

Approximately three out of four hotline calls were made by victims between 16 and 40 (73.3%),
with the largest segment (26%) young adults between 20 to 25 years old. A notable 11.7% of
callers were young teens (13 to 15 years).

Table 4c: Gender

	2007		2008		2009		TOTAL	
	#	**%**	**#**	**%**	**#**	**%**	**#**	**%**
Male	25	3.3	25	3.4	21	2.9	71	3.2
Female	726	96.7	708	96.6	697	97.0	2,131	96.8
TOTAL	751		733		718		2,202	

The number of callers to the hotline based on gender was consistent from 2007 to 2009 with more
than 96% female.

Table 4d: Marital Status

	2007		2008		2009		TOTAL	
	#	**%**	**#**	**%**	**#**	**%**	**#**	**%**
Single	555	73.9	556	75.9	537	75.2	1,648	75.0
Married	94	12.5	78	10.6	60	8.4	232	10.6
Separated	35	4.7	39	5.3	36	5.0	110	5.0

Divorced	47	6.3	47	6.4	57	8.0	151	6.9
Widowed	3	0.4	7	1.0	5	0.7	15	0.7
Unknown/ not reported	17	2.3	6	0.8	19	2.7	42	1.9
TOTAL	751		733		714		2,198	

RCC was the only agency who provided data on marital status. Three-quarters of the callers were single, followed by less than 11% married, approximately 12% separated or divorced. The high rate of single callers may reflect a public belief that rape occurs only outside of marriage, and conversely rape is usually not reported in marriage.

- Agency materials and staff

RCC employs seven staff members from a variety of educational and ethnic backgrounds. Languages that are available based on staff and volunteers are Spanish, Korean, Japanese, Chinese (unknown dialect), Swahili, and Hindi. They utilize the Language Line when there is a language barrier. Many of RCC's materials and handouts are available in both English and Spanish, but they do not have the funds to translate materials into additional languages.

VI. Community-based Data

The following data has been collected from the local Spanish-speaking, Korean, Chinese, and Filipino communities:

- Interviews
    - Chinese 4 – transcribed and translated
    - Korean 6 - transcribed and translated
    - Filipino 3 – transcribed (no translation needed – interviews were conducted in English)
    - Spanish-speaking 5 - transcribed and translated
- Questionnaires - a total of 346 participants completed the questionnaires
    - Chinese – 86
    - Korean - 105
    - Filipino - 78
    - Spanish-speaking – 77

The questionnaire consisted of three (3) sections: Demographic (8), Likert-scaled questions (24), and open-ended multi-part question. Questionnaires were translated (forward and backward) into Spanish, Chinese, and Korean. Participants were provided with the option of English or a translated version of the questionnaire. The majority of Filipinos are able to read/write English therefore there was no Tagalog translation. Administrators of the questionnaires had English and second-language proficiency as relevant to the participants.

The Likert-scaled questions sought to capture the attitudes and/or perceptions regarding gendered violence. The instrument was divided into four areas: 1) physical (a-l), 2) threats/intimidation (m-p), c) emotional abuse (q-t), and d) control (u-z).

Data is analyzed to understand what the participants consider to be acts or behaviors that may contribute to or constitute violence.

- Focus groups – Only two focus groups were completed (Chinese and Korean). These data were not included in the Final Report due to the lack of comparable data from the other groups (Filipino and Spanish-speaking).

VII.   <u>Demographic Information</u>

The findings of this research cannot be construed as representative of the participating communities due to the snowball sampling and limited number of participants. Additionally, further research that more discretely examines attitudes and perceptions in the various Spanish-speaking communities is important. Due to time and resource constraints it was not possible to include participation from individual Hispanic sub-groups.

There were a total of 346 respondents. The Filipino sample was the least diverse with respect to age with almost two-thirds of respondents under 30 years of age compared to 28.5% for Korean, 32.6% for Chinese, and 42.9% for Hispanic. The marital statuses of the various groups were congruent with the age; i.e. 61% of the Filipino respondents were single and only 11%. The Korean and Chinese samples were well-balanced with respect to gender, with a few more women than men. The Hispanic and Filipino respondents were majority female (75.3 and 57.5% respectively).

The Korean and Chinese respondents identified themselves as one race, while some of the Filipino and Hispanics identified as being biracial or "mestizo" (23.3% and 5.2%). Among the Hispanic respondents 66.2% identified as Mexican, 6.5% as El Salvadorian, 3.9% as Puerto Rican, and the remaining as Spanish, Guatemalan, Dominican, Cuban, Columbian, and other.   Most of the Filipino and Hispanic respondents were U.S. citizens (78.1% and 71.4% respectively). Korean and Filipinos did not report being undocumented, however 57% of the Korean respondents chose either not to respond to the question about immigration status, or simply did not answer. Almost twice as many Chinese than Hispanics identified as being undocumented (26.7% and 14.3% respectively), and three times as many either preferred not to answer or simply did not respond (15% and 3.9% respectively). Chinese also reported the shortest length of time in the U.S. with one in four having been in the U.S. for less than three years, compared to the Hispanic respondents who have all been in the U.S. for at least three years, and Filipinos (94.6%) and Koreans (86.5%) that have been in the U.S. for more than three years.

Income levels were diverse across groups, however almost two-thirds (67.4%) of the Chinese respondents earned less than $50,000 compared to Hispanic (57%) and Korean (50.4%). Despite the relative youth and moderate education level (49.3% reported highest level of education as elementary, high school, or GED) of the Filipino respondents, only 36.9% indicated that they earned less than $50,000. However it is unclear whether they were reporting their parents' income as their own. It should be noted that due to a problem with the translation of the questionnaire from English to Chinese, the education level question was absent from the final Chinese questionnaire.

Table 5: Demographic Information

	Filipino		Korean		Chinese		Hispanic/Latino	
# of Respondents	78		105		86		77	
	#	%	#	%	#	%	#	%
Age of respondents								
18-20	15	19.2	5	4.7	0	0	2	2.6
21-29	45	57.7	25	23.8	28	32.6	31	40.3
30-39	5	6.4	21	20	18	20.9	23	29.9
40-49	5	6.4	21	20	27	31.4	13	16.9
50-59	1	1.3	20	19	7	8.1	6	7.8
60-69	0	0	7	6.6	4	4.6	2	2.6
70+	0	0	5	4.7	1	1.2	0	0
No answer	7	9.0	1	.9	1	1.2	0	0
Gender								
Male	31	39.7	51	48.6	37	43	17	22.1
Female	45	57.7	52	49.5	48	55.8	58	75.3
Did not answer	2	2.6	2	1.9	1	1.2	2	2.6
Ethnicity								
	Filipino	61 (78.2)	Korean	104 (99.1)	Chinese	86 (100)	Mexican	51 (66.2%)
	Biracial/ part Filipino	17 (21.8)	Biracial/ part Korean	0	Biracial/ part Chinese	0	Puerto Rican	3 (3.9%)
			Did not answer	1 (.9)			Cuban	1 (1.3%)
							Spanish	2 (2.6%)
							El Salvadorian	5 (6.5%)
							Guatemalan	2 (2.6%)
							Dominican	2 (2.6%)
							Colombian	1 (1.3%)
							Other Hisp/Latino	1 (1.3%)
							Mestizo	4 (5.2%)
Marital Status								
Single	50	64.1	38	36.2	21	24.4	26	33.7
In a relationship/ cohabitating	6	7.7	2	1.9	8	9.2	7	9.1
In a relationship/ not cohabitating	12	15.4	2	1.9	42	48.9	5	6.5
Married	8	10.2	55	52.4	9	10.5	29	37.6
Divorced	2	2.6	5	4.7	2	2.3	6	7.8
Widowed	0	0	0	0	1	1.2	2	2.6
Other	0	0	0	0	0	0	2	2.6
Did not answer	0	0	3	2.8	3	3.5	0	0
Immigration status								

Undocumented (no legal status)	0	0	0	0	23	26.7	11	14.3
Legal Resident	7	9.0	25	23.8	30	34.9	6	7.8
Legal Permanent Resident /Green Card holder	7	9.0	4	3.8	14	16.3	2	2.6
US Citizen	62	79.5	16	15.2	6	6.9	55	71.4
Prefer not to respond	1	1.3	55	52.4	7	8.1	2	2.6
Did not answer	1	1.3	5	4.7	6	6.9	1	1.3
Level of Household Income								
0-$9,999	11	14.1	14	13.3	13	15.1	9	11.7
$10,000-$29,999	10	12.8	12	11.4	18	20.9	19	24.6
$30,000-$49,999	7	9.0	27	25.7	27	31.4	17	22
$50,000-$69,000	15	19.2	21	20	14	16.3	11	14.3
$70,000-$89,999	12	15.4	11	10.4	2	2.3	10	13
$90,000-110,999	7	9.0	6	5.7	0	0	4	5.2
$111,000+	4	5.1	14	13.3	2	2.3	5	6.5
Did not answer	12	15.4	0	0	10	11.6	2	2.6
Highest Level of Education								
Primary/Elem	11	14.1	0	0			1	1.3
Secondary/HS	22	28.2	20	19			14	18.2
GED	7	9.0	4	3.8			2	2.6
VoTech/Trade School	2	2.6	3	2.8			4	5.2
Associates Degree	10	12.8	13	12.3			16	20.8
Bachelor's Degree	21	26.9	49	46.6			23	29.9
Graduate Degree	2	2.6	9	8.5			10	13
Post-Graduate	0	0	7	6.6			5	6.5
Did not answer	3	3.8	0	0			2	2.6
Length of time in US								
Less than3 yrs	3	3.8	14	13.3	22	25.6	0	0
3-5 yrs	1	1.3	8	7.6	15	17.4	4	5.2
5-10 yrs	12	15.4	18	17.1	23	26.7	7	9.1
10-15 yrs	7	9.0	11	10.4	9	10.5	7	9.1
15-20 yrs	20	25.6	10	9.5	4	4.6	8	10.4
More than 20 yrs	35	44.9	44	41.9	8	9.3	50	64.9
Did not answer	0	0	0	0	5	5.8	1	1.3

VIII. Domestic Violence

The participants were asked to respond to 25 questions on a 5-point scale the degree to which they disagree/agree with statements. There was also one question that seeks to capture respondents' personal awareness of DV and the source of that awareness.

The survey has four subscales:

- Physical – 11 questions
- Threats/intimidation – 4 questions
- Emotional/psychological – 4 questions
- Control – 6 questions

Table 6: Questions regarding DV

	Filipino		Korean		Chinese		Hispanic/Latino	
# of Respondents	78		105		86		77	
The following behavior constitutes or contribute to DV								
	#	%	#	%	#	%	#	%
PHYSICAL								
Slapping								
Strongly disagree	4	5.1	3	2.8	1	1.2	8	10.4
Somewhat disagree	8	10.2	5	4.7	4	4.6	0	0
Unsure	6	7.7	3	2.8	4	4.6	1	1.3
Somewhat agree	26	33.3	16	15.2	45	52.3	6	7.8
Strongly Agree	34	43.6	78	74.2	32	37.2	62	80.5
Did not answer	0	0	0	0	0	0	0	0
Throwing things that can cause physical harm								
Strongly disagree	8	10.2	3	2.8	0	0	8	10.4
Somewhat disagree	0	0	0	0	4	4.6	0	0
Unsure	2	2.6	2	1.9	11	12.8	0	0
Somewhat agree	17	21.8	20	19	43	50	7	9.1
Strongly Agree	51	65.4	80	76.1	28	32.6	62	80.5
Pushing or shoving								
Strongly disagree	6	7.7	3	2.8	0	0	9	11.7
Somewhat disagree	2	2.6	5	4.7	3	3.5	0	0
Unsure	7	9.0	3	2.8	13	15.1	0	0
Somewhat agree	25	32.1	38	36.2	38	44.2	4	5.2
Strongly Agree	38	48.7	56	53.3	31	36	64	83.1
Did not answer	0	0	0	0	1	1.2	0	0
Hitting w/fist or another object that could cause physical harm								
Strongly disagree	7	9.0	2	1.9	0	0	8	10.4
Somewhat disagree	1	1.3	1	0.9	0	0	0	0
Unsure	1	1.3	2	1.9	1	1.2	0	0
Somewhat agree	8	10.2	5	4.7	36	41.9	0	0
Strongly Agree	61	78.2	95	90.4	49	56.9	69	89.6
Kicking								
Strongly disagree	7	9.0	2	1.9	0	0	8	10.4
Somewhat disagree	1	1.3	1	0.9	0	0	0	0
Unsure	5	6.4	1	0.9	2	2.3	0	0
Somewhat agree	9	11.5	10	9.5	33	38.4	3	3.9

Strongly Agree	56	71.8	91	86.6	51	59.3	66	85.7
Dragging								
Strongly disagree	8	10.2	3	2.8	0	0	8	10.4
Somewhat disagree	3	3.8	5	4.7	5	5.8	0	0
Unsure	1	1.3	4	3.8	13	15.1	0	0
Somewhat agree	10	12.8	27	25.7	36	41.9	3	3.9
Strongly Agree	56	71.8	65	61.9	31	36	66	85.7
Did not answer	0	0	1	0.9	1	1.2	0	0
Beating								
Strongly disagree	8	10.2	3	2.8	0	0	8	10.4
Somewhat disagree	0	0	0	0	0	0	0	0
Unsure	1	1.3	1	0.9	2	2.3	0	0
Somewhat agree	3	3.8	8	7.6	34	39.5	0	0
Strongly Agree	66	84.6	93	88.6	50	58.1	69	89.6
Burning								
Strongly disagree	10	12.8	4	3.8	0	0	8	10.4
Somewhat disagree	0	0	1	.9	0	0	0	0
Unsure	3	3.8	1	.9	2	2.3	0	0
Somewhat agree	3	3.8	3	2.8	34	39.5	0	0
Strongly Agree	62	79.5	96	91.4	50	58.1	68	88.3
Did not answer	0	0	0	0	0	0	1	1.3
Physically forced to have sexual intercourse								
Strongly disagree	9	11.5	5	4.7	0	0	8	10.4
Somewhat disagree	0	0	0	0	0	0	0	0
Unsure	0	0	2	1.9	2	2.3	0	0
Somewhat agree	8	10.2	3	2.8	44	51.2	0	0
Strongly Agree	61	78.2	94	89.5	40	46.5	69	89.6
Did not answer	0	0	1	.9	0	0	0	0
Woman is slapped or beaten during pregnancy								
Strongly disagree	9	11.5	5	4.7	0	0	8	10.4
Somewhat disagree	0	0	1	0.9	0	0	0	0
Unsure	1	1.3	4	3.8	2	2.3	0	0
Somewhat agree	2	2.6	10	9.5	43	50	0	0
Strongly Agree	66	84.6	84	80	41	47.7	69	89.6
Did not answer	0	0	1	0.9	0	0	0	0
Woman is punched or kicked in the abdomen while pregnant								
Strongly disagree	9	11.5	3	2.8	1	1.2	8	10.4
Somewhat disagree	0	0	1	0.9	0	0	0	0
Unsure	0	0	0	0	2	2.3	0	0
Somewhat agree	3	3.8	3	2.8	41	47.7	0	0
Strongly Agree	66	84.6	96	91.4	42	48.8	69	89.6
Did not answer	0	0	2	1.9	0	0	0	0
THREATS OR INTIMIDATION								
Threats to use or actually use a gun, knife, or other weapon								
Strongly disagree	9	11.5	4	3.8	0	0	8	10.4
Somewhat disagree	1	1.3	0	0	0	0	0	0

Unsure	1	1.3	1	0.9	3	3.5	2	2.6
Somewhat agree	5	6.4	1	0.9	38	44.2	1	1.3
Strongly Agree	62	79.5	98	93.3	45	52.3	66	85.7
Did not answer	0	0	1	.9	0	0	0	0
Had sexual intercourse out of fear of what partner might do								
Strongly disagree	9	11.5	3	2.8	0	0	8	10.4
Somewhat disagree	0	0	0	0	3	3.5	0	0
Unsure	5	6.4	1	0.9	18	20.9	2	2.6
Somewhat agree	12	15.4	6	5.7	35	40.7	4	5.2
Strongly Agree	51	65.4	95	90.4	30	34.9	63	81.8
Did not answer	1	1.3	3	2.8	0	0	0	0
Partner tries to scare or intimidate on purpose								
Strongly disagree	8	10.2	4	3.8	0	0	8	10.4
Somewhat disagree	5	6.4	2	1.9	3	3.5	2	2.6
Unsure	3	3.8	4	3.8	14	16.3	1	1.3
Somewhat agree	12	15.4	10	9.5	42	48.8	5	6.5
Strongly Agree	49	62.8	85	80.9	27	31.4	61	79.2
Did not answer	1	1.3	0	0	0	0	0	0
Threatens to hurt someone partner cares about								
Strongly disagree	11	14.1	3	2.8	0	0	8	10.4
Somewhat disagree	1	1.3	1	0.9	4	4.6	0	0
Unsure	4	5.1	2	1.9	8	9.3	2	2.6
Somewhat agree	18	23.1	16	15.2	45	52.3	2	2.6
Strongly Agree	44	56.4	82	78	29	33.7	65	84.4
Did not answer	0	0	1	.9	0	0	0	0
EMOTIONAL/PSYCHOLOGICAL								
Forced to do something sexual that victim found degrading or humiliating								
Strongly disagree	11	14.1	2	1.9	0	0	8	10.4
Somewhat disagree	0	0	3	2.8	1	1.2	0	0
Unsure	3	3.8	4	3.8	18	20.9	2	2.6
Somewhat agree	9	11.5	17	16.1	42	48.8	2	2.6
Strongly Agree	55	70.5	79	75.2	25	29.1	65	84.4
Insulted or made to feel bad about oneself								
Strongly disagree	12	15.4	2	1.9	0	0	9	11.7
Somewhat disagree	3	3.8	4	3.8	18	20.9	1	1.3
Unsure	5	6.4	2	1.9	29	33.7	4	5.2
Somewhat agree	23	29.5	12	11.4	25	29.1	8	10.4
Strongly Agree	35	44.9	85	80.9	14	16.3	55	71.4
Belittled or humiliated in front of other people								
Strongly disagree	10	12.8	3	2.8	0	0	9	11.7
Somewhat disagree	5	6.4	4	3.8	13	15.1	1	1.3
Unsure	3	3.8	1	0.9	25	29.1	1	1.3
Somewhat agree	23	29.5	31	29.5	29	33.7	7	9.1
Strongly Agree	37	47.4	66	62.8	19	22.1	59	76.6
Ignores their partner and treats indifferently								
Strongly disagree	13	16.6	3	2.8	0	0	10	13

Somewhat disagree	7	9.0	2	1.9	11	12.8	1	1.3
Unsure	8	10.2	5	4.7	39	45.3	8	10.4
Somewhat agree	25	32.1	28	26.6	19	22.1	14	18.2
Strongly Agree	25	32.1	67	63.8	17	19.8	44	57.1
CONTROL								
Tries to keep their partner from seeing friends								
Strongly disagree	12	15.4	2	1.9	1	1.2	10	13
Somewhat disagree	3	3.8	5	4.7	19	22.1	1	1.3
Unsure	9	11.5	11	10.4	31	36	1	1.3
Somewhat agree	18	23.1	38	36.2	21	24.4	14	18.2
Strongly Agree	35	44.9	49	46.6	14	16.3	51	66.2
Did not answer	1	1.3	0	0	0	0	0	0
Tries to restrict contact w/family of birth								
Strongly disagree	13	16.6	2	1.9	0	0	9	11.7
Somewhat disagree	5	6.4	7	6.6	10	11.6	0	0
Unsure	4	5.1	14	13.3	34	39.5	1	1.3
Somewhat agree	12	15.4	39	37.1	27	31.4	12	15.6
Strongly Agree	44	56.4	43	40.9	15	17.4	55	71.4
Insists on knowing where their partner is at all times								
Strongly disagree	15	19.2	0	0	1	1.2	9	11.7
Somewhat disagree	3	3.8	7	6.6	15	17.4	4	5.2
Unsure	11	14.1	13	12.3	38	44.2	2	2.6
Somewhat agree	19	24.4	25	23.8	14	16.3	14	18.2
Strongly Agree	26	33.3	60	57.1	17	19.8	48	62.3
Did not answer	4	5.1	0	0	1	1.2	0	0
Gets angry if their partner speaks w/someone of the opposite sex								
Strongly disagree	18	23.1	0	0	0	0	9	11.7
Somewhat disagree	4	5.1	6	5.7	7	8.1	2	2.6
Unsure	3	3.8	14	13.3	21	24.4	5	6.5
Somewhat agree	28	35.9	31	29.5	35	40.7	10	13
Strongly Agree	24	30.8	54	51.4	23	26.7	51	66.2
Did not answer	1	1.3	0	0	0	0	0	0
Often suspicious that their partner is unfaithful								
Strongly disagree	16	20.5	2	1.9	0	0	11	14.3
Somewhat disagree	5	6.4	10	9.5	2	2.3	0	0
Unsure	8	10.2	18	17.1	1	1.2	8	10.4
Somewhat agree	27	34.6	29	27.6	26	30.2	11	14.3
Strongly Agree	27	26.9	46	43.8	57	66.3	47	61
Did not answer	1	1.3	0	0	0	0	0	0
Expects their partner to ask permission before seeking healthcare								
Strongly disagree	13	16.6	3	2.8	1	1.2	11	14.3
Somewhat disagree	3	3.8	10	9.5	0	0	0	0
Unsure	12	15.4	15	14.2	3	3.5	4	5.2
Somewhat agree	15	19.2	30	28.5	27	31.4	10	13
Strongly Agree	34	43.6	47	44.7	55	63.9	52	67.5
Did not answer	1	1.3	0	0	0	0	0	0

PREVALENCE							
Do you think DV occurs in Asian/Hispanic communities							
Yes	76	97.4	97	92.3	37	43.1	74	96.1
No	0	0	6	5.7	12	13.9	1	1.3
Unsure	0	0	0	0	34	39.5	1	1.3
Did not answer	2	2.6	2	1.9	3	3.5	1	1.3
If yes, how do you know it occurs? (Choose all that apply)							
Personal experience	14	17.9	8	7.6	7	8.1	17	22
Experience of family	15	19.2	8	7.6	3	3.5	31	40.3
Experience of friends	18	23.1	25	23.8	5	5.8	34	44.1
Third-party information	19	24.4	33	31.4	2	2.3	23	29.9
Education	21	26.9	0	0	8	9.3	44	57.1
Media	30	38.5	45	42.8	3	3.5	39	50.6
Other	5	6.4	8	7.6	19	22.1	5	6.5

There was a clear variance in response to the question about prevalence with over 90% of the Filipino, Korean, and Hispanic respondents indicating their belief that DV occurs in their communities, compared to less than half of the Chinese participants. This finding may have some relationship to the more ambiguous responses by Chinese participants to questions about behaviors/attitudes that contribute to or constitute domestic violence.

Chart 1 – Prevalence of DV
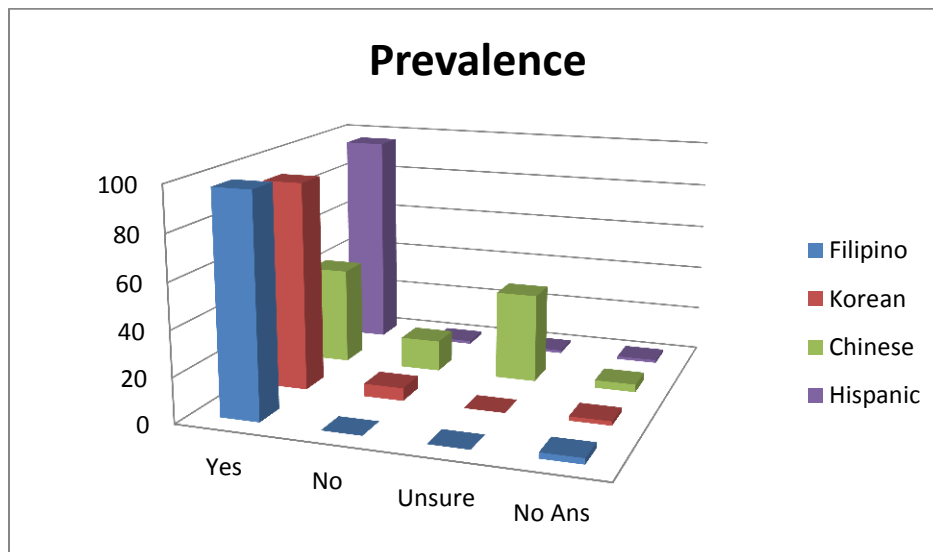
The participants were instructed to identify all sources of information that applied (i.e. personal experience, experience of family, etc).

Chart 2a – Sources of Information by group **Chart 2b – Sources of Information - All**
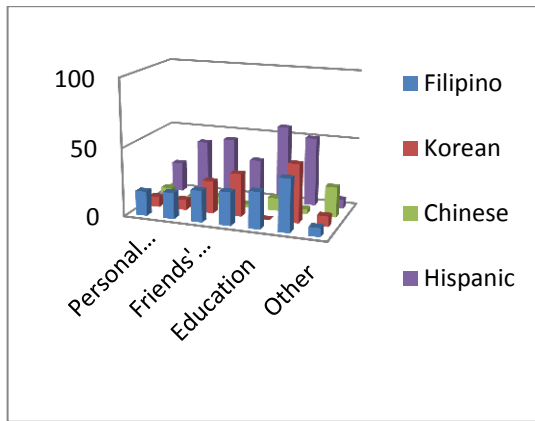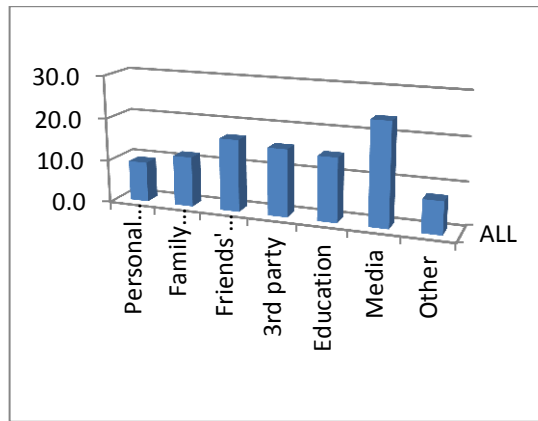
All four groups cited media as their primary source of information (23.9%), followed by friends' experiences (16.8), third-party (15.7%), education (14.9), family experience (11.7%), personal experience (9.4%), and other (7.6%). However, the Hispanic group reported more data points with the majority receiving information from media (23.9%) and education (44%), but also approximately one-third were informed from family and friends' experiences. The Korean and Chinese respondents received the least amount of information through education (0% and 8% respectively), which may reflect the limited information about DV that is translated into languages other than Spanish. Hispanics reported the most knowledge of DV through "direct" information; i.e. personal (17%), family (31%), and friends (34%), followed by Filipino, Korean, and Chinese.

The data was further analyzed to understand participants' cumulative responses with regard to the four subscales of physical, threats/intimation, emotional/psychological, and control by group.

The pie chart legend has responses color-coded and numbered 1-5 with 6 (orange) representing N/A or no response:

■ 1		Strongly disagree
■ 2		Somewhat disagree
■ 3		Unsure
■ 4		Somewhat agree
■ 5		Strong agree
■ 6		

NOTE: The numbers in the charts reflect average reported ratings.

Filipino community

- Questionnaires

There appears to be a distinct pattern of decreasing agreement regarding whether certain behaviors/attitudes contributes to or constitutes abuse the less concrete or measurable; i.e. 86% somewhat agree/strong agree that physical contact contributes to or constitutes abuse compared to threats at 81%, emotional abuse at 74%, and control at 64%.

Table 7 – Subscales - Filipino

	Physical	Threats	Emotional abuse	Control
	Reported in %			
Strongly disagree	10.4	11.9	14.7	18.6
Somewhat disagree	1.0	2.3	4.8	4.9
Unsure	2.7	4.2	6.1	10.0
Somewhat agree	10.1	15.1	25.6	25.4
Strongly Agree	75.8	66.0	48.7	39.4
No response	0.0	0.6	0.0	1.7

Chart 3 – Subscales - Filipino
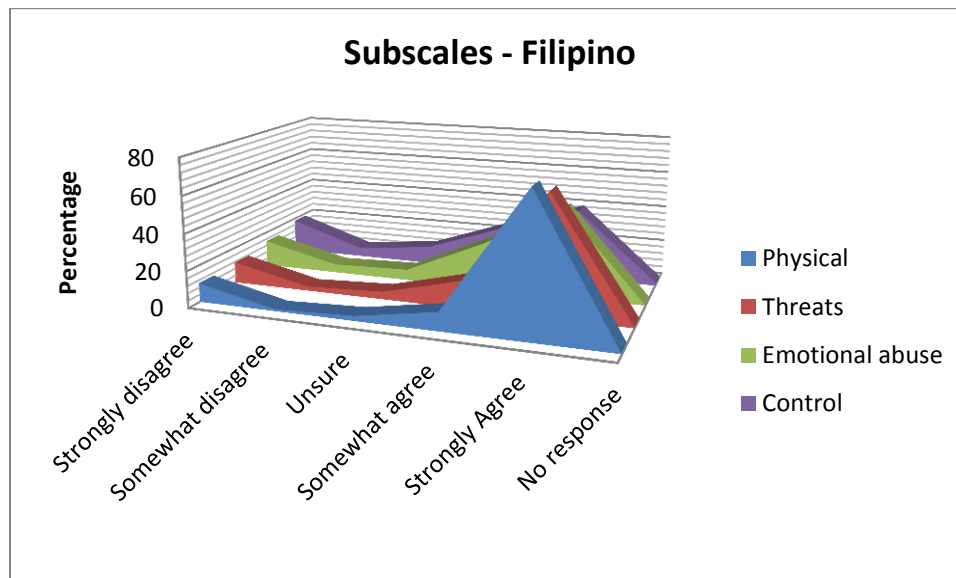
<u>Korean community</u>

- Questionnaires

The overall responses to the categories that might indicate or constitute to DV or intimate partner violence (IPV) appear to demonstrate that threats and emotional abuse are more problematic than physical abuse or control. The percentage of respondents that either somewhat agree/strongly agree is 78% for both physical abuse and control, and are lower than threats (94%) and emotional abuse (92%).

Table 8 – Subscales - Korean

	Physical	Threats	Emotional abuse	Control
	Reported in %			
Strongly disagree	3.1	3.3	2.4	1.4
Somewhat disagree	1.7	0.7	3.1	7.1
Unsure	2.0	1.9	2.9	13.5
Somewhat agree	12.4	7.9	21.0	30.5
Strongly Agree	80.3	85.7	70.7	47.5
No response	0.4	0.5	0.0	0.0

Chart 4 – Subscales - Korean
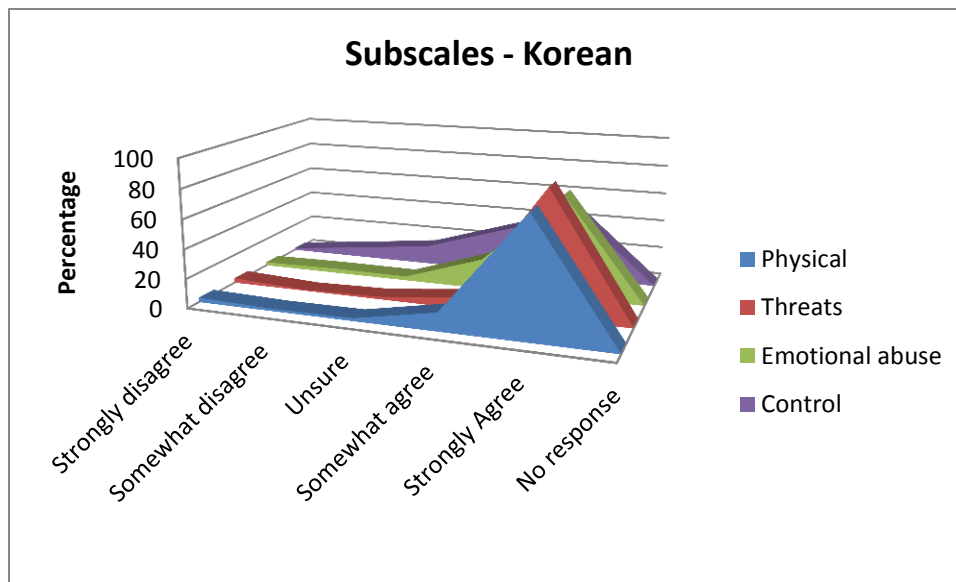
Chinese community

- Questionnaires

The Chinese participants' responses appeared to be more ambiguous with a larger percentage indicating that they were unsure of whether the various categories of behavior contributed to or constituted abuse. In particular almost one-third were unsure about emotional abuse and 1:4 were unsure about control. Additionally, although a majority considered physical contact and threats as contributing to or constituting abuse (92% and 79.8% respectively), the responses were pretty evenly distributed on both between somewhat agree and strongly agree.

Table 9 – Subscales - Chinese

	Physical	Threats	Emotional abuse	Control
	Reported in %			
Strongly disagree	0.2	0.0	0.0	0.6
Somewhat disagree	1.7	2.9	12.5	10.3
Unsure	5.7	12.5	32.3	25.2
Somewhat agree	54.1	46.5	33.4	29.3
Strongly Agree	47.0	38.1	21.8	34.7
No response	0.0	0.0	0.0	0.0

Chart 5 – Subscales - Chinese
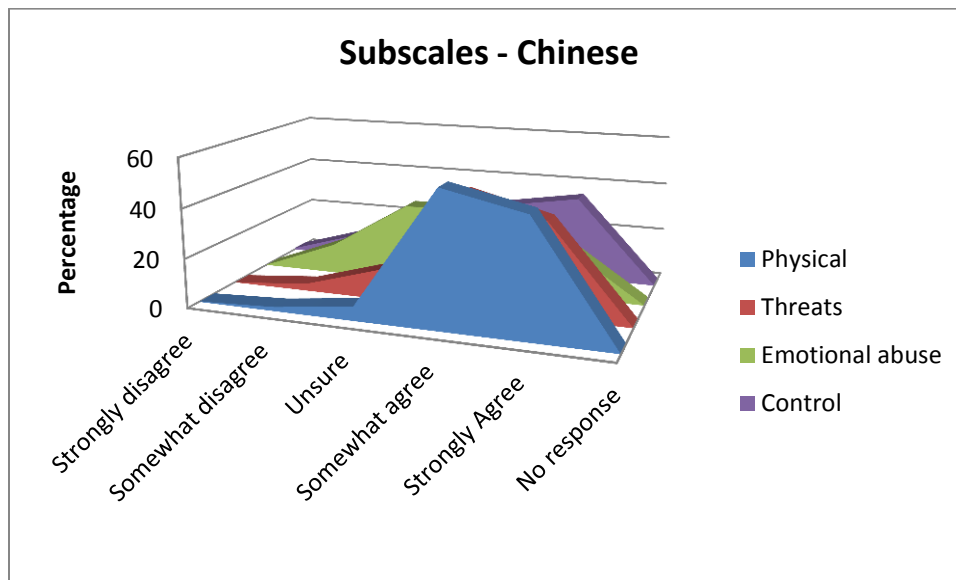
- Questionnaires

The responses for the categories of physical contact and threats were strongly bifurcated and skewed toward strongly agreeing (87% and 83% respectively). While 81% and 82% of the respondents somewhat or strongly agreed that emotional abuse and control contribute to or constitute abuse, the skew toward strongly agree was less with 12% and 18% of those responses somewhat agreeing rather than strongly agreeing.

Table 10 – Subscales - Hispanic

	Physical	Threats	Emotional abuse	Control
	Reported in %			
Strongly disagree	10.5	10.4	11.7	12.8
Somewhat disagree	0.0	1.3	1.0	1.5
Unsure	0.1	1.6	4.9	4.5
Somewhat agree	2.7	3.9	10.1	15.4
Strongly Agree	86.5	82.8	72.4	65.8
No response	0.0	0.0	0.0	0.0

Chart 6 – Subscales - Hispanic
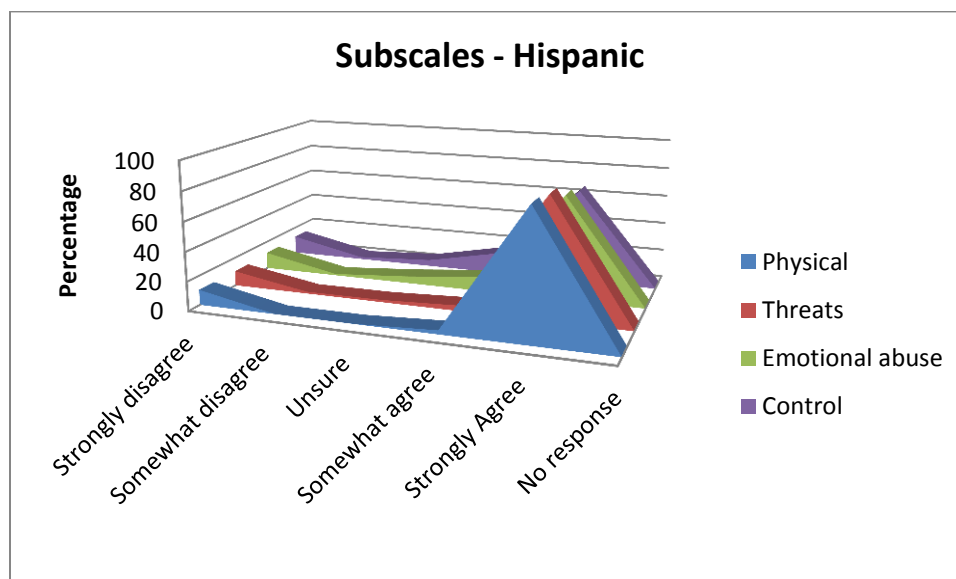
IX. Interviews

Interview questions were adapted from a questionnaire developed for *(Un)heard Voices: Domestic Violence in the Asian American Community,* a report authored by Sujata Warrior, Ph.D. *(Un)heard Voices* was produced by the Family Violence Prevention Fund with a grant from the Violence Against Women Grants Office, Office of Justice Programs, U.S. Department of Justice.

Filipino community

- Interviews

Three key stakeholders were interviewed from the Filipino/Filipino American community; two females and one male. One was first generation, and two were U.S.-born. Age range was from late 30s to 60s. All respondents are actively involved in the Filipino/Filipino American and/or Asian Pacific Islander civic and/or faith organizations.

- Causes of/contributors to domestic violence

Culture was raised as the primary contributing factor in domestic violence to include:

- Traditional gender roles – the man as the "head" of the household and women perceived as being weaker

- Cultural collisions - changing gender roles due to acculturation/assimilation into U.S. culture. The male respondent explained:

  It changes when they come over to America because of equal rights. Women tend to work alongside with their husbands. I think it's the [new] environment [that] contributes much because of the American culture and way they live in America. It gradually changes the culture, the character of the Filipino American people.

- Filial piety – respect or deference based on gender, age, etc.

- Cultural norms about insularity and reticence to address violence. One female respondent explains:

  I think in our culture you are not supposed to talk about things, you are not supposed to talk about your family problems with other people.

- Victims and perpetrators

  Participants generally agreed that women are the victims and men the perpetrators. However, family violence was raised repeatedly, to include grandparents and children as possible victims. Women were positioned as victims because they are weaker than men and are in a culturally-defined submissive role to men.

Two of the respondents viewed men as possible victims as well. One female respondent stated:

> *There are men who are what we say under "desaya" (spelling)…under desaya*
> *it's a term for you know somebody who is…who is uh brow beaten by his wife.*
> *We know that. We don't really know what happens in that household.*

- Role of law enforcement and/or DV providers

All three of the respondents stated that involving law enforcement or DV providers as at least advisable, but offered some concerns and/or reflections. One female participant explained:

> *When I think about my family, I don't see what good it's going to do because she's*
> *just not going to say anything when the police get there because she will think*
> *about the children and the family, and she won't want a divorce and she won't*
> *want the husband to go to jail because then they will have to bail them out. I think*
> *Filipino women look at the big picture and even on instances of physical abuse,*
> *they still think they want to be with that person, so it's not enough to leave the*
> *relationship. Calling the police would make the whole situation more stressful for*
> *the family, for the relationship. I think they grew up, you get married and that's*
> *that. I think a lot of that has to do with Catholicism.*

Another respondent recalled advising a woman to call the police, but she refused to go to a shelter.

The respondents pointed the role of religion in many Filipino families and the proscriptions against divorce. One participant stated:

> *In order to protect them, they should seek help. Women are shy-type. They are*
> *not – based on education learning they have – they might not be aware of this*
> *kind of assistance wherein they can help. But normally the Filipino women tend*
> *to call their pastors, their religious leaders. Because Filipinos are religiously*
> *inclined.*

- Barriers

The barrier that seemed to be most salient was a reticence to report abuse either by the victim or others. The belief that "people just mind their own business" and that families are "tight-knit" and do not share family business was prevalent. Again, there appears to be some futility in addressing domestic violence due to the impermeability of marriage. One respondent explained:

> *People tend to take the violence into . . . they tend to ignore it because they are*
> *afraid to be separated from the husband and family . . .. In the Filipino*

*culture, the way they are, we are a product, close family ties. Seldom do
people think of going away from the family or being separated from the family.
. . They may be separated and not divorced because there is no divorce. They
tend to stay long. One of the factors sometimes normally people just mind their
own business. My experience that the parents or the relatives tend to advise,
you should stay, you can put up with him because it's hard to break up a
family. They are used to that tight knit family. You seldom see people that
really get into this even if they are charged with DV, they still come together.
Has something to do with religion.*

- Consequences for perpetrator or batterer

While the participants concluded that batters should face consequences, there appeared to be
some consensus that the consequences should be case-specific and dependent on intent, as one
respondent stated:

> *. . . if it is really, if their intention is to hurt the victim without regard to the
> welfare, to the welfare of the children and the spouse.*

Respondents agreed that counseling would be appropriate and raised concerns about the impact
on the children if a parent is incarcerated and also the likelihood of learned violent responses
based on family history.

- Domestic violence as a public matter

The respondents viewed DV as a public matter, however they reflected on the resistance in the
Filipino community to bring individual experiences into the public sphere. One informant
described the practice of disassociating oneself from DV:

> *They will talk about it at parties, about friend so and so, but they won't talk
> about how it happens within your family.*

Another respondent reflected on the "shame" that inhibits public discussion about
DV:

> *Sometimes people keep quiet because of the embarrassment that they will get
> from friends and families because they don't want you to know that this is going
> on, they keep to themselves.*

- Community responses to stop DV

Suggestions for community response included:

- Flyers

- Seminars/education
- Information for pastors/priests since Filipinos often turn to their faith communities
- Workshops for adolescents to address dating violence
- Workshops for mothers/daughters, fathers/sons, etc. to open up a family dialogue about healthy relationships and family violence

One informant raised the need for support for Filipinas who are married to non-Filipinos who may be stigmatized and/or isolated without familial support – especially foreign-born brides.

They are in a foreign country they came here you know thinking everything was going to be alright and in some instances it's not alright you know?

- Needed services

There seemed to be a general sense that victims would not utilize "mainstream" services, but rather turn to their faith communities or family for support. One informant explained:

Do I think they will utilize it, not really. I think Filipino women, some of them, or most of them feel they should be able to handle everything on their own. I think there is still this idea that you should turn to your family over a shelter or a hotline. I think they start to think about if I call, what will be the consequences. The cops are going to come, and then what, am I going to have to testify, what if I can't prove it, will they be blaming me. I think there are a lot of stories that go around that the cops didn't do anything, almost that they think it's pretty useless, a temporary fix. Maybe they will have a place to stay for the night, but how is that going to fix their overall situation?

Suggestions included:

- Hiring some who is Filipino who can speak Tagalog
- Brochures and flyers that are culturally/linguistically relevant
- Better training for police – especially new recruits – regarding cultural competence/working with the Filipino community

Korean community

- Interviews

Five key stakeholders were interviewed from the Korean/Korean American community; three females and two males. All but one female, the youngest in the group, were first or 1.5 generation (born in Korea but moved to the U.S. as a child). Age range was from late 30s to mid-60s. All respondents are actively involved in the Korea/Korean American civic and/or faith organizations.

- Causes of/contributors to domestic violence

Respondents identified several contributing factors, but all were clear that there is no "one" cause:

- Economy
- Addictions to alcohol, drugs, and/or gambling
- Resistance to the culture-based role of the husband as head-of-household especially in immigrant families
- Mental disorders
- Social status
- Lack of communication

The two most dominant themes appeared to be the economy and addictions, especially gambling as unique to Las Vegas and/or culturally-embedded notions of luck. Additionally, cultural-specific factors identified included the role of the husband as head-of-household and the importance of social status.

- Victims and perpetrators

Respondents discussed family violence as a whole, and not just domestic violence limited to husband/wife. There was a tendency to resist intimate partner violence (IPV) as distinct from domestic violence which was viewed as encompassing family violence as a whole. Respondents indicated that:

- Generally women are viewed as victims and men as perpetrators
- However, if family violence is considered then generally whoever is "weaker" can be a victim, and conversely whoever is "stronger" a perpetrator
  - Victims often include women or children, and elders if they have an extended household
- Cultural-specific themes included
  - Role of the man as head-of-household and being "autocratic"
  - The expectations of filial piety, and children understanding that the family immigrated to provide them a better life
    - An example provided of a cultural/generational gap, autocratic parenting, and expectation of gratitude towards parents:

      At the time when the kid was in elementary school he was following everything dad said, but now he was [in] high school, I think he was a junior. He was treating him the same way and his dad is pretty strict person, and eventually they kind of shouting, screaming and just once I heard, kind of, physical violence kind of thing. They are highly educated people and well cultured people but value system clashes, and authoritarian system does not apply.

  - The prevalence of extended family systems; i.e. grandparents living with their children and grandchildren

- Role of law enforcement and/or DV providers

Responses seemed to be divided on gender lines with regard to involving law enforcement in matters of domestic violence. The female respondents indicated that calling the police was an appropriate response, while the males were more cautious, citing cultural differences between Korean culture and "majority" responses to Korean culture.

One male respondent stated:

> It is ok that a quarrel between husband and wife in Korean cultures, but it is different in American culture. In Korean culture, sometimes, the husband and the wife are yell each other and it is not big deal to them. . . because of Koreans' common characteristics like fast temper or easily upset . .

The majority of the respondents believed contacting a domestic violence provider was appropriate, with one naming Shade Tree as a provider. However, at least one respondent raised concerns about resistance from Korean/Korean Americans to seek services due to the private nature of domestic violence and a reticence to talk about personal matters with strangers.

A female respondent did share concerns about cultural competence of law enforcement and/or providers, citing as example a Korean tendency to be highly emotional which can be misinterpreted:

> Hangook mal lo nun, "e gae sekki, nae ga jookyuh buh ril guh yah" ee run mal ee it nun dae, gu gun gae sekki rul jookyuh buh ri nun gae ahni da, you jerk. (In Korean, the saying "you son of a bitch, I'll kill you," is not really meant in that way as a threat, but it means more like, you jerk).

- Barriers

The respondents identified a list of barriers that victims may encounter, which were largely culturally-based:

- The need to save face (choi myun) or keep up appearances (choi myun sae woo gi wi hae suh)

  One female respondent explained:

  > Koreans I think has natural things of… hiding bad things and they only like to expose good things.

  Another female respondent describes shame as a part of saving face:

  > Well of course they do not want to share, they think is personal, private barrier is opened up to other people. They think – it's a part of culture – it is very shameful.

- Lack of resources and/or knowing of resources due to being isolated

- - Absence of services specifically targeting the Korean community

- Lack of provider cultural/linguistic proficiency

- Language/cultural proficiency for victims

- Resistance to reporting domestic violence because of possible impact of a criminal history on employment and/or getting permits/licenses/loans for self-employment

- <u>Consequences for perpetrator or batterer</u>

  Respondents were cautious about levying legal penalties on batterers, depending on whether they considered them "soft" (or first-time) offenders or "hard" (habitual) offenders. There seemed to be some consensus that intervention and/or rehabilitation should be a goal.

  Additionally, cultural-specific responses included the need to educate immigrant families about the cultural differences between Korea and the U.S.

  One male respondent explained,

  > *I mean, traditionally, that kind of thing can happen. You're not supposed to get involved in other people's family affairs. That's people's attitude in Korean society. But here serious consequences follow, so they have to deal with that. So educate them about the consequences –legally or some other areas*

- <u>Domestic violence as a public matter</u>

  Some of the respondents positioned domestic violence as a private matter that becomes public, while others explained that public problems, such as the economy and high rates of unemployment, stressing the private family sphere creating conditions in which domestic violence could occur.

  All respondents appeared to believe that addressing domestic violence is a public matter to some degree to include:

  - Levying penalties on batterers to include the existence of public criminal records
  - Loss of work, health care needs, and inability to take care of the children resulting from domestic violence
  - Educating the community about domestic violence

- <u>Community responses to stop DV</u>

  Responses included ideas for prevention, detection, early intervention, and culturally/linguistically responsive services

  - Programs/classes to assist people learn to emotionally regulate

- Increased employment opportunities, which will decrease stress on families
- Increased access to information and services that are linguistically accessible
- Community workshops to educate members about domestic violence (especially targeted to immigrant families who may not have an understanding of U.S. laws pertaining to DV)
- Building sense of community and increasing opportunities for men, women, and children (separately) to interact and support each other

- Needed services

  Suggestions centered largely around providing information to the Korean/Korean American community and also addressing cultural/linguistic barriers:

  - "Unconditional positive acceptance" regarding Korean's hesitancy to address domestic violence

    A female respondent explained:

    > *Many Asians, going to feel very, very, embarrassed that you are coming to the public attention with such a private matter.*

  - Having the community get involved in translation/interpretation for providers
  - Publication of articles/columns about domestic violence
  - Family enhancement seminar – strengthening families as a means of preventing domestic violence
  - Having Korean community organizations collaborate with UNLV to study and generate information/data about domestic violence

Chinese community

- Interviews

Four key stakeholders were interviewed from the Chinese/Chinese American community; two females and two males. All were bilingual, either first-generation or 1.5 generation. Age range was from late 30s to mid-50s. All respondents are actively involved in the Chinese/Chinese American civic and/or faith organizations.

- Causes of/contributors to domestic violence

Respondents identified several possible causes or contributors to domestic violence to include:

  - Male privilege/traditional gender roles
  - Finances
  - Mental illness

The female respondents raised the role of traditional gender roles, while the men focused on other possible contributing factors.

- Victims and perpetrators

Three of the respondents identified women as being particularly vulnerable to domestic violence and men as likely perpetrators. However the added vulnerability of undocumented immigration status for women was mentioned by one female respondent, especially with regard to threats of deportation:

> *They've always been threatening if you don't behave yourself they take your green card away from you or you know I will deport you or you know you get that kind of threat all the time you know so. Um they live in that kind of fear.*

- Role of law enforcement and/or DV providers

Overall participants believed that calling the police or a DV provider is an option for victims, however they raised several considerations:

- Family and/or friends may disagree with involving law enforcement

- Concerns about "face" and honor, one male respondent explained:

  > *It is becoming more and more of a chosen option. Um in the past, as Asians are more reserved and more conservative and because of the honor to the family and the family name…there is a phrase that we Chinese usually use it's "to save face". We generally do not go to the authority but because of education and being exposed to the news of the day, more and more are more willing to seek that option to go to the authorities.*

- Concerns about homelessness

- Culture/language, one female respondent stated that calling the police or seeking shelter may be more of an option for U.S.-born victims. She explained that immigrant victims:

  > *But if . . . . English is not your first language and you're in the area where it is not a lot of Chinese speaker or Chinese language that you can see, I would kind of imagine it would be very hard for them.*

- Lack of information about services

  One female respondent explained:

  > *I don't think they know there's a hotline . . . you tend to stay with your own people and therefore your information um…it's not… you don't have that information because nobody's giving it to you*

  A male participant shared a similar concern:

. . . in the Chinese community if there is no translator or a person who understands their language, it will be very difficult as they may be apprehensive about calling the authorities because the authorities will not understand what they are trying to communicate.

- Barriers

  The concerns raised by participants when they considered whether victims should reach out to law enforcement or providers were reiterated; i.e. cultural/linguistic barriers. Additionally one female respondent believes that distrust of police in China could cause victims to distrust police in the U.S.:

  If they were to go to a police station and report it in China or in Taiwan and the police officer might not take that as any big deal because its "what did you do wrong?" where here that's not the case but they might have that mentality because that's all they know and when they come here, that stays with them.

  Other barriers identified were:

  - Lack of information about resources
  - Immigration status
  - Isolation – social, cultural, and linguistic
  - Survival – housing, income

  One female respondent viewed familial attitudes, which may be attributed to culture, as a barrier:

  There [are] times when they tell their family and the family say[s] "well he's your husband now and you have to continue" and was like you know "this is your life" and that's that.

- Consequences for perpetrator or batterer

All of the respondents expressed an opinion that perpetrators should be held accountable for their actions, through the legal system – but also they suggested rehabilitative counseling. One female participant believed that if the batterer is Chinese, he should be educated about domestic violence and the difference between accepted violence in the U.S. versus China.

- Domestic violence as a public matter

Respondents viewed domestic violence as initially a private matter which had public implications. The public aspect was discussed as a consequence of the violent act(s) and also as a deterrent to future violence; i.e. through policy and/or education.

- Community responses to stop DV

Education was the primary response identified, suggestions included:

- Educational programs for the community about what constitutes DV
- Information about available resources/services/hotlines
- Letting the community know that being a victim of DV is not shameful

- Needed services

Strategies for addressing DV in the Chinese community included:

- Flyers in Chinese
- Counseling
- Housing – shelter and temporary
  - Shelter specifically for the Asian community
- Job counseling
- Anger management
- Greater collaboration with criminal court. One male made the connection between DV and addictions:

  Usually it's not just pure DV issues it's always coupled with drug/substance abuse or alcohol abuse

Overall the two female participants were notably more verbose in their responses and made clear connections between traditional gender roles and domestic violence.

Spanish-speaking community

- Interviews

Four key stakeholders were interviewed from the Hispanic community; two females and three males. Countries of descent included Cuba, Spain, Puerto Rico, Mexico, and ____. All were bilingual, either first-generation or 1.5 generation. Age range was from late 30s to mid-50s. All respondents are actively involved in the Chinese/Chinese American civic and/or faith organizations.

- Causes of/contributors to domestic violence

The informants offered several causes or contributors to domestic violence to include:

- Ignore
- Desire for power and control
- Family violence
- Loss of respect
- Traditional gender roles

- Mental illness
- Alcohol or substance abuse
- Violence on t.v.
- Frustration due inability to convey an idea or emotion

- Victims and perpetrators

  The respondents viewed domestic violence as a family/intergenerational system problem, and viewed all members of the family as possible victims and perpetrators. Examples offered included:

  - Men as victims of emotional abuse on the part of their wife
  - Children abusing parents
  - Children abusing siblings

- Role of law enforcement and/or DV providers

  All of respondents indicated that law enforcement should be contacted in cases of DV, with three noting that a police report is integral to starting to build a case. Two male respondents raised cautions about police involvement due to fear of law enforcement and immigration status:

  There is a fear that once the police get involved, depending on the legal status of the family, there could be negative consequences. Law enforcement involvement can be taken off table for fear of deportation. Fear of being treated unfairly by police also is very real, and if things get out of control, people may be treated unfairly by police. There is definitely a fear of police.

  Similarly, there was a consensus that there is a role for DV providers to assist victims, however there was an acknowledgment that there could be resistance on the part of victims, as one male informant explains:

  It's an option but not a culturally acceptable option. Our culture as Latinos dictates that certain things aren't to be shared outside of the family. We are taught that you don't reach out and talk about those kinds of problems.

- Barriers

  The three most prevalent themes that were raised with regard to barriers were:

  - Language - The importance of language had to do with access to services, but also awareness that services exist; i.e. translated materials about available services.
  - Culture – Respondents identified cultural-based fear of the "system" and of police. Also, the role that culture (and religion) plays in entrapping women in violent relationships was described by one female respondent:

> *A Catholic Dominican priest will tell the sister, you have to forgive him, you must forgive your husband. The woman wants to be a good Christian so she thinks that she has to forgive him.*

A male respondent explained:

> *There is a social pressure being a Hispanic woman or just being Latino and having failed at your marriage.*

Cultural-based male privilege, *machismo*, was identified as a barrier.

- Immigration status – undocumented victims may be afraid to involve law enforcement due to fear of deportation and/or batterers may use fear of deportation as a weapon of control.

Other identified barriers included self-awareness and knowledge about domestic violence.

- Consequences for perpetrator or batterer

All of the informants agreed that the perpetrator should face consequences to include incarceration, being removed from the home, and three recommended counseling.

- Domestic violence as a public matter

Four of the five informants viewed DV as a public matter, couching it within the context of neighborhood, church, and community. The fourth respondent viewed DV as a private matter, but suggested that public efforts should be limited to education/awareness efforts such as public ad campaigns.

- Community responses to stop DV

The predominant theme for community response was education or awareness targeted to the Hispanic/Latino community. This included:

- Public information campaigns; i.e. tv, radio
- Brochures/flyers about services
- Education for teens about IPV

As one male respondent explained:

> *Informing women that it is okay to ask for help that it's not their fault and that there are people out there that will help them.*

Respondents also identified the need for more dialogue in the community; i.e. in churches and between women.

Additional community responses identified were:

- An increased understanding of "demographics of Latinos"
- Training for providers
- More Latino based non-profits to serve victims.

- <u>Needed services</u>

The most commonly identified need was bilingual services, not just for DV programs, but also throughout the system to include judicial, law enforcement, and mental health.

Other needed services included:

- Culturally sensitive programs
- More outreach/education
- Legal services
- Financial resources (long and short term)
- Assistance with immigration needs
- Educating the Latino community about the ethical responsibility of legal and mental health professionals to maintain confidentiality
- Teaching women about self-esteem, as one female respondent explained:

Services that start teaching women about good self-esteem can prevent much of what happens. If you know you have rights and if you create good programs to teach you about good self-esteem I think that the better self-esteem a woman has the less likely she is to allow anyone to mistreat her. La limpieza no te toca mas a ti por ser mujer.

X.   **Findings**

<u>Providers</u>

Data was collected from the four major providers in Southern Nevada that offer services to victims of intimate partner violence (S.A.F.E. House, Safe Nest, Shade Tree, and the Rape Crisis Center) to get a better understanding of the rate of utilization of services by Asian and Hispanic/Latino clients. The findings were preliminary at best, however perhaps the most significant finding was that the methods and type of data collection between the agencies varied widely. Some data was digital, while some had handwritten logs. In many cases data was missing or incomplete.

Three of the four providers offer shelter services, however shelter data was not provided from S.A.F.E. House and Safe Nest, and the data from Shade Tree included the general homeless clients as well as victims of DV/IPV. Therefore, it is impossible to utilize the data for any meaningful comparisons. Additionally, three (S.A.F.E. House, Safe Nest, and Rape Crisis Center) of the four providers have hotlines, but call data was available only for RCC – again making any comparisons impossible.

The data did, however, provide a general snap shot (given the range of services reported) of patterns of service utilization. The only common set of data provided by all four organizations was race/ethnicity, although the methods by which the data was categorized varied. While all of the agencies provided other data (age, gender, marital status) they did not track data in relationship to different variables; i.e. race/ethnicity to age, gender, or marital status.

Table 11 includes race/ethnicity data for each agency, 2009 was selected since it was the latest year available from each provider. Categories were collapsed or merged in an effort to accommodate the various reporting methods and limited to four categories; i.e. Asian, Pacific Islander, and Native Hawai'ian were merged into one category because it is impossible to separate out the actual numbers of the subgroups based on the way the data was reported. Designations such as mixed, biracial, and other were not included because of absence of category definitions. Also AI/NA was not included.

Table 11 – Race/ethnicity by Provider - 2009

| | S.A.F.E. House | | Safe Nest | | Shade Tree | | RCC | | 2010 Census |
| | Counseling | | Counseling | | Shelter | | Hotline | | One race |
	#	%	#	%	#	%	#	%	%
Caucasian/white	110	40.4	311	34.1	970	41.2	369	51.4	66.2
Black/AfAm	35	12.9	146	16.0	870	36.9	128	17.8	8.1
Hispanic/Latino	58	21.3	371	40.7	276	11.7	153	21.3	26.5
Asian/PI/NH	10	3.7	26	2.9	71	3.0	29	4.0	7.8

While it is impossible to make actual comparisons between providers due to identified difficulties with data, it is instructive to consider utilization rates in relation to race/ethnicity Census data. Data from the 2010 Census was used for convenience. Caucasians comprise two-thirds of the population in NV, with more than one in four Nevadans being Hispanic/Latino. African Americans were slightly larger as a group than Asian/PI/NH. It is important to note that Southern Nevada's demographic make-up is different than Northern Nevada, with the Las Vegas area being more diverse.

The utilization rates of provider services did not proportionally reflect the demographic make-up of Nevada generally. For the purposes of this study, in 2009 Hispanic/Latinos utilized Safe Nest's counseling services at a disproportionately high level, and Shade Tree's shelter at a disproportionately low level. However, while Hispanic/Latinos generally appeared to utilize services, Asian/PI/NHs were uniformly underrepresented.

Community-based data

The responses to the four separate subscales (physical, threats, emotional, and control) are organized into tables by race/ethnicity. While conclusions cannot be drawn based on the limitations of the research methods (i.e. small non-random, non-representative sample) the data can provide a general view of the populations sampled.

The tables contain the average score for each subscale as percentages of the total responses.

Table 12: Physical subscale - combined

	Filipino	Korean	Chinese	Hispanic
	Reported in %			
Strongly disagree	10.4	3.1	0.2	10.5
Somewhat disagree	1.0	1.7	1.7	0
Unsure	2.7	2	5.7	0.1
Somewhat agree	10.1	12.4	54.1	2.7
Strongly Agree	75.8	80.3	47	86.5
No response	0.0	0.4	0	0

Chart 7: Physical subscale - combined
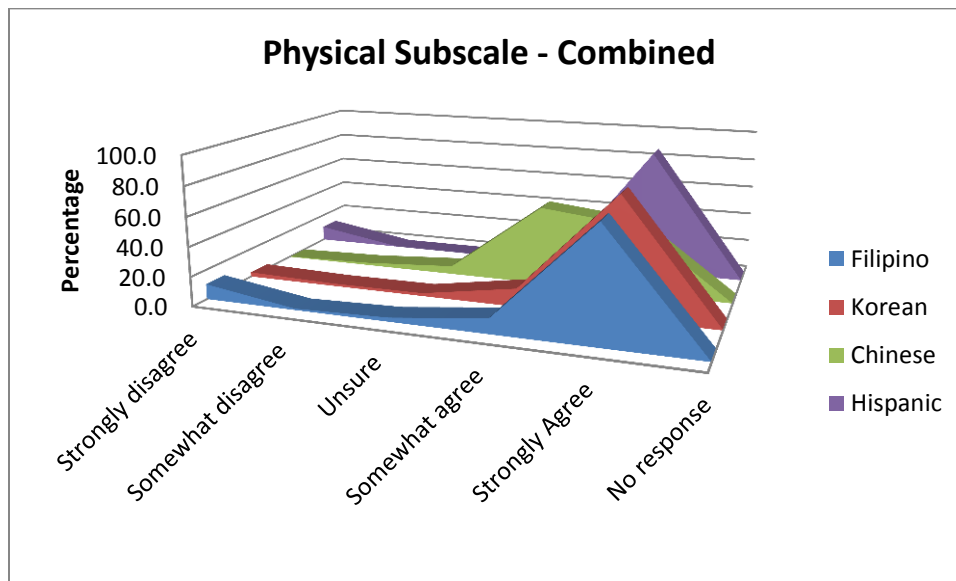
The general slope of the responses on the physical subscale on average toward strongly agreeing is evident for the Filipino, Korean and Hispanic responses. However the Chinese participants appeared to be less certain whether the indicators on the physical subscale contribute to or constitute abuse.

Table 13: Threats subscale – combined

	Filipino	Korean	Chinese	Hispanic
	Reported in %			
Strongly disagree	10.4	3.3	0	10.4
Somewhat disagree	1.0	0.7	2.9	1.3
Unsure	2.7	1.9	12.5	1.6
Somewhat agree	10.1	7.9	46.5	3.9
Strongly Agree	75.8	85.7	38.1	82.8
No response	0.0	0.5	0	0

Chart 8: Threats subscale – combined
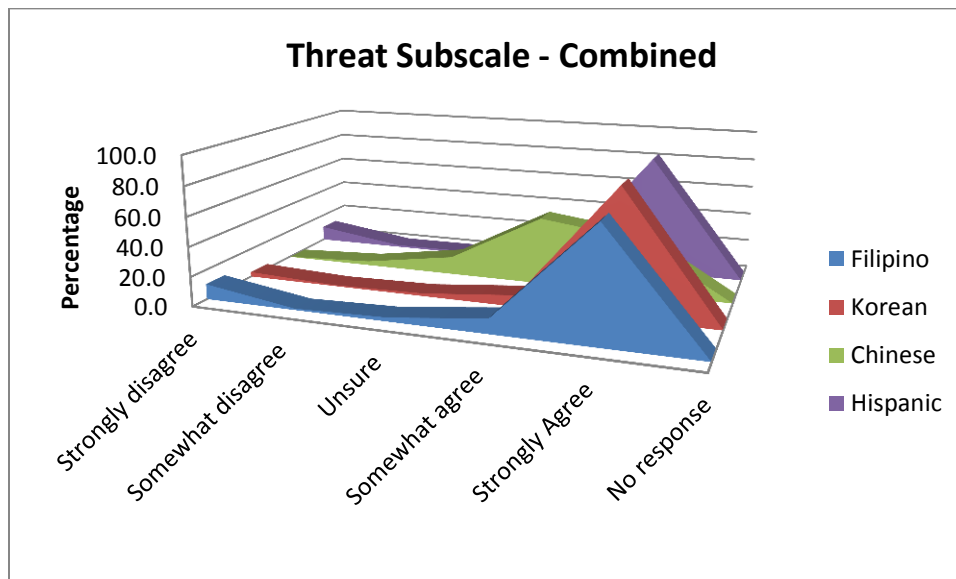
The threat subscale is similar to the physical subscale, with the Chinese respondents on average less likely to strongly that emotional or psychological behaviors on the subscale contribute to or constitute abuse.

Table 14: Emotional subscale - combined

	Filipino	Korean	Chinese	Hispanic
	Reported in %			
Strongly disagree	14.7	2.4	0	11.7
Somewhat disagree	4.8	3.1	12.5	1
Unsure	6.1	2.9	32.3	4.9
Somewhat agree	25.6	21	33.4	10.1
Strongly Agree	48.7	70.7	21.8	72.4
No response	0	0	0	0

Chart 9: Emotional subscale - combined
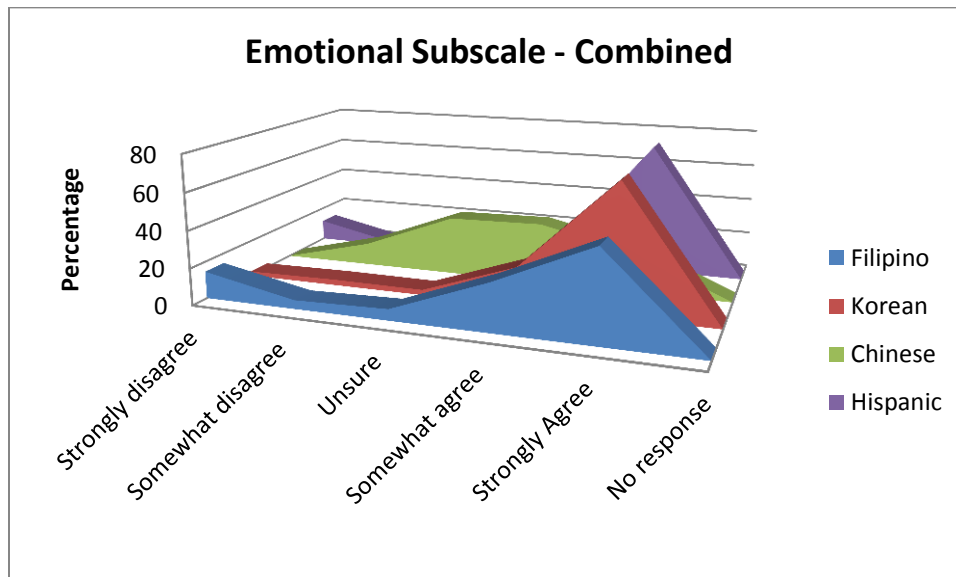
There is greater variability in responses on the emotional subscale than the previous two subscales. The Filipino participants appear on average less certain that the behaviors on the emotional subscale contribute to or constitute abuse and Chinese responses are more evenly distributed with one-third of participants unsure compared to 21.8% agreeing.

Table 15: Control subscale - combined

	Filipino	Korean	Chinese	Hispanic
	Reported in %			
Strongly disagree	18.6	1.4	0.6	12.8
Somewhat disagree	4.9	7.1	10.3	1.5
Unsure	10	13.5	25.2	4.5
Somewhat agree	25.4	30.5	29.3	15.4
Strongly Agree	39.4	47.5	34.7	65.8
No response	1.7	0	0	0

Chart 10: Control subscale - combined
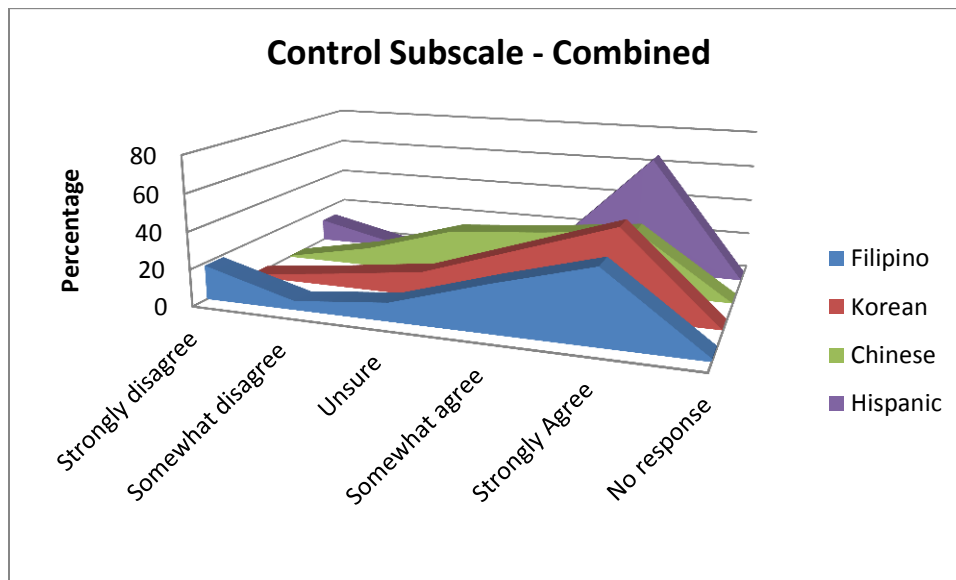
The final subscale, control, has the greatest variability. Less than half of the Korean respondents on average strongly agreed that control contributes to or constitutes abuse, compared to at least 70% on the other three subscales. The Filipino respondents less likely, compared to the other subscales, to strongly agree that control contributes to or constitutes abuse, with almost 20% of the Filipinos strongly disagreeing. Hispanic respondents appeared to view control behaviors as a factor in abuse than the other three groups. Interestingly, the Chinese respondents seemed to view the control behaviors as contributing to or constituting abuse more than the behaviors on the emotional/psychological subscale.

The interviews of key stakeholders from the Filipino, Korean, Chinese, and Spanish-speaking (Hispanic/Latino) communities identified some culturally-specific themes. However, given the limited number of participants and non-representative sample, conclusions cannot be drawn and/or generalized.

The primary themes that were identified through the interviews are:

- Due to the high percentage of Filipinos that are Catholic and divorce not an option in the Philippines, many may feel they have no option but to stay in their abuse relationships. This may be reinforced by family and the Filipino community in general.
- Filipinos and Hispanics/Latinos may turn to faith leaders rather than seek out assistance from DV or sexual assault organizations
- Filipino, Chinese, and Korean respondents identified the notion of "face" or shame as barriers to seeking help. Implicit are concerns about bringing shame to oneself, spouse, and family.
- Language was identified by all four groups as both a barrier and something to be addressed by service providers; i.e. bilingual staff, interpretation services, translated materials.
- Culture was raised as a theme by all four groups but in different contexts:
  - Rigid gender roles/patriarchy
  - Cultural collisions resulting from acculturation and shifting gender roles
  - Greater cultural competence for providers and law enforcement
  - Immigration status
- Family violence v. domestic violence/IPV – All four groups tended to view violence as a family issue to include children, grandparents, and extended family in multigenerational households.

XI.   Discussion

As an exploratory study with a small, non-random, non-representative sample, findings can only begin the discussion about domestic violence in immigrant communities in Southern Nevada.

The stated objectives were to:

- To identify the needs and concerns of communities for whom English is a second language with regard to gendered violence
- To identify service providers' current ability to respond to the needs of victims of gendered violence for whom English is a second language
- To increase the ability of providers to provide culturally and linguistically relevant education, outreach, and services

To identify the needs and concerns of communities for who English is a second language with regard to gendered violence

Based on the providers' utilization data, community-based questionnaires, and interviews it is clear that Asian/Asian Americans in Southern Nevada disproportionately underutilize DV and/or sexual assault services. Hispanic/Latino communities generally utilize services, in some instances they are

over-represented, although there may be stigma and/or barriers. The question that cannot be answered by this study is whether the utilization of services reflects the actual prevalence of DV/IPV in the respective communities.

Needs and concerns were identified through the questionnaires and key informant interviews. While conclusions cannot be made based on this study, it does provide a place to start from and leads to questions that should be explored further.

A couple of preliminary considerations include:

- Approaching DV as a family violence matter may be more effective in working with immigrant communities due to culturally-based pluralistic worldviews. Appeals to individual rights and safety may not be as compelling as appeals to family safety.
- Cultural and linguistic factors are viewed by all four groups as contributors to violence, creating barriers for seeking help, and need to be addressed by providers and law enforcement.
- There appear to be distinct differences between the three Asian cultural groups with regards to attitudes and perceptions about what behaviors contribute to or constitute domestic violence, particularly within the Chinese community. This preliminary finding merits further investigation, to include examining the role of generation (foreign-born v. U.S. born) might play. Also, expanding research to include other Asian communities.
- The inclusion of the Hispanic/Latino group was important to provide a tentative look at the experiences of Spanish-speaking immigrant communities vis-à-vis Asian – however much more in depth, ethnic-group/country of origin research is needed. Most importantly, it is interesting to note the disproportionately higher rate of utilization by Hispanic/Latino victims versus Asians. It is difficult to know if the finding is in part due to the availability of Spanish-speaking providers, materials, and/or outreach efforts into the Hispanic/Latino communities – especially given the shared Catholic background with Filipinos.

To identify service providers' current ability to respond to the needs of victims of gendered violence for who English is a second language

All of the providers reported that they had at least one staff with bilingual Spanish capacity and offered materials in Spanish. However, none of the providers had materials available in languages other than English and Spanish. Most relied on the language line, volunteers, or if available, staff for interpretation.

The providers are aware that they have limited ability to meet the needs of non-English speaking clients, however are faced with fiscal restraints and due to the low utilization rates, may not be able to justify the expense.

To increase the ability of providers to provide culturally and linguistically relevant education, outreach, and services

While the findings of this study may not be able to increase agencies' ability to provide culturally and linguistically relevant education, outreach, and services, it is anticipated that the report may provide useful information for internal evaluation.

An important outcome of this study could be a more uniformed data collection process that could support future research. The four providers offer a network to Southern Nevada, each with their own area of expertise and/or geographic coverage – therefore uniformed data collection would allow providers and funders to identify trends, needs, and gaps in services.

Information regarding how communities obtain information about domestic violence and/or services available to victims reflects the lower utilization rates within the Asian communities. That is, all of the providers indicated that they do not have materials available in languages other than English and Spanish, and have limited ability to provide interpretation services, not to mention culturally-relevant services. It is impossible to know whether making materials more widely available in other languages would increase utilization rates, however the respondents identified both through questionnaires and interviews that they do not receive messages directly from providers. Additionally, providers uniformly identified limits in funding to offer interpretation and materials in other languages.

Limitations

There were many limitations to this study, due in part to methodology and availability of data. As mentioned above, the sample size for the questionnaires and interviews were too small and non-random to be representative. Therefore no generalizations or conclusions can be made. Recruiting participants was more difficult than anticipated. We found that collecting data in immigrant communities that have a hesitancy/discomfort with talking about DV to be a challenge, despite the fact the use of bilingual/bicultural Graduate Assistants.

The provider data did not include breakdowns based on ethnicity (i.e. data for all Asians or Hispanics were collected as a group and there was no tracking by ethnicity or country of origin), data was inconsistent or incomplete, and there was significant variance between agencies with regard to methods used to collect data.

The data from the providers that was available and complete enough to include in this report is at least three years old and community-based data almost two years old, therefore there may have be important changes in client data and/or community attitudes or perceptions that have not been captured.

Meeting deadlines has been difficult due to unanticipated time needed to recruit participants, translate instruments, and transcribe interviews/focus group from first language to English.

Recommendations

The existing providers have combined years of experiences in addressing domestic violence and sexual assault in Southern Nevada. The rapid growth of the greater Las Vegas area has necessitated that agencies be able to respond to the increasing linguistic and cultural diversity with limited resources. Based on the tentative findings from this study a few recommendations have been identified:

- More in-depth research to increase understanding of the distinct needs of DV in immigrant communities to include ethnic-specific needs and moving providers beyond merely identifying language needs to culturally-relevant service provision.

- Collaborating with community-based ethnic organizations to expand provider s' ability to do outreach and education in immigrant communities – to include faith based organizations.
- Provide training with ethnic churches and community organizations and training for providers by immigrant community leaders.
- Collaborating with community-based ethnic organizations on grants and funding to enhance providers' ability to provide culturally-relevant services