A Study on Visible Minority Immigrant Women’s Experiences with Domestic Violence

Masiya Ahmadzai¹, Catherine Carolyn Stewart², Bharati Sethi³

¹Social Justice and Community Engagement, Faculty of Liberal Arts, Wilfrid Laurier University, Brantford, Canada
²Human Rights and Criminology, Wilfrid Laurier University, Brantford, Canada
³School of Social Work, Kings College, University of Western Ontario, London, Canada

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Abstract

The purpose of this exploratory and qualitative research was to better understand the personal experiences of visible minority immigrant women seeking help with domestic violence (DV) in Southern Ontario, Canada. In-depth interviews were carried out with two survivors of DV and three DV professionals: their personal and professional experiences with DV as it affects visible minority immigrant women were explored. A gender-based analysis of the participants’ narratives revealed that a number of diversity-related axis such as, gender, visible minority, immigrant status and economic status influenced women’s experiences with abuse. The results indicate the various barriers visible minority immigrant women who are experiencing DV, may face when they try to seek help and support. Specifically, challenges include recognition of foreign credentials and employment, language, culture, isolation, and shelters. Police responses, court proceedings, spousal sponsorship policies, legal status and fear of deportation/breakdown of sponsorship contribute to structural barriers. Study implications for policy and practice are discussed and recommendations provided.

Keywords

Domestic Violence, Visible Minority, Immigrant, Barriers, Canada

1. Introduction

Domestic violence (DV) has been recognized for some time as a pervasive issue impacting many women in
Canada and elsewhere (Statistics Canada). Furthermore, “all women, regardless of class, colour, race/ethnicity, ability, age, or sexual orientation”, are vulnerable to the possibility [1]. Although studies remain unclear in terms of the exact rate of DV in visible minority immigrant communities, it is reasonable to assert that due to the particular circumstances and challenges faced by women in these communities, they may be even more vulnerable [2].

A qualitative exploratory study was undertaken and the purpose of this research was 1) to examine the experiences of visible minority immigrant women seeking help with domestic violence (DV) in Southern Ontario, Canada; and 2) to highlight barriers that women may experience dealing with DV in another country and accessing supports for visible minority immigrant women. The study pays special attention to how diversity axis such as gender, immigrant, visible minority and economic status shape the lived experiences of women seeking help with DV, making apparent that their experiences are unique and multifaceted.

2. Literature Review

2.1. Common Barriers to Seeking Help with Domestic Violence

Much of the dominant literature on immigrant experiences dealing with DV highlight that there are several common barriers that immigrant women (visible minority or otherwise) face in seeking help with DV. It is important to acknowledge that these barriers are not mutually exclusive, and often times overlap, and thus intensifying immigrant women’s experiences with DV. Menjivar and Salcido (2002) [3] claim that experiences of DV among immigrant women are intensified as a result of their immigrant status by factors such as, “limited host-language skills, isolation from and contact with family and community, lack of access to dignified jobs, uncertain legal statuses, and experiences with authorities in their origin countries.” Additionally, Macleod and Shin stress that immigrant women not only confront issues of domestic abuse, but also economic, social, linguistic, and cultural marginalization [4]. Specifically, the following barriers will be explored in greater detail: foreign credentials and employment, culture, community, social services, language, isolation, and structural factors.

2.1.1. Foreign Credentials and Employment

One of the difficulties encountered by new immigrants is finding an adequate job, with 46% citing this as the most difficult [5]. According to Guo (2009) [6], “Lack of Canadian experience and transferability of foreign credentials were reported as the most critical hurdles to employment.” Additionally, there is “Lack of agreed-upon national standards” pertaining to the process of foreign credential recognition, with individual institutions conducting their own assessment of foreign credentials [6]. This can create a lack of clarity and inconsistency in the process of foreign credential recognition. Guo (2009) [6] claims, “The assessment and recognition of prior learning, or the lack thereof, is a political act.” The author adds, “While certain forms of knowledge are legitimized as valid, the learning and work experience of foreign-trained professionals are often treated with suspicion and as inferior.” [6].

It is important to emphasize that the lack of recognition of foreign credentials has different consequences for women compared to men. Guo (2009) [6] states, “After immigrating to Canada, many immigrant women professionals are unemployed or working part-time in jobs for which they are overqualified.” Also, according to Statistics Canada (2011) [7], immigrant women have a lower employment rate compared to their male counterparts. This means that immigrant women are more prone to economic instability, which in turn can pose an additional barrier in seeking help with DV.

Studies have indicated that the most severe forms of domestic violence occur among low-income women of colour [8]. Leone, Johnson, Cohan, and Lloyd (2004) [9] in their research on the consequences of male partner violence for low-income minority women cited economic dependency and lack of economic resources as the most common barrier to leaving abusive relationships. Coker (2001) [10] highlights that one way state intervention can be useful is with respect to providing “significant material resources to be made available to the poorest and most disadvantaged battered women to better their chances of success in leaving or changing the immediate battering situation.” However, even if immigrant women qualify for government assistance under the law, the very fact that the acceptance of government financial assistance may jeopardize their chances of obtaining legal residence will deter many from seeking it [3]. In short, material resources are scarce to begin with in relation to poor immigrant women, and having an uncertain legal status can increase financial vulnerability.
2.1.2. Culture: Harmful Stereotypes

According to Menjivar and Salcido (2002) [3], there has been a common tendency to stereotype domestic violence as part of some ethnic groups’ culture. Echoing a similar perspective, Sokoloff and Dupont (2005) [8] argue that when violence occurs in communities of colour and immigrant communities, “culture is often alleged to have a particularly influential explanatory power.” Pratt and Sokoloff further note that “specific cases are not conceptualized as reflecting individual behavior; instead, entire groups are stereotyped.” [8]. Accordingly, harmful stereotypes about culture can have real life consequences for many racialized immigrant women. For example, Burman, Smailes, and Chantler (2004) [11] argue that DV services to women of particular backgrounds are structured around assumptions about culture, which contribute to barriers in accessing DV services. The authors aver that DV experienced by minoritized women is “rendered less visible, as something that can be overlooked or even excused for ‘cultural reasons’: a homogenized absence.” [11]. They further emphasize, “just as accounts of domestic violence have moved away from ‘woman-blaming’, so it is important to avoid ‘culture-blaming’ minoritized cultures” [11]. Otherwise harmful stereotypes about culture result in added difficulty in accessing DV services.

Nevertheless, Sokoloff and Dupont (2005) [8] acknowledge the importance of understanding the role that culture can play in combating domestic violence but warn against relying on simplistic notions of culture. The authors argue, “Rather, we must address how different communities’ cultural experiences of violence are mediated through structural forms of oppression, such as racism, colonialism, economic exploitation, heterosexism, and the like” [8].

2.1.3. Community Response

While it is essential to contest harmful stereotypes about culture that mainstream society holds, constructive discussions on the role of culture and community can provide valuable insights in understanding the unique experiences of visible minority immigrant women. Shankar, Das, and Atwal (2013) [12] in their discussion on barriers that prevent South Asian women from seeking help, point out that many women who migrate, often have “no trusted family members they can turn to for support and may be terrified of consequences such as ostracism from the community… if they talk about intimate partner violence or are seen accessing help.” Moreover, according to Crenshaw (1991) [13] there is often “resistance by the immigrant community to those who attempt to provide support services to abused women mostly in fear about the “image” of the community.”

2.1.4. Social Services

Another barrier that immigrant women face is in relation to social services being ill-equipped to effectively respond to the DV that they are experiencing. Menjivar and Salcido (2002) [3] in examining DV against immigrant women in Britain note, “there are several groups that provide shelter to women who are victims of domestic violence, but few do so for immigrants.” The authors further underline that “cultural sensitivity and immigrant-language skills among professionals in the community” pose another challenge as they affect their ability to effectively communicate with the victims experiencing DV, which in turn hinders the ability to provide adequate information [3]. Additionally, Gill highlights limitations with mainstream service providers specifically in Canada, and notes that they may “fail to provide culturally appropriate supports and interventions that can empower these women and perpetuate the racialization of their cultures and religions as inferior, primitive and barbaric” [12]. One way to tackle these issues is to recognize that there is no “one-size-fits-all explanation for domestic violence and that, consequently, solutions must reflect these differences.” [8].

2.1.5. Language

Language can further act as a barrier and contribute to the disadvantages that many immigrant women dealing with DV already experience in terms of accessing and communicating their needs to service providers. Crenshaw (1991) [13] argues that language barriers limit opportunities for non-English speaking women to benefit from existing support services. She states, “Such barriers not only limit access to information about shelters, but also limit access to security shelters provide.” [13]. Bui and Morash stress similar sentiments, noting, “Language is a factor that impedes women from learning and accessing services in receiving communities” but it also impedes communicating their needs to these services [3]. Crenshaw (1991) [13] claims, “Some shelters turn non-English speaking women away for lack of bilingual personnel and resources.” Even in cases where
interpreters are available and used, Menjivar and Salcido (2002) [3] assert, “The information given to a police officer may be filtered and distorted by an interpreter who may even favor the aggressor.” Accordingly, language barriers can lead to higher levels of vulnerability, alienation and ridicule among immigrant women experiencing DV [3]. However, being proficient in the host country’s language(s) or being able to access appropriate linguistic support can eliminate some of these conundrums. Menjivar and Salcido (2002) [3] further note, “Language can break down barriers for immigrant women in domestic violence situations since women’s language proficiency can reduce the batterer’s ability to reinforce his power to control.” For instance, language proficiency can provide immigrant women with the means to be able to ask for help. When immigrant women cannot speak English, it will limit their level of communication with the majority of Canadians thus, leading to issues of isolation and accessing DV services.

### 2.1.6. Isolation

Isolation is another factor that can affect immigrant women experiencing DV and hinder them from seeking help. Raj and Silverman (2002) [14] argue that immigrant women experience an additional layer of vulnerability because these “women live within two often conflicting cultures and within a context in which they are isolated and viewed as other.” The experience of moving to a new country can be an isolating one, even without the domestic abuse, simply due to being viewed as other. Experiencing DV can deepen these feelings of isolation. Menjivar and Salcido (2002) [3] note the following:

*Isolation may occur more easily for immigrant women as many have left behind families and loved ones. They enter a foreign environment where they may not know the language, culture, or physical geographic area and may recognize only a few familiar faces. In these situations, it is easier for men to control women’s lives both emotionally and physically. Due to isolation, men are better able to gain sole control over resources that could offer legal, financial, and/or emotional support to the women.*

In short, social isolation can increase immigrant women’s vulnerability to not only experiencing abuse, but can also make leaving an abusive relationship more difficult.

### 2.1.7. Structural Barriers

#### Role of the State and Criminal Justice System

Immigrant women dealing with DV may also experience structural barriers. More specifically, Burman, Smailes, and Chantler (2004) [11] examine institutional racism, and argue that racism continues through immigration practices in ways that reinforce women’s abuse within violent relationships. Moreover, Coker (2001) [10] avers that state intervention can be harmful by, for instance, “prosecution of battered women involved, even peripherally, in criminal conduct.” It is important to look at the role of institutions in inadvertently helping to perpetuate women’s abuse and thereby increasing the vulnerability of women experiencing DV. The criminal justice process may also become a barrier due to its ambiguous nature. Goldman (1999) [15] states that “the courts have been ambiguous in determining what constitutes abuse and the process remains rigid and bureaucratic.”

#### Law Enforcement

Another problematic factor that immigrant women dealing with DV can face comes from the police response. In particular, Menjivar and Salcido (2002) [3] argue that race, legality and language can inform a police officer’s actions. Ferraro further claims, “Even when policies instruct police to arrest, officers will rely on the victim’s and the offender’s characteristics to determine whether to arrest, a decision that also will be informed by legal, ideological, practical, and political considerations.” [3]. Furthermore, Goldman (1999) [15] states, “Sometimes, it is the very involvement of the police and the law that may keep an immigrant woman in an abusive relationship.” The author argues that under the law, both the husband and wife will be arrested if they have had a physical confrontation before the police arrive, “even if the wife’s actions were in self-defence” [15]. Battered women run the risk of being arrested for DV (i.e., dual charging) due to mandatory charging regimes. This form of state intervention is sometimes not only unnecessarily intrusive, but harmful as well, particularly to women of colour who are both abused and poor [3]. Similarly, Richie (2002) [16] argues that an overreliance on law enforcement in poor communities of colour has had several unintended negative consequences such as: increased use of force, mass incarceration of young men of colour, and police brutality. As a result, many women of colour may feel ambivalent about involving the police in DV situations. This further indicates that police attitudes and responses can deter immigrant women from seeking formal help, and thus comprise another structural barrier.
Spousal Sponsorship, Legal Status and Breakdown of Sponsorship

Simes (2010) [17] indicates that in Canada, the majority of sponsored individuals immigrating under the family class sponsorship are spouses who are largely women and South Asian. Merali (2008) [18] argues, “Although family immigration policies were initially developed to promote family reunification” Canada has experienced “a large influx of female marriage migrants in recent decades.” Consequently, any policy, law or regulation pertaining to spousal sponsorship will have a disproportionately gendered effect [17] [18]. Merali (2008) [18] wrote, “Their vulnerability to maltreatment has been attributed to the gender-insensitive nature of family immigration policies.”

According to Thobani (1999) [19], “The state currently intensifies the dependency of sponsored immigrant women on their sponsors through the sponsorship regulations, making these women more vulnerable to violence and abuse.” Specifically, Alaggia, Regehr, and Rishchynski (2009) [20] explain that as part of the sponsorship process, the sponsor must sign an “Undertaking” promising “to be responsible for supporting his or her spouse, common-law or conjugal partner for three years.” Merali (2008) [18] asserts that within this time period “the wife has no independent access to resources and is not eligible to receive any Social Security benefits.” Regehr and Kanani (2006) note that exceptions could apply if the abusive sponsor refuses to honour financial obligations, and in cases where the sponsored victims cannot support themselves, they may apply for social assistance [20]. However, Alaggia, Regehr, and Rishchynski (2009) [20] emphasize that “the reality is that many of these women are isolated and do not have access to the information or support needed to leave the abusive situations.”

According to Merali (2008) [18], “Unlike immigrants who come to North America independently, she is not connected to any immigration agencies or social supports apart from her husband.” In other words, spousal sponsorship policies can create structural barriers for sponsored immigrant women seeking help due to economic and information-related dependency on their spouse, which in turn increases their vulnerability to abuse. Ultimately, the sponsorship relationship puts husbands in positions of power over their wives, and this makes immigrant women subject to increased patriarchal control [19].

Spousal sponsorship policies can also create dependency in respect to legal status, which can impact women’s risk for abuse, and it may also affect their choices in staying in abusive relationships. Crenshaw (1991) [13] highlights that immigrant women are vulnerable to spousal violence because so many of them depend on their husbands for information regarding their legal status. Other sponsor-related barriers that have been key to female marriage migrants’ experiences in Canada include “concealment of immigration papers” as to limit the woman’s awareness regarding immigration status and threats of deportation [19]. Crenshaw (1991) [13] asserts, “Even if the threats are unfounded, women who have no independent access to information will still be intimidated by such threats.” Another challenge is that because many of the immigration documents are in English, spouses may mistranslate it, thereby further limiting immigrant women’s awareness pertaining to their status.

There are certain measures in place that offer spousal sponsored immigrant women who hold permanent resident status some protection from losing their status or facing deportation due to leaving an abusive relationship. However, she is still at risk of losing her status if her sponsor claims: 1) that the relationship was not genuine; and 2) the sponsored woman omitted or falsified information on her application [21]. Consequently, this can put immigrant women in vulnerable situations, as they may fear their own legal status, which can prevent them from reporting abuse, and thereby overshadow their personal safety. Furthermore, immigrant women’s vulnerability to abuse is further heightened because of the recent amendment that came into force in 2012, which introduces conditional permanent resident status as a way of weeding out fictitious marriages [22]. The conditional measure requires the sponsored spouse to cohabit in a “legitimate” relationship for two years after arrival in Canada; otherwise the sponsored spouse’s status could be revoked [22]. This can present obstacles for immigrant women experiencing abuse, as they may be unable to obtain legal status once they leave the abusive relationship before the two-year period. This new amendment also reinforces the state’s power over women by preserving patriarchal immigration structures. In instances where immigrant women experience abuse or violence by a sponsor, resulting in a relationship breakdown, they can make an application for humanitarian and compassionate grounds in Canada [20]. However, assessment of applications involves a degree of subjectivity as immigration officers use their discretion in assessing. Allagia, Regehr, and Rishchynski (2009) [20] claim, “These policies and practices can potentially put sponsored women who are abused in untenable situations.” This may discourage immigrant women from seeking help with DV, and consequently, puts them at an increased risk of physical harm.
3. Method

3.1. Theoretical Perspectives

Under the umbrella of an anti-oppression perspective [23], this research draws on feminist understandings of DV. According to Loseke, Gelles, and Cavanaugh (2005) [24], our understanding is incomplete if we do not recognize that DV is about gender and power. That is, men controlling women through the use of violence in intimate partner relationships [25]. Johnson and Leone (2005) [26] define it as “The attempt to dominate one’s partner and to exert general control over the relationship, domination that is manifested in the use of a wide range of power and control tactics, including violence.”

In addition, the study contextualizes the experiences of the study participants, taking into account a range of diversity axis such as, gender, visible minority, immigrant and economic statuses that shape the experiences of visible minority immigrant women dealing with DV.

3.2. Recruitment Process

For this research, two specific groups of participants were sought out who fit the following criteria:

**Group 1**: Participants (=2) who identified as heterosexual, female, first-generation visible minority immigrants over the age of 18 from Southern Ontario.

**Group 2**: Professionals (=3) who are service providers in the field of DV (or other related fields, such as violence against women and settlement services) in Southern Ontario, and over the age of 18.

All participants were fluent in English. A diverse sample along ethnic backgrounds was interviewed, consisting of five participants in total: two visible minority immigrant women who are survivors of DV and three female service providers. The specific recruitment process differed between group one and group two. Access to the two survivors of DV was gained through the assistance of a third-party (i.e., professionals & service providers). Interested participants were given recruitment letters, emphasizing their completely voluntary participation. Alternatively, the professionals and service providers were directly sought out and contacted through using Google search, which identified potential organizations in Southern Ontario. This research utilized purposive sampling, where participants were deliberately sought out from Southern Ontario, who represented specific knowledge and experiences with DV.

3.3. Qualitative Interviewing

The specific research method was qualitative interviewing [27], which was a useful method for delving into the depth and complexity of personal narratives. Qualitative interviews provided the platform for research participants to share their personal experiences, therefore giving a voice to those who have been silenced and marginalized by allowing them to discuss their respective experiences with oppression. Rubin and Rubin (2012) [27] emphasized “the importance of working with interviewees as partners rather than treating them as objects of research.” The interviewer endeavoured to keep this at the forefront of her awareness when she carried out the interviews. Explicitly acknowledging that participants have epistemic privilege as a result of their lived experiences can be empowering for them [28]. In terms of this research project, the experiential knowledge of the participants (survivors of DV and professionals in the field of DV) proved to be a critical source of information and insights that deepened our understanding of the experiences of visible minority immigrant women seeking help with DV.

The two groups of participants were interviewed using two different interview methods. Specifically, with the survivors of DV, the life story interview method was used because of its emphasis on the importance of participants sharing their personal stories on their own accord and in whatever form, shape and style that is most comfortable for them [29]. Atkinson (1998) [29] defines a life story interview as “a fairly complete narrating of one’s entire experience of life as a whole, highlighting the most important aspects.” Using life story interview with the two survivors was extremely useful because it focused on their entire life, and this allowed for insight into their experiences of pre-migration and post-migration.

Alternatively, with the professionals, semi-structured, in-depth interviews were conducted. Rubin and Rubin (2012) [27] explain semi-structured interviews as the following: “The researcher has a specific topic to learn
about, prepares a number of questions in advance, and plans to ask follow-up questions.” In adding to this, Glesne (2010) [30] states “questions may emerge in the course of interview and may add to or replace pre-established ones.” Using a semi-structured interview method with the professionals was suitable, because it allowed asking specific questions pertaining to the experiences of visible minority immigrant women seeking help with DV, while at the same time, its loose structure fostered an interview environment that was less formal and rigid, allowing the direction of the interview to be flexible.

All five interviews were one-on-one and audio-recorded, and participants had the option to choose a location of their preference. The interviews lasted anywhere from 45 minutes to 3 hours. The data was collected and subsequently transcribed verbatim. However, for the purpose of clarity, participants’ quotes have been slightly retouched. During the transcription process, the data was anonymized to protect the identity of all five participants. As an alternative to the participants’ real names, pseudonyms have been used throughout this study. The pseudonyms used are as follows: Anamika1, Nila, Mariam, Sadia, and Hasina. All of the data was collected and analyzed solely by the principal investigator between June 2015 and October 2015.

3.4. Analysis

The method of analysis utilized for this research was a gender-based analysis plus (GBA+) framework [31]. The plus indicates that that it goes beyond gender and “includes the examination of a range of other intersecting identity factors (such as age, education, language, geography, culture and income).” [31]. Specifically, GBA+ is used by government personnel in the assessment of policies, programs and initiatives. In terms of the research at hand, it was useful as a method to analyze the experiences of visible minority immigrant women dealing with DV by taking into consideration their positions as women, visible minorities, immigrants, and economically disadvantaged. Accounting for the diversity axis is critical for contextualizing the experiences of visible minority immigrant women.

Once data collection was complete, the interview transcriptions were anonymized to ensure confidentiality and anonymity by removing identifiable information about the participants (e.g., their names and geographical location). Once transcribed, the interview data were coded thematically using NVivo, an electronic database, in order to produce consistent and rigorous research. Emergent themes were identified through constant comparison and immersion in the data. Emergent themes were then contextualized and compared with the literature. More specifically, cross-sectional categorical indexing that allowed for various explanations and interpretations of the interview data rather than viewing the data as an end product was more valid and reliable. It is important not to treat the categorically indexed slices of data as uniform or static [32]. In order to ensure accuracy of the findings, a number of strategies were used, such as, audio recording of the interviews, seeking out differing or opposing points of views, cross-referencing different types of data, and cross-checking of factual information.

Once the data was sorted and ordered, we returned to analyzing the data in respect to the research question, keeping in mind that it is not an analytically neutral process [32]. The data was read literally, interpretively and reflexively, with the latter two being most vital for this research [32]. Thus, most of the focus was on the interpretation of the data and consideration of the role of the lead interviewer in generating and interpreting the data. In order to ensure reliability of this research, we made sure that the data generation and data analysis were consistent with the research question and that this was done in a careful, honest and thorough way.

4. Research Findings and Discussion

The following section presents a summary and analysis of the results accrued from all five interviews. As mentioned earlier, two DV survivors (Anamika and Nila) and three professionals (Mariam, Sadia and Hasina) were interviewed. The first section provides a brief account of the two survivors’ (Anamika and Nila) personal stories for the purpose of contextualizing the analysis that follows. The second section consists of a combined results and analysis section, which draws on the results from all five interviews. These results are broken down into common themes and subthemes, which are supported with quotes and excerpts from the participants’ interviews. Six common themes were organized according to the barriers that visible minority immigrant women experience in respect to seeking help with DV. Despite these barriers, the participants identified various supports that helped to mitigate some of the challenges they faced.

1These names are not the participants’ real names. Pseudonyms are used throughout this study.
4.1. Anamika’s Personal Story

Anamika was practicing law in one of the high courts in India for seven years until she met her husband through an arranged marriage. She left her rewarding job, family and friends to join her husband in Canada through the spousal sponsorship policy.

Marital problems started the day she landed in Canada, and abuse soon followed: “He would beat me up, like banging my head on the wall, throw me on the floor, strangle me, kick me.” Furthermore she was not allowed meet his associates or to communicate with her family and friends; every time she spoke to her parents, she would get “beaten up.” He also told her that he did not want to be seen in public with her: “I didn’t have anybody at that time, so he was basically isolating me.” When he assaulted her, he would remind her of the full extent of her vulnerability: “Even if I end up killing you, nobody would find out. People don’t know about you. Anything that you say, nobody is going to believe you, and anything I do and say to you is within these four walls.” Anamika was also abused for not finding employment quickly enough, though the barriers to obtaining work were substantial.

One night, Anamika called her parents to inquire after her hospitalized mother and her husband responded by strangling her with the phone cord. It was the final straw: “I knew I was done that night. I managed to push him, push the door open and run out. By that time the neighbours had come and they saved me.” The neighbours called the police who came immediately and arrested him.

Now a professional in the field of DV, Anamika emphasized in her account that it is not just the abuse that we need to focus on, but also everything that occurs after the abuse. Although Anamika received tremendous support from her family, the police officers, and two women from victim services, there were still challenges including fear of going to a shelter, discriminatory and harmful attitudes and statements (e.g., blaming the violence on her culture and religion) by professionals and service providers, and the shame of applying for social assistance. She had an upsetting encounter with her husband’s probation officer, who assumed that she didn’t speak English or understand the law, and blamed her culture for the violence. Said Anamika, “It’s already overwhelming for newcomers, and then when they get targeted like this, it’s even worse. I was already going through a trauma. I didn’t need this additional drama or stress.”

4.2. Nila’s Personal Story

When Nila, a Guyanese immigrant woman, met her husband in NYC, she initially fell in love with his sweet and charming personality, but six months later, he had changed and had become abusive. They both immigrated to Canada, with the understanding that they would go their separate ways. However, her pregnancy with their first child reunited them again: “Then he made an effort to get back together, but the abuse (physical, emotional and verbal) continued for many, many, years. And I kept leaving him and going back, leaving him and going back.”

She described the ongoing abuse: “He used to hit me in my head so when I have bumps and marks you can’t see it… and a couple of times, I had a black eye.” The abuse took other forms. Initially, he objected to her thinness: “He would come home at 1 o’clock, 2 o’clock in the morning [and say] I want you to eat. And if I [didn’t] eat, he would throw the food at me, or he’d spit it in my face, stuff like that, and so I would eat just to avoid having issues.” When she put on weight as a result, he shamed her by saying, “Look at how fat you are, you are just a blob.” Furthermore, he isolated her: she was prevented from making friends or talking to the neighbours; she could not even speak to her family on the phone without his being suspicious. Nila stated, “It reached a point where my family was afraid to call because they felt that when they get off the phone, he’ll probably kill me and they wouldn’t even know. So that’s how bad it was.”

When she was pregnant with their daughter, “he had beat me up really bad” and she left him to return to NYC where her immigrant status was more secure. When her husband heard that his daughter was born, he came to NYC. He took their son out for a drive and instead of returning him, took him back to Canada. Nila followed him immediately, believing that that was the only way she would get her son back. Once in Canada, she ended up staying with her husband because she thought, “If I leave, how am I going to feed these kids? Where am I going to live? How am I going to take care of them?”

It wasn’t long before a violent incident took place where her husband threatened to “chop [her] up”, and fearing for her life, she took the children and fled to a shelter. There, Nila started to receive information for the first time about what options were available to her. For instance, because her husband had sponsored her, Nila was under the impression that he was responsible for her for ten years, as was stated in the application and therefore
she had no choice but to stay with him. However, the shelter staff informed her that under the Humanitarian Act, Nila could apply for welfare.

Nila described her experience with seeking help as more positive than she imagined it might be for most newcomers and immigrants.

*It was just a good experience… as an immigrant it was easier for me because I speak English. I know there are a lot of women out there that don’t speak English, and feel like there is no help out there at all for them, but there really is, because I thought there was no help. I thought I would have to live with this man until my kids are older and they are in school full-time where I can find a job. And then my other question to myself was, well I am not that educated where would I find a job to feed two kids and house them?*

Nila indicated that she felt blessed to have the support of the shelter staff (who helped her access financial support and housing): “I mean that’s their job, but I think I gained a lot of respect for them.” She also cited the “tremendous” support of her friends and family as key to her overcoming the many years of abuse.

Although Nila had separated from her husband and filed for divorce, her difficulties did not immediately end. The court considered a one-year separation period to see if there were grounds to reconcile, as per a request by her husband. However, within that year, he became more abusive by trying to access her house and take the children away. Thwarted in her attempt to move forward with the separation and divorce, she suffered from a sense of hopelessness and despair. Volunteering at both her children’s school and at a nursing home were key in helping her battle depression and regain her confidence. During the time that she was volunteering, she also started working three jobs simultaneously.

Nila’s marital relationship ended completely when her divorce got finalized and she gained custody of her children. Her daughter, she thought, had blocked the experience, or was too young to remember the abuse, but she was saddened when her son disclosed his own memories:

“Remember that day when my dad choked you, and your chain broke and you tried to crawl up the stairs to get your chain?” [he said to her one day] And I said “yeah”, and he goes, “I remember that my dad tried to kick you down the stairs”... I never thought that he would remember, but he does, he did. So whatever abuse I went through, he went through with me, so he’s the one that I feel hurt for the most [crying] because he is the one that seen it and remembers.

Nila remembered feeling sorry for her husband: “And you keep feeling guilty for them, but I didn’t realize that I shouldn’t feel sorry for him… I should feel sorry for myself.” It took a long time for Nila to realize that she did nothing wrong, that she was the person who has been “injured [and hurt], not [him]… I used to think I was the problem and that’s why he would do what he did to me. …So it’s not you. It’s them.”

4.3. Emergent Themes: Barriers to Seeking Help with Domestic Violence

**Theme 1**: Lack of foreign credential recognition and employment hurdles can lead to economic instability. Thus, financial security can dictate the women’s decision to stay in the abusive situation.

The two survivors discussed challenges regarding the lack of recognition of foreign credentials within a new country, which resulted in barriers to employment in their fields of qualification. As a result, they experienced economic instability, which added an additional layer of vulnerability to their experiences with DV. Specifically, financial dependency on the abuser can make immigrant women more prone to staying in abusive relationships. This was particularly the case for Nila, whose experience with DV showed that the desire for leaving the abusive situation could be superseded by concerns regarding the lack of economic independence, which created barriers to seeking help. It was only after Nila received information regarding financial assistance, that she permanently left the abusive situation. This suggests that the availability of material resources and knowledge of their availability can make a difference in terms of whether women stay or not in abusive situations [10]. Studies have shown that economic disadvantages and lack of material resources available can reinforce women’s economic dependency on their spouse, which can create barriers to leaving abusive relationships [3] [9].

Moreover, both women’s experiences also show a serious chain effect: due to immigrating, their foreign credentials were not recognized, thus leading to barriers in securing employment in their field of work, resulting in entry-level jobs, triggering economic disadvantage, and thereby creating greater vulnerability to abuse, and ultimately affecting their safety and well-being. This further shows how intersecting identity factors such as gender,
immigrant, visible minority and economic status collectively contributed to Anamika and Nila’s level of vulnerability to DV and posed challenges to seeking help. This suggests that the lack of recognition of foreign credentials can have gendered and economic consequences for immigrant women in terms of employment or lack thereof. Indeed, studies have shown that immigrant women have a lower employment rate, and are also more likely to work part-time compared to their male counterparts and non-immigrant women [6] [7]. Thus, there is a need for policies governing the process of accreditation to take into account unique gender differences so as to produce more equitable outcomes. Additionally, Anamika and Nila’s social positions as visible minority immigrants further shaped their experiences with the process of foreign credential recognition, which establishes a hierarchy between western education and other forms of education by presenting other ways of knowing as less than. Guo (2009) [6], by exploring multiple studies, found that, “while immigrants from Third World countries encountered difficulties with their foreign credentials and work experience, those from developed countries (such as the United States, Australia, Britain, or New Zealand) have relatively successful experiences.” Guo further states, “It can be argued that knowledge has been racialized in Canada.” [6].

Nevertheless, Anamika and Nila noted the usefulness of volunteering. For both women, volunteering made a positive difference in their lives in terms of psychological and practical support. Even though they themselves did not make the direct link between volunteering and employment, their personal narratives suggest that their engagement with volunteering led to employment shortly thereafter, whether it was the intended outcome or not. Additionally, Nila explicitly shared that she used volunteering as a way to get over her depression after separating from her ex-husband. In both women’s experiences, volunteering was more explicitly beneficial in terms of gaining Canadian work experience, allowing for networking and social skills, and overcoming depression. However, it is important to keep in mind that while volunteering did increase the women’s social capital, it did not directly contribute to their economic capital or bring change to their economic condition.

**Theme 2:** Lack of English proficiency can lead to barriers to seeking help with DV.

All five participants discussed language in some capacity. Four of the participants pointed out the importance of language and how not speaking the English language can act as a key barrier to integrating or accessing services. In settlement worker, Sadia’s experience, language has been the number one necessity: “I mean, without language it’s very difficult to actually settle and integrate.” Specifically, for Anamika and Nila who both speak fluent English (although with an accent), language was not a direct barrier to seeking help with DV. However, Anamika did share that her experience with seeking help was less pleasant due to some service providers making the assumption that she could not speak English or was unaware of the law. Alternatively, Nila described her experience with seeking help as overall more pleasant than it usually is for most newcomers and immigrants: “I know what I went through and it’s not an easy thing, and it’s worse if you don’t speak English [because] it’s hard to communicate with other people, so in that way I felt that it was easier—the transition, the help.” These comments suggest that not only can lack of English proficiency act as a barrier to seeking help with DV, but also how speaking with an accent with its attached assumptions can lead to unique challenges.

The three professionals shared very similar viewpoints on the importance of offering interpreter services to mitigate language barriers. They emphasized not only the importance of offering interpreter services, but also making sure that the interpreters are easily accessible, certified and preferably trained with regards to violence against women. Otherwise, untrained interpreters can pose another barrier for visible minority immigrant women seeking help with DV. Sadia commented, “Either you hire people who are licensed or not at all.” Sadia further noted that when it comes to using interpreters in DV cases, it is essential to consider whether interpreters should be from another geographical area as a safeguard against violations of client confidentiality and/or anonymity, otherwise privacy concerns can compromise a disclosure of DV and pose further problems. In addition, Hasina stressed that it is very important to have interpreters that are trained in not just interpretation, but also feminist and anti-oppressive practices. It is also preferable to have interpreters that are women when interpreting for gender-based violence cases, as it could alleviate some of the trauma that the victims have experienced as a result of the male violence.

**Theme 3:** Destructive discussions on culture (i.e., culture blaming) can perpetuate harmful stereotypes about the role of culture in respect to DV. Negative or incorrect perceptions of culture can act as a hindrance to effective service delivery.

Culture as a concept was discussed by four of the participants in some form or another. Although cultural and
community barriers to seeking help with DV were acknowledged by some of the participants, almost all of the participants cautioned against destructive discussions about culture in order to avoid the racialization of culture and culture blaming.

In taking a similar stance to Polavieja (2015) [33], we acknowledge that culture is a very elusive concept and there are countless definitions of culture. Such controversies concern the important question of what is culture and consensus has yet to be reached. Although we took this lack of agreement into account, we relied on the definition of culture as presented by Polavieja (2015) [33] to help us frame and understand the role of culture in participant accounts:

*Members of a given social group share a given value, preference, or belief (i.e., a given trait) due to experiencing similar socialization processes. Social groups can be defined in terms of geography (e.g., nations), time (e.g., cohorts), religion (e.g., denominations), kinship (e.g., families), or social space (e.g., classes), depending on the particular question under investigation.*

In addition, Polavieja (2015) [33] explained, “Individuals belong to various social groups simultaneously” and this suggests its multi-level character. Moreover, Kasturirangan, Krishnan, and Riger (2004) [34] make the observation that, “Culture is not a static phenomenon; individuals interact with their culture so that the culture is constantly challenged and redefined.” Time and space also affect culture [34].

When the participants discussed culture, the concept itself was often presented as very elusive and subjective, and it remained undefined. Some of the participants understood and presented culture as a given. The examples that they provided mostly alluded to sharing a similar geography or national background. For instance, participants discussed having a similar background as synonymous with culture and religion, but at the same time, they recognized belonging to various social groups simultaneously, thus, showing an appreciation of the multi-level character of culture. This was the case for Mariam, who understood culture through the lens of being Middle-Eastern. She recognized that as a Christian she could still share a common culture with a Middle-Eastern Muslim.

Alternatively, Hasina questioned, “What is culture?” When asked about whether she received cultural sensitivity training in her place of work, Hasina said:

*We don’t really. Cultural sensitivity training is actually based on racist ideals, so having to be sensitive to somebody’s culture, like what is culture? So we have actually anti-racist conversations about really dismantling ideas that there is one way to understand a culture... So we talk more about how to work from an anti-racist, feminist perspective, and that’s an ongoing conversation and training opportunity here.*

Hasina went on to say that most of the cultural sensitivity training that is emerging right now is based on the understanding that some cultures are more violent than others. She added, “I get nervous about people being like culturally competent because it’s challenging, but I think working from a place that there is not one way, as one of my youth says...it’s not a right way or a white way.”

Most of the participants emphasized the need to avoid destructive discussions on culture in order to circumvent culture blaming. The participants stressed that when we discuss culture, it is important not to reduce it to specific groups from particular parts of the world. They stated that culture and cultural barriers could be found among various groups of different backgrounds. These comments implicitly suggest that culture is often attached to a homogenized group, one that tends to be racialized. Specifically, some of the participants felt inclined to provide Canadian culture and Eastern-European culture as examples, thus showing that race and culture are not one and the same. They stressed not to intertwine culture and race in understanding individuals’ experiences with DV.

Varying and sometimes disparaging views of culture can have real life consequences for many visible minority immigrant women seeking help with DV. This was the case for Anamika whose culture and religion were often perceived by professionals to be the cause of the DV that she experienced. She was put in situations where she had to defend her culture and religion against harmful stereotypes when she was seeking help with DV. Anamika’s experiences underline that individual cases are not considered as such, and instead, entire groups are being stereotyped as culturally more violent [8]. Several of the participants noted that despite differences in background or culture, DV occurs for similar reasons (i.e., power and control) across all backgrounds, but there is a tendency to stereotype DV as part of some ethnic groups’ culture. Thus, it is important to examine harmful stereotypes about culture and culture blaming [3] [8] [11].
Anamika’s experience with seeking help further reveals the additional trauma and stress she faced due to harmful cultural perceptions held by professionals. Accordingly, culture blaming can prevent visible minority immigrant women from fully benefiting from DV services, and they may actually experience greater trauma. Along similar lines, Hasina mentioned how harmful assumptions about certain communities can lead to challenges in accessing services:

*I find sometimes people assume that certain communities don’t have violence the same way. So East Asian women may not experience the same access to services than compared to say South Asian or Muslim women, because there is an assumption that our communities have higher rates of violence, and there’s been community organizing within this.*

She further added, “Then we make these assumptions that immigrants and refugees or newcomers, import violence into this country, and like, somehow those communities are more nutty than other communities.” Both Hasina and Mariam stressed the need for inclusive and non-judgemental spaces where visible minority immigrant women can feel safe. The participants’ narratives depicts how culture has been used to explain the level of violence against women, leading to culture blaming and reinforcing barriers to seeking help with DV.

Although the participants were adamant about staying away from culture blaming, they did not view DV workers having a similar cultural background as the victims as necessarily a solution to negative cultural stereotyping. Although it can be useful in some situations, what matters most is being a good professional. In Mariam’s professional experience, cultural and immigrant similarities, perceived or otherwise, can provide a sense of comfort for immigrant women seeking help with DV, but she also noted that: “Just because I’m from the Middle East and you’re from the Middle East, doesn’t mean we are going to have the same experience, and we might have different needs.” Hasina added, “We work from an individual basis that not one person can name… I am South Asian, I can’t represent all the South Asians… I can’t be a cultural negotiator for them.”

Sadia believed that although women talking to someone from their home country can be helpful because it establishes a level of trust and understanding, being a good professional is more important than a mediocre level professional that happens to share the same language or background. The participants concluded that professionals need more training that is not necessarily “culturally sensitive” but rather anti-racist and anti-oppressive.

What emerges from the participants’ narratives is that it is challenging to try to pin down culture. Not only because definitions and understandings of culture may vary, but also because there are countless cultures, making it difficult to know about each culture. Instead, the way to improve the experiences of visible minority immigrant women in services is by providing ongoing anti-racist training for professionals. Thus, DV training initiatives should consider the different diversity axis that shape women’s experiences with DV in addition to their gender.

Moreover, although participants cautioned against harmful stereotypes and assumptions about culture, some participants still considered the role of culture and community in posing barriers to seeking help for visible minority immigrant women. Mariam commented that women may derive their sense of identity from belonging to a particular culture and so when they are experiencing DV, it becomes difficult to leave the abusive situation or seek help with DV, especially if it is a taboo topic within that community. Mariam further added, “The general rule is, they’ll come and they are here [shelter] and whatever, and then they’ll go back” because of negative judgment instead of support from the community. It is important to note that Mariam mostly spoke about culture from a Middle-Eastern lens, stressing that she cannot speak for all other cultures. However, she did mention that in her line of work, she has witnessed that cultural pull being present in other communities as well. Sadia noted, “Sometimes social and cultural pressures prevent women to really come out and ask for help, especially immigrant women, and I’m thinking from all different backgrounds.” Hasina further spoke about community violence in terms social controls exerted by the community, leaving the victim feeling shunned, shamed, and isolated from both the outside community and from within: “the ‘policing’ that happens [by the community], the gatekeeping. So I know best for you or like religious leaders saying, ‘Well, you should just go back to him, like you know, good wives do that.’” These professional viewpoints suggest that cultural and community barriers (i.e., ostracism and resistance from the community) can be present in immigrant women’s experiences in seeking help with DV, but it is critical to dismantle ideas and practices that contribute to the racialization of culture and the notion that certain racialized groups are more prone to violence because of their culture.

**Theme 4:** Isolation as a barrier to integration and seeking help with DV.
The study demonstrated that factors such as gender, being an immigrant and geography can deepen victims’ isolation, which in turn can make them more vulnerable to DV. Both Nila and Anamika experienced isolation in tandem with DV. Not only did their spouses directly isolate them by preventing their contact with family, friends and strangers, but both women also experienced isolation as a result of immigrating. Both women lived far away from their families and had no immediate support network. In fact, Nila lost some of her support network when her sisters ended communication with her because of the abuse. A weakened or non-existent support network can create an additional barrier in seeking help with DV because the abuser is able to exercise greater control. Alternatively, Anamika did not disclose the abuse to her family and friends, thus, reinforcing her sense of isolation. Additionally, her experience with isolation was also heightened when she moved to Canada and entered a foreign environment where the physical geographic area was unfamiliar to her. Lack of knowledge in terms of how to use public transportation or open up a bank account furthered her feelings of isolation and sense of powerlessness. Hasina mentioned that when individuals are severely isolated, they may not know how to use the subway, but there is an assumption that people know how to use the subway.

Sadia discussed isolation as a big part of DV and how many women do not leave because of it. She has dealt with cases where clients would tell her, “I am stuck in this situation. I don’t see any way out; I don’t know anyone.” Other concerns have been: “Who is going to be my friend, and I have no family here if I take this step.” Sadia shared that many of them do not even know the amount of help that is available in Canada because they are so isolated, thus reinforcing barriers to seeking help with DV. Making sure that newcomer women have access to basic services (e.g., on how to use public transportation) could help to alleviate feelings of isolation.

Theme 5: Shelters can present challenges due to lack of accommodation and communal living.

Generally speaking, participants viewed shelters positively, however, they shared concerns regarding lack of accommodation of individual needs and living in a shared space. Sadia shared that there are challenges that women face as a result of not knowing or understanding where they will be once they make the call for help. In addition to the fear factor, immigrant women may also have a hard time coming to terms with living in a shelter, especially if going to a shelter is not a “norm” for them, as expressed by Anamika. Additionally, Mariam shared that being in a shelter can also be daunting because they “face a whole group of other women that sometimes don’t understand them. They look at them weird, especially if they are wearing their ethnic dress, or if they cook things differently, and they don’t eat certain things.” This can give rise to conflicts between the women, so trying to fit in or function within the shelter setting can be difficult for those that are perceived as different.

In addition to the strains of communal living, shelters may also be unaccommodating to certain dietary needs. Hasina reported that a client of hers was told that if she wanted to eat Halal food, she had to buy it herself: “So here is a woman who has never left the house, has no access to a bank account... and is put in that position.” These examples show that in addition to fear of women’s shelters, other challenges involve the lack of accommodation in shelters, and also the potential conflicts that can result from communal living, which can all create barriers to seeking help with DV. Women’s shelters may be ill equipped to effectively respond to the particular issues related to DV that immigrant women may experience, which are shaped by certain aspects of their identity such as gender, visible minority and immigrant. There are no “one size fits all” explanations, and solutions must reflect these differences [3] [8] [12].

Theme 6: Structural barriers (i.e., the police, court system, and immigration policies) can heighten women’s vulnerability to DV and can create additional barriers to seeking help.

1) Police

The participants spoke about police intervention and how in certain situations it can do more harm than good. Mariam reported, “The women would come and say, ‘Just get the police to go talk to him. I know he’ll listen to them. They can tell him to stop and he will stop’. The police are not going to do that, right?” Mariam noted that what actually ends up happening is that because often immigrant women do not understand the Canadian system yet, they talk to the police “thinking they will just tell him to stop” and fail to realize that “he can be charged and arrested.” Mariam claimed that lack of knowledge of the Canadian system can result in unintended and surprising consequences not only for their husbands but also for themselves. That is, immigrant women may want to use the police as more of a scare tactic to get their abusive partners to stop the DV, and instead can actually find themselves in a more vulnerable condition because of mandatory charging policies, which require the police to make an arrest. Most women are reluctant to have their husband’s charged, regardless of ethnicity, but
for immigrant women, the charges can have different and more severe consequences (e.g., fear of losing legal status and deportation). Because of dual charging they may even get charged as well. Subsequently, this can deter many immigrant women from reporting abuse.

Alternatively, there might be instances where the police might fail to make an arrest, even if they are instructed to do so under mandatory charging policies due to a reliance on victim and offender’s characteristics [3], which may be informed by their personal biases (e.g., gender, culture, race). Sadia noted that the fear of calling the police among immigrant population is huge because in many countries the police are corrupt and unreliable. If immigrant women have had negative experiences with the police either in Canada and/or their country of origin, then they will be particularly reluctant to involve the police at all out of fear or a belief that police involvement will make their situation worse. This underlines the importance of, law enforcement policies and practices taking into consideration the unique impact of its policies on visible minority immigrant women, whose experiences are shaped by overlapping factors such as, gender, immigrant, race and culture. The gendered and racialized impact of such policies can discourage visible minority immigrant women’s decision for police involvement.

2) Court System

Hasina discussed how our court system could act as another barrier by perpetuating certain assumptions about culture. She gave the example of a recent case involving an Iranian immigrant man who received a lesser sentence for beating and raping his wife for years. The judge used cultural differences to justify a light sentence. The judge said that the wife did not have knowledge about the violence being wrong or against the law: “so he gave him a lesser charge because culturally it gave him an excuse.” This example reveals that state intervention and the court system can act as a barrier for visible minority immigrant women seeking help with DV, as rulings can enforce and reinforce culture blaming, institutional racism and xenophobia. Moreover, gender, ethnicity and culturally insensitive laws and legislations and their application can result in the revictimization of visible minority immigrant women seeking justice for DV by granting protection to their perpetrators.

Moreover, legal policies that require women seeking divorce to consider reconciliation with abusive partners may have negative consequences. During the one-year separation period from her husband, which was mandated by the court, Nila’s husband became more abusive, thus the court order put her at higher risk. Therefore, it is necessary to re-examine such legal policies and practices and their specific effects on women. Furthermore, Anamika’s reluctance with regards to legal charges against her husband further suggests that the court system may not always be perceived as the most favourable avenue for visible minority immigrant women dealing with DV. Anamika was more concerned with moving on with her life and prioritizing her safety rather than seeking justice through an extremely time-consuming court process. Anamika’s desire for minimal court involvement was reinforced by her bad experience with her ex-husband’s probation officer who made cultural assumptions pertaining to the DV that she was experiencing.

3) Spousal Sponsorship, Legal Status and Deportation

Important concerns were raised regarding the immigration system and its gendered effect. Hasina believed that the immigration system has important implications for immigrant women due to the unequal allocation of resources for men compared to women. Also, the new law, which requires women to stay with their partner for two years in order to attain permanent residency (i.e., conditional permanent resident status), puts more pressure on immigrant women, resulting in fewer and fewer women going through the immigration system. Additionally, the required three-year spousal dependency period poses obstacles for abused immigrant women as it can confine them to the abusive relationship. Nila’s experience with the spousal sponsorship policy shows how the required mandatory period can reinforce women’s dependency on their spouse and pose barriers to seeking help with DV due to fear of losing legal status and financial security. Even though the current law reduces the sponsored individual’s dependency on their spouse from ten to three years [35], it nonetheless continues to encourage dependency and power imbalance between the sponsor and the sponsored individual. This shows that spousal sponsorship policies, with required mandatory time periods, can have different implications for women dealing with DV whose experiences are influenced by interacting factors such as gender, economic status and immigration status. Such policies need to take into account the different diversity axis that shape visible minority immigrant women’s experiences with DV. Otherwise, they can deter visible minority immigrant women from reporting abuse due to structural barriers that may inadvertently force them to choose legal security over personal security.

Participants also expressed concerns regarding legal status and fear of deportation, which may further keep immigrant women from seeking help with DV. Sponsored women sometimes face threats by their spouse or
their spouse’s family that they will be sent back to their country of origin. Sadia shared that women have fears about calling for help due to concerns regarding arrest and deportation. For Sadia, what could alleviate some of these barriers to seeking help with DV is by providing all newcomers with information pertaining to their rights in Canada. Although lack of knowledge and information regarding rights and Canadian laws can lead to sponsor-imposed barriers (e.g., deportation threats), the breakdown of sponsorship remains a possibility for many visible minority immigrant women. Hasina worked on one particular case where a woman had married an abusive partner and was dealing with the breakdown of sponsorship. As a result, she was put in a detention centre and “[s]he had the choice to either bring her child with her in detention…or leave her child outside of jail.” Hasina’s comments are important as it sheds light on not just the impact of breakdown of sponsorship on immigrant women, but also their children, and the reality of detention centres.

4.4. Training and Supports

In general, the participants evaluated the available supports positively. Both survivors were grateful for the support received from the shelter and its staff. Although the professionals and service providers were overall a helpful force in both women’s experiences in seeking help with DV, most of the participants believed that more training and preparation is needed for professionals and service providers. Anamika shared, “I feel like there is no training at all. And even if there is training, it is being provided by white Canadians who think what they are saying is diversity training and cultural training, which is like from their perspective.” Along similar lines, Hasina believed that DV workers in general do not have enough training when working with marginalized groups. She recommended anti-racism training that is ongoing: “I think the problem with anti-oppression training is sometimes they’re like a catchall, ‘Okay, you did it in one-day.’” Sadia added that the main challenge that DV workers face is to really understand the cultural and language perspective. These comments support the idea that more training is needed for professionals, especially when working with marginalized groups, such as a visible minority. Although their suggestions vary slightly, they all point to ongoing anti-oppressive training that takes into account marginalized voices and perspectives.

However, both Hasina and Mariam stressed that it is not just the workers that need more training, change is needed in other areas (i.e., systemic and societal) as well. Hasina stated that while professionals do need better training, the onus for change should not fall primarily on the workers. She believes that it is incumbent on society as a whole: from the way in which our media reports violence to our court system. Hasina suggested training for doctors, nurses, immigration workers, and police. Mariam shared that like any other field; there can never be enough training. However, she believes that it is not necessarily frontline workers that need more training, but rather training those who have set up our systems. She mentioned that it is more policies, procedures, guidelines and mandates that we need to look at, and the fact that we cannot step outside of that or “think outside of the box” because policies are predicated on the belief that everybody has to be treated the same under an apparently misguided notion of what constitutes equality. Instead it is important to examine how a particular policy or practice has particular implications for certain groups, and to recognize that treating everyone the same instead of addressing individual needs and circumstances can reinforce inequality and hardship.

The three professionals evaluated their own level of training and believed that they had sufficient knowledge in dealing with visible minority immigrant women experiencing DV. Examining the three participants’ professional level of training can provide direct insight into whether there are adequate levels of training being provided at organizations. As consistently mentioned by the participants, a key barrier to visible minority immigrant women’s experiences can be the harmful attitudes of professionals and service providers and training is critical to confronting and changing such attitudes.

Hasina’s feminist workplace offers staff training every two months on a range of issues and topics. Hasina emphasized the importance of using a framework that is anti-racist, feminist, anti-oppressive, and decolonizing. Similarly, Sadia shared that they get diversity training at an ongoing basis on different issues and topics: “I think the more training you get, the better knowledge you have, the better understanding.” Additionally, Mariam discussed diversity workshops that are offered in the wider community that their staff members can attend, but these are not mandatory. For Mariam, what has been helpful is to ask questions and to do outreach with various communities to raise awareness about their services and provide support with DV.

These professional comments indicate that there is no centralized or consistent training being offered across all organizations. This is likely to mean that some organizations are better equipped to deal with visible minority
immigrant women than others. This suggests a need for a mandatory agreed-upon national training standard in order to alleviate disparity in DV services. Also, it is crucial that training programs be anti-racist and anti-oppressive in addition to being feminist as to tackle the issue of racism found within services. Moreover, the three professionals in the study are all considered visible minorities under dominant definitions, resulting in a greater awareness of the issue of race. Their lived experiences as women of colour informed their professional attitudes to some degree, as they were able to detect harmful stereotypes and assumptions about particular groups. However, for those professionals and service providers that lack both appropriate anti-racist training and lived experience, it can be challenging to provide services effectively without having that knowledge.

Furthermore, two of the professionals discussed innovative responses to DV utilized by their agencies. Mariam indicated that their work with male perpetrators of DV is innovative and has made a difference. She noted that “Domestic violence is not a woman’s issue, not a man’s issue; it’s an issue that impacts the whole family.” Additionally, deeper collaboration between services has been useful to two agencies. Mariam listed collaborating with other community organizations (e.g., police, hospital, sexual assault support, FACS) as an innovative example. However, she wished that they did more community collaborating with regard to cases involving specific cultural needs. Similarly, Hasina highlighted how her agency’s collaboration with 20 different organizations, has been helpful in terms of innovative policies and practices. She further spoke about various innovative programs that her agency offers, such as community-based research, which involves a “team of young Muslim women who are survivors in different ways or just community leaders that want to do work in their community around violence against women.” This innovative example directly responds to visible minority immigrant women’s needs as it includes their voices and lived experience in seeking change. In addition, they are also involved with immigration law reform, and other programs that look at anything from policy to counseling in order to create safer spaces for Muslim women.

These immediate micro-level supports and innovative responses are extremely useful and undoubtedly make a positive difference in the lives of visible minority immigrant women seeking help with DV. However, the main obstacles to fully benefiting from these supports have been the larger structures of privilege and inequality such as patriarchy, white supremacy and class exploitation. Thus, while these supports are beneficial on a micro level, there is a need to examine the structures of privilege, which limit visible minority immigrant women’s full access to completely benefiting from these supports.

5. Limitations

The primary limitation of this study is similar to other qualitative studies, in that we worked with a small sample size, and thus, the findings from this research cannot be generalized to all visible minority immigrant women seeking help with DV in Canada. Future research could obtain data from working with a larger sample size. Similarly, the examples presented here are not meant to be representative of all organizations across Canada or even Southern Ontario for that matter. Instead, it serves to expand upon existing knowledge pertaining to the various supports that are available and how to best improve those available supports.

6. Recommendations

The potential for any real change would involve systematic changes. However, until then, several immediate and micro-level changes could improve the experiences of visible minority immigrant women seeking help with DV. The primary goal of this research was to examine local knowledge regarding the experiences of visible minority immigrant women seeking help with DV, and as a result, we will aim to provide some specific recommendations that could improve these women’s experiences in Southern Ontario.

• Introducing compulsory courses into our educational curriculum as early as elementary school to teach about social inequality, and to include the perspective and experiences of marginalized groups, which has been largely absent from our current education system.

• Mandatory anti-sexist, anti-racist and anti-oppressive national training for professionals and service providers that is ongoing in order to alleviate the sexism, racism and xenophobia that is currently present in services.

• Even though interpreting services are available, this does not mean that visible minority women are receiving the appropriate information or support. Feminist and anti-racist training for certified interpreters should be offered.
• Informing all newcomers of their rights in Canada and provide basic information regarding Canadian laws pertaining to immigration.

• Connecting all newcomers with settlement services upon arrival to Canada as a mandatory practice, which could provide them with information regarding the availability of services in the community. As part of their introduction to settling in, newcomers can be educated on basic information pertaining to banking and public transportation (these are just two example), as to mitigate financial abuse and isolation.

• Community organizations collaborating together in order to best serve visible minority immigrant women seeking help with DV. Emphasis should be on building and sustaining relationships across various sectors through information sharing.

• Police officers could reduce barriers when working with visible minority immigrant women dealing with DV by showing a greater understanding for women’s apprehensiveness in involving authorities.

• Shelters need to be more cooperative in terms of cultural and religious accommodations.

• There is a need for reform of our current immigration system in order to lessen the vulnerability of visible minority immigrant women dealing with DV (e.g., breakdown of sponsorship, spousal dependency period etc.).

• Recognition of foreign credentials and work experience would benefit visible minority immigrant women experiencing economic disadvantage when crossing borders. Or at the very least, there should be fewer educational requirements (i.e., lessening course load), and more financial support for immigrants upgrading their education.

• Increase in the availability of material resources for visible minority immigrant women seeking help with DV.

This research can help raise awareness on the many issues and intersecting barriers that visible minority immigrant women dealing with DV face. Although the suggested micro-level changes are specific to the needs of this sample, we believe it could be used as a model to serve other visible minority immigrant women across Canada as they may experience similar barriers to seeking help with DV.

References


