A phenomenological study of undocumented Latina survivors of intimate partner violence

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A Phenomenological Study of Undocumented Latina Survivors of Intimate Partner Violence

by

Sharon Gandarilla-Javier

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Abstract

This study undertakes a phenomenological examination of the lived experience of undocumented Latina survivors of intimate partner violence (IPV). This study served two purposes. First, to provide a greater understanding of this experience through the lens of the survivors, drawing on feminist and empowerment theories. Second, to explore why underreporting is more prevalent among undocumented women versus U.S. women citizens, especially during a time of heightened fear of deportation. To answer this, several research questions were used as probes. These included: how the lived experience of IPV had impacted women’s decisions to leave or not leave an abuser; what motivators influenced their decision to report their IPV to law enforcement; what barriers prevented them from reporting to law enforcement; and how women navigate social support systems. Fifteen undocumented survivors of IPV were recruited using a convenience sampling process. Through their stories of abuse, several themes and sub-themes emerged. Themes included multiple forms of violence, significant impediments to reporting, presence of facilitators for reporting, adverse experiences in dealing with the court system, and experience with help-seeking in public, non-profit and informal service sectors. Study participants reported difficulties and obstacles related to leaving an abusive relationship and gaining access to services. Through their search for safety and assistance, the inventiveness and resilience of these women could be inferred and discerned. Implications are offered for future research, policy, and practice.
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Chapter 1: Problem Statement

Nature of the Study

There is a rising number of undocumented immigrants who have been living in the United States for more than a decade. According to the Pew Research Center (2017), there were an estimated 10.9 million unauthorized immigrants residing in the United States in 2017, and 57% of this population is from Mexico and countries in Central America. Since the election of President Donald Trump, there has been a heightened fear of deportation among unauthorized immigrants residing in the United States. This heightened fear has sparked unwanted attention to this most vulnerable population of undocumented immigrants. During the last two years, immigration has been in the center of American politics and the most recent presidential debates. During this heightened fear of deportation among the undocumented population, the Centers for Disease Control and Prevention (Centers for Disease Control and Prevention, 2015) predict that the rate of intimate partner violence (IPV) will continue to rise for the undocumented population. Given this, the barriers to reporting IPV remain significant, jeopardizing the lives of the victims.

Migration to the United States.

Immigrants who migrated to the United States often do so in order to flee their countries and seek asylum. Many of these immigrants face emotional, psychological, and physical challenges. As noted by Silver (2014), separation, role changes, and changes in family dynamics can lead to stress and depression (p. 197). Immigrant men who come to the United States may feel pressured to comply with the American culture for the sake of survival. Many times, men are pressed into working more than full-time hours (12-15 hours a day), sometimes six days a week, to provide food, clothing, and shelter. Many immigrant families are undocumented, so, therefore, they often do not qualify for social services like their “native-born” counterparts. Frequently,
small children are left behind while their parents seek a better life in the United States, which in
turn can instigate depression (Silver, 2014). Immigrant families who do bring their children with
them are not able to work legally, also leading to stress. Dona and Berry (1994) found that the
leading cause of depression, anxiety, and post-traumatic stress among the immigrant population
living in the United States is most often due to a concept called acculturative stress. The authors
define acculturative stress as stemming from the inherent stressors that immigrants face as a
result of living in a foreign country (Dona & Berry, 1994). Thus, an understanding of the
difficulties faced by immigrants, who are attempting to acculturate to the U.S. culture without the
support of family, may help to explain why IPV is more prevalent among the undocumented
population.

Impact of IPV.

Intimate partner violence is a social problem that involves emotional, physical, and
financial abuse (Murshid & Bowen, 2018). Eighty-five percent of IPV victims are females
compared to 15% who are males (Pew Center, 2017). Despite the growing amount of IPV among
Latina women, there continues to be limited research on undocumented Latina women and their

According to a report by the National Latina Network (2016), undocumented Latina women are
less likely to seek IPV services than documented women. Gomes and Ross-Sheriff (2011) have
suggested that current immigration policies affecting “illegal immigrants” can impact whether
they report IPV or not (p.119). Another barrier is that most of Latina women do not speak the
English language, which can make it challenging to navigate services in the United States.
Therefore, informal supports, such as friends and family, are often sought. Public services are
usually not available for undocumented immigrants to help them with housing, Temporary
Assistance for Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP), and Medicaid—which in contrast, are services offered to women who are citizens seeking to leave their abuser. According to the National Latina Network (2016), on average, it takes a victim between 5 to 7 attempts to leave before staying away from their abuser permanently. This number is reportedly even higher for undocumented women due to the lack of services made available to them (2016).

Reina and Lohman (2015) conducted a qualitative study with 10 undocumented Latina from Mexico and Central America who were seeking advocacy services as survivors of IPV. They identified several barriers to seeking help. The first comprised institutional barriers, which consisted of: 1) the legal system and unstable residency; 2) public service providers’ attitudes and behaviors; and 3) civic court proceedings. Structural barriers that were identified were economic status and level of education (p. 485). The researchers concluded that institutional and structural barriers were deterrents for seeking help after leaving an abuser. In a study conducted by McLeod, Hays, and Chang (2010) with 3 African American and 2 European IPV survivors, findings indicated some positive connections with social supports. They found validation, self-care, and family to be strong motivators for seeking help—arguing that there is a need for a social and community support system, a safe place for women to reside, and the need to feel validated.

Goodman and associates (2017) conducted a study with 19 women, of which 10 were undocumented individuals and 9 were refugees. Four themes were identified: 1) experience of post-migration trauma once in the United States; 2) increase in structural and situational stressors stemming from family separation, unemployment, and economic and situational problems; 3) exacerbation of psychological symptomatology, primarily in the area of mental health concerns
related to PTSD, depression, and suicidality; and 4) increased use of coping and resilience skills (Goodman, Vesely, Letiecq, & Cleaveland, 2017). The study concluded that although the 19 women participants endured similar traumatic experiences involving common stressors such as unemployment, nonetheless, these stressors were higher among the undocumented women when compared to the documented women. Moreover, unemployment and fear of deportation were among the common themes for the 10 undocumented participants, while learning the English language and mental health issues were also among the common themes for 9 refugee participants (Goodman, Vesely, Letiecq, & Cleaveland, 2017). Tsankov and McShiras (2014) found that underreporting and underutilization of services among the undocumented population was much more prevalent due to their illegal immigration status.

**Purpose of Study**

Although there has been an increase in the number of studies conducted on undocumented populations involving IPV, most of the studies continue to be quantitative and focus primarily on providing descriptive information. Underreporting of intimate partner violence (IPV) among undocumented immigrants has been established; however, there is a pressing need to explore this phenomenon during an age in which undocumented Latinas have a heightened fear of deportation. The dynamics underlying this underreporting inspired this research and shaped the choices leading to a qualitative, exploratory research approach. Qualitative exploratory research, using a phenomenological approach, is an appropriate way to study underreporting of IPV and explore the help-seeking behaviors of this most vulnerable population.

Four main research questions guide this search to better understand both reporting and help seeking behaviors. They are:
Research Question #1:

How has the lived experience of IPV among undocumented Latina women impacted their decision to leave or not leave an abuser?

Research Question #2:

What barriers influenced their decision not to report the IPV to law enforcement?

Research Question #3:

What motivators influenced their decision to report IPV to law enforcement?

Research Question #4:

How do undocumented women navigate social supports systems?

Responses to these four research questions will help in providing a greater understanding of this underreporting dynamic and why some IPV undocumented Latina survivors report and others do not. Additionally, such research may prove to be useful in advancing improved practices among police and other helping systems.

Summary of Chapter

Several studies have been discussed that explored the underreporting of IPV to police as well as the help-seeking behaviors of survivors (Reina & Lohman, 2015; McLeod, Hays, & Chang, 2010). Reina & Lohman (2015) explored how 10 undocumented women sought advocacy services as survivors of IPV. They used a qualitative methodology/narrative approach to help identify the institutional and structural barriers that impeded seeking advocacy services. They found that these structural barriers included low socioeconomic status and their undocumented status. Institutional barriers included those impediments that prevent women from seeking advocacy services: public service provider attitudes towards the undocumented women seeking services, how the criminal/family court treated them, and how
well they were able to navigate the legal system. The findings revealed that these women were more likely to use informal supports from family and friends because of institutional discrimination, and that the major barrier for seeking formal services and reporting IPV to police was their immigration status (p. 484).

Given IPV among undocumented immigrant women, especially for the Latinas in these studies who faced risks due to deportation and fears of reporting, it seems critical that more research be undertaken. This conviction is reinforced by the dire challenges that such undocumented women victims face in a time of heightened threats of deportation. It should be noted that all these key studies except one were conducted before the intense U.S. focus on deportation of illegal immigrants enacted in 2016. Moreover, only one study examined the challenges of Latina women who were IPV victims. All these factors justify the use of a phenomenological study that allows Latina victims to tell their story of survival, reporting, and help seeking behaviors. Finally, given the vulnerabilities of undocumented women victims of IPV and their profound needs for safety and supports, the urgency for such research seems evident. From an advocacy standpoint, their barriers and needs should in fact help foster more research, inform social work practice, and subsequently inform and improve social policy in the United States.
Chapter 2: Literature Review

The purpose of this chapter is to explore the literature related to the lived experience of undocumented Latina survivors of IPV, drawing on feminist and empowerment theories. A review of the literature review suggests that there is a need for a closer look into why underreporting is more prevalent among undocumented immigrants. As noted in Chapter 1, the literature on undocumented Latina survivors of IPV is limited in scope. This chapter will review what is known and the knowledge gaps regarding IPV among the undocumented Latina population. This literature review includes attention to relevant and empirical research on barriers to help-seeking. Related studies of culture, religion, and gender roles also provide a context for better understanding of acculturation challenges, dynamics of IPV, and barriers to reporting among the Latino population. This chapter will feature some empirical research on the criminalization of IPV, police culture, traditional policing, mandatory arrest policies, and the Violence against Women Act (VAWA) of 1994. This chapter will end with how this study will address gaps in knowledge about the lived experience of IPV survivors who are undocumented.

Definition of IPV

According to the National Coalition Against Domestic Violence (2015) on their website, domestic violence is defined as:

the willful intimidation, physical assault, battery, sexual assault, and/or other abusive behavior as part of a systematic pattern of power and control perpetrated by one intimate partner against another. It includes physical violence, sexual violence, threats, and emotional/psychological abuse. (para. 1).
The types of abuse can vary among heterosexual or same-sex couples and do not require sexual intimacy. Dugan and Hock (2006) state that power and control do not happen overnight. Abusers use emotional and physical entrapment to gain power and control. They noted that power and control issues are different for immigrant women than for non-immigrant women. For undocumented women, the fear of deportation and the threat of having their children taken from them is much more prevalent than those immigrants who come to the United States legally. For undocumented immigrant women, the threat of being deported and having their children taken away is more imminent than for documented women.

**Theoretical Frameworks**

There are two theoretical frameworks that help inform this phenomenological research of the lived experience of undocumented Latina survivors of IPV: they are feminist and empowerment theory. Both theories center on the role of power. For feminist theory, power is seen to be unequally distributed with men not only holding more power but also abusing power for purposes of control and sometimes harm. Empowerment theory derives from the assumption that each has the ability and right to have barriers addressed and that every person has the power to act (Gray et al., 2015; Morgan & Coombes, 2013).

Both theories originate from a “rights” point of view. Feminist theory stems from more of a gender rights orientation, demanding more attention to equity in power and access to the same protections, services, and pay across men and women. Empowerment theory extends rights to human agency. Both theories promote distributive justice, ensuring more gender equitable access to all key opportunities to advance one’s life pursuits and human betterment. The assumption is that all have the right to self-actualization and that empowerment involves addressing impediments to goals and improved wellbeing. Together
these theories offer frames for approaching vulnerable populations as key informants if not partners in research, such as qualitative research.

Feminists argue that IPV is a social problem that primarily impacts women at a much higher rate than men (Straus & Gozjolko, 2014) because women face far more barriers than men because of gender role expectations and differences (Hayes & Franklin, 2017). Because research has shown that power and gender disparities affect the risk of IPV for Latina women, feminist and empowerment theories are relevant for research on undocumented IPV victims along with their need for self-determination. In fact, self-determination is essential for help-seeking and healing after the experience of significant trauma.

**Feminist Theory and Perspectives**

Feminist theory is defined as the focus on gender inequalities and how they impact women, especially in political, medical, and education spheres. Feminist theory sees the male-driven society as being discriminatory and exclusionary based on sex and gender (Gray, Agllias, Schubert, & Boddy, 2015; Hayes & Franklin, 2017; Eyal-Lubling & Krumer-Nevo, 2016). Feminist theory is relevant to this study because it helps to explain how gender impacts structural and economic inequalities, power and oppression, gender roles, and stereotypes. This feminist perspective focuses on the lives of women. Thus, this feminist theory and perspective are relevant to the study of undocumented Latina survivors of IPV. Moreover, feminist knowledge undergirds methodology, research questions, and analysis.

Van Wormer (2009) stated that "feminism begins with the idea that less powerful members of society experience a different reality as a consequence of their oppression" (p. 107). Traditionally, feminist practices have been used with marginalized populations in order to gain a better understanding of their challenges. Feminist practices in social work assume
that women are the experts in defining women's issues rather than society. Thus, it is argued that one can acquire a better understanding of the problems faced by generating such knowledge through the lens of the individual woman. In fact, women who have been oppressed and marginalized are far more at a disadvantage than those who have not been. Thus, a feminist perspective requires advocacy and social justice. Women who are oppressed often see themselves as powerless in society, making them more vulnerable to structural and political discrimination (Turner & Maschi, 2014). Similarly, Eyal-Lubling and Krumener-Nevo (2016) have referred to the use of gender analysis as "a proactive tool” that can be used to identify needs and develop services (p. 247). Women are believed to be more prone to victimization because they are physically unable to defend themselves. This explanation may help to provide insight into the dynamics affecting physically abused women.

Researchers who study gender differences have suggested that the role of women within the family is an essential factor to consider when looking at IPV (Winstok, Weinberg, & Smadar-Dror, 2017). Furthermore, this power differential between men and women suggests that IPV involves a male perpetrating violence against a woman or women (Straus & Gozjolko, 2014). Although gender researchers and feminist researchers agree that there are differences between women and men within the family, the assumption is false that men are the primary aggressor and women are the non-aggressors. Research shows that women are just as aggressive as men in heterosexual partner violence (Dutton & Nicolls, 2005). Although this holds, Dutton and Nicolls (2005) argue that women who are aggressors against their spouse or partner are aggressive because they are defending themselves. Since the data defend this notion that the primary aggressor in heterosexual relationships are men, this feminist perspective is well suited for this study.
Empowerment Theory and Perspectives

Empowerment theory argues that each person has the potential for mastery of one’s own life through individualized interventions and goals, which can lead the powerless and silenced into successful accomplishment of goals (Morgan & Coombes, 2013). Such a theory and perspective are relevant in studying IPV and helpful to research methods in addressing IPV among vulnerable populations such as undocumented women survivors of IPV.

Empowerment is a series of interventions that may lead to self-determination and distributive justice (Morgan & Coombes, 2013). Morgan and Coombes (2013) have described “empowerment as a process that involves the lived experiences of either perceived or actual events in a person’s life, fostering control over resources that can transform the disempowered individual towards self-determination” (p.530). For women who have been disempowered, having autonomy and decision-making powers are an essential part of the process of healing.

Kasturirangan (2008) has posited that "interventions that promote empowerment are achieved through goal setting, assessment, inquiry, analysis, and advocacy" (p. 1468). The use of empowerment in social work, therefore, involves helping the client identify problems and finding solutions, using specific skills and resources. In turn, this will enable them to become more independent and eventually support them in their self-determination. Women who have suffered repeated abuse, over time, can become powerless and silenced (Parson, 2001). Women who experience abuse long-term can develop learned helplessness, which often leads to re-victimization and repeated abuse. Thus, whether a woman leaves or stays in the abusive relationship may involve how much "power and control" the abuser has over a person.

East and Roll (2015) have argued that women who are victims of IPV lose their sense of identity. Moreover, because of this loss of identity, they then become powerless. East and
Roll (2015) have suggested that empowerment practices such as fostering self-determination, and instilling hope through advocacy can help restore their identity, and therefore they become empowered (p. 281). They described the use of empowerment practices as a:

…way to gather information about the problem through interviews, stories, and guided conversations that provide a voice. Providing a voice can be achieved through community gatherings, information sharing, and conscious awareness, which can lead to community activism and involvement" (p. 281).

In conclusion, empowerment theory and approaches can serve two purposes in social work practice: first, they allow the survivor to gain back "power and control;" second, empowerment provides them with an opportunity to learn new skills that if used independently can lead to self-determination. Allowing women to share their narratives through research, as survivors of IPV, can also help empower them to change societal stereotypes (Rappaport, 1995).

**Empirical Research**

**Learned Helplessness.**

Learned helplessness is a condition in which a person feels a sense of powerlessness arising from a traumatic event and a persistent failure to succeed. For victims of violence, this persistent sense of failure can stem from an inability to prevent the abuse from happening along with an incapacity to leave their abuser. Learned helplessness has been studied among victims of IPV. As the argument has been put forth, the repetitive cycle of abuse makes a woman feel hopeless and makes leaving an abuser more difficult (Dugan & Hock, 2006). The battered women syndrome (BWS) can result from long-term IPV. In 1978, Walker (2006) conducted a study with more than 400 battered women. The study was comprised of more
than 5,000 variables using three specific theories around “learned helplessness,” “the cycle of violence,” and “signs and symptoms of psychological distress” that constitute BWS (p. 146). The BWS theory suggests that women who were repeatedly exposed to abuse by their partner become helpless. This “learned helplessness” is associated with “repeated abuse” over a period (Walker, 2006, p. 146).

**Seeking Public Services**

In a study with Indian survivors, Hayes and associates (2017) found that women were less likely to report severe “physical or sexual abuse due to stigma, fear, and lack of knowledge regarding community resources” (p. 81). To understand why help-seeking among IPV was low, the authors studied community-level empowerment with survivors of IPV. They found that “community-level involvement increased helping seeking behaviors by 23%” (p. 82). An understanding of help-seeking behaviors, thus, is also vital in bridging the gap between reporting IPV and seeking services to prevent re-victimization and further harm to survivors.

Undocumented immigrants face more barriers to help-seeking than those who are legalized (Mookerjee, Cerulli, Fernandez, & Chin, 2015). The undocumented population also faces obstacles in help-seeking because of financial stressors, unemployment, and having issues with transportation. Mookerjee and colleagues (2015) stated that in addition to these obstacles, “negative perception of the police and the criminal justice system” can be barriers to seeking public sector help (p. 840). It has also been noted that Latino populations who are undocumented may be one of the most vulnerable people when it comes to facing discrimination, partly because of their fear in reporting, which is due to their legal status. Reina and Lohman (2015) discovered that Latina women experienced racism and
discrimination when attempting to seek services and that these discriminatory practices deterred women from seeking services.

Discriminatory practices used by some public and non-profit agency practitioners prevent the individual from being able to access services (Reina & Lohman, 2015). The barriers they face include their lack of education, language concerns and economic inequalities. As argued by Reina and Lohman (2015), these barriers can be addressed by improving how frontline workers and mental health providers are trained in working with vulnerable populations such as undocumented immigrants. Tower (2006) found that improper IPV screening by mental health providers and physicians was due to a lack of training and available time with the patient. The researcher stated that training which fosters culturally sensitive language and assessment can be a useful tool in assisting patients who want to report IPV.

The Latino Population

Socio-Economic Status, Language, and Education

Reina and Lohan (2015) found that poverty and lack of education place women at higher risk of IPV than those who have an education and a living wage. For undocumented Latina women, the risks are higher. Education among the undocumented immigrant population is significantly lower than U.S.-born residents in the same age range (Gusmano, 2012). Among the ages of 24-64 years, 47% of Latinos have not completed high school compared to 8% of US-born individuals. Among the undocumented adult population living in the United States, more than half have less than a 9th-grade education, compared to just 2% of U.S.-born adults in the same age cohort (Gusmano, 2012). Gusmano (2012) reported that household income for undocumented immigrants in the US was significantly less than for
those born in the United States. In 2007, the median annual household income for the undocumented population was $36,000, compared to $50,000 for those who are U.S. citizens. Since President Trump was elected, it has been predicted that the salary range will be significantly lower across time (Pew Center, 2017).

Most undocumented women who live in the United States have difficulties fully assimilating into the American culture due to language barriers (Padilla & Borrero, 2006). The most common cultural characteristic of the Latino culture is their language. Among the more than 37 million Latinos living in the United States in 2014, 73% speak Spanish at home—which is high but down from the 78% in 2006 (Pew Research Center, 2014). Many immigrants who come to the United States as teenagers and adults have a difficult time learning the English language, making it harder for them to successfully navigate services. Researchers have claimed that too few non-English speaking immigrants make themselves available for ESL classes, making this a potential problem for social workers who want to assist their clients in navigating services (Kulwicki, 2010).

**Migration**

The undocumented Latina immigrant population has risen in the last decade, making this one of the fastest-growing populations in the United States (Pew Research Center, 2014). Furthermore, economists report that the number could be significantly higher since they are undocumented. Although Latinos are the largest growing population in the United States, there has been a decline in migration from Central America, primarily due to stricter enforcement of immigration policy (Department of Homeland Security, 2018). Immigrants who migrate to the states seek a better quality of life for their families and children (Ramos, Carlson, & Kulkarni, 2015; Pew Research Center, 2014).
Some migrants are faced with the decision to leave their families and children behind in pursuit of employment in the United States. Falicov (2014) has stated that "separation between loved ones is an inescapable outcome of migration" (p. 55). Most immigrants must make the difficult decision not only to leave their country of origin but also leave their children, spouse, and family behind for better job opportunities in order to provide for their families at home. Today, however, immigrant men who leave their country to seek work will bring their wives and children to the United States. In contrast, women may migrate alone in order to escape IPV or other forms of oppression (Falicov, 2014).

**Gender Roles.**

Migration can also lead to issues with acculturation, including concerns related to language, gender roles, religion, and marriage (Pew Research Center, 2014). According to the Pew Research Center (2014), more than 37 million Latinos were living in the United States in 2014, with more than 78% speaking Spanish as their primary language. Gender roles in Central America and Mexico are significantly different than those for U.S.-born Latinos (Falicov, 2014). For example, Falicov (2014) argued, women who can speak English and are skilled are able to acculturate more quickly those who are not skilled or do not speak English. In Central America and Mexico, however, the primary role of women is to take care of their families—which means they remain at home with the children, cooking, and cleaning. In the United States, women who stay home with the children are often referred to as "housewives." This type of gender role identification often leads to conflict within the immigrant families because there is the simultaneous expectation that while in the United States, they will work in order to supplement the household income.
Gender roles may be relevant across all cultures in molding one's experience (Ramos, Carlson, & Kulkarni, 2010). Gender roles begin at birth in the Latino culture; girls are taught to be feminine and boys masculine. In Latino families, girls are expected to follow in the footsteps of their mothers. Thus, learning how to cook and clean are among the primary roles of Latinas. On the other hand, males are expected to be tough and the head of the household—and follow in the footsteps of their father (Ramos, Carlson, & Kulkarni, 2010). Boys are taught that they must work in order to provide for their families. In keeping with these culturally defined gender roles, machismo is a term used to described dominance and independence in Latino males; marianismo refers to submissiveness and dependency that is associated with Latina women. Marianismo further amplifies the cultural importance of women as caregiver to their children while the husband or partner provides financially for the household (Ramos, Carlson, & Kulkarni, 2010).

Marriage.

Marriage is an essential element in the Latino culture. For many South and Central Americans, marriage is an expectation given their religion. According to the U.S. Census, approximately 67% of the Hispanic households living in the United States consist of married couples and 44% consist of married couples under the age of 18 (Pew Research Center, 2014). Harris, Skogrand, and Hatch (2008) found that among 25 Latino couples, that a healthy marriage consisted of children, communication, and religion. Moreover, couples whose relationship consisted of conservatively religious males and less religious females tended to have increased domestic violence (Harris, Skogrand, & Hatch, 2008).
Religion.

Religion is prevalent in the Latino culture; religious beliefs can be at the forefront of Latino decision-making. For many Latinos, religion and spirituality are central. The Pew Research Center (2014) found that 55% of the Latino population living in the United States identified as Catholics, 22% identified as Protestant, 16% identified as other affiliated religion, followed by 3% who stated their affiliation to be Christianity. Commonly, Latina women who are in abusive relationships may never leave an abusive relationship because it is viewed as a "sin" to leave the marriage. Latina women are faced with having to make difficult decisions that impact their relationship with their abuser. If children are involved, it can create family disruptions, which can also impact their relationship with God (Harris, Skogrand, & Hatch, 2008). In the Latino culture, it is most common for the family to seek advice from their pastor or priest rather than seek formal services (Harris, Skogrand, & Hatch, 2008).

Since family, faith, and community are often at the forefront of their decision-making, having an understanding and respect for their beliefs and traditions is an essential part of a healthy interaction with the Latino population. The role of marriage and family is vital in the Latino population, requiring an awareness of how this may impact a Latina’s decision to leave or stay in an abusive relationship. For Mexicans, divorce is “seldom an option because marriage is seen to be an institutional arrangement for life” (Falicov, 2014, p. 348).

Criminal Justice System

Criminalization of IPV

Since the emergence of the feminist movement, IPV has been at the forefront of social scientists and criminologists in studying police practices and attitudes towards IPV incidents and victims (Blaney, 2009). Several studies have found that police arrests have significantly
increased since the enactment of the VAWA in 1994. Criminologists who have studied pro-arrest policies have been skeptical about their effectiveness (Eigenbert, Kappeler, & McGuffee, 2012). While there has been progress in police training involving IPV, many police officers feel it is biased and "too women-centered" (p. 126).

From the literature, it is known that a police officer is at more risk of death from IPV calls than any other 911 calls (Carroll & Meyer, 2015). No matter how much training a police officer receives, there is not enough preparation in responding to IPV emergencies. This is because police officers are often faced with life and death decisions, sometimes having to react within a matter of seconds. Carroll and Meyer (2015) state that the number of police officers' deaths from 1996-2009 was 771, of which 116 were from IPV calls. Although this is relatively low when compared to officers killed in other related lines of duty, it is still an indication of how high-risk IPV cases are. Diemer and colleagues (2017) found that "actions taken by police are fundamental to achieving effective protection of victims and preventing future violence" (Diemer, Humphreys, Healey, & Ross, 2017, p. 339). In policing, discretion has been referred to "as the power of decision that a police officer has as a part of their job" (Nickels, 2007, p.576). Similarly, Goldsmith (1990) argued that police discretion and behavior should be "considered a necessary aspect of police work" (p.92). However, mandatory arrest policies, required by local statutes, have left police officers with no alternative but to enforce such a policy. In fact, mandatory arrests were deemed a critical tool for the functioning of the police departments and their relationship with the public. However, this practice has more recently been scrutinized (Diemer, Humphreys, Healey, & Ross, 2017).
Traditional Policing.

Prior research on policing has identified the use of excessive discretion as problematic and ineffective when handling IPV related calls (Diemer, Humphreys, Healey, & Ross, 2017). Thus, this discretion led feminist advocates and researchers to argue for more effective arrest policies. Police officers, who once treated IPV as a family matter, were now faced with new arrest policies. Horwitz and colleagues (2011) argued that the lack of trust between the public and police is due to a lack of accountability by the court, prosecution, and community in IPV interventions. Another concern noted were the mandatory and pro-arrest policies, which can create a tension between the officer who is enforcing the law and the victim who may want intervention without an arrest. This unintended consequence was a double-edged sword in policing (Diemer, Humphreys, Healey, & Ross, 2017). IPV victims tend to feel that mandatory arrest may be ineffective because it does not guarantee prosecution or imprisonment, placing the victim at greater risk of imminent danger of death or serious physical.

Mandatory Arrest Policy.

Myhill and Johnson (2016) argue that "nowhere has the question of police discretion been more hotly contested than in relation to domestic violence" (p.4). From the 1970s and onward, the use of police discretion in response to IPV has been heavily scrutinized. White, Goldkamp, and Campbell (2005) state that the traditional police response to IPV has become an ineffective form of policing. In fact, police officers were encouraged to use their “discretion when responding to domestic disturbance calls” (p. 262). At times, women reported that they felt coerced into not filing a complaint (Horwitz, et al., 2011). Sometimes when there were multiple calls to 911, the researchers found that police officers threaten to arrest both parties—and in
some cases where both parties were intoxicated, police would arrest both. This under-enforcement led to stricter arrest policies.

The Minneapolis Domestic Violence Experiment (MDVE) was a randomized experiment that required police officers to track how they would intervene in domestic violence call (Siddique, 2013). The results of the MDVE were convincing due to randomized treatment assignment and assessment of treatment effectiveness (Siddique, 2013). From these findings, law enforcement agencies began instituting mandatory arrest or pro-arrest policies. However, it was found that some unintended consequences of mandatory arrest often placed police officers on the opposite side of the judicial scale—meaning survivors held a negative perception of police. Some women wanted their abusers to be prosecuted, while others did not (White, Goldkamp, & Campbell, 2005). Another unintended consequence was dual arrest. A dual arrest can occur when it is unclear to the police who is the primary aggressor. This was often associated with inexperienced officers and a lack of IPV training (Stalans & Finn, 2006). Klockars and associates (2007) argued that to enhance police integrity, administrators must be held accountable. Hence, holding them accountable created an environment that enforces effective policies and better-trained officers (Klockars, Ivkovic, & Haberfeld, 2006). When officers are trained in responding to IPV calls, they can use their discretion more effectively.

**Violence Against Women Act (VAWA) of 1994.**

This law was enacted in 1994 to address the inadequacies of the criminal justice system in dealing with violent crimes against women (Department of Justice, 2020). The act sought to identify and address the impact of these violent crimes by emphasizing the need for coordination among law enforcement, prosecutors, and victim services. It addressed congressional concerns about violent crime, and violence against women in several ways. It allowed for enhanced
sentencing of repeat Federal sex offenders; mandated restitution to victims of specified Federal sex offenses; and authorized grants to State, local, and tribal law enforcement entities to investigate and prosecute violent crimes against women, among other things. VAWA has been reauthorized three times since its original enactment.

Most recently, Congress passed, and President Obama signed the Violence Against Women Reauthorization Act of 2013, which reauthorized most VAWA programs through states among law enforcement agencies. Law enforcement agencies were required to train police officers in the areas of cultural sensitivity, effective communication, and behavioral sciences (National Domestic Violence Hotline, 2020). In addition, police officers were required to learn criminal law and procedures, police science, and tactical training. These new provisions had a significant impact on reducing violence against women. Yet, little has been done regarding the protection of the "undocumented" immigrant, such as the increase of government research funding addressing violence in immigrant communities (Modi, Palmer & Armstrong, 2014).

Summary of the Literature and Gaps

This literature review began with feminist and empowerment theories that help to inform this research study, and that support a phenomenological approach for the research methods. As noted earlier, few studies probe the problems that undocumented women victims endure. Gaps in knowledge about their lived experience, reporting of IPV, and how they navigate social support systems and services must be addressed in answering the underlying question of why there is underreporting among undocumented survivors of IPV. Studies of note cited above are those that identified a lack of cultural competency among those serving the undocumented population and the impact that traditional policing has on discretion and IPV mandatory arrest policies. The lived experience and nature of IPV among such women are understudied. Furthermore, despite
research on IPV and police practices, relatively little is known about the dynamics involved in decision making regarding reporting IPV to the police. Finally, help-seeking is a critical aspect of moving from being a victim to becoming a survivor, independent from her abuser. Thus, more research is needed to understand better how such women, facing enormous impediments due to language, being undocumented, having a low socioeconomic status with accompanying stigma, can find pathways to safety and survival.

Few studies undertaking exploratory qualitative research have been conducted. Underreporting among undocumented Latina women continues to pose a threat to this vulnerable population. Such gaps identified warrant more research studies that enable women survivors to tell their own stories of their abuse, reporting issues, and help-seeking. Feminist and empowerment theories will help to inform the design, recruitment, the structure of such a study along with analysis of the findings. The timing and location for the study will also be informed by such theories. Some of the answers to this underlying question of why underreporting of IPV occurs among the undocumented population will help to identify key areas for future research.
Chapter 3: Methodology

Study Rationale

Given the dearth in studies involving the lived experience of undocumented Latina survivors of IPV and their help-seeking patterns, a phenomenological approach was used to explore why underreporting is so prevalent among this population. Errasti-Ibarrondo and associates (2018) stated that the primary reason for phenomenological analysis is to study the lived experience and that there are two fundamental ways in which one can capture the lived experience: 1) empirical method; and 2) reflexive practice. An empirical approach refers to a “systematic way a researcher introduces evidence by observations or experimentation” (p. 1727). A reflexive method refers to a way information is collected through observation; however, the researcher is using "history and language" of the interviewee to interpret meaning (Errasti-Ibarrondo, Jordan, Diez-Del-Corral, & Arantzamendi, 2018; Hein & Austin, 2001).

Study Format

This study examines the "lived experience" of 15 undocumented Latina survivors of IPV. To that end, four main research questions helped to provide a framework for probing why there is underreporting of IPV among Latina victims:

Research Questions:

Research Question #1:

How has the lived experience of IPV among undocumented Latina women impacted their decision to leave or not leave an abuser?

Research Question #2:

What barriers influenced their decision not to report the IPV to law enforcement?
Research Question #3:
What motivators influenced their decision to report IPV to law enforcement?

Research Question #4:
How do undocumented women navigate social support systems?

These questions pull from prior studies to explore the lived experience in greater detail, using them to gain insight into why underreporting is more prevalent among the undocumented Latina survivors of IPV.

Since this researcher sought to explore the why and how of a phenomenon, an exploratory, qualitative research design was best suited for this study (Creswell, 2007). In qualitative research, focus groups are often used to gather information about a specific phenomenon and with a group. Since this population is at higher risk of deportation, focus groups were not used. Instead, each participant was interviewed privately in a location of their choice. In doing so, the participants were able to tell their stories and share their views without fear of the information getting back to their community.

Gaining Approval to Conduct Research

This researcher gained approval from the University at Albany Institutional Review Board to conduct this study. Flyers about the study were disseminated in a community in the northeast, inviting undocumented Latina women IPV victims to participate. Compensation was provided in the form of thirty dollars in cash. Each of the respondents were informed of the purpose of the study and how their stories could advance research. This researcher reviewed the consent forms with each respondent in Spanish, reading them out loud with them. Respondents were not required to sign the consent forms due to the need to protect their anonymity, privacy
and their vulnerability to exposure. Participants provided first names; however, they were informed that their names would not be identified in the study.

**Sampling Methods**

Due to the nature and difficulties in gaining access to this hard-to-reach population, convenience sampling was used. The first ten participants were recruited through convenience sampling. This sampling technique is known as an availability sampling, which is a form of a non-probability sample where people are readily able to be reached (Fortune & Reid, 1999). Since this researcher had prior exposure to this hard-to-reach population, this was the best method to obtain the ten participants. The remaining five participants were recruited using a snowballing technique.

**Study Participants**

The research sample consisted of in-person interviews with fifteen undocumented women. Fliers were provided to each of the participants that included the contact information and a disclaimer that the study was voluntary, and that no identifiable information would be disclosed. Each of the participants was pre-screened for appropriateness for the study. All fifteen agreed to be interviewed and had reported prior abuse. Screening consisted of several preliminary questions that were asked before being admitted into the research study. The interviews were audiotaped for accuracy and later transcribed for analysis.

**Challenges with Recruitment.**

There were several challenges faced while attempting to recruit this vulnerable population. First, the recruitment took place during a time when there was heightened fear of deportation and this undocumented study population was at most risk. The second challenge was having limited access to domestic violence shelters, crisis centers, or churches that provide
refuge to undocumented immigrants because of the commitment to keep their clients’
information private.

Demographics of Participants.

The eldest participant was sixty-six-years old, and the youngest was thirty years old
(Table 2.). The participants who reported having at least one child also met the definition of
being either poor or near poor (U.S. Census, 2016). All the participants had no medical insurance
or formal income or in-kind support, such as TANF or SNAP. Their education levels were
relatively low. Three participants reported completing high school (n=3); twelve participants
reported having less than high school education (n=12). Fourteen participants stated that they had
children (n=14), and one participant reported having no children (n=1). Three participants
indicated that they had "work sponsorship" from their employer. An H-IB visa is the most
common way for employers to sponsor professional workers in the United States. To qualify for
this sponsorship, the employee must hold a position that requires at least a bachelor's degree or
equivalent experience in that field. The three participants who received the H-IB visa received on
the job training as a patient care technician.

Interviews

The interviews consisted of 28 open and closed-ended questions that generated
descriptive and demographic information such as country of origin, where they were employed,
education level, number of children, and whether they were married, divorced, or single. The
interview was semi-structured for consistency and dependability. Before the interviews took
place, each participant was informed that she could stop or pause at any time to allow for
processing and reflection of their experience with abuse. This researcher used reflective
listening, which allowed the participant to share her stories without interruption. Reflective
listening was also helpful because it encourages empathy (Vecchi, 2009). A series of open-ended questions provided the participant with the comfortability of having a conversation rather than feeling as if she were being interrogated (see Appendix A for interview questions). The semi-structured interviews ranged from one hour and thirty-six minutes to approximately two hours and thirteen minutes. Participants were able to express their feelings without interruption and without judgment, which made it safe for them to reveal their experiences. During the interviews, this researcher asked clarifying open-ended questions, paraphrasing to summarize, and probed for further responses for deeper understanding. Each participant provided a unique and thoughtful response when asked about their lived experience.

**Semi-Structured Questionnaire.**

Using a semi-structured questionnaire, each participant was guided in how they might begin their story in a way that made them feel most comfortable. This questionnaire used a strength-based approach. Thus, questions began with how, what, where, and when. No “why” questions were probed as they might have appeared to be judgmental. Having a semi-structured questionnaire helped to be consistent and ensure that all the same questions were asked of all the participants. Thus, it enhanced the credibility of this research (Creswell, 2007).

**Data Collection & Analysis**

Data collection began upon receiving approval from the University at Albany Institutional Review Board (IRB) on June 27, 2018. Modification to the original IRB submission was submitted on January 22, 2019, for a title change and an increase in the sample size of ten to fifteen. After the approval from the IRB was received on January 27, 2019, the remaining participants were recruited and interviewed to meet the recommended sample size of fifteen. All the interviews were audiotaped for translation purposes. Common words were later color-coded.
for the clustering of themes. In compliance with IRB protocol and guidelines, no identifiable information was asked. This researcher used a transcription agency to transcribe the interviews from Spanish to English.

**Delimitation**

A phenomenological approach allowed this researcher to gain deeper understanding of the lived experience of the survivor. Researchers and practitioners often suppose that they know better than their client or research participant because of their training and expertise. However, this is not aligned with an empowerment approach. In fact, this view may suggest that the client is incompetent of making informed decisions about their life. Empowerment theory suggest that the client is the expert regarding their own life and that practitioners and researchers should be more sensitive to the need for self-actualization. Thus, this phenomenological research approach allowed each of the participants to tell their stories in the way they felt most comfortable, which included their perceptions and interpretations of their journeys to safety and help.

**Transferability**

All fifteen participants conducted their interviews in their native language of Spanish since all the respondents were from Spanish speaking countries. Since many of the respondents were from Central and South America, clarification and translation of words and meanings were used during the interview. For example, marriage was defined by some of the participants as courtship or involving domestic partners, while others defined marriage as being legally married. This clarification was vital for the authenticity of the information collected. The researcher used her knowledge of Latino culture to clarify gender roles and expectations and how they may have influenced their decision to report. Thus, clarification and translation of meaning was significant as it provided more in-depth information about underreporting.
**Dependability**

This refers to how stable the data are over time and over the conditions of the study (Connelly, 2016). It is similar to “reliability in quantitative research with an understanding that the stability is dependent on the nature of the study” (p. 435). One way in which the researcher was able to achieve this goal of dependability was to conduct the interviews in a location that was most comfortable to the participants. Participants were interviewed in places that made them more easily accessible for them. This was especially important when they had transportation and childcare issues and were not able to leave their homes due to fear of U.S. Immigration and Customs Enforcement (ICE).

Dependability was also achieved through the accuracy of the information shared. In qualitative research and analysis, this is achieved through consistency. This researcher was concerned with how well the participants answered the questions and whether responses were dependent on my positionality. First, each of the participants could share as much information about their lived experience as they felt comfortable. Second, the questions were aligned with the empowerment and feminist perspectives. Thus, instead of asking why they stayed with the abuser, the participants were asked what happened in the abusive relationship that influenced their decision to leave or stay with the abuser. This form of questioning is used in motivational interviewing and is an empowering tool when working with and conducting research with survivors or victims of IPV.

**Trustworthiness of the Data**

Cope (2014) refers to credibility as the "truth of the data or the participant views and the interpretation of them by the researcher" (p.89). For transparency of the data, this researcher explained the recruitment process, the challenges with recruitment, the use of audiotape and
transcripts for interpretation and clarification. De-briefing for clarification and interpretation was conducted with each of the participants. After each interview was conducted, this researcher listened to each recorded interview and reread each transcript for accuracy. This audit of the tapes and transcripts helped to enhance the credibility of the research. Cope (2014) argued:

That an audit trail is a collection of materials and notes used in the research process that documents the researcher's decision and assumptions. Examples of study materials are interview transcripts and data analysis and process notes (p.90).

Trustworthiness of the responses to the four research questions in this study was an important concern. In qualitative research, trustworthiness is achieved through the credibility of the data elicited. First, this researcher investigated her own biases, preconceptions, and judgments that she may have had. Then, she listed them prior to conducting the interviews. These biases were then shared through peer-debriefing with dissertation committee members as the data were being interpreted. Prior to conducting an interview each participant would engage in a pre-interview casual discussion, which would allow them to begin the interview as they felt ready. This pre-interview informal discussion was not a part of the data analysis; the primary purpose was to stimulate conversation and some relationship building. After each interview, a summary of what was said was reviewed with the participant for consensus and validation. This form of member checking allowed for each participant to clarify or add information that was not obtained in the original interview.

**Ethical Considerations**

To protect the identity of this vulnerable population, this researcher did not collect personally identifiable information. Ethical issues that were addressed were privacy for each participant; disclosure of identity was minimal since each of the participants were interviewed in
an undisclosed location of their choice. Participants were interviewed in the language of origin and with follow-up questions posed for clarification and consistency. Participants were asked before each interview to "orally accept" and consent to the study. They were told about the length of time, the incentive for participating, study rationale, and the voluntary nature of this study. Due to the nature of the study, they were informed of the possible risk of reliving their traumatic events, and in the event that this occurred, they would be provided with information on how to access a National Victim Crisis Hotline and County Crisis program for crisis intervention.

Each participant read the consent form that explained the purpose of the study and how the information would be used to advance research and knowledge about IPV among undocumented women. Additionally, they knew that their responses would be categorized under the use of a pseudonym to minimize exposure.

**Strengths of the Approach**

The strengths of this phenomenological approach comprise more of an in-depth understanding of human behavior through conversations with women who have survived IPV. Creswell (2007) stated:

> Qualitative research is used when a problem or issues needs to be explored; when we need a complex detailed understanding of the issue; when we want to empower individuals to share their stories, hear their voices, and when you want to minimize the power relationships that often exist between a researcher and the participants of a study (p. 39).

In retrospect, this approach was effective in obtaining rich information about participant views, perceptions, and lived experiences as survivors of IPV. Using this approach was helpful in capturing relevant information that a survey or structured questionnaire would
not have provided. It also allowed this researcher to gain better understanding into their
culture and how their culture also impacted their decision-making. Participants provided
insight into religion, marriage, education, and family support and traditions. Another strength
of this phenomenological method was allowing each participant to share her stories in a safe
place, which allowed for authenticity and empowerment. Since the foundation of this study is
based on empowerment and feminist theories and perspectives, this researcher highlighted
similarities in their stories rather than differences. Thus, this approach allowed for women to
feel that they were not alone in sharing their life experience.

Social Desirability

To limit socially acceptable responses, this researcher used culturally sensitive language.
By using culturally sensitive language, this researcher elicited answers that were aligned with the
semi-structured questionnaire, which limited the use of a translator to gather the information.
Charles and Dattalo (2018) state that the use of culturally appropriate language when
interviewing increases reliability and validity within the scope of research. Additionally, by
speaking Spanish, this researcher was able to elicit information through conversational
questioning, which facilitated follow-up questions. This strengthened the reliability of the data
being collected.

Although, self-disclosure played a significant role in forming a relationship with the
research participants, one might assume that this would illicit responses based on what is socially
desirable or politically correct. Such socially desirable responses did not seem to be elicited. In
traditional therapy, social workers are not expected to share personal information about
themselves and are expected to take an objective point of view (Charles & Dattalo, 2018).
However, in feminist therapy, self-disclosure is used to advance the therapeutic process (Eyal-
Lubling & Krumner-Nevo, 2016). Self-disclosure is defined as a “process in which a social worker shares his or her inner thoughts and emotions deliberately, in order to build trust and rapport” (p.248). Since this research used a feminist and empowerment approach, self-disclosure helped to build trust and rapport with the participants. It was assumed that this would increase the confidence among the research participants and reduce embarrassment and shame that is commonly associated with IPV.

The Researcher

Researcher Positionality

Self-disclosure was used to gain insight into the lived experience of undocumented Latina survivors of IPV. Since the author is a Latina woman, who also is a survivor of IPV, this disclosure was seen to be a potential benefit for participants who might not have felt comfortable sharing such painful stories that may make them feel as if they are being judged.

Researcher Identity

As a Puerto Rican woman, I was born in Brooklyn, NY. Shortly after giving birth to me, my mother returned to Fajardo, Puerto Rico (PR), until I was six years old. In 1981, my mother settled down in East Harlem. During the 1980s, this neighborhood was predominantly African American and Hispanic. As a migrant from PR, I was able to identify with feelings surrounding acculturation and how these feelings shaped who I have become today. Some of the struggles I faced were similar to the struggles these women faced and are facing today. I began my career working as a police officer. My primary role as a police officer was to maintain peace and enforce the law. As a survivor of IPV, I learned that domestic violence was not merely about socioeconomic status or having an education more so, that family expectations played a significant factor.
As a social worker, I worked in various forensic settings and with multiple populations. I provided interventions in cases of domestic violence, substance abuse, mental illness, and crisis intervention with survivors of IPV. In conducting many assessments, I was able to comprehend the importance of providing services and the importance of doing so in a culturally and sensitive manner. A social workers primary responsibility is to provide the "best" possible service to the client. The National Association of Social Workers states in section 1.04 of the NASW that "social workers should practice within their areas of competence and develop and enhance their professional expertise and should continually strive to increase their knowledge and skills through training and education " (NASW, 2008, Sec.1.04). In turn, advancing knowledge through research and practice is an essential ethical principle to consider when providing a service.

Summary of Chapter

There is a large undocumented women population who are living in the United States without any resources or means to leave an abusive relationship. While there have been studies that identify barriers to help-seeking behaviors, there are few that utilize a phenomenological approach. The exploratory research helped to capture more information about why underreporting is more prevalent with the undocumented women population during an era where there is heightened fear of deportation (Creswell, 2007). Peer debriefing of the findings through consultation with faculty advisors further helped to ensure interpretation and analysis credibility.
Chapter 4: Findings

The purpose of this phenomenological study was to identify and explore the barriers to reporting and successful navigation of the social support systems by undocumented Latina IPV survivors. The stories of the research participants revealed five themes that were commonly experienced: 1) the prevalence of multiple forms of abuse; 2) presence of impediments to reporting; 3) important facilitators that encouraged reporting; 4) adverse encounters with court; and 5) experiences when help-seeking. These themes were generated from participant responses to the four research questions:

- **Research Question #1**: How has the lived experience of IPV among undocumented Latina women impacted their decision to leave or not leave an abuser?
- **Research Question #2**: What barriers influenced their decision not to report the IPV to law enforcement?
- **Research Question #3**: What motivators influenced their decision to report IPV to law enforcement?
- **Research Question #4**: How do undocumented women navigate social supports systems?

The table below presents the themes and subthemes resulting from the responses to the four questions that guided this research (See *Table 1: Research Questions and Themes*).
Table 1:

Research Questions and Themes

<table>
<thead>
<tr>
<th>Question: Themes/Sub-themes</th>
<th>Percent of Participants</th>
<th>Number of Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>RQ#1: How has the lived experience of IPV among undocumented Latina women influenced their decision to leave or stay with the abuse.</strong></td>
<td>100%</td>
<td>15</td>
</tr>
<tr>
<td>Theme 1: Multiple forms of abuse</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Sub-theme 1: Emotional impact</td>
<td>100%</td>
<td>15</td>
</tr>
<tr>
<td>• Sub-theme 2: Multiple forms of fear</td>
<td>100%</td>
<td>15</td>
</tr>
<tr>
<td><strong>RQ2: What barriers influenced their decision not to report IPV to law enforcement?</strong></td>
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<tr>
<td>Theme 2: Impediments to reporting</td>
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<td>• Sub-theme 1: Fear of deportation</td>
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<tr>
<td>• Sub-theme 2: Prior negative experience with the police</td>
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</tr>
<tr>
<td>• Sub-theme 3: Fear of losing a job by the abuser or survivor</td>
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<tr>
<td><strong>RQ3: What motivators influenced their decision to report the IPV to law enforcement?</strong></td>
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<td>Theme 3: Facilitators for reporting</td>
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<td>• Sub-theme 1: Family and peer support</td>
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</tr>
<tr>
<td>• Sub-theme 2: Fear for the children</td>
<td>20%</td>
<td>3</td>
</tr>
<tr>
<td>• Sub-theme 3: Fear of death</td>
<td>20%</td>
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<td>• Sub-theme 4: Positive experience with police</td>
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<tr>
<td>• Sub-theme 5: Positive experience with a service provider</td>
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<tr>
<td>Theme 4: Adverse experience with Court</td>
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<td>Theme 5: Experience with help-seeking</td>
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<tr>
<td>• Sub-theme 1: Public services</td>
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<tr>
<td>• Sub-theme 2: Non-profit services</td>
<td>40%</td>
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<tr>
<td>• Sub-theme 3: Informal services</td>
<td>66%</td>
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Demographics

Of the fifteen participants, nine were married, four were divorced, and two were never married but were in a domestic relationship. Their ages ranged from 30-66 years old. Two of the
participants reported that this was their second marriage. Twelve participants said they had less than a 10th-grade education, and 3 completed high school. One reported some college, and 2 reported job-skill training. Three participants were unemployed, and 12 were employed (See Table 2: Participant Demographics).

Table 2: Participant Demographics

<table>
<thead>
<tr>
<th>ID</th>
<th>Age</th>
<th>Grade Completed</th>
<th>Employed/Unemployed</th>
<th>Number of Children</th>
<th>Language</th>
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Research Question #1 Findings

How has the lived experience of IPV among undocumented Latina women influenced their decision to leave or stay with the abuser?

Responses to this question yielded the following: All fifteen of the participants reported some form of abuse. Their answer to this question generated the following sub-themes.
Theme 1: Multiple forms of abuse.

Multiple forms of abuse were found to be shared among all fifteen participants. This included physical, emotional, verbal, and sexual abuse. For many of the participants, the abuse occurred over time. Some of the participants reported that the abuse occurred more frequently than others, while other participants said that the intensity of the abuse was severe.

Participant 1: “The first husband would become drunk and later violent. When he was not drinking alcohol, he was not violent. He would beat me. He pulled my hair and punched me so hard that he knocked my tooth out. My second husband was abusive too. He slapped and pushed me against the wall because I told him that he needed to help me with the expenses in the house.”

Participant 2: “My husband was a nasty drunk. He would hit me as if I were a punching bag. The abuse got so bad that I thought he was going to kill me.”

Participant 3: “I was scared that he would hit me. He came close to hitting me, but he did not. He would throw stuff and break it because he was so angry. He became angry when I asked him for money or if I would ask him where he was at.”

Participant 4: “We lived together for about two years when the disagreement turned into daily arguments. One day he slapped me. He grabbed me by my shirt and pulled me back then slammed me onto the floor. I don’t remember anything else.” For Lisa, the isolation was to keep her from her family and friends. She explained: “I was not allowed to speak with my mother or father; if he found out that I did, he would get mad and hit me.”

Participant 5: “I knew he was cheating because he would come home late at night smelling like women’s perfume. When I would confront him, it will lead to him pushing me and shoving, and we fought several times. I fought back, but he was stronger than I was.”
Participant 6: ‘He was so cold at times. He was not as affectionate as he used to be. I remember him slapping me so hard that I could not feel my face. I felt numbness for days.”

Participant 7: “The verbal abuse was worse than the physical abuse. He would push, shove, and even spit on me. He would call me a bitch or whore. He was like, and nobody is going to want you with having children.”

Participant 8: “He was controlling and an alcoholic. “At first, it was alright, but then it became frustrating to the point that I had to shut off my phone. I remember him following me out of the supermarket and humiliating me in front of other people. He was drunk. He slapped me and walked away as if nothing happened.”

Participant 9: “My husband was a ‘typical’ abuser. He would torment and belittle me in front of others. He didn’t care that he was embarrassing me and wanted to hurt me, and he did.”

Participant 10: “He would hold me down and place his hand over my mouth so that I wouldn’t scream. He would then call me stupid and spit on my face.”

Participant 11: “After he would hit me, he would force me to have sexual intercourse. When I would refuse, he would tell me that he would find someone else.”

Participant 12: “My husband was a drug addict. He was addicted to cocaine. He promised that he would never hit me and that he loved me. He lied. One day he slapped me and was choking me. I begged him to let me go. If it were not for my daughter running out to help me, I probably would not be alive.”

Participant 13: “He would threaten to tell the police that I was abusive to my son. I pushed me several times and held me down, but he never left marks on me.”

Participant 14: She described her intimacy with her spouse as “demeaning,” making her feel “worthless.” She said: “I don’t have to tell you the details; it was horrible … to be held down
and forced to have intimacy with someone who doesn’t respect or value your worth.” She described an incident when she went to drop off the children, and her husband was intoxicated. She said: “I went over to drop the children, and he called me into the room. When I went to the room, he pushed me into the bed and began taking my clothes off. He held me down and forced me to have sex with him. I was scared that the children would hear me scream so, I kept quiet. He would make me feel as if I were a prostitute. He said: “If you love me, you will do whatever I tell you.” I felted ashamed and embarrassed.”

Participant 15: “My husband would call me a slut and said that I was worthless. He would verbally abuse me to get me to stay with him. When the verbal abuse wouldn’t work anymore, he when then spit and push me.” If I was going to make it, I had to leave.”

Summary of Theme 1: Multiple Forms of Abuse

According to the CDC, IPV is defined as the abuse or aggression that occurs in a close relationship. IPV can include past and current relationships. Walker (1979) describes IPV as repeated physical, emotional, and verbal abuse that can occur over time. For all fifteen participants, the intensity and frequency of the abuse overtime yielded responses that comprised a sub-theme 1: emotional impact.

Sub-Theme 1: Emotional impact.

For all these women, the decision to report the abuse was a process that involved multiple layers of emotions. For some women who reported their abuse as less frequent or less severe, their decision to leave their abuser was much more complicated than for others who reported much more severity and frequency. For those who suffered severe and more frequent abuse, they expressed the emotional impact of the violence in their descriptions of helplessness, fear,
embarrassment, guilt, anger, shame, feeling betrayed, feeling worthless, and feeling alone. These all comprise some form of emotional impact, expressed by 100% of the participants.

Participant 1: “I felt helpless at times.”

Participant 2: “The abuse was so bad that I was scared for my life.”

Participant 3: “I was confused. Sometimes, I would miss him other times. I loved him, but I mostly felt so alone.”

Participant 4: “A male officer came to the hospital to ask me some questions. I answered the questions, and he stated that he could not take the report because the assault did not take place in his jurisdiction. The officer took pictures of my injuries. He did not ask me if I was ok. I was crying, and he did nothing to console me. I felt so embarrassed.”

Participant 5: “The cheating made me feel shame and guilt at the same time. It was like if I had to forgive him for seeing another woman. As if hitting and belittling me wasn’t enough.”

Participant 6: “It was time, I had enough of being a punching bag. My first husband was abusive, and now my second. I was angry.”

Participant 7: “I felt alone. At the time, I would feel as if I had no more fight in me.”

Participant 8: “I felt scared.”

Participant 9: “My husband would torment and belittle me in front of others. He didn’t care that he was embarrassing me. He wanted to hurt me, and he did.”

Participant 10: “The verbal abuse was worse than the physical abuse. I felt powerless.”

Participant 11: “I felt as if I was forced to have sex with him. He would tell me that it was my job as his wife to please him sexually; otherwise, he will ‘get it from someone else’…. making her feel unworthy.”

Participant 12: “I felt hurt and betrayed.”
Participant 13: “He would threaten me all the time. I am going to tell the police that you are abusing our son. I felt angry at him.”

Participant 14: “My husband’s demeanor towards me made me feel ‘worthless’.”


Summary of Sub-Theme 1: Emotional Impact.

All 15 of the participants in this study reported feelings and emotional impacts of the abuse that some might say comprise some form of learned helplessness. Women who fall victim to physical, emotional, verbal, and sexual abuse over time may begin to feel helpless and hopeless. Since these women were recounting their journeys, it is unclear to what extent they may have moved through a phase of learned helplessness. However, some of the feelings and dynamics they described seem to be possible attributes of learned helplessness. These include feeling hopeless, insecure, guilty, and isolated. According to Dutton and Painter (1993), this repeated abuse overtime makes it extremely difficult for women to leave their abuser. Studies show that it can take a woman seven attempts before leaving her partner permanently. For more than half of the women, it took longer. Some of the women reported multiple abuse by their partners and reported several unsuccessful attempts to leave their abuser.

Sub-Theme 2: Multiple Forms of Fear.

All 15 participants reported having some forms of fear over losing their children, of their children being abused, of not having financial support, and of deportation. Their lived experience of abuse generated this subtheme of multiple forms of fear. Through their lived experience, we learned that fear of losing their children, fear of being abused, fear of deportation, and fear of not having financial support had an impact on their decision to leave or stay with the abuser.
Participant 1: “If I had stayed, I would not be here talking to you right now. Leaving was the only way to survive. It took me years of planning on how I was going to leave. I was not sure how I was going to leave; I tried doing so many times before … it felt impossible. I had nightmares about leaving, finding my kids dead, him killing my parents. It all felt real. I was scared to death about my family and kids. I felt helpless at times, but I knew I had to call the police, so I did. It was years of abuse before I got the courage to leave him for good.”

Participant 2: “The abuse got so bad that it left her with no choice but to leave. She said, “Either I was going to kill him, or him kill me” … referring to her husband.

Participant 3: “They were not always supportive of me, so it was shocking to know that they would call the police on their son. I guess they got so tired of hearing us argue every day that they had enough. I could not see myself calling the police because I was afraid of him losing his job. I wasn’t pleased when they called the police, but they did.”

Participant 4: “I went to the hospital because my mother said that I had to make a police report. I was scared, but I had no choice but to leave.”

Participant 5: “I didn’t want to call the police on my husband. My husband had been arrested twice before for DWI, and I was afraid that he would lose his job.” I could not see myself calling the police on him. One day we were arguing, and it got really loud, my neighbor knocked on the door, but we didn’t hear. A few moments later, the police were knocking on my door.”

Participant 6: “I was expecting sympathy, but instead, I was criticized by parents. They blamed me for not making the marriage work. My father said, “you should have been a better wife and mother to your children. How are you going to support your children now that you
don’t have a job?” She stated, “Having my daughter witness this abuse made me a bad mother, and I no longer wanted to be a bad mother, so I left.”

*Participant 7:* “The only way to survive was to leave.”

*Participant 8:* “I knew I had to leave before he killed me. It was getting worse each day. He would constantly call me several times a day. At first, it was all right, but then it became frustrating to the point that I had to shut off my phone.”

*Participant 9:* “I was scared of the police.” She explained: “When Obama was President, he was not constantly in the news saying that he wanted to deport us. He made us feel wanted and understood that we were a part of this world and was going to make it better for us. After the President accused us of being “illegal and criminals,” I was terrified of getting deported. I didn’t care what I had to do to make it work with my husband, but I had no intention of calling the police.”

*Participant 10:* “He wasn’t always mean to me. There were ups and downs. I guess I forgive him more than I should have.” She continued. One day “I felt empowered; although I wasn’t sure how and what I was going to do when I left, it was the breaking point in my life.” She recalled when the First Lady Michelle Obama was giving a speech on behalf of then Presidential candidate Hillary R. Clinton. She continued: I was cleaning the dishes when I heard Michelle Obama say, “when they go low, we go high.” “I felt as if she was talking to me,” she explained. So, she thanked former First Lady Michelle Obama for giving her the courage to leave.

*Participant 11:* “Once again, I fell for the wrong man. One day, I found the courage to tell myself, this is it. Next time I will call the police, and the next time it happened. I called the police.”
Participant 12: “I tried leaving before; it was difficult. He is the father of my daughter, but this time, it was different. When I saw the fearful look in my daughter’s eyes, that was my breaking point. I remember her screaming, ‘Daddy don’t hit mommy! Leave her alone! Please! Daddy, don’t!’ I would never forget that day. It was a difficult decision, but I had no choice.”

Participant 13: “I took the insults and beatings because I felt I had no choice, but my son doesn’t deserve any of this, and certainly, I was not going to let him abuse my son too, so leaving was the only way.”

Participant 14: “In my culture, it’s a sin to leave your husband. I was raised in a strict Catholic household where marriage was forever.” She explained that her near to death experience left her no choice but to call the police. “One day, he was choking me, and I couldn’t breathe, and I passed out. I don’t remember much, but I do remember calling the police from my friend’s house.”

Participant 15: I did not want to get a divorce. It is something that you just do not do. My mother wanted me to “work things out”. She would say: “My daughter, forgive him.” My husband was so emotionally abusive that I had to leave. My husband threatened me by saying that he will make sure that he would have custody of our children. Other times, he would put fear in me that if I called the police, that we would both be deported. At first, I believed him, but then I had enough. I just couldn’t take it anymore; I had to call the police.”

Summary of Sub-Theme 2: Multiple Forms of Fear.

These multiple forms of fear were expressed by all participants when contemplating whether they were going to leave or stay with the abuser. Some of the participants who had attempted to leave their abuser before and were unsuccessful were hesitant in leaving their abuser. According to Dugan and Hock (2006), most of abusers use coercive and controlling
behaviors to prevent their victims from leaving. There are many reasons why women leave or stay in an abusive relationship. For the women in this study, there were fear-based factors in leaving the first time the abuse occurred. According to the National Coalition Against Domestic Violence (2012), 72% of all murder-suicides involve an intimate partner. Leaving an abuser is more than just packing your bags and moving in the middle of the night, with or without your children. It involves a well thought out plan. For participant 4, isolation from her family, friends, and supports made it difficult for her to leave her abuser sooner. For all the participants, their decision to leave was a lengthy and emotional process that each weighed individually.

**Research Question #2 Findings**

*What barriers influenced their decision not to report the IPV to law enforcement?*

Eight of the participants provided insight into why they decided not to report IPV to law enforcement. Their responses portray the impediments that they faced in reporting while attempting to leave their abuser.

**Theme 2: Impediments to Reporting**

Multiple impediments to reporting were prevalent among all 15 research participants. All 15 participants reported some form of barrier in reporting to the police in the United States. Although some of the participants had prior experience with police in their respective countries, this question generated responses that were focused primarily on their experience with police in the United States. Thus, deciding to report or not report IPV was much more complicated because of their “illegal” immigration status given this heightened their fear that they would be deported. Each of these women expressed their concern with reporting. However, not all who reported to the police had a negative experience (positive experiences discussed below as a facilitator). In total, 7 reported their IPV to the police directly and 2 other participants report to
the police only after the police were called by their neighbor. Impediments included fear of deportation, having had a prior negative experience with police, and fear of job loss for them or their partner.

**Sub-Theme 1: Fear of Deportation.**

Eight participants reported that they did not want to call the police due to fear of deportation.

*Participant 2:* “I felt that reporting would be of no benefit to my children...I didn’t want to risk being deported. I thought about the journey we made to get here with my daughter; it was awful. I didn’t want to go back to Guatemala.”

*Participant 7:* “I did not want to call the police because I was scared that I would be deported.

*Participant 8:* “Having a child to support on my own with no job made it extremely difficult to leave my husband. By calling the police, I would have to tell the police that I was undocumented. It was a difficult decision to make. I thought about it every day, and I decided that leaving was better than reporting the abuse.”

*Participant 9:* “After the President made the accusation about us being “illegal and criminals,” I was terrified of getting deported. I didn’t care what I had to do to make it work with my husband, but I was not going to call the police.”

*Participant 10:* “Letting the police know about the abuse is not going to help me with my immigration status. It’s too risky for me.”

*Participant 13:* “I am already facing deportation. I do not want to make matters worse, she continued. “They said that I am not supposed to have any contact with the police; otherwise, I will be deported faster.”
Participant 14: “I fled Mexico because of him, and now I found myself in the same situation in the U.S. I asked myself, ‘what was I going to do?’ I was told by my friends that if I called the police, I would be deported. I was scared, but I felt that I had no choice but to call the police, so I did.”

Participant 15: When the police officer arrived, “I told him that I was scared to call them because I was undocumented. The officer reassured me that he did not work for ICE and that reporting the abuse was necessary to have my husband arrested. The officer told me that I should go to the hospital, but I didn’t.”

Summary of Sub-Theme 1: Fear of Deportation.

This theme was common among fifty-three percent or eight women who reported their fear of deportation. Studies show that the underreporting of IPV is most significant with the undocumented population because of factors related to their illegal immigration status (Messing et al., 2015). For the eight women who reported fear of deportation, the risk of deportation, because of their illegal immigration status, did not outweigh the benefit that they would get from reporting. Many of these women said that they would not have “qualified” for any social programs that would help them with food and shelter, which was also a concern for all the women who did not report. Immigrants, who are survivors of IPV and report IPV to law enforcement, can get some assistance with housing, food, and emergency money, unlike women who are undocumented.

Sub-Theme 2: Prior Negative Experience with Police.

Fifty-three percent or 8 of the women reported having had a prior experience with the police. Some of these experiences may have occurred in their respective countries before they
came to the United States. Eight of the participants reported that they did not call the police because of fear that they police would be unsympathetic, mistrusting, and judgmental.

Participant 1: “The police didn’t get involved in our domestic problems. When they did show up, they would not do anything. I felt as if it was my fault for making my husband mad.”

Participant 3: “We would argue, and at times, the arguments would lead to pushing and shoving each other. The police got tired of the neighbors calling and threatened that they would arrest both of us.”

Participant 4: “When the police officer arrived at the hospital, I felt uncomfortable because it was a male. He told me that he had to take pictures of my injuries. I felt embarrassed and ashamed. I did not question why a male officer came to take pictures. I should have.”

Participant 5: “One day we were arguing, and it got really loud, my neighbor knocked on the door, but we didn’t hear … well, a few moments later, the police were knocking on my door. When the male officers arrived, they were both agitated. They screamed at us both and threatened that I was going to be arrested for causing a nuisance. I was scared.”

Participant 8: “He would hit me and say, “you made me do it.” I would call the police, and the police would tell him to take a walk.”

Participant 9: “I felt I had a panic attack. My heart was racing, and I could not breathe. I just picked up the phone and called the police. When they arrived, I felt safe. I felt that they were going to help me. Instead, I was told to put my hands up in the air and come out of my apartment. I was in a nightgown. The police officer did not understand what I was saying. He kept telling me to slow down, that he understood a little bit of Spanish. It took 15 minutes before a Spanish officer came. I felt he was unsympathetic.”
Participant 13: “In Mexico, the police are corrupt. They do not care that the husband hit you, in their eyes, he can. I fought back. He would hit me, and I would hit him back. It finally got so bad that I had to leave with the clothes on my back.”

Participant 15: “The police got tired of coming to my house. I would call the police. Then my husband would call the police. The police officer threatened to place us both in jail. At one time, I thought I was going to go to jail. The officer told me: If I come here one more time, I’m going to place you both in jail, and you both will get deported, and we will take your children away. I swore I would never call the police again.”

Summary of Sub-Theme 2: Prior Negative Experience with Police.

Among the 8 participants who feared reporting IPV to the police, this trust or mistrust was shaped by their prior experience with calling the police. For these women, the lack of police responsiveness can be a barrier to future reporting of IPV; yet a delay can pose an imminent risk of further physical harm or death. Studies show that this type of negative police response is why undocumented women are less likely to report IPV to police, which can lead to mistrust of the police and an unfair process (Messing, Becerra, Ward-Lasher, & Androff, 2015).

Sub-Theme 3: Fear of Losing Job.

Three of the participants expressed fear of the abuser losing his job, and one participant reported fear of losing her job.

Participant 3: “When the officers arrived, I didn’t want my husband to be arrested. I refused to make a complaint, but the officer told me that he had no choice but to arrest my husband. I pleaded with the officer because I didn’t want my husband to lose his job.”
Participant 4: She stated: “It was always the same thing with him. He would find something to argue about and would not leave it alone. I got tired of him harassing me at my place of employment; I did not want to get fired, so I called the police.

Participant 5: “I didn’t want to call the police on my husband. My husband had been arrested twice before for DWI, and I was afraid that he would lose his job.” I could not see myself calling the police on him.

**Summary of Sub-Theme 3: Fear of Losing a Job by Abuser or Survivor.**

Job security was a shared concern among 3 of the participants who did not want to report IPV to the police. Two of the three participants feared that their spouse would lose his job due to incarceration, and that would not be beneficial for the family in the long run. For these women, the risk of being “homeless” was much more imminent and problematic than the threat of further physical abuse.

**Summary of Theme 2: Impediments to Reporting.**

This theme helped to provide insight into the barriers that influenced nonreporting to law enforcement (i.e., RQ#2). This research question yielded 3 sub-themes: a) fear of deportation; b) prior negative experience with police; and c) fear of losing a job by the abuser or survivor. Studies show that undocumented women who do not report IPV to the police do so out of fear of deportation, stigma, low socioeconomic status, institutional discrimination, and revictimization by service providers (Ramos, Carlson, & Kulkarni, 2010; Lybansky, Harris, Baker, & Lippard, 2013; Kulwic, Aswad, Carmona, & Ballout, 2010; Murray, Crowe, & Overstreet, 2018). Moreover, low socioeconomic factors are also a determinant for whether some women stay or leave an abuser (Ramos, Carlson, & Kulkarni, 2010). Fear of deportation and fear of the police were most prominent because of their “illegal” status. For the 8 participants who feared the
police, their fear of deportation was heightened because of the negative attention that was being portrayed by the media. Fear of losing their job either by the abuser or themselves was a concern for three of the participants because of their low economic status. For these participants, losing their job meant not being able to pay their rent, provide food or clothing for their children. Eight of the participants who did not call the police felt that the risks of deportation overshadowed their needs for safety from IPV; thus, they did not report to the police.

**Research Question #3 Findings**

*What motivators influenced their decision to report IPV to law enforcement?*

Seven women cited their motivators to report IPV to law enforcement. Their answers to this question provided insight into why these women decided to report IPV to the police despite their fears.

**Theme 3: Facilitators for Reporting.**

The 7 women who reported IPV to the police did so because of family or peer support, fear for their children, and fear of death. Participants 1, 6, 11, and 12 shared multiple facilitators for their reporting IPV to police.

**Sub-Theme 1: Family and Peer Support.**

Three of the participants reported having family and peer support for reporting. The support of family and peers was important for these women as many come to the US without any relatives. Thus, having the support of an in-law, son, or co-worker was a motivator for reporting IPV to the police.

*Participant 1:* “I was not sure how I was going to leave. I tried doing so many times before …it felt impossible. But I had my son now. He was much older now and living on his own. My son told me that I needed to call the police. He picked me up, and so I left.
Participant 3: My in-laws were not always supportive of me, so it was shocking to know that they would call the police on their son. I guess they got so tired of hearing us argue every day that they had enough. I could not see myself calling the police because I was afraid of him losing his job. I wasn’t pleased when they called the police, but they did.”

Participant 14: “If it weren’t for my co-worker’s support and giving me a place to stay, I wouldn’t have called the police.”

Summary of Sub-Theme 1: Family and Peer Support.

Family and peer support were key factors in deciding to report IPV to police. In 2 cases, family members initiated or facilitated the reporting. The literature states that women who come to the US had difficulties acculturating due to the language, lack of knowledge about the laws and customs, and uncertainty about how to initiate a report (Bacallao & Smokowski, 2013). So, having the support of a friend or a family member was beneficial to these women in making the report. Many of them came to the United States in pursuit of a better life than what could be afforded to them in their native country. Not having immediate family members to support them was also a significant concern. Some of these women came to the states without their father, mother, children, or siblings. Thus, being in a foreign country with no family support to help them with the transition was a barrier, which further impeded their reporting.

Sub-Theme 2: Fear for the Children.

Three of the participants who reported calling the police did so because of fear of losing their children, and fear of physical harm to their children by the abuser.

Participant 11: “It hurt me bad to leave my children behind. It was painful, but I needed to leave Guatemala to escape my abuser. And I came here to the U.S. for a better life so I can eventually bring my children and now it was not going to be possible…. Once again, I fell for the
wrong man. One day, I found the courage to tell myself that this is it, the next time I will call the police, and the next time it happened, and so I called the police.”

*Participant 12:* “Calling the police on my husband was not an easy choice, but I had to for the sake of my daughters.”

*Participant 15:* He left me no choice but to call the police. He was threatening me daily that he was going to take my child from me. He even tried to convince my older daughter to say that I was abusive to her so that I can have criminal charges against me. He was emotionally abusive.”

**Summary for Sub-Theme 2: Fear for the Children**

Many of the research participants shared their childhood experiences of witnessing domestic violence. They saw it as scary; they feared death for themselves and their mother and feared physical abuse by their father. Their decision to report their abuse to police stemmed from their childhood experience of witnessing their mother being abused by their father. For these women, fear of intergenerational abuse was beginning to be more like a reality than a myth. Thus, having their children witness IPV was a key factor in reporting IPV to police.

**Sub-Theme 3: Fear of death.**

For three of the participants, fear of imminent, serious physical harm or death was another motivator in reporting IPV to the police. For these women, the intensity followed by the severity of the abuse, compelled them to report IPV to law enforcement.

*Participant 1:* “I was not sure how I was going to leave; I tried doing so many times before …it felt impossible. I had nightmares about leaving, finding my kids dead, him killing my parents. It all felt real. I was scared to death about my family and kids. I felt helpless at times, but I knew I had to call the police, so I did.”
Participant 4: She stated: “It was always the same thing with him. He would find something to argue about and would not leave it alone. I got tired of him harassing me at my place of employment, so I called the police.

Participant 6: “It was time, I had enough of being a punching bag. My first husband was abusive, and now my second. I did not want to go through this again. I had no hesitation in calling the police. I told myself, ‘either he’s going to kill me or I’m going to kill him’ so, I made the decision … to that, it won’t be me, and so I called the police.”

Summary for Sub-Theme 3: Fear of Death

For these three participants who feared death, their decision to report the abuse was significant. Scheffer-Lingren and Renck (2008) found that women who are forced to choose between living or dying tend not leave their abuser. However, there are some individual cases where women are more likely to leave given their increasing fear of imminent and escalating physical abuse. Thus, the escalating, repeated abuse serves as evidence for some women that the abuser is not going to change or stop the violence. For some of these research participants, this was the turning point that influenced their decision to leave the abuser and to report to the police.

Sub-Theme 4: Positive Experience with Police.

Four participants expressed having a positive experience after calling the police. This sub-theme is important because women who have a positive experience with police are more likely to share this positive experience with other victims of IPV who want to report to the police (Messing, Becerra, Ward-Lasher, & Androff, 2015).

Participant 1: “When the officers arrived, I was relieved. I began to cry and could not stop. The officer hugged me and placed me in the back of the police car. He said: ‘Everything is going to be alright’ and that he was going to take me to the hospital. I felt safe.”
Participant 6: ‘When the police officer arrived, he told me if I had any family that I could stay with, I told him that I had an older son. The officer spoke to me in Spanish, which made it easier to communicate to him that I had already called my son to pick me up. The officer was very respectful.”

Participant 11: “The officer helped provide me with the information to a shelter. The female officer drove me to the shelter and stayed with me to help translate.”

Participant 12: “When the police arrived, she described the officer as “caring.” I was scared, but the officer made me feel comfortable. He told me that I had made the right decision and provided me with an X agency. I was grateful.”

**Summary for Sub-Theme 4: Positive Experience with the Police.**

Often the police are the first point of contact with public services involving an IPV victim. Participants who reported a positive police encounter offered an understanding of what made their experience positive. For these women, having a positive experience was dependent on the police officer being culturally sensitive, rendering reassurance, being empathetic, and nonjudgmental. Language barriers, stigma, and bias towards immigrant populations are often impediments that prevent immigrants from reporting (Ramos, Carlson, & Kulkarni, 2010). For these women, having the support of the police was vital. Many of these women were afraid to call the police and felt that they had no choice because of the intensity and severity of the abuse. Thus, having an officer who was able to speak Spanish, empathetic, and reassuring, helped them to feel safe.

**Sub-Theme 5: Positive Experience with a Service Provider.**

Of the four participants who sought mental health services, only one reported that the service provider called the police as she was a mandated reporter.
Participant 5: “I had a great relationship with X service provider. She told me, ‘I’m sorry, but I have to report this to the police.’ I was scared because I did not want my children to be taken away from me. But I understood that she had to call the police.”

Summary for Sub-Theme 5: Positive Experience with a Service Provider.

Although only one participant shared her positive experience with a mental health service provider, this subtheme helped to provide insight into how service providers can be instrumental in reporting IPV to police. This was important since undocumented women may not report out of fear of deportation or prior negative experience with the police. Thus, encouragement or mandatory reporting by a service provider may help connect victims with the police.

Summary of Theme 3: Facilitators for Reporting.

Several subthemes emerged. Identified factors influencing the decision to report or not report IPV included: 1) peer and family support; 2) fear for the children; 3) fear of death; 4) positive experience with police; 5) a positive experience with a service provider. Three of the participants who reported having family and peer support provided insight into how this support was invaluable. For these women having such support proved to be motivating factor for reporting IPV. The 3 participants who feared for their children felt that the abuse could escalate and result in their children being hurt, so this motivated their actions. This fear appeared heightened when their children were present during the abuse. Fear of their own death was also a motivating factor for 3 participants. They shared descriptions of severe abuse by their husband or partner. For these women, the intensity and frequency of the abuse served as a catalyst. Four of the participants had a positive experience with police; this was a significant finding because it provided insight into what actions by the police were perceived to be positive. For these four women, having a police officer speak Spanish was seen to be culturally sensitive. For others,
having a knowledgeable police officer made them feel safe. For one participant, having the emotional support from her therapist, who she saw as knowledgeable and culturally competent, helped her feel comfortable in reporting IPV to police.

Theme 4: Adverse Experience with the Court.

Two participants shared having an adverse experience with family court after reporting the abuse to the police.

Participant 8: She explained: “I didn’t want any trouble. I was told that I should not be a burden to society, and by calling the police, I felt that I was. She continued. I felt that the family court judge was unfair and unjust towards my situation.”

Participants 15: “Being told that you are unfit to take care of your children is the worst feeling that I ever had. I felt I was being blamed not only for not leaving the relationship but also because I did not have a job to support my children. I was also being blamed for not reporting the abuse and placing my children at risk of being abused.”

Summary of Theme 4: Adverse Experience with the Court.

The court response to IPV may often involve a lengthy process, especially for undocumented women. This is because of their illegal status, difficulties in getting a protection order, and fearing that they would be seen as a burden to society (thus deportable). All these factors may affect their reporting their IPV to law enforcement. For Participant 8, her fear stemmed from others having a “bad” experience with criminal and family court. This “bad” experience, made participant 8, feel revictimized.

Research Question #4 Findings

How do undocumented women navigate social support systems?
The answer to this question yielded responses related to how these women use their connections within the community to network among service providers and informal supports.

**Theme 5: Experience with Help-Seeking**

For this theme, 100% of the women reported having experience with public services, non-profit services, and informal supports and services. Twelve of the participants reported having experience seeking public assistance. Four participants reported having qualified for public services. Most of the participants who received some form of service did so using multiple resources in their community, such as non-profit services and informal supports.

**Sub-Theme 1: Public Services.**

Public services are those which are provided by state and county-run agencies offering social services such as education, income assistance, childcare, food subsidies, health care, housing, job training, and other states/country-run programs. Among the 7 participants referred to the Department of Social Services (DSS) by police, 4 qualified for one or more of these services. Criteria for qualifying for social services included citizenship or legal immigration status, such as permanent residency. Two of the participants qualified for emergency SNAP, and 2 qualified for other forms of subsidies such as healthcare and educational services through DSS. The 2 participants that qualified for emergency SNAP and Medicaid did so because their children were born in the United States. Women who did not have a U.S.-born child were able to have their children qualify for the Children’s Health Insurance Plan known as CHIP.

*Participant 1:* “I felt humiliated going to DSS. I assumed I was not eligible for services. My cousin told me that I could apply for housing, but I was not sure that I could. I filed paperwork for temporary cash assistance and was placed on an emergency housing list. It took several months before I got assistance with housing.”
Participant 3: “I was told that the only service that I qualified for were parenting classes and that I should consider taking them so that my daughters won’t grow up to be victims themselves.”

Participant 4: “I was told that I had to go through my employer’s health insurance and that I should not expect to be given services since I am an illegal alien.”

Participant 5: “I was told that if I applied for SNAP or TANF, that it would hurt my chances of getting legal residency. My attorney said: “You are not supposed to be a burden to society.”

Participant 6: “I did not have any way to support myself. I had a friend who helped me in the community. She was great. She helped me apply for emergency Medicaid.

Participant 7: “I waited for two hours before I was able to speak with a DSS worker. She informed me that she does not speak Spanish and that there were no translators available. When she arrived, I was told that I did not qualify for any services because I had no proof of legalization. I told her that my sons were born in the U.S. and that I needed services for them. The worker told me that she could not provide me with cash assistance and was only able to refer me.”

Participant 8: “She made me feel as if I was lazy and not wanting to work. She asked me ‘how to do you pay the rent and how did you support yourself before?’ I told her that my husband supported me, but that now I was no longer with him because he was in jail. She said to me: ‘Why don’t you seek money from your family? You cannot expect us to support you. You have to work like everyone else.’”
Participant 12: “I met with a patient advocate who helped me seek health insurance for my daughters; that’s all I wanted. I seek medical care from a medical center. It’s a wonderful agency.”

Participant 13: “All I asked for was to provide health insurance for my son and temporary food stamps. They said that I didn’t qualify for any services.”

Participant 14: “I had to report to CPS the next morning. I was told that my children were at risk of being taken away from me because of neglect. I was scared that my daughters would be taken from me and that I would never see them again. I could not help but think the worst. I had no one to support me. I felt alone. The CPS worker told me that I had to attend parenting classes from 3-5 twice a week. I told her that I was working as a housekeeper and that it would be difficult. She told me, ‘if you don’t attend the classes, I will have your children removed.’ It was shocking to me that she was so cold. I felt misunderstood. I felt guilty and scared at the same time.”

Summary of Sub-Theme 1: Public Services.

Access to public services was a shared concerned among 10 of the participants. For the 10 who sought services, less than half qualified for some sort of public assistance. Public sector entitlements such as TANF, SNAP, WIC, Medicaid, and housing are vital for families who meet the income threshold. Undocumented women, who meet the income threshold, would not qualify because of their “illegal immigration status.” Those women who qualified for temporary services were advised not to seek assistance as it would hinder their legalization process. Hence, several of them found non-profit and informal services helpful for survival.
Sub-Theme 2: Non-Profit Services.

Non-profit agencies are those supports and service programs that are not state or county-run. Some that were used included religious institutions that are nonprofit service providers. They were sometimes helpful to some of the participants who did not qualify for DSS. Thus, non-profit organizations or agencies provide various forms of assistance to those who meet their help-seeking criteria. Of the six participants who shared their experience with non-profit services, one participant was referred by DSS to a non-profit agency.

Participant 1: My friend helped me apply for assistance through a community outreach program that provided services for refugees and victims of domestic violence. I filed temporary paperwork assistance and was placed on an emergency housing list. It took several months, but now I have housing.”

Participant 5: “I was told to go to an agency for mental health services; however, I was not given directions on how to get there; they didn’t explain why I needed to go there, and how much it would cost. So, I didn’t go.”

Participant 6: “With a religious institution, I was able to get assistance with housing. It is a great organization that helps people find employment, housing, and they even provide emergency cash assistance. Without the help of this religious institution, I would not have been able to survive on my own.”

Participant 11: “A religious institution linked me to an agency where I was able to get low-cost medical care. I related to a patient advocate that was familiar with the area and spoke Spanish. I now have health care and a place to live.”

Participant 15: “I went to a charity and was informed that cash assistance was not available to me and that I need to show proof of legal immigration. I told her that I entered the
U.S. illegally to seek asylum and refuge. She informed me that I need to provide proof, and I did not have any. She told me she could not help me.”

Summary of Sub-Theme 2: Non-Profit Services.

Forty percent of the research participants sought help through non-profit organizations within their community. Some of the women reported feeling shamed for seeking public services. They indicated that lack of cultural competency among public sector service providers was a facilitator for seeking non-profit services. Vidales (2010) found that the main obstacles to immigrant women seeking services were “cultural barriers” and the lack of cultural sensitivity among service providers (p.536). For some women, seeking nonprofit services was dependent on whether the services they found would be significant enough to survive on their own.

Sub-Theme 3: Informal Supports.

More than half of the participants sought services through friends and family. For undocumented women, lack of legal status is a barrier to seeking and receiving services related to IPV, that can otherwise be a great asset for non-immigrant women.

Participant 2: “As an illegal immigrant, I was afraid to be deported. Seeking any government help will put me at risk. So, I did not ask for help; instead, my friends at work helped me find a place to live.”

Participant 3: “Thank God that I still had some friends and family that were there to help me. I felt supported by them. I didn’t want to ask the government for help.”

Participant 5: “The attorney told me that I can’t be a burden to society and that I have to seek economic resources through friends and family.”
Participant 7: “Through a friend, I learned about the WIC program. It helped me because I could not afford to buy my son’s milk… It is was expensive. My friend also helped me to find employment as a sitter.”

Participant 8: “My community leader helped me in many ways. We must help each other as women, and we should not be afraid to talk about the abuse we suffered. We did nothing wrong, but society tends to judge us on what is being said of us. We are looked down on because we came to the U.S. illegally. I am a human being who is seeking a better life than the one offered to me. My country is poor, and there are not enough resources for us. The medical care we receive is worse than what is provided here. At least, I can afford the medicine here. This is how I feel. I want to show the U.S. that I came here to work and provide a better life for my family. I just want an opportunity to work. I do not want the government to give me anything … free. In my country, nothing is free.”

Participant 9: “I was scared that the police will deport me back. I do not like to be told that I do not belong here. It makes me feel terrible when people say mean things to me. I live with my cousin and her husband. I’m happy there.”

Participant 10: “I found services through X community where I was linked to a women’s resource center. The ladies were wonderful. She provided me with an X medical center for my health needs. I now rent a room, and I am working.”

Participant 13: “I was in a detention center for 45 days with my son. It was filthy and dirty. ICE took the $500 that I had and said that I was not allowed to have this type of money, and what was I planning to do with this money? I explained to the officer that it was money that I had saved to come to the U.S. After the 45 days, I went to a third cousin’s home where I was released along with my son and the $500. After arriving in New York, I was able to stay with my
cousin for two weeks before, and she told me that I had to find my place. My cousin connected me with a community activist who assisted me with finding a room for rent.”

Participant 14: “I did not want to get into trouble with the police. I was told by friends that seeking any government services can lead to my deportation. Through work, I developed a friendship, and she provided me with temporary housing.”

Participant 15: “Through a friend, I was able to find this job as a waitress. I have been here for 12 years. I rent an apartment now with my two youngest children.”

Summary of Sub-Theme 3: Informal Supports.

Experience with informal help-seeking among friends and family was most important for these women. The participants’ answers to the question of how they navigate the social support system helped to identify key barriers that included: a) fear of deportation; b) lack of cultural sensitivity among service providers; and c) service disqualification due to illegal immigration status. Their help-seeking stories offered a deeper understanding of the dynamics and service challenges that they endured not only as survivors of IPV but also as undocumented survivors of IPV. Despite their fears of deportation, lack of cultural sensitivity among some service providers, and not qualifying for services, these women remained hopeful and determined to access help.

Summary of Themes and Findings

Through the stories of 15 undocumented Latina survivors of IPV, a deeper understanding emerged about their decision to leave the abuser, report IPV to law enforcement, and decision to seek services. By focusing on the first research question concerning their “lived experience of IPV among undocumented Latina women,” the stories about their abuse emerged. Although this theme of multiple forms of violence was shared among all 15 participants, the type of abuse each
woman experienced differed. The literature suggests that learned helplessness may be the reason why some women stay longer with the abuser and why over time, women tend to “give in or give up” as they see no way out (Dutton and Painter, 1993, p. 109). Feminist theorists argue that men use coercive controlling violence to prevent a woman from leaving and thereby maintaining his dominance. The coercive, controlling violence refers to physical violence (Dugan and Hock, 2006), which is intended by the abuser to maintain control over the subordinate.

The decision to leave was relatively clear for all the fifteen participants who survived physical, sexual, emotional, and verbal abuse, but when and how they left was explained in part by their responses to the second research question relating to their experiences with law enforcement? The impediments reported by these women help to clarify and elucidate the key factors that compelled them to report IPV to the police. The second theme—impediments to reporting—uncovered several emerging subthemes such as fear of deportation, prior negative experience with police, and fear of losing a job by the abuser and survivor. Ammar, Orloff, Dutton, and Aguilar-Hass (2005) similarly found that Latino immigrants were less trusting of the criminal justice system because staff were “discriminatory concerning minorities and immigrant populations” (p. 232). This was a significant finding as eight of the participants who feared deportation also reported a prior negative experience with the police. This fear was heightened because of their “illegal” status. Many of these women feared that law enforcement would report them to ICE, and others feared that their spouse or partner would be deported if arrested. Thus, a prior negative experience with the police was a deterrent for reporting IPV. For those women who were seeking a U-visa, pursuing public services was not an option because legal services told them that seeking government assistance would hinder their chances of getting “legal residency”.
The third research question relating to what motivators influenced their decision to report IPV to law enforcement led to answers that explained why they took such actions. For the women who reported their abusers, facilitators included family or peer support, fear for their children, fear of their own personal death, prior positive interactions with police, and positive experience with a service provider. These facilitators are important in further understanding what might help to close the gap in the underreporting of IPV among undocumented women. Thus, this theme offered insights into how perceptions of the police, whether from a negative experience or through the way the media or news portrayed the police, had an impact on their decision to seek help. Most research in underreporting suggests that it is a fear of deportation that is the primary inhibitor in reporting IPV to law enforcement. Although this was not common among the six participants who did not report their abusers, the participants who did report provide no evidence that the police reported them to the U.S. Department of Immigration and Customs Enforcement (ICE).

Lastly, how undocumented woman navigate social support systems helped to clarify the issues that these women face and why they often fear leaving because of the support that the abuser may be providing. Seeking services such as food subsidies, healthcare, and housing was difficult to achieve because of participants’ “illegal” status. Thus, their undocumented status prevented them from qualifying for most public services. Despite not qualifying for public services (with a few exceptions), however, most of the women persevered and seemed to be resilient.

Regardless of their “illegal” status, their help-seeking illuminated how they were able to navigate social services and supports through primarily informal networking. Vidales (2010) found that “cultural barriers were the main obstacles for seeking services” (p.536) and that the
lack of cultural sensitivity made it difficult to understand the process or navigate systems for support. Because of this, 10 of the participants sought to find supports on their own using services provided through religious institutions and other not-for-profit organizations outside the state and county system. These proved helpful in providing cash assistance, shelter, and food. In general, however, these women tended to rely more heavily on friends, co-workers, and other informal supports. Studies have suggested that IPV among immigrant women is more prevalent because of cultural and institutional barriers (Kyriakakis, 2014) and that these factors can create challenges for women seeking to find more formal solutions for their abuse. Interviews from this sample tend to indicate that informal supports and linkage to community resources may be most promising for the future undocumented survivors of IPV seeking needed services, not only for survival but for maintaining their independence and possible protection from detention and deportation. Thus, many sought nonprofit and informal support because they are not state or county-run and are often funded through private rather than public sector sources. As such, they are often not only helpful but less threatening to women fearing deportation due to their immigration status.
Chapter 5: Discussion, Implications, and Conclusions

In Chapter 4, findings were presented that reflected some of the similarities and unique differences of each participant’s lived experience as a survivor of IPV. The chapter identified theme and sub-theme patterns in their abuse, what motivated them when they did report, and what inhibited them from reporting their violence and seeking help. This chapter now discusses these findings, using survivor narratives to identify implications for practitioners, policy and future research that is needed, as well as offering limitations regarding this study and its conclusions.

Although, there is an extensive amount of research on the impact that IPV has on the lives of women, there are few research studies employing a phenomenological approach to explore IPV among undocumented Latina women. To answer the main question of why underreporting is more prevalent among undocumented versus documented Latinas, the study focused on 4 areas of interest: how their lived experience impacted their decision to leave or not leave their abuser; what were the barriers that resulted in non-reporting; what motivated them when they did report IPV to law enforcement; and how did they navigate the support systems in their quest for help. As such, this is an exploratory study that gives a voice to the participants and their experience as Latina survivors of IPV.

Discussion of the Findings

Five themes emerged from the study: 1) the multifaceted nature of abuse, with women generally suffering multiple forms of domestic violence; 2) commonly held fears and/or experiences that served as barriers to reporting; 3) presence of facilitators that for some survivors encouraged reporting; 4) adverse experiences with the court that increased fear of the system for
some participants; and 5) the resilience of the women in navigated the social support system for help.

**Theme 1: Multiple forms of abuse**

Among the fifteen women who reported abuse, several reported extreme cases of abuse by their partner. As the women told their stories, there was an overwhelming sense of hurt and betrayal that they felt toward their partner. For many of these women, the pain was perceptible. As they told their stories, for some, tears ran down their faces. And despite this pain, these women were determined to tell their story as they said they thought it might help others.

The stories of abuse by these fifteen courageous and resilient women reflected some aspects of learned helplessness. Some of the women reported feeling hopeless, unworthy, guilty, ashamed, or embarrassed. Some shared how they believed that their life was over and that the abuse would never end. Although learned helplessness was exhibited by some of the women in their recollections of their past, it was not prevalent at the time of the interview, since all the women were out of the abusive relationship. The literature suggests that learned helplessness can be as dangerous as the abuse itself (Dutton & Painter, 1993). However, for these women, it could be one of the sole reasons they survived. This is because, for some of the women, getting out of their abusive relationship was a process. In essence, this learned helplessness served as a tool that bought them time to get out safely. Studies show that women who leave their abusers have a high risk of death (National Coalition Against Domestic Violence, 2015). The severity of the abuse may not be recognized as physical abuse by a survivor. For instance, a push and a shove are often not seen as abuse until it is more intense or severe (Walker, 2006).
Prior research on IPV states that there are three stages in the cycle of abuse. Although it was not the focus of this study, the cycle of abuse concepts can help provide some understanding of why some of the women left their abusers sooner—and why, for some, it was more difficult (Walker, 2006).

**Severity and Intensity of Abuse.**

The severity and intensity of the abuse were described by some of the women in this study. For the survivors who talked about the severity of their abuse, it is noteworthy that those whose abuse was less frequent and less severe made the decision to leave for difficult. In contrast, for those whose abuse was severe and persistent, decisions to leave were clearer and more decisive.

**Power Imbalance and Learned Helplessness.**

For many of these women, their partners were loving and caring before they became a "violent" and "abusive" person. Dutton and Painter (1993) have argued that power imbalances combined with intermittent abusive behaviors create this learned helplessness. Thus, this intermittent abuse makes it “more difficult for women to leave” (p. 109). Similarly, Walker (1989) argued that the battered woman syndrome was strongly correlated with learned helplessness, which can help to explain a flight, fight, and freeze dynamic. Herman (1992) paid careful attention to this fight and freeze dynamic, where women who suffered repeated abuse were found to either do nothing (freeze) or fight back (fight). Dutton and Painter (1993) stated that women who fight back in non-violent ways are often shamed and re-victimized by the criminal justice system for not doing enough. In turn, this blaming of the victim (Walker, 1989) is often correlated with learned helplessness. Walker (1989) argued that women who seek help and are turned away, blamed, or shamed by the people or system that is supposed to help them,
are sometimes seen as being responsible for this learned helplessness. For these women in this study, it seemed paradoxically to empower them rather than disempower because they felt that living was their right, not a privilege. Succinctly stated, they appeared to have moved beyond their learned helplessness to assume their right to live, free of abuse, despite considerable risks to them and their children involving the potential loss of housing, financial concerns, retaliation by the abuser, and potentially deportation. Their experience essentially empowered them to move beyond the abuse.

**Theme 2: Impediments to Reporting**

Of the eight women did not report their IPV to the police, four of the participants reported having to face several impeding factors. A series of open and closed-ended questions were used to gain a better understanding of these barriers to reporting. Their answers yielded several responses that were categorized into the following sub-themes: fear of deportation, prior negative experience with police, and fear of abuser or victim losing their job.

**Fear of Deportation.**

Fear of deportation was relatively common among some of the participants because most of them came to the United States during a time that deportation for illegal immigration was being more aggressively enforced by ICE under President Trump's administration. For the eight women who reported fear of deportation, the risk of being deported outweighed the benefits that they would receive from reporting their IPV to the police.

**Negative Experience with Police.**

Prior negative experience with the police was reported by eight of the participants. Two of the participants reported having prior negative experience in their respective country and six reported having a prior negative experience with the police in the United States. Re-victimization
and feelings of unworthiness were significant for all eight who had prior negative experience. Victim-blaming was found to be an impediment for two of the participants who felt that the officer was culturally insensitive because she did not speak English or blamed her for putting herself in a vulnerable situation. This finding was in keeping with prior research. Meyer (2016) found that victim-blaming deters victims from seeking help, which can potentially put a victim at risk of further abuse and death. Despite some of the women reporting having a negative experience with police, all believed that the U.S. police were far better than the police in their respective country. Eight participants, who reported having a fear of deportation, saw this as an impediment for not reporting IPV to the police.

**Fear of Job Loss.**

Fear of job loss by the abuser, and the victim, was reported by three of the participants. Three of the participants said they feared that if their partner or spouse lost their job, it would be difficult to pay for necessities such as food, clothing, and shelter. Police officers are tasked with the decision of whether to make an arrest or not. In most cases, an arrest is caused because of a mandatory arrest policy. This prevents police officers from using their discretion. Although, this was not representative of all the participants, more than half wanted their partner or spouse arrested.

**Theme 3: Facilitators for Reporting**

This theme is central because it provided insight into what motivated undocumented Latinas to report the abuse to police. Several factors that facilitated reporting of the abuse to police were identified: 1) the presence of family and peer support; 2) fear for the loss of or harm to children; 3) fear of death by the survivor; 4) a positive supportive experience with police; and 5) positive supportive experience with a service provider. Support, whether from police, family,
or a service provider, was seen as vital for the seven women who reported the abuse to police. Research tells us that negative attitudes and perceptions of police are a deterrent to reporting IPV to police (Ballucci, Gill, & Campbell, 2017). This research indicates that positive experiences with police may have the opposite effect of encouraging reporting.

Fear for the children was a concern for three of the participants who reported having young children. These survivors expressed concern for their children’s physical and mental well-being and indicated it motivated them to report IPV. This is in line with prior studies that show that children who are exposed to IPV exhibit behavioral problems that impact their social and emotional health (Kernic et al., 2003; Ghani, 2018). Thus, even if the women themselves were facing internalized fears that inhibited them from taking action to report, their concern and protective feelings towards their children overrode their hesitancy. The power of relationships with children and others in the family, friends, and peers all seemed to be pivotal in fostering a resolve to report and later to be vital motivator in rebuilding one’s life after leaving the abuser.

**Theme 4: Adverse Experience with the Court System**

Two of the participants shared having an adverse experience with the family court. These participants expressed feeling ashamed, embarrassed, and blamed for the abuse. This adverse experience can be a deterrent for women seeking help. For these two participants, their concern about losing their children to Child Protective Services or their abuser was an utmost worry. Family court is often the place where women seek refuge and a protective order from their abuser. For these two participants, the very court that was supposed to protect them from retaliation from the abuser was also blaming them. Thus, having this negative experience with the court can prolong the process of help-seeking involving reporting and subsequent healing.
In summary, despite the complexity of factors, both motivators and inhibitors, these women were able to leave their abuser. Nine of them relied on the police for help; seven reported their IPV directly, and two participants said that the police were called by their neighbor. The others found alternate avenues for moving to safety. The victim-blaming dynamic that emerged as they retold their stories suggests that the criminal justice system, including police and courts, needs to be more empowering rather than castigating the victim. It can be argued that being terrorized by IPV should not be compounded by fears of being reprimanded or poorly treated by police and the court. If one adds to this the consequential fears of deportation, it is as if these women faced at least triple the amount of jeopardy than documented Latinas.

**Theme 5: Experience with Social Support System Navigation**

Survivors of IPV, who are legal residents, can qualify for public services such as TANF, SNAP, Medicaid, and housing upon leaving their abuser. However, undocumented immigrants are often not able to access public services because of their illegal status. Those participants who reported having a positive experience in finding services were more likely to report IPV to the police and share the information with other women seeking IPV services. Some of the challenges faced by those who sought public services such as TANF, SNAP, WIC, Medicaid, and housing, reported language barriers, unfamiliarity with community resources, fear of hindering their pathway to legalization, and/or fear of losing their children due to their low socioeconomic status. As a result, they were more likely to seek non-profit supports and informal supports such as family and friends. Despite facing these barriers, many of the women remained hopeful and determined to obtain some form of assistance. Informal supports were used among all fifteen participants, as most of them relied on friends and family for financial support. These findings were supported by previous research that highlighted the importance of having support options.
(Kulkarni, Bell, & Rhodes, 2012). In fact, because they did have supports, 7 participants reported they were able to take the step to report to the police. While the interplay between social supports and reporting is not clear, it is evident that the presence of such support helped to solidify the resolve of these 7 women to report to the police. Thus, it is possible that having options to leave and live separately from the abuser may be a potential necessary precondition for reporting of IPV.

Since help-seeking is likely a critical factor in whether reporting occurs, it is important to elucidate the various supports these 7 women received. Alvarez and Fedock (2018) identified three major factors that have an impact on help-seeking behaviors: “1) availability, 2) affordability, and 3) accessibility” (p. 490). For the women in this study, availability was limited because of eligibility standards for those services. Affordability was also problematic because the services they were seeking were income-based. Thus, the ability of these survivors to pay for services was dependent on whether they could obtain employment—which in and of itself is problematic given their undocumented status. More than half of these women felt that they had no choice but to work illegally to supplement the household income. The spouses and partners of these women who were also illegal had jobs related to farming, being a restaurant chef, landscaping, and construction worker. And finally, accessibility to services was essential for many of the participants who did not have access to reliable transportation. For some of the women, the choice of whether to seek public or non-profit services depended on their access to transportation. Those women who had limited to no transportation were less likely to request assistance outside of their communities of their peers and family.
Summary of Theme Findings.

There were several inferences that were drawn from this exploratory phenomenological study. First, that the abuse that these women endured was sometimes continuous and for some severe. Through this, it can be inferred that they may have experienced learned helplessness. Second, many of these women faced multiple threats. On the one hand, the very systems that were supposed to protect and guide them often ended up in re-victimizing them. These systems included the criminal justice and public service sectors. For the women who did qualify for public service, they were provided assistance with health insurance, housing subsidies, or SNAP. Some who were referred were turned away because they either did not meet eligibility standards or did not want to hinder their pathway to citizenship. Therefore, despite the given mission of police to protect victims from life-threatening harm and the safety net role of our public support system, many of these women did not have positive exchanges with these two support systems.

This researcher inferred from these interviews that all 15 women were resilient. Their ability to leave their abuser and mobilize help through informal supports in order to survive demonstrated their resolve, inner strength, and persistence to not give up. In the interviews, their broken teeth, bruises, ankle bracelets from detention and home arrest were evident. Although these may have reflected somewhat broken and fragile women, they appeared to be resilient and steadfast in their ability to survive despite these fears and adverse experiences.

Lastly, the ability of these women to successful navigate the public and informal support systems revealed how innovative these women were. Despite the odds of not getting much or any assistance—and for some, not even having family there for support—they were still determined to survive on their own even if it entailed the risk of deportation. The centrality of informal supports from friends and family turned out to be critical to their acquiring assistance with
housing, food, and clothing. From a social work perspective, the power and resources of informal networks are often overlooked. For these women, such mobilization of key supports for survival reflected their ingenuity, capacity to seek critical supports, and to build trusting informal support networks. A feminist perspective encourages solidarity and mutual aid. In a feminist fashion, these women told this researcher that they not only wanted to tell their story but to ensure that they could help other women. Some of the women epitomized feminist practices in their quest to help other women who wanted to leave their abuser. Many of them provided this researcher with resources and contact information for those who had just migrated to the United States and who needed services such as food and shelter.

**Feminist and Empowerment Theories: Informing Research**

This researcher selectively drew on feminist language to improve her communicate with these women, trying to convey an understanding of the undocumented Latina culture. For undocumented Latinas, the awareness of feminist concepts relating to power and control dynamics helped to clarify for the researcher why some women stayed longer in an abusive relationship while others did not. Feminist theory also allowed a lens through which to look into the lives of these oppressed women and see that despite being victims, they were also resilient and empowered survivors. Using empowerment language such as *you are courageous; you are resilient; you are worthy* was a helpful tool that helped in connecting this researcher to them and their stories. Moreover, having an empowerment perspective helped to shape the direction of sample recruitment, research question design and open-ended probes, and analysis of the findings. Thus, these twin empowerment and feminist approaches can help inform future research involving vulnerable women.
Feminist perspectives encourage research that is generated by women researchers about women. This is not only desirable for research purposes but also for mutual aid and help giving benefits (Gray, Aglias, Schubert, & Boddy, 2015). Feminist theory also reinforced commonly held social justice beliefs inherent within social work practice that regardless of their legal status, each of these women had a right to citizenship and protection from abuse. Some of the women were unsure if they could survive on their own because of their financial dependency on their abuser, but through self-empowerment and self-determination these women gained back their control by becoming free of abuse. These women helped to reinforce the researcher’s belief in feminist and empowerment perspectives—and that Latina IPV victims must be made exempt from immigration policy and deportation practices.

**Practice Implications**

Social workers are trained and licensed professionals who provide services to the most vulnerable population in the fields of mental health, case management, crisis intervention, and psychotherapy (Childress, 2013). Thus, developing culturally competent and family-centered practices is essential for the future of social work in the 21st century (Briar-Lawson, 1998). A lesson learned from this research was the power of resilience. This resiliency was discovered during the probes involving how women navigated social support systems. Innovativeness was exemplified in all the women in this study. Many of the women who reported adverse public sector experiences found a way to navigate non-profit services along with using their informal supports. These informal supports were friends, extended family members such as a cousin, or peers, including someone in their community who had previously sought services. Such findings reinforce the need for social workers to attend to the significant role that mutual aid may play. This may be especially pivotal in helping women who face such seemingly insurmountable IPV
challenges and obstacles in finding safety and rebuilding their lives and relationships. In this study, the fact that all the women relied on friends and family, suggests that in social work practice, informal network development and mobilization of friends, family, other service users as part of a mutual aid, peer support network, should perhaps become a more prominent role in the practice.

Empowerment based practices among social workers are often used in crisis and solution-focused therapies (Rose, 2000). Empowerment practices can be challenging to put into practice, particularly in agencies that may want the social worker to develop formal treatment plans and goals that are aligned with the agency mission. There are several ways in which social workers can help shift empowerment practices from a theoretical perspective to a practice perspective. First, social workers should be guided by the National Association of Social Workers' Code of Ethics (NASW 2008) and, secondly, by the principles of empowerment. These include the use of language that is strengths-based, conveying the belief that each woman has the right and capacity to be in a better set of conditions, and can act to achieve this right. Self-determination is also a part of women’s journey to healing. Allowing women to make informed decisions is an empowerment tool.

**Police-Community Relations**

Studies show that improving community-police relations for the empowerment of Latina undocumented immigrant victims of IPV may increase their willingness to report and create a positive relationship with police (Messing, Becerra, Ward-Lasher, & Androff, 2015). Many of the participants in this study who did not report IPV to the police because of prior negative experience said that they would have reported if the police were more sensitive to their immigrant status. Studies show that police departments that team up with social workers for
crisis intervention have better outcomes in community-police relations and in responding to IPV calls (Messing, Becerra, Ward-Lasher, & Androff, 2015). Although police officers are trained in responding to a crisis, many are not explicitly trained in responding to IPV among undocumented populations. Thus, having a social worker who teams with the police may help foster more coordinated services for the victim immediately rather than solely receiving a referral for services. Social workers are vital as they are the frontline staff who provide assessment, interventions, and referrals to social service agencies (Crabtree-Nelson, Grossman, and Lundy, 2016). In this study, several women said that the police gave them a hotline number to call. It would have been preferable to have had a social worker there at the time to address social service and related support needs. Moreover, those women who had seen a service provider before reporting were encouraged by them and then more likely to report their abuse to the police.

Cultural Competency.

Culturally sensitive and responsive services among police officers can have a positive impact on whether undocumented women report. Many of the women in this study reported feeling embarrassed and unintelligent because the officer did not speak Spanish. Thus, they could not relay their information properly to the police. Moreover, having a bilingual social worker as part of the response team will also further help improve police and community relationships with the Latino population. Social workers can play an essential role in educating police officers on how to respond to IPV among the Latino population. Research tells us that negative attitudes, perceptions, and views about IPV and victims can have an impact on those who are attempting to seek services (Ballucci, Gill, & Campbell, 2017). Ballucci and colleagues (2017) found that among study participants "police responses to IPV greatly impacted the actions taken by the
survivor, which reinforced the importance of police training" (p. 242). Grover and associates (2011) found that in their research most of the officers expressed the view that IPV calls "were too time-consuming and draining, and that many were about verbal incidents" (p. 244). Thus, cultural competency training among police officers can help reduce some of the adverse experiences these survivors face when trying to report IPV.

**Research Implications**

There is a need for feminist researchers to study undocumented populations experiencing IPV, particularly because they are hard-to-reach and often are the most vulnerable in a community. This study suggested that feminist and empowerment-based approaches with the participants, informing the design of methods, including research questions, may be critical in making women feel valued, affirmed, needed, and contributing as powerful informants.

**Learned Helplessness.**

This research did not focus on the impact that the cycle of abuse had on the mental and physical health of the women in the sample. Dutton and Painter (1993) point out that abuse overtime is associated with learned helplessness, which can make it extremely difficult for women to leave an abuser. Attachment to the abuser may accompany such learned helplessness. Future research should examine in more depth the nature of learned helplessness and the extent to which it is an overriding dynamic in IPV among Latina victims. In this study, learned helplessness seemed to be part of the evolution of their resolve to leave their abuser. Thus, future research needs to probe over time, in a longitudinal study or one that is rigorously retrospective, the extent to which learned helpless is prevalent. Women in this study, who seemed to have experienced learned helplessness earlier, may have reached the turning point when they realized
they had the right to live. Future research needs to explore how learned helplessness may be part of the trajectory that instigates change and results in the resolve to leave one’s abuser.

**Intergenerational Transmission.**

Another area for more research involves the dynamics and impact of intergenerational transmission. The theory of intergenerational transmission suggests that there is an association between a childhood of witnessing IPV and consequent adolescent and adulthood aggressive behaviors and violence (Ghani, 2018). More exploratory studies are needed to help understand how this intergenerational transmission occurs (Smith, Ireland, Park, Elwyn, & Thornberry, 2011). For example, studies show that the age of the exposure can have a significant impact on whether this intergenerational transmission may occur. There is research that has demonstrated that early intervention can decrease the chances of intergenerational transmission (Smith, Ireland, Park, Elwyn, & Thornberry, 2011).

Larkin, Beckos, and Shields (2012) stated that linkage to services can increase the chances of adaptive behaviors. Also, linkages to peer and community support systems can decrease the chances of adult maladaptive behaviors associated with adverse childhood experiences. In this study, several women witnessed IPV as children. The extent to which they resolved not having their children endure what they faced as children was an impetus to leave. Thus, the intergenerational issues here seem most relevant to future research on undocumented women and their determination to leave an abuser.

**Latino Population.**

Future longitudinal studies on the undocumented population of women who are IPV survivors will be vital in understanding trends, community networks of support, and resilience among this population. Relevant studies and designs will provide for more robust data for
policymakers. This is turn can inform more effective and efficient social service programs and training for police, mental health service providers, and social workers providing services to this undocumented and most vulnerable population.

**Implications for Policy**

**Police Training**

In the past, IPV has been viewed as a private family matter that should not involve the criminal justice system. As a result, U.S. courts were not equipped appropriately to adjudicate IPV cases. Recognizing these failures, the feminist movement gave rise to drastic changes in law enforcement agencies throughout the United States. This movement created a platform for researchers to investigate and collect data on police culture, perceptions, and training. Blaney (2010) found that police training in IPV was ineffective because of the following reasons: 1) “the in-service training was not undertaken by a licensed professional”; 2) “the length of training was insufficient”; 3) “training was not offered to all police officers…only those who were in specialized units”; 4) “problematic attitudes that police officers have on arrest”; and (5), “lack of continuous training” (p.369). However, this study is not representative of all police departments. For instance, the New York City (NYC) Police Department has shifted its attention to more effective training that involves licensed professionals to combat IPV (Horwitz, et al., 2011). Thus, mobile interprofessional crisis units exist in many law enforcement agencies, which have been effective in police responses to IPV. This approach has improved intervention, prevention of re-victimization, education, tracking of cases, and continuous training.

**Twenty-First Century Policing.**

White and Escobar (2008) have observed that police departments throughout the United States are revamping how police officers are trained for the 21st century. Areas of improvement
in training, technology, counterterrorism, and community policing have helped to promote and build a more cohesive community among police officers and the people they serve. Police departments throughout the United States have also improved in the areas of recruitment by using affirmative action practices, diversifying hiring practices, and hiring college-educated police officers. Haberfeld (2016) stated that lessons can be drawn by using a comparative lens addressing what other countries have done to improve community-police relations. She identified some of the implications of lesson drawing. These include improved police training to promote social justice practices, changing the pedagogy, multicultural and diversity training focused on improved community-oriented policing, recruitment, along with extending the length of training.

**Law Enforcement Funding under the VAVA.**

The Violence Against Women’s Act of 1994 allows law enforcement agencies to apply for grants and training that would traditionally be funded by State budgets. The purpose of these grants has been to promote the maintenance and replication of existing successful services in IPV and the development of “innovative,” “culturally,” and “linguistically specific strategies,” leading to the implementation of projects to enhance “access to services and resources” (VAWA, 2013). Section 109 allows for the development and provision of competent culturally and linguistically specific training either directly for law enforcement, a judicial agency, or related to a community-based service that is monitored by the police agency. Any agency that is requesting grant funds under this section must provide culturally and linguistically specific services. This law can help to fund and improve training for IPV service effectiveness involving police agencies.
Mastering knowledge of immigration law is complicated. However, social service providers need to be able to connect clients who are seeking pathways to permanency and citizenship to legal services. The U-Visa, made possible by the VAWA of 2000, allows victims of crimes, including IPV, to remain in the United States for four years after the U-Visas are granted. Since the enactment of the U-Visa, there have been several revisions to this clause. First, this has involved the limiting of how many U-Visas are granted, from 30,000 to 10,000 per year (Department of Homeland Security, 2017). In addition to the limitation on the U-Visas, the immigrant must have entered the United States legally. In 2013, after much debate, the VAWA kept the enactment of the U-Visa, however with a provision that would "allow immigrant individuals against whom a crime was committed, including IPV, to seek the U-Visas in exchange for their cooperation and help in the detection, investigation, prosecution, conviction, or sentencing of criminal activity" (Department of Homeland Security, 2017). Despite this provision, implementation of it in recent years has been hampered by anti-immigrant rhetoric and a refusal to enforce U-Visa requirements to which women, such as those in this study were entitled.

Limitations of Study

My goal as a researcher was to gain in-depth information into why underreporting is more prevalent among undocumented women who are IPV victims than their documented counterparts. The studied participants were unique and were drawn from a convenience sample, which was not representative of all undocumented women survivors of IPV. This research was conducted during a time in which there was heightened fear of deportation among undocumented immigrants, particularly those coming from South and Central America and Mexico. Although
this posed a risk, the author was able to obtain an expedited Institutional Review Board (IRB) approval, but with some exceptions. This constituted another set of limitations. The IRB’s first exception was that no follow-up interviews were allowed with research participants. Because there were no-follow up interviews, the author had to ensure that any clarification was to be undertaken during the time of the interview. Ideally, follow-up interviews would have permitted greater insight into the phenomenon being studied and permitted more probing following reflection after the first interview.

The author used self-disclosure at the outset with each participant, sharing that she had been a victim of IPV. Such disclosure can be seen from a feminist and empowerment perspective as a possible way to ensure more alignment of the researcher with the participants, reduce participant shame and embarrassment and to build a sense of credibility regarding the researcher. However, such self-disclosure can also be an impetus which elicits more socially desirable responses from the participants, thus introducing bias. Whether the latter or former is the case remains an empirical question. However, it is essential to note that such self-disclosure runs the risk of encouraging socially desirable answers and thus may add bias to participant responses.

Retention was another limitation because some of these women were under arrest by ICE and, therefore, were limited in where they could be by ICE regulation. For this study, retention issues occurred as some of the women were being tracked by ICE. Two of the research participants were under ICE surveillance and were not allowed to leave their homes unless they were going to the grocery store, medical services, or to take children to and from school.

Despite some limitations of this study, the richness of the data collected from these women may help inform future research and practice for scholars studying IPV among undocumented women, as well as mental health practitioners, social workers, and first
responders. It should be further noted that each of these participants, despite their risk of deportation, wanted to be a part of this study because they felt that their stories might empower other women to talk about their abuse. Subsequently, after the interviews, two research participants were deported. Although these women were deported, the contribution that they provided will help shed light on the vulnerabilities that they faced in their lives.

**Conclusion**

This study sought to search for the factors that accounted for the underreporting of IPV to the police by undocumented Latina victims. The findings from the study helped to delineate some of the impediments and facilitators in reporting. Uncovering these, given the vulnerability of the population, required specific research parameters that should be considered in such future research.

This phenomenological approach was best suited to explore and gain more in-depth insight into how the lived experience of Latina survivors of IPV influenced their decision to leave the abuser, report or not report IPV to law enforcement, and seek public, non-profit or informal supports. A quantitative analysis would have missed the invaluable information that was obtained through the in-depth interviews. A phenomenological approach was not enough to capture the lived experience on its own, however. Feminist and empowerment theories and perspectives helped to address the vulnerability that these women might have been experiencing. Such views guided the researcher in reducing some of their discomfort these women faced in sharing such distressing stories. As noted earlier, practices such as being affirming, avoiding questions that might have made them feel interrogated, calling them survivors, were all in keeping with empowerment and feminist practices.
Flexibility and cultural sensitivity facilitated the interview and analytic process. Another researcher who might not speak their language might have missed some critical information. All 15 participants who came to the United States illegally felt that this vulnerability impacted their decision to report or not report IPV to the police. Moreover, how one recruits this population is of utmost importance. Thus, consideration of the location for interviews, protection from detection by collecting no identifiable information, and private interviews were most helpful in gaining insight into the lived experience of undocumented Latina women who are IPV survivors.

While this researcher inferred from the study that these women exhibited great resilience, it is also important to remember that these women, while safe from their prior abuser at the time of the interview, nonetheless, remained very vulnerable. As noted earlier, two were deported after their interview. Others, too, could be deported. Thus, despite their resolve to stay safe, to protect their children, and to function adequately in their new post-abuse life, at any moment they could have their lives severely disrupted with deportation or face barriers to legalization. Because of this, previous clauses of the VAWA involving U-Visas need to be honored, which would then guarantee asylum for IPV victims. In current policy debates, one Presidential candidate has said that he would reinstate this U-Visa entitlement if elected president. If this were to pass, this would be of great service to those undocumented IPV victims seeking a pathway to permanency and safety. One might hope that regardless of the presidential election, guaranteed asylum would be the law of the land and no longer subject to the vagaries of politics of who is in elected office. Women have the right to live abuse-free lives, and this requires that public sector systems and supports, including law enforcement, and entitlement programs are made available to all regardless of immigration status. The very systems that were designed to help IPV victims, such as the court, police, public sector service providers, and their entitlement programs, can better
facilitate their safety rather than adding to their trauma and fears. Lastly, freedom from IPV is a human rights issue. The threat of deportation needs to be addressed as a reason why a victim, who is undocumented, may be unable to access services and thus may be trapped in an abusive relationship.
Bibliography


https://assets.speakcdn.com/assets/2497/domestic_violence.pdf


https://assets.speakcdn.com/assets/2497/domestic_violence2.pdf


https://www.thehotline.org/resources/vawa/


Appendix A: Semi-Structured Interview Questionnaire

Demographic Information
1. What is your first name, age, country of origin, and ethnicity?
2. What did you come to the United States?
3. Are you married or in a domestic relationship?
4. Do you have children? If so, how many? Do you have any of your children who were born in your country of origin?

Background Information

Acculturation
1. Why did you come to the United States?
2. How would you describe your experience since coming to the United States?
3. Do you have family that is residing in the United States? If so, describe who from your family is residing in the U.S. and if you are in contact with them?
4. What is the primary language spoken at home?
5. Do you have family traditions?

Education
1. What was the last grade you completed?

Employment
1. Are you employed?
2. How many hours of week do you work?
3. What is your family income?

Trauma
1. Tell me about your abuse?
2. How has the abuse affected you, family, and children?
3. Did you ever receive any treatment for your injuries? If so, what type of treatment? (medical, mental health or both? If not, why?

Perception of Law Enforcement/Service Providers
1. Have you ever reported the abuse to the police? If yes, tell me about your experience with law enforcement? If not, why?
2. What is your experience with service providers, mental or social workers?

Experience with social services
1. Have you ever sought out social services?
2. What services have you been able to access?
3. Have you ever been denied services? If yes, why?
4. Do you have medical insurance?
5. Do you know what a U-Visa is? Have you ever applied for a U-Visa?

Fears and views on Deportation

1. Do you fear deportation?
2. What are your fears?
3. What do you fear most about your future?

Additional contribution

1. Why have you decided to be a part of this research study?
2. Anything you care to share with the researcher?
Appendix B: Flyer/English

Intimate Partner Violence Research Study
Be part of an important research study among undocumented Hispanic women survivors!

Are you at least 18 years old and older?

Do you want to share your experience with domestic violence to better understand help-seeking behaviors among the undocumented Hispanic women”?

If you answered YES to these questions, you may be eligible to participate in this research study. For your participation, you will receive $30 dollars.

The purpose of this research study is to identify barriers amongst Hispanic women seeking Domestic violence services. Benefits include monetary compensation for participation. It will also allow for more effective service delivery among service providers for survivors of domestic violence.

This study is being conducted by Sharon Gandarilla-Javier, Graduate Student, School of Social Welfare, University at Albany.

Please contact Sharon Gandarilla-Javier at sgandarilla@albany.edu or (845) xxx-xxxx for more information. You may also contact Faculty Advisor, Dr. Katherine Briar-Lawson, Ph.D at k briarlawson@albany.edu or (518) xxx-xxxx
Estudio de investigación de violencia de pareja
¡Sé parte de un importante estudio de investigación entre las sobrevivientes de mujeres hispanas indocumentadas!

¿Tiene al menos 18 años de edad y más?

¿Desea compartir su experiencia con la violencia doméstica para comprender mejor las conductas de búsqueda de ayuda entre las mujeres hispanas indocumentadas "?

Si respondió SÍ a estas preguntas, puede ser elegible para participar en este estudio de investigación. Por su participación, recibirá $ 30 dólares.

El propósito de este estudio de investigación es identificar las barreras entre las mujeres hispanas que buscan servicios de violencia doméstica. Los beneficios incluyen una compensación monetaria por la participación. También permitirá una entrega de servicios más efectiva entre proveedores de servicios para sobrevivientes de violencia doméstica.

Este estudio está siendo conducido por Sharon Gandarilla-Javier, estudiante graduada, escuela de bienestar social, universidad en Albany.

Por favor, póngase en contacto con Sharon Gandarilla-Javier en sgandarilla@albany.edu o (845) xxx-xxxx para más información. También puede contactar a la Asesora de Facultad, Dra. Katherine Briar-Lawson, kbriarlawson@albany.edu o (518) xxx-xxxx
University at Albany
CONSENT FORM FOR RESEARCH PARTICIPATION

**Study Title:** The experience of undocumented Hispanic women survivors seeking domestic violence services.

**Principal Investigator:** Sharon Gandarilla-Javier, Doctoral Student

**IRB Study Number:** 4950

**Name of the researcher**
I am a Sharon Gandarilla-Javier at the University at Albany, in the School of Social Welfare. I am planning to conduct a research study, which I invite you to take part in.

**Risks & discomforts of participation**
If I choose to participate in this study, I understand and agree that I will be asked to commit to 1-2-hour(s) interview in a private location. We do not anticipate any risk in your participation other than you may become uncomfortable answering some of the questions.

**Measures to be taken to minimize risks and discomforts**
I understand and agree that if I feel distressed during the interview, the interviewer will provide me with a list of community resources at little to no cost to me. I also understand and agree that I have the right to withdraw or decline to answer any questions.

**Audio/Video Recording of subjects**
I would like to audio-record this interview to make sure that I remember accurately all the information you provide. If you prefer not to be audio-recorded, I will take notes instead. The audiotapes will then be transcribed by the researcher for analysis.

**Confidentiality of records/data**
I will keep these tapes in a locked and secure cabinet and later destroyed by researcher after dissertation is complete and published. Additionally, I may quote your remarks in presentations or articles resulting from this work. I understand that the researcher will not be collecting identifiable information, such as date of birth, employment, or home address. I understand that my identity will remain secure and anonymous. Lastly, as with all research, there is a chance that confidentiality of the information we collect from you could be breached; we will take steps to minimize this risk, as discussed in more detail below in this form.

**Description of the research**
This study is designed to learn more about the experience of undocumented Hispanic woman survivors of domestic violence.
Expected benefits to subjects
You are not likely to have any direct benefit from being in this research study however, taking part in this research study, may help us learn new things that will help others. Participation in this study will involve no cost to you. I understand that I will receive $30 in compensation as an incentive for participating in this study. If participation is not completed, a prorated amount will be provided.

Consent
I have read this form and the research study has been explained to me. I have been given the opportunity to ask questions and my questions have been answered. If I have additional questions, I have been given the contact information of Sharon Gandarilla at sgandarilla@albany.edu or by telephone at 845-xxx-xxxx. I agree to participate in the research study described above and will receive a copy of this consent form.
Informed Consent: Spanish

Universidad en Albany
FORMULARIO DE CONSENTIMIENTO PARA LA PARTICIPACIÓN DE INVESTIGACIÓN

Título del estudio: La experiencia de sobrevivientes de mujeres hispanas indocumentadas que buscan servicios de violencia doméstica.

Investigador principal: Sharon Gandarilla-Javier, estudiante de doctorado

Número de estudio IRB: 4950

Nombre del investigador
Soy Sharon Gandarilla-Javier en la Universidad de Albany, en la Escuela de Bienestar Social. Planeo realizar un estudio de investigación, en el que los invito a participar.

Riesgos e incomodidades de la participación
Si elijo participar en este estudio, entiendo y acepto que se me pedirá que me comprometa a una entrevista de 1-2 horas en un lugar privado. No anticipamos ningún riesgo en su participación, aparte de que puede sentirse incómodo al responder algunas de las preguntas.

Medidas a tomar para minimizar los riesgos y las incomodidades
Entiendo y acepto que, si me siento angustiado durante la entrevista, el entrevistador me proporcionará una lista de recursos comunitarios a poco o ningún costo para mí. También entiendo y acepto que tengo el derecho de retirarme o negarme a responder cualquier pregunta.

Grabación de audio / video de sujetos
Me gustaría grabar esta entrevista en audio para asegurarme de recordar con precisión toda la información que me proporciona. Si prefiere no grabarse en audio, tomaré notas en su lugar. Las cintas de audio luego serán transcritas por el investigador para su análisis.

Confidencialidad de registros / datos
Guardaré estas cintas en un gabinete cerrado y seguro y luego las destruirá un investigador después de que la tesis esté completa y publicada. Además, puedo citar sus comentarios en presentaciones o artículos resultantes de este trabajo. Entiendo que el investigador no recopilará información identificable, como fecha de nacimiento, empleo o domicilio. Entiendo que mi identidad permanecerá segura y anónima. Por último, al igual que con todas las investigaciones, existe la posibilidad de que se pueda violar la confidencialidad de la información que recopilamos de usted; tomaremos medidas para minimizar este riesgo, como se detalla a continuación en este formulario.
Descripción de la investigación
Este estudio está diseñado para aprender más sobre la experiencia de mujeres hispanas indocumentadas sobrevivientes de violencia doméstica.

Beneficios esperados para los sujetos
No es probable que tenga ningún beneficio directo al participar en este estudio de investigación; sin embargo, participar en este estudio de investigación puede ayudarnos a aprender cosas nuevas que ayudarán a otros. La participación en este estudio no implicará ningún costo para usted. Entiendo que recibiré $ 30 en compensación como incentivo para participar en este estudio. Si no se completa la participación, se proporcionará una cantidad prorrateada.

Consentimiento
He leído este formulario y el estudio de investigación me ha sido explicado. Se me ha dado la oportunidad de hacer preguntas y mis preguntas han sido respondidas. Si tengo más preguntas, me han dado la información de contacto de Sharon Gandarilla en sgandarilla@albany.edu o por teléfono al 845-xxx-xxxx. Acepto participar en el estudio de investigación descrito anteriormente y recibiré una copia de este formulario de consentimiento.
Appendix D: Participant Bio-Sketches

To protect identities, the author used fictitious names for the participants in the study.

Bio-Sketches

Participant 1 (Interviewed on August 18, 2018).

Juana is a 66-year-old mother of three adult children who emigrated from Dominican Republic (D.R.) in 1986 to the US. This is Juana’s second marriage. At the time of the interview, she was unemployed due to her chronic battle with diabetes. Juana is currently separated from her second husband and is currently seeking citizenship.

Participant 2 (Interviewed on August 18, 2018).

Carmen is a 34-year-old mother of two children who emigrated from Guatemala in 2009. She is currently employed as a waitress. Carmen reported coming to the US on a visa that later expired. In 2009, after coming to the US, she found that she was pregnant from her abusive boyfriend. Carmen reported that the abuse continued after the birth of their second child in 2010.

Participant 3 (Interviewed on August 18, 2018).

Jasmine is a 32-year-old mother of two children who emigrated from Ecuador to the US in 1999. Jasmine’s parents brought her to the US after settling in the US. At the time of the interview Jasmine was married but reported that she is currently separated from her husband. Jasmine is employed part-time and residing with her in-laws and two daughters. Jasmine is seeking legal residency which will allow her to work legally in the US.

Participant 4 (Interviewed on November 5, 2018).

Lisa is a 33-year-old woman who emigrated from Guatemala in 2008. Lisa’s parents brought her to the US shortly after their arrival. Lisa reported having no children and not being married. Lisa reported that she completed H.S. in the US and is currently working under a work
sponsorship which will allow her to work legally in the US. Lisa is currently seeking a pathway to citizenship.

**Participant 5 (Interviewed on November 8, 2018).**

Olga is a 47-year-old mother of three adult children who emigrated from Guatemala with her husband in 1998 with two of her three children. She is currently divorced from her spouse. At the time of the interview, Olga was working two jobs: as a housekeeper and as a cashier. Olga reported having no legal residency and having no pathway to citizenship.

**Participant 6 (Interviewed on November 8, 2018).**

Maria is a 63-year-old mother of three children. She came to the US in 2011 on a visiting visa and never returned to her country. At the time of the interview, Maria reported that she is legally married; however, she has been separated from her husband since 2015. Maria is currently residing with one of her oldest sons. Maria reported that she has no legal residency and no pathway to citizenship.

**Participant 7 (Interviewed on November 8, 2018).**

Lizabeth is a 44-year-old mother of five children who migrated from Mexico in 2015. Lizabeth has three older children whom she brought with her to the US. and two younger children who were born in the US. Lizabeth is currently employed as a housekeeper and babysitter and is residing with her two youngest children and cousins. At the time of the interview, Lizabeth reported having no pathway to citizenship and having no communication with her older three children.

**Participant 8 (Interviewed on November 9, 2018).**

Marleny is a 30-year-old mother of one child who emigrated from Guatemala in 2008 to the US. Marleny reported that she completed the 3rd grade. She is currently employed as a
waitress and housekeeper. Marleny is married and is currently separated from her husband. Marleny reported having no legal residency and no pathway to citizenship.

Participant 9 (Interviewed on January 10, 2019).

Marcia is a 32-year-old mother of one child who emigrated from Ecuador in 1999 to the US seeking asylum. Marcia reported completing the 5th grade and is currently employed as waitress. Marcia’s only child is residing in Ecuador with her parents. At the time of the interview, Marcia was separated and was in the process of divorce. Marcia reported having no legal residency and no pathway to citizenship.

Participant 10 (Interviewed on January 11, 2019).

Maribel is a 55-year-old mother of four children who emigrated from Ecuador in 1996. Maribel reported that she completed the 4th grade in Ecuador and is currently working as a waitress. Maribel and her husband migrated to the US. in pursuit of a better life. At the time of the interview, Maribel reported that three of her four children are in the US and the oldest decided to stay in Ecuador with her parents. Maribel reported that she was separated from her abusive husband. Marlene reported having no legal residency and no pathway to citizenship.

Participant 11 (Interviewed on January 11, 2019).

Maritza is a 47-year-old mother of two adult children who emigrated from Guatemala in 1998 seeking asylum. Maritza reported that her partner became abusive shortly after living together. Maritza is currently employed as a babysitter and is separated from her partner. At the time of the interview, Maritza reported having no communication with her children as a result of her leaving them in Guatemala. Maritza reported having no legal residency and no pathway to citizenship.
Participant 12 (Interviewed on January 27, 2019).

Rosa is a 42-year-old mother of two children who emigrated from Venezuela in 2003 seeking political asylum from the government. Rosa came to the US on a temporary work visa. Rosa reported that she met her husband in the US. and has two daughters. Rosa is currently working as a waitress and is seeking a divorce from her estranged husband. At the time of the interview, Rosa reported that she is seeking legal residency.

Participant 13 (Interviewed on January 27, 2019).

Isabela is a 33-year-old mother of one child who emigrated from Mexico in 2018 and reported that she came to the US as an undocumented immigrant. Isabela is currently married and is unemployed. At the time of the interview, Isabela was under house arrest by the U.S. Immigration and Customs Enforcement (ICE) agency. Isabela is currently not residing with her husband who is the father of her child. Isabela is unemployed and is facing deportation. Isabela reported having no legal residency and no pathway to citizenship.

Participant 14 (Interviewed on January 27, 2019).

Sayda is a 39-year-old mother of two children who emigrated from Mexico to the US. in 2019 seeking asylum. Sayda is married; however, she is currently separated from her abusive husband. Sayda is currently unemployed residing with family members. Sayda reported having no legal residency and no pathway to citizenship and was facing deportation at the time of the interview.

Participant 15 (Interviewed on February 3, 2019).

Yolanda is a 38-year-old mother of three children who emigrated from Peru with her parents in 1999 to the US. While in the US, Yolanda attended high school but reported that she dropped out in the 9th grade, after becoming pregnant. Yolanda reported at the time of the
interview that she was divorced from her abusive husband and was seeking citizenship. Yolanda is currently employed as a waitress.

Summary of Participants Bio Sketches

The literature on intimate partner violence has identified risk factors for IPV such as income, education, age, race, and culture, which have a significant impact on the victim’s decision to leave or stay with the abuser (NCADV, 2017). The biosketches of these fifteen women help to shed light on their decision to leave or stay in their abusive relationship. For the benefit of the researcher, this biographical information was useful in guiding the conversation. Since the empowerment and feminist perspectives are the theoretical frameworks on which this study was founded, by sharing their biographies and telling their stories, I am providing a voice for the participants. The feminist and empowerment perspectives allowed the women to restore their identity by allowing them to tell their story of abuse as they experienced it.