PERCEPTIONS OF DOMESTIC VIOLENCE AND HELP-SEEKING BEHAVIORS AMONG WOMEN IN POST-KATRINA NEW ORLEANS

AN ABSTRACT

SUBMITTED TO THE LAW SCHOOL OF TULANE UNIVERSITY IN PARTIAL FULFILMENT OF THE REQUIREMENTS ON THE 6TH DAY OF MAY 2016 FOR THE DEGREE OF

DOCTOR OF PHILOSOPHY IN INTERNATIONAL DEVELOPMENT

BY

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ABSTRACT

Hurricane Katrina hit the Gulf Coast on August 29th, 2005. It is considered to be one of the costliest and devastating disasters in the history of the United States. The storm flooded 70% of New Orleans resulting in more than 1,500 people losing their lives and the displacement of an entire urban population. Reconstruction over the past ten years has revitalized much of New Orleans, demonstrating a great resilience and determination of its people. Nonetheless, New Orleans is also experiencing the long-term effects of Hurricane Katrina where victims of domestic violence and the institutions that serve them have been forever changed.

This dissertation examines perceptions of domestic violence and help-seeking behaviors among women in post-Hurricane Katrina New Orleans from 2005 to 2015. Findings show that many women face striking inequalities demonstrated in higher rates of poverty, lack of affordable housing, and one of the highest wage gaps in the United States. Patriarchal attitudes seen in legal institutions, the police force, and political systems contribute to the perception of a gender bias against women. This qualitative research uses a case study methodology and employs ethnographic methods of observation, including 31 in-depth interviews that capture the complexity of domestic violence and identify the social and economic dynamics that create barriers to help-seeking in New Orleans.

The data contends that women who have increased access to informal and formal networks are able to enact behaviors that will allow them to seek help and extricate themselves from abusive relationships. These findings demonstrate that inequalities in post-disaster reconstruction have created barriers to help-seeking among victims of domestic violence. These barriers include the destruction of social capital, institutional failures, and limited economic resources. Likewise, findings reveal that attitudes and behaviors regarding domestic violence help-seeking are dependent on social and economic well-being. This highlights the need for more research and hard data on the incidence of domestic violence in New Orleans to learn the exact scope of the problem and how to overcome the social and economic barriers that perpetuate the cycle of domestic violence.
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This research is dedicated to all survivors of domestic violence as well as those who have lost their lives to domestic violence. Thank you to all of the women who were willing to sit with me and share their stories. Through your courage these stories can elicit a stronger understanding of domestic violence in post-Katrina New Orleans and create a safer and empowered life for all women in this city.

Thank you to the extraordinary people of the New Orleans Family Justice Center who unfailingly agreed to meet with me and discuss their selfless work with survivors of domestic violence. To Pam Albers who believed in me from the beginning of this project and introduced me to so many that were able to make this research possible.

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Thank you to my mother, Margaret and my father, Jack. You both always inspired me to be an independent thinker and to go for what I believed in, no matter how difficult the journey.

Thank you to my friends and family.

Dave, I love you. Thank you for everything.
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<th>Full Form</th>
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<tbody>
<tr>
<td>AIDS</td>
<td>Acquired Immune Deficiency Syndrome</td>
</tr>
<tr>
<td>ASPE</td>
<td>Assistant Secretary for Planning and Evaluation</td>
</tr>
<tr>
<td>CAPTA</td>
<td>Child Abuse Prevention and Treatment Act</td>
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<tr>
<td>CBD</td>
<td>Central Business District</td>
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<tr>
<td>CEDAW</td>
<td>Committee on the Elimination of Discrimination Against Women</td>
</tr>
<tr>
<td>CSW</td>
<td>Commission on the Status of Women</td>
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<tr>
<td>DHS</td>
<td>Demographic Health Systems</td>
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<tr>
<td>DELTA</td>
<td>Domestic Violence Prevention Enhancement and Leadership through Alliance</td>
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<tr>
<td>DEVAW</td>
<td>Declaration on the Elimination of Violence Against Women</td>
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<tr>
<td>DMORT</td>
<td>Hurricane Katrina Disaster Mortuary Operational Response Team</td>
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<tr>
<td>DoJ</td>
<td>Department of Justice</td>
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<td>DV</td>
<td>Domestic Violence</td>
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<td>DVP</td>
<td>Domestic Violence Program</td>
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<tr>
<td>FEMA</td>
<td>Federal Emergency Management Agency</td>
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<td>FHH</td>
<td>Female-Headed Households</td>
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<td>FVO</td>
<td>Family Violence Option</td>
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<tr>
<td>FVPSA</td>
<td>Family Violence Prevention and Services Act</td>
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<tr>
<td>GBV</td>
<td>Gender Based Violence</td>
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<tr>
<td>GAD</td>
<td>Gender and Development</td>
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<tr>
<td>GDP</td>
<td>Gross Domestic Product</td>
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<tr>
<td>GNODC</td>
<td>Greater New Orleans Community Data Center</td>
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<tr>
<td>Acronym</td>
<td>Description</td>
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<tr>
<td>GNP</td>
<td>Gross National Product</td>
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<td>GOWP</td>
<td>Governor’s Office on Women’s Policy</td>
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<tr>
<td>HHS</td>
<td>Health and Human Services</td>
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<td>HIV</td>
<td>Human Immunodeficiency Virus</td>
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<tr>
<td>IDP</td>
<td>Internally Displaced Person</td>
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<tr>
<td>IMF</td>
<td>International Monetary Fund</td>
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<tr>
<td>IPV</td>
<td>Intimate Partner Violence</td>
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<tr>
<td>IRB</td>
<td>Internal Review Board</td>
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<tr>
<td>LaFASA</td>
<td>Louisiana Foundation Against Sexual Assault</td>
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<tr>
<td>LCADV</td>
<td>Louisiana Coalition Against Domestic Violence</td>
</tr>
<tr>
<td>LCLE</td>
<td>Louisiana Commission on Law Enforcement and Administration of Criminal Justice</td>
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<tr>
<td>LGBT</td>
<td>Lesbian, Gay, Bi-Sexual, and Transgender</td>
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<tr>
<td>LPOR</td>
<td>Louisiana Protective Order Registry</td>
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<tr>
<td>MDAV</td>
<td>Mayor’s Domestic Violence Advisory Council</td>
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<tr>
<td>MDG</td>
<td>Millennium Development Goals</td>
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<tr>
<td>NOFJC</td>
<td>New Orleans Family Justice Center</td>
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<tr>
<td>NOHD</td>
<td>New Orleans Health Department</td>
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<tr>
<td>NNEDV</td>
<td>National Network to End Domestic Violence</td>
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<tr>
<td>NOPD</td>
<td>New Orleans Police Department</td>
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<tr>
<td>OVW</td>
<td>Office on Violence Against Women</td>
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<td>PRWORA</td>
<td>Personal Responsibility and Work Opportunity Act</td>
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<td>PTSD</td>
<td>Post Traumatic Stress Disorder</td>
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<td>Abbreviation</td>
<td>Full Form</td>
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<tr>
<td>SDG</td>
<td>Sustainable Development Goals</td>
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<tr>
<td>STD</td>
<td>Sexually Transmitted Disease</td>
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<tr>
<td>TANF</td>
<td>Temporary Assistance to Needy Families</td>
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<tr>
<td>UN</td>
<td>United Nations</td>
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<tr>
<td>UNDP</td>
<td>United Nations Development Fund</td>
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<tr>
<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
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<tr>
<td>VAWA</td>
<td>Violence Against Women Act</td>
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<td>VAW</td>
<td>Violence Against Women</td>
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<tr>
<td>VPC</td>
<td>Violence Policy Center</td>
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<td>WAD</td>
<td>Women and Development</td>
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<td>WB</td>
<td>World Bank</td>
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<td>WHO</td>
<td>World Health Organization</td>
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<td>WID</td>
<td>Women in Development</td>
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“Violence against women knows no boundaries of geography, culture or wealth. It is perhaps the most shameful human rights violation…and perhaps the most pervasive.”

-UN Secretary General Kofi Atta Annan, 1999
CHAPTER ONE

INTRODUCTION

“The whole battle is NOT GIVING UP, because a lot of times some of us, we want to get out but we give up because we have nowhere to go. When we give up we start losing ourselves even more. So, not giving up is a very good thing...and knowing you have the strength to do it. You just have to keep your faith.”

-Anonymous Survivor of Domestic Violence, New Orleans, 2015

1.1 Statement of the Issue

Domestic violence (DV) is a complex issue that affects women’s social and economic development by restricting their capabilities to live freely and realize their full potential. Domestic violence is insidious and non-discriminatory by nature, cutting across age, gender, socio-economic status, culture, religion, and political borders (Nussbaum, 2005). This study examines the long-term consequences of disaster on domestic violence and help-seeking behaviors in the socio-economic context of post-Katrina New Orleans. At this time in New Orleans’ reconstruction funding for many services that social services that victims depended on are no longer available and public health and housing institutions have been diminished. One great success story coming out of Katrina is the New Orleans Family Justice Center (NOFJC) which serves victims of DV through counseling, legal, and shelter services but their resources are limited and the need is great. As a result, many victims of DV have increasingly found themselves in a state of social and economic entrapment, stifling their capabilities to extricate themselves from abusive partners.

The recent 10th anniversary of Hurricane Katrina has shown the city to be an example of resiliency but there are very few studies that look at the long-term consequences of a major event like Hurricane Katrina, of the disparities that do still exist, and even less of women facing issues of domestic violence. Understanding help-seeking behaviors and perceptions of DV requires a deep understanding of women’s experiences and perceptions, as they are rooted in cultural social norms and expectations. Understanding the dynamics of women’s formal and informal networks the way they shape how women approach difficult decisions regarding help-seeking behaviors is integral to creating systems and policies that enhance their capabilities and allow them to live free from domestic violence.

The geographic focus of this study is New Orleans, Louisiana, located in south-eastern Louisiana along the banks of the Mississippi River and Lake Pontchartrain, approximately 105 miles (169 kilometers) north of the Gulf of Mexico. The total area of the city is 350.2 square miles (901 square kilometers) with a population of 375,000. Well known for its distinctive Spanish and French architecture and French/Creole culture, New Orleans is also famous for its food, music, and Mardi Gras. (U.S. Census
Bureau, 2010). While racially and culturally diverse New Orleans is also vulnerable to storm surges and flooding due to its low elevation, -6.5 to 20 feet (-2 to 6 meters). Due to a lack of high ground available during its construction, engineers drained swamplands around the area in order to expand the city, causing the land to settle to the low elevations seen today. Along with all the cultural amalgamations that make up this unique city are deep rooted inequalities that stem from a history of racial segregation as well as racial inclusion due to the large amounts of free people of color who lived here during the mid-nineteenth century. However, the population majority is made up of African-Americans who do not always share equally in the wealth and reconstruction of post-Katrina New Orleans. Large portions of New Orleans poor are marginalized by way of economic and social constructs that keep them in a cycle of poverty.

Like many other cities in the region, poverty and inequality have strong correlations with gender and race. Data from the U.S. pre-2005 Census show New Orleans as one of the most impoverished cities in one of the most impoverished states. These high levels of poverty left many of its citizens with limited resources and resilience against major social and economic shocks. Never before has this been exposed so brazenly than in the aftermath of Hurricane Katrina (Laska, Morrow, Willinger, and Mock, 2008). The social vulnerability in New Orleans that existed before the storm still exist today, particularly for low income African American women, and even more so for those in abusive relationships. Domestic violence remains a serious public health problem and has changed very little from pre-Katrina statistics, as can be seen in the number of protective orders issued in 2000 and 2015. The issue of DV has not changed in New Orleans, but the social fabric has (Jenkins, 2008).

Post-Katrina New Orleans continues to experience remarkable economic growth and recovery, demonstrating great resilience and determination to rebuild a city whose future was at one time questioned by local and national leaders. However, recovery and resilience are not felt across all neighborhoods and social groups in New Orleans. A large portion of the population remains mired down by systems promoting social inequality through diminished government services, employment opportunities, discriminatory legal systems, and business and political decisions that are, more than ever, leaving many marginalized. These groups are often left out of the decision-making process, particularly when it comes to land use, housing, access to grocery stores, and viable transportation, just to name a few. This further perpetuates inequalities among gender and race and creates situations where women are more vulnerable to DV due to a lack of resources that make them less likely to find support or be able to leave.

The main objective of this research is to investigate women’s perceptions of domestic violence and how the post-Hurricane Katrina social and economic framework has created barriers to help-seeking
behaviors. The context of this research denotes a lack of agency and capabilities among women and examines gender roles following natural disasters, in particular, how they create high-risk vulnerabilities for abused women. This dissertation focuses on the long-term challenges for women in New Orleans where there exists a large number of female-headed households (FHH) and high rates of poverty, gender and racial wage gaps, and inadequate housing. The barriers that were in place well before Hurricane Katrina and were only magnified afterwards, pointing to the need to address unequal access to economic and social opportunities. Understanding these long-term challenges aid in building new systems that embrace all marginalized communities, including women who are affected by DV. Patriarchal economic systems and gender inequality issues have had a significant place during New Orleans’ reconstruction. Policy makers need to consider vulnerable populations and their long-term recovery and sustainability. These key elements are integral in looking at the social construct of women experiencing DV in New Orleans. Racial and gender segregation are important aspects of disparity among social groups, denying many women agency and the capability to live independent lives, free from domestic violence.

1.1.2 Overview of Context and Theoretical Perspective

1.1.2.1 The Global Challenge of Domestic Violence

Domestic violence is a global epidemic that affects millions of women physically, sexually, psychologically, and economically. Globally, one in every three women, or 35%, has been beaten, coerced to have sex against her will or otherwise abused in her lifetime (United Nations, 2015b). The 2012 World Health Organization Global Review also shows that 35% of women worldwide have experience with physical and/or sexual violence and up to 70% of women have experienced some sort of DV in their lifetime (WHO, 2012). The 2013 World Health Organization (WHO) Global and Regional Estimates of Violence against Women: Prevalence and Health Effects of Intimate Partner Violence and non-Partner Sexual Violence found that 70% of women have experienced physical and/or sexual violence from an intimate partner in their lifetime and that DV by an intimate partner affects 30% of women worldwide and is the most prevalent type of violence against women (VAW). Heise, Ellsberg, and Gottemoeller’s 1999 report, Ending Violence Against Women: Population Reports, reviewed 50 countries and concluded that global rates of DV varied from 10% to 52%

The WHO 2012 report also states that 38% of all women murdered are killed by their intimate partner, a number the WHO considers to be an underestimation. According to the study Southeast Asia, the eastern

1 This is the first systematic study of global data on the prevalence of violence against women by both intimate partners and non-partners. The World Health Organization, in partnership with the London School of Hygiene & Tropical Medicine and the South African Medical Research Council, has collected data from 81 countries in 2010.
Mediterranean region, and Africa are the areas with the highest incidence rate of DV (37%). For combined intimate partner violence and non-partner sexual violence, the data show Africa (45.6%) and Southeast Asia (40.2%) as having the highest incidence rates. According to a 2014 report *Benefits and Costs of the Conflict and Violence Targets for the Post-2015 Development Agenda*, the toll of DV is significant, costing more than warfare, in terms of lives lost and dollars spent. This report determined losses in economic output amount to $9.5 trillion dollars each year (Fearon and Hoeffler, 2014).

Over the past thirty years the global development community has increasingly recognized DV as a public health problem, a violation of human rights, and a barrier to economic and social development that can lead to long-term physical, mental, and emotional health problems (Abramsky, T., C. Watts, C. Garcia-Moreno, K. Devries, L. Kiss, M. Ellsberg, 2011). Researchers have found that women’s successful formal and informal help-seeking strategies have positive implications for women’s health and mental health outcomes (Fugate, Landis, Riordan, Naureckas, and Engel, 2005). Increased research in this area has improved global awareness, leading to DV and all forms of violence against women (VAW) to become higher priorities on the international development agenda.

In September of 2015, the UN Member States adopted the 2030 Agenda for Sustainable Development that put forth the Sustainable Development Goals (SDGs). The 17 Goals aim to end poverty, fight inequality and injustice, and tackle climate change by 2030 (UNDP, 2015). The SDGs further extend the Millennium Development Goals (MDGs), including aims to achieve gender equality and women’s empowerment, seen as a universal right and a necessary foundation for a peaceful, prosperous world (UNDP, 2015). The fifth goal targets gender equality and the empowerment of all women and girls (UN Women, 2015b). The aim is to “end all forms of discrimination against all women and girls everywhere and to eliminate all forms of violence against women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation” (UN Women, 2015b). The UN clearly states that gender disparities still remain in economic and political realms and call for “deep legal and legislative changes to ensure women’s rights around the world” (UN Women 2015c).

Domestic violence is the most common form of violence, peaking during women’s reproductive years in both developed and developing countries. Prevalence declines with age but still persists among older women. In the most extreme cases, DV can lead to death; around two thirds of victims of intimate partner or family-related homicides are women (WHO, 2013). Less than 40% of women experiencing abuse will

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2 This report is the first attempt to estimate the costs of DV by estimating both tangible and intangible costs resulting from violence such as lost income, decreased work hours, and health problems. This report also highlights that development aid and other forms of economic assistance are not adequate, nor are they addressed in an effective and systematic fashion.
seek help and among those who do, most use informal networks such as family, friends, neighbors, co-workers, and fellow students. Formal networks such as judicial systems, social services, and religious leaders may not exist, are inaccessible, or are undesirable as options. The reluctance to seek help is often tied to stigma and isolation, two major themes of this research. Societies that are more accepting of DV and other forms of VAW are less likely to place a high value on preventative programs for men and women and resources may be scarce. In many countries, attitudes about DV are changing and both men and women’s acceptance of DV is diminishing (WHO, 2015).

Recent investigations into DV have shifted to include the role of socio-cultural contexts, the perceptions of domestic violence, quality of social support and help-seeking behaviors of victims (Liang et al., 2005). Previous investigative techniques tended to only look at the personal characteristics of the perpetrator or the victim, giving a one-dimensional representation of DV. Women were often characterized as passive players in the abuse that befell them as having no recourse in their own destiny, but this image did not take into account the fact that women do possess a sense of self-preservation and agency (Nussbaum, 2005). Much of the legal response to DV has changed in the past three decades with legal and legislative reforms focusing on ending the relationship by leaving the abuser, although this is not worldwide by any means (Grauwiler, 2008). Today, DV programs characterize battered women as ‘survivors’, shifting the emphasis the main areas of research to emphasize their agency as well as their victimization (Campbell, Miller, Cardwell, and Belknap, 1994). Formal investigations into situational or contextual factors are critical in understanding the type and extent of social support women receive from their family and friends and social services (Goodkind, Gillum, Bybee, and Sullivan, 2003). Understanding the scope and dynamics of DV across social and economic levels creates the path to long-term social changes as well as a crucial understanding of how to eradicate DV across countries around the world, at all stages of development

1.1.2.2 Domestic Violence in the United States

The issue of domestic violence (DV) affects millions of women in the United States and is often underreported or not reported at all. The United States Department of Justice (DoJ) data shows that from 1993-2010, four in five victims of DV were women. However, the same report shows a 48% decline in the United States, a trend that has continued from 2001-2010 (Catalano, 2012). The drop in DV is explained by the research of Farmer and Thiesenfaler’s 2003 report Explaining the Recent Decline in Domestic Violence. They state that there are three significant factors that explain the decline: (1) the increased provision of legal services for victims of DV, (2) improved educational and economic status for women, and (3) demographic trends of an aging population where DV tends to occur less. As women
become more empowered they may choose to leave these violent relationships as well as report them to the police. However, the reality is that DV is still a major public health problem not only in the United States, but worldwide.

The Violence Policy Center’s 2015 report *When Men Murder Women: An Analysis of Homicide Data* reveals that nationwide more than 1,600 women were murdered by men in 2013, most commonly by guns. Also, 94% of women killed by men were murdered by someone they knew. Of the victims who knew their offenders, 62% were wives or other intimate acquaintances of their killers. The study also found that African American women are disproportionately impacted by fatal domestic violence. In 2013, African American females were murdered by men at a rate of 2.36 per 100,000, two and a half times higher than the rate of Caucasian women murdered by men, .95 per 100,00. The Violence Policy Center has published *When Men Murder Women* annually for 18 years. During that period, nationwide the rate of women murdered by men in single victim/single offender incidents has dropped 31 percent from 1.57 per 100,000 in 1996 to 1.09 per 100,000 in 2013.

According to the *National Intimate Partner and Sexual Violence Survey (NISVS) 2010 Summary Report* by the Centers for Disease Control and Prevention (CDC), approximately 31% of women in the United States have been physically abused by an intimate partner at some point in their lives, 22.3% experienced severe physical violence (Black, Basile, Breiding, Smith, Walters, Merrick Chen, and Stevens, 2011). The top ten states with the highest rate of females murdered by males were, as of 2013, South Carolina, Alaska, New Mexico, Louisiana, Nevada, Tennessee, Oklahoma, Vermont, Maine, and Michigan. Among these top ten states, a woman is far more likely to be killed by her spouse, intimate partner, acquaintance, or a family member than by a stranger. For homicides in which the victim to offender relationship could be identified, 94% of female victims (1,438 out of 1,530) were murdered by someone they knew. Of victims who knew their offenders, 62% (895 out of 1,438) were wives, common-law wives, ex-wives, or girlfriends of the offenders3 (VPC, 2015).

The gun culture of the United States also plays a part in the murder of women, which is often linked to domestic violence. Women in the United States are eleven times more likely to be murdered by guns than women in other high-income countries. The high level of availability of firearms play a key role in the escalation of domestic violence into murder. Over the past 25 years, more intimate partner homicides in the United States have been committed with guns than all other weapons combined. The presence of a gun in domestic violence situations increases the risk of homicide for women by 500 percent. In states

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3 Ex-girlfriends were not included in the analysis because there is no separate designation for ex-boyfriends or ex-girlfriends in the FBI Supplementary Homicide Report relationship category.
that require a background check for every handgun sale, 38 percent fewer women are shot to death by intimate partners (Hemenway and Richardson, 2011; Hemenway, Shinoda-Tagawa, and Miller, 2002). A 2002 study from researchers at the Harvard School of Public Health found that although the United States represented only 32 percent of the female population among 25 high-income countries, it accounted for 84 percent of all female firearm homicides. The study’s lead author, Dr. David Hemenway, concluded that “the difference in female homicide victimization rates between the U.S. and these other industrialized nations is very large and is closely tied to levels of gun ownership. The relationship cannot be explained by differences in urbanization or income inequality.”

Legal institutions in the United States, while making strides for women’s rights, still fall short in providing adequate protection and justice. It was not until 1920 that every state in the United States made ‘wife beating’ illegal, but most considered it a family matter, an attitude that is still pervasive today. It took almost five decades for legal institutions to begin to treat DV with more severity, moving it from the realm of private family business. This is still an issue today but modern courts have seen vast improvements in not only legal statutes, but in those who implement them as well (UNWomen, 2015). The Violence against Women Act was passed in 2004 and reauthorized in 2000 and 2005. The Act’s renewal faced a contentious legislative battle throughout 2012-2013 due to the inclusion of same-sex couples and ability of illegal immigrants to obtain temporary visas under its protective measures. While many of the United States laws are progressive in nature in their protection of women’s rights, states’ performance regarding women’s rights vary dramatically, particularly when protecting women against DV.

1.1.2.3 Domestic Violence in Louisiana

Louisiana is one of the most dangerous and violent places to a wife, a mother, or girlfriend and is consistently ranked in the top five states in the nation for murders of women (LCADV, 2013). The Louisiana Protective Order Registry was established in 1999 and tracks how many orders are issued every year. The registry shows a significant increase from 2004-2015. In 2004 the number of protective orders issued statewide reached 10,159 and 16,873 in 2015, a 66% increase (LPOR, 2004; LPOR, 2015).

In 2005 Louisiana had the third highest number of females murdered by males in the nation where 84% of the female survivors knew their murderer and 20% of the survivors were wives, common law wives, ex-wives or girlfriends. There were 1,562 forcible rapes in Louisiana in 2006 and in 2007 the Violence Policy Center (VPC) ranked Louisiana first in the nation when it comes to domestic violence-related deaths reporting that 2.53 per 100,000 women were killed by a male companion, well above the national average of 1.30 (Newcomb, 2008). The VPC’s 2011 report on homicides in the U.S. showed Louisiana
with the ninth highest rate of domestic homicides, dropping from fourth place in 2010 (Woodward, 2013). The report found Louisiana, 9th in the nation with 39 deaths, a rate of 1.39 women per 100,000 people. In New Orleans that rate is 2.77 per 100,000 people, more than two times the national average (Woodward, 2013).

The 2015 report, When Men Murder Women: An Analysis of Homicide Data, reviews female victims killed by male offenders in single victim/single offender incidents and ranks Louisiana as the 4th highest in the United States. The rate in Louisiana remains 1.99 per 100,000, 83% higher than the national average and 27% higher than the national average was 18 years ago when the reporting began. The study also found that African American women are disproportionately impacted by fatal domestic violence. In 2013, African American females in Louisiana were murdered by men at a rate of 2.36 per 100,000, two and a half times higher than the rate of Caucasian women murdered by men, 0.95 per 100,000.

A number of factors contribute to DV homicides such as lack of services and resources that make access to shelters and safe-houses difficult. Funding cuts have reduced many services for women in Louisiana. In 2005 the budget of the Governor’s Office on Women’s Policy’s budget was cut by $200,000, a very large blow to a program that funds 87% of the local programs that combat all forms of DV in Louisiana where DV is a major issue (Governor’s Office on Women’s Policy, 2005). According to the 2013 Center for American Progress report, The State of Women in America: A 50 State Analysis of How Women are Faring Across the Nation, Louisiana ranks 50th in the United States and scores an F for its overall grade. Economic, health, and leadership grades were 44th, 40th, and 49th respectively. The report shows that Louisiana, like most of the states in the south rank the lowest in the country when it comes to women’s issues.

1.1.2.4 Domestic Violence in New Orleans

In the years preceding Hurricane Katrina the federal government funded programs and local organizations through the Violence Against Women Act (VAWA). There was significant progress in reaching out to victims of DV through efforts of activists, responders and providers who pushed for a more congruous system to deal with DV cases in the New Orleans legal system. The Creation of the DV Detective Unit placed officers in each of New Orleans eight police districts that led to a decrease of DV homicides from 27 in 1997 to 8 in 2003 (Newcomb, 2008). There was an increase in the number of arrests for violations

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4 The report does not count multiple death incidents or incidents where the perpetrator and victim are the same gender.
of protective orders from 14.7 in 1997 to 31.8% in the first half of 2005 as well as an increase in the number of violation of protective orders arrests from 4 in 1997 to 150 in 2004 (Newcomb, 2008). The Domestic Violence Monitoring Court in the Magistrate Section of Criminal District Court was created in 2005 and within six months 97 new cases were opened (Newcomb, 2008). An increase in protective orders across Orleans Parish occurred due to courts working more closely together. A total of 2,656 orders were sent to the state’s Protective Order Registry in the first six months of 2005 (New Orleans Mayor’s Domestic Violence Advisory Committee, 2008). During this time, it appeared the city was gearing up to begin to tackle its problem of DV, only to be set back by Hurricane Katrina.

After Hurricane Katrina flooded nearly 80% of New Orleans there was a shortage of housing, jobs, transportation, and limited access to healthcare, including DV services (Woodward, 2013). Many evacuees chose not to, or were unable to return to New Orleans. Lacking social network, either in adopted cities or back home in New Orleans made life for women living with violent partners difficult and sometimes lethal as they no longer had access to familiar support networks. Relief funds through federal or other agencies allowed some women to leave abusive partners and find new homes, away from New Orleans while others remained with their partners because they were not considered eligible for funds on their own. Many of the resources were designed for ‘head of household’ generally assuming the head to be male, thus placing control and decision-making power over funds in men’s hands (Newcomb, 2008). Another problem that arose involved custody situations where children may have been visiting with the non-primary custodian when the storm hit, and many children were evacuated leading to complicated legal battles when ex-husbands, for example, refused to return children to the primary custodian.

Hurricane Katrina disrupted New Orleans’ legal and social services due to displacement of personnel and damage to buildings that provided these services. Some were set up in temporary locations but were inadequate to support the need of DV victims during that time. The destruction of the former system did, however, provide an opportunity to re-think how programs and networks should be developed, such as emergency shelters and networking with local public resources (Newcomb, 2008). In the year following Katrina, Crescent House did extensive outreach into the community and FEMA set up a service center at the local FEMA facility with Crescent House members. The Mayor’s Domestic Violence Advisory Council (DVAC) also resumed meetings to discuss needs assessments and future plans of action. While these efforts helped, they were inadequate to address the magnitude of the disaster.
In August 2005, there were eight DV detectives in the NOPD, one in each district of the parish. There were three after the storm, increased to six in 2007 and down to 3 in 2013 (Woodward, 2013). The DV unit is housed in the Family Justice Center (FJC) building on Poydras Avenue.

In 2012 the New Orleans Health Department launched the Domestic Violence Program as a public health initiative that works in tandem with the criminal justice system and local agencies (Woodward, 2013). The program runs several grants from the U.S. Department of Justice that funnel hundreds of thousands of dollars to help victims of DV learn about programs and shelters available to maintain the ‘311’ DV crisis hotline in New Orleans and to deliver protective orders to give legal advice and counseling to victims of DV. In 2006-07, Orleans Parish had 3,611 domestic abuse protective orders issued by civil, criminal and juvenile courts (LPOR, 2007). During the same time the Crescent House received a total of 1,491 crisis-line calls in fiscal years 2006-07. There was a decrease in the criminal protective order category from 5,865 to 2,475 that was largely accountable for the drop in population in New Orleans in 2005-07 (Newcomb, 2008).

In August 2007 the Family Justice Center (FJC) opened a community program for referral and protection of DV victims. According to the FJC, nearly 1500 women join this program each year where, at any given time, 40-45 women are in an undisclosed shelter due to DV or sexual assault. In 2013 the NOFJC directly services more than 1,200 people per year, and its 24-hour crisis line receives more than 10,000 calls annually. The Metropolitan Center for women and Children, a center for victims of DV in neighboring Jefferson Parish, received 5,000 calls on its 24-hour crisis line the same year (Woodward, 2014). Before Hurricane Katrina most women were referred to shelters that were highly conspicuous and uncomfortable as well as open to possible attacks by perpetrators or disgruntled family members. There is a maximum stay of only 45 days and then women must return to either family members or to their homes (FJC, 2013). Here women will also receive counseling, legal services and also work with the Tulane Law Clinic to obtain restraining orders or child custody services.

The New Orleans Police Department (NOPD) has had a record of substandard performance and corruptive practices that led to an investigation by the U.S. Department of Justice in 2010. The investigation found that NOPD failed to adequately address DV cases, with complaints ranging from poor response to 911 calls to failure to perform follow-up interviews. In one case the NOPD never responded at all. Because of a lack of coordination between DV agencies and the NOPD it is practically impossible to know the true extent of DV in New Orleans. Since the inception of the Blueprint for Safety the city

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5 In New Orleans the Blueprint for Safety is a system-wide approach to close gaps in domestic violence intervention. By taking an innovative approach in criminal justice intervention to protect victims of battering and end intimate partner violence. It is a comprehensive approach to confronting domestic violence crimes, based on thirty years of community practice and research. The Blueprint improves how information is shared between agencies in the justice system from 911 operators to the police to prosecuting attorneys to the courts; ensures risk is properly assessed and responded to at every step; encourages new victim engagement strategies; directs practitioners to pay attention to unintended
has begun the process of documenting the number of calls for service and arrests being conducted each year by the NOPD.

In 2014 the NOPD changed its policy to require a written report on all DV calls for service, resulting in thousands of calls that did not lead to arrests but did show up in reports. The NOPD received a total of 173,647 calls for service between December 29th 2012 and June 29th 2013. A total of 5,733 of those calls were identified as DV calls, roughly 3.3% (Ervin, 2015). Figure 1.1 shows the number of 911 DV calls to the NOPD from 2011 to 2015 which demonstrates a clear increase in calls by 26%.

**Figure 1:1 The Number of 911 Domestic Violence Calls to the New Orleans Police Department 2011-2015**

![Bar graph showing the number of 911 Domestic Violence calls to the New Orleans Police Department from 2011 to 2015.](source: New Orleans Police Department, Orleans Parish Communication District; [http://www.nola.gov/nopd/crime-data/911-calls-for-service/](http://www.nola.gov/nopd/crime-data/911-calls-for-service/); Compiled by Author.)

The most definitive avenue to discern the levels of DV in Orleans Parish is through the Protective Order Registry (LPOR), a statewide repository of court orders to prohibit domestic abuse, dating violence, stalking, and sexual assault. The registry was established in 1997. While the LPOR registry is not available to the public, the numbers of orders issued are listed by year, beginning in 2000.
In 2012 the New Orleans Health Department launched its Domestic Violence Program as a public health initiative working in concert with the criminal justice system. The program includes a substantial grant issued over several years that will, along with the DoJ, help the department partner with local agencies, to help connect survivors to the resources they need, whether it's counseling, assistance in filing a protective order, or shelter access. It is a new step in addressing the city's overwhelming need in a state plagued by domestic violence and strapped for resources (Woodward, 2013). Through these initiatives New Orleans can begin to understand the magnitude of its DV problem and how it connects with other social and economic issues in the city.

### 1.2 Research Objectives, Questions, and Approach

In looking at DV in post-Katrina New Orleans this research asks the question of how women perceive DV and examines their help-seeking behaviors. It is important to understand the factors that exist within a society as well as within the victim that affect help-seeking. Perceptions also relate to the ecological framework that takes into account the larger aspects involved with perceptions and help-seeking behaviors.
Research Question 1: How do women in post-Katrina New Orleans perceive domestic violence?

Research Question 2: What factors are the significant barriers to help-seeking in post-Katrina New Orleans?

The main objective of this research is to identify barriers women face when seeking help from domestically abusive relationships in New Orleans, a city in one of the most developed countries in the world, but also one that suffers from deep socio-economic disparity post-Katrina. The economic and social entrapment many women experience is due to marginalization and stigma associated with DV. These issues are exacerbated by low levels of development of women in low-income situations. Perceptions of domestic violence also included questions regarding how women defined DV and which acts they thought constituted DV. Perceptions of DV also included the cultural attitudes among leaders in the community as well as those of health care workers, and social services staff.

This research aims to recognize the barriers to informal and formal networks that preclude or encourage women to seek help in order to leave abusive relationships while living in a post-disaster society. The aspects of social reconstruction in the context of New Orleans implies that women are vulnerable to DV in the short and long-term social and economic reconstruction due to a lack of agency and capabilities due to gender and racial inequalities. The main barriers to help-seeking are presented as emerging themes from in-depth, social network, and focus group interviews and consider the roles of informal networks - family, friends, neighbors, co-workers, and fellow students and formal networks - police, legal systems, shelters, religious affiliations and medical services. The first theme explores ‘economic entrapment’: lack of financial resources, unemployment, the gender wage gap, education, and limited access to affordable housing. The second theme explores ‘social entrapment’: diminished support from informal and formal networks, isolation and stigmatization, love, religions, institutional failures, and awareness of social services.

This research contends that in order for women to overcome help-seeking barriers when leaving an abusive relationship, they must have the capabilities to support themselves economically as well as opportunities to self-realization. Women must be able to use both formal and informal networks and have equal access to social, economic, and political resources and the decision structures that govern them.

1.2.1 Research Design

The research is designed as a qualitative single case study that investigates the contemporary phenomenon in its real-life context where the boundaries between the phenomenon and the context are not clearly evident (Yin, 2002) This design provides a a descriptive view of women’s perceptions of domestic
violence and subsequent help-seeking behaviors in post-Katrina New Orleans. Qualitative methods provide flexibility to answer types of questions that quantitative, or positivist research may not be able to answer, especially questions regarding meaning and context (Geertz, 1973). Because this research aims to develop a better understanding of help-seeking behaviors and perceptions among women experiencing DV, qualitative methods capture important concepts that may otherwise be limited to strict empirical analysis.

1.2.2 Justification for a Case Study

This qualitative research uses a case study methodology and employs ethnographic methods of observation to capture the complexity of domestic violence and identify the social and economic dynamics that create barriers to help-seeking in New Orleans. The use of a case study is appropriate for conducting a detailed, contextual analysis in real-life settings while enabling insight into people’s values, beliefs, and behaviors (Yin, 2002). In addition, in-depth, social network, and focus group interviews are used to study women in New Orleans in order to understand their experiences and perceptions DV and subsequent help-seeking behaviors. The findings of this research identify the most important factors that allowed them to feel the capability and agency to leave abusive partners. Secondary data is used to look at levels of DV pre and post-Katrina, such as income earnings by gender and race, DV services available, judicial systems, housing, and neighborhood dynamics.

1.2.3 Justification for Study Site

New Orleans lends a unique opportunity to conduct research on the long-term consequences of a major event such as Hurricane Katrina, its long-term impact in terms of the economic and social framework in a major American city. New Orleans has experienced one of the deadliest and costliest disasters in the history of the United States. In the post-Katrina reconstruction there has been a massive influx of funding for the re-development of the city but has left pockets of concentrated poverty in the parish, affecting the agency and capabilities of whole groups of New Orleans’ population, including the deleterious effects on perceptions and help-seeking behaviors among victims of DV.

Disasters provide a lens that focuses on social and economic disparities that were existent before the storm but are now exacerbated by unequal economic and social reconstruction.

The transformative process of New Orleans’ reconstruction still carries the vestiges of inequality and gender discrimination and for many, they have become magnified, creating irrefutable barriers to help-seeking. Many communities are disenfranchised, creating a sense of marginalization resulting in higher levels of crime and violence, that in turn can lead to increased vulnerability to DV. (Laska, Morrow,
Willinger, and Mock, 2008). This is exemplified in areas of the Lower 9th Ward and New Orleans East where blighted housing still exists, schools remain boarded, public transportation is limited, and access to grocery stores and other amenities are lacking. These areas are becoming pockets of 'concentrated poverty'.

This study offers a unique opportunity to learn how the long-term effects of Hurricane Katrina have impacted women experiencing DV by looking at how they perceive DV in the years after the storm and how their perceptions of formal and informal networks have affected their help-seeking behaviors. It is important to fill a gap in research with regard to how disparities might persist and dissipate over time. While the patterns of DV may not have changed, the social context has (Jenkins, 2008). This research argues that understanding the social and economic barriers play a large part in how women perceive DV and whether or not they decide they are capable of help-seeking, and if so, which formal and informal networks play the most crucial roles. This is all in the particular situation of the ‘new’ New Orleans.

1.3 Significance and Contribution

The study examines the most important barriers to help-seeking among women living in New Orleans ten years after Hurricane Katrina. The findings will contribute to the field of international development and women’s issues in post-disaster contexts. The contributions of this research are significant in that it has obtained rich contextual data regarding DV in New Orleans.

The findings will enable the formation of policies and programs at the city and state level to improve and elaborate new methods of understanding why DV occurs, who is affected, and how to create legal and social systems that empower victims to achieve their full range of capability and freedom. It also gives insight into how poorly executed plans to rebuild have left out the most vulnerable and poorest in New Orleans, and tells the tale of the consequences of these biased policies in terms of women’s capabilities to empower themselves and become free from domestic violence.

Reliable data allows for better advocacy of human and women’s rights while contributing to the sociocultural theory and practices that focus on DV in New Orleans and around the world. Findings contribute to the body of knowledge of DV in public health, post-disaster planning research and international development contexts.

Studies focusing on DV and help-seeking in post-disaster environments are limited. Even less is the availability of help-seeking behaviors of women in New Orleans. Much of the research looks at DV in the immediate aftermath of a disaster. Research also tends to focus on sexual or physical trauma that occurred at the time of disaster and its long-term effects. There is very little available on the long-term
effects of a disaster on women’s experiences with DV, particularly looking at social and economic reconstruction policies. This research provides a unique insight into the long-term effects of Hurricane Katrina on women’s perceptions of DV and help-seeking behaviors conducted in New Orleans.

Concepts shown in previous studies have been used to guide correlations made in this research. The National Institute of Justice (NIJ), When Violence Hits Home: How Economics and Neighborhood Play a Role, indicates that DV is more likely to be more severe in low-income households and victims with the least amount of resources rely most consistently on assistance from community services. Also it has been shown that disasters increase the likelihood of DV at a time where resources are diminished or non-existent (Jenkins and Willinger, 2008). Another study, Coping among Adult Female Victims of Domestic Violence addresses the complexities of the relationships and available resources but it is not inclusive of the effects of a significant catastrophe and the effects of social and economic inequalities (Waldrop and Resick, 2004).

Research findings can be used by policy makers, researchers, and social workers by highlighting the most significant barriers in help-seeking and to stress that social and economic inequalities render help-seeking difficult or impossible, putting the lives of its victims at great risk, or even death. Identifying barriers and their root causes elucidates the long-term effects of disasters on DV in terms of perceptions and decisions to seek help in new socio-cultural constructs and allows a better understanding of women’s experiences in post-disaster societies, in the context of their specific and unique life circumstances. Historic methodologies guiding disaster research have often been quantitative with a narrow focus. They have not historically encouraged in-depth analysis of social inequalities (Bolin, 1998). The ‘event focus’ on disasters is too simplistic, ignoring broader socioeconomic forces occurring over time that can affect a population’s level of vulnerability (Jenkins, 2008). It is not sufficient to simply incorporate into quantitative analysis queries that identify differences between the sexes that fail to look at socio-structural inequalities that produce gender differences.

This research considers the sustainability of policies and cultural norms in New Orleans that keep women in New Orleans marginalized and this is even more apparent among those who experience DV. This research attempts to add to the theories of economic and social entrapment specifically looking at social isolation from formal and informal networks, and socio-economic gender inequalities. The capabilities approaches, developed by both Sen and Nussbaum are examined to juxtapose the concepts of social and economic freedom and agency as vital components of a sustainable development paradigm that embraces human rights and gender equality. The individual, familial, economic, and cultural influences on women’s perceptions of DV and decisions to seek help are shown by reviewing norms, beliefs, and social and
economic systems that create the conditions for DV to occur which in turn affect women’s coping strategies and how those conditions came about due to the reconstruction of New Orleans post-Katrina.

1.4 Dissertation Chapters Overview

This research, entitled *Domestic Violence: Perceptions and Help-Seeking Behaviors among Women in Post-Katrina New Orleans* is presented in nine chapters.

- Chapter 1 introduces the issue of domestic violence in New Orleans and discusses the importance of understanding the socio-economic inequalities that have predominated segments of society during post-Katrina redevelopment.
- Chapter 2 provides the background and literature review relevant to this research focusing on the nature and perception of DV, DV factors, help-seeking behavior, and DV in a post-disaster context. Within these four sections there is a focus on previous research, in the United States, and globally, and the correlation between different factors affecting women’s perceptions and help-seeking behaviors.
- Chapter 3 presents the conceptual framework based on gender theories and the capabilities approach towards DV and VAW and is designed to aid in the understanding of the cycle of violence and help-seeking behaviors of women.
- Chapter 4 presents the research questions, design, and methodology used in this dissertation. It includes the approach to research, data collection methods, consideration of reliability and validity as well as ethical concerns and limitations. Finally, data analysis methods are discussed along with the significance of the study.
- Chapter 5 presents a background of Hurricane Katrina and social vulnerability faced by women, in particular. The chapter discusses the overall impact of Hurricane Katrina, with a focus on Orleans Parish. Secondly, women’s social vulnerabilities are explored by looking at gender roles during disasters, poverty and decreased economic capability as important factors in women’s ability to leave abusive relationships, secure housing and employment, and take care of their families. Finally, diminished social support systems are discussed along with variables that affect women’s vulnerability.
- Chapter 6 presents women’s experiences and perceptions of DV while living in New Orleans. Themes in this research focus on DV and women living in the ‘new’ New Orleans from 2005 to 2015 to investigate how women experienced the initial disaster and subsequent reconstruction era that is still ongoing. Four major categories of DV are presented to frame the types of experiences women had in post-Katrina New Orleans: physical, sexual, psychological and emotional, and
economic abuse. This chapter includes an interpretative analysis of these research findings. Connective patterns among participants’ experiences of DV and ways in which research participants described and understood those connections are presented as well as the inclusion of consistencies or inconsistencies with the literature and theoretical framework.

- Chapter 7 is an extension of previous chapters 5 and 6 that focuses on the theory of economic entrapment and discusses: the economic barriers to help seeking lack of access to financial resources, gender inequalities in employment opportunities, and a lack of affordable housing.

- Chapter 8 examines the most important socio-cultural barriers participants discussed during their interviews and focuses on the destruction of social capital in both formal and informal networks. These include: 1) diminished support from informal and formal networks, 2) social and institutional failures and 3) lack of access to information and awareness of social services.

- Chapter 9 presents the conclusions of this research and includes recommendations for future research and policy implication based on past socio-economic trends as well as insight into where future trends may be headed with regards to the development of New Orleans and the issues of DV among women. Nine recommendations are put forth: improved access to opportunities, access to housing, improved police response, increased participation by women in public and private leadership roles, increased data collection that is accessible to the public, funding for social services and social media awareness campaigns, community capacity building with the inclusion of religious leaders, and addressing the culture of violence in New Orleans.
CHAPTER TWO
LITERATURE REVIEW AND THEORETICAL BACKDROP

Every woman’s experience with DV is unique and while some remain in violent relationships for much of their lives, if not their entire lives, others find ways to get the help they need to survive and move forward with their lives. While there is a plethora of research on help-seeking behaviors during the last two decades, studies of help-seeking strategies and perceptions of DV are few. Research tends to leave out the adaptive/maladaptive nature of how victims decide to seek help and focuses more on comparing help-seeking used by community samples in response to ordinary life stressors with the innuendo that battered women simply do not have the ability to solve their own problems (Waldrop and Resick, 2004). This leads to the questions asked most often by outsiders is ‘why do they stay’ or ‘why not just pick up and leave’? Domestic violence creates a special set of circumstances that affect a woman’s decisions to seek help and how she perceives her experiences of abuse.

This literature review addresses the complexities of the relationships between context, perceptions, and help-seeking behaviors among women by using an ecological or contextual approach by examining a more holistic methodology that focuses on the impact of social support networks and how women respond to DV (Astin, Lawrene and Foy, 1993; Kemp, Rawlings, and Green, 1991; Sullivan, Tan, Basta, Rumptz, and Davidson, 1992; Tan, Basta, Sullivan, and Davidson, 1995). The contextual predictors of help-seeking will be examined, including how women define DV, frequency, severity, and available resources. This approach allows for a more complete understanding of women’s perceptions of DV and their help-seeking behaviors. Four significant areas of literature are reviewed: nature and perceptions of domestic violence; domestic violence factors; help-seeking behaviors; and DV in a post-disaster context.

2.1 Nature and Perceptions of Domestic Violence

Domestic violence (DV) includes acts of violence and intimidation that occur between family members, intimate partners, or unrelated individuals and is the result of a system of unequal powers between two people (Smith, 1990). Perceptions of what constitutes acts of ‘domestic violence’ often depends on the societal views and boundaries people place on the acceptability of certain behaviors within relationships (Esteal, 1994). This review defines DV as a pattern of behavior which involves the abuse by one partner against another in a close or intimate relationship between people who are married, living together, dating, or in the same family, or have close ties to the family (Shipway, 2004). Participants in this study consisted of 12 in-depth interviews and one focus group of three. All of the participants in these 15 interviews were heterosexual adult females aged 18-65, who have experienced DV and currently living in
New Orleans. Seventeen social network interviews were conducted and were open to men and women; however, the majority of interviews were female with 29 women and three men participating.

It is important to note that DV affects all types of people from different sexual orientations, including lesbian, gay, bisexual, and transgender (LGBT) communities and heterosexual men. However, this research focuses on men as perpetrators and women as victims. This decision is based on United States Department of Justice’s 2014 report *Non-Fatal Domestic Violence, 2003-2013*, that found the majority of DV in the United States was committed against females by males (76%) compared to males by females (24%) (Truman and Morgan, 2014). The 2014 Violence Policy Center Report ranked Louisiana fourth in the nation for highest homicide rates where 47 women were murdered by men. Due to overwhelming statistical difference between men and women as victims of DV, only women were included in the in-depth interviews. However, men were included in the social network interviews as professionals working with DV in New Orleans.

This literature review does not attempt to differentiate between risk factors that women experience prior to becoming victims of DV and those post-DV. Because many women experience different types of violence at various phases of their lives, it is beyond the scope of this research to differentiate between mitigating factors prior and post experiences of DV. It is understood that the very nature of DV is that it is a complex amalgamation of many factors. The following review focuses on the major themes found regarding types of DV and the most pervasive forms of DV presented through studies conducted all over the world.

Finally, DV knows no boundaries and while some women never experience DV in their lifetime, there is no simple way to say with certainty that certain factors always precede or preclude acts of DV. With that being said, there are certain trends that take place that will increase a person’s vulnerability. At what point in time, in a person’s experiences, these vulnerabilities enable violence to take place, is almost impossible to determine with precision.

2.1.1 Types of Domestic Violence

**Physical Abuse** - Includes slapping, beating, arm twisting, stabbing, strangling, burning, choking, kicking, threats with an object or weapon, and murder (WHO, 2002).

**Sexual Abuse** - Includes coerced sex through the use of threats, intimidation or physical force, forcing unwanted sexual acts or forcing sex with others (Ellsberg et al., 2000; Mooney, 1993; Hakimi et al., 2001).
Psychological Abuse - Behavior that is intended to intimidate and persecute, and takes the form of threats of abandonment or abuse, confinement to the home, surveillance, threats to take away custody of children, destruction of objects, isolation, verbal aggression and humiliation (Heise and Moreno, 2002).

Emotional Abuse - Undermining or attempting to undermine a victim’s sense of self-worth. Includes constant criticism, belittling victim’s abilities, name-calling, insults, put-downs, silent treatment, manipulation of victim’s feelings and emotions to induce guilt, subverting relationships with children, and repeatedly making and breaking promises (Domestic Violence Project, 2014).

Economic Abuse - Defined as making or attempting to make an individual financially dependent by maintaining total control over financial resources, withholding one's access to money, or forbidding one's attendance at school or employment (CDC, 2010).

2.2 Domestic Violence Factors

2.2.1 Gender-based Roles and Patriarchy

While many countries legally prohibit DV the reality is that violations against women’s human rights are often sanctioned under the guise of cultural acceptance and justified by religious ideologies and norms (UNICEF, 2000). Countries where the social and cultural norms condone violence will see higher levels of DV. If men are seen as the dominant forces in familial relationships the risk of DV increases for women (Altekar, 1962; Karve, 1965).

Rao’s study, Wife-beating in Rural South India: A qualitative and Econometric Analysis, suggests that perceived social norms surrounding DV have an impact and that if a community accepts certain types of abuse they are more likely to occur (Rao, 1997). Rigid gender roles, such as those in India have a negative effect and male dominated relationships between couples can be a predictor of vulnerability to DV (Bhatti, 1990; Miller, 1981; Mitra, 1999). Men who believe women are deserving of being beaten are more likely to commit DV (DHS, 2008).

Cultures and societies vary when it comes to what ‘masculinity’ means and how it is defined. Men are often seen as providers and breadwinners and when they find themselves unable to fulfill these roles, they become stressed and DV is often the result (Gelles, 1987). Research done by Bourgois et al. in 1996, In search of respect: selling crack in El Barrio looked at young Puerto Rican men living in New York City slums. It showed young men were basing their conceptions of masculinity on those of their fathers and grandfathers who were first generation immigrants working hard to achieve success. However, the extreme poverty that dominated the young men’s current situation would not allow them to achieve the success that was expected of them, creating a “crisis of masculinity,” which would in turn lead to higher
levels of DV as well as participation in crime (Bourgois, 1996). Women were also placed in subservient roles during this time, which often did not allow them to escape DV in their lives due to a lack of resources. As women have become a larger part of the workforce and have moved out of roles as solely being housewives and mothers they are gaining more resources to gain more autonomy and agency in their lives. However, men may feel threatened by their wives or partners having higher socio-economic success (Gelles, 1974; Yllo and Bogard, 1998). Domestic violence can become a demonstration of a man’s power when he feels there is a threat to his masculinity through his own insecurities about a lack of success or the actual success of his partner (Jewkes, 2002).

2.2.2 Marital Status

Several studies have shown that women who are divorced, separated, or in a relationship where their partners do not live in the household are more vulnerable to DV than those who are married, cohabitating with a partner, or single (Kishor and Johnson, 2004; MSPP, 2000; MSPP, 2007). These higher rates of DV often stemmed from conflicts over resources, assets, children, or even jealousy by a former partner, particularly if the woman had moved on. The 2000 Enquête Mortalité, Morbidité et Utilisation des Services (Study of Mortality, Morbidity, and Service Utilization) (EMMUS) reported that more than 50% of women who had gone through a divorce or separation also experienced DV. However, 30% of women living with a partner and 25% of single women also reported experiences of DV (MSPP, 2000).

Smith et al. conducted a study in 2005 looking at couples, both married and dating, who were not living together and found higher rates of DV. The men interviewed were more likely to be polygamous which would in turn increase strains on the relationship and increase the likelihood of DV due to jealousy and a sense of competition for resources (Smith, et al., 2005).

The 2008 DHS study, Intimate Partner Violence among Couples in 10 DHS Countries: Predictors and Health Outcomes, shows that data on DV for currently married women varied among the ten developing countries studied regarding the prevalence of DV among married and single women. In many cases it was the women who were married that experienced the higher rates of DV. The same was found with women who are in their second marriage (Hindin, et al., 2008). The extent to which marriage is affiliated with DV can often coincide with the social norms of a culture. For example, in Nicaragua, divorce, premarital and extramarital relationships are rare and rates of DV are much higher among married couples. In North America where premarital sex and divorce are more common, research does not show a strong correlation between DV and marriage (Bachman et al., 1995). Cultural social ‘norms’ regarding marriage and dating can heavily influence predictors of DV. If women are expected to stay in a marriage
for religious, familial, political, or economic reasons they may feel powerless to change their situations or may have changed them but feel they have little protection after a break up or divorce.

2.2.3 Age

A woman’s age can have an impact on the likelihood she will experience DV and seek help (Daga, 1998). Younger ages at first marriage showed positive correlations of %age of men who perpetrate violence on women and girls (Hindin, et al., 2008). When a woman is married at a young age she is more vulnerable to DV, with fewer resources to seek help or leave the relationship (Kishor, 2004). Kishor also found that women who marry at a young age are more vulnerable to DV because they lack the maturity to handle new marital situations and their social status is low, meaning they do not have the clout in the community to go against their abuser and expect support from their social networks, formal or informal. Another study by Martin et al. (1999) shows that in Northern India there was no correlation between age at first marriage and the propensity to use violence. Even though it is often surmised that women’s experiences with DV will increase with age simply due to the fact they have more time to be exposed to such circumstances.

The association of DV and the age of women’s partners tend to show a decline in the mid-forties. (Martin et al., 1999). In Haiti, the %age of women who have experienced DV declines with advanced ages of husbands/partners, 45 years or older (DHS, 2008). In Malawi, partners showed a similar decline. Men aged 25-34 showed the higher tendencies to resort to DV (DHS, 2008). In the U.S., ages 16-24 show the highest tendency to experience DV (Rennison, 2001). These variances in the numbers again point to a trend that DV tends to occur in younger partners, but should not diminish the reality that DV can occur at any age.

2.2.4 Household Composition

There is a strong correlation between the number of children a woman has and her likelihood to experience DV (Ellsberg, 2000; Martin, 1999). Fathers of larger families often experience higher levels of anxiety due to economic insecurities and a lack of resources and may turn to DV as an outlet to mitigate their stress (Visaria, 1999). A diminished access to resources has been linked to higher rates of DV due to the inherent stressful nature of being poor (Jewkes, 1999). Men may have fewer outlets to mitigate their stress and opt to alleviate tension through DV (Gelles 1974). Low socioeconomic status, large families to support, particularly those with small children under the age of five, tend to have higher levels of stress and are more prone to experiencing violence within the household Moraes and Reichenheim (2002).
Women living in nuclear families (consisting of a pair of adults and their children) were more likely to experience DV than those who do not, but as with most indicators, surveys showed varying results among the ten countries studied (Hindin, et al., 2008). One interesting finding showed a strong correlation between high numbers of boys in the nuclear household with lower rates of DV. The reasoning is that boys are more likely to fight the aggressor and prevent or diminish the DV. They not only can act as protectors to the women in the house, they can also provide economic income, alleviating stress levels and economic insecurities, which are often triggers of DV (DHS, 2008). The economic stresses of having more children brought to the family unit due to a lack of intra-household per capita income are important factors in understanding why DV is or is not more prevalent among various studies. Children may often be considered a reason that DV rates are higher but they can also be strong motivators for women to get out of violent relationships because they do not want to perpetuate a cycle of ‘learned abuse’ and physical/mental harm to their sons and daughters.

2.2.5 Education

The study conducted on DV in Rio de Janeiro showed that DV occurs among women with less schooling, who do not work outside the home and lack social support (Moraes and Reichenheim, 2002). These women are often unable to support themselves without education and experience barriers in seeking help. The same was also shown in the 2008 study of Indian women where there was a positive correlation between lower educational attainment and higher incidences of DV (Ackerson et al., 2008). In South Africa Abrahams et al. (2006) found that men with lower educational status are more prone to commit acts of DV. In Peru, based on the Peruvian demographic health surveys, women with higher and post-secondary education with husbands who were also highly educated were less likely to report experiencing DV (Flake, 2005). Many times the lack of reporting is associated with stigma and shame and also one or both of the partners fearing losing status, either in society or in their occupations. Higher education among women may also protect them in that they have the resources to get out of violent relationships and can also seek the legal and emotional support they need. They are also more likely to be more empowered regarding decisions about the person they will marry (Kishor and Johnson, 2004).

2.2.6 Decision-making Power

In the study Who's at risk? Factors associated with intimate partner violence in the Philippines, women who find they lack influences within a relationship or familial structure also show a higher incidence of DV due to the lack of decision-making power regarding finances, education, employment and overall household duties (Hindin and Adair, 2002). Men’s power in the household does not always ensure DV
will occur but it has been shown to contribute to an already violent demeanor and be used as a tool of controlling and maintaining power (Hindin and Adair, 2002).

Social isolation is often used as a form of DV because it enables the abuser to maintain control without outside influences diminishing their power, allowing them to control their partner’s ability to make independent decisions further isolating them and diminishing their self-esteem. Examples include barring a woman from having a job, a car, freedom to leave home and often isolation from family and friends. This has been an important part in explaining the correlation between lack of social support and severe abuse due to a victim’s ‘brainwashing’ that they are unworthy of a better life or they may be cut off socially or economically and cannot seek help (Turner, 2002; Levendosky, et al., 2004). The same study found that when women were more dominant in the household they may also experience DV, which is attributed to a lowered self-esteem in the man who experiences emasculation and feelings of powerlessness in the relationship but this is less common. The power to make decisions in the household is vital to women feeling they can change their situation in that they can access financial and material resources that will enable them to leave and survive outside of the abusive relationship. It also signals equality and mutual respect among partners that is necessary to stop DV.

2.2.7 Prior Exposure to Domestic Violence

A history of family abuse can be a factor in perpetuating a ‘trans-generational’ cycle of DV. Several studies have found that men’s experience of abuse during childhood was the single largest predictor of their chances of becoming abusers as adults (Jaoko, 2010; Ellsberg et al, 1999; Abrahams et al., 1999; Ellsberg, Pena, Herrera, Liljestrand and Winkvist, 1999; Jewkes et al., 1982). Women (and men) who have witnessed violence in their childhood were more likely to experience DV in their own lives and also more likely not to report DV (DHS, 2008). Daughters who witness DV as children are more apt to choose partners that beat women and both men and women who are abused themselves as children are more likely to experience DV in their lifetime (Jewkes, 2002b; Wekerle and Wolfe, 1999).

Children who witness DV will use violent behavior as a mechanism of coping with stress (Strauss, 1994). This is often a direct result of children learning that DV is acceptable and a normal interaction between partners. Mitchell and Hodson (1986) also demonstrated that childhood exposure to a violent environment and more traditional attitudes toward women’s roles contribute to less effective ways of coping with increasing levels of violence. It is important to note that looking at the family core and the ripple effects of DV to children is an important area of research as these memories and experiences among children may shape how they perceive relationships and choose partners in adulthood (Gage, 2005).
2.2.8 Substance Abuse

Substance abuse use is highly correlated with acts of DV (Farrington, 1998; Wikstrom, 1985; Hoffman and Demo, 1994; International Clinical Epidemiology., 2000). Alcoholism can play a large role in the abusers’ perceptions of their lives and causes of unhappiness. In many countries, where alcohol is socially acceptable, many people can revert to drinking heavily in order to relieve stress caused by economic or personal difficulties. This will often lead to dependency and health related problems, dysfunction at work, with the family and issues with the law. In his 1994 research Gender, Drink and Drugs, cultural anthropologist M. McDonald showed that a person’s alcoholism, drug use, and subsequent DV is a learned behavior (McDonald, 1994). Alcohol use may also be viewed as a time when men will not be held accountable for their actions and will be more apt to use lowered inhibitions as an avenue to use and justify DV (Gelles, 1974). In some instances, alcoholics do not remember their abuse and form layers of denial that enable them to justify their actions with delusions of being ‘attacked’ themselves and are therefore on the defense against anyone perceived to be ‘against’ them (Abrahams, Jekes and Laubscher, 1999; Anon, 1998). The association between drinking, drug use, and long to short-term cognitive impairment is also shown to be a mitigating factor that leads to higher rates of DV (Gross, Bennett, Sloan, Marx and Juergens, 2001; Leonard, 2000). Butchart’s study Non-fatal injuries due to domestic violence in Johannesburg-Soweto: Incidence, determinants and consequences found that some men stated the need to consume alcohol in order to have the courage to beat their women due to social pressures to do so (Butchart et al., 1991).

Men who are alcoholics will often misappropriate funds and be less supportive of their families and this can be seen throughout all social groups and classes (Coker, Smith, McKeown and King, 2000; Scott, Schafer and Greenfield, 1999; White and Chen, 2002). Women who are exposed to DV are more likely to use alcohol or other substances as coping mechanisms (Ilika et al., 2002; Jaoko, 2010; Wong et al., 2008). It is also notable that post-disaster/conflict situations tend to exacerbate the use of drugs and alcohol among men and women who deal with the trauma they have witnessed with mind altering substances (NOFJC, 2013).

2.2.9 Socio-Economic Status

Much of the literature assumes that women from a lower socioeconomic status will have a higher vulnerability to DV, but studies vary by their outcomes (Heise, 1998; Jewkes, 2002). The 2008 DHS Study showed varying stories regarding socioeconomic status and DV. Women from the poorest 40% of households were most likely to experience DV and women of the richest 20% were least likely (DHS, 2008). The same study showed that women in Bolivia, who were in the middle wealth quintile group,
were more likely to experience DV than the poorest groups. Zambia showed the opposite where women of the richest 20% were more likely to experience DV and women in the poorest 40% were least likely (DHS, 2008). These findings varied due to the ability, or inability, of women to report cases of DV and also their access to formal and informal support systems.

The findings in Zambia may be attributed to the risks that are introduced when inequality among men and women occurs (Ellsberg et al., 1999). Women who are working and earning more than their partners will often exacerbate feelings of inadequacy in their partners, subsequently increasing the possibility of DV. This suggests that inequality and poverty are important aspects to consider along with income and empowerment (Jewkes, 2002). However, on the opposite end of the spectrum, Visaria’s study on Indian women born into lower castes shows these groups are vulnerable to DV due to their socially and economically disadvantaged status where social insecurity and lack of social support disallow for recourse, legal or otherwise (Visaria, 1999).

Conversely, the study, Sanctions and Sanctuary: Cultural Perspectives on the Beating of Wives, looked at 15 western and non-western societies and found that women of low social status were less vulnerable to DV because men did not feel the need to establish dominance and authority over them (Counts et al., 1999). However, the same study proposed that women who were garnering higher socio-economic status might also be changing traditional roles, which could increase their likelihood of experiencing DV. The assumption is that violence tends to be higher in societies where women are transitioning from a lower to a higher socio-economic status. Also, many women in lower socio-economic strata simply do not report DV if they do not have the access to support networks or it is considered socially taboo (Bouchon, 2009). Examples of these transitional phases include the feminist movement of the 1960s and 1970s where roles began to become ill defined between men and women, creating social instability. Women are still in the battle for equal rights where the proverbial ‘glass ceiling’ is ever present but great strides have been made throughout the world through the women’s movement. It should not be taken for granted though as many women still live under archaic and almost medieval social systems that deny them basic human rights and the right to self-determination.

2.2.10 Inadequate Laws

Legal avenues to combat DV can play an integral part in its abatement and prevention. A transnational study, En el Norte la Mujer: Gender, Generation and Geography in a Mexican Transnational Community, revealed that increased economic opportunities, rights to privacy, and legal protection gave women in the United States more ability to demand violence free marital relationships when compared to the women remaining in Mexico (Hirsch, 1999). Counts, Brown and Campbell (1992) found that the
lowest rates of DV occurred in societies that consistently imposed legal sanctions on perpetrators among 15 societies in both developed and underdeveloped countries. Many judicial systems focus on punishment of the perpetrators with little regard for the safety of women filing the complaints. Many women may choose not to file criminal sanctions because breaking up their marriages would mean a loss of monetary assets, custody of children and even social standing (Larrain, 1999). Women often prefer avenues such as divorce where legal statutes ensure equitable distribution of assets, settle child custody disputes and child support issues (Guedes, et al., 2002).

There are also problems with law enforcement entities in dealing with DV. Half of the participants in Sullivan’s 1992 study of women experiencing DV in the United States found they were dissatisfied with how the police responded to their calls for help citing that oftentimes the police officers were inadequately trained to deal with DV cases. In Uganda, 59% of the women surveyed who reported having experienced DV were ignored by law enforcement officials and sent home without any legal recourse or counseling (International Center for Research on Women, 2009). In Morocco, a study found that 50% of women surveyed experienced DV in their lifetime, but only 13.5% sought help from law enforcement officials (WHO, 2005).

Many police officers stated they found themselves coming to the same calls time and time again leading them to question the legitimacy of the complaint and even criticizing women for staying in their relationships (Sullivan et al., 1992). Law enforcement agencies go through DV training which has helped them develop the skills and sensitivity needed to adequately respond to DV calls but there is often a culture of mistrust between the communities and the police officers who serve them that diminishes law enforcement efficacy (NOFJC, 2015).

Limited legal repercussions may contribute to low statistics on DV because victims simply do not report it. Women need to feel safe and secure that they can work with the legal sector and avoid costly attorney’s fees as well as mitigating the social stigma they experience when coming out and fighting back through the law.

2.3 Domestic Violence and Help-Seeking Behaviors

Understanding why victims of DV do or do not seek help is crucial to policy makers, program managers, social workers, and the victims themselves who want to stop the violence. Help-seeking behavioral data among women who are victims and survivors of DV can assist in understanding these behavioral choices of battered women (Collins, 2004). There are many factors that come into play when women decide to seek help. Often they are in need of legal aid, economic assistance, childcare, job services, healthcare, as
well as psychological counseling. (Sullivan, Basta, Tan, and Davidson, 1992; Weisz, Tolman, and Bennett, 1998). These needs can be barriers to whether or not a woman will decide to leave her abusive situation because of her dependence on the perpetrator for economic and social support, and as a housing provider. In weighing all of these factors, a woman’s reasoning to seek help is often based on the severity or regularity of the abuse. There are several theories that focus on help-seeking behavior in psychological literature.

The *survivor theory* by Gondolf and Fisher (1988) and *reclaiming-self theory* by Merrit-Gray and Wuest (1995) are two important theories that explain victim help-seeking behaviors (Leon, et al., 2007). Gondolf and Fisher state that victim’s increase their help-seeking as the physical violence against them escalates and women will continuously engage in efforts to survive conditions in which they live by persisting through adversity and adaptation to survival mechanisms for themselves and their children (Dutton, 1996). Similarly, Merrit-Gray and Wuest argue that women actively counteract DV and that escaping violence is a process, rather than a unitary event, as supported by the finding that women attempt to leave violent relationships multiple times before permanently leaving (Leon et al, 2007; Dobash and Dobash, 1979; Gondolf, Fisher, and McFerron, 1990).

Research investigating women’s help-seeking behaviors in violent relationships is extensive and includes community samples of respondents, large population-based surveys and agency samples of women receiving services from shelters, hospitals, and courts (Leon, et al., 2007). These studies have focused primarily on three factors: severity and consequences of the violence, victim characteristics, and sources of help utilized. First, physical violence severity is the most frequently examined and consistent predictor of help-seeking. Findings reveal a positive association between violence severity and the decision to seek help, particularly seeking out legal and medical help (Gondolf and Fisher, 1988; Hutchinson and Hirschel, 1998; Kantor and Straus, 1990). Psychological consequences of partner violence such as fear, anger, depression, and diminished self-esteem are also positively linked to victim help-seeking (Campbell, Miller, Cardwell, and Belknap, 1994; Kirkwood, 1993). The link between help-seeking and social isolation and lack of social support that results from DV has also been examined among agency samples which show that victims are less likely to leave abusive situations if they do not have these support structures in place (Dutton, Hohnecker, Halle, and Burghardt, 1994; Sullivan et al., 1992). Findings show that victims seek help from people they believe to be receptive and that perceived support and empathetic responses contribute positively to women’s coping abilities (Bowker, 1983; Waldrop and Resick, 2004).

Second, a victim’s ethnic background characteristics are generally not associated with help-seeking and findings are often inconsistent. For example, some findings show Hispanic and African-American women...
are more likely than Caucasian women to call the police in response to partner violence (Hutchinson and Hirschel, 1998; Krishnan, Hilbert, and Leeuwen, 2001), whereas other studies show that the same social groups are less likely to call the police (Richie, 1996). Yoshioka, Gilbert, El-Bassel, and Baig-Amin (2003) found no differences among African American, Hispanic, and Caucasian women’s formal help-seeking. More specifically, about 30% called the police or a counselor, or both, and less than four% contacted a doctor. Victims’ socioeconomic status is also an inconsistent predictor of help-seeking, with some studies showing a positive association (Hutchinson and Hirschel; West, Kantor, and Jasinski, 1998) and others showing a negative association (Donato and Bowker, 1984). These results point to the need to consider the specific cultural context being observed as they vary greatly.

2.3.1 Informal and Formal Social Networks

Women may use what is referred to ‘informal’ and ‘formal’ help-seeking processes when they experience DV. People in the victim’s social network such as family, friends, neighbors, or colleagues may play a supporting role in helping to deal with the aftermath of abuse (Davis 2002; Davis and Srinivasan, 1995; Leone, Johnson and Cohan 2007; Sabina and Tindale 2008). Informal networks are often the first step in the help-seeking process and the outcome can shape victims’ subsequent help-seeking decisions. Positive reactions of family and friends encourage more formal or professional help-seeking decisions, including the utilization of law enforcement, counselors, crisis accommodation and financial support (Davis and Srinivasan 1995; Goodkind et al. 2003; Moe 2007).

Informal and formal social networks protect women against ongoing violence by triggering battered women’s coping efforts (Goodman et al., 2003). In the research by Sullivan and Bybee (1999) Reducing Violence using Community-Based Advocacy for Women with Abusive Partners: Initial Evaluation, the stronger the informal networks the less likely women were going to experience DV over the course of one year. However, in the case of severe DV, a quarter of the participants who had experienced the most severe violence, even informal social networks did not diminish the likelihood of ongoing violence and more formal networks were pursued. While many women use what is termed as ‘private strategies’ such as placating or physical resistance to DV, many survivors also rate informal strategies and many formal support strategies as more helpful than private strategies (Goodman, et al., 2003).

Research on informal and formal networks shows there is an association between high levels of support and mental health and help-seeking behaviors (Liang, 2005). The size of one’s informal network and the level of perceived support of its members are very effective in determining a victim’s state of mental health (Cohen and Willis, 1985; Flannery, 1990; White, Richter, and Fry, 1992). Women with close
relationships that provide both psychological and material resources are in better mental health and are more likely to leave abusive relationships than those with few informal supports (Cohen and Wills, 1985).

A lack of social support and stigma is often associated with DV. This causes a reluctance to seek help from both formal and informal institutions (Barnett, Martinez, and Keyson, 1996; Dunhm and Sen, 2000). This is significant because informal social networks have been identified as a key protective factor that is associated with fewer mental health problems among battered women (Astin, et al., 1993; Carslon, McNutt, Choi, and Rose, 2002; Kemp et al., 1991; Mitchell and Hodsen, 1983; Tan et al., 1995). These studies show that battered women who receive emotional and tangible support may be less susceptible to the deleterious psychological impact of their partner’s abuse (Liang et al., 2005). Victims’ perceptions of social support may directly affect their mental health by moderating their sense of well-being or by mediating the relationship between abuse and mental health (Aria, Lyons, and Street, 1997; Thompson et al., 2000).

Help-seeking behaviors also correlate within the community a woman is connected to in her life. Among neighborhoods in the United States where extended family units are the norm, with a high level of economic and emotional support as well as economic opportunities, levels of DV tend to be lower in neighborhoods where there is less support from family networks, fewer economic opportunities, higher crime rates, and high unemployment, DV tends to occur at a higher frequency and women find it difficult to seek help. (Bennett and Fraser, 2000; Drukker, Kalpan, Feron and van Os, 2003; Kawachi, Kennedy and Wilkinson, 1999; Ross, Mirosky and Pribesh, 2001). Also, social crowding and deteriorated infrastructure are strongly associated with increased DV (Cunradi et al, 2000; Pearl et al., 2001; Wilson, 1996; Drukker et al., 2003; Wen, Browning and Cagney, 2003). These findings highlight the higher levels of vulnerability of women living in these economically depressed areas.

In examining the nature and extent of help-seeking behaviors among women who experience DV many researchers focus on an individual help seeker’s internal, cognitive process and include three stages: problem recognition and definition, the decision to seek help, and the selection of a help provider. These stages are not usually linear but do show that how a woman appraises and defines her situation shapes her decision to seek help (Fox, Blank, Rovnyak, and Barnett, 2001; Greenlay and Mullen, 1990; Pavuluri, Luk, and McGee, 1996; Pescosolido, 1992; Srebnik, Cuase, and Bayder, 1996). This model describes help-seeking among DV survivors in primarily cognitive terms where emotions are seen to mediate between conditions and intentional actions (Brandstadter, 1988). Feelings of guilt and shame often will cause women who are experiencing DV to forego seeking help due to the cultural context of their life.
experiences and how society or their immediate family and friends perceive DV. Also individual expectation, goals, and beliefs play an important role in the decision making process as well.

2.3.2 Defining Domestic Violence

The complexities of DV point to the need to understand help-seeking strategies and the factors associated with how women make the decision to leave violent relationships (Dutton, 1993). This includes looking at how women define DV, available resources, and the frequency and severity of abuse.

Individuals respond to DV in a variety of ways depending on how they define or label DV and its severity (Fox, et al, 2001; Tsogia, Copello, and Oxford, 2001; Greenlay and Mullen, 1990). How service providers define DV is equally important as research shows they often assume definitions are universal (Liang, 2005). The definition of DV can vary considerably, reflecting distinct viewpoints and public health responses (Walker, 1999). It is important to move beyond research that is limited to professional assumptions of problem definitions and explores the processes of problem definition among individuals in need (Boradhurst, 2003). Past research has focused on what women who are suffering from DV ‘do’ instead of ‘how’ these interpretations affect their process of help-seeking. Victim’s definitions may shift over time as well and it can be highly dependent on their ‘readiness’ to make changes in how they perceive their experiences with DV (Liang et al., 2005). This is shown in the Transtheoretical Model that addresses six stages of change and how a victim of DV moves through them (Prochanska, DiClemente, and Norcorss, 1992). These stages include: pre-contemplation stage (not ready) where a person is unaware that their partner’s DV behavior is problematic and is not taking action; contemplation stage (getting ready) where a person is beginning to recognize that a behavior is problematic and begin to evaluate the pros and cons of the continued violent behavior of their partner; the preparation stage (ready) is where a person begins to plan to take action in the immediate future; the action stage shows the person making specific changes in modifying their own behavior and making healthier choices; the maintenance stage shows the person being able to sustain those new choices for six months or more and are working to prevent relapse; and finally the termination phase where there is no temptation to return to unhealthy habits and behaviors of the past.

Social context is an important factor in how victims define DV and is shaped by gender, class, and cultural norms. Often women define DV using social, religious, and cultural institutions that reinforce power inequities between men and women (Connell, 1987). Many communities do not view issues of DV as something that is to be exposed beyond the relationship in which it occurs and do not specifically address these social situations due to their normality and acceptance (Ellsberg, Aldera, Herrera, Winkist, and Kulligan, 1999; Hormne, 1999; McWhirter, 1999). It is often a common belief that DV is a private
matter between partners and is not considered anyone else’s business. Social context plays a powerful role in women’s decisions to seek help from friends, family, or outside agencies.

2.3.3 Available Resources

Cultural norms where women are viewed as second-class citizens will often find themselves without the resources to seek help. These barriers include financial dependence on their partners, inability to communicate with organizations, loss of status and social power, lack of education, and the loss of support from extended family and friends (Huisman, 1996; Rasche, 1988). Rural communities have specific barriers such as poverty, high unemployment, substandard housing, and women may be isolated from services (Krishnan, Hilbert, and VanLeewen, 2001).

Costs to women who seek help can be very high. These costs include a loss of privacy, stigmatization, threats on their lives made by the perpetrator or his family (Fleury, Sullivan, Bybee, and Davidson, 1998; Goodkind et al., 2003; Lempert, 1997). The Health Belief Model Cognitive Framework stressed the cost-benefit analysis that women undertake in deciding which formal and informal support to choose (Broadhurst, 2003; Tucker, 1995). In this framework women weigh the benefits and costs of each potential source of support. The costs of losing privacy, losing control to the police or other institution, particularly those with illegal or immigrant status, compromises psychological and economic resources for women. This process is influenced by a woman’s interpersonal interactions and relationships. Powerful influences included whether or not women who had witnessed their mothers being abused, were distanced from their fathers and unable to confide in them about the abuse, and unattached to their immediate families with whom they felt they could not depend on for help (Rose, et al., 2000).

Having a supportive social network is a major predictor of the likelihood of following through with prosecution and life changing decisions (Goodman, Bennett, and Dutton, 1999). Lempert’s 1997 qualitative study *Negative Effects of Help-Seeking Processes of Abused Women*, showed that battered women sought formal help only when they regarded their own resources and alternatives as depleted and had lost hope in being able to end the violence themselves. The qualitative study, *The Role of Social Support and Family Relationships in Women’s Responses to Battering*, studied thirty-one abused women and found a pattern of feelings of insecurity and isolation and victims not being able to relate to others very well with a high level of caution when entering new relationships. However, these may have been a direct result of the abuse itself and the overall diminishing of self-esteem and self-worth (Rose, et al., 1997). Often these feelings of insecurity can hold women back from seeking help, both informally and formally.
Mitchell and Hodson’s ecological model (1983, 1986) of coping conceptualized personal resources (including individual income) as a major determinant of help-seeking from formal networks. They found that women’s increased access to resources increased her informal networks and social support that were outside of the abusive relationship. Women with increased resources were at an advantage (Waldrop and Resick, 2004).

2.3.4 Frequency

The frequency of DV in a woman’s relationship has been shown to be correlated with her deciding to seek help in order to cope with her situation. One such study by Hebert et al. (1991) interviewed 130 women while looking at their cognitive strategies such as the amount of positive focus on aspects of the relationship, negative changes in the relationship, extent of downward social comparisons, and personal attributions for abuse. They found that 34% of the original sample of 130 women did not exhibit a relationship between frequency of physical abuse and types of cognitive strategies used. However, there was a significant negative correlation between frequency of verbal abuse and use of downward social comparisons (Hebert, Silver, and Ellard, 1991; Waldrop and Resick, 2004).

Gondolf and Fisher (1998) looked at the frequency of abuse in conjunction with active coping by comparing shelter residents and nonresidents. They found that women who had decided to use the shelter had experienced more frequent abuse than women who did not use the shelter, pointing to more active help-seeking with an increases frequency of abuse. Mitchell and Hodsen (1983) studied 60 battered women and found a higher incidence of avoidance in correlation with increased physical violence. It would appear these are in contradiction to Gondolf and Fisher (1998) but it is possible that active strategies to escape the abuse (e.g. shelter use, leaving, prosecution) may be associated with different context and predictors than active strategies used while still in the relationship (e.g., arguing with the abuser, calling police, talking to a friend) (Waldrop and Resick, 2004). These studies show that active forms of help-seeking significantly related to the frequency of abuse were those that took the woman away from the abusive situation such as going to a shelter. When more informal sources were used such as talking to a friend there was not a significant relationship to frequency of violence (Mitchell and Hodson, 1983).

2.3.5 Severity

The severity of DV can also be an indicator as to whether or not a woman will seek help. Mitchell and Hodson (1983) found that higher levels of violence were associated with more avoidance coping and women were less likely to receive support from informal networks. Their research used an ecological
perspective which found that more severe abuse was related to more enforced social isolation of women. Severity of violence was negatively associated with both number of social support network members and number of social support network members and number of social contacts made independent of the abusive partner (Waldrop and Resick, 2004). Increased severity of abuse was related to the likelihood that informal networks would react with avoidance because it created more difficult circumstances for a woman to take advantage of informal networks.

Researching the frequency and severity of abuse are two of the most common factors examined when looking at help-seeking behaviors but one important aspect to include is the length of the relationship which has been shown to change a woman’s coping strategies over time. Women can often feel they have ‘invested’ a lot of their lives to a partner and many will often still express they love their abusers. Rusbult and Martiz (1995) conducted a longitudinal study to predict commitment levels and whether women would stay or leave their abusive partners. They found that a longer relationship was predictive of a higher commitment level and that battered women were more likely to stay or return after leaving and if they did leave, it was only for a short time.

Understanding the influences on women who are experiencing DV is part of answering why they seek help and the type of help that enables them to change their lives. While many will go through very supportive processes and make the decision to leave, many others will not have that ability, whether it is from their social, economic, or even self-inflicted prohibitions. Domestic violence destroys lives and by its insidious nature, often claims lives. Societies, including other men, need to do more to hold abusers accountable for their abusive behaviors.

2.4 Domestic Violence in the Post-Disaster Context

Domestic violence is prevalent in post-disaster areas that have experienced social upheaval resulting from the event and is a significant challenge in the immediate aftermath as well as the rebuilding phase (Jewkes, 2002b; Gerlock, 1999; Molen Valdés, 2009). The Gender and Disaster Network has documented that DV increases after a disaster due to intensified psychological, economic, and physical stress levels that are often exacerbated by alcohol and drug abuse. Trauma may also play into elevated levels of DV if members of family or social networks have been killed, seriously injured, are missing, or evacuated to distant, perhaps unknown locations (Levinson, 1989).

The 2010 earthquake in Haiti made it apparent that the response to help those in need was critically lacking, particularly women living in internally displaced persons (IDP) camps. Poor lighting, inadequate security personnel and police presence all contribute to higher rates of DV in these types of ad hoc
situations. The impairment and destruction of social programs that are no longer in working order or not running at full capacity leave the communities they serve particularly vulnerable. Families are broken up and many women find themselves alone and unsupported.

Increased levels of DV were reported in the Philippines (Mt. Pinatubo eruption), in Nicaragua (Hurricane Mitch), in the USA (1980 eruption of Mt. Saint Helens; 1989 Loma Prieta earthquake, 2005 Hurricane Katrina), and in several refugee camps worldwide are cited as serious issues for women living in these post-disaster conditions (UNITE, 2010). Women who were living in a violent relationship before the disaster may experience violence of increasing severity post-disaster, as they may be separated from family, friends and other support systems that previously offered them some measure of protection (UNITE, 2010). Post-disaster, these women may be forced to rely on a perpetrator for survival or access to services or resources. Displaced women and children are often at risk of sexual violence as they try to meet their basic needs (United Nations High Commissioner for Refugees, 1999). Rape of women and children collecting water and firewood has been reported in refugee camps in Guinea and the United Republic of Tanzania (UNITE, 2010). Because of women’s vulnerability in post-disaster scenarios, aid agencies, first responders, and social systems need to have the training and plans in place to protect these populations not only right after major traumatic events but also in the months and years that follow.

Disasters increase the demands on local shelters and severely stretch the ability of these systems to support victims of DV. After the 1993 Missouri floods the average state turn-away rate of DV victims at shelters rose 111% over the preceding year and over 400% more flood-impacted women and children were served than anticipated (Gender and Disaster Network, 2012). In 1992, after Hurricane Andrew hit south Florida, spousal abuse calls to local community helplines increased by 50% and over one-third of the 1,400 surveyed residents reported that someone in their home had lost verbal or physical control in two months after the hurricane (Gender and Disaster Network, 2012). The rate of DV (including sexual assault) in Mississippi rose from 4.6 per 100,000 per day when Hurricane Katrina hit in 2005 to 16.3 per 100,000 per day one year later when many women remained displaced from their homes and were living in temporary shelters and Federal Emergency Management Agency (FEMA) trailers (Anastario et al., 2009). In the wake of California’s 1999 Loma Prieta earthquake, sexual assault rose by some 300% (Women’s Edge Coalition, 2005), while requests for restraining orders were said to have increased by 50% (World Health Organization, 2002).

Due to housing scarcity, women are often unable to escape abusive situations. In other instances, those who may have left known abusers before a disaster, find that they must return afterwards for lack of other housing options. This problem is exacerbated by the fact that post-disaster aid typically is distributed on a
head-of-household basis, and thus, is nearly universally accessed by men (Chew and Ramdas, 2005; Enarson, 2006). As a result of the combined impact of Hurricanes Katrina and Rita, over 1.8 million housing units were damaged throughout the Gulf region, with over 300,000 homes totally destroyed (Oxfam, 2006). Louisiana bore the brunt of destructive power of the storms, suffering fully four times the housing damage as neighboring Mississippi (Louisiana Recovery Authority, 2007). Katrina flooded many homes and some entire neighborhoods were leveled. Domestic violence shelters and all the staff running them were closed due to flooding and/or fire. The few remaining shelters in New Orleans were running at a very low capacity and were overwhelmed by people in a very short timeframe (Jones-DeWeever, 2008).

In addition to the loss of housing and communities, women consistently lamented the lack of health care availability. Charity Hospital, a major state funded institution provided emergency and long-term treatment to Louisiana’s most vulnerable populations of impoverished citizens who lacked health insurance. Since the storm, Charity has remained unopened, making it particularly difficult for the most vulnerable to received swift and quality care, however, University Hospital, which has a long history of working with Charity has stepped in to serve vulnerable populations in New Orleans. (Jones-DeWeever, 2008; ILH, 2015). Currently, Charity Hospital is being proposed for redevelopment but the City Council of New Orleans has no approved any formal plans.

Hurricane Katrina changed the demographics in New Orleans. From 2000 to 2013 the African American population declined from 323,392 to 223,742 but still makes up the majority of New Orleans’ population at 60%. The Caucasian population also declined from 128,711 to 117,377 during that same timeframe. The Hispanic population has increased from 14,826 to 20,849 and added a new element to the once bifurcated African-American and Caucasian work force in New Orleans (U.S. Census Bureau, 2013). Yet, many Hispanics are still struggling economically, at extremely low rates of pay, if they can find work at all. Many immigrant women experienced blatant exploitation, were given substandard wages, or in some instances, not paid at all (Jones-DeWeever, 2008). When facing issues of DV, Hispanic women will often forego seeking formal help due to their fear of either being deported or having their abusive partners deported. According the New Orleans Family Justice Center (NOFJC) even women who are in the United States illegally will not be deported if they seek services but they must agree to file charges against their abusers.

The NOFJC data shows a marked improvement in services on a long-term basis but also highlights the lack of planning by the local and state governments in their omission and even eventual cutting of funds to programs post-Katrina due to the short-sighted assumption that services were not needed because the
city had suffered so much damage with a vastly diminished population (Brown, et al., 2010). New Orleans saw a significant need for services within six months post-Katrina when survivors were returning to a city that had very little infrastructure in place to help them navigate their own issues of rebuilding as well as DV in their lives and many programs and services were re-vamped to embrace a modern and collective approach towards treating the issues and causes of DV (NOFJC, 2015). Systems in place can be seriously tested by natural and man-made disasters where women can become more susceptible to DV due to the insecurity and traumatic nature of such events.

2.5 Summary

Domestic violence is pervasive worldwide and can affect any socio-cultural strata, in any society or culture. This literature review illustrates the complex nature of DV and the challenges practitioners, researchers, and victims face when dealing with the diverse of issues they face. While societies and cultures vary in how they treat issues of DV the one overarching theme is that women need to feel safe and secure in their personal lives and if those securities are threatened, it is vital they have a choice in how they wish to mitigate the violence in their lives.

It is important to note the minimal research on DV in New Orleans for this review. Few studies have been conducted on women’s perceptions of DV and help-seeking behaviors in the long-term aftermath of disasters, leading to a gap in knowledge that is imperative to investigate further due to its essential role in understanding how to cope with and mitigate DV through appropriate and effective frameworks. New knowledge coming from research on this particular population can aid struggling programs to ameliorate their services and tactics in addressing DV issues in the post-disaster context where social and cultural constructs have been significantly altered.
CHAPTER THREE
THEORETICAL AND CONCEPTUAL FRAMEWORK

This conceptual framework is based on gender theories and the capabilities approach towards DV and VAW and is designed to aid in the understanding of the cycle of violence and help-seeking behaviors of women. Complex factors are explored that either hinder or empower women to escape the cycle of violence and to recognize ecological factors that may inhibit capabilities that allow positive change to occur. This chapter begins with a background of historical milestones that have taken place in order to elucidate the changing role of women in development as well as their compelling contributions to the dialogue of development and women’s empowerment. Second, the theory of social entrapment will be discussed, specifically looking at social isolation from formal and informal networks, and socio-economic gender inequalities. Third, the capabilities approaches by both Sen and Nussbaum are examined to juxtapose the concepts of freedom and agency as vital components of a sustainable development paradigm that embraces human rights and gender equality. Finally, the social ecological model and Duluth models are discussed to show the relationship of power and control and how they relate to the cycle of violence and diverse complexities of women’s lives whose freedoms are constrained by violence. The individual, familial, economic, and cultural influences on women’s perceptions of DV and decisions to seek help will be discussed by looking at the critical role of risk factors, norms, beliefs, and social and economic systems that create the conditions for DV to occur which in turn affect women’s coping strategies.

How DV has been conceptualized has evolved over time with the most common approaches focusing on the individual personal characteristics of the perpetrator or the victim to develop a sense of why DV occurs (Koss, 1994). More contemporary has begun to focus on the larger sociocultural context in which DV occurs, such as the quantity, quality, and impact of social support for DV victims and the ways in which victims seek help (Liang et al., 2005). This can also be true of looking at the short and long-term social contexts that occur after disasters. The contextual framework of this research is based on Ptacek’s theory of social entrapment and adding to it the theory of economic entrapment in order to understanding how women perceive DV and the factors that shape their decision to seek help and escape the power and control of their abusers as well as navigate societal institutions that often do not have adequate resources or policies to address DV in New Orleans (Ptacek, 1999).

3.1 Development and Women’s Empowerment

The United Nations Charter of 1945 and the Universal Declaration of Human Rights in 1948 established the first official worldwide recognition of women’s equality and non-discrimination on the basis of sex.
In 1946 the United Nations General Assembly created the Commission on the Status of Women (CSW), the principal global governmental body exclusively dedicated to the promotion of gender equality and the empowerment of women (UN Women, 2015). Up until the 1960s most development paradigms focused on women’s reproductive roles, access to food, contraceptives, nutrition and healthcare, and finally, their roles as mothers and wives without any focus on women’s economic contributions, much less the notion of their empowerment or issues of DV (Moser, 1995). The United Nation’s Millennium Development Goals (MDG) in 2000 and most recently the Sustainable Development Goals (SDG) in scheduled for 2016-2030 have shown a progressive move forward in the development community as far as placing importance on women’s universal human rights and their rights to be free from all forms of fear and violence.

3.1.1 The UN Decade for Women (1975-1985)

The 1970s and 1980s marked a new phase where women’s role in the development agenda began to be challenged to include a broader definition regarding their contribution to economic growth. A 1970 watershed publication, Women’s Role in Economic Development by Danish economist Ester Boserup, brought greater attention to the importance of women’s role in agricultural economies and the lack of alignment of development projects. Boerup’s work along with many other burgeoning feminist movements began to pave the way towards a new chapter in how the disenfranchisement of women went directly against the goal of development around the world.

The 1975 UN women’s conference, United Nations Decade for Women (1975-1985), was held in Mexico City and was used as a platform to create and promote equal rights and opportunities for girls and women around the world. The UN women’s conference in Mexico City produced two major documents: The Declaration of Mexico on the Equality of Women and Their Contribution to Development and Peace and the World Plan of Action for the Implementation of the Objectives of the International Women’s Year. The second UN women’s conference was held in Copenhagen in 1980 and was used to report on progress made since Mexico City with the Programme of Action. The 1985 Nairobi Conference celebrated the accomplishments of the Decade for Women and established an agenda that would guide future efforts to promote worldwide equality for women, including issues related to VAW. The Nairobi conference focused on economic equity, VAW, land tenure rights, and basic human rights resulting in the adoption of the document titled The Nairobi Forward-Looking Strategies for the Advancement of Women.

The UN Decade for Women highlighted social inequalities faced by women around the world and helped to give legitimacy to women’s socio-economic issues. The decade also brought their voices to the attention of national leaders and the general public. These high profile conferences were important in the
value and validity they gave to women’s issues and continue to incite research, further promoting preventative measures and solutions to these issues, including VAW, among policy makers and development agencies.

3.1.2 International Human Rights and Violence Against Women

Central to the issue and the basis of the theoretical framework of this dissertation is the denial of basic human rights to women and girls. The UN began to address these issues through the 1979 Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) which states “[the] definition of discrimination [against women] includes gender-based violence that is directed against a woman because she is a woman or that affects women disproportionately” (CEDAW, 1992). In 1993 the UN General Assembly also adopted the Declaration on the Elimination of Violence against Women (DEVAW). As a UN General Assembly declaration this landmark document does not have the binding legal authority of a convention or treaty but it is universal and sends a very strong moral statement to the international community asking them to condemn and eliminate VAW in all forms, including customs and religious traditions. It adopts a very broad definition stating that “VAW constitutes a violation of the rights and fundamental freedoms of women and impairs or nullifies their enjoyment of those rights and freedoms as well as any act that results in or is likely to result in physical, sexual, or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life” (DEVAW, 1993). The adoption of CEDAW and DEVAW marks a milestone for women because they recognized the historically unequal power relationships between women and men, and affirmed the importance of women’s movements and non-governmental organizations in raising awareness and mitigating the problems of discrimination and VAW.

The Platform for Action of the 1995 United Nations’ Beijing World Conference on Women was an important step in acknowledging VAW. That year 189 countries signed on to “specifically recognize that violence against women creates obstacles to the achievement of the objectives of equality, development, and peace at the national level and violates the human rights of women at the international level. It further recognizes that the lack of data and statistics on the incidence of violence against women makes the elaboration of programs and monitoring of changes difficult” (United Nations, 1995a).

3.1.3 Women in Development (WID, WAD, and GAD)

The women in development (WID) approach began in the early 1970s and was inspired by the feminist movement for women’s equal rights that was already taking place in many developed, northern nations (Razavi & Miller, 1995). Much of WID philosophy is based on the modernization theory, which states
that all societies pass through similar stages of development and that in time, each of the underdeveloped areas are simply at earlier, less progressives stages as well as the idea that modernization had an equal impact on men and women (Razavi and Miller, 1995). They also advocated women’s education and equal opportunity programs as solutions while arguing that development paradigms are remiss in excluding women’s social justice issues due to their economic relevance. Women are seen to be vital to the process of developing strategies and mechanisms that will bring them out of poverty and will ensure an increase in the productivity and earnings of women (Campillo, 1993).

The women and development (WAD) approach began in the mid 1970s as an offshoot to the WID movement. WAD was developed by critics of the WID who they argued “focused too narrowly on sexual inequality while ignoring the structural and socio-economic factors within which gender inequalities are embedded” (Joshi, 2005). WAD theorists held that centering development projects on women would aid in alleviating the stringent bonds of patriarchal hegemony, seen as a barrier to women’s social and economic equality. Rather than focus specifically on women’s relationship to development, WAD focuses on the relationship between patriarchy and capitalism stating that women are severely limited by cultural norms and stereotypes that marginalize their economic opportunities (Barriteau and Connelly, 2000).

The Gender and Development (GAD) approach evolved in the early 1980s with the objective of removing disparities in social, economic, and political equality between women and men as a pre-condition for achieving people-centered development. GAD emerged from frustration with the lack of progress of WID policy, in changing women’s lives and influencing the broader development agenda. GAD challenges WID’s hyper focus on women, purporting that women have more complex social needs while also challenging existing gender roles and relations that expressly marginalize women in the development arena that have systematically subordinated women (Reeves, 2000).

3.1.4 Millennium Development Goals (MDGs) and Sustainable Development Goals (SDGs)

In 2000, 189 United Nations Member States signed the Millennium Declaration which created the Millennium Development Goals (MDGs), implemented from 2000-2015. Goal three specifically promotes gender equality and women’s empowerment. Gender equality is recognized as a key in achieving all eight goals (WHO, 2005). While VAW is not explicitly stated as a target for elimination, it is related directly, not only to the notion of gender equality but also to the successful achievement of all the MDGs.
In September of 2015, the UN Member States adopted the 2030 Agenda for Sustainable Development that put forth the Sustainable Development Goals (SDGs). The SDG 17 goals aim to end poverty, fight inequality and injustice, and tackle climate change by 2030 (UNDP, 2015). The SDGs further extend the Millennium Development Goals (MDGs), including aims to achieve gender equality and women’s empowerment, seen as a universal right and a necessary foundation for a peaceful, prosperous world (UNDP, 2015). The fifth goal targets gender equality and the empowerment of all women and girls (UN Women, 2015b). The aim is to “end all forms of discrimination against all women and girls everywhere and to eliminate all forms of violence against women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation” (UN Women, 2015b). The UN clearly states that gender disparities still remain in economic and political realms and call for “deep legal and legislative changes to ensure women’s rights around the world” (UN Women 2015c).

Gender equality as an ideology has begun to take form on the international stage. Pioneers in the feminist movement helped to shape these international platforms through several developmental approaches that were designed by feminist, activists, development professionals, and academics. It is through this evolution of theory and thought that the slow metamorphosis has taken place allowing for a stronger voice in gender equality and a more stringent dogma opposing VAW. It is important to understand the theoretical background that has contributed to modern development agendas that seek to expose VAW and all forms of gender oppression, socially and economically, as they are the underpinnings of where we are today in creating sustainable paradigms of development.

3.2 Entrapment and Survival

One such theory to result in the changing social views of women’s place in society included the idea of social entrapment and economic entrapment. Social entrapment emphasizes the inescapable social dimension of women’s vulnerability to men’s violence, women’s experience of violence, and women’s ability to resist and escape. This approach links private violence to community responses and offers a way of connecting poverty, racism, and political disempowerment to women’s abilities to survive violent relationships (Ptacek, 1999). The notion of social entrapment provides a contextual framework for understanding the ways in which women break out of the cycle of violence and abusive relationships.

According to Ptacek there are three main elements common to social entrapment: 1) social isolation from formal and informal networks, fear and coercion that men’s violence creates in women’s lives; 2) attention to the policy failures of powerful institutions to domestic violence; and 3) identification of the ways that men’s coercive control can be aggravated by socio-economic gender inequalities. The theory of social entrapment explains how the abuser maintains control through the use of societal stereotypes and
constructs and the ways in which the structural inequities “collude” with the abuser to maintain the abusive relationship (Ptacek, 1999; Greenberg, 2012).

The theory of social entrapment can be related to other theories that have tried to explain the decisions women make when they are faced with DV. Battered women were accused of masochism (Snell et al., 1964) and were thought to suffer from psychological issues which in turn provoked violence (Faulk, 1974). Learning helplessness theory (Walker, 1978), battered woman syndrome (Walker, 2000; 2009), PTSD are theories that explain women’s responses to abuse by developing feelings of hopelessness and an inability to change their violent situations. The strong emotional ties between the abused and the perpetrator and an imbalance of power are often explained by traumatic bonding theory (Dutton and Painter, 1981). This is also documented by Graham, Rawlings, and Rigsby, (1944) in their Stockholm theory where the abused becomes ‘bonded’ to her abuser. All of these theories look at the victim as exactly that…. a victim who is passive to her abusive situation and most views become critical in nature, often blaming the woman for not being able to leave or fight back.

Social entrapment is similar in conceptualization to Gondolf and Fisher’s (1988) ‘survivor hypothesis’ which as a response to Walker’s ‘learned helplessness’ (1984) that women become apathetic in their attempts to seek help due ineffectual attempts to work with formal and informal networks and their failures to provide adequate support. Gondolf and Fisher argue that if women have adequate resources and social support, or capabilities, they will have the ability to leave their abusive partners (Moe, 1997).

Economic entrapment is a situation where a person established an abusive dynamic through financial control in order to limit their partner’s access to education, employment, training, contacts, and resources, resulting in the limitation of their partner’s financial freedom. While women are rarely physically kept in a space against their will, they are often in a situation of economic entrapment and the psychological toll along with a lack of resources severely limits a woman’s capability to get out of an abusive relationship. Creating individual freedom through capabilities is central to being able to leave an abusive relationship. Part of those capabilities is to have a source of leverage or independence against an abusive partner or husband (Nussbaum, 2011). Economic entrapment is related to resource theory which is defined as the ability of one person to influence the other through the control of resources (Blood and Wolfe, 1960). Men often have greater financial resources resulting in their female partners being more vulnerable. Those with few personal, economic or social resources may revert to violence as a way to control others (Gelles, 1993). Egalitarian relationships are least probable to manifest violence. Social norms which perpetuate violence as a way of maintaining power contribute to ongoing violence, for example, children
learn that force is justified in certain situations, and that simply the threat of violence can yield control and attainment of desired goals.

While many of these theories regarded women as passive in the face of violence, a 1988 seminal study by Gondolf and Fisher looked at 6612 battered women from 50 shelters in Texas and they formulated the theory of abused women as survivors and that women are active help seekers. The model implies more of a system failure than a failure on the part of the battered woman, when she remains entrapped in the abusive relationship (Gondolf and Fisher, 1988).

3.2.1 Isolation from Formal and Informal Networks

Isolation from formal and informal networks is often used to maintain power and control by limiting access to support systems such as the police, courts, healthcare systems, family, and friends. One critical reason that so many women remain with or return to their abusers is a lack of access to community resources, specifically housing, legal assistance, employment, financial assistance, childcare, and social services (Sullivan, 1991).

The role of social support systems is integral to breaking the cycle of DV in supporting victims to seek help from both formal and informal networks. These decisions are contingent on a complex web of factors that are unique to every victim of DV. Without these support systems the perception of hopelessness that will set in and facilitate the ongoing power and control needed by perpetrators to continue the abusive relationships. Access to these support systems is directly correlated with improved mental and physical health (Gondolf and Fisher, 1988). Social support systems consist of formal (religious leaders; police; women’s shelters; judicial systems; women’s centers; community groups) and informal networks (friends; family; co-workers; classmates; They also help to give assistance with ‘emotional sustenance’ such as advice, babysitting, encouragement, affirmation (Gondolf and Fisher, 1988; Horton and Johnson, 1993; Liang et al., 2005). Informal social support is a key protective factor that is associated with fewer mental health problems among abused women. Abused women who receive emotional and tangible support may be less susceptible to the deleterious psychological impact of their partner’s abuse, including anxiety, depression, suicide attempts, and posttraumatic stress disorder (Astin et al., 1993; Carlson, McNutt, Choi and Rose, 2002; Kemp et al., 1991; Mitchell and Hodson, 1983; Tan et al., 1995).

The most common form of informal help-seeking comes from family members and close friends. Reaching out to family members is one of the most common forms of help-seeking and often the first line of defense for many women. Negative help-seeking events can dramatically impact future assistance
from both formal and informal social networks. It has also been ranked one of the least helpful, as women have too often felt that their disclosures were met with judgment and a lack of empathy (Moe, 2007). Goodkind, Gillum, Bybee, and Sullivan (2003) conducted a study of 137 women who were exiting shelters after living there approximately one month. Results showed that the responses of family and friends depended several contextual factors such as the nature of the woman’s relationship with her abuser, the number of times she tried to leave her partner, the number of children, and whether friend and family had been threatened. When women received tangible support from their family and friends there was a significant correlation to women’s well-being. However, receiving positive emotional support alone was not. Lempert’s (1997) study conducting 32 in-depth interviews with abused women in outreach groups respondents first reached out to their informal networks and found this was a significant act due to the ‘outing’ of their private, abusive lives and that negative responses to help-seeking made women feel subordinate and that they needed to accept someone else’s definition of the situation to receive support and assistance. Kocot and Goodman (2003) found that women’s coping mechanisms were directly correlation with PTSD and depression and often would drive women to accept their situation and remain in the abusive relationship due to advice given to them by friends or family (Moe, 2007).

Both informal and formal social support serve to protect battered women against ongoing violence. They are said to trigger battered women’s own coping efforts (Liang et al., 2005). Goodman, Dutton, Weinfurt, and Vankos found that even taking into account the ongoing abuse, the stronger battered women’s informal support networks were the less likely they were to experience violence over the course of a year. Thus, when violence reaches a certain level of severity, even the support of family and friends may not be sufficient to prevent it or stop it (Liang et al., 2005).

3.2.2 Gender Inequalities

Gender inequality and income is cited as a key determinant or factor that underpins violence against women. For women who do not have access to economic resources, leaving abusive relationships can be difficult and often results in them becoming homeless and impoverished (Zora, 1991). According to Browne and Bassuk’s (1997) longitudinal study of low-income and homeless women, more than 83% suffered DV. Baker, Cook, and Norris (2003) found similar results among a sample of 110 abused women, 38% of whom had experienced homelessness after separation. Their research showed other problems such as being late in paying rent (40%), skipping meals (32%), neglecting bills in order to pay rent (50%), and leaving their homes due to financial problems and abuse from their partners (25%). Domestic violence is often linked to poverty rates, in that DV is more likely to occur for individual with
incomes between $6,000 and $11,999 (Asbury, 1999; Cazenave and Straus, 1990). The gender wage gap has been explored as a correlate of domestic violence. According to research done by Aizer (2010), which sought to study the impact of local gender gaps in wages on violence against women. The proposed causal mechanism that Aizer tested was an economic theory of household bargaining which states that increases in a woman’s relative wage increases her bargaining power and lowers levels of violence by improving her access to resources and option. Essentially Aizer states that decreases in the wage gap reduce violence against women.

A study conducted by Macmillan and Gartner (1999) sought to determine the impact of labor force participation on instances of violence against women where employment is viewed as a status symbol for power within a relationship. This model suggests that a female’s employment may increase her risk of abuse if her husband is not employed at that time. Findings conclude that a woman’s odds of DV increased by 160% when she is with an unemployed partner yet decreases her risks by 43% when her partner is employed (Macmillan and Gartner, 1999).

Theories that establish underlying causes of violence against women include the ‘of causation’ that came out of the feminist movement of the 1970s that stated patriarchy and men’s indisputable power and oppression of women were the underlying causes (WHO, 2010). More recently, extended models of explanation have been incorporated to develop the theory of gender inequality further and to explore the effects of social roles, attitudes, and other cultural factors. The unequal position of women within particular relationships and the normative use of violence are seen as two of the most important factors in abusive relationships (Jewkes, 2002). These factors then interact and are enhanced by societal norms about gender roles and ideologies of male superiority and legitimize demonstrations of power against women. Jewkes also noted that the effects of factors contributing at other levels of the social ecology, such as alcohol and women’s poverty, are interconnected and dynamic.

Levinson’s (1989) ethnographic study of family violence in a cross-cultural perspective in 90 societies, showed that cultural inequality where men have more control over finances and domestic decision-making there are higher incidences of DV. Levinson’s work concluded that the relationship between physical family violence and gender equality is clearly correlated with more general violence in a society. women's economic equality and independence reduces family violence and that family violence is clearly correlated with more general violence in a society.

Gender inequality often comes down to a question of agency. Agency refers to a person’s role as a member of society, including political, economic and social spheres. A woman’s agency can also be defined by her power. Empowerment is a key to understanding DV and the ways to achieve its
eradication. Agency goes together with the expansion of valuable freedoms. In order for people to be agents in their lives, people need to be free (Alkire, 2005). When women experience DV, their ability to react in ways that will allow them to have the agency to leave their abusers is highly correlated with their economic freedom.

Economic abuse is a major theme among women who are experiencing DV and can include controlling a woman’s income, not allowing a woman to even earn an income, or by completely disallowing a woman to have any decision-making power over economic resources within the household. Often, the poor and disenfranchised of a society do not have the same access to networks and services as their wealthier counterparts. The poor are often at risk and have low functioning, not due solely to their lack of monetary liquidity but because they lack certain freedoms of capabilities (Sen, 1999).

Poor women who are victims of violence are extremely vulnerable due to their inability to seek out networks and services, further limiting their abilities to leave abusive relationships. The ability of women to rely on informal and formal networks is central to their capability to leave a cycle of violence. Formal networks such as religious entities, justice systems, police departments all play an important role in enhancing a woman’s self-actualizations. Informal networks, often the first line of defense for victims of violence also play an important role and herein lies the role of stigma and cultural perceptions, including those of the abused. This research aims to show how those affect their decision making power.

Gender inequalities in education and income generating opportunities puts women at a marked disadvantage when facing issues of violence. For example, housing is one of the most important factors in whether a woman will leave a violent relationship, as well as being able to support herself and her family. All of this comes down to the notion of agency and ‘well-being’ that is crucial in assessing one’s capabilities and any economic, social, or political barrier to achieving one’s substantive freedom (Sen, 2001).

3.3 Capabilities and DV

The capabilities approach, as articulated by Sen (1999), Nussbaum (2000), and the United Nations Development Programme (UNDP; 1999), is based on the notion that human freedom and access to opportunities are central to social development (Pyles, 2008). Being capable is the idea of having real choice and real freedom in whatever you choose to do in life. These include the “ability to be well nourished, to avoid escapable morbidity or mortality, to read and write and communicate, to take part in the life of the community, to appear in public without shame” (Sen, 1999). The capabilities approach has enormous potential for addressing DV and gender inequality because it can address issues that are not
reducible to financial welfare (Robeyns, 2003). Nussbaum adds depth to this framework in that she broadened Sen’s definition by including feminist concerns and ten central human capabilities and representing an important voice for advocating for the capabilities of women (Pyles, 2008).

3.3.1 Sen’s Capabilities Approach

Sen conceived the capabilities approach in the 1980s as an approach to welfare economics with a core focus on what people were able to do while advocating a sharper focus on people’s capabilities when measuring social justice issues. Freedom, liberties, agency, and choice are central tenets of the capabilities approach (Sen, 1999). Sen denotes two aspects of freedom: the processes that allow freedom of actions and decisions; and the opportunities that people have, given their particular personal and social situations. Five basic instrumental freedoms are outlined by Sen: political freedoms, economic freedoms, social opportunities, transparency guarantees and protective security such as social safety nets providing income supplements and unemployment benefits. In assessing a person’s advantages in life it is important to first assess what freedoms that person enjoys and those freedoms are directly correlated with a person’s ability to turn resources into valuable activities. One must acknowledge the individual’s differences in the ability to transform resources into valuable activities. The multivariate nature of activities then can give rise to happiness with an emphasis on a balance between these materialistic and non-materialistic factors and the distribution of opportunities within society (Sen, 1999).

Human relationships are seen, in and of themselves, valuable because they have a positive impact on material wellbeing outcomes (Pyles, 2008). Equality of opportunity is what matters most for wellbeing (Pressman and Summerfield, 2000). The capabilities approach shows that with greater freedom and choice, welfare may increase. Violence against women greatly affects the ability of women to achieve full functioning in the world. The patriarchal mechanisms for controlling women’s access to formal and informal networks repress their freedoms through fear, shame, and isolation.

3.3.2 Nussbaum’s Central Capabilities Approach

Nussbaum, an American philosopher and the current Ernst Freund Distinguished Service Professor of Law and Ethics at the University of Chicago, established central capabilities as an expansion of Sen’s capability approach. Nussbaum takes a universal approach that incorporates more explicitly feminists concerns by articulating ten central human capabilities. These include: life, bodily health; bodily integrity; senses, imagination, and thought; emotions; practical reason; affiliation; other species; play; and control over one’s environment (Nussbaum, 2005). Nussbaum’s central capabilities build on the notion that gross domestic product (GDP) and gross national product (GNP) are not satisfactory proxies for
wellbeing, particularly from the feminist standpoint and other facets need to be reviewed and studied to provide data on sustainable human development in terms of wellbeing and empowerment, agency, and gender equality. Sen also asserts that although it is important to promote and gauge economic security, it is not the evaluative approach needed to achieve sustainable human development. (Sen, 1999).

Violence against women represents a major “unfreedom” for women, affecting all of their other major capabilities and girls clearly has an adverse impact on women’s economic and overall well-being (Nussbaum, 2005; Pyles, 2006a, Raphael, 2000; Tolman and Rosen, 2001). Nussbaum asserts that no woman in the world is secure against violence. Even the threat of violence causes psychological harm that has the same crippling effects on women’s capabilities as actual bodily violence (Nussbaum, 2005).

3.3.3 The Ecological Model

The Ecological Model was developed in the 1970s by Urie Bronfenbrenner to look at the causal factors of DV operating at different levels and has since been revised to include the individual, family, and social levels as “an ecological model of human development.” The ecological approach to abuse conceptualized violence as a multifaceted phenomenon grounded in an interplay among personal, situational, and sociocultural factors (Heise, 1998). This research uses the Centers for Disease Control (CDC) four level social-ecological model to understand domestic violence (Dahlberg et al., 2002). This framework offers a comprehensive view of risk factors across four levels taken from —the individual, the relationship, the community, and the societal (CDC, 2015). The overlapping rings in the model illustrate how factors at one level influence factors at another level.

At the individual level, personal history and biological factors influence how individuals behave and increase their likelihood of becoming a victim or a perpetrator of violence. Among these factors are being a victim of child maltreatment, psychological or personality disorders, alcohol and/or substance abuse and a history of behaving aggressively or having experienced abuse.

The relationship level refers to the immediate context in which abuse may occur such as control over family resources, decision-making power, economic inequalities and high levels of controlling behaviors. Risk factors associated with the relationship level include marital status, age, household composition, education, religious beliefs, addiction, and depression, level of income and ethnicity.

The community level is extended to family, neighbors, neighborhoods, schools, work, and other social networks and seeks to identify the characteristics of these settings that are associated with becoming victims or perpetrators. Risk factors include restrictive marriage norms, honor killings, and lack of social
support from others due to the stigma associated with DV, stigma, religious institutions, inadequate police training, inadequate laws, and weak institutional support from both formal and informal networks.

**Societal** factors influence whether violence is encouraged or inhibited. These include economic and social policies that maintain socioeconomic inequalities between people, the availability of weapons, and social and cultural norms such as those around male dominance over women, parental dominance over children and cultural norms that endorse violence as an acceptable method to resolve conflicts.
3.3.4 The Duluth Model

The Domestic Abuse Intervention Project (DAIP) created the Power and Control Wheel in 1984 and was originally used with men who were perpetrators of domestic violence and also abuse victims. It was a means to describe domestic violence to not only the general public but also to social workers, legal advisors, victims, and offenders. It was the stories of battered women that led to the documentation of the most common abusive behavior tactics by their abusers (DAIP, 2011).

The power and control wheel is incorporated in the conceptual framework as a central focus point of the cycle of violence used against women to control them. Batterers use various forms of abuse to instill their power over their victims. This wheel shows not only the physical aspect, but the psychological aspect as well. This is important because often the physical acts of violence will leave traces, such as hitting and bruising, sexual assault, cutting, etc. In turn a victim’s social circle will become aware, bringing consequences to a batterer’s actions. The psychological abuse is a bit more surreptitious as it leaves no marks on the outside but cuts very deep psychologically. These veiled acts of violence are often unseen by the victim’s social circle but have an enormous impact in their ability to make the abused question her own levelheadedness and dramatically undermine her self-esteem. Acts of violence, whether inflicted
one time or many times serve a purpose to remind the abused there is threat of future violence always on the horizon. Physical violence coupled with psychological violence allows the abuser to take control of the woman’s life and circumstances (DAIP, 2011). These behaviors, when reinforced by one or more acts of physical violence, make up a larger system of abuse. Although physical acts may occur once or occasionally, they instill the threat of future violent attacks and allow the abuser to take control of the woman’s life and circumstances.

3.4 Summary

This research looks at the issue of DV through the lens sustainable development and women’s capabilities in New Orleans during a period of time that has been greatly affected by Hurricane Katrina in its newly formed economic growth in some sectors while others experience economic stagnation. The post-disaster situation in New Orleans left many women in vulnerable situations where they were torn from their support systems and ability to support their families. Women living in this environment had and still do have different experiences with DV, often negatively affected by their socio-economic status. Outcomes of this research will be available for policy makers as well as organizations committed to improving the lives of women everywhere and enabling governments to enact laws that will protect survivors of DV and create educational and support systems that can abate the prevalence of DV in New Orleans. This research also aims to shed light on the attitudes towards domestic violence and to educate not only women, but also men as well about the dire economic, physical and psychological consequences of DV.
The conceptual framework shows the ecological model’s four levels that influence the socio-economic conditions of women and illustrates factors that may contribute to DV in their lives. The power and control wheel represents the cycle of violence that can keep women in abusive relationships through coercive and manipulative techniques. Many women do not seek help at all but most will, at a minimum, seek informal networks out in times of crisis, such as friends and family. They may also go to more formal networks, such as the police, justice systems for restraining orders, or shelters. From these decisions to seek help they may develop the capabilities they need to become free from violence. However, there are many triggers that will push women back into the cycle of violence. The power and control wheel again becomes a major part of a woman’s perceptions of even her own ability to recognize DV and get the support needed. All of these processes are intertwined and the framework shows the cyclical nature of DV and VAW.
CHAPTER FOUR
RESEARCH DESIGN AND METHODOLOGY

This chapter presents the research design and methodology used in this dissertation. It includes the approach to research, data collection methods, consideration of reliability and validity as well as ethical concerns and limitations. Finally, data analysis methods are discussed along with the significance of the study.

4.1 Approach to Research

This research uses a case study methodology along with the social constructionism epistemology and a standpoint feminism theoretical perspective. Constructionism is a view of human knowledge that states truth and meaning do not exist in an external world but are created by the subject’s interactions with the world (D’Cruz and Jones, 2006). The specific foci of feminist standpoint theory are to identify cultural values and power dynamics that account for the subordination of girls and women and to highlight the distinct knowledge cultivated by experiences that are common to girls and women (Harding, 2004). The case study methodology along with the methodology of ethnography, or researcher “immersion” in the culture of the people to be studied, order to explore and gaining insight “into people values, beliefs, and behaviors” (Gottlieb, 47-48) are chosen because they allow the researcher to investigate a contemporary problem within its real-life context (Yin, 2009).

Feminist standpoint is a theoretical perspective about relations between the production of knowledge and practices of power (Harding, 2004). The underpinnings of this theory originate in the philosophy that thoughts commence from “the lives of marginalized peoples…[which] will generate illuminating critical questions that do not arise from thought that begins from dominant group lives (Harding, 2004). Advocates of a feminist standpoint assert that more objective accounts of the social world can be produced from the position of women in society. Since women operate both outside and inside formal economic systems, they have a particular position in society, which allows for a clearer, more accurate, view of the social world (Benton, 2001). With the emphasis put on women who are located in diverse systems of race, class, and nationality, feminist standpoint theory uses women’s unique experiences as a starting point to analyze social phenomenon (Harding, 2004). This research espouses the feminist standpoint and women’s perceptions and attitudes towards domestic violence (DV) and overall violence
against women (VAW) to understand coping strategies and help-seeking behaviors through empowerment, agency, and capability.

4.1.2 The Case Study Design

A single case study design is used in this research and is a appropriate method when a “how or why question is being asked about a contemporary set of events over which the investigator has little or no control” (Yin, 2009). A case study meets the conditions of this research with the contemporary set of events being the changing landscape of New Orleans since Hurricane Katrina in 2005, how women perceive DV and which factors influence their decision to seek or not seek help.

The justification for selecting a single case design relates to Yin’s rationale of the revelatory case, in which the researcher has access to a situation previously inaccessible to scientific observation and through which the descriptive information produced will be revelatory (Yin, 2009). Because Hurricane Katrina completely destroyed prior services relegated towards DV, mainly DV, and large portions of the city’s population were internally displaced, a true understanding of help-seeking behaviors has been underdocumented by very few sources. Many databases that had any information on DV statistics were destroyed due to flooding and fire during Hurricane Katrina and very few exist in 2015. Most statistics on DV in New Orleans come from the singular source of restraining orders and that information, along with NOPD data, are not available to the public due to privacy laws. The case study is used to represent an extreme and unique case and the descriptive information alone will be revelatory (Yin, 2009).

This approach is also relevant to examine an environment where the boundaries between the phenomenon of interest and context are not clearly defined (Yin, 2003). The unique strength of this approach is the ability to combine a variety of information sources including documentation and interviews (Yin, 2003). This investigation will include secondary data analysis, focus group, in-depth interviews of women (age 18-65) who have experienced DV, and social network interviews (SNIs). Social network interviews include civil society, government, and religious institutions related to women’s issues in New Orleans. The SNIs also present a picture of DV in New Orleans and the effects experienced after the disruption of Hurricane Katrina where formal and informal networks were forever changed in a very brief amount of time.

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6 The terms of domestic violence (DV) and violence against women (VAW) are used throughout this dissertation. Much of the academic research uses DV to depict violence between intimate partners only. Other uses of DV refer to violence within an entire family and VAW can encompass areas of sexual and physical assault by a non-intimate and intimate person. This dissertation’s interviews used the term DV because it is easily defined and recognizable by the participants. However, many women referred to past experiences of sexual assault by family and non-family members. The focus of this dissertation is violence between intimate partners, either married, living together, or dating but other experiences such as those aforementioned are considered a part of the participant’s perceptions and help-seeking behaviors. Both DV and DV are seen as part of the larger term VAW.
4.1.3 The Qualitative Approach

Qualitative inquiry has been utilized to understand how people make sense of the world and the meanings they construct as a result of their experiences (Merriam, 2009). Qualitative research consists of a set of interpretive, material practices that makes the world visible through a series of representations such as interviews, field notes, conversations, recordings and memos to the self (Denzin and Lincoln, 2005). Qualitative methods provide flexibility to answer types of questions that quantitative, or positivist research may not be able to answer, especially questions regarding meaning and context (Geertz, 1973). Because this research aims to develop a better understanding of help-seeking behaviors and perceptions among women experiencing DV, qualitative methods capture important concepts that may otherwise be limited to strict empirical analysis.

Qualitative methods of inquiry are appropriate because the ‘event focus’ of quantitative research may be too simplistic, ignoring or missing broader forces occurring over time that can affect a population (Bolin, 1998). The richness and depth of data that can be achieved through qualitative research is invaluable in providing an intimate portrait of women’s experiences and perceptions of DV.

4.1.4 Site Selection

All data collection was conducted in New Orleans, Louisiana. Several factors make this city a unique and interesting study site for this research. Since 2005 and the catastrophic event of Hurricane Katrina, New Orleans has gone through a transformative process that has affected anyone who was here before the storm and those who have arrived afterwards. The recovery process has created long-term challenges to New Orleanians, some of whom are still trying to rebuild their homes and even return to the city, ten years out. Many communities are disenfranchised, creating a sense of marginalization that leads to higher levels of crime, violence, and corruption that can in turn exacerbate stressful situations leading to DV, not to mention a feeling of long-term post-traumatic stress that is rarely acknowledged. Changing demographics and political leadership at the state and city levels have refocused many priorities, including how issues of DV are being perceived and handled. This can be seen in DV training sessions for the NOPD as well as the creation of the New Orleans Family Justice Center (NOFJC) in 2007. At the ten-year anniversary, post-Katrina, this study offers a unique opportunity to learn how the long-term effects have impacted women experiencing DV by looking at how they perceive DV in the years after the storm and how their perceptions of formal and informal networks have affected their help-seeking behaviors.
The period chosen, 2005-2015 provides a unique theoretical framework to study women’s perceptions of DV and help-seeking behaviors. Because the landscape has changed so much and Katrina was the pivotal reason for that change, this timeframe will be used. Studying the perceptions of DV during these ten years is important because it allows a better understanding of women’s experiences immediately following disasters and the years to come. This is an opportunity to look at how New Orleans was repositioned to look at old systems and antiquated ways of dealing with all issues of DV.

4.2 Data Collection

Using a case study approach the ethnographic methods of in-depth interviews, social network interviews, and focus groups, and secondary data were selected to study women’s overall views of DV. Triangulation is used to increase the validity of findings by deliberately seeking evidence from a wide range of sources and comparing findings from those difference sources (Patton, 2002).

Snowball sampling, or chain referral sampling, is a non-probability sampling technique where existing study subjects recruit future subjects from among their acquaintances. This type of sampling was used to locate women who were willing to discuss their experiences regarding DV and what led to their decisions to seek or not to seek help. The NOFJC was pivotal in the referral process. Many in-depth interviews came directly from NOFJC programs along with several professionals who were willing to take part in the social network interviews. Additional participants were located in various establishments/locations around the city. In turn these participants would refer others who agreed to take part in the study. Criteria for inclusion in the study included being between 18 and 65 years of age, presently living in Orleans Parish, and having had experiences with DV. Having lived in Orleans Parish during Hurricane Katrina was not a criterion to be included but those that did experience the effects of the storm were asked a separate set of questions relating to that specific period of time.

Social network interviews were conducted throughout New Orleans and included professionals from universities, government, business and religious organizations, public health, and social services. A list of social network interviews can be found in Table 4.2. These key players have helped to shape networks that influence how women cope with DV in their lives and were integral to this research. Secondary data was obtained from reports compiled by the City of New Orleans, NOFJC, city, state, and national databases, news reports and academic research.

4.2.1 Theory and Methods

Thematic analysis of the data uses an inductive approach; appropriate when prior knowledge regarding the phenomenon under investigation is limited or fragmented (Elo and Kynagas, 2008). In the inductive
approach, codes, categories, or themes are directly drawn from the data rather than created a priori. The process involves pinpointing, examining, and recording patterns or themes within the data (Braune and Clarke, 2006). Themes are patterns within the data that are important in the description of the phenomenon being researched (Daly, Kellehear, and Gliksman, 2007).

During the coding process, thematic analysis utilizes the manifest as well as latent content meaning of communications. Manifest content is the visible and surface content of the text whereas latent content allows the researcher to code the underlying meaning of the text (Graneheim and Lundman, 2004). Thematic analysis takes the concept of supporting assertions with data from grounded theory and is designed to construct theories that are grounded in the data themselves (Charmaz, 2006). This is iterative and reflexive in thematic analysis because the process consists of reading transcripts, identifying possible themes, comparing and contrasting themes, and building theoretical models. The reflexivity process can be described as the documenting close reflections of potential findings and implications of the research study.

Emerging themes describing the outcomes of coding are then analyzed and narrowed down to provide an overarching theme. Thematic analysis allows for themes to emerge from the data when categories are saturated and to look closely at iterative ideas, indigenous terms, metaphors and analogies; shifts in topic; and similarities and difference of participants’ linguistic expression while expressing what is in the data as well as what is not in the data (Braun and Clarke, 2006).

4.2.2 Interviews and Demographics of Participants

This dissertation looks at women’s perceptions of DV in New Orleans, Louisiana from 2005-2015 and attempts to ascertain why women choose to get help, what their experiences were, and if they did not get help, why not? What were the main barriers to abused women’s help-seeking?

The sample included fifteen in-depth interviews and one focus group of three women, aged 18-65, who have experienced DV in their lifetime and were currently living in New Orleans. Two methods were used to select participants. The first method involved random meetings with local residents who were made aware of the project and stated they were willing to be interviewed. The second was through the NOFJC where the Director agreed to place the researcher in contact with women who, in turn, agreed to be interviewed. From these initial interviews, participants recommended additional women who were willing to take part in the study. Women were selected using snowball sampling. The most common method of selection was simply through word of mouth. Women would discover the nature of the project and felt that sharing their stories would empower not only them but other victims of DV as well.
were no specific selection criteria for the ‘level’ of DV or ‘type’ of DV. Any participant, aged 18-65, who felt she had been a victim of DV and lived in Orleans Parish, was eligible to participate. Any woman who was willing to discuss her experiences with DV, was between the ages of 18-65 and living in New Orleans was eligible to participate.

All of the chosen participants were currently living in New Orleans and were either working within social services dealing with DV related issues or were survivors themselves. A total of 32 participants took part in this study. Of those participants, 29 were female and three were male. It is important to note the DV affects all types of people from different sexual orientations, including gays and lesbians, transgender persons, and bisexuals (GLTB). Men can be the victims of DV, but are not included in this study due to the focus on women as survivors. The social network interviews were open to men and women; however, the majority of interviews were female with 29 women and three men participating.

Leads for interviews came from contacts known from the researcher’s more than 20 years of living in New Orleans. A personal acquaintance, Jim Pate, Director of Habitat for Humanity, made a formal introduction to the Regional Training Institute Director of the New Orleans Family Justice Center, (NOFJC) Ms. Pam Albers that began an integral relationship with the center that was the cornerstone for most of the research done for this dissertation. From this point a list was compiled of persons of interest who may possibly be interested in taking part of the study. Institutional Review Board documents were then used to send out invitations to take part in the interview process. From the very first interviews snowball sampling was used where existing study subjects recruited future subjects from among their acquaintances.

4.2.2.1 In-depth Interviews

This research used the qualitative data acquired from fifteen participants and their experiences with DV. All fifteen women used strategies involving some type of self help and support from informal social networks available to them. Fourteen out of the fifteen participants used formal social networks. Each in-depth interview and focus group used open-ended questions as well as a brief questionnaire to obtain demographic data, information on perceptions of what women perceive as DV and how they chose to react to their situations through help-seeking behaviors. Each interview took approximately one to two hours and occurred in a private and secure area that was approved by the participant prior to the interview. Participants were encouraged to discuss any concerns they may have with the anonymity of the interview and their safety and were informed that any question could be declined and the interview could stop at any time. Each participant signed a consent form that had been previously approved by the Tulane Institutional Review Board.
Demographic information for the participants is shown in Table 4.1. The average age for participants was 43 years. Ethnicity of the participants varied with eight (53%) identifying themselves as Caucasian, five (33%) African American, one (7%) Latina, and one (7%) multi-racial. Thirteen women (86%) were divorced, one (7%) was never married and one (7%) was a widower. None were currently married. All were considered female headed households (FHH). Eleven (73%) of the women had children under the age of 18. No attempt was made to focus on one race in particular as the study used a random snowball sampling, or chain referral sampling. Every attempt was made to include as much diversity as possible in the study. Time constraints and the challenges in finding women willing to discuss, in detail, their experiences with DV posed a challenge in keeping a more uniform sample set.

Participants came from ten neighborhoods in New Orleans with the majority, five (33%), coming from Bywater. Two were from Lakeview (12%), one (7%) from Algiers Point, one (7%) from the Lower 9th Ward, one (7%) from Uptown, one (7%) from St. Claude, one (7%) from Broadmoor, one (7%) from Central City, and one (7%) from the Central Business District (CBD).

Five of the women had a master’s degree (33%) followed by four (26%) with a bachelor’s degree, three (20%) with a high school education, one (7%) with vocational training, one (7%) with some college, and one (7%) with an associate’s degree. It should be noted that the majority of in-depth interview participants had high levels of education. Women were asked what their education level was, at the time of the interview but 10 of the 15 women acquired their advanced degrees after they left their abusers. However, education levels have not been proven to specifically protect a person from DV and by no means can predict whether or not a person is safe from DV.

Only one participant was unemployed at the time of the interview (7%), two were unable to work (13%), one was working part-time (7%), and 11 were employed full time (73%). Incomes were all reported as totals before taxes in 2014. Income distribution ranged from five (33%) women earned under $10,000, three (20%) $10-20,000, six (40%) earned between $20-50,000, and one (7%) earned $50-75,000. None of the women reported zero income or an income over $75,000.

Of the fifteen women interviewed ten (67%) were in New Orleans during Hurricane Katrina and the other five (33%) moved here one year or more after the storm. Six (40%) of the interviews were referred by and conducted at the New Orleans Family Justice Center (NOFJC) and nine (60%) were identified outside of the NOFJC.
Table 4.1: In-Depth Interview and Focus Group Demographics

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<th>ID</th>
<th>Type</th>
<th>Age</th>
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<th>Ethnicity</th>
<th>Education Level</th>
<th>Employment</th>
<th>Income 2014 $USD</th>
<th>Housing Status (FHHs)</th>
<th>Marital Status</th>
<th>Child &lt;18</th>
<th>Religion</th>
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<td>Divorced</td>
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<td>Lifetime</td>
</tr>
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<td>9,000</td>
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<td>Lifetime</td>
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<td>1</td>
<td>Christian</td>
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<td>Yes</td>
<td>Lifetime</td>
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<td>Broadmoor</td>
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<td>Lifetime</td>
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<td>013</td>
<td>FG</td>
<td>50</td>
<td>Central City</td>
<td>African American</td>
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<td>Bachelor's</td>
<td>Full Time</td>
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<td>30,000</td>
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<td>Divorced</td>
<td>4</td>
<td>Christian</td>
<td>Yes</td>
<td>Yes</td>
<td>Lifetime</td>
</tr>
</tbody>
</table>

7 IDI – In-depth Interview; FG – Focus Group
Open-ended questions were used as well as a brief questionnaire regarding demographic data and specific experiences. The interview process informs a wide spectrum of research questions and obtains the qualitative description of perceptions and experience rather than measuring aspects of the experience (Yin, 2003). They also provide descriptive information regarding decision-making, triggers and motivational cues that provide the level of empowerment, agency, and capabilities of participants. Finally, these interviews examine the shortcomings of activities or programs to put forth recommendations or future directions (Yin, 2003). Sixteen women were interviewed using a brief demographic survey as well as open-ended questions that centered on their experiences and perceptions of DV.

4.2.2.2 Social Network Interviews

Social network interviews were conducted with experts and local leaders in Orleans Parish who have direct experience with DV. Several experts were directly involved with the rebuilding process after Hurricane Katrina and were able to discuss their experiences before and after the storm. Also, many of the people interviewed were also victims of DV themselves giving their interviews a rich texture in which they could relate to the current state of services offered to women in Orleans Parish. In total 16 social network interviews were conducted with 13 women and 3 men, recorded, and transcribed.
Table 4.2: Social Network Interviews

<table>
<thead>
<tr>
<th>Title</th>
<th>Organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Director, Regional Training Institute</td>
<td>New Orleans Family Justice Alliance</td>
</tr>
<tr>
<td>Immigration Attorney</td>
<td>Catholic Charities Immigration Services</td>
</tr>
<tr>
<td>Assistant Director</td>
<td>New Orleans Family Justice Center</td>
</tr>
<tr>
<td>Counselor for Handicapped Survivors</td>
<td>New Orleans Family Justice Center</td>
</tr>
<tr>
<td>Domestic Violence Victims Advocate</td>
<td>New Orleans Family Justice Center</td>
</tr>
<tr>
<td>Counselor</td>
<td>New Orleans Family Justice Center</td>
</tr>
<tr>
<td>Trauma Recovery Counselor</td>
<td>New Orleans Family Justice Center</td>
</tr>
<tr>
<td>Clinical Social Worker, Consultant</td>
<td>ACT IN FACT (Assertive Community Treatment for the Persistently Mentally Ill Population)</td>
</tr>
<tr>
<td>New Orleans Police Department Special Victims Section Domestic Violence</td>
<td>NOPD, New Orleans Family Justice Center</td>
</tr>
<tr>
<td>New Orleans Police Department Special Victims Section Domestic Violence</td>
<td>NOPD, New Orleans Family Justice Center</td>
</tr>
<tr>
<td>Social Worker, Trauma Recovery Services</td>
<td>New Orleans Family Justice Center</td>
</tr>
<tr>
<td>Director, Social Worker</td>
<td>Crescent House Healing and Empowerment Center</td>
</tr>
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<td>Executive Director</td>
<td>New Orleans Family Justice Center</td>
</tr>
<tr>
<td>Research Professor of Sociology</td>
<td>University of New Orleans</td>
</tr>
<tr>
<td>Church Leader</td>
<td>Lower Ninth Ward</td>
</tr>
<tr>
<td>Church Leader</td>
<td>Lower Ninth Ward</td>
</tr>
</tbody>
</table>

4.2.2.3 Focus Groups

One focus group with three women occurred for this research. They were asked to describe in detail their experiences regarding DV and why they sought help or did not seek help in the past (if applicable). They were also questioned about their perceptions, opinions, beliefs, and attitudes towards ideas, services, experiences, and concepts related to DV. Open-ended questions were asked in an interactive group setting where participants were free to talk about their experiences in a safe environment. The focus group took about one hour and consisted of three women who are currently living in New Orleans. All three were African American, ages 28, 29, and 50 years of age. Several attempts were made to instigate focus groups with the NOFJC. However, two previous attempts resulted in the participants backing out and not wanting to interview for this research. This was an ongoing issue when working with women who were
currently going through the NOFJC programs did not yet feel comfortable speaking about their personal experiences with DV.

4.2.2.4 Interview Summary Memos

Interviews and formal meetings were recorded and then transcribed. Through memoing, the researcher kept informal records that were used to reference ideas, hypotheses, and observations. Memoing is an instrument to capture the outflow of ideas, insights, and observations throughout the interview process in order to note themes that were emerging and interesting points that had not come out before in previous discussions (Creswell, 2009). This technique allowed the researcher to develop reflexivity, to make decisions with respect to data generation and research design, and to make connections between concrete details and abstract ideas (Creswell, 2009).

4.3 Considerations

4.3.1 Reliability

This qualitative research focuses on establishing a phenomenon in a credible manner, which aims to locate generative mechanisms that assist in determining inferences about real-life experiences (Bhaskar, 1978). Reliability is concerned with demonstrating that same results can be obtained by repeating the data collection procedure and gives the qualitative study the ability to “understand a situation that would otherwise be enigmatic or confusing” (Eisner, 1991, p. 58). While reliability is often relegated to the realm of quantitative studies its place is also important in qualitative research in that all processes and products of the research should have consistency (Heopfl, 1997). Protocol and procedures were documented and checked throughout the research process, contributing to the reliability by standardizing the investigation (Yin, 2009). Established standards were used in qualitative coding and ethnographic approaches.

4.3.2 Internal Validity

The credibility, or internal validity, of this research has been addressed and although this is a constructionist paradigm in that all knowledge is constructed, constructed knowledge is never “perfect” (Lincoln and Guba, 1985). As research was conducted the researcher sought to display the findings and transcribe data as accurately as possible. The adoption of well-established qualitative investigational methods has been used in this research and take into account the importance of incorporating correct operational measures for the concepts being studied (Yin, 2009). Triangulation increases the validity of findings through deliberately seeking evidence from a wide range of sources and comparing finding from
those difference sources to produce understanding. This technique was used to ensure that the account
given is rich, robust, comprehensive, and well developed. Triangulation of sources was done by
analyzing and comparing in-depth interviews, focus group data, research notes, and secondary data.
Thick descriptions are also employed as a way of achieving a type of external validity by extracting
meanings from structures that make up a cultures and explains not just the behavior, but its context as
well (Gertz, 1973).

4.3.3 External Validity: Transferability

External validity is concerned with the extent to which the findings of one study can be applied to other
situations (Merriam, 1998). The limited number of participants in this qualitative study made it
impossible to demonstrate that the findings are applicable to other situations and populations because all
observations are defined by the specific contexts in which they occur, (Erlandson, et al.). However,
qualitative research rarely is able to define and demystify a phenomenon such as DV in one singular study
but merely adds to the growing intellectual body of knowledge on that particular subject (Merriam, 1998).
Even though different investigations offer results that are not entirely consistent with one another, this
does not necessarily imply that one or more is untrustworthy but that they reflect multiple realities and an
appreciation can be gained of the reasons behind the variations (Shenton, 2004).

Several methods have been employed to show the transferability of this research such as delineating how
many organizations took part in the study and where they are located in Orleans Parish, any restrictions to
the type of people who contributed data, the number and length of data collection sessions, the data
collection methods that were employed, and the time period over which the data was collected. Thick
descriptions will also be used as a way of achieving describing a phenomenon in sufficient detail one
can begin to evaluate the extent to which the conclusions drawn are transferable to other times,
settings, situations, and people (Lincoln and Guba, 1985).

The data collected is important in that it can ‘transfer’ to other cultures around the world where women
experience DV. Based on the secondary data, in-depth interviews/focus group, social network interviews,
women’s perceptions of DV can be used to understand many of the coping strategies used by women,
regardless of where they are from and to bring to light what has worked here in New Orleans, ten years
past one of the United States’ deadliest and costliest natural disasters, Hurricane Katrina. Women’s
experiences not only reflect the difficulties they had directly after Hurricane Katrina, but also how their
lives changed due to the facilities that were made possible because of the ‘clean slate’ opportunity given
by the need to completely rebuild the mostly destroyed infrastructure of the city’s mental and public
health systems.
4.3.4 Ethical Considerations

Conducting research on DV or any issues of VAW brings with it its own unique challenges due to the sensitivity of the topic. Confidentiality is of the utmost importance as the safety and even the lives of women respondents and interviewer may be at risk (Ellsberg and Heise, 2001). The researcher properly addressed issues of safety, confidentiality, problems of disclosure, and the need to ensure adequate and informed consent. Institutional Review Board (IRB) for research with human subjects was approved as of September 2014 with a continuing review granted in September 2015. This includes all consent forms and request for interview letters.

Research design followed the WHO guidelines for research on DV and VAW: Putting Women First: Ethical and Safety Recommendations for Research on Domestic Violence Against Women (WHO, 2001) as well as the 2001 publication, Researching Violence Against Women: A Practical Guide for Researchers and Activists by Ellsberg and Heise in cooperation with WHO and the Program for Appropriate Technology in Health (PATH).

All interviews were conducted in a place recommended by the interviewee with a large majority of them taking place at the NOFJC. Confidentiality and anonymity have been ensured, including field notes, memos, and interview summaries and only the researcher has access to password-protected files that may have any identifying information. All interviews were given assigned numbers and no names of in-depth interviews were included in this dissertation. Respondents were able to refuse any questions or to drop out if they wished to discontinue at any time.

4.3.5 Limitations

Limitations to this research arise due to the complex nature of the phenomenon being researched and include the difficulty of interviewing women on extremely sensitive topics such as DV. The first limitation is that the sample size is relatively small, which limits the comprehensive generalizability to the overall society in New Orleans and may lead to selection bias but all data collection continued until saturation occurred and no new or relevant information emerged. The sample included mainly women working full time, divorced and not remarried. The median age of in-depth interviewees was 42 so much older participants are not included. Also, women high on the socio-economic scale were located but did not want to take part in the survey. Finding representation from all socioeconomic strata proved to be difficult given the nature of lengthy qualitative methods such as focus groups and interviews. Many participants were recruited from the NOFJC, whose services were rarely used by women from upper income levels as they often have access to their own resources. Second, the data acquired was reliant on
women’s self-reported responses about DV. Whether intentional or unintentional, the systematic error of recall bias by study participants is possible, particularly in interviews and questionnaires, potentially leading to differential misclassification of various types of exposure (Kopec and Esdalie, 1990). Obtaining reliable data on this type of violence is a serpentine task, because the methodological issues derived from the very nature of the phenomenon, such as the private intimate context in which this violence often takes place, mean the problem cannot be directly observed.

The use of snowball, or chain referral sampling, may also be considered a study limitation because it is a non-probability sampling technique where existing participants refer others to take part in the study, usually people who are their acquaintances and come from similar socioeconomic backgrounds. Even so, this sampling technique was selected because of its power to access difficult to reach populations because of the highly sensitive nature of DV due to stigma and mistrust. This technique allows the researcher to make estimates about the social network connecting hidden populations.

At the same time, this type of sampling is subject to biases that may create a less diverse sample population. This limitation is exemplified by the preponderance of participants with high levels of education but it must also be noted that the majority (ten of the fifteen) of women went on to get their educations after they left their abusers. More importantly, it should be noted that education levels do not necessarily protect a person from DV and goes on to show that DV can affect all social and economic classes.

Another methodological constraint is that there is no standard definition of physical, sexual, psychological violence; therefore, sometimes it was difficult to get precise information because the participants perceived and conceived the construction of violence according to their own understanding and cultural background. Many women never even felt they were experiencing DV until they were so physically and mentally broken they had no other choice than to acknowledge there was a problem.

The lack of information that is included by perpetrators (males) themselves also constrains the methodology. This is an important area of study when determining the causality of DV but in the interest of narrowing the focus of this study, only women were included in the in-depth interviews. Three men were interviewed in the social network interviews. Several recommendations will be given in a later chapter outlining suggestions that promote further research that is inclusive of male perpetrators. It is in this capacity that the researcher feels more study is needed to fully understand the complete picture of DV.
Finally, it is important to include the researcher’s own experience with DV and possible biases from personal attitudes and judgments that may have prevailed during the interview process. While all precautions were taken to bracket these personal experiences, it is also regarded as strengthening the development of the data and interpretation of data. Women were often informed of the researcher’s own personal history with DV and felt more comfortable describing their own experiences which opened the conversation to a level of mutual respect and trust. Understanding the process of help-seeking and perceptions of DV by the researcher herself adds a deep dimension to this research, in the context that these experiences add to the value, human connection, respect and women’s empowerment, all in line with the feminist standpoint theory embraced by this research (Taylor, 1998).

4.4 Data Analysis

All interviews were recorded and then transcribed using Microsoft word. The researcher transcribed all data. Coding and sorting of the data was done using QSR NVivo 10.2.1 Software. Coded documents included are interview transcriptions, field notes, and secondary data.

4.4.1 Thematic Analysis

Coding followed a six-step systematic procedure. The first step of analysis was to prepare and organize the data by transcribing them and achieving a high level a familiarity with the data. Initial open codes were generated and documentation done as to where and how patterns occurred. Memos were also created to remark why codes were created, re-named, and combined due to their redundancy (saturation). Step three used the iterative process to combine all codes into overarching themes that accurately depict the data. Certain codes became major topics, like ‘New Orleans Police’ or ‘agency’ while others were grouped under larger topics and became a subset of that topic. Examples include ‘immigration issues’ being included under ‘legal challenges’. Step four looks at how the themes support the data and the overarching theoretical perspective. Step five defines each them and the aspects of the data being captured while noting what is interesting about each one. Finally, in step six the themes are presented and discussed as to why they are important contributions to the research.

4.4.2 Significance of the Study

This study is significant in that it will obtain rich contextual data regarding DV. It will enable the formation of policies and programs on a city and state level to improve and elaborate new methods of understanding why DV occurs, who is affected, and how to create legal and social systems that empower victims to achieve their full level of capability and freedom. Secondly, this research will provide reliable data for better advocacy of human rights and women’s rights while contributing to the theory and
practices that focus on DV in New Orleans and around the world. Findings will contribute to the body of knowledge of DV in public health, post-disaster planning research and international development contexts.

4.4.3 Research Questions

The two overarching research questions are:

Research Question 1: How do women in post-Katrina New Orleans perceive domestic violence?

Research Question 2: What factors are the significant barriers to help-seeking in post-Katrina New Orleans?

In looking at DV in post-Katrina New Orleans this study asks the questions of how women perceive DV and how do they decide to seek help or not. It is important to understand the factors that exist within a society as well as within the victim herself that become barriers to help-seeking. Perceptions also relates to the ecological framework that takes into account the larger aspects involved with perceptions and help-seeking behaviors. These include four levels: individual, relationship, community, and societal levels. As mentioned in chapter three an ecological perspective provides a useful integrating framework for understanding and addressing DV, which is viewed as the result of interacting variables at various levels of social systems (Eisikovits and Edleson 1989, and Saunders 2001). The individual level includes child socialization history, past experiences, personal characteristics and perceptions that individuals bring into their social context. The micro-system/relationship level represents the interpersonal context, in which the abuse occurs. The eco-system/community level refers to the social systems and structures impinging on the individual and family such as culture and political systems. The macro-system/societal level involves the larger background influence of social norms, values and history (Dutton 1995d, Heise 1998, and Dasgupta 2002).

Analysis also stemmed from the literature review conducted prior to data collection. This body of work focused on the possible linkages to DV in New Orleans as it occurs in the post-disaster context. These factors were important to understand in order to see what themes stood out from the literature, and conversely, which ones agreed. All of the information compiled in the literature review was at some point discussed by participants, however the focus of the analysis are presented in two major chapters, ‘social entrapment’ and ‘economic entrapment’.
CHAPTER FIVE
FEMALE SOCIAL VULNERABILITY AND HURRICANE KATRINA

“It is not a woman acting alone that produces her safety, but rather her social context that increases or decrease her safety” - Pagelow, 1984.

Hurricane Katrina made landfall on August 29, 2005 as a category three on the Saffir-Simpson scale leaving a trail of destruction, displacing over a million people, and causing the death of approximately 1,833 people along the United Stated Gulf Coast (Plyer, 2015). New Orleans generally escaped the brunt of the storm until levee failures caused massive flooding of approximately 80% of Orleans Parish in nearly twenty feet of water in some places (Brundard, Namulanda, and Ratard, 2008). Major planning failures and governmental red tape left thousands stranded in the city and floodwaters for days. In some areas the floodwaters did not subside for weeks. During times of disaster women may become more vulnerable to economic insecurity and diminished social resources. If they are already in a stressed and violent relationship, the added tension of a crisis can exacerbate levels of domestic violence (DV).

The massive societal shutdown and chaos caused by Katrina’s devastation exposed gaps in security for women who were either trapped in their homes or had fled to shelters. Other marginalized groups also suffered including the poor, elderly, disabled, and children, many of whom are tended to by women (Enarson, 1998). Social inequalities, the breakup of formal and informal networks, health challenges, and psychological stresses often exacerbated the reality of deep economic insecurity and made the experiences for women challenging (Jenkins and Phillips, 2008). These factors played a crucial role in how women dealt with the evacuation process, government assistance, and their ability to seek help and refuge from violence.

This chapter begins with a discussion of the overall impact of Hurricane Katrina, particularly in Orleans Parish, including the death toll and population change that occurred afterwards. Second, women’s social vulnerabilities are explored by looking at gender roles during disasters and poverty and decreased economic capability as important factors in women’s ability to leave abusive relationships, secure housing and employment, and take care of their families. Third, DV and diminished social support systems will

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8 The Saffir–Simpson hurricane wind scale (SSHWS) classifies hurricanes – Western-Hemisphere tropical cyclones that exceed the intensities of tropical depressions and tropical storms into five categories distinguished by the intensities of their sustained winds. To be classified as a hurricane, a tropical cyclone must have maximum sustained winds of at least 74 mph (33 m/s; 64 km/h; 119 km/h) (Category 1). The highest classification in the scale, Category 5 is reserved for storms with winds exceeding 156 mph (70 m/s; 136 km; 251 km/h) (National Hurricane Center, 2015).
be discussed as well as variables that impede or enable women’s vulnerability, including the heightened
susceptibleness of young and adolescent girls to sexual violence.

5.1 The Impact of Hurricane Katrina

The Hurricane Katrina Disaster Mortuary Operational Response Team (DMORT) database and death
certificates collected through Louisiana Vital Statistics and out-of-state coroner’s offices show that 971
Katrina-related deaths occurred in Louisiana and at least 15 deaths occurred among Louisiana Katrina
evacuees in other states for a total of 986 victims. The major causes of death include: drowning (40%),
injury and trauma (25%), heart conditions (11%), other illnesses such as diabetes, mellitus, chronic
obstructive pulmonary disease, septicemia, and cancer (5%), and unspecified, Katrina-related (19%).
Nearly half of the victims were over the age of 75 and fewer than 10% were younger than 45 years old.
Deaths of African American people were nine percentage points higher than those of Caucasians and
significantly higher than Hispanics/Latinos. Finally, male and female death rates were almost equal at
53% and 47% respectively.

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9 DMORT is a federal response team that provides assistance with mortuary activities during disaster situations. Out-of-state death certificates of Louisiana residents during the period of August 27 to October 1, 2005, and others that state coroners deemed worth consideration for potential association with Hurricane Katrina were forwarded to the Louisiana coroner’s office from coroners’ offices in 26 states and the District of Columbia.
Table 5.1: Deaths due to Hurricane Katrina: Demographic Data for Katrina-Related Deaths: Louisiana, 2005

<table>
<thead>
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<th>Characteristic</th>
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</tr>
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</tr>
<tr>
<td>Male</td>
<td>512 (53)</td>
</tr>
<tr>
<td>Female</td>
<td>455 (47)</td>
</tr>
<tr>
<td><strong>Race/ethnicity</strong></td>
<td></td>
</tr>
<tr>
<td>African American</td>
<td>498 (51)</td>
</tr>
<tr>
<td>Caucasian</td>
<td>403 (42)</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>18 (2)</td>
</tr>
<tr>
<td><strong>Age, years</strong></td>
<td></td>
</tr>
<tr>
<td>&lt;18</td>
<td>20 (2)</td>
</tr>
<tr>
<td>18-29</td>
<td>18 (2)</td>
</tr>
<tr>
<td>30-44</td>
<td>47 (5)</td>
</tr>
<tr>
<td>45-54</td>
<td>119 (12)</td>
</tr>
<tr>
<td>55-64</td>
<td>137 (14)</td>
</tr>
<tr>
<td>65-74</td>
<td>136 (14)</td>
</tr>
<tr>
<td>&gt; 75</td>
<td>472 (49)</td>
</tr>
</tbody>
</table>


Hurricane Katrina displaced more than a million people in the Gulf Coast region (CRS, 2005). While some evacuees were able to return home within days of the storm many were displaced for a much longer time, particularly those who had lost their homes due to flooding or wind damage. One month after the storm 600,000 people were still displaced (CRS, 2005). At their peak, hurricane evacuee shelters housed 273,000 people and, later, FEMA trailers housed at least 114,000 households (Plyer, 2015). Katrina damaged more than a million housing units in the Gulf Coast region with approximately half located in Louisiana. In New Orleans, 134,000 housing units, 70% of all occupied units, suffered damage from Hurricane Katrina and the subsequent flooding. Total damages from Hurricane Katrina was $135 billion\(^{11}\) (Plyer, 2015).

The city of New Orleans experienced a massive cut in its population due to the extensive damage done to homes and businesses. The population of New Orleans fell from 455,188 in April, 2005 to an estimated 230,172 in July 2006, a decrease of 254,502 people and a loss of over half of the city’s population. By

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\(^{10}\) Missing values: sex (n=4), race (n=42), age (n=22);

\(^{11}\) Damages include all financial losses directly attributable to Katrina (damage to buildings, infrastructure, vehicles, etc., irrespective of whether insured or not). This includes business interruption directly due to building damage, but does not include indirect financial detriments such as loss of earnings by down-stream suppliers, shortfall in GDP, nor non-economic losses. All figures are presented in 2005 dollars.
July of 2014, the population had increased to 384,320, but was still only 79% of what it was in 2000 (Plyer, 2015).

Figure 5.1: City of New Orleans Population 2005-2014

Disasters create a devastating force of environmental and psychological trauma with a total disregard for class, gender, or economic status. In the case of Katrina, it was the poorest who were hit the hardest as they did not have the resources to evacuate to higher and safer ground. This proved fatal to some of the city’s most vulnerable populations. When survivors’ lives are upturned by such calamitous events the main reaction is to be resilient and to rebuild. However, not all members of a society devastated by disaster have the same opportunities presented to them when dealing with the aftermath. Differences in gender, race/ethnicity, and class status have been shown to be important factors in women’s disaster experiences (Laska, Morrow, Willinger, and Mock, 2008). Many women face social vulnerabilities and disadvantages before great times of crisis and because of this they are often the most disenfranchised after disasters (Chew and Ramdas, 2005; Enarson, 1998; Enarson, 2006b; Oxfam, 2005; Tutenjevic, 2003; WHO, 2005.

5.2 Women’s Social Vulnerabilities

Disasters can amplify women’s social vulnerabilities through antiquated perceptions of gender roles, poverty and decreased economic capability, and diminished social support systems that in turn may increase the likelihood of domestic violence. Men and women tend to have very different experiences in the face of natural disasters due to women’s social subjugation which places them at severe risk under “normal” circumstances. This is exacerbated during times of crisis and natural disaster when women lack access to information, transportation, social networks or spheres of influence (Jones-DeWeever, 2008). While many women do not experience the same lack of resources or support as others might, it is clear
that those who are already living in what is considered to be ‘socially vulnerable’ circumstances will most certainly find the recovery process to be tenuous at best, with the odds overwhelmingly stacked against them.

\textit{5.2.1 Gender Roles and Disasters}

Gender roles play an important part in understanding decisions made by men and women during disasters. In most cases women are seen as the primary care-givers to children and elders as well as the homemakers who are charged with cooking and cleaning. Men are seen as the providers and protectors and are often the liaison between the home and the public sphere (Laska, Morrow, Willinger, and Mock, 2008). Research demonstrates that role-conditioned gender differences occur at all stages of disaster response (Hoffman, 1998). Even if couples do not follow traditional gender roles in their daily lives, they tend to revert to them in times of crisis as was shown by research conducted after Hurricane Andrew (Dash, Hearn-Morrow, Mainster, Cunningham, 2007).

During impending disasters or crises women tend to be more responsive to what the risks and consequences are and are more apt to get out of harm’s way but may be hindered due to their lack of independence and financial resources. Studies have shown that women’s and men’s ideas about their work and family responsibilities have deep impacts on their perceptions of risk and desire to evacuate potentially dangerous situations (Bateman and Edwards, 2002). Men and women also respond to loss in different ways where the men have a deep sense that they have not adequately protected their families and these feelings are exacerbated in their inabilities to provide in the aftermath (Haney, Elliott, and Fussell, 2007). Also, women who are responsible for their family members, either immediate or extended may also be placed at greater risk of injury an even death because they may place the well-being of others ahead of themselves (Enarson and Phillips, 2008). The complexities of the human condition and relationships are highlighted when the stress and fears take hold as a result of disasters like Hurricane Katrina. Perhaps the most devastating scenario for women is to be faced with the responsibility of protecting not only themselves but their families and not having the economic means to do so.

\textit{5.2.2 Poverty and Decreased Economic Capabilities}

Poverty and decreased economic capabilities can be a powerful determinant of whether or not women will one, survive the catastrophic event, and two, whether or not they will have the ability to bring their lives back to normal and if so, the amount of time it will take to do so (Laska, Morrow, Willinger, and Mock, 2008). The United States Census Bureau uses the \textit{poverty threshold} by which the federal government estimates the point below which a household of a given size has pre-tax cash income insufficient to meet
minimal food and other basic needs (US Census Bureau, 2015). Following the Office of Management
and Budget's (OMB) Statistical Policy Directive 14, the Census Bureau uses a set of money income
thresholds that vary by family size and composition to determine who is in poverty. If a family's total
income is less than the family's threshold, then that family and every individual in it is considered in
poverty. The official poverty thresholds do not vary geographically, but they are updated for inflation
using Consumer Price Index (CPI-U). The official poverty definition uses money income before taxes and
does not include capital gains or noncash benefits (such as public housing, Medicaid, and food stamps
(U.S. Census Bureau 2015).\textsuperscript{12}

Table 5.2: 2016 Health and Human Services (HHS) Poverty Guidelines

<table>
<thead>
<tr>
<th>Persons in Family/Household</th>
<th>Poverty Guideline (USD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>11,880</td>
</tr>
<tr>
<td>2</td>
<td>16,020</td>
</tr>
<tr>
<td>3</td>
<td>20,160</td>
</tr>
<tr>
<td>4</td>
<td>24,300</td>
</tr>
<tr>
<td>5</td>
<td>28,440</td>
</tr>
<tr>
<td>6</td>
<td>32,580</td>
</tr>
<tr>
<td>7</td>
<td>36,730</td>
</tr>
<tr>
<td>8</td>
<td>40,890</td>
</tr>
</tbody>
</table>

For families/households with more than 8 persons, add $4,160 for each additional person.


\textsuperscript{12} Includes earnings, unemployment compensation, workers' compensation, Social Security, Supplemental Security Income, public assistance, veterans' payments, survivor benefits, pension or retirement income, interest, dividends, rents, royalties, income from estates, trusts, educational assistance, alimony, child support, assistance from outside the household, and other miscellaneous sources. Also noncash benefits (such as food stamps and housing subsidies) do not count. All estimates are taken before taxes, excludes capital gains or losses and if a person lives with a family, add up the income of all family members. (Non-relatives, such as housemates, do not count.) (U.S. Census Bureau, 2015)

<table>
<thead>
<tr>
<th>Indicator</th>
<th>New Orleans</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population below poverty level</td>
<td>24.5</td>
<td>13.3</td>
</tr>
<tr>
<td>Families below poverty level</td>
<td>21.8</td>
<td>10.2</td>
</tr>
<tr>
<td>Population over 65 years below poverty level</td>
<td>16.5</td>
<td>9.9</td>
</tr>
<tr>
<td>Population under 18 years below poverty level</td>
<td>38.1</td>
<td>18.5</td>
</tr>
</tbody>
</table>

Source: U.S. Census Bureau American Community Survey (2005)

As shown in table 5.3, in 2005 New Orleans had twice the national average of its population of 437,186 people living below the poverty line at 24.5% and 13.3% respectively (U.S. Census Bureau American Community Survey, 2005). Families in New Orleans were not faring much better with 21.8% living below the poverty line, double the national average at 10.2%. Elderly persons in poverty were significantly higher at 16.5% as compared to the national average of 9.9%. Finally, the number of children under the age of 18 living below the poverty level was also significantly higher in New Orleans at 38.1% as compared to 18.5% nationally (U.S. Census Bureau American Community Survey, 2005).

Table 5.4 shows that in 2004 New Orleanians had a much lower median household income ($31,369) than the national average ($44,684). The metro area, made up of 1,316,510 people, shows that they were much closer to the national average but still lower ($37,246) (U.S. Census Bureau, American Community Survey 2004). There was also a large median household income gap in female-headed households (FHH) in the United States ($31,374). The New Orleans Metro Area ($25,978) and the city of New Orleans ($24,494) fared about the same but both were much lower median household incomes at the time (U.S. Census Bureau, American Community Survey 2004).

African American women who worked full-time in New Orleans made substantially less on average ($20,000) than Caucasian women ($36,500) in the city. The gap decreased, but was still significant, in the New Orleans metro area where African American women earned ($21,000) less than their Caucasian

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counterparts ($29,000). (United States Census Bureau, 2004). Women, particularly African American women, even in poverty stricken areas like New Orleans were still lagging behind national and city averages showcasing societal norms that marginalize women regarding equal pay, not only by gender but by race as well, which in turn has a domino effect by stifling their abilities to acquire needed resources to take care of themselves and their families.
Table 5.4: Demographics: Population and Income

<table>
<thead>
<tr>
<th></th>
<th>United States</th>
<th>New Orleans Metro</th>
<th>New Orleans</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Population</td>
<td>285,691,501</td>
<td>1,313,694</td>
<td>444,515</td>
</tr>
<tr>
<td>Number of women 18 and older</td>
<td>145,908,683</td>
<td>687,820</td>
<td>237,887</td>
</tr>
<tr>
<td>Median household income (2004 dollars)</td>
<td>$44,684</td>
<td>$37,246</td>
<td>$31,369</td>
</tr>
<tr>
<td>Female-headed household median income</td>
<td>$31,374</td>
<td>$25,978</td>
<td>$24,494</td>
</tr>
<tr>
<td>Female Population</td>
<td>51.1</td>
<td>52.4</td>
<td>53.5</td>
</tr>
<tr>
<td>Caucasian</td>
<td>34.4</td>
<td>27.2</td>
<td>12.9</td>
</tr>
<tr>
<td>African American</td>
<td>6.5</td>
<td>20.9</td>
<td>37.5</td>
</tr>
<tr>
<td>Percent male population</td>
<td>48.9</td>
<td>47.6</td>
<td>46.5</td>
</tr>
<tr>
<td>Caucasian</td>
<td>33</td>
<td>26.2</td>
<td>12.9</td>
</tr>
<tr>
<td>African American</td>
<td>5.6</td>
<td>17.2</td>
<td>30.4</td>
</tr>
</tbody>
</table>


In 2005, 40.6% of households in pre-Katrina New Orleans were FHHs, with no spouse present compared to 18.9% nationwide.Nearly 42% of these FHHs were living in poverty; 97.2% of which were African American. Among the 72,873 non-family households in New Orleans in 2005, 46.3% were comprised of a woman living alone, more than a third (35.5%) of whom were over 65 years of age. A small number of households (478) were comprised of a female householder with a female partner. Taken together, FHHs made up 46.3% of all households in the city and many of those were in poverty or headed by a woman (U.S. Census Bureau American Community Survey, 2005b; Laska, Morrow, Willinger, and Mock, 2008).

At the time of Hurricane Katrina nearly 26% of the women residing in New Orleans lived below the poverty line compared to 20% of men (Enarson, 2006a; Gault, Hartmann, Jones-DeWeever, M. Werschkul, and Williams, 2005). Approximately 41% of FHHs in Louisiana were living below the poverty line and of those 35% were African American. Compounding matters is the rising costs of
housing and rental properties in Orleans Parish. Because a very small percentage of the city did not flood during Hurricane Katrina there was a diminished availability of affordable housing and rents and housing costs skyrocketed. Some rental units went up 46% from their pre-Katrina value (Greater New Orleans Community Data Center, 2007). The median rental costs went from $698 in 2004 to $925 in 2013 (Plyer, 2015).

Female-headed households with children also experienced high rates of poverty as data from 2005 shows that approximately 41% of FHHs with children in pre-Katrina New Orleans were living below the poverty line, roughly comparable to the national average at 38%, but far higher than married couple families living below the poverty line at 10% (Gault, 2005). In NOLA metro area approximately 39% of FHHs with children were living below the poverty line, compared to 4.5% of married couple families. Louisiana had one of the highest populations of African American women living below the poverty line at 35% (Gault, 2005). The lack of affordable housing also leaves women in vulnerable states where they may not be able to sustain the costs of leaving their abusive partners.

Moreover, many women could not receive government Federal Emergency Management Agency (FEMA) funds that became available shortly after Hurricane Katrina due to the ambiguities in the government’s ‘definition of household’ which was limited to only those who lived together pre-disaster. The definition does not recognize the realities of diverse households that may not share familial relationships such as roommates and the effects of a disaster on shaping the post-disaster residence. “FEMA’s aid model unfairly keeps individuals connected to household they may no longer want to be part of and tied to a head of household that may not have their best interests in mind.” (FEMA, 2008). Lessons learned by the agency reveal that individuals should have the ability to become their own head of household if they can demonstrate a change in their household, and show that their aid will go toward a distinct need that is not already being met through other relief funding. FEMA now defines ‘head of household’ standards similar to the tax code (FEMA, 2008). Because of the lack of funding and antiquated methods of determining head of household many women remained with their partners because they were not considered eligible for funds on their own. Many of the resources were designed for the “head of household” and assumed the head to be male, thereby placing control and decision-making power in the man’s hands. The caveat was that funds only were appropriated by household, not by the individual.

Another important key issue that many women experience is their inability to acquire transportation. This can often be a major reason to be unable to evacuate prior to a disaster, obtain work as an evacuee, and to return home. The 2005 Census reported that nearly 15% of women workers in New Orleans stated they
had no vehicle available compared to just 4.3% nationally (United States Census Bureau American Community Survey, 2005a). A lack of transportation can be a serious vulnerability, before, during, and after a disaster. FEMA has since addressed the need to provide assistance to those who either lost their cars in a disaster or are in need of transportation as internally displaced persons (IDPs). Again, the ambiguity of providing the appropriate definition to head of household made it hard for women to obtain transportation assistance due to their inability to register as head of household (Jones-DeWeever, 2008). Because work may be hard to find it is usually the men who will leave the home looking for employment and will usually have control of limited resources such as transportation. This exodus of men often leaves a high percentage of FHHs.

5.2.3 Young Girls and Disaster

It is important to note that young girls are also at risk and their experiences after disasters are also related to attitudes to women and girls in the wider community and the political, economic, social, and cultural context. Very young girls (10-14) are at risk of sexual exploitation and abuse because of their dependence, lack of power, and their lack of participation in decision-making processes. Many children become separated from their parents or guardians which also creates psychological trauma and vulnerability. Girls with special needs may face difficulties accessing services because of stigma, prejudice, culture, language, and physical or mental limitations. Decreased medical facilities also pose problems for young girls who may be pregnant or have serious illnesses (Plan International, 2013).

In Haiti, Human Rights Watch found that many women and girls did not ask for help following a rape after the 2010 earthquake because they were ashamed to report what had happened. Disaster can also lead to higher rates of child marriages. Research in Somaliland, Bangladesh, and Niger found that child marriage is often perceived by families’ as a protective measure and used as a community response to crisis (World Vision, 2013). Disasters often drive already impoverished girls further into poverty which can even push them into prostitution because they have no other alternatives to feed themselves or even family members. This vulnerability is important to remember in the disaster planning phases and subsequent response mechanisms. Information on rapes and particularly child abuse/sexual assault after the Hurricane have been difficult to locate and are not included in this research, as young girls are not the focus of this study. However, the researcher feels it is important to mention the importance of including not only young girls, but children, in general, in disaster planning and response as they face great vulnerabilities and should not be left out of the equation of addressing the needs of the entire affected and vulnerable population.

5.3 Domestic Violence and Diminished Social Support Systems
Domestic violence (DV) against women tends to increase in periods of disaster as measured by requests for services and counseling from battered women’s shelters and police protective orders from abusers (Laska, Morrow, Willinger, and Mock, 2008; Enarson and Phillips, 2008). It is difficult to definitively state that the incidence of DV went up immediately following Hurricane Katrina because the city systems and social services were severely debilitated if not completely shut down (NOFJC, 2014; Laska and Morrow, 2006). At least seven DV shelters, transitional housing programs, and outreach organizations were impacted by the storm’s severity (NCADV, 2013). Those who were in New Orleans working as first responders with the Red Cross, Crescent House, NOPD, and Catholic Charities (as well as several who are now working at the NOFJC) stated they encountered many women who had no place to go after the storm and they saw an increased need for domestic violence counseling and economic support in the immediate aftermath. A small number of studies, supplemented by anecdotal evidence, indicate that DV increases (along with sexual assault) following disasters. In 2009, Anastario, Shenhab, and Lawry published a study entitled *Increased Gender-based Violence Among Women Internally Displaced in Mississippi 2 Year Post-Hurricane Katrina*. According to the authors who interviewed 420 displaced women living in 50 travel trailer parks located in Mississippi, DV increased dramatically during 2006 but waned in 2007.

The minimal services that were still available in New Orleans immediately following the storm saw a great demand to help women who were either already in shelters, needed shelter, or needed to get away from their abusers and/or to families who had already left the city. In the months following Hurricane Katrina DV hotlines saw increases in calls and request for services, either legal, medical, or emotional. This was particularly intense around the times of the holidays, including New Year’s and Mardi Gras 2006 (NOFJC, 2015). Again, it is often stated by these same social network interviewees that even though the statistical numbers may have shown decreases in DV it was only because they had no way of appropriately recording them. Many social workers interviewed for this research would simply state that the demand did not change but that in reality the need was greater than ever because the “veil of secrecy” that may have concealed many acts of violence against women was summarily lifted to expose previously hidden or ignored inequalities (Jenkins and Phillips, 2008).

Many women left their abusive relationships by seeking protection from shelters only to find themselves displaced from the shelter in the aftermath of the storm without money or transportation which often would lead them right back to their abusers (NCADV, 2013). Restricted communication, isolation and diminished social safety nets (formal and informal networks) may compel battered women to return to abusive partners. Many women fear that while they are in temporary housing or emergency shelters they are also targets for sexual abuse and battery, either by strangers or by their partners (NCADV, 2013).
Many disaster organization personnel are not adequately trained to deal with DV issues and lack the skills or resources to provide emotional counseling (Phillips and Morrow, 2008). Disaster managers, planners, and relevant organizations in communities are often lacking in providing detailed and well thought out plans on how they are going to deal with heightened needs of domestic violence victims and their families (Wilson, Phillips, and Neal, 1999). Not doing so is likely to exacerbate women’s vulnerability and communities need to be equipped with a post-disaster plan to respond to domestic violence, even in the face of disaster (Neal and Phillips, 1990; Morrow, 1995).

Law enforcement officials are often the first line of defense women use against DV (Dutton, 1998) and for many years after Hurricane Katrina the criminal justice system was still in recovery mode. Before the storm the justice system was difficult to navigate but after the storm it became even more fragmented and complicated (NOFJC, 2014). Because the legal system was so badly damaged custody proceedings and arrangements could sometimes become a nightmare. The storm occurred on a weekend and many children were with their fathers on regularly scheduled visitations (Jenkins and Phillips, 2008). Women would have to re-engage with their abusive ex-partners and take part in a complicated legal process to regain custody of their children (if they were, at the time of the storm, with their father).

Medical services in New Orleans historically (pre-Katrina) provided by private physicians and public health services for the uninsured, mainly Charity Hospital, were completely knocked out of commission (Jenkins and Phillips, 2008). The lack of facilities and medical services made women more vulnerable in many ways as they did not have adequate physical and psychological treatment facilities, nor did their families. Drug abuse and alcoholism have been shown to escalate in the stressful aftermath of a catastrophic event and often the increased use of controlled substances only magnifies already tense emotional and physical relationships, often leading to violence and death. Lack of sanitation and medical services jeopardized the physical and emotional health of pregnant women who may have also lost homes, livelihoods, and family in the disaster. In the US studies generally find that women express more mental health problems while men are more likely to suffer the effects of substance abuse (Van Willigen, 2001).

5.4 Summary

Many women faced difficult living conditions before Hurricane Katrina but women (particularly those experiencing DV) and their children were more vulnerable than ever in the wake of this enormous disaster. Women are exposed to heightened risks due to their cultural place in society which is often that of caretaker and homemaker with little autonomy and opportunity. Gender roles are perhaps some of the biggest barriers to women receiving the help they need before and after a disaster. Economic capabilities
present major obstacles to women as they prohibit them to access adequate transportation, housing, and medical services following catastrophes such as Hurricane Katrina. Diminished social services and isolation from formal and informal networks place women in abusive relationships in serious jeopardy as their protection and avenues out of DV are gone or insufficient. Living as Internally Displaced Persons (IDPs), often left out of the governmental disaster assistance programs due to their ‘non-status’ as heads of household also presented serious setbacks in maintaining economic survivability in the months following Katrina. Finally, before Katrina, many women were already facing challenges of economic disparity and little opportunity to bring themselves out of poverty. In particular, FHHs have faced significant challenges because they have historically made up a large percentage of those who lived near or below the poverty line with little access to secure, gainful employment. It cannot be overstated how important it is to address women’s issues with DV and disasters long before they happen in order to assure that their economic, emotional, and physical security needs are met during these great times of vulnerability.
CHAPTER SIX
WOMEN’S EXPERIENCES AND PERCEPTIONS OF DOMESTIC VIOLENCE

This chapter presents women’s experiences and perceptions of domestic violence (DV) while living in New Orleans. Themes in this research focus on DV and women living in the ‘new’ New Orleans from 2005 to 2015 to investigate how women experienced the initial disaster and subsequent reconstruction era that is still ongoing. ¹⁴

Four major categories of DV are presented to frame the types of experiences women had in post-Katrina New Orleans: physical, sexual, psychological and emotional, and economic abuse. This chapter includes an interpretative analysis of these research findings. Connective patterns among participants’ experiences of DV and ways in which research participants described and understood those connections are presented as well as the inclusion of consistencies or inconsistencies with the literature and theoretical framework. Thick descriptions are used to achieve external validity by describing a phenomenon in sufficient detail in order to evaluate the extent to which the conclusions drawn are transferable to other times, setting, situations, and people (Lincoln and Guba, 1985; Geertz, 1978). Descriptive quotations have also been included to accentuate and capture the participants’ experiences with DV.

6.1 Demographics of In-Depth Interviews

Data collection consisted of 12 in-depth interviews, one focus group with three participants, and 16 social network interviews. The interviewing process took place from September 2014 to September 2015.

6.1.1 In-depth Interviews and Focus Group

The average woman’s age was 43 years. Ethnicity of the participants varied with eight (53%) identifying themselves as Caucasian, five (33%) African American, one (7%) Latina, and one (7%) multi-racial. Thirteen women (86%) were divorced, one (7%) was never married and one (7%) was a widower. All were female headed households (FHH).

Eleven women (73%) had children under the age of 18. The number of children ranged from one to four. Participants came from ten neighborhoods in New Orleans. All had a high school degree or higher. Only one participant was unemployed (looking for work) at the time of the interview (7%), two were unable to

¹⁴ It is important to note that some past experiences discussed included sexual and physical abuse by family members and/or persons who were in some capacity close to the victim, usually a friend or caretaker. These are relevant due to their forcible impact on the victims’ lives, their perceptions of DV and subsequent help-seeking strategies.
work due to disabilities (13%), one was working part-time (7%), and 11 were employed full time (73%). Five (33%) women earned less than $10,000. None of the women reported zero income or an income over $75,000. Of the fifteen women interviewed, ten (67%) were in New Orleans during Hurricane Katrina and the other five (33%) moved here one year or more after the storm. Six (40%) of the interviews were referred by and conducted at the New Orleans Family Justice Center (NOFJC) and nine (60%) were identified outside of the NOFJC. Ten of the women were lifetime residents of New Orleans, three others had residency here since 2007, 2008, 2010, respectively, and two have been here since 2011.

6.1.2 Social Network Interviews

Sixteen social network interviews were conducted with experts and local leaders in Orleans Parish who have direct experience working with DV victims and other issues directly related to DV. Several experts were directly involved with the rebuilding process after Hurricane Katrina and were able to discuss their experiences before and after the storm. Thirteen women and three men were interviewed. Also, many of the people interviewed were also victims of DV themselves giving their interviews a rich texture in which they could relate to the current state of services offered to women in Orleans Parish.

6.2 Sources of Help Used

The ability to locate positive sources of help is the first step towards freedom from domestic violence. Many women will begin trying to help themselves by using self-help techniques such as dissociation, resistance, compliance, numbing, or appeals to the abuser. Along with the strategies all of the participants used some type of informal network such as their most trusted friends, family members, coworkers, or classmates. These first experiences with informal networks often shape whether or not women will feel they have the agency to leave a husband or partner who is abusing them by providing emotional, financial, and physical support to victims of DV. Informal networks can be a catalyst for reaching out to formal networks. Formal network help-seeking strategies include assistance from professional organizations such as police, social services, medical services, legal services, and religious leaders. Both categories are based on five emerging themes from the data: seeking self-help, emotional support, awareness of services, economic support, and security.

Table 6.1 shows the different types of networks used by women in this research. Of the fifteen participants, only one woman did not seek help from formal networks. All the women (100%) used some form of self-help and at least one form of informal network with the majority choosing trusted friends (93%). Family members were the second most common source of informal networks help-seeking. About half the women stated they felt close enough to their partner/husband’s family to discuss any types
of abuse they were experiencing, (53%). Many, however, were not on good terms with their husband/partner’s family with some citing they actually encouraged the abuse or simply stayed out of the situation because that was a ‘private matter’. Nearly half (47%) of women received help from their children, either in an emotional or physical capacity. Extended family members also were shown to be a source of help for many women (40%) who stated they went to uncles, aunts, grandparents etc. for help. Very few (20%) discussed their abuse with co-workers or classmates, indicating a trust factor for such a personal issue.
Table 6.1: Sources of Help-seeking Used: In-depth and Focus Group Interviews

<table>
<thead>
<tr>
<th>Informal Networks</th>
<th>Percentage</th>
<th>N=15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-Help</td>
<td>100%</td>
<td>15</td>
</tr>
<tr>
<td>Friends</td>
<td>93%</td>
<td>14</td>
</tr>
<tr>
<td>Brother or Sister</td>
<td>73%</td>
<td>11</td>
</tr>
<tr>
<td>Neighbor(s)</td>
<td>73%</td>
<td>11</td>
</tr>
<tr>
<td>Parents</td>
<td>67%</td>
<td>10</td>
</tr>
<tr>
<td>Husband/Partner's Family</td>
<td>53%</td>
<td>8</td>
</tr>
<tr>
<td>Children</td>
<td>47%</td>
<td>7</td>
</tr>
<tr>
<td>Co-workers/classmates</td>
<td>20%</td>
<td>3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Formal Networks</th>
<th>Percentage</th>
<th>N=15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Police</td>
<td>87%</td>
<td>13</td>
</tr>
<tr>
<td>Legal Advisor</td>
<td>80%</td>
<td>12</td>
</tr>
<tr>
<td>Counselor/Social Services</td>
<td>80%</td>
<td>12</td>
</tr>
<tr>
<td>Doctor/Health Worker</td>
<td>60%</td>
<td>9</td>
</tr>
<tr>
<td>Religious Leader(s)</td>
<td>47%</td>
<td>7</td>
</tr>
</tbody>
</table>

| None                        | No Help-seeking | 7%   | 1    |

The police were the most common source of help with thirteen women (87%) calling the police at some point during their abuse. Legal advisors and social services were both used by twelve of the women (80%). Nine (60%) women sought help from a doctor or health worker. Religious leaders played a role in seven (47%) cases where women stated they discussed their situations with their pastors or priests. Finally, only five women (33%) stated they used a crisis hotline.

6.3 Defining Domestic Violence

This research openly explored what people in New Orleans consider to constitute domestic violence. Every person interviewed in this study mentioned power and control but also that DV is complex and has many different forms. All women agreed that DV constitutes actions that went against their will, whether it was verbal, mental, physical, or economic.
One social network provider from New Orleans Crescent House Healing and Empowerment Center stated that when she first began to work in shelters she would call DV:

A physical altercation between a man and a woman and I thought I understood it from what books told me but then I saw and listened to survivors and I see that does not even touch this. What I see from survivors goes completely beyond, that doesn’t even touch what it is. It goes completely beyond the physical. (408)

None of the in-depth interviews and focus group participants agreed that men ever had the right to hit a woman but several stated they did not always think in those terms. Also the women disagreed that ‘obeying’ their husbands or partners was something they felt was expected of them but many added to that answer that ‘not being agreeable’ could sometimes be a cause for violence to occur. Examples of this include not wanting to do things her abuser wanted to do such as going out, remarks regarded as critical against his judgment, or complaining that he is not home enough and things of that nature. Silent warfare was also discussed as a form violence that is often overlooked.

Silent warfare comes from projecting negativity and being upset and angry without even talking about it and whenever somebody else notices it saying that they’re stupid and dumb for saying anything. Violence comes in many different forms. (006)

Losing individuality and getting lost with another person was stated as a sense of being controlled and a sense of losing your freedom was often discussed by participants.

It is a hard definition, but definitely that somebody abuses somebody else with lies and making them believe something which controls their lives and makes them unfree. (115)

It became clear from the social network interviews that the respondents’ understanding of DV is in line with the international norm15. However, a few of the in-depth interviews often told a different story where only very serious and systematic abuse that brought about abrupt changes or serious damage to their relationships was considered to be violent enough to seek help. Many women agreed that it is accepted that intimate partners are there to take care of one another but also that when conflict arises it is something that should be kept within the walls of the relationship/family and if violence did not occur on a regular basis, women would often tend to forgive their abusers.

The cultural aspect of having experienced DV early in life and ‘violence as a way of arguing’ was present among many women describing their perceptions. Adding to this observation, most participants were interviewing because they had experienced DV as an ongoing event in their lives and not just an isolated

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15 The international definition of gender-based violence set forth in the declaration on the Elimination of Violence against women adopted by the UN General Assembly in 1993 was used for the purposes of this study. Under the Declaration, violence against women is defined as “any act of gender-based violence that results in, or is likely to result in, physical, sexual, or psychological harm or suffering to women, including threats of such acts, coercion, or arbitrary deprivation of liberty, whether occurring in public or private life” (United Nations, 1995; UNIFEM, 1998).
incident. Finally, minimization and denial are strongly correlated with how women perceived DV. Many who did not think of themselves as battered women because they did not fit the typical image in their head which would usually include being beaten and bloodied, having broken bones, or other serious injuries.

I did not think of it so much as normal but it was not like I was being bludgeoned to death with broken bones and bruises and he was pushing me or smack me...it was never a 'beating' like some people have endured. I just kind of accepted his critical remarks and constant inquiry into what I was doing and who I was with. He also would threaten me with words and push me around. (001)

These attitudes are attributed to how women grew up seeing themselves and their gender identity. Southern culture, particularly among southern African American women centers deeply on religious beliefs and the sanctity of marriage vows and these cultural barriers will play a part in how a woman denies or minimizes the patterns of abuse being perpetrated upon her.

6.4 Cycles and Patterns of Abuse

Many of the women interviewed discussed the cycle of abuse and patterns in their relationships. Some had been in their partnerships, either married or dating, for ten or more years but most averaged five years. It is important to emphasize that many of these relationships were not violent and abusive throughout their entire lifespans. The abuse usually started within one year and precipitated to verbal and emotional abuse, to physical abuse. Lenore Walker developed the social theory named the ‘Cycle of Abuse’ to explain the phases of an abusive relationship. As all individuals are unique the different cycles develop and abate at different rates and with varying degrees of intensity. These cycles can occur at any time in an abusive relationship and may take hours to years to complete. Once these cycles are embedded in the relationship dynamic they usually will never end until the victim leaves the relationship (Walker, 1979). These cycles include four distinct phases.

First, tension building occurs due to stresses from everyday life issues such as work, family, money problems, or communication breakdowns, or catastrophic events like hurricanes, floods, rape, or war (Johnson, 2006). In this phase victims usually turn to self-help tactics such as placating their abusers or becoming more nurturing. Second is acute violence which is characterized by outbursts of violence, usually preceded by verbal and psychological abuse (Newman and Newman, 2008). The third phase is the reconciliation or honeymoon phase where the perpetrator may begin to feel remorse or fear that their partner will leave them or call the police. Often the victim will feel pain, humiliation, disrespect or may feel responsible in some way, even empathizing with their partner (Newman and Newman, 2008).
Finally, the fourth phase entails a period of calm where the abuser may agree to engage in counseling, ask for forgiveness, and create a normal atmosphere (Walker, 1979).

I never had a foundation under my feet that was a solid one so what was built under my feet was something that was broken so of course, like what's solid for me is a broken pattern. (006)

Many women were genuinely surprised by the violent turn they saw their relationship taking. The abuse tended to start out with demeaning comments or questioning that the victims stated they really “did not think very much of it at first” (001) until it began to grow and turn into a more controlling type of behavior and eventually erupt into physical violence. This is in accordance with research regarding cycles of abusive relationships where couples go through various ‘build-up’ phases of tension until actual violence occurs which then abates into a reconciliation phase and then back into a state of ‘normalcy’ (Walker, 1979). Women tend to want to get back to a state of normalcy thinking that things will continue that way, while not understanding they are being caught up in a cycle that has no end. There is always a complex set of factors that keep them in denial because it is too difficult for them to acquire the resources, mental and physical, to make a clean break.

I've been gone from him for almost four years but it was on and off all the time. I just got divorced last year but I felt like I was attached to him even though he was mean and evil. He had good sides but I just felt like I could not do it (leave) because of my kids, I did not have anywhere to go so it was just hard. It was just like this merry go round, over and over again. (012)

Understanding the cycle of abuse is important in research looking at experiences and perceptions of DV simply because it accentuates the complexity and changing nature of the phenomenon. Even women that were interviewed for this research were not all out of their violent relationships. It often takes several efforts to leave a violent partner before a woman will actually be free.

6.5 Overview of Hurricane Katrina, Gender, and Domestic Violence

Many social network interviewees attested that DV did not increase after Katrina but merely pulled the veil off of an often covered up secret in New Orleans society. Looking back over ten years this analysis looks at experiences of women who were directly affected by the storm and those who work within the societal constructs that have been built afterwards. Among the many challenges women faced after Hurricane Katrina, the destruction of local resources and social networks were among the most devastating as their loss undermined the ability to respond and address the needs of DV victims.

Katrina forced race and class to the center of discussions about emergency preparedness and response (Brown, 2012). This was clearly seen in the marginalized populations who could not evacuate because they lacked resources such as money, transportation, or even knowledge about the gravity of the storm
and the surge that was predicted to happen. The crippled and anemic federal and local government response to the humanitarian crisis that was unfolding all over the city in places like the Superdome, Convention Center and Charity Hospital revealed how unprepared the city was to handle a crisis of that magnitude. It is fair to say that the total devastation would have made it difficult for any city to handle but the truth remains that New Orleans was unprepared and languorous in its initial response. Many social network interviewees would say the same about the recovery process today, particularly in areas of the city such as the Lower Ninth Ward.

Challenges remain in the recovery process as these same groups are also challenged in their ability to cope with and recover from disasters, whether it be navigating the federal assistance programs, finding employment, dealing with insurance or lack of insurance issues, etc. (Blaiki, Cannon, Davis, and Wisner, 2004). These aspects make it all the more imperative that DV shelters and social networks are prepared for the impact of disasters on survivors of abuse as these women are not only dealing with the disaster itself but have the stress of violence compounding their ability to cope. Katrina destroyed much of New Orleans’ infrastructure. Service centers and buildings meant to provide shelter for DV victims were no exception. The New Orleans Battered Women’s Shelter (NOBWS), a residential shelter for survivors of abuse burned to the ground two days after Katrina hit. The entire facility and everything in it was lost. The criminal and legal system was severely limited in its capacity to deliver services due to personnel being evacuated and damage to many of its buildings. Several of their offices were re-located in and out of the city limits, some for several years. The Young Women’s Christian Association (YWCA) was flooded after the storm and never returned, leaving a huge gap in services due to the permanent closing of the Battered Women’s Program. Finally, the evacuation and dispersion of social workers throughout the country left only a handful in New Orleans to reach out to victims of DV who were traumatized with nowhere to go.

At the ten-year anniversary New Orleans has seen many of its services revitalized with new models of outreach and support. One major result of Katrina was the creation of the New Orleans Family Justice Center (NOFJC). Katrina has often been touted as an ‘opportunity’ as well as a disaster because it allowed a new, more holistic approach to addressing women’s experiences with DV. Women’s experiences in all phases of New Orleans’ reconstructive period give an essential and invaluable window into how women decide to seek help in a completely new social dynamic that maintained many of its pre-
Katrina norms of social and economic inequalities and created new forms of marginalization in its aftermath. Even with the advent of new and improved social resources there are still gaping holes in the fabric of gender equality in New Orleans which leaves victims of DV at great risk.

6.6 Physical Abuse

Physical abuse is the most obvious result of domestic violence. Most people would agree that seeing a broken bone or a black eye would constitute DV and warrant social outrage with legal ramifications. However, getting involved in DV issues is often just not done in New Orleans. Perhaps it is the tinge of violence that constantly occurs in the parish and serves as a reminder that you keep to yourself or you may get seriously injured. Many women stated this to be the case in their situations. The women simply did not see a push or shove as the red flag they needed to stop the relationship and get out. Respondents reported that there were rarely instances of physical abuse serious enough to draw attention of the neighbors and those that did have neighbors become involved were often living in poorer sections of the city where homes are extremely close to one another. The wealthier respondents who lived in larger homes with more spacious lots stated that the violence still occurred, it is just that nobody could hear it.

When asked how often they thought women were the victims of physical abuse, respondents from the focus group stated that probably 75% of the women they knew had experiences with physical violence but rarely would anyone from outside of the immediate family become involved. It just was not ever an option to them. The majority of respondents also stated that the severity and frequency of the abuse were indicators of how serious they judged the violence to affect their health and safety. Often the level of severity is in direct correlation with whether or not they received medical treatment for physical abuse. This is in line with Gondolf and Fisher (1988) who proposed that abused women increased their help-seeking efforts in response to increasing violence by their partner. Testing their theory in a sample of more than 6,000 women, Gondolf and Fisher found that severity of abuse increased the likelihood the women would seek help.

Most of the respondents who lived through Katrina and all of those who evacuated stated that economic stressors helped to facilitate arguments and abuse during that time. They stated a sense of loss and isolation in their new surroundings as ‘refugees’ in their own country. Changes in living conditions, increased use of controlled substances, mainly alcohol and a sense of having no control exacerbated their already volatile relationships. Natural disasters result in major changes in an individual’s life situation such as the loss of friends, family members, or pets (Cohen and Ahearn, 1980). One of the biggest is the loss of one’s home, which can lead to intense feelings of vulnerability and insecurity (Beck and Franke, 1996; Laube and Murphy, 1985).
There is a dearth of research on levels of DV immediately following a natural disaster, but the few that have been conducted present evidence showing an increase in DV. One such study, thought to be one of the most comprehensive examinations of DV after a disaster, looked at 205 women who were either married or cohabitating at the time of the 1993 mid-Western flood. Over a nine-month period after flood onset, 14% reported act least one of physical aggression from their partners (Mechanic, Griffin, and Resick, 2001). According to several social network interviews it has been determined that DV numbers decreased after Katrina but only because there was nobody to report to and the infrastructure was completely torn apart. Many social services were not up and running until January 2006, six months after the storm and even then hotlines were not working along with intermittent electricity and greatly compromised city infrastructure. Police response in the next couple of years following Katrina was limited at best as they were not centralized and were located in separate individual districts. Today the Domestic Violence Unit is centralized in the NOFJC.

Over their lifetime the women experienced varying levels of abuse with nearly half of the women fearing they would actually be killed. All fifteen women (100%) experienced physical abuse. Five (33%) stated they had experienced physical abuse once or twice, seven (47%) several times, and three (20%) many times. Five (33%) stated they had lost consciousness, three of them only once and two stated it had happened many times. Blackened eyes were the most common type of physical abuse discussed by abused women and also the most common type of abuse seen by social network interviewees. One of the most important aspects of physical abuse was the trauma bond where some women took a long time to bond but if they knew it was time for them to leave they would act upon it. However, low self-esteem would often keep them from leaving a relationship.

His beatings used to be so bad. I have fractures from him beating me in my head with his fists, I used to have big black eyes. He is beaten me in my head and I have knots on my head, I have a knot right here. I have had gashes on my head, he beat me in the head with a board and it broke and he would not even let me go to the hospital. I really thought I was going to die. I cannot even explain how many times I've been beat with so many different things and different objects and him whispering in my ear, I'm going to kill you and choking me and I just really cannot explain it. (011)

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16 From May through September of 1993, major and/or record flooding occurred across North Dakota, South Dakota, Nebraska, Kansas, Minnesota, Iowa, Missouri, Wisconsin, and Illinois. Fifty flood deaths occurred, and damages approached $15 billion. Hundreds of levees failed along the Mississippi and Missouri Rivers.

17 The physical damage from DV can include bruises; welts; lacerations and abrasions; abdominal and thoracic injuries; fractures and broken bones or teeth; sight and hearing damage; black eyes and other head injuries; attempted strangulation; and back and neck injury (WHO, 2002).

18 Traumatic bonding occurs as the result of ongoing cycles of abuse in which the intermittent reinforcement of reward and punishment creates powerful emotional bonds that are resistant to change (Dutton and Painter, 1981).
He would pull me out of bed, pull me from the floor, pull me from the couch, he would turn the television on as loud as he could and just say you are not going to sleep. It would go on all night. The next morning, I would be blue everywhere, blue wrists, blue ankles. And you do not realize in that moment what is happening. You are in disbelief and you just can’t bring yourself to admit that this is your reality. (014)

6.6.1 History of Physical Abuse

Childhood exposure to DV has a pronounced effect on later involvement in violence relationships, as either a victim or a perpetrator. Eleven (73%) of the fifteen respondents stated they had a history of physical abuse in their lifetime. Five (33%) experienced physical abuse one or two times, seven (47%) a few times, and three (20%) many times. Nine of the fifteen women (60%) had seen their mothers abused when they were children while six (40%) had not. When asked if their abusers had a history of abuse in his family eight (53%) said yes, two (20%) no, and five (33%) did not know. Boys are most affected by the witnessing of parental abuse, and those who witness violence are more likely to become perpetrators of violence (Browne, 1997). A high percentage of men abuse their partners have witnessed parental violence, as boys. It is shown that a history of DV in the family experienced by women makes them more likely to experience DV as an adult (Jewkes, 2002b; Wekerie and Wolfe, 1999).

Some participants stated they had often seen their fathers hit their mothers and considered it to be ‘normal’ behavior. Mitchell and Hodson (1986) also demonstrated that childhood exposure to a violent home contribute to less effective ways of coping with stress and creates a ripple effect from the parents to the children where memories and experiences may shape the way they perceive relationships and subsequently affect their choices of partners as adults.

6.6.2 Social Services: Resurfacing after Katrina

Social services are at the forefront of the social battle against DV. They are the providers and protectors when other avenues of help are not an option for the abused. When asked if any of the women had ever been hospitalized for physical abuse nine (60%) had not received medical care for their injuries. Of the six (40%) who had received medical care only four had spoken to a health care provider about domestic abuse. Of those four, two stated they had a positive experience and received information about social services and shelter accommodations and two did not receive any assistance at all. Most of the women did not seek care at the local clinics or hospitals, usually because they had no way to get there and their decision-making power was diminished by their abuser who did not want them to go, many times in fear of legal repercussions they might face.
Several women discussed their experiences with social services *before* Hurricane Katrina and stated that they did not know of services and when they did reach out they felt overwhelmed by the complexity of the process as shelters, legal advisors, and counselors were all located in different places. One social network interviewee described the process for many women before the NOJFC (pre-Katrina):

There were real gaps in services before Katrina so we tried to create wrap-around services for survivors. We tried to really look at what it was like for a woman who was already traumatized to come in to a shelter, then have to go to another building to meet with the district attorney, and find a counselor. We also realized that what was missing from services was not only counseling but job preparedness and housing assistance. We also realized that many women were suffering from post-traumatic stress disorder and would need counseling for that as well. (412)

When discussing the shelter situation before Katrina, the Director of the NOFJC stated that the awareness of the need for change was very high among social workers in the New Orleans community. Before Katrina they were already in the works for assembling a group together to talk about how they could ameliorate and change the approach to DV victims in the metro area.

It was fighting all of that and yet at the same time, here I was as a clinical social worker coming into the shelter just seeing these traumatized women needing so much mental health care and it was really a struggle for me because I'm thinking these women need clinical services...they need trauma healing, medication and yet there was a lot of resistance to those kinds of ideas so even right before Katrina...and we cleaned up the shelter, I got rid of the rules, fired all of the staff...we had it as nice as a shelter could be but bottom line, it was still congregate living and it was still traumatized women in crisis having to share a space and I kept saying these women cannot tolerate this. They do not want their kids around crazy women and other...in New Orleans we were getting transient populations, we had Charity Hospital dumping crazy women off to us. We had the Sherriff discharging women at 12:01AM in the middle of the night so we were getting all of this into the shelter. I remember one woman leaving that I felt was really in danger and she said to me I really appreciate it but I would rather take my chances with my batterer than live with these crazy women and I thought, there's got to be another way. It was clear. About two weeks before Katrina we pulled together this group, a bunch of out of the box thinkers and I asked them, if we had a blank slate, and the same line of money, would the services look the same? What would services look like? And then Katrina hit. (413)

The new philosophy of ‘wrap-around’ services was mentioned by all of the respondents who sought help from the NOFJC in that they were very happy with the services they received and women who had gone to shelters before approved of the new systems of what is called ‘one-stop shopping’ where women are not stuck in open room shelters where all the other women are located but can now go to private “residence-shelters” and from there they are referred to the NOFJC. One interesting aspect of social services is the lack of emphasis put on the male perpetrators of DV. There are no programs at the NOFJC that specifically target men who are committing acts of violence. It was often a point of debate as to whether or not counseling and rehabilitation techniques were efficacious once men had reached a certain age. The idea is that they cannot be changed. This has been viewed by the researcher as a gap in the
literature and effort to mitigate DV. Often programs that teach youth about DV, both girls and boys, has been cited as a method of teaching a younger generation what DV is and why it is so damaging, but with limited resources in both the budgets of the City of New Orleans and social services, these programs are few and far between.

The money is simply not there and also that the likelihood of an adult perpetrator changing his ideology and morals regarding DV is very small. (401)

The NOFJC and Louisiana Coalition against Domestic Violence (LCADV) do have programs for men who are victims themselves as well as the Lesbian, Gay, Bisexual, Transgender community (LGBT) but the interaction with male perpetrators centers mostly on restraining orders and other legal protective measures.

6.7 Sexual Abuse

The same eleven women (73%) who stated they had a history of physical abuse also had a history of sexual abuse. Sexual abuse includes coerced sex through the use of threats, intimidation or physical force, forcing unwanted sexual acts or forcing sex with others (Ellsberg et al., 2000; Mooney, 1993; Hakimi et al., 2001). When asked if they were ever forced to have sex against their will by their husband/partner eight (53%) said they never did and, of the seven (47%) who had, two stated it happened once or twice, one stated it happened several times, and four stated it happened many times. Many abusers made women feel guilty if they did not have sex with them or simply forced them to comply to their sexual advances.

He raped, sodomized, poisoned me. And that's not including the emotional. The emotional is bigger. That's how they get you there. I mean, nobody walks up to you on a first date and bashes you in the face. (002)

When you see the stories about the thousands of untested rape kits in the greater NO area, how do you police violence against women, whether it is sexual assault or DV? How do you police that? Badly, so far...it is what it looks like. (406)

Only one respondent discussed ‘degrading and humiliating’ sexual practices and/or requests by her partner stating they ‘made me feel cheap and used’ and ‘the aggressive sex was the worst’. (006) All of the respondents agreed that a woman had no obligations to have sex with her husband or partner and that it is acceptable for a woman to refuse sex at any time and that a man never has a right to force sex upon her, for any reason. It is important to note that 54% who had experienced sexual abuse also were molested or raped as young girls, one by a ‘friend of the family’ when she was three years old. Many women experienced sexual abuse from family members (brothers, fathers, uncles) and for a couple of them, it went on for several years.
One facet of sexual abuse is the possibility of contracting sexually transmitted diseases (STDs). Several women mentioned their partners or husbands had other relationships while with them and a few were bisexual, which was mentioned as a ‘common way to make money on the street in New Orleans’. The slang term is DL or down low.

A lot of the men are DL now. It is an epidemic going on right now. They sleepin’ with men and have girlfriends…it is going on. (011)

I've been explained by men working around re-entry clients, they have been telling me a lot of the guys down here were already incarcerated so the rate is so high, they have the behavior when they come down here. Then you have the economic factor affecting a lot of our black males who do not have jobs, they're not making it so they have sex and charge money. They are doing it for money. But a lot of them feel like if they giving it they're not gay but if they take it, they are. (012)

One respondent discovered her husband was HIV positive bringing to light the added dangers of sexual abuse. The added dangers of DV is the fact that many women, and their children, may be impacted by their abusers’ promiscuous sexual behavior, furthering their agency and capabilities to leave or to become mentally, financially, and physically independent.

When I found out I was pregnant with my youngest daughter, he called me on the phone and told me he was HIV positive and I was shocked and thought he was lying. I had to go tell my doctor...it was so embarrassing. I was afraid for myself and my daughter but like I said, God has really looked over us because I'm negative and my daughter is negative. I pray I will never become positive. I'm tested two times a year and I haven't been with him but I always have that fear in the back of my mind. What if down the line this happens to me? (012)

Women who had experienced sexual abuse stated they felt they had been scarred from a very early age and attributed it to their inability to develop trust in relationships and cited it as a major reason for their choice to stay in unhealthy relationships due to the trauma they experienced. Women who were sexually abused or molested as girls are at a higher vulnerability (than women not abused as girls) to being victims of DV (Browne, Miller, and Maguin, 1999).

Respondents in the in-depth interviews and focus groups who lived through Katrina did not experience being raped by strangers, as was seen to be a real problem due to the dissolution of the rule of law in the following weeks. The types of sexual abuse they encountered was mainly through pressure of their partners to perform sexual acts when they did not wish to do so. However, it is important to note that sexual assaults were initially downplayed by the New Orleans police in the days immediately following Hurricane Katrina and the availability of social services for those victims was practically non-existent for months.
It was the perfect environment to commit a crime, and the worst environment to report a crime.

The police department, reeling from desertions, flooding and the immensity of the disaster, was in a survival mode itself. Civil order and the rule of law had completely broken down. Sexual abuse after Katrina made headlines in the days when people were trapped in the Convention Center and the Superdome. The breakdown of law enforcement and rape crisis centers during and after the storm exacerbated the problem. Media attention right after the storm reported that rapes were taking place in the Superdome and Convention Center, allegations that were quickly denied by then Police Chief Eddie Compass. However, as Judy Benitez, Executive Director of the Louisiana Foundation Against Sexual Assault (LaFASA) explains, “the idea that because something cannot be measured, it does not exist, is ridiculous”. There were also reports of rape and sexual assault of women in other emergency shelters coming from LCADV. According to Captain Jeffrey Winn of the New Orleans Police SWAT team, policemen on the scene at the Convention Center reported women had been gang-raped. Similar reports were also made by emergency personnel and National Guard troops (Marshall, 2005). Also, Charmaine Neville a famous singer and the daughter of rock and roll star Charles Neville came forward stating that she had been raped on the roof of a school in New Orleans.

There is no question that the stress, disintegration of rule of law, lack of basic necessities, and powerlessness are all contributors to increased sexual assault after a disaster and this is especially true for women who are already in violent relationships and are possibly separated from their families and social networks. The trivialization of DV faced by women routinely puts them in harm’s way and denies them basic human rights. These hurdles are difficult to overcome during non-disaster periods but become significantly magnified when social networks, both formal and informal, are severely disabled in the wake of disasters such as Hurricane Katrina.

6.8 Psychological and Emotional Abuse

All fifteen participants (100%) experienced some form of emotional abuse and most considered it the most insidious of all the types of abuse. Emotional and psychological abuse includes undermining, or attempting to undermine a victim’s sense of self-worth, constant criticism, belittling victim’s abilities, name-calling, insults, put-downs, silent treatment, manipulation of victim’s feelings and emotions to induce guilt, subverting relationships with children, and repeatedly making and breaking promises (Domestic Violence Project, 2014).

Emotional abuse is considered the ‘covert’ form of domestic violence and many women will not even recognize that it is being enacted upon them. Because controlling another person physically can be
extremely difficult to accomplish, much less maintain, emotional abuse allows the abuser to manipulate the abused into feeling a sense of low self-worth and fearfulness thereby enhancing their desire to change themselves and their behavior in order to make their partner happy.

You have the emotional abuse, the inferiority that you start feeling, the isolation, the terror of it all and thinking you will never be able to live without them because you feel they must know best. Then when you go out on your own you have the fear that you're doing it by yourself and you do not have the courage that you would normally have if somebody had not beat you down to begin with. I think that's the best way to describe that. (002)

I came home and I told myself I was not going to drink and he offered me this bottle of vodka about six times and I declined. He put the bottle in my hands and said refusal was not an option, now drink. There's is no way I could be sober around this guy. And again, the gas lighting, I would say no and he would just bulldoze me. (003)

For example, he would act like something was bothering him and it did not even need to be real...he just made scenarios up in his mind and he would say that happened and you could say 5 million times it never happened and you could see that working in him and he got the idea that I was not supposed to sleep. (014)

Respondents often mentioned being taught to believe they were ‘worthless’ and that all of the abuse they believed to be happening to them was ‘in their head’ and made up. Some women even began to believe that they were the abusive partners in that they were not being good enough to their men therefore bringing the abuse on themselves. This phenomenon is often called ‘gas lighting’. 19 Many men would trivialize women’s experiences and even some respondents themselves would do the same thing. Much of this goes back to the southern culture of New Orleans which is deeply rooted in southern traditions of gender roles that give male dominance over female subordinate roles. Traditions of keeping marriages together at any cost still resonate among women survivors who found themselves tightly connected to their partners because of their obligations to them and a very complicated sense of love. It is important to note that these traditions exist outside of New Orleans as well and it is plausible that any cultures embedded deeply in the religious overtones of the ‘American Bible Belt’ hold great value in the sanctity of marriage and an interpretation of women’s roles based on Biblical beliefs.

All thirteen in-depth interview and three focus group participants (100%) stated that psychological abuse was present in their relationships20. Many commented that looking back they could see the patterns of

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19Gas lighting is a form of mental abuse that causes the victim to question his or her own judgment or sanity due to lies and manipulation of the truth by the abuser. Gas lighting is one of the most extreme, dangerous and effective forms of emotional and psychological abuse and is mostly carried out intentionally. Gas lighting is a game of mind control and intimidation that is often used by narcissists and sociopaths as a way of controlling, confusing and debilitating someone. The term gas lighting was coined in the 1938 play Gas Light and the film adaptations that were then created helped to enhance its popularity.

20Psychological abuse includes behavior that is intended to intimidate and persecute, and takes the form of threats of abandonment or abuse, confinement to the home, surveillance, threats to take away custody of children, destruction of objects, isolation, verbal aggression and humiliation (Heise and Moreno, 2002).
psychological abuse but were often unaware of it in the beginning of their relationships. Verbal abuse is the most common form of psychological abuse discussed as it is very hard to see because there are no physical scars left on the body, but the psychological scars can be severe. Many women stated that they did not consider verbal abuse to be a form of DV and that these types of interactions were ‘normal’ to them. They saw their mothers being spoken to in a verbally abusive fashion and found it to be a way of communicating. Much of the culture that women grew up with, particularly here in New Orleans and the Deep South do not condone verbal abuse as ‘abuse’ but simply how couples are expected to interact with one another.

He would try to be like Mr. Perfect when we were out and the belittling would begin when I would try to contribute something to the conversation. A couple of times he looked over at me and went 'shhhhh'…He would take the knife out and start twirling it in his fingers or put it in my hand and tell me to hold it and feel how heavy it was. There was one time he told me, because he used to be in the military, and he told me he'd kill people and he knew how to snap somebody's neck and he pulled me up and was demonstrating on me and I said, do not show me this, do not show men this, and he had his arm around my neck showing me exactly where you could snap it. But he never came out directly and said I’m going to do this to you. (003)

All participants expressed that psychological and emotional of abuse was the most crippling type because they felt they had lost their self-esteem and ability to think rationally which further undermined their agency and capabilities to experience independence and autonomy in their lives.

6.8.1 Post Traumatic Stress Disorder

While many women in the in-depth interviews and focus group did not specifically mention post-traumatic stress disorder (PTSD) several social network interviewees did bring it up as a real result of Hurricane Katrina. The adverse effect of psychological toll of natural disasters has been documented with a review of 160 studies of disaster victims (Norris, Friedman, Watson, Byrne, Diaz, and Kaniasty, 2002). They found that the ongoing stress of re-establishing their lives, often without the help of social safety nets has a negative impact on their mental health and causes PTSD to develop. The short-term and long-term needs are often ignored in the rush to restore businesses and the physical infrastructure (Enarson and Morrow, 1998). Women who experience the trauma of DV before a disaster will often have a second traumatic experience if they are forced to go back to their abusive partner due to a lack of resources such as transportation, money, and housing. Men’s PTSD after a natural disaster may also exacerbate the problem because they may use drugs, alcohol, physical aggression, or all three, hurting themselves and putting the women and girls around them at risk (Enarson, 2006).

6.8.2 Isolation
One of the most important aspects of psychological abuse for nearly all of the respondents was confinement or isolation. Many were isolated by being separated from their informal networks such as friends and family. Isolation disallows women to have contact with people who could help them or show them they are in unhealthy relationships. Informal networks are some of the first lines of defense against DV. One woman stated she “always had to be watched” (011) and the fact she was new to the city meant she had very few friends and family to turn to when she was abused.

I was alienated from friends and family and things. All of my independence was stripped away from me basically. The physical and the alienation were even in the control part and played a big role in my experience. (012)

They really get you in, separate you from everybody, he separated me from my family, my friends, everybody. He even isolated me from my own child. That's how they do it. It is systematic. (002)

Isolation and confinement to the home were other methods of psychological abuse. Women who were unable to be around their informal networks began to rely more and more on their partners as the only form of social contact they received, further immersing them into a psychological haze of denial and acceptance of their abuse. This form of isolation would often evolve into a fear of being stigmatized as well, particularly among women who felt they were too weak to break from the relationship.

It was just controlling. I was isolated from my family. I was not working. He isolated me and wanted it in an isolated state. The only people he considered ok was his family which they knew, a lot of them, they knew what was going on but they did not do anything. (013)

Social isolation enables the abuser to maintain control without outside influences and is an important part in explaining the lack of help seeking from both formal and informal networks due to the victim being socially cut off (Turner, 2002). Some women noted they felt isolated because their families or their partner’s families were often complicit when they found out about abuses were happening. Cultural acceptance or the practice of ‘minding one’s business’ are enormous barriers to help-seeking among women. Family dynamics are a key in understanding why violence takes place and why it is ignored or overlooked.

They just do not want to get involved. I just watched that myself and I always wondered if people could hear me and they would tell me they heard my children crying, I watched this for myself and they watch my neighbor whoop his little girlfriend with a pipe, she ran across the street and nobody stopped it. They said they was not getting into it. I said why? Nobody gets involved? They do not. (013)

Yeah, because my ex, he used to hit me in front of his family members. They would not get involved or they would leave. Yeah, they would just ignore it. A few of them kind of got involved to try to get him off of me or whatever but for the most part they did not do
nothing. They would just ignore it or they would have an excuse...he is having a bad day. He is a good guy, he is just going through a rough time, stuff like that. (011)

A major theme with Katrina evacuees was the sense of isolation when they were forced to leave New Orleans. Many women did not return to the city for years and when they did return, it was not to the same social structures they knew before Katrina. The destruction of networks, families, and neighborhoods were strong impediments to women in the months after Katrina. They are still diminished today as a large percentage of the African American population did not return. Litt, Skinner, and Robinson’s study on African American Women’s Networks and Poverty in New Orleans after Katrina shows that this dissolution of ‘kin-network’ relationships and labor has had a significant impact on post-Katrina recovery. Kin-networks have been recognized as maintaining vital kin network through their ‘carework’ in households and communities (Collins, 1990; Hill, 1999; Litt, 1999; Stack, 1974). According to discussions with the participants in this study, DV uses many forms of power and control. Power and control is a key element of psychological abuse. Often abusers use blame and accusations to intimidate and persecute their partners. One of the most common forms of control stated by participants was being accused of infidelity or ‘flirting’ with other men. They felt this gave their husbands/partners an excuse to keep them from going out by themselves because ‘they could not be trusted’. (011) Some women stated they were accused of so many ‘wrong doings’ in their relationship that they themselves began to question their own actions and to second guess their agency and ability to make meaningful decisions in their lives.

I could be friendly with somebody and that could be considered unfaithful. I do not think he ever thought I had sex with anybody else but he did not like me engaging with anybody on the outside. (002)

He would get angry if I spoke with other men. Well, he did not always get angry but sometimes if we were together and I was having casual conversation with another guy suddenly he would decide it is time to go. And some of his friends even noticed that once. So sometimes he would get angry or he would say he got angry about something else or sometimes it would just be time to go. (003)

He tried to keep me from my family too. He wanted to know where I was at all times. He would also ignore me and treat me indifferently. He would get angry if I spoke with another man. (004)

6.8.3 Gun Violence

None of the participants had ever been shot with a gun during an altercation with their partners or husbands but several stated they were threatened with gun violence\(^\text{21}\). Also, many women described their desire to end their own lives and every single one of the participants had access to a gun. This is

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\(^{21}\) Gun violence is violence committed with the use of a gun. It may or may not be considered criminal. Criminal gun violence includes homicide (except when and where ruled justifiable), assault with a deadly weapon, and suicide, or attempted suicide, depending on the jurisdiction. Non-criminal gun violence may include accidental or unintentional injury or death. Included in this subject are statistics regarding military or paramilitary activities, as well as the actions of civilians (CDC, 2014).
significant as it relates to the public health crisis of crime and murder in New Orleans and has relevance to understanding the real dangers to women. Data released in June of 2014 by the Centers for Disease Control and Prevention (CDC) shows that Louisiana leads the nation in per capita gun deaths\(^{22}\). The analysis correlates the statistics with weak gun protection laws and high rates of gun ownership (CDC, 2014).

Louisiana ranks as one of the most dangerous states for women. The Violence Policy Center’s 2015 report, *When Men Murder Women* looks at gun violence and homicide rates nationwide by reviewing 2013 data. They found that Louisiana ranked 4\(^{th}\) in the nation for women murdered by men with 47 murders (1.99 per 100,000), the fifth consecutive year that Louisiana has placed in the top ten states where women are murdered by men at disproportionately high rates. They also stated that in 90% of the cases, women were murdered by someone they knew. Death by an intimate partner is a very real possibility for many women and is a grim reminder that some women lose their lives due to DV by someone close to them. Many women interviewed stated they felt they were taken within inches of their lives due to gun violence. The cycle of violence most often begins with small things and unsubstantiated threats but almost always build up to a breaking point that can often result in bodily harm or even death (Nussbaum, 2011).

He always kept my ID and my driver's license in his wallet and he must have shown it to people on Canal Street because I would hear them saying I've seen him asking about you and he would just find me and say, what's going with you? He was looking for me and threatening to kill me. (013)

He made it very very clear that if I touched his car that the guns were going to be used against me. (007)

According to the NOFJC the majority of deaths attributable to domestic violence involve a firearm but also the majority of attempted murders involve knives (as well as victim retaliation).

We have a lot to learn about the use of violence in relationships, especially in our culture where that cross-section...we have done some significant focus groups with African American women where violence is a norm in many cases and we have to better understand that...cultural sensitivities in the Asian/Vietnamese, African American communities...we are just beginning to see the correlations and common threads but I think it does look very different if you look at some of the cultural aspects. (413)

There were 150 murders in New Orleans in 2014 and this was the lowest number of criminal homicides recorded in the city since 1971 and the city’s lowest per-capita murder rate since 1999. Still, New Orleans murder rate remains one of the highest in the country and more than triple the average for

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\(^{22}\) Gun death rates include murder, accidental shooting deaths, and suicides (CDC, 2014).
comparably sized U.S. cities (nola.com, 2015). In 2015 there were 161 murders reported, the highest since 2012, but still represents a drop from 2011 (199 murders) and 2012 (193) (Asher, 2015). New Orleans has been the murder capital of the United States in 13 of the past 22 years. New Orleans has finished below third exactly once in the last 22 years (a fifth place finish in 1999). New Orleans has not placed outside the top five nationally since 1986. The Citizens Council for Public Security and Criminal Justice, a Mexican think tank, annually analyzes data from across the world to develop rankings for the world’s most dangerous cities. In 2015 New Orleans was ranked 28th out of 50 as one of the world’s most dangerous cities worldwide.

The United States Department of Justice (DOJ) awarded the city of New Orleans Health Department three grants totaling over $500,000 to further the department’s efforts to create a healthier quality of life for New Orleans residents through violence prevention (nola.gov, 2015). These grants center on creating a comprehensive murder reduction strategy, NOLA FOR LIFE, a holistic approach to get to the root of the problem, and implements initiatives into five main categories: Stop the Shooting, Invest in Prevention, Promote Jobs and Opportunity, Strengthen the NOPD, and Get Involved and Rebuild Neighborhoods. NOLA FOR LIFE also includes the interagency plan Blueprint for Safety Initiative which was launched in 2012 with the express goal to improve the City’s response to domestic violence cases. A $150,000 award from the DOJ’s Office on Violence Against Women will help advance the City’s Blueprint for Safety Initiative to provide a more unified response to DV cases. Since October, 2014, the Health Department has worked across New Orleans’ city agencies to implement a coordinated criminal justice response to DV cases from 911 calls to probation and parole. New Orleans is one of only three cities in the country implementing this program, and the DOJ’s grant awarded will help ensure its long-term success.

Even in the face of the government’s efforts, Louisiana is a state that adamantly protects the rights of its citizens to own guns. The Louisiana Legislature considered several pieces of legislation expanding gun rights in 2014 with Governor Bobby Jindal signing two of them into law. One allows residents with concealed handgun permits to carry their weapons into restaurants that service alcohol and lets law enforcement and other “peace officers” carry their guns in bars. The other bill expands the “stand your ground” law defense in Louisiana.

Governor Jindal signed three important bills into law in 2014. Among them are House Bill 753, the Pixie Geaux Act which states that a person who is convicted of a misdemeanor domestic abuse, or has an active permanent injunction or protective order filed against them, will be barred from owning a gun for a period

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23 Louisiana enacted its stand your ground law in 2006, adding to the existing ‘castle laws’, which give people the right to protect themselves or their property, even by deadly force (Law Center to Prevent Gun Violence, 2016)
of ten years and if found in violation of this law they will be charged with a felony and go to prison for one to five years and charged a $500 to $1,000 fine. The second bill signed is House Bill 750 which requires judges to send a copy of protective orders they have issued to clerks of court, who begin the process of including the orders into the Louisiana Protective Order Registry. This also requires law enforcement to arrest any individuals who violate their protective orders. If a domestic violence call is made while one of the individuals involved has an active protective order open, law enforcement should assume the person is the aggressor in the incident. A violation of a protective order is considered a crime and carries a maximum penalty of up to six months in jail for the first offense (Law Center to Prevent Gun Violence, 2016). While these bills are important steps forward, there is still a need to improve laws that protect women from their abusers who may resort to gun violence.

6.9 Economic Abuse

Economic dependency is perhaps the most pernicious facet of social entrapment that women feel when experiencing domestic violence. It was a common perception among most of the participants that DV is caused by economic hardship and that a greater sense of financial security would make their relationships healthier and less destructive. This opinion appears to be supported by quantitative research which shows a correlation between poverty and DV as is addressed in chapter seven’s analysis of economic entrapment in New Orleans. The common explanation given here is that couples are under added stress when facing issues of debt or unemployment.

A lack of economic security is one of the most common types of abuse experienced by women and one of the biggest deciding factors as to whether or not they opt to leave the relationship. This lack of economic security is also a major contributor to DV which is discussed in detail in chapter seven. Women often stated that men perceived themselves as emasculated when they would be earning more money than their male partners. Once the man feels emasculated the probability rises dramatically that he will abuse his partner and the wider the wage gap between the man and the woman, the greater the severity of the violence against her (Chant, 2003). While there is no specific data on women’s incomes in comparison to that of their partners, there were several women who discussed income inequality where they earned more as an instigator to DV.

You want to have a purpose and a lot of times men become unhappy if they are not working. They feel emasculated because their wife or girlfriend is coming in and supporting him and everything and how else do you show you are not emasculated than hitting...being violent? Taking charge. (405)
However, most of the women interviewed perceived the lack of economic control over their lives was one of the most defining issues for them. Financial control was seen as the most effective way of maintaining power when the question was posed to social network interviewees. All thirteen in-depth and focus group participants (100%) were controlled financially in some way. Examples included some women being forced or heavily coerced to provide monies for drinking and/or drug habits; others were not allowed access to financial resources or were not even allowed to work.

He put me on an allowance and we had money in safety deposit boxes and he would not give me the key. So that's a form of controlling behavior over you. It made me feel angry. We argued about it but it was never resolved. We were divorced by year eight. Money was always a big argument... money. Then he was in prison and from prison he wanted to reduce child support and he did not really give me enough to begin with so I had to go to work and I actually was able to get some money in a safe he had in the house. I hired somebody to come in and drill it. He made a big stink about it because I lived in a small town and he told everybody so I hear about it a lot. That in itself was a form of abuse and was not a partnership. (009)

Finances between partners can be a very volatile dynamic, particularly when there is little agreement on how they are utilized. The abusive partners usually would be extremely self-centered when deciding how to use resources. Often women cited examples of their partners going out and spending money frivolously when there were more serious matters to attend to within the household.

He would always say we did not have money to do things, fix the car or fix things and he would always have money to get booze and go out to dinner so it was money, it was relationship stuff, it was...yeah. (003)

Nearly half of the participants discussed the problem of ‘calling in sick’ to work because they were either physically or emotionally incapable of reporting to their jobs. While some described their supervisors as being understanding and working with them to be able to keep their employment status while seeking help and going through the legal process, others simply lost their jobs.

It affected my work and ability to make money a lot. I could not concentrate, call in sick to work and I felt like I lost confidence in my ability to do my job. (004)

Remember, I do not have any money. I had to depend on him to let me come home but when I would get back it would be a problem and I guess everything he would conjure up while I was gone I would have to deal with so it is makes me not want to come home. So when I'm out to go to school during the day that was my refuge, college. So I always enrolled for full time hours because that was my only escape out of the house. I was not allowed to work and if I did work I had to work somewhere where somebody he knew could watch me. (011)

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24 Economic abuse is defined as making or attempting to make an individual financially dependent by maintaining total control over financial resources, withholding one's access to money, or forbidding one's attendance at school or employment (CDC, 2010).
Housing and homelessness after Katrina also posed serious hurdles to women and was often a factor in how they coped with DV, particularly when children were involved. One participant simply got caught up in the living situation with her partner, had no money and could not afford another apartment unless she saved up the deposit and moving funds. Elevated cost of living and limited rental properties are a direct effect of Hurricane Katrina which are still being felt today. Two women in the focus group discussed how they were forced to live in their car, one for a few days and one for months. The quandary of many women was a complex one where they wanted to leave their violent partners but lacked the resources to do so. Again, the lack of awareness of services offered were never that clear to them until they actually came into the NOFJC or a shelter in the parish.

Some women stated that shelters were just as bad as being homeless, particularly those who experienced them before Katrina. Often women would go to shelters but there were often barriers to this option due to a lack of privacy, animals not being accepted or older boys not being allowed in the all-female facilities. Becoming economically vulnerable is a powerful trigger that often lures victims back into the abusive relationship. Women lack resources to get out of abusive relationships when they cannot access them either physically or emotionally and poverty, promises by the abuser to change, and even a sense of love for the abuser by the abused perpetuates the cycle of violence and diminishes the woman’s capabilities to become free of DV.

The majority of the participants had a college education with access to resources such as the Internet and transportation. Others, however, were not so lucky to be able to navigate the job market and develop a particular job seeking skill such as resume development and interviewing skills. They stated they were often overwhelmed by the system because they did not have the experience to become financially independent. These barriers often trigger women to stay in relationships that provide economic security due to their own fears of becoming homeless and/or destitute.

### 6.10 Summary

Distinctions on the perceptions and experiences of DV are central to its theoretical and practical understanding in order to avoid erroneous notions of what violence is and how it affects women (Johnson and Ferraro, 2000). The experiences and perceptions of women have certainly changed in scope when comparing issues directly related to the immediate aftermath of Hurricane Katrina but in the reconstruction and post-disaster New Orleans old patterns of policy socio-economic inequalities still linger and many have taken on new angles. What has not changed is the perception of how women define DV and the destructive impact it has on their lives and the lives of their families. All of the relationships showed signs of one or more of the five types of DV discussed in this chapter: physical, sexual,
psychological, emotional, and economic abuse. Most men were able to control the participants’ social interactions and almost all of them took financial control. This process affected the distribution of power and tendencies for men (and sometimes their families) to control women during the marriage or partnership. Isolation from support systems made many of the women question their own thoughts about abuse and many often came to the conclusion that their situation was not considered DV. Cultural norms were also a controlling factor where women minimized or even denied DV and families of either party chose not to get involved in ‘personal matters’, leading to self-doubt, depression, and further isolation. While some women decided to fight back, often with good results, most did not think of self-defense as an option.

While Katrina became a type of ‘clean slate’ for social services like the NOFJC to be borne many women are still struggling to secure housing and basic services and struggling economically. New Orleans has changed in such a way that it is harder for individual with low incomes and few resources to survive and all of that is compounded by diminished social networks of families who did not return. These new social constructs in place inhibit victims of DV from realizing their full potential thus enabling them to be better equipped to break the cycle of abuse that encapsulates them.

Interviews with the participants of this study show that DV is centered on power and control with a very strong link to economic security that is still being felt by marginalized communities post-Katrina, regardless of ‘new and improved’ redevelopment policies. Hurricane Katrina was a great magnifier of DV issues. In the decade that has passed since Katrina’s landfall there has been much thought and review placed upon the city’s history of DV with lessons learned on how DV is viewed and approached by the people of New Orleans such as disaster preparedness with gender in mind and better funding of resources that specially target women in abusive relationships. Katrina can be viewed as an opportunity to look at the gender impact of the storm and social inequalities and to understand the systems that were in place before the storm and how it made vulnerable populations in fact live through two catastrophes, one being the storm and the second being the ineptitude of reconstruction policies.

Gendering of post-disaster reconstruction and DV influences women’s post-disaster recovery in both the short and long term. Women’s social and economic disadvantages increase women’s vulnerability. The poor and socially marginalized will be the last to be addressed socially in what is now the ‘new’ New Orleans. Katrina was a highly gendered social event that highlighted the social inequalities that were ever present before the storm. Women experiencing DV were already at a great disadvantage if they came from certain neighborhoods or social backgrounds, mainly African American. The term has been coined
‘new poverty’ in New Orleans that includes women who have returned to the city and found life to be harder and less stable than before the storm.

Looking at help seeking behaviors and the social and economic barriers that exist are vital in understanding how cycles of violence affect women and their abilities to extricate themselves from abusive relationships. It is a perfect storm of frustration of informal networks, lack of knowledge of formal networks, diminishing self-esteem and even love that create great impediments to overcoming physical, sexual, psychological, emotional, and financial abuse and realizing their own capabilities that will give them the agency to achieve their own freedom from abuse.
CHAPTER SEVEN
ECONOMIC ENTRAPMENT: BARRIERS TO HELP-SEEKING

“Hurricane Katrina laid bare another tragedy, one that was brewing for decades as the city has long been plagued by structural inequality that left too many people, especially poor women of color with good jobs and decent housing” – President Barack Obama

The issue of domestic violence (DV) is complex and multi-faceted, at best. Each woman who has experienced DV will tell a tale of her own unique set of circumstances that brought domestic violence into her life. This research focuses on the most important barriers discussed by the participants with the research regarding their ability (or inability) to seek help and eventually change their lives by leaving their abusers. The main barriers discussed by interview participants are based on an interactive effect of diminished opportunities and limited choices through economic and social entrapment. Economic barriers include a lack of access to financial resources, gender inequalities in the workforce, and a lack of affordable housing. Social barriers include destruction of social capital, stigma, scattered informal networks, inadequate law enforcement response, and a lack of awareness of social services.

New Orleans has experienced considerable recovery since Hurricane Katrina in 2005. After Katrina tourism declined from 10.1 million visitors in 2004 to 3.7 million in 2006. In 2014, more than 9.5 million visitors traveled to New Orleans with an input of $6.8 billion dollars into the local economy (Whitten, 2015). Job growth has been steady from 2010 to early 2015 but has seen a decline in the past year, mainly in the construction and energy sectors. Many of the jobs created since 2005 have been low-wage and concentrated in the hospitality sector (Sussman, 2015). Entrepreneurship is increasing and New Orleans has a microenterprise ownership rate of 22 per 100 people in the labor force compared to 17 nationally (Plyer, 2011).

But to many denizens of the city, how you perceive the reconstruction of the city depends on where you live, who you are, your gender, and the color of your skin. Most of the 72 distinct neighborhoods that make up New Orleans have the look and feel of being completely restored while others remain blighted and largely abandoned. This has created areas of concentrated poverty where women are extremely vulnerable to DV such as the Lower 9th Ward, Central City, and East New Orleans. The lowered population and high levels of poverty, that are nearly the same as pre-Katrina, are indicative of structural barriers that exist in New Orleans today.

Women in New Orleans, and particularly African American women, are increasingly vulnerable to racial and socioeconomic divisions that render them manacled to violent and abusive lives. It is important to remember that not all poor women are necessarily going to become victims of DV, neither are the more
affluent free of it. With that being said, one of the most important things that affects all socio-economic groups in this study is the devastating effect of limited capabilities or even perceptions of limited capabilities on their ability to seek help due to a lack of economic and social resources. Barriers to social and economic security result in a diminished capacity to seek help and the likelihood of staying in a violent relationship due to a lack of viable and safe alternatives. It is fair to say that the fabric of the city has changed, and while some are reaping the benefits, others are being left behind as is highlighted by many of the participants who often stated they felt a sense of hopelessness in the new economy because their economic opportunities and social networks were limited.

Chapter seven discusses: the economic barriers to help seeking lack of access to financial resources, gender inequalities in employment opportunities, and a lack of affordable housing. Social barriers will be discussed in chapter eight and include destruction of social capital, stigma, scattered informal networks, law enforcement response, and a lack of awareness of social services.

7.1 Economic Entrapment

Economic entrapment is a situation where a person established an abusive dynamic through financial control in order to limit their partner’s access to education, employment, training, contacts, and resources, resulting in the limitation of their partner’s financial freedom. While women are rarely physically kept in a space against their will, they are often in a situation of economic entrapment and the psychological toll along with a lack of resources severely limits a woman’s capability to get out of an abusive relationship. Creating individual freedom through capabilities is central to being able to leave an abusive relationship. Part of those capabilities is to have a source of leverage or independence against an abusive partner or husband (Nussbaum, 2011). One of the most important sources of independence discussed by participants was economic autonomy. The high levels of unemployment and inequality in earning power, and lack of affordable housing are two of the most important barriers discussed by both in-depth and social network participants.

It has been nearly a decade since Katrina devastated New Orleans but the vestiges of long in-place economic and social inequality still exist today. Disconcerting is the ever-widening gap between the socio-economic classes, sending an ominous warning to the coming of a second and very perfect storm where disadvantaged and poor women may become even more marginalized, economically and socially. Rates of DV are nearly at the level they were pre-Katrina within a smaller population, pointing to the urgent need to address public health policy and re-evaluate the needs of the city’s most impoverished classes. Evidence of this is seen by the number of protective orders granted in 2003 in Orleans Parish was
4379 compared to 4323 in 2015 (LPOR, 2015). Louisiana’s population has shrunk from 437,186 in 2005 to 384,320 in 2014 (U.S. Census Bureau, 2014).

The inequity between social classes is leaving many behind by denying them access to education, a living wage, and decent employment opportunities as well as access to a happier standard of living where they can exist free of blighted housing, limited police presence, violent crime, including soaring murder rates due to gang violence and drug activities. If this toxic combination is not addressed in the ‘new’ New Orleans on the level that it should be, DV will continue to grow and the repercussions on health, labor participation and well-being of their children can dramatically affect the overall economic well-being of the city of New Orleans. The economic system for poor women is broken and they continue to struggle to earn a living wage and meet their own capabilities with not only hopes and dreams for themselves but for that of their families.

7.1.1 The ‘new’ New Orleans

In examining the statistical ebbs and flows throughout the last ten years, the city is slowly reaching its pre-Katrina numbers and even exceeding them in some areas, including levels of poverty. Often thought of as a city that is ‘gentrifying’, the term ‘new’ New Orleans is heard by people around the city who fear the essence and culture of its people has been lost due to the mass exodus of so many over the last decade and the influx of a new population is driving up the cost of living and creating jobs that require a higher education, further concentrating the pocket of poverty that already exist.

In comparing statistics from the U.S. Census Bureau (2005-2014) New Orleans is a smaller city with a -29% change in population. The African American community has shown the most significant losses at -24%. African American females declined by -24% and African American males by -22%. The Caucasian, Asian, and Hispanic populations have all seen increases in their percentage of the total population. Even with these substantial losses and gains, African Americans are still the majority (59%), followed by Caucasi ans (34%), Hispanics (5%), and Asians (3%).
Table 7.1: Demographic Changes in New Orleans 2005-2014

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<td>Total Population</td>
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<td>56%</td>
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<tr>
<td>Population by Race and Gender</td>
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</tr>
<tr>
<td>Male Total</td>
<td>204,651</td>
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<td>Female Total</td>
<td>234,022</td>
<td>205,672</td>
<td>-12%</td>
</tr>
<tr>
<td>Caucasian Male</td>
<td>61,248</td>
<td>67,853</td>
<td>11%</td>
</tr>
<tr>
<td>Caucasian Female</td>
<td>61,374</td>
<td>66,777</td>
<td>9%</td>
</tr>
<tr>
<td>African American Male</td>
<td>132,668</td>
<td>103,357</td>
<td>-22%</td>
</tr>
<tr>
<td>African American Female</td>
<td>162,571</td>
<td>124,012</td>
<td>-24%</td>
</tr>
<tr>
<td>Asian Male25</td>
<td>3865</td>
<td>5662</td>
<td>46%</td>
</tr>
<tr>
<td>Asian Female26</td>
<td>3268</td>
<td>5936</td>
<td>82%</td>
</tr>
<tr>
<td>Hispanic Male27</td>
<td>6,870</td>
<td>11,353</td>
<td>65%</td>
</tr>
<tr>
<td>Hispanic Female28</td>
<td>6,809</td>
<td>9,947</td>
<td>46%</td>
</tr>
</tbody>
</table>


Economically, New Orleans saw an expected decline in 2005. While still in the throes of massive reconstruction from 2005-2008, New Orleans fared better than any other metro area in the U.S. in recovering from the recession. According to a 2014 report released by the Brookings Institute, most other U.S. metros bottomed out during the recession in 2009 but the low point for the New Orleans economy came after Hurricane Katrina in 2005 and the massive ongoing hurricane recovery and rebuilding efforts provided a boost to the city during the national recession. From 2008 to 2010 metro New Orleans lost only 1% of jobs compared to 5% nationwide and by 2014 had recovered these losses and reached 5% above its 2008 level (The Data Center, 2015).

The city is benefitting from new infrastructure investments, a more diverse industry sector and an entrepreneurship boom. From 2011 to 2013 the rate of business start-ups in New Orleans counted 471 per 100,000 adults, 64% higher than the national average of 297, and 40% higher than other fast-growing southern metros like Atlanta and Houston (The Data Center, 2015). The median income for

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25 Asian male population data not available for 2005 and 2006; 2007 data used.
26 Asian female population data not available for 2005 and 2006; 2007 data used.
27 Hispanic male population data not available for 2007; 2006 data used.
28 Hispanic female population data not available for 2007; 2006 data used.
metro New Orleans in on par with Caucasian households nationwide but the median income for African American households is 20% lower than African American households nationally. In 2013 the disparity in incomes between African Americans and Caucasians was 54%, compared to 40% nationally. Jail incarceration rates have fallen from five times the national rate in 2004 to roughly three times the national rate in 2013. Excluding state prisoners, the Orleans Parish incarceration rate was still more than twice that of the nation as of 2013 and is comprised mainly of African American males (The Data Center, 2015). In 2004, violent crime rates in New Orleans were almost twice the national average. By 2013, both local and national violent crimes rates had fallen by 17% and 21% respectively (The Data Center, 2015).

Great disparities among race and gender remain firmly in place in spite of the gains New Orleans has made over the past ten years. The poverty rate has risen to pre-Katrina levels of 27% (The Data Center, 2015). The economy has stalled and is not generating enough income to improve living standards with output in greater New Orleans by an average of 0.89% between 2010 and 2014, a rate not seen since the 1980s and 90s oil bust (Liu, 2015). The diminished output per capita signals an economy that cannot support marginalized residents with growth in high paying jobs or support public services in line with population growth. This is seen by the increased income of Caucasian males and females but African Americans (particularly females) have not seen the same growth. The lack of good opportunities and jobs has affected New Orleans African American middle class who have found rebuilding and maintaining a decent standard of living difficult, resulting many to decide to move out of the city.

Finally, job growth is now slowing and the new jobs are predominantly low quality. The average annual rate of job growth from 2010-2014 has waned with the slowdown of rebuilding activities (Liu, 2015). Seven out of ten jobs being added in the economy have occurred in low-wage industries like tourism, administrative services, and retail. In contrast, job growth in higher-paying industries like transportation and distribution, energy and petro-chemicals, and durable manufacturing lags their peers nationally (The Data Center, 2015). This shift to low paying jobs is a great challenge to women who are often the head of household and responsible for their children. This can lead to the ‘feminization of poverty’.

7.1.2 The Intersection between Women, Domestic Violence, and Poverty

Living below or near the poverty level is a reality for many in-depth interview participants. Looking at the poverty thresholds for 2015 by size of family and number of related children under 18 years of age, six out of fifteen were below the poverty level and two were very close. Women discussed the stress involved in trying to make ends meet and the lack of formal and informal networks like the inadequate police response and limited extended family living in New Orleans. All of them are female-headed
households (FHH). Several studies, such as Sherman’s 2015 study on the impact of wage increases on domestic violence states that there is a correlation between economic conditions and rates of DV and that financial stress can lead to increased levels of DV. (Sherman, 2015). While the effect of economic conditions is difficult to study it is important to understand the particular stresses that occur among poor women in abusive relationships.

The 2012 GNOCDC Assets & Opportunity Profile provides a data snapshot of the financial security and opportunities for New Orleans residents and shows that from 1999-2007 the city’s poverty rate fell from 28% to 21% due primarily to the mass exodus post-Katrina and the inability or decision of many residents not to return to the city. By 2010, after the Great Recession, poverty in New Orleans rose to 27%, the same as a decade ago and well above the national average of 15% (Oritz, 2011). There was also an increase in poverty rates among women and girls from 2000-2008 with the highest being among African American females at 23% (2008 American Community Survey). The poverty rate in the city of New Orleans in 2014 has remained at 27%, nearly twice the rate for metro New Orleans (16%) and the U.S. (16%) (GNODC, 2015).
Table 7.2: Poverty Rates: New Orleans, Metro New Orleans, and the United States

<table>
<thead>
<tr>
<th>Year</th>
<th>New Orleans</th>
<th>Metro New Orleans</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td>1979</td>
<td>26%</td>
<td>11%</td>
<td>12%</td>
</tr>
<tr>
<td>1989</td>
<td>32%</td>
<td>15%</td>
<td>13%</td>
</tr>
<tr>
<td>1999</td>
<td>28%</td>
<td>13%</td>
<td>12%</td>
</tr>
<tr>
<td>2013</td>
<td>27%</td>
<td>16%</td>
<td>16%</td>
</tr>
</tbody>
</table>


African American women and female-headed households (FHH) are the hardest hit by poverty in New Orleans. The 2014 Census shows that 21.4% of all families live below the poverty level; 7.3% were married couples and 41.8% were FHHs, and 54.7% were FHHs with children. Figure 7.1 shows that among FHHs, African American women have seen the highest rates of poverty from 2005 to 2014, remaining in the 40th percentile for a decade, pre and post-Katrina. Caucasian women saw a spike in poverty rates in 2010 but then decreased by nearly 50% by 2014.

Figure 7.1: Percent Below Poverty Level: Female Headed Households: 2005-2014

![Figure 7.1: Percent Below Poverty Level: Female Headed Households: 2005-2014](source)


Roughly 70,000 people, or 14% of the city, live in households with incomes below 50% of the poverty line (GNODC, 2012). These are important in order to understand the dynamic of what is happening to women in New Orleans today. Disadvantaged women face much higher risks of abuse as women who are living below the poverty line report rates of DV more often than women who are better off. African American women in New Orleans are particularly at risk. According to one social worker:
Before the storm long standing policies of neglect towards the city’s most vulnerable residents, exemplified by their continual segregation into neighborhoods of high poverty. Before the storm New Orleans had the second highest share (behind only Fresno) of its poor residents living in neighborhoods of extreme poverty, where more than 40% of individual had incomes below the poverty line. The poor in New Orleans are disproportionately African American. (407)

Living in poverty has long been the reality of many women of New Orleans over the course of many years and among these marginalized groups are a high percentage of women. Poverty disproportionately affects women and single mothers. Low-income women are often trapped in abusive situations by a lack of financial resources. Poor women are more vulnerable to DV because they lack the resources they need to escape the economic entrapment and children who grow up poor are more likely to experience behavioral problems, health issues, lower academic achievement, and unemployment in adulthood (DeNavas-Walt and Proctor, 2014). If we fail to address poverty, particularly amongst women and children, we only perpetuate the cycle of poverty, inequality, and domestic violence.

### 7.1.3 Women’s Lack of Financial Resources

Often women’s limited control over financial resources was major cause for them to not seek help or to return to their households after one or many attempts to leave. For women who owned property together with their partners or spouses, the division of property was often a challenge and one that required legal resources that they could not afford and sometimes did not understand how to navigate. Women stated that men often felt they had a sense of entitlement to controlling property, even if it was the participant who brought the property into the union. Financial control also came through partners not paying mutual bills or running up credit cards until the participant had no credit left, and several women stated their credit was destroyed.

Twelve of the fifteen in-depth interview participants have been divorced and none were married at the time they were interviewed. Some stated that they had a difficult time with the divorce proceedings due to Louisiana’s previous DV legal structure. Before 2014, spouses in a marriage where DV is alleged must have lived in different locations for 180 days before a divorce would be granted. Also, under the former state law, spouses accused of DV could not be ordered to pay more than one-third of their net income to their spouse. Senate Bill 291, which was passed in May 2014, allows victims of DV to be awarded punitive damages in lawsuits if the abuse caused serious physical injury or mental distress. Before then, victims were not allowed to sue their alleged attackers for punitive damages. Bill 292 makes DV grounds for immediate divorce and also mandates spousal support by the accused abuser and lifts the cap on the amount of support the alleged abuser an be ordered to pay. All of this helps to continue to eradicate DV and show perpetrators they cannot get away with abuse. Several factors come into play when looking at
financial control like the divorce and child custody and how you will divide property and many women may not know their rights (NOFJC, 2015)

One in-depth interview participant stated she was very well off financially but her husband controlled every aspect of her economic life. He would often take away her driver’s license, did not allow her access to bank accounts or credit cards and would even make sure she had no access to a vehicle. This was a limiting action against her as she did not have employment to secure her own money.

Well, I could not leave my son with my husband. I could not do anything. I had no money, everything was in my husband’s name. I did not know where to go, I do not know anybody here in this country. I was devastated. I would not have come to the Family Justice Center and found help and first of all information, I do not know if I would still be here. Because you get so devastated because you do not know what to do. I could not go home but I would not leave my son. (014)

Several women commented that even though they were working they were not able to make enough money to adequately support their families. Some women were working two jobs to make ends meet further adding to their distress in trying to get out of violent situations as well as financial insecurity. They discussed the bonding effect they felt because they shared children with their partners and felt extremely dependent on them to survive. Respondents stated that economic instability and factoring in the children has a major impact on their decisions to stay as they did not want to risk either losing them or not being able to provide for them.

A huge barrier is having a job with a decent living wage so you cannot only support yourself but your children. I'm talking to a mom right now...it is appalling...it's like a teenager living at home could not live on that and motherhood is a full time job and so it's economic stability and shelter stability. Those are the two biggest barriers. (409)

For women who did find employment, finding affordable day care was a barrier to them being able to work full-time. Many women relied on their families or friends to help them but some simply did not have this option as their informal networks were very limited. Compounding this is the fact that many women were working in the service industry, which often requires its employees to work either very early or late shifts.

Many women stated they had very low expectations to find meaningful work that would offer them a living wage and even lower expectations that they would someday be financially well off. Gender inequality continues to plague women working and living in New Orleans. Even though the city is seemingly undergoing a renaissance after decades of economic decline, the inequality remains and has increased along class and racial lines where poor women, and most of all poor African American women are at the greatest risk of being left behind in the new social and economic landscape. New Orleans has
gone through many highs and lows regarding economic prosperity but this era is different in that the types of jobs and wages available to poorer women will not give them the capabilities to fashion a higher standard of living and quality of life.

7.1.4 Unemployment

Both in-depth and social network interview participants stated that unemployment, either presently or in the past, was a significant barrier to them seeking help to end DV. Of the 15 in-depth interviews, 11 were working full-time, one part-time, two were unable to work because of health issues, and one was unemployed. The 2016 unemployment rate in New Orleans is 5.8%, in Louisiana, 5.9%, and nationwide 4.9% (U.S. Bureau of Labor Statistics, 2016). While these numbers show New Orleans is lowering its unemployment rate there are still issues of poverty and socio-economic disparities. As of March, 2016, African Americans have nearly twice the unemployment rate (8.8%) as Caucasians (4.3%). African American males have an unemployment rate of 8.6% and African American females (7.9%) as compared to Caucasian men and women at 3.9% (Bureau of Labor Statistics, 2016).

Figure 7.2: Unemployment Rates 2016

![New Orleans Unemployment Rates 2016](http://www.bls.gov/news.release/empsit.t02.htm)

In 2004 women in Louisiana were at the bottom 5% of the following U.S. economic indicators: median annual earnings (47th), ratio of male to female earnings (48th), labor force participation (50th), and women living in poverty (47th) (IWPR, 2004). African American women in New Orleans experienced dismal numbers as shown in their pre-Katrina unemployment rate of 21.8% in 2005, 16.6% in 2007 and still exceedingly high at 11.5% in 2013 (Bureau of Labor Statistics, 2016).

Unemployment and economic uncertainty were often discussed, by all participants, as root causes of violent behavior in women’s partners. In looking at the high rate of male unemployment, several women
discussed the problem of income inequality in the sense that it was a problem for their partners if they were the main breadwinners. Women described their partners as becoming agitated quite often and feeling inadequate or insecure as their traditional male roles were somehow negated or threatened. This is in line with the literature where Turner (2002) and Levendosky (2004) found that when women earned more than their counterparts, even if they were in low-income brackets, it could create feelings of ‘emasculating’ by the male partner who may already suffer from low self-esteem and feelings of powerlessness in other areas of his life. Many women talked about this factor and that it would sometimes lead to fights and abuse between them. But the reality is that most women see significant differences between theirs and men’s incomes.

7.1.5 The Gender Wage Gap

Perhaps nothing is more egregious than the policies and practices marginalizing women by unfair pay practices and the resulting gender wage-gap. The gender wage gap is the difference between male and female earnings that is expressed as a percentage of male earnings (OECD, 2013). Women in New Orleans are experiencing a significant wage gap and disparity in incomes and participants often discussed the problem of being able to earn a living wage, stating they were working so hard and still struggled to make ends meet and take care of their families. Social workers at the NOFJC discussed that while they do not directly place women in jobs, job training was one of the most important programs in the center and also that many women inquire about jobs that offer a living wage, learn computer skills, and how to go through the job search and interview processes. Women expressed concern regarding their inability to land good paying jobs and most stated unequivocally that limited financial resources and dead-end jobs were among the top barriers to them leaving their abusive partners.

In August 2015, New Orleans’ mayor, Mitch Landrieu, signed the ‘living wage ordinance’ that requires city contractors to pay their workers at least $10.55 an hour. The law applies to companies that have public contracts worth $25,000 or more or that have received grants worth $100,000 or more in a year (City of New Orleans, 2016). The new limit is higher than the federal minimum wage, which remains $7.25 an hour. Even with these new efforts the idea that $10.55 can adequately give a family a decent standard of living is up for debate. According to Massachusetts Institute of Technology’s (MIT) Living Wage Calculation for Orleans Parish, Louisiana 2016 one adult must earn $11.08/hour to earn a living wage.

29 Living Wage Calculation for Orleans Parish, Louisiana: The living wage shown is the hourly rate that an individual must earn to support their family, if they are the sole provider and are working full-time (2080 hours per year). All values are per adult in a family unless otherwise noted. The state minimum wage is the same for all individuals, regardless of how many dependents they may have. The poverty rate is typically quoted as gross annual income. It has been converted here to an hourly wage for the sake of comparison. http://livingwage.mit.edu/resources/Living-User-Guide-and-Technical-Notes-2014.pdf
wage and an adult with only one child would need to make $21.94/hour. The poverty wages were $5.00 per hour for one adult and $7.00/hour for one adult with one child.

Figure 7.3 shows the median earnings for full-time year-round workers in New Orleans from 2005 through 2014. Caucasian males saw the highest percent increase in median income of 44% with the median salary jumping from $42,192 to $60,758. Caucasian women saw an increase of 18% with salaries moving up from $42,192 to $47,337. An interesting point is that Caucasian males and females were nearly equal in 2005, pre-Katrina. This progress towards equality was lost with Hurricane Katrina and by 2007 Caucasian males were already outpacing females by nearly $15,000. Much of their increase in income was due to the fact that Caucasian men were able to keep working due to less familial responsibilities in the home. Also, the labor shortage following the hurricane meant that laborers had more bargaining power with wages and the dominant jobs available after the hurricane were predominantly in construction and clean up, areas that have been historically dominated by males. African American males had the smallest increase at 9% and have actually seen a reduction in median income from $35,794 to $32,912 followed by Asian females at 15%. African American females saw a higher increase than both Caucasian and Asian women at 25%. These disparities point to men having more access to the limited employment opportunities available at the time. A trend that is still being seen today. Income disparities between Caucasians and African Americans (male and female combined) working in New Orleans has increased dramatically since 2005. The median income of African Americans has seen a minimal increase from $23,394 to $25,102 whereas Caucasians saw an increase from $49,262 to $60,553. Female-headed households (FHH) showed a much lower median income at $19,065 in 2005 (pre-Katrina) to only $21,879 in 2014 (American Community Survey, 2014).
Figure 7.3: Median Earnings of Full-Time, Year-Round Workers 16 Years and Over 2005, 2007, 2010, 2014

![Graph showing median earnings by gender and race from 2005 to 2014.]


Looking at the earnings ratio by sex and gender gives a sense of how the gender wage gap affects different demographic groups of women. These pay inequities can only begin to paint the picture of challenges women face when trying to secure a living wage through gainful employment. Table 7.3 shows three different ratios or comparisons: women’s to men’s earnings, of the same race; women’s to women’s earnings; and women’s to Caucasian men’s earnings. Using the American Community Survey in 2007 and two 5-Year Estimates, 2006-2010 and 2001-2014, the table shows variations in how income equity fluctuates between the groups.

From 2005-2014, the percent change of women’s to men’s earnings has seen a decline of 3.4%. and at 78.9% in 2014, a number that is right on par with the United States average. Once again this is sending a message that the city is doing well, as far as averaging the same wage gap. However, a closer look at the data shows that African American women fare far worse when they are disaggregated from the overall totals. Caucasian males have seen a steady increase in the median income from 2005 ($42,192) to 2014 ($60,758), an increase of 44%. Caucasian women earned 78 cents to every dollar earned by a Caucasian man. African American women, while having some of the lowest median incomes in this analysis have seen a 25% increase from 2005 ($24,037) to 2014 ($29,971) and saw a .14.8% increase from 2005-2014.
when comparing their median incomes to African American males. In 2014 African American women made 91.1 cents to every dollar earned by African American males who had a median income that year of $32,912). Part of this could be attributed to women historically outnumbering men making up 59% in 2005 and 57% in 2014. Part of the explanation could be that a number of African American males are either incarcerated, unemployed, or just missing due to the high death rate of African American males in New Orleans.

These numbers become more alarming when the income ratio of African American women to Caucasian men and women are examined. African American women made 60.1 cents to the dollar when compared to Caucasian women and that has only seen a 5.3% increase from 2005 to 2014. The ratio to Caucasian men shows African American women earning a mere 57 cents to the dollar in 2005 and actually seeing a drop to 49.3 cents in 2014, a decrease of 13.4%. Across the board all women saw fairly dramatic decreases in pay equity when they were compared to median incomes of Caucasian men. Asians had remarkable pay equity when compared to Asian men, with 100% in 2007 but an overall decrease of 4.5% from 2005-2014. They have seen significant declines to earnings ratios with Caucasian women, dropping from 90.1 cents to the dollar to 54 cents in 2007 and then 65.2 in 2010. There have been fluctuations with the ratios to Caucasian men where in 2005 median income was $36,010 and has risen to $46,271 in 2014, nearly equaling Caucasian women that year. Hispanic women saw great disparity in comparison with Hispanic men in 2005, earning only 63.4 cents to every dollar earned by a Hispanic male. The data for 2010 shows that they are nearly reaching pay equity at 97.3 cents. They still only made 54 cents to Caucasian women in 2005 and have seen an increase of 20.9% to make 65.2 cents in 2010. The greatest disparity is the ratio with Caucasian men. Hispanic women have the lowest ratios of the group earning only 51.2 cents per dollar earned by Caucasian men, which dropped to 37.3 cents in 2007 but saw gains again to 57 cents in 2010, an 11.4% increase for those years. Overall this data shows that from 2005 to 2014 Caucasian men have seen a 44% increase in their median incomes, far outperforming any other group. Caucasian women saw an 18% increase, African American males saw the smallest increase at 9%, African American females had the second largest increase at 25%, followed by Asian males, 20%, and Asian females at 15%. As of 2013, women in New Orleans were paid 76 cents, African American women are paid 64 cents and Hispanic women are paid 55 cents on every dollar earned by a Caucasian, non-Hispanic man. (ACS, 2013)\(^\text{30}\).


<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Ratio of Women's to Men's Earnings</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>•Caucasian</td>
<td>81.6</td>
<td>71.0</td>
<td>83.0</td>
<td>78.9</td>
<td>-2.7</td>
<td>-3.4</td>
</tr>
<tr>
<td>•African American</td>
<td>79.3</td>
<td>72.7</td>
<td>80.0</td>
<td>91.1</td>
<td>11.7</td>
<td>14.8</td>
</tr>
<tr>
<td>•Asian</td>
<td>98.6</td>
<td>100.0</td>
<td>87.3</td>
<td>94.1</td>
<td>-4.5</td>
<td>-4.5</td>
</tr>
<tr>
<td>•Hispanic/Latino</td>
<td>63.4</td>
<td>53.9</td>
<td>97.3</td>
<td>ND</td>
<td>33.9</td>
<td>53.5</td>
</tr>
<tr>
<td><strong>Ratio of Women's to Women's Earnings</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>•African American to Caucasian</td>
<td>60.1</td>
<td>61.3</td>
<td>64.9</td>
<td>63.3</td>
<td>3.2</td>
<td>5.3</td>
</tr>
<tr>
<td>•Asian to Caucasian</td>
<td>90.1</td>
<td>54.0</td>
<td>65.2</td>
<td>NA</td>
<td>-24.8</td>
<td>-27.6</td>
</tr>
<tr>
<td>•Hispanic/Latina to Caucasian</td>
<td>54.0</td>
<td>54.0</td>
<td>65.2</td>
<td>NA</td>
<td>11.3</td>
<td>20.9</td>
</tr>
<tr>
<td><strong>Ratio of Women’s to Caucasian Men's Earnings</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>•Caucasian women to Caucasian men</td>
<td>94.8</td>
<td>69.0</td>
<td>87.4</td>
<td>77.9</td>
<td>-16.9</td>
<td>-17.8</td>
</tr>
<tr>
<td>•African American women to Caucasian men</td>
<td>57.0</td>
<td>42.3</td>
<td>56.7</td>
<td>49.3</td>
<td>-7.6</td>
<td>-13.4</td>
</tr>
<tr>
<td>•Asian women to Caucasian men</td>
<td>85.3</td>
<td>55.2</td>
<td>88.3</td>
<td>68.0</td>
<td>-17.3</td>
<td>-20.3</td>
</tr>
<tr>
<td>•Hispanic/Latino women to Caucasian men</td>
<td>51.2</td>
<td>37.3</td>
<td>57.0</td>
<td>NA</td>
<td>9.5</td>
<td>11.4</td>
</tr>
</tbody>
</table>


Eliminating the wage gap would provide much needed income to women whose salaries are of critical importance to them and their families. The Paycheck Fairness Act was put forth by President Obama in 2014. This legislation would strengthen the Equal Pay Act of 1963 and help women fight wage discrimination by putting gender-based discrimination on equal footing with other forms of wage discrimination, such as race or national origin, and allow women to take legal action for damages and force employers to prove that pay differences exist for legitimate, job-related reasons. The proposal was blocked by the United States Senate in 2014.

7.1.6 Wage Gap by Education

Education levels can play a pivotal role in determining the economic and social status of a woman. Without a marketable skill set a woman, or any person can quickly become entrapped in low paying jobs that do not provide a living wage. While education is not the panacea for all women, it is definitely an advantage that cannot be underestimated. A woman’s education can often decide what type of job she will be able to get and often low education has been equated with ‘pink collar’ jobs rather than managerial and professional occupations (Willinger, 2008). All of the in-depth interview participants had graduated high school and gone on to have some college or even graduate school. To many of the women with only a high school degree, getting training was among one of their highest goals, highlighting how important
this issue is to many who felt they wanted more opportunities to better educate themselves in order to earn a living wage.

**Table 7.4: Educational Attainment and Median Earnings by Sex for Population 25 Years and Over 2010-2014**

<table>
<thead>
<tr>
<th>Education 2010-2014</th>
<th>Males</th>
<th>Females</th>
<th>Ratio to Women to Men's Earnings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than high school diploma</td>
<td>$17,868</td>
<td>$14,522</td>
<td>81.3</td>
</tr>
<tr>
<td>High school graduate, includes equivalency</td>
<td>26,834</td>
<td>18,508</td>
<td>69.0</td>
</tr>
<tr>
<td>Some college/Associates degree</td>
<td>34,752</td>
<td>24,439</td>
<td>70.3</td>
</tr>
<tr>
<td>Bachelor's degree</td>
<td>50,184</td>
<td>39,657</td>
<td>79.0</td>
</tr>
<tr>
<td>Graduate degree</td>
<td>73,947</td>
<td>51,160</td>
<td>69.2</td>
</tr>
<tr>
<td>Total</td>
<td>37,286</td>
<td>28,508</td>
<td>76.5</td>
</tr>
</tbody>
</table>


Table 7.4 displays the most recent data on the earnings of New Orleans’ women and men based on educational level. The greatest parity of earnings by educational attainment is between women and men who have less than a high school diploma where women earned 81.3% of what men earned ($17,868 and $14,522 respectively). The second greatest parity is between women and men who have earned a Bachelor’s degree where women earned 79% on average as much as men. However, women still earned less on average than men with a Bachelor’s degree ($39,657 vs. $50,184 respectively). Women with a graduate degree earned 69.2 cents on every dollar earned by men with the same degree. One interesting outcome is that women with only a high school diploma earn the same as those with a graduate degree and nearly 10 cents less than those with a bachelors indicating there may be a lack of ‘equal pay’ opportunities for highly educated women living in New Orleans.

Education can have a profound effect on wage gaps between race and gender as has been shown by Derek Neal and William Johnson in 1998, *Basic Skills and the Black White Earning Gap*, who point out in their research on examining the relationship between basic skills and income that education is vital to closing the income gap between races. This can also apply to gender and the notion that women who are increasingly educated will be able to step out of the cycle of poverty that keeps them economically entrapped by their abusers.

*7.1.7 Wage Gap by Occupation*
The median earnings by occupational category for men and women in New Orleans working full-time, year round in 2005-2014 show the averages for five major categories of employment: “Management, Professional, and Related”, “Education, Training, and Library”, “Service Occupations”, “Sales and Office Occupations” and “Construction and Extraction”. In the management, professional, and related” category women have traditionally lagged behind their male counterparts and in 2014 women earned $48,160 compared to $69,750 for men. Every category saw an increase in earnings from 2005-2007 with the exception of men in “education, training and library” job where men’s earnings dropped by -24% but still men were earning more than women ($50,744 and $42,949 respectively). The “service occupations” category has traditionally seen men and women earn close to the same but always with men earning more with the highest gap in 2007. While women’s earnings in “sales and office occupations” increased by 22%, men saw their earnings increase by 33% overall. Interestingly men saw a 103% increase from 2005 to 2007 in earnings while that same time frame only saw an 8% increase putting women at a severe economic disadvantage. Surprisingly the largest percent increase was among women in traditionally male dominated jobs in the “construction and extraction” category. Women gained a 51% increase with salaries growing from $21,202 to 32,096 between 2005 and 2014. Remarkably incomes for both men and women were closer in parity from 2010 to 2014 than any other category other than “education, training, and library”.
Finally, when examining the percentage of women in the workforce the “Management, Professional, and Related” category is at 51%, up 6 percentage points from 2005. Women have increased in the “education, training, and library” category from 6% in 2005 to 19% in 2014, up 13 percentage points. The “service occupations” have remained constant over the last decade at approximately 20%. “Sales and office occupations” have seen a 7 percentage point gain and women make up 30% of that workforce. The “transportation and material moving” category, a predominantly male occupation have seen small increases but remain a very small part of the female workforce. While women are making gains across the board there still remain great disparity with income parity. Women are still lagging behind and these wage inequalities further exacerbate women’s struggle to gain an equal footing with men.

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<td>Management, Professional and Related</td>
<td></td>
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</tr>
<tr>
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<tr>
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<td>41,519</td>
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<tr>
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<tr>
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<tr>
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<tr>
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<tr>
<td>Sales and Office Occupations</td>
<td></td>
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</tr>
<tr>
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</tr>
<tr>
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</tr>
<tr>
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<td>80,241</td>
<td>76,488</td>
<td>65,178</td>
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<tr>
<td>Construction and Extraction</td>
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<tr>
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<tr>
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<td>31,396</td>
<td>32,096</td>
<td>51%</td>
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7.1.8 Limited Access to Affordable Housing Builds a Racial Divide

Inadequate housing is a very important barrier to help-seeking strategies discussed by participants. Being able to decide to leave or to even get away requires that women have a place to go. After Hurricane Katrina the availability of affordable housing became severely limited and as a result rents have increased dramatically.

Housing discrimination, it has been argued, is not a mistake but a result of carefully planned policies that keep neighborhoods segregated (Seichnaydre, 2007). The city’s six most renowned housing projects were racially segregated from the 1930s to the 1960s, two for Caucasians, four for African Americans, as was the case through much of the South. In the years prior to Katrina nearly all 5,000 residents in New Orleans public housing were African American. Living conditions were bleak and the projects were often hotbeds for crime and illegal drug dealing. In response to this the city has embarked on a new ‘mixed income’ housing program in order to provide affordable living spaces for residents who lived in the pre-
Katrina projects. Today modern apartments have replaced the projects where there are pools, job placement services and other activities for residents (npr, 2015). While some see the new housing as an improvement over the drug and crime fueled projects, others feel it does not have the same sense of community they once felt. Some residents were given government vouchers to subsidize housing in other parts of the city but could not use them if they stayed in public housing. Even with vouchers, many could not afford rents in other parts of the city and if they could, it was usually in very poor, high crime areas.

About one-third of the 5,000 plus displaced residents have found other public housing according to National Public Radio (Quigley, 2013). Figure 7.6 illustrates just how many people occupied the Big 4 housing developments and how many are there now. Very few of the original residents actually returned to live in the new housing but the number of vouchers has doubled (National Public Radio, 2015).
The Louisiana Republican Congressman Richard H. Baker thanked Katrina for doing the urban landscape a favor, remarking, “We finally cleaned up public housing in New Orleans. We could not do it but God did.” (Ait-Belkhir). While not all politicians and powerful players have this same attitude it is a statement that in itself sums up a long undisclosed attitude towards public housing and low income populations.

Approximately 51% of renters in New Orleans paid unaffordable housing costs in 2013, significantly higher than the 42% of renters nationally (The Data Center, 2015). Homeowners also struggle in New Orleans as 27% spend more than 35% of pre-tax household income on their mortgage, taxes, utilities, and insurance compared to only 19% of homeowners nationwide (The Data Center, 2015). Nearly 142,000 housing units were severely damaged or destroyed as a result of the storm and roughly 80% of the units that were most severely damaged were affordable-to-low-income housing. In 2007, the U.S. Department of Housing and Urban Development (HUD) demolished 4,500 public housing units that were replaced with mixed-income housing, leaving only 744 units for low-income residents (Quigley, 2007). There is a new trend in public housing to build mixed income units that is meant to de-concentrate poverty and revitalize neighborhoods.

Housing is a big problem with our survivors. Most are renting and living of the edge, so to speak. They cannot afford the higher rents and getting into public housing is difficult. Women who used to live in the public housing demolished by HUD are displaced and most of them were low-income black women (404).

The number of people living in public housing in New Orleans has dropped dramatically from 5,000 families in 2005 to 1,900 families in 2015 (National Public Radio, 2015). Social network interview participants often spoke of the need to have more temporary housing for women who were escaping DV.
Today there are several undisclosed shelters that women can go to where most can stay up to 30 days and sometimes longer, if needed. What women really need is a type of transitional housing where they can live safely and look for employment and housing. While there are services available in the city, they are not enough to handle the need for DV survivors. New Orleans shelters have been improved since Hurricane Katrina, from open, impersonal spaces to more apartment style shelters, these are only short-term solutions to long-term problems and are woefully lacking in space and availability. Hurricane Katrina had a profound effect on New Orleans middle class women who were homeowners. Many of the middle class African Americans who returned to the city were faced with overwhelming bureaucratic obstacles to be compensated for their homes and to rebuild. Many chose not to return, opting to live in other cities where there were better opportunities.

Middle class women are far from being economically secure. Economic vulnerabilities included a lack of credit and credit cards, inadequate transportation, little to no savings and inadequate to non-existent insurance. Because of this many participants relied on assistance from the state’s Road Home Program. Through this program eligible homeowners were able to receive up to $150,000 in compensation with the awarded amount based on either the home’s pre-storm value or an estimate of how much it would cost to rebuild it. The state required that the program chose the lower of the two figures. One study of the middle class neighborhood of Pontchartrain Park received an average of $40,000 to $65,000 whereas Caucasian middle-class neighborhoods like Lakeview received a higher concentration of grants ranging between $115,000 and $150,000 (Gafford, 2010, and Hammer, 2008).

There is a long list of racial inequality among African Americans, particularly the middle class. One such example is the placement of Interstate 10 in the late 1960s through the Treme neighborhood. This was, at the time, considered to be the business and cultural center for African Americans living in the city. Decision such as these displace communities and disrupt the continuity of business and daily life. Today the city still approves projects that are slated to improve neighborhoods and provide economic incentives. One such project is the high-rise development being proposed in Lower Nine Holy Cross neighborhood, one that has traditionally been middle class but has fallen on hard times since Katrina and the lack of redevelopment since 2005. The 250 units and mixed use buildings being proposed are promising to bring a rejuvenating element to the neighborhood but residents have said that the project is out of line with the historical buildings in the area. Also, neighbors are concerned about rising housing costs and the ‘gentrification’ that will come and further dilute the cultural value they place among the long-standing families who have lived there for generations. Residents there had very little say about the approval and subsequent design of the project. Their only recourse was to stall and fight as long as possible. It does
not go unnoticed that these types of high rise developments are not occurring in wealthier neighborhoods and people here, mostly African Americans feel left out of the development process.

7.1.9 Domestic Violence, Homelessness and Eviction

Many in-depth interview participants discussed their landlords either trying to evict them or doing so after bouts of DV and some reported they were homeless for a time, one woman for months.

I didn't have any kids and I was not considered an emergency situation anymore and I was homeless. I got evicted from my apartment and I didn’t know what to do. For two weeks I slept in my car for a total of five months I was homeless out there ...when I came home everything was new because this was after Katrina, I didn't know who was who anymore. Every organization said they do not have funds, they're full, they cannot help you. (113)

Seventy-five percent of homeless adults in Louisiana report being victims of DV and nearly one in three residents in Louisiana domestic violence shelters reported being evicted because of actions of their abusers (Theberge, 2015). According to Beth Meeks, executive director of the Louisiana Coalition against Domestic Violence (LACDV), nearly 50% of women in shelters in Orleans and Jefferson parishes, and 67% in St. Bernard Parish shelters, are homeless victims of domestic violence with nearly 2,700 women turned away each year from shelters statewide due to inadequate space, and evictions are a large part of why women are homeless. Until August of 2015 women had no legal recourse against eviction in the face of DV issues. Last year legislation was passed and the Louisiana Violence Against Women Act went into effect. This was one of the most ambitious legislative packages ever to change how criminal justice agencies handle DV. Many landlords have a ‘zero tolerance’ to DV and will evict tenants with no questions asked. Many women simply cannot fight the eviction and rather than having it on their record, they simply leave. The tenets of this legislation state that anyone in need of emergency assistance can contact police without penalty. This is important because many lease agreements will state that a single call to the police is grounds for eviction. It also states that no tenant can be evicted because of DV by their abuser. In New Orleans 50% of shelter residents stated they had been evicted because of actions of the abuser, even when they did not live at the residence. Finally, survivors of DV can no longer be denied housing because of DV and can also terminate a lease at any time without forfeiting a deposit if they are trying to leave an abusive situation. (Theberge, 2015).

7.2 Summary

Economic entrapment for women stems from the analysis that post-Katrina New Orleans is trending back towards its pre-Katrina status as a sluggish regional economy with high inequality and not enough opportunities for its residents. While the news media focused on the failures of the government to react to
the crisis efficiently as well as the failures of FEMA, little attention has been given to the long-term effects of weakened government capacity and its core function in providing aid, services, and jobs to impoverished urban communities, as well as the historical role of race as a causal factor that has shaped these intergovernmental relations. Katrina reflected decades of policies that have negatively impacted low-income populations, mainly African American women.
CHAPTER EIGHT
SOCIAL ENTRAPMENT: BARRIERS TO HELP-SEEKING

Social barriers to help-seeking among women experiencing domestic violence (DV) are among some of the most complex and important themes in this research. Each in-depth interview participant discussed some form of social barrier she felt impeded her help-seeking from both formal and informal institutions. Informal networks include family, friends, neighbors, co-workers, and could include fellow students. Formal networks include the judicial system (police and courts), medical and mental health services, social services (battered women’s programs and shelters) and the faith community.

Control tactics used by abusers combined with social and institutional failures to address DV are largely responsible for the social entrapment of women (Ptacek, 1999). Emotional and even sometimes physical desertion by their family, friends, and social networks can leave women with a sense of isolation and hopelessness. Also, the lack of institutional support from the judicial and social systems leave many women without avenues of escape. Because of these informal and formal breakdowns, many participants stated they simply felt they would never be able to leave their abusers. Chapter eight comprises the most important socio-cultural barriers participants discussed during their interviews with a focus on the destruction of social capital in both formal and informal networks. These include: 1) diminished support from informal and formal networks, 2) social and institutional failures and 3) lack of access to information and awareness of social services.

8.1 Destruction of Social Capital

In-depth interview and social network participants stated clearly that in one way or another they had experienced a destruction of social capital as a precursor and most often as a result of DV. Social capital in the context of this research refers to a person’s resources in society and to which she will go to in order to meet her needs. When these forms of social capital are diminished or destroyed they render victims of abuse to a world where they lack choices and capabilities to improve their lives. Without social capital many victims will succumb to depression and hopelessness with the result that they do not have the ability to get away from their abuser. Not only do they become weakened mentally and sometimes physically, but they may also become complacent with their situations which could ultimately do great harm, not only to themselves but, also to their families.

8.1.1 Diminished Support from Informal and Formal Networks
Throughout this research the support women received from their informal and formal networks has been crucial to their decisions to seek help. When this support was perceived as weak or non-existent women stated they were not sure how to leave and would stay in their relationships longer, often justifying the behaviors of their abuser. It is imperative that victims of DV feel they have recourse and the capabilities to seek out information and act accordingly, without fear. While support networks can be helpful they do not always ensure complete safety for abuse victims. They can, however, provide temporary solutions while victims are determining how to seek help in order to help themselves and their families. Awareness of the problem of DV is so important to a society that in many ways is poised to move forward in a post-Katrina environment, but is also in danger of leaving many of its citizens trapped in economic and socially binding situations where they can find no avenue out of an abusive life.

8.1.2 Isolation and the Fear of Stigmatization

Women interviewed often pointed to the feeling of isolation due to their abuse. Most felt their abusers used it to their advantage because if they were isolated they would be less likely to talk about their situation to others. To further complicate women’s attitudes towards their abusers is the social stigma that often goes along with DV. Women can feel shame and do not want to tell people about violent episodes, especially if their partners are well liked by friends and family, or hold important positions within society. Stigma is a very powerful feeling that keeps women socially entrapped by DV due to the fear of being ostracized or more importantly, not believed. The gender underpinnings of these socio-cultural values find its roots in the gender roles of men and women and their perceived roles in society. Men’s power over women, even in the minds of the women themselves, present very real barriers to help-seeking. One survivor told her story of being married to a high profile Baptist preacher and how she could not let the public know about her domestic abuse for many years. She was older and stated she came from a time where you just ‘did not discuss it’. The stigma and hypocrisy she felt was too great.

There are several social factors that play an important part in women’s help-seeking. Age, culture, ethnicity, and religion were often roadblocks to resources for many women. Religious beliefs, texts, and teachings may provide skewed interpretations that condone the abuse of women. These religious beliefs can also be rooted in deep cultural traditions. Several of the women interviewed would often seek direct support or counseling from religious leaders, some of whom provided guidance to stay in their relationships, particularly if they were married. Age also plays a role as older women may have fewer resources because they are no longer working, are married to high profile men who are successful in the community, or just simply have different viewpoints on what women should accept from their relationships. Culture and ethnicity play a large part in help-seeking as they help to define what social
values are accepted and also how institutions serve them. In some cases, women found it shameful to seek help due to the stigma of DV in their culture making help-seeking very difficult. Cultural values can be valuable tools in addressing DV in society, but they can also become a liability in that they allow for abusive practices against women to take place without consequences. In New Orleans, the culture overall condemns DV and puts forth laws to protect victims but there is a lackadaisical attitude among, socially and politically, particularly in the NOPD, that DV cases wastes officers’ time and is a matter that should be dealt with privately and not by the police department further creating a stigma that DV is not a worthwhile reason to call the police.

Many women interviewed who grew up in New Orleans highlighted the stigma older women may feel because they come from a school of thought where DV is acceptable and there is not much a woman can do about it. When asked the questions “Do you believe that stigma is more prevalent in older generations versus younger ones?” one social network interview participant said:

Yes, I do because you are looking at so many people who took the abuse and the couples at that time thought it was acceptable. The husband comes home on a Friday night and abuses his wife or something like that from what I hear from my survivors…that their parents did it and that because their mothers stayed, they stayed. You do not leave, especially when you're looking at the culture. You do not report your husband because it was the norm for him to come home from partying and slap the wife around. But now, survivors are telling their children, this is not allowed. Just because my mom did it, we are not doing it anymore so I love the idea they are knocking down their walls and teach it is not acceptable. (414)

Several participants stated that the abuse was something they were brought up watching and that was the way that couples interacted with one another and that it was something you did not bother other people about because it can have a feeling of normalcy due to its pervasiveness in their culture.

All of those grandmothers found 30 years ago were just used to the abuse. And the attitudes still hold true today that households are run on coercion and control. It is this whole piece of what intimidation and isolation looks like and our culture really misses it, right? We do not see it. And I think here, especially, there is still a culture of silence. It is shocking to me to find that after all these years not much has changed. I do not want to tell anybody about my past...not even my hairdresser. Oh no, she's the last person I would tell because of the gossip, right? You keep that on the inside. (415)

Many women found it important to point out that while talking about their experiences and looking back, they did not recognize they were being abused, especially in the beginning. In most cases, small things would happen over time and then escalate into more serious situations such as arguments, throwing things, and control issues. While some women stated they felt they had support from their informal networks, others felt that after some time, and particularly if they went back to their partners, their friends
would not be able to understand why they would return to an abusive person, become frustrated, and just not want to hear about it anymore.

The abuse was accepted and it is just what your husband and your life did and you kept it behind closed doors so when I started seeing that it stopped me from even talking to somebody else because they did not even want to hear it. They wanted to pretend it was not going on. I found out that most of these same people that I am trying to talk to are helping him watch me so I did not know who to trust...I did not know who to go to. (013)

This is one of the most damaging scenarios for victims of DV because their self-esteem is already fragile and to have informal support withdraw during such a volatile time can lead to a feeling of complete hopelessness. These are real concerns for not only the abused but for the social workers as well who realize that women who do not have strong support systems, formal or informal, are far less likely to leave their abusers and this often puts their lives in danger. Supportive networks had a considerable influence on women in this research by helping them make connections with other resources and to break through the barriers that would so often keep them from seeking help from both informal and formal networks. Social support for abused women can reduce their isolation and fear to make changes (Stark and Flitcraft, 1996; Sullivan and Bybee, 1999).

All of the women interviewed discussed the importance of social networks and how it was usually one counselor, or one friend who made the difference by believing in them, therefore allowing them to believe in themselves. Perhaps the number one questions women are asked is “why not just leave him” but it is much more complex than that considering each couple faces unique problems and challenges and each woman faces her own set of barriers that disallow her to leave the abusive relationship and stop the cycle of abuse. One woman who was a recent immigrant to the United States had no friends outside of her American family and the intense isolation resulted in her staying in an abusive relationship for ten years. It was not until she was questioned by a co-worker about bruising on her neck, and the fact she was wearing a turtleneck in the summer, that she was taken to the police to file a report. In that same time the police were extremely unsupportive and unsympathetic to her situation, interrogating her in front of her young son and others who happened to be in the NOPD precinct that day, greatly distressing her and creating a fear that someone who knew her husband would be present, endangering her even further.

Cultural aspects that women were most concerned about was the numbness they felt from the abuse combined with the knowledge they live in an extremely dangerous city with high crime. African American communities in New Orleans do have a sense of being together but still many women feel isolated because they have either lost family members to violence or have extended family living outside the city, often due to Hurricane Katrina and the demolishing of several large low-income housing projects. While no Vietnamese women participated in this study it is another cultural aspect that
challenges social institutions working with DV survivors. The Vietnamese community, for the most part living in New Orleans East, is a very tight knit community but represents the lowest percentage of clients coming through NOFJC. One social network interview participant stated that this is due to the cultural value placed on keeping issues like DV quiet and also that women tend to play traditional subservient roles to men where they tolerate and accept abusive behaviors, a dynamic that may put them at higher risk for DV. There are also very few social workers who speak Vietnamese or have a cross-cultural understanding of the community and how to approach the taboo subject of DV. It is another reminder of the gaps that still remain in New Orleans and its multicultural composition.

We have a lot to learn about the use of violence in relationships, especially in our culture where there is such a complex cross-section of people...we have done some significant focus groups with black women where violence is a norm in many cases and we have to better understand that...cultural sensitivities in the Asian/Vietnamese, black and Hispanic communities...we are just beginning to see the correlations and common threads but I think it does look very different if you look at some of the cultural aspects. (414)

Hispanic women, a growing demographic in New Orleans, face unique challenges in help-seeking due to DV. According to the NOFJC, Hispanic women in the United States, may be undocumented immigrants and are fearful they will be deported if they report their abusers or go to shelters for help. While the NOFJC and other agencies in the parish are focusing their awareness campaigns to the Latino community in order to make their services more available. Hispanic women in New Orleans are often isolated from a larger community that has traditionally provided social and economic support in their native countries. Language barriers also present a problem, particularly if women are trying to navigate a complex legal system unfamiliar to them. In 2013, President Obama signed into law an expansion of the 1994 Violence Against Women Act (VAWA) that allows undocumented immigrant victims of DV to be legally protected from persecution or deportation through shelters and restraining orders. This was a watershed moment for victims of DV who are in the United States and undocumented. The NOFJC offers legal counsel specifically geared towards Hispanic victims of DV, helping them to navigate through the immigration and judicial systems as well as conducting support groups where women can voice their experiences, creating a sense of community among them. They also give them an avenue to leave their partners, often not an easy feat if you have no income and barely understand the English language.

Almost all the in-depth interview participants stated they left their partners several times before they could not endure the abuse any longer. According to the Director of the NOFJC, women try to leave an average of eight times before they finally get out, which also lends to a feeling of isolation and stigma. Families and friends who make up the majority of informal networks can fail to understand how difficult it is for some women to leave, especially if they have children or poor prospects for their own economic
independence. Once again the stage will be set for frustration and misunderstandings on the part of many good intentioned supporters, who cannot cope with the ‘drama’ and volatility of DV. It should also be noted that many do stay the course and are pivotal to positive outcomes in help-seeking.

My friends were upset when I went back to him. I lost a lot of friends. One of them even said, ‘you are not making sense, all I am hearing is an addict who is making excuses to go back to her habit’, and that was a friend I’d had for over 15 years. I do not talk to him anymore. I lost a lot of friends because of that. (003)

Many women may not even consider seeking help due to the large amount of investment they feel they have in the relationship. These include social investments and often if the abuser was a high profile society figure it was even more difficult to seek help due to the damage it would inflict to either one or both partners’ careers and the dissolution of certain lifestyles to which they had become accustomed.

I tried to help my partner but I was not able to because of that. There is a lot of PTSD and some borderline personality going on but I cannot help that situation and it is better that I am away but do not want to abandon my partner. I feared more violence. I felt like the violence became normal. I was embarrassed and ashamed. I was afraid of the stigma and felt like I might not be believed or even blamed. I know women who were not believed. (007)

All the women in this study eventually did seek help, all were divorced and free of abusive relationships. Women felt the added stigma and isolation due to them being married to high-profile, successful men who made it very clear that if they ever went against them and discussed their ‘private lives’ with any source that could make the story go public, they would be left without any financial security as well as threats to them losing custody of their children. These women felt they had no recourse against such a ‘powerful opponent’ but did eventually find the strength to leave and accredited it mostly to their interactions with their informal and formal networks. The same stigma occurred among women from low-income communities due to a social norm that silences victims of DV. Social acceptance and the fear of being stigmatized are powerful barriers to help-seeking. What is interesting is the quiet undertone that exists in New Orleans where high rates of violence are the norm. DV issues can often pale in comparison to murder, but the fact is that DV may often lead to murder and is a very real threat to women’s capabilities to live meaningful lives.

8.1.3 Investment in the Relationship and Love

Feeling a strong investment in intimate relationships is perhaps one of the most powerful barriers to help-seeking. All the women interviewed really loved their abusers, and some still do. Some of the women stated they felt confused by loving someone who abused them but justified it by believing that somehow the abuse was the abuser ‘loving them’ because to be that angry one must have deep feelings involved. Many stated that the reason they would stay is that “deep down they knew the abuser loved them”.


Do I love him? I always felt I loved him. That is what I kept telling myself. (014)

This is a form of ‘emotional entrapment’ and was perhaps the most difficult aspect to reconcile for many participants. Several women stated that when they met their partners, they were ‘charming’ and ‘over the top in love with them’. Again, they did not experience DV at the onset of their relationships but usually suspected things were dramatically shifting about one to two years within the union. Many times the controlling behavior would start out small when their partners would criticize what they were wearing or what they bought at the grocery, cooking, or how they treated other family members or pets. Because the abuse can be so insidious women tended to adapt rather than consider themselves in a full-on abusive relationship. Their experiences correlated perfectly with the theory of ‘traumatic bonding’ in which the intermittent reinforcement of reward and punishment creates powerful emotional bonds that are resistant to change (Sanderson, 2008). It is often described as the “misuse of fear, excitement, sexual feelings, and sexual physiology to entangle another person” (Samsel, 2013). Bonding is partly why it is harder to leave an abusive long-term relationship and the bonding makes it hard to enforce boundaries with people we love, or think we love. Almost every participant discussed this phenomenon as part of their experience and something that deeply affected their decisions to seek help.

I guess I was just gullible, vulnerable at the time. I just wanted to be loved. (012)

I ignored it because I thought I was in love with him. As much as you can be. I feel stupid for thinking like that. I do not know if I did not have enough self-confidence? Or maybe I was just so wrapped up in how I loved him at one point. I thought he would change his playboy ways and he would marry me. When we were together it was beautiful. (006)

Many participants stated they were afraid they would lose their relationship entirely, leaving them with an even greater sense of isolation and a fearfulness of the unknown. There was a fear that once people knew about their relationship then they would have less ability to return to their husbands/partners when things got better. Again, they feared the reprisals from the very people they sought help from when the abuse was occurring. Some even stated that once they felt they had their friends and family on their side and began hearing the negative comments, they felt defensive of their abusers.

In some way I felt like getting help would end the relationship with him and that I would lose my husband. I was worried about bringing a bad name to my family. (004)

The complexities that women felt along with trying to keep their commitments to perpetrators they thought they loved became a type of emotional entrapment they themselves could not recognize. When faced with leaving, sometimes the only thing one knows, having a sense of isolation and stigmatization can be devastating to any victim of abuse trying to leave the relationship and start over.
8.2 Institutional Failures

Social institutions were often described by participants as lacking cultural competence when dealing with issues of DV. Cultural competencies within the realm of DV include the attitudes and subsequent policies that allow agencies to function within diverse cultural settings, allowing them to effectively create and implement strategies to combat DV (Rorie, Paine, and Barger, 1996). Women face challenges and barriers when dealing with legal, judicial, legislative, business, and religious institutions. These were the top categories and themes of barriers that women faced in formal networks and they have had, and continue to have, profound influence on women’s perceptions of DV and help-seeking behaviors.

8.2.1 Inadequate Police Presence and Response

Often the first line of defense for battered women is to call 911 for police intervention. In the confusion of intense physical and mental abuse police may have a difficult time discerning between the perpetrator and the victim and how to adequately handle the situation. These factors point to the need for adequate training and protocols when responding to DV calls. The New Orleans Police Department (NOPD) has addressed issues of DV in recent months but has long been seen as being inept when dealing with victims and perpetrators of DV along with allegations of corrupt, mismanaged, and ill-trained officers.

All participants interviewed, including NOPD police officers, agreed that there was much to be done to improve the efficacy and reputation of the police department. At the end of 2015 the NOPD consisted of 1,163 sworn officers, a number that seems strikingly low for one of the most dangerous cities in the United States. Between 2008 and 2014 the NOPD lost 22% of its officers, the fourth biggest drop for any police force in the country over that span. The NOPD averages 350 officers per 100,000 people, a ratio that matches up with the median ration of the United States most violent cities (Asher, 2016). The NOPD is currently in the process of adding more police officers as well as restructuring patrols to elevate the police presence across New Orleans. Beginning in February, 2016, 54 police officers were reassigned from administrative tasks, replaced by civilian workers, and added to patrols. These additions will help the NOPD to decrease already high response times, which averages 73 minutes (Sanchez, 2016).

Many women stated they felt the NOPD had negative stereotypes of them if they lived in poorer neighborhoods, or had been called to their homes on more than one occasion. The perception is that there is an implicit bias in law enforcement, stereotyping that discriminately targets minorities. According to Deon Hayward, the director of the New Orleans women’s health organization, Women with a Vision, states that “the stereotype of African American women is the angry black woman. If you are not cowering in the corner and you are not frail or weak, then you cannot be a victim, because you're angry.
If you live in a society where all you ever heard about this particular population is something negative, you are going to see that when you approach them, unless we get past that. If nobody looks like you, you feel like no one can relate to your experience and you still feel isolated, as isolated as you were when you were in that situation."

Mistrust in the NOPD weighed heavily among nearly all the respondents, who complained the police have not been adequately trained to survey a DV scene and ascertain who is at fault, often simply taking both victims and perpetrators to jail. This was a major reason for several women stating that calling the police was simply not an option to them. In addition, many women who are traumatized by incidences of DV are very volatile and may not respond well to male officers responding to the scene, especially if they feel the officers are not there for them.

Due to allegations of discrimination and unconstitutional conduct over several years, Mayor Mitch Landrieu approached the United States Department of Justice (DoJ) to come to New Orleans and evaluate the police force. In 2012, in response to a negative review of civil rights abuses and corruption, the NOPD and DoJ entered into a Consent Decree that monitors and reviews police activities as well as sets the policy for better training. The DoJ report’s findings showed that the NOPD has engaged in gender discrimination, particularly the LGBT community and victims of sexual and domestic abuse. Among the 3,420 protective orders issued to victims of DV in Orleans Parish in 2012, none were for LGBT (Woodward, 2013). The DoJ report also showed that large amounts sexual assaults were misclassified and ‘unacceptably investigated’ (USDoJ, 2012).

Other problems included poor response to 911 calls and a failure to perform follow-up interviews. The average response time for the NOPD in 2015 was 73 minutes (Daly, 2015). Between January and July 2010, the NOPD took 6,200 calls for service regarding DV: 1,200 were assigned to the DV unit detectives, and officers in corresponding districts handled 2,700 cases, while another 1,500 reports — nearly one in four calls — went "missing"(Woodward, 2013). It was also noted the NOPD had no operations or DV manual and no information regarding protocol on how to approach scenes of abuse, to deal with frightened and upset victims and out of control perpetrators. There were no systems in place to note symptoms of physical abuse or to ask witnesses, even if only those who heard the abuse to weigh in on the dynamics of the situation. Before the DoJ report, officers received a total of two hours of DV training while attending officers training school. Today NOPD officers receive approximately eight hours of training from the NOFJC on how to handle DV situations, learning policies and procedures and current laws regarding DV.
In 2014 New Orleans became the first city to model itself to the *Blueprint for Safety*, a single policy that takes an interagency approach to DV from the initial 911 call to the probation and parole of abusers. The policy was designed by the New Orleans Health Department (NOHD) to help prevent victims of DV from being overlooked or underserved in a complex and often intimidating legal system. The main goals of this new policy center on enhanced communication between agencies, document sharing, and police training protocols and procedures. Police officers are now required to treat DV calls as ‘code 2’ which means they must have faster response times, are required to write incident reports accompanied by an extensive 46-point investigatory checklist. Supervisors are required to examine these reports and submit a detailed 41 checkpoint list they must fill out as well. With all of these new regulations in place some police officers are complaining they are spending too much time on DV calls and sexual assault cases. A 2015 article in *The Times Picayune* interviewed NOPD officers who complained that Tulane University, instrumental in writing the new DV investigation protocols, were “making decisions for the police department, given carte blanche to write our policies and it is working to the detriment of every other taxpaying citizen in the city.” Many complained that new laws where the primary aggressor must be arrested leaves them in a difficult situation and often there is no ‘probably cause’ (Daly, 2015).

Police officers are now being trained to recognize clues that tell who the perpetrator and victims are and how to properly document the scene. This is in response to previous policies that simply took all parties involved to jail, no questions asked. This was mentioned over and over again by abuse victim participants who have interacted with the NOPD.

No one really respects the police here and I cannot say I blame them… it seems like they offer protection, but not really. All I know is that if they want to, and they usually do, they will take both of you to jail and for that reason I never wanted to get involved with them. I just thought I could handle it myself. (004)

Experiences at the police station were very negative for one in-depth interview participant who stated she felt she had no support at all, and even more importantly, no compassion or understanding. She went to the police station after a violent incident with her husband. When she fled the house she took her children with her. Upon trying to tell the police her story they failed to take her into a private room and also failed to take her children into another area where they could not hear her or see her becoming very upset.

You tell them your whole story right there at the front desk of the police station. My son is sitting behind me. I have to talk like this and two more people came and they heard everything. They had nothing to do with the complaint. At one point I just wanted to go because I felt like this was the wrong step. They stopped me and asked me if I could go home and I said what do you want me to do? Of course I cannot go home. And they were a bit nicer but they also did not have the decency to take me to a separate room. At that moment I was not in the condition to even suggest it. I was confused and emotionally involved and it made me feel bad. We spent three hours there. They filed a police report but told me it might not go anywhere. I said I really just wanted
it to be documented. I had no concept of how things would go and I would not even have gone if I had known how horrible it would be. Nothing came of the report. I never heard anything. I do not know if anyone even questioned my ex-husband about that. (014)

One respondent stated that the police were very supportive of her and did not consider their response to be inadequate but very helpful, however, she was not the norm.

The police were great. The officer that came to take the report saw how upset I was and he got emotional and he excused himself from the room and came back and said he wanted to go find the man who hurt me and arrest him. He came back a couple of hours later and could not find him. (006)

Police officers interviewed for this research stated that often women would use the NOPD as their ‘counselors’ and call over and over again, alluding to the feeling that it was rather an ‘annoyance’ to have to go to the same house over and over again. The NOPD is often the first line of formal defense for many victims of DV. It is imperative that police officers are trained to understand the complex dynamics that can be in place when responding to DV calls. How women begin to perceive the process of help-seeking as helpful can be completely clouded by a negative and unjust police response. Furthermore, if women felt as if they could not find refuge in calling the police then they were not interested in ‘wasting time’ with a legal system they felt was going to be against them.

8.2.2 Legal Barriers

Barriers, real and perceived, in New Orleans’ legal institutions were often stated as a cause of great stress and fear because most women had no idea how to approach the daunting task of filing charges or restraining orders against their abusers, much less going to court to do so. All the women interviewed stated they were concerned about their safety and the safety of their loved ones.

Child Protective Services (CPS) may become involved in the legal process if there is an allegation of child abuse or maltreatment, which can often place women in a difficult situation and added stress to their own sense of trying to survive. There is also the possibility of them being accused of child abuse themselves. Many women stated they experienced significant fear of losing their children and that their abusers often used the children as a bargaining tool against them reporting abuse. Abusers may also manipulate children to lie to authorities about the alleged abuse in the household. Other women argued that while CPS was effective in the short-run, there seemed to be no long-term plan for the months and years that follow interventions such as counseling and economic aid. Low income women may also face a double jeopardy in that they could be accused of ‘neglect’, a term used to describe poverty, according to some women interviewed.
Bringing charges against a perpetrator can be a daunting and stressful proposition for most women. Previous legal statutes were reliant on the victim to testify in court, often resulting in the withdrawal of their criminal complaint. Many women simply feared for their safety and possible revenge tactics that could be taken out on them. Others also felt concern regarding their future economic stability. The most common concern was the lack of belief that the courts could do anything significant to change their situation because of lax sentencing or their own poor treatment by the courts. Today changes have been put into place to allow for the prosecution of perpetrators of DV without the cooperation of the victims. Also victims no longer have the ability to withdraw criminal charges regardless of their personal or financial position. New Orleans court systems have seen some other changes over the past decade in how it handles DV cases. Often, in New Orleans before Hurricane Katrina, cases of DV would go to the Municipal Court and be placed on a docket with petty offenses such as public urination with 93% of cases being booked as municipal violations. Upon election the District Attorney Leon Cannizzaro asked New Orleans police to bring domestic arrests to his office for review in order to be able to charge abusers under a state DV statute so more convictions could be made. Retired Judge Calvin Johnson, who spent 17 years on the bench in New Orleans said, “The DA before Leon ignored these cases, because we just did not take domestic violence seriously enough, and that is true. The fact that men were brutalizing women, on some level, our male-dominated justice system thought it was OK. It was part of our sexism.” (Filosa, 2010).

Protective orders issued for victims of DV often gave women a sense of empowerment and safety but they also stated that they were aware no protective order could deter an abuser if he was determined to find her. Protective orders also require an immediate separation and this can be difficult if the victim has nowhere to go for the long-term. While restraining orders cannot guarantee safety, their true value lies in the court, before police enforcement, during the interactions among the judges, the abused women, and sometimes abusive men. These interactions are essential to increasing or diminishing the impact of restraining orders on a battered woman’s level of fear, desire for recognition, sense of safety, and belief in justice (Ptacek, 1999).

Today, with the help of the NOFJC, the DV Unit is housed in their facility and with new protocols in place. Batterers now face swifter consequences such as higher bonds and supervision by the court,

31 Leon A. Cannizzaro is a former judge on the Louisiana Fourth Circuit of Appeal and the Orleans Parish Criminal District Court. In 2008, after serving five years, Judge Cannizzaro resigned from the 4th Circuit to become the District Attorney of Orleans Parish.
including drug testing. NOFJC also works with the Tulane Law Clinic, New Orleans Legal Aid Corp and other programs that offer temporary housing, counseling, GED courses, and employment assistance.

8.2.3 Patriarchal Systems in Politics and Business

Patriarchal systems in the political and business culture of New Orleans, and Louisiana, are important barriers to women’s social and economic empowerment. Women interviewed discussed the lack of power they felt over their lives as if it were something that had been instilled in them from a very young age, growing up watching their mothers, aunts, sisters, or close friends being abused or somehow disenfranchised by societal norms of a deeply southern culture where gender roles are defined in favor of male dominance, particularly Caucasian males. Becoming empowered and finding their own capabilities was a central theme to women’s help-seeking decisions.

Patriarchy was defined early on in the feminist movement as the structuring of society on the basis of family units where the male assumes dominance as a result of taking on the principal responsibility for the welfare of the family unit (Goldberg, 1973). Today patriarchy is a reflection of deeper expectations that males will or should dominate in social relationships and have a disproportionately large share of power (Merriam Webster, 2016). Women participants, as well as social network participants, pointed to the fact that there is a well-established gender bias among men that keeps women from moving up in their social standing or even receiving fair treatment in economic, civic, and political affairs. Much of the southern value systems is based in conservative values. While New Orleans is traditionally liberal and Democratic voting due to its mainly minority makeup, those in power often reflect more conservative views when it comes to power structure within the social and economic framework.

Louisiana ranks last in the United States when it comes to women’s representation in the Legislature (O’Donoghue, 2015). Only 11% of the 2012-2016 Louisiana Legislature is comprised of women, down from 16% in 2008-2012, ranking 50th in 2013. This is nearly half the national average of 24% (Office on Women’s Policy, 2012). Four additional women were elected to the Louisiana House of Representatives in 2015 for a total 17 out of 105 seats. One woman will be added to the Louisiana Senate in 2016 for a total of five out of 39 members (Beistch, 2015). One reason for such low female representation is the conservative Republican voter base in Louisiana where women have not traditionally run for public office. Louisiana has only ever had one Republican woman in statewide office working as the commissioner of elections from 2000 to 2004. Democratic Senator Mary Landrieu lost her election campaign in 2014 and no woman has since held a statewide office. New Orleans has remained one of the state’s democratic strongholds, largely due to a high percentage of Catholics and large African American minority that voted overwhelmingly in favor of Democrat Mitch Landrieu in 2010.
A report put out by Tulane University’s Newcomb College Institute, in partnership with the local chapter of National Association of Women Business Owners and the Inter-Organization Network (ION) evaluated female participation in the decision-making ranks of 50 publicly traded companies in Louisiana showing that women lag behind other states in terms of female participation. Women held only 7% of 326 board positions in the companies surveyed, and fewer than 14% of executive officer seats were occupied by women. Among 190 executives who were the top-paid in the companies, just 16 were women (Finn, 2013).

Women today face considerable obstacles when trying to advance themselves in top level positions. This is a construct that is exemplified in the social order that is rife with gender disparities in political, religious, and corporate representation. Women are not typically recruited to run for political office or positions of power and may perceive themselves as being less qualified. More women need to be elected to political office in order to give a stronger voice in setting policies that directly affect them. This is vitally important in a city where 20% of all households are headed by females (48% African American, 37% Hispanic, 30% Asian, and 17.4% Caucasian) indicating a large portion of the population is vulnerable to political decisions that directly affect women through taxation laws, housing options, educational policies, and access to healthcare.

8.2.4 The Role of Religion and Domestic Violence

The majority of participants stated that they would turn to their religion and religious leaders in times of personal crisis as a form of help-seeking and most had some level of religious faith or association with a faith tradition. All who considered themselves religious, stated that the teachings of the church were powerful doctrines which gave them guidance on their ethics and values. In New Orleans about 50% of the population considers themselves religious with the majority being Roman Catholic (31%) and Protestant (20%). Churches exist in practically all of New Orleans’ 73 official neighborhoods and play a vital role in community cohesiveness and development. Church leaders can be valuable tools but they also often demonstrate a large gap in services when faced with DV issues because of a lack of awareness of the role they can play in combatting DV. They are a valuable resource for victims of DV and the NOFJC is very involved in meeting with church leaders to discuss DV and educate people about services available to victims and their families. Religion can become a roadblock or a resource, depending on how it is practiced.

Keeping in line with most religious ideologies, many religious leaders have strong views on the marriage covenant, often advising women to go back to their marriages and keep their families together. The vows of “for better or worse” and “until death do us part” is often taken so seriously that even when faced with
life-threatening violence, many women do not want to break their vows or let down their families and communities.

In New Orleans churches’ pastors and reverends push for women to work out their marriages for the sake of the family. They are often ill trained to deal with serious domestic violence issues and are not educated as to the social services available to victims in the New Orleans area. (401)

Some women stated their abusers would try to distort the scripture or manipulate teachings to justify their own behavior and considered their spouses more as property, often subscribing to old-fashioned notions that women were to ‘obey’ their husbands and have nothing to say about being mentally or physically abused. This topic was discussed in great detail with local religious leaders who stated that the religious beliefs of both men and women could contribute to the ongoing cycle of DV: According to one social network interview of a local religious leader, this was a common theme regarding DV in New Orleans.

I had this one man who was in our congregation. He would not keep his hands off of her because he thought he had that power to do it because it was his wife and there's a lot of misconceptions, even when it comes to the word of God and the spiritual understanding of what a marriage is (416)

Much of women’s concerns about the church are iterated in former President Jimmy Carter’s book *A Call to Action: Women, Religion, Violence, and Power* where as a longtime Baptist church deacon in the southern state of Georgia, he saw the religious leaders discriminating against women and girls through their own patriarchal interpretations of the scripture in order to assert their male dominance. The Deep South is known for its religious affiliations and many communities are centered around Christian ideals. President Carter writes about this in the Christian church as well as Islam and other world religions where patriarchal traditions exact a very high price for women, including traditions of forms of DV. Some examples, although not all practiced in every religion, include arranged marriages that often include children, female genital mutilation, sex trafficking, honor killings, dowry deaths, and political manipulation and control of women’s self-determination in their health care choices. While women in New Orleans may not face some of the issues listed, it is sobering to realize that many of the abuses listed do exist for women here, often very hushed and hidden. All participants stated that archaic religious beliefs can be very powerful barriers to help-seeking. Finally, women find it difficult to become church leaders due to gender discrimination which leaves them out of the decision-making process when discussing church policies, in particular, those regarding women’s issues. While women are active in church organizations they are rarely seen in top positions with the most conspicuous example being banned from the priesthood by the Catholic church.

It should be noted that the Catholic Church, particularly though Catholic Charities in New Orleans, and many other religious organizations are actively against DV and all forms of violence against women, yet
women are still not viewed as equal in the obvious fact they cannot become part of the priesthood. There are still many barriers that exist for women who go to church for guidance, often feeling misguided by institutions they hold in such high esteem.

8.3 Awareness of Social Services

8.3.1 Access to Shelters and Battered Women’s Programs

Scarce resources make providing shelters to all victims of DV difficult, if not impossible. This dearth in shelter creates a wide gap in services to abuse victims in New Orleans. Shelters provide temporary housing, food, counseling, and support services as well as legal advice. The NOFJC, established in 2007, has helped to use the national FJC template to create a new approach to shelters where women are afforded a sense of privacy, peace, and support on several levels. Shelters in the past have been stark, large, one-room facilities where all women seeking shelter were placed together. Being under stress caused by DV and then forced to share a space with women who are, for example, drug addicts off the street, presented barriers that prevented women from seeking help in local shelters. Today there is a trend to create shelters that provide social support to help women make the transition to a new life. They provide links to resources such as job training, resume building, computer classes, GED preparation, and legal advice on how to file petitions and negotiate the court system. Having legal advocates trained in DV law and groomed to work with abuse victims can be powerful tools in giving women the empowerment to leave violent relationships safely.

I just was not aware of services. I had no idea any of this stuff existed until I wound up at Crescent House and that was the best thing that could have happened to me. They showed me how to file a restraining order and got me and my kids the counseling we needed to get out. (003)

Nearly all social network interview participants stated that one of the biggest challenges in helping victims of DV is community awareness about social services in New Orleans. Most of the women interviewed were not aware of services available to them before seeking help. Religious leaders interviewed were not aware of organizations like the NOFJC or DV shelters. They also admitted they had never really entertained creating a sermon or church program that would allow them to create a dialogue with their congregations regarding DV and issues related to help-seeking. These small community churches are being targeted by the NOFJC as springboards to get their message out to the community but there is still a long way to go and a lot of attitude to change. A present day advertisement for a small Baptist church in the Lower 9th Ward sits on a busy avenue stating, “It’s a Man’s World”, sending the message of patriarchal control in the religious culture of this historically African American, low-income neighborhood of New Orleans.
8.3.2 Technology and Domestic Violence

Harassment, stalking, invasion of privacy, and control tactics are not new to DV but what has changed in the past 20 years is the advent of social media and use of technology such as cell phones and computers commit DV. When participants were asked about their help-seeking choices, many referred to Internet as a main source of information. However, cell phones and computers were not safe places for some due to the possibility of leaving a ‘cyber footprint’ and possibly exacerbating the controlling behaviors of their abusers who wanted to know who they were communicating with at all times. While technology can be an invaluable resource for help-seeking, it can also become a means of cyberstalking via the Internet, e-mails, and monitoring software (Cantwell, 2007). Leaving behind clues that you are looking to leave an abusive relationship can sometimes cause further harm to a woman if her abuser discovers her plans and is adamant that she will never leave or discuss their relationship with outsiders.

Domestic violence via modern technology and social media are considered a new frontier in combatting DV and keeping victims safe. Women interviewed discussed how they were controlled through their cell phones or social media accounts when their abusers would engage in threatening messages or tried to control them by tracking their digital information. The National Network to End Domestic Violence (NNEDV) conducted a survey of 750 DV service agencies across the United States and found that nearly 90% of programs reported that their abusers intimidated and made threats via cell phone calls and messages, text messages, and email. Also, 75% of programs noted that abuser accessed victim’s accounts (email and social media, etc.) without the latter’s consent and oftentimes without their knowledge (NNEDV, 2014).

Several women discussed the issues of being watched via their cell phones’ global positioning satellite capabilities (GPS) as a means to control their activities. Looking through emails and phone texts were often cited as avenues to accusations of cheating and other issues of mistrust. Because of this, women entering shelters that are in undisclosed locations are strongly encouraged, if not required, to turn off their cell phone’s location tracking device.

He totally restricted my communication and with his computer I did not know what he had as far as security on there, if he was tracking what I was doing so I did not want to do or say anything on there that he might find out about and restricting the communication...I could not take it out of the house. Restricting the communication was a big thing. (003)

Some agencies will help women to change their digital identity as far as cell phones and numbers are concerned. Programs also report that survivors are asking for help on how to manage their technology and stay safe while using them.
8.3.3 Transportation

When trying to access safe houses and shelters transportation could also become a barrier to women who were living in less populated, low-income areas of New Orleans. Post-Katrina, the share of New Orleans households without access to a vehicle has dropped from 27% in 2000 to 19 percent in 2013 (Shrinaff, Mack, and Plyer, 2014). However, at 19% New Orleans’ share is more than twice as high as in neighboring parishes and the nation, indicating the importance of an effective and equitable public transportation system and comprehensive evacuation plans.

According to the non-profit advocacy group, Ride New Orleans 2014 Report, public transportation disproportionately serves whiter and wealthier neighborhoods and that only 36% of the bus and transit services have been restored since Hurricane Katrina hit in 2005, and nearly 85% of the city’s population has returned. Lost services are largely located in areas where low-income, African American populations reside in New Orleans. The report shows that four significant areas have lost 85-100% service from the Regional Transit Authority (RTA). The Florida Development in the Upper 9th Ward has no transit service at all due to the conclusion that the vast majority of the population has not returned to the area, accounting for the complete removal of service. The Lower 9th Ward, an area hardest hit by Hurricane Katrina has seen an 80% reduction of services, also due to lowered populations. According to the 2013 data from the Greater New Orleans Community Data Center, nearly 53% of the Lower 9th Ward’s population has returned, leaving a significant amount of residents without public transportation. Hollygrove, a low-income community, has seen a 95% decrease in services. In East New Orleans, services serving West Lake Forest and Little Woods have seen a 92% and 85% decrease, respectively.

To further complicate the situation, approximately 18% of bus services in New Orleans have over an hour gap between bus arrivals, making the transit system unfeasible for those trying to maintain a schedule. Interestingly, the city is investing nearly $71 million for the expansion of slow-moving street car lines, that will cater to mainly tourists in the French Quarter and gentrifying neighborhoods such as the Marigny, Bywater, and New Bywater. Many of the participants stated they did not have adequate transportation for them or their children which also affected their ability to seek employment, get their children to school, or shop for groceries. Many food deserts still remain in low-income neighborhoods due to the lack of grocery stores willing to or unable to return to pre-Katrina locations. Inequitable and unreliable public transportation exacerbates all New Orleanians, without personal cars, ability to seek help from abuse but also to put themselves in a position to be independent and self-sufficient. Shelters like Crescent House and centers such as the NOFJC can help out when women need transportation to their facilities but they are not a long-term solution.
8.3.4 Pets and Domestic Violence

Pets can be seen as family members and great sources of comfort for many women experiencing domestic violence. Witnessing abuse of pets by family members can be extremely distressing. Due to this, not wanting to leave pets at the mercy of sometimes vengeful and aggressive abusers can be a very difficult obstacle to overcome when seeking help. Several participants stated that concerns over the security of their pets either delayed their help-seeking in shelters or kept them out of the shelter system altogether. Only three percent of shelters nationwide accommodate domestic pets of battered women (Joyce, 2013). No shelters in New Orleans ‘officially’ accommodate pets.

Pets were also used against women as ‘collateral’ for them to come back or used as ploys to get them to not leave at all under the guise that if they left the pets would be either “abused, killed, or abandoned”. (001)

A 2007 summary of available research, Battered Pets and Domestic Violence, found that in the dozen or so shelters in the United States that collect data on the issue of pets and shelters for battered women, between 18% and 48% of women stated they had delayed seeking help because they feared for the safety of their animals (Ascione, Weber, Thompson, Heath, Maruyama, and Hayashi, 2007). In 2008 there were only four shelters in the United States that accommodated domestic animals. In 2013 there were 73, about 3% of shelters nationwide (Joyce, 2013).

There was one time he told me to pack my stuff and get out of the house and when he saw that I was serious about leaving and he said that if I actually did leave he would leave the cats outside and not feed them or give them water. So I did not leave that night because none of the shelters available took pets and did not want to leave them. (003)

The National Family Justice Center’s national website provides a search engine to find shelters that will take pets but when Orleans Parish was searched, no shelters were found. The NOFJC has acknowledged this as being a problem and is working to see that the pets of abused women are taken care of to the best of their ability. Pet and Women Safety Act of 2015 (H.R. 1258/S. 1559) is legislation aiming to expand federal DV protections to include safeguards for the pets of abuse victims on a national level and to prove grant monies so shelters can accommodate families with pets. It also amends the federal code to prohibit threats against a person’s pets and calls for restitution for any veterinary expenses incurred as a result of DV offenses. These reforms help to address the often little discussed issues of what victims are to do if they are faced with leaving a home where they not only fear for their lives but the lives of their pets as well.

8.3.5 The Institution of the Local Bar
Bars are often considered a big part of some people’s lives who live in various neighborhoods around the city. They are not only bars but gathering places for locals after a long day at work or to celebrate music and life. Surprisingly, substance abuse was not a major theme in this research, even in a city that is famed for its round the clock access to alcohol and non-stop party reputation. Some participants who did feel they were becoming too dependent on drugs or alcohol sought counseling at the NOFJC or went to Alcoholics Anonymous (AA). These programs represented a pivotal access point for women. Substance abuse became a coping mechanism for some women but less than half did not abuse drugs or alcohol. Social network participants stated that substance abuse can often lead to women becoming homeless or falling into prostitution, which may cause them to being physically and/or sexually assaulted. Conversely, several stated that alcohol played a role in their abuser’s patterns.

Alcohol was primarily used as an unhealthy coping mechanism. Women would use alcohol as an escape or to quell symptoms of depression and hopelessness. (401)

I was just trying to numb out. I used alcohol and occasionally drugs. I wound up accidentally overdosing, having to spend a few days in the crisis center and I came back down here and I was living with friends and I got an old job, part time, but it was not enough and I wound up having to move back in with him. (003)

According to several social network participants, violent behavior will be blamed on drugs and alcohol but it is truly the lowering of inhibitions to what is already there that is the case. Another side to that coin is the bars in this city often act as types of community centers where neighbors know one another very well and they look out for each other. This is a sort of support system that is very important to communities in New Orleans.

The neighborhood bar is like my living room and a place where I could go to get away from the chaos at home. (101)

Finally, there must be more effort to hold men accountable for violence against women and to give girls more access to education, increased participation in the workforce, and a larger representation in the city’s government. It cannot be overstated how deeply this violence affects every aspect of a woman’s life. Living under the threat of violence affects women’s physical and psychological health, finances, employment, housing and ability to live meaningful lives.

8.4 Summary

Women’s social barriers to help-seeking have a common theme that roots itself in gender inequality. The obstacles many disenfranchised women face in terms of opportunities presented to them by New Orleans society are somewhat limited. How women decide to seek help is a complex array of decisions based on interpersonal and sociocultural factors. How women perceive DV and also the community’s support of
intervention deeply affect whether or not they will seek help and ultimately what is decided to do about it.

Having the support of informal and formal networks is vital to combatting DV in New Orleans.

Men’s attitudes towards DV also played a key part in how children are taught to view violence in the home, especially young boys. Awareness of services on the side of the abused is key to making positive changes but also awareness on the side of the public because too many times women have stated that people mostly just do not understand what they themselves have not experienced. Education of all involved in DV from the victims to the arresting police officers must remain a top priority in order to eradicate DV from society and set the stage for a more hopeful and peaceful tomorrow.
CHAPTER NINE
CONCLUSIONS AND RECOMMENDATIONS

“The measure of a society is found in how they treat their weakest and most helpless citizens.”
- President Jimmy Carter

This chapter discusses conclusions and recommendations based on the findings of this research. Three major conclusions have been made based on the overall research objectives of examining and identifying help-seeking behaviors among women experience DV in New Orleans:

1) The formal and informal networks in place in New Orleans post-Katrina have negatively impacted women’s ability to seek help.

2) Domestic violence has a categorical social and economic bias against help-seeking.

3) Patriarchal attitudes and policies undermine women’s capabilities and contribute to DV in New Orleans.

Women’s issues are everyone’s issues and it is in this context that recommendations are aimed particularly at policy makers and social service providers around the city who can benefit from this in-depth look at barriers to help-seeking women in New Orleans are presently facing ten years after Hurricane Katrina. Nine recommendations are put forth: improved access to educational and employment training opportunities, access to housing, improved police response, increased participation by women in public and private leadership roles, increased data collection that is accessible to the public, funding for social services and social media awareness campaigns, community capacity building with the inclusion of religious leaders, and addressing the culture of violence in New Orleans.

9.1 Conclusions

This study asks the question of how do women perceive DV and how do they decide to seek help or not by identifying and examining the factors that exist within individuals, families, communities, and societies. The main barriers to help-seeking are presented as emerging themes from in-depth, social network, and focus group interviews and consider the roles of informal networks: family, friends, neighbors, co-workers, and fellow students and formal networks: police, legal systems, shelters, religious affiliations and health services.

9.1.1 Research Question 1: How do women in post-Katrina New Orleans perceive domestic violence?

9.1.1.1 Conclusion 1: Institutional failures increase the risk of domestic violence.
Diminished support from informal and formal networks, along with isolation and stigmatization left many of the women with a sense of hopelessness. Interviews with both social networks and in-depth interviews demonstrate that women could not see themselves becoming free of DV without the support of family or friends and the social stigma attached to being ‘out of control’ in their personal life weighed heavily on their justifications to stay. A lack of social support and stigma is often associated with DV which can become a very significant barrier to help-seeking from informal networks (Barnett, Martinez, and Keyson, 1996; Dunhm and Sen, 2000). This is significant because informal social networks have been identified as a key protective factor that is associated with fewer mental health problems among battered women (Astin, et al., 1993; Car slo, McNutt, Choi, and Rose, 2002; Kemp et al., 1991; Mitchell and Hodsen, 1983; Tan et al., 1995). Women who were unable to be around their informal networks began to rely more and more on their partners as the only form of social contact they received, further immersing them into a psychological haze of denial and acceptance of their abuse. This form of isolation would often evolve into a fear of being stigmatized as well, particularly among women who felt they were too weak to break from the relationship.

9.1.2 Research Question 2: What factors are the significant barriers to help-seeking in post-Katrina New Orleans?

9.1.2.1 Conclusion 2: Domestic violence has a definitive social and economic proclivity against help-seeking.

Close examination of the social and economic conditions of women’s lives in New Orleans defines barriers as forms of ‘entrapment’ that keep resources and the capability to access them away from those who need them the most. While DV knows no bounds in affecting women from all social and economic backgrounds, it is clear that the cards are stacked against certain marginalized groups living in post-Katrina New Orleans, particularly African American women.

Poor African American women in New Orleans were found to face striking inequalities demonstrated in higher rates of poverty, lack of affordable housing, and one of the highest wage gaps in the United States. Women are more vulnerable and exposed to risk due to their often lower socio-economic status and limited means to valuable resources. Many of these social systems were in place before Katrina but have continued regardless of the opportunities afforded to the city due to the inundation of reconstruction funds. Women who have experienced DV in the economic and social upheaval and subsequent reconstruction of New Orleans have an important voice to lend to policy makers and community leaders. Social vulnerability was cited as an influence over women’s empowerment stating that marginalized
groups are vulnerable to DV due to their socially and economically disadvantaged status where social insecurity and lack of social support disallow for recourse, legal or otherwise (Visaria, 1999).

A lack of economic security is one of the most common types of abuse experienced by women and one of the most important deciding factors as to whether or not they opt to seek help and eventually leave their abusive partners. This lack of economic security is also a major contributor to DV which is discussed in detail in chapter seven. Women often stated that men perceived themselves as emasculated when they would be earning more money than their male partners. Once the man feels emasculated the probability rises dramatically that he will abuse his partner and the wider the earning gap between the man and the woman, the greater the severity of the violence against her (Chant, 2003). Income inequity between partners was mentioned several times as an important point of contention that would often lead to episodes of violence. The women described it as a feeling of ‘emasculature’ or insecurity on the part of their abusers. These findings agree with previous citations regarding risks that are introduced when inequality among men and women occurs (Ellsberg et al., 1999). Women who are working and earning more than their partners will often exacerbate feelings of inadequacy in their partners, subsequently increasing the possibility of DV. This suggests that inequality and poverty are important aspects to consider along with income and empowerment (Jewkes, 2002).

Both in-depth and social network interview participants stated that unemployment, either presently or in the past, was a significant barrier to them seeking help to end DV. The 2016 unemployment rate in New Orleans is slightly higher than the national average disguise the real issues of income disparity which shows that since March, 2016, African American women in New Orleans have nearly twice the unemployment rate of Caucasian men and women. The 2016 unemployment rate in New Orleans is 5.8%, in Louisiana, 5.9%, and nationwide 4.9% (U.S. Bureau of Labor Statistics, 2016). While these numbers show New Orleans is lowering its unemployment rate there are still issues of poverty and socio-economic disparities. As of March, 2016, African Americans have nearly twice the unemployment rate (8.8%) as Caucasians (4.3%). African American males have an unemployment rate of 8.6% and African American females (7.9%) as compared to Caucasian men and women at 3.9% (Bureau of Labor Statistics, 2016). The participants discussed the lack of ‘living wage’ employment and some were working two or three different jobs to make ends meet. Often employers will not accept personal issues like DV as viable reasons to miss work, furthering the mantra of ‘suffering in silence’ because women did not want it to be known they had such serious issues going on at home.

Social network interview participants often spoke of the need to have more temporary housing for women who were escaping DV. Today there are several undisclosed shelters that women can go to where most
can stay up to 30 days and sometimes longer, if needed. What women really need is a type of transitional housing where they can live safely and look for employment and housing. While there are services available in the city, they are not enough to handle the need for DV survivors. New Orleans shelters have been improved since Hurricane Katrina, from open, impersonal spaces to more apartment style buildings, but these are only short-term solutions to long-term problems and are woefully lacking in space and availability. Hurricane Katrina had a profound effect on New Orleans middle class women who were homeowners. Much of the African American middle class who returned to the city was faced with overwhelming bureaucratic obstacles to be compensated for their homes and to rebuild. Many chose not to return, opting to live in other cities where there were better opportunities.

All of the women participants were considered female heads of household (FHH) and discussed the stress they felt in having to take care of their families on their own, but thankful to not be relying on their abusers for any type of financial assistance. African American women and female-headed households (FHH) are the hardest hit by poverty in New Orleans, making up more than half of all households living under the poverty line. Several studies have shown that FHHs can be more vulnerable to DV than those who are married, cohabitating with a partner, or single (Kishor and Johnson, 2004; MSPP, 2000; MSPP, 2007). This heightened level of vulnerability often stems from conflicts over resources, assets, children, or even jealousy by a former partner, particularly if the woman had moved on. Some women stated that stalking or revenge tactics from the issuance of restraining orders prompted scenes of violence even after they had separated. Again, the presence of informal networks can offer protection of women who find themselves all of sudden living alone or with their children. Diminished informal networks in the African American community are still felt today as large numbers of families have not returned and neighborhoods, such as the Lower 9th Ward, have yet to be rebuilt to pre-Katrina levels.

Nearly all social network interview participants stated that one of the biggest challenges in helping victims of DV is community awareness about social services in New Orleans. Most of the women interviewed were not aware of services available to them before seeking help. Religious leaders interviewed were not aware of organizations like the NOFJC or DV shelters and did not see it as common knowledge among most of the clergy members they knew. They also admitted they had never really entertained creating a sermon or church program that would allow them to create a dialogue with their congregations regarding DV and issues related to help-seeking.

The ability to support one’s family and earn a living wage and acquire adequate housing are cornerstones to building a stronger African American middle class where women can become less reliant on other members of their immediate family or partners. Economic and social entrapment for women stems from
the analysis that post-Katrina New Orleans is trending back towards its pre-Katrina status as a sluggish regional economy with high inequality and not enough opportunities for its residents.

9.1.2.2 Conclusion 3: Patriarchal attitudes and policies undermine women’s capabilities and contribute to DV in New Orleans.

One of the most important barriers to help-seeking involved gender-based roles and the idea of patriarchal attitudes that inhibit women’s economic and social independence. Women participants, as well as social network participants, pointed to the fact that there is a well-established gender bias among men that keeps women from moving up in their social standing or even receiving fair treatment in economic, civic, and political affairs. Louisiana ranks last in the United States when it comes to women’s representation in the Legislature (O’Donoghue, 2015). Much of the southern value system is based in conservative values, exacerbated by a gun culture that condones violence, factors that have been shown to contribute to higher levels of DV. If men are seen as the dominant forces in familial relationships the risk of DV increases for women (Altekar, 1962; Karve, 1965).

Women today face considerable obstacles when trying to advance themselves in top level positions. This is a construct that is exemplified in the social order that is rife with gender disparities in political, religious, and corporate representation. Women are not typically recruited to run for political office or positions of power and may perceive themselves as being less qualified. More women need to be elected to political office in order to give a stronger voice in setting policies that directly affect them. This is vitally important in a city where large numbers of households are headed by females.

9.2 Recommendations: Overcoming Barriers to Help-Seeking

These recommendations are based on the findings of this research and reveal that being able to seek help and leave abusive relationships relies heavily on a woman’s social and economic capabilities. During interviews the participants were all asked what they would like to see happen to prevent and eradicate DV using limitless funds. It was dubbed the ‘magic wand’ question. The answers from every participant are included in this section and point to a multi-faceted response that highlight the complexity of DV itself. While legal protections and women’s advancements towards equality have progressed, there is still much to be done regarding the social and economic barriers to help-seeking and the underlying current of patriarchal systems, marginalization of low income communities, and inadequate institutional responses that keep the women of New Orleans in a very precarious situation. The culture of New Orleans is dominated by music, beautiful architecture, and great food. However, it is also dominated by a much
seamier reality where chronic inequality, high crime and gun violence, and low status of human rights for women. The following sections discuss the nine recommendations derived from this research.

9.2.1 Improve Access to Educational and Employment Training Opportunities, Eradicate the Wage Gap, and Address Global Economic Trends in Terms of Domestic Violence

Having access to educational and employment opportunities are the key to giving women the independence and capability to have options when faced with the barriers of being unable to support themselves if they leave their partners. Both Louisiana and the city of New Orleans can make policy changes and marketing efforts to encourage more women to complete job training programs that will prepare them for careers in many types of jobs. Particularly where there are gaps in employment opportunities for women such as engineering, and science occupation, natural resources, construction maintenance, production, and transportation occupations. Vocational training or secondary degrees are needed. Also, programs can be created that prepare younger girls for college entrance exams and aid them in planning their career goals. Programs can also help female students in elementary and high school achieve higher standardized test scores in math and science, and which would encourage young women to pursue advanced degrees in those fields.

Closing the wage gap, particularly among African American women is crucial in giving them a chance to make it on their own. In particular, FHHs cannot possibly sustain a life out of poverty if they are working one or several low-paying jobs. Median annual earnings of minority women are also increasing more slowly than those of women overall. While women overall have seen their earnings increase over the past three decades, African American women have seen much slower and smaller growth in the United States.

Increasing the minimum wage is also an avenue to helping many women who are barely surviving, working in low-paying jobs and trying to support their families. Higher wages help people to live violence-free lives because they will have the ability to support themselves and to get out of abusive relationships. It is often difficult to amass the amount of money one would need to secure a new apartment, buy a new home, even to rent the moving truck. Higher wages mean that women will be able to take care of themselves and will not have to stay in an abusive relationship due to a lack of resources, or economic entrapment.

The current national debate, especially in this 2016 presidential campaign, is focusing on poverty and economic mobility. There must be a multi-faceted strategy that addresses societal dislocations and the lack of gainful employment in a society that offers good job prospects and affordable childcare.
There is a surprising level of agreement among Democratic and Republican politicians that America has too much poverty and not enough economic mobility. The United States has made progress against poverty since President Lyndon Johnson’s ‘War on Poverty’ in the mid 1960s, but the 2007 Great Recession has seen this progress stagnate. Under a measure of poverty that counts all government-provided benefits as income, government programs reduce the nation’s poverty rate by about one-half, a credible performance. Even though the numbers show a positive, if negligible movement in decreasing rates of poverty, there are still approximately 47 million Americans, including 15.5 children, living below the poverty line (Wimer, Fox, Garfunkel, Kaushal, and Jane Waldfoge, 2013). Under the official poverty measure, the nation has achieved a poverty rate among the elderly of 10 percent (whereas it was over 30% at the beginning of the War on Poverty), but the child poverty rate is more than double the rate among the elderly (DeNavas-Walt, C., and B.. Proctor., 2015).

Economic mobility has been stagnant in recent decades and lags behind that of most other Western democracies (Pew Charitable Trust, 2012). These high rates of poverty show that not all Americans are experiencing the same opportunities to achieve upward mobility and become economically secure. This is particularly true for many women who often experience significant wage gaps with their male counterparts. Women may also face additional barriers due to a lack of affordable childcare and affordable housing. Creating programs where women can have access to childcare at the workplace would be one way to alleviate this problem.

The research shows that economic issues among women is one of the most important factors in determining whether or not women experience DV. Most cases of DV center on the lack of income, however, women with higher incomes face their own set of risk factors when dealing with DV. This is particularly acute if the woman is earning more than her partner (Knapton, 2014). While they often have the means to leave, they may not have the means to find the emotional support needed to navigate the legal system to divide assets or deal with child custody issues. Historically, the judicial system handles allegations of DV and divorce proceedings separately, with one judge presiding over the divorce and another hearing the criminal DV case. This could be emotionally and economically draining for all victims. This is why it is important to use the ‘one family-one judge’ approach that consolidates the hearings into one place. One caveat to this approach is the tendency for family courts to reward compromises and settlement in order to keep the families in closer contact with one another. The problem is that a parent protecting a child from abuse will resist such settlements. Also, women who are
financially successful may risk losing up to 50 percent of their assets, depending on the state in which they reside. In some cases, this can be seen as financial blackmail where they are liable to support a person that has been emotionally and/or physically abusive to them and their families (Project One, 2012; Tetlow, 2010).

Also, the onset of free-market globalization has shown to have consequences for women in the United States and around the world. On the positive side globalization is bringing women into the workforce and improving their economic status and allowing them access to non-traditional sectors. This in turn will enable them to also control their income, thus providing a source of empowerment and enhancing their capacity to negotiate their role and status within the household and within society. However, increased participation in the workforce can also have negative consequences such as limited opportunities in low-paying, hazardous working conditions in companies that lack any form of job security during times of global recessions, particularly in developing countries (Weissman, 2007).

In today’s global economy, women are more vulnerable to attack from a vast and growing sea of unattached and unemployed young men who view women’s success as the reason for their own failure. This pattern of violence against women is rooted in policies in the United States and corporate globalization abroad. There has been little change in U.S. policy to mitigate the abuses of women and children working in sweatshops for wages that keep them below the poverty line. Communities that experience chronic unemployment experience profound consequences that can result in chronic economic and social dislocation and in turn increase levels of DV (Weissman, 2007). It is imperative that more research be conducted on the deleterious effects of globalization on women who are often the first to feel the relationship between the global economy and their personal circumstances.

9.2.2 Increase Availability and Access to Shelters and Transitional Housing

Transitional housing is a program that has been put into place in many places across the country and is an important option for women who want to change and mend their lives after living through DV. These are long-term approaches that go beyond the short-term shelters that are currently in place in New Orleans. Many women who come to shelters of any kind are either about to be homeless or have been living on the street or in their cars for some time. Every situation is unique but there is absolutely no hope to become financially independent if you are simply trying to have a place to live and the streets can often lead women into lives of prostitution or sex trafficking.

The Eden House, located in New Orleans was established in 2012 and is a type of transitional housing for victims of sexual violence and sex trafficking that could easily be emulated for victims of DV. This
program provides a safe home along with recovery services which cover issues of addiction, mental health, and homelessness. Eden House takes a holistic approach to empower its residents throughout the two-year program that includes a comprehensive spectrum of resources such as housing, food, health care, legal services, psychotherapy, spiritual support, education, and job training. There is currently no long-term housing for DV survivors in New Orleans indicating that a lack of funding and public policy support have impeded this type of social service from being implemented at this point in time. Programs like these, based on successful models in other cities can be instrumental in restoring dignity and self-esteem in women who have often endured significant trauma, spent time in prison, rehabilitation facilities, shelters, or were homeless.

There are currently two shelters in Orleans Parish, one in St. Bernard Parish, and one in Jefferson Parish. Typically, these shelters provide assistance for 30 days. Stays may be extended under extenuating circumstances but due to limited space women are encouraged to find other housing arrangements once the immediate danger has passed and they have had time to decide on the safest next step.

9.2.3 Improve Laws and Policies Related to Domestic Violence

Louisiana has consistently led the nation in domestic homicides and has ranked in the top ten in the United States since 1997 (VPC, 2015). Louisiana has the fourth highest rate of female homicide in the nation where 97% of women knew their assailant and 70% of those victims were wives, ex-wives, or girlfriends of their assailant and women are murdered at a rate about 40% higher (VPC, 2015). Navigating the legal system can be overwhelming and being aware of laws concerning VAW and DV can be difficult. For those who are trying to extricate themselves from abusive relationships through restraining orders or through legal prosecution, the process can be daunting.

Some participants viewed the legal systems in NOLA as threatening, particularly the NOPD, which leads to the recommendation that health centers should be an important source of service and support to victims of DV. Often the first point of contact is with a medical professional and early identification and treatment ensures patients receive appropriate care, which can lead to long-term reductions in health care costs. Only a handful of states have this requirement and Louisiana has no requirement for DV training for medical professionals. Replicated previous research findings showing that when asked, women were comfortable discussing DV in the health care settings (Ramsay, Richardson, Carter, Davidson, and Feder, 2002), but many did not screen for DV (Warshaw2000). The American Medical Association strongly encourages medical organizations to require medical professionals to have DV training and screen patients for DV in order to maintain their medical licenses.
DV early policies focused on safety and practical support for women who sought help by providing shelter for victims (Dobash & Dobash, 1979; Tierney, 1982). Pursing safety led to the involvement of the criminal and legal systems which were the promoted focus for intervention (Horton & Johnson, 1993). Women’s experiences with justice systems point out that they did not consider these to be the best source of help. This focus on the legal system took the emphasis and importance off of community-based help systems and led to policies mandating criminal justice interventions for help seekers (mandatory arrests, mandatory reporting in health care setting, victimless prosecution, and requirements by some shelters that victims seek orders of protection or file a police report). These policies need to be critically examined with emphasis on improved capacity to enforce laws; reduction of bias and mistreatment against survivors of DV; increased access to legal advice; improved comprehensiveness of services for survivors; improved legal protection for women in danger; and increase coordination with other sectors that provide services or work on violence prevention.

The NOFJC Legal Assistance Program is the only office in the greater New Orleans area that offers pro-bono representation to immigrants and survivors of DV and sexual assault. This program provides vital services to immigrants who need legal representation but do not reach out because they fear being deported. The program has a waiting list of at least 60 people, stretching their limited resources. Funding services for advocates of women and children who are seeking visas to stay in the United States should be considered a high priority for a very vulnerable group in New Orleans.

In 2014 New Orleans became the first city to model itself to the Blueprint for Safety, a single policy that takes an interagency approach to DV from the initial 911 call to the probation and parole of abusers. The policy was designed by the New Orleans Health Department (NOHD) to help prevent victims of DV from being overlooked or underserved in a complex and often intimidating legal system. The main goals of this new policy center on enhanced communication between agencies, document sharing, and police training protocols and procedures. Police officers are now required to have faster response times, and write incident reports accompanied by an extensive 46-point investigatory checklist such as a description of the scene, identification of the aggressor, follow-up contact information, and the presence of alcohol or guns. Supervisors are required to examine these reports and submit a detailed 41 checkpoint list. With all of these new regulations in place some police officers are complaining they are spending too much time on DV calls and sexual assault cases. Police officers are now being trained to recognize clues that tell who the perpetrator and victims are and how to properly document the scene. This is in response to previous policies that simply took all parties involved to jail, no questions asked. This was mentioned over and over again by abuse victim participants who have interacted with the NOPD. Communities
should be aware of these new policies and should know that the NOPD is beginning to take DV more seriously and are better equipped to respond to DV emergencies.

9.2.4 Increase Women’s Participation in Public and Private Leadership Roles

Women must become part of the political dialogue in order to have stronger and more equitable representation in the policy making arena. Increasing women’s representation in positions of public leadership to represent women’s issues in areas of education, employment, and health. Louisiana is ranked as having the lowest female representation in its legislature in the U.S. Recommend that the Louisiana Legislative Women’s Caucus and the Office on Women’s Policy should develop collaborative efforts to increase the number of women applying to serve on Louisiana’s public boards and commissions, and to encourage more women to enter public service. Social media can be an important source to assist in launching collaborative efforts to raise awareness and provide information regarding such opportunities for women to apply to serve on Louisiana’s public boards and commissions.

9.2.5 Create a Formal, Centralized Database to Track Domestic Violence

Locating data for DV related information was perhaps one of the biggest barriers to understanding the exact state of affairs in New Orleans, and to some degree, Louisiana. Social network participants rarely had any idea where the data on DV in New Orleans is located. They knew about the individual cases they had but there was no ‘go to’ source for rates of DV in New Orleans. It was apparent that different agencies were collecting their own data but it was not accessible to the public. The NOFJC began collecting its data in 2007 when it opened to the public and data does exist through 2015. List of calls to the NOPD for DV were also retrieved but were only available from 2009 to 2014. This made it very difficult to ascertain what the actual call increase or decrease was due to a lack of data before and after Hurricane Katrina in 2005. The only reliable data for discerning the trends in DV was Louisiana Protective Order Registry for Orleans Parish. The registry was just created in 1997 and its first numbers issued in 1999, pointing to the fact that DV data is a relatively a new concept for government agencies.

New Orleans and Louisiana currently do not have a formal, centralized database tracking DV related incidences and fatalities. The Domestic Violence Fatality Review Project was piloted in the state from 2005 to 2010, compiling data from three sources: advocate reports, FBI Supplemental Homicide Data, and media accounts. This report supplied vital information on DV fatalities by parish, empowering both researchers and law enforcement/service providers through making available critical information on DV related homicides. The project was discontinued due to a lack of funding and also was narrowly focused on DV fatalities only.
Creating a common database that can be cross-referenced by all agencies can help overcome the dearth of data on DV in New Orleans and Louisiana. One example of this is the Dashboard Project in New York that compiles information on the prevalence of DV and the strength of New York State’s response. It also develops common indicators and puts out a yearly report to identify trends over time. Another interesting recommendation is based on the use of Global Positioning Satellite (GPS) to track batterers. The Gender Violence Program at Harvard Law School has been instrumental in implementing the use of GPS tracking on convicted DV offenders. The concept involves an ankle bracelet type of device equipped with a phone so probation or police officer can speak with the offender immediately. The advantage is to be able to report if offenders are exiting parameters they have been ordered to maintain and avoid them traveling to their ex-partner’s residence, and so on. The program can save lives by alerting the survivor that the perpetrator is approaching her home and/or calling the police. There are currently 23 states with GPS tracking programs with 11 more awaiting legislative proposals to pass in order to follow suit. This tracking method has proven to work in the states where it is implemented by drastically reducing the number of DV homicides but the costs are high and require state funding. This cost may be difficult to justify by legislators in Louisiana, as they are grappling with serious budget deficits.

New York City also has an Open Data program that should be implemented in New Orleans that will enable data generated by government agencies to be free for everyone and not just a select few or those who can afford to pay for the data. This was an obstacle throughout this research when trying to access DV data but unable to due to a lack of credentials made it impossible. It is important to note that privacy of individuals is of the utmost importance in any data collection process. This was given as one of the major reasons that open data was not available in New Orleans. This is a coding issue that can be easily resolved simply for reporting purposes and should be thoroughly embraced. Finally, research and presenting data poses a challenge due to nomenclature and definition issues found in research focusing on violence against women.

9.2.6 Increase Funding Sources for Social Services and Social Media Awareness Campaigns

The epidemic of DV in New Orleans and in the entire state of Louisiana is compounded by the lack of resources. Many women reported not being aware of DV programs or how to access them. All the participants indicated they contacted at least an informal network member, usually a friend or family member but not all contacted a DV program, indicating they were not aware of services available. DV programs may not be well integrated into communities. Women often had misconceptions about who can contact DV services or if they did seek help, would they have to end their relationships or leave their homes. Others simply did not think their situation was serious enough to contact DV services.
More outreach programs need to be put into place in every community in NOLA that will dispel these myths as well as educate victims of DV that they do not have to suffer in silence and that every voice counts, every time. Broad public awareness campaigns through social media can show the impact of DV on women and their children and the toll abuse has on communities and quality of life. These programs can have a powerful effect in dispelling notions of stigma, shame, and embarrassment among DV survivors.

Nearly all social services geared to DV are funded by the state and are severely lacking. Grass roots campaigns through neighborhood community meetings, local businesses, library information sessions, and social networks are essential to quickly begin an educative process where people in New Orleans are aware of the depth of the issue of DV of the nature of available services. Putting up fliers in bars seems like a small thing but because so much of the community finds itself in the neighborhood bar, bathrooms could be an excellent source of advertisement to women who could get the information, safely and privately.

Building public awareness campaigns about the commonality of DV and the impact of DV on the victim, children, and community may reduce the same and embarrassment victims feel as well as telling women that even if they are not sure if they are in a DV situation they should seek out help regardless. These programs can train victims how to document violent episodes in order to more easily prosecute their abusers. They will also embolden every woman to tell her story and let other victims know it is not their fault and they are not failures for not keeping their relationships together.

9.2.7 Increase Community Support and Awareness Awareness

The in-depth and social network interviews produced a number of recommendations for working with, and within, communities to prevent DV. These include coalition building, collaboration, recognition of cultural values, communication, and funding. Awareness of DV issues was among one of the top priorities for social service providers. The topic of DV is often hushed and unspoken but communities can bring families together to begin to have a dialogues about violence in the household in a safe and constructive environment. Information sharing is a powerful tool because it provides a connection between violence in the home and other problems in the community while strengthening community support for women’s civil rights and access to justice.

It is important that stigma does not play a role when group members are speaking about their experiences with DV. One barrier is the perception that social services are biased against men, in particular, men of color. Due to a lack of resources and the preponderance of male against female violence, women do tend to be the premier focus of the limited social services in New Orleans, but more work remains to include
men in the dialogue. Men are also very important avenues to discuss gender equality and DV with younger boys and girls while serving as role models. Community coalitions have the distinct advantage of engaging its members in a trusting environment in touch with cultural norms, attitudes, and traditions.

Festivals, block parties, crawfish boils, and any of the many social gatherings central to New Orleans culture can be used as springboards to increase awareness about DV. Empowering individuals with information and resources they need to help victims and perpetrators of abuse is a significant part in community engagement. These individuals are the boots on the ground that can reach the very people who need resources to escape DV. Trust is the most important element to successful community action and this is important to New Orleanians who live among 73 distinct neighborhoods where there is a certain amount of loyalty and pride that comes with where you live. Perceived outsiders can give short term energy to community programs but long term success is reliant on the involvement of existing community structures and leaders who are respected and most of all, trusted.

9.2.7.1 Create Preventative Measures through Women’s Awareness of Domestic Violence, Services and Resources

Providing information regarding services and resources for victims of DV is one of the most important and efficacious methods to combat DV and help women break the cycle of abuse. Awareness about DV occurs through a variety of frameworks that campaign on the micro and macro levels to uncover, discuss, and challenge DV on the personal and societal levels (Kohlman, et al., 2014). The Patient Protection and Affordable Care Act of 2010 requires health plans to provide preventative services for women’s well-being, with many of them conducting DV screening (44%) (James and Schaeffer, 2012). This is a promising new trend of increasing social awareness of the deleterious effects of DV and how they can affect the overall health and well-being of victims. Professionals having open minds and willing to participate in DV awareness campaigns can encourage the larger community to address DV and to utilize resources including statistics, personal testimony, and intervention programs.

An effective response to violence must address the immediate needs of women experiencing abuse and change cultural norms and legal provisions that promote the acceptance of violence against women (Kauer and Garg, 2008). The National Coalition against Domestic Violence, The U.S. Department of Justice’s Office on Violence against Women, and National Network to End Domestic Violence are a few organizations that provide referrals, workshops, hotlines, support groups, shelters, psycho education, and advocacy for the awareness of DV. Several agencies also offer creative ideas to touch the public such as using famous actors and actresses to take a stand and become spokespersons or representatives for their campaigns. Such campaigns, like PSAs NO MORE, additionally cooperate with corporations like the
Avon Foundation for Women, Verizon, Kaiser Permanente, and Allstate as a way to reach consumers (Kohlman, et al., 2014). As institutions address DV through campaigns, the public is receiving a more widespread knowledge of DV on a national and communal level.

Programs such as the Sexual Violence Response Advisory Committee (SVRAC), created by the Mayor of the City of New Orleans, works closely with the NOPD and city officials to enact reforms and listens to suggestions stemming directly from victims and community advocates against sexual assault. This is an important addition to the NOFJC’s work with DV detectives, as the two occurrences often overlap. The SVRAC works closely with the NOPD as well as the NOFJC’s DV detectives (Mayor of the City of New Orleans, 2016). These programs are integral to creating a level of trust between victims and the police and should be encouraged by policy makers and social advocates in the future. This trust can be maintained by creating a team of detectives that are adequately trained and compensated for their work.

Women who are aware that their calls for help will be answered and followed up by city officials is key to enact and maintain reform in a system that has been historically backlogged and unresponsive to victims’ needs. Women need to be made aware that they can partake in ‘blind reporting’ where victims who do not want to pursue an investigation can give a statement to police who would then be able to have a file on a ‘serial offender’ if that name should arise in the future (Mayor of the City of New Orleans, 2016).

9.2.8 Integrate the Religious Community into Domestic Violence Programs

Domestic violence is often left out of religious leaders’ dialogues with their congregations, simply because historically, DV has been considered a private issue and someone’s ‘dirty laundry’ that is not discussed. Social service providers can play a role by working with religious leaders and creating a framework that integrates gender equality and DV prevention programs into their own services, such as premarital programs. While some clergy will go over these issues when counseling engaged couples, they often lack the tools to integrate education about healthy, equitable, and nonviolent relationships into their courses for couples. Local religious leaders need to become engaged in promoting awareness of DV, handling issues of DV, and services offered in New Orleans. Training sessions, focusing on men’s engagement in equality should be an important part of the role of religious leaders. Religious leaders may also lack an understanding that DV can be both physical and non-physical, which can lead to a lack of support for victims and survivors. These notions are a result of long-standing patriarchal traditions in major religious traditions. Education on DV is an important key to challenging stereotypes about gender and increasing the capacity of the church to better address DV cases.

9.2.9 Address the Culture of Violence Pervasive in New Orleans
There is no doubt that New Orleans is a violent city, consistently being ranked as one of the most violent in the United States and the world. Globally, New Orleans is ranked as the 32nd most violent city with 41.4 murders per 100,000 (WorldAtlas, 2015). Domestic violence can often be a result of a social norm where communities have become numb to violence in general. Studies have shown that people living in high crime areas can show signs of post-traumatic stress disorder (PTSD) comparable to those of veterans who have served in war zones. The United States Department of Veteran’s Affairs Center for PTSD shows that in 2015, five in ten women have experienced some sort of trauma, domestic violence, and sexual assault with higher rates among African American women. In areas of high crime, a person is likely to know someone directly or at least indirectly who has been the victim of shootings and assaults.

A 2014 survey in New Orleans found that 20% of participants showed signs of PTSD, four times higher than the national average. It also showed that nearly 48 percent of participants know someone who has been murdered, and 49 percent worry that they will be shot, stabbed, beaten or murdered themselves (Lipinski, 2014).

There is a ripple effect that extends out to loved ones of victims, and both are often struggling to cope in a landscape of poverty along with minimal access to healthcare, let alone psychiatric care. Men and women living in these circumstances have a sense of hopelessness regarding the routine violence that is a part of everyday life. The barriers confronting these populations are based on socioeconomic inequity, a lack of services nearby; cultural factors such as a general discomfort with formal, Caucasian-dominated medical systems or stigma regarding mental illness and for many immigrants, language barriers.

Women are an important part of this equation and can be beacons of change in telling their own stories about DV and relating their experiences, both positive and negative, with social services and the judicial system. There is culture of deep mistrust and a perception that judicial systems are stacked against people of color by Caucasians. Stopping these cycles of trauma starts with an acknowledgment of community violence not as a mere crime problem but rather as a collective social trauma, both a public health scourge and a moral issue. Holistic solutions could include integrating PTSD screenings of injured patients into the routine treatment process at hospitals or ensuring that children are screened for symptoms through school-based clinics. For people who may have little contact with any health care system except in emergency situations, this might be the only chance to identify people who need treatment early on as well as to measure the overall needs or services across a community.

A more comprehensive anti-violence strategy would focus on every intersection between violence and community life, working with local residents, community groups, schools and health agencies to build resilience against a turbulent social climate. It is an often unrecognized social construct that the PTSD
experienced from survivors of Hurricane Katrina also plays a large part in the duress people feel who have not resolved their experiences from 2005, and may not even be aware they are suffering from depression or other psychological traumas due to their experiences during and after the storm.

Social support groups such as youth development initiatives in schools, community-based education and employment programs, can stabilize families and help them to deal with the violence and trauma that has been part of their lives. Trauma centers located in low-income neighborhoods may also be an outlet for professional groups to reach those dealing with PTSD more easily and can include survivors of DV, youth organizations and other stakeholders who can work with conflict-mediation and community education on gang involvement and mental health.

9.2.10 Inclusion of Men and Boys in Domestic Violence Prevention and Mitigation Programs

Men and boys are important tools in the prevention and mitigation of DV. Male involvement projects provide an avenue for men to engage as partners with women for violence prevention. All around the world these projects are being developed, in rural and urban communities alike, as a new defense strategy against all forms of violence, including violence against women. They are proving to be efficacious tools in the deconstruction of societal acceptance of DV. Cultural acceptance of DV must be addressed in order to make real changes in how both men and women perceive violent behaviors. Men and boys send powerful messages about relationships, violence, and power. Also, men often have greater access to resources and opportunities that influence large social structures and institutions which gives them a strong voice in the promotion of positive change.

When implementing these projects, it is important to understand and support why they are important. Men and boys need to understand their own feelings and break through pre-conceived notions that fighting is the most masculine route to solving problems. Men are also very important as mentors to a younger generation in promoting tolerance and respect among women and other men. Finally, it must be understood that men, from an early age, learn to compete with each other in business, conflict, and relationships. Involvement groups can be a unique opportunity to allow men a space to come together and discuss root issues that stem from violence as well as common core solutions where they can access proper training and become agents of change through community activism. It is important to note that when working with men, women should be included in many aspects of overall strategy. Outreach programs that target youth in general provide an opportunity to address issues of violence, gender respect, and the importance of becoming a positive role model to others within the community.
Also, promoting nonviolent relationships among adolescents can be a vital step to preventing domestic abuse in adulthood. Many teens who are experiencing relationships for the first time often do not have the tools to deal with rejection or emotions of jealousy. Programs that offer parents or teachers an avenue to teach about mutual respect at an early age can play a vital role in mitigating DV among youth, who in turn can take those skills to their adult relationships. Other topics that can be covered include healthy boundaries, mutual respect, and effective communication skills. Starting a conversation about healthy dating with youth can enable them to feel comfortable asking for the appropriate advice later in their lives.

Leadership programs for young girls in high-school or college can also foster a healthier vision of who they are as equal citizens in the world and how they can achieve anything they set out to do. Along with these training programs boys and girls can be taught about respect of others and gender equity. These school-based programs can not only provide job skills but also social skills that will help them identify toxic relationships and develop a higher sense of self-esteem that could help them navigate potentially violent partners.

9.3 Future Research

This study, while looking at women’s perceptions and experiences in help-seeking answers the complex question of what experiences have kept them in abusive relationships and what has empowered them to leave. However, there still remain many questions as to the dynamics of DV in New Orleans and how women are coping. This research has focused on heterosexual women who experience DV with their partners, who are seen as the primary perpetrators. However, more research should be done on the attitudes of men, in particular, those in low-income neighborhoods. Very few of the social network interview participants brought up the need to focus on men as perpetrators. The general consensus was that once men reach a certain age they are no longer accepting of behavior change, or are simply unable to implement any positive changes. This is a rather glum prognosis for men, particularly when one understands the myriad of barriers they face in historically marginalized societies such as New Orleans.

The large majority of research has been focused on heterosexual relationships leaving a wide gap in research including the LGBT community. Other areas that are lacking include violence among police families, violence with pseudo-family environments, and violence against women and children with disabilities. One interesting area of study is the social phenomenon of DV becoming ‘commonplace’ and the lack of community outrage in the face of highly publicized DV cases. It is essential to not only understand that these cases occur, but to dissect the complex systems in place that may help explain these heinous acts of violence. Religion is also an area that has not received adequate research regarding DV.
New Orleans is predominantly Catholic with Protestants making up the remaining majority. New Orleanians can have deep ties to the church and often look to religious leaders for direction. Understanding how religious doctrine and patriarchal attitudes affect women’s views on DV can serve as a barometer as to why DV occurs and why men may condone DV as being a ‘normal’ facet of their relationships. Also, relating DV to a culture of gun violence is an area in need of urgent attention. New Orleans is becoming more and more divided by social and economic indicators, complicated by severe budget deficits and high levels of criminal violence.

Creative research methodologies are needed to examine the separate and combined effects of cross-problem service strategies such as the treatment of substance abuse, and family violence. Following individuals and families through multiple service interventions and agency settings, and examine factors that may play important mediating roles in determining whether violence will occur or continue such as the use of social networks and support services and the threat of legal sanctions.

Researchers need access to data that is collected in a uniform way across not only the city of New Orleans, but in all of Louisiana’s parishes. Without an understanding of trends policy makers and social service providers will be unable to learn from other programs that have found success, or failure. Data lends enormous value to research and overall improved services for survivors of DV by creating a real-time view of evolving trends. Transparency in data collection and ease in accessibility can not only help researchers but can also give victims of DV and community programs looking to create awareness about DV a resource to understand that this is an epidemic affecting the majority of lives in New Orleans, in one way or another.

Domestic violence is pervasive all over the United States and globally. It is a serious social problem, but there is relatively little information describing the experiences of violence among marginalized populations such as women, homeless people, immigrants, and children. Such research can be invaluable in understanding how other major cities are tackling DV and their own lessons learned. One example is the city of Baltimore where monthly public reports provide static data generated from statewide databases of protective and peace orders issued anywhere in the state of Maryland and include statistics on petitioner/respondent demographics, grounds for granted orders, reasons for denied and dismissed petitions (MNADV, 2015). The city of New Orleans could learn much from comparative research with other cities, not only in the United States, but globally as well. Finally, future research on Louisiana DV policies to discern their impact is needed to guide recommendations to those with the power to create and enact policies aimed at mitigating destructive and archaic legal and social systems that keep victims of DV entrapped in convoluted and outdated systems.
9.4 Summary

Economic and social entrapment is due to marginalization and stigma associated with DV and these issues are exacerbated by low levels of development of women in low-income situations. This research recognizes the barriers to informal and formal networks that preclude or encourage women to seek help in order to leave abusive relationships while living in a post-disaster society with disproportional aspects of social reconstruction in the context of New Orleans. The context implies that women are vulnerable to DV in the short and long-term social and economic reconstruction due to a lack of agency and capabilities due to gender and racial inequalities.

Hurricane Katrina’s devastation brought to New Orleans a new population dynamic and major avenues of funding to rebuild the city’s infrastructure and social systems. The influx of federal and state funding allowed New Orleans to weather the Great Recession of 2008 better than most cities but also disguised the fact that major portions of the population are still living below or near the poverty line, working in jobs that simply do not offer a living wage. Along with new opportunities Katrina brought the further marginalization of people of color through selective reconstruction of some of the hardest hit areas in the city. For many, transportation and even access to grocery stores is glaringly absent, even ten years later. Life immediately following Katrina was stressful for many residents of the city, particularly for victims of DV, most of whom were relocated. In the long-term, absent families and empty lots where an uncle or aunt’s house used to stand are stark reminders that New Orleans has not ‘come back’ for many who now feel forgotten, angry, and hopeless.

Perhaps it is a lesson to learn that, whether you are in a city that is losing its population due to disaster, or a city that is gaining in population due to an influx of new residents, refugees, or internally displaced persons, it is important to recognize the ease with which these populations are marginalized. The problem may seem vague and inconsequential to those who make it through hard times and have the resources to rebuild and are enjoying a sense of ‘normalcy’ in New Orleans. But there are consequences. The marginalization of people of color, the high rates of incarceration and fear of a police force that is meant to protect and serve all contribute to a perfect storm of violence where DV is not only a root case but a direct effect as well. Domestic violence is everyone’s problem and everyone has a role to play in diminishing, if not eradicating it completely. Having a well thought out plan to deal with DV in all communities is crucial to the sustained development of any city, town, or village in the world. Whether you are rich or poor, educated or illiterate, young or old, DV can manifest itself in your life. Understanding the dynamic of how women seek help, perceive DV in their culture is crucial to finding solutions to end the cycle that diminishes not only women’s social and economic capabilities, but
society’s capabilities as a whole. New Orleans is a strong and vital spirit that has seen many changes throughout its history, celebrated for its multi-cultural make up and colorful characters. The resiliency and determination to rebuild after Hurricane Katrina was, and still is an example to the world of what can be achieved in the face of great adversity. The same can be true for creating a framework to destroy the normalcy of DV and allow all people to live meaningful lives, free from all forms of violence.
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APPENDIX ONE

Demographic Questionnaire: In-depth and Focus Group Interviews

1. What is your age?

2. What is your ethnicity?
   a. Caucasian
   b. Hispanic or Latino
   c. Black or African American
   d. Native American or American Indian
   e. Asian/Pacific Islander
   f. Other
   i. Do not know
   j. Refuse to answer

3. What is the highest level of school or degree you have completed?
   a. No schooling completed
   b. Nursery school to 8th grade
   c. Some high school, no diploma
   d. High school graduate, diploma or the equivalent (GED)
   e. Some college credit, no degree
   f. Trade/technical/vocational training
   g. Associate’s degree
   h. Bachelor’s degree
   i. Master’s degree
   j. Professional degree
   k. Doctorate degree
   l. Do not know
   m. Refuse to answer

4. What is your marital status?
   a. Single, never married
   b. Married or domestic partnership
   c. Widowed
   d. Divorced
   e. Separated
   f. Do not know
   g. Refuse to answer

5. How many children do you have?

6. What was your income in 2014, before taxes?

7. What is your professional or employment status?
   a. Employed for wages
   b. Self-employed
   c. Out of work/looking for work
   d. A homemaker
e. A student
f. Military
g. Retired
h. Unable to work
i. Do not know
j. Refuse to answer

8. Which community do you most closely identify with in New Orleans?

9. Are you affiliated with any religious/spiritual group or religion? If yes, which one?
APPENDIX TWO

Questionnaire: In-depth Interviews

Community

1. Do neighbors in your community know each other well?
2. If there were a street fight in your community would people generally do something to stop it?
3. If someone in your community decided to undertake a community project would most people be willing to contribute time, labor, and money?
4. In your community do people generally trust each other?
5. If you feel ill or had an accident would your neighbors offer to help?
6. How often do you talk to a member of your family of birth?
7. When you have a problem can you usually count on members of your family of birth for support?
8. Do you regularly attend a group or organization?
9. Has anyone ever prevented you from attending a group or organized activities?

Partner Information (Ex Partner/Husband)

Note: All participants were no longer with their abusive partners and were answering questions based on their relationship(s) with them.

1. What was your partner’s education level?
2. Was he employed?
3. If you had children together, was he supportive of your pregnancy?
4. Did he ever use intoxicating substances?
   a. If yes, alcohol, drugs, or both?
5. How often did your partner use intoxicating substances?
6. What were some of the things that you and your partner would argue about?
7. Did you partner have relationships with other women/men while you were together?
8. Did you/do you ever use intoxicating substances?
9. What intoxicating substances do/did you use?
10. Did you ever use intoxicating substances as a coping mechanism?
Attitudes/Perceptions

1. What do you perceive as domestic violence?
2. How do you define domestic violence or violence against women?
3. Why do you think domestic violence or violent acts take place between partners?
4. Do you think a man ever has the right to hit his wife/partner?
5. Did you ever talk about things that happened to you during your day?
6. Did you ever talk about things that happened to him during his day?
7. Did you have issues with power and control in the relationship? I’d like to discuss things like isolation, restricted contact with your friends or family, accusing you of being unfaithful, ignoring you, or getting angry if you speak to other men?

Experiences with Violence

1. Has your partner ever:
   a. Insulted you or made you feel bad about yourself?
   b. Belittled or humiliated you in front of other people?
   c. Done things to scare or intimidate you on purpose (e.g. by the way he looked at you, by yelling and smashing things)?
   d. Threatened to hurt you or someone you care about?
2. Has your partner ever:
   a. Slapped you or thrown something at you that could hurt you?
   b. Pushed you or shoved you or pulled or cut you?
   c. Hit you with his fist or with something else that could hurt you?
   d. Choked, bitten, burnt you, or dragged you?
   e. Threatened to use or actually use a gun, knife, or other weapon against you?
3. Has your partner ever:
   a. Physically force you to have sexual intercourse when you did not want to?
   b. Did you ever have sexual intercourse you did not want to because you were afraid of what your partner or any other partner might do?
   c. Did your partner ever force you to do something sexual that you found degrading or humiliating?
4. Were your children ever present during any of these times?
5. Tell me about some of the violent episodes you experienced and injuries you received? (broken bones, fractures, cuts, bruises, broken teeth, burns, etc.)
6. Did you ever go to the hospital for help?
7. What were some of the reasons that would lead to violence? (money problems, job, family problems, jealousy, pregnancy, intoxication)

**Help-Seeking**

I would like to ask you some questions about what effects your husband/partner’s acts have had on you and how you coped with the situation at that time, and over time.

1. Did you ever fight back during violent episodes?
2. What were the effects of you fighting back?
3. Did you ever hit your partner when he was not physically attacking you? Verbally attacking you?
4. If so, what were the effects of you hitting your partner?
5. What were some of the informal networks you would use to cope with violent incidents?
   (Friends, Family, Neighbors, Co-workers, Class mates, Other, etc.)
6. What were some of the informal networks you would use to cope with violence?
   (Police, Hospitals or health centers, Counselors, Legal counselors, Religious leaders, Local leaders, neighborhood association members)
7. Did you know about services that were available to you?
8. What was your experience when trying to get help?
9. How many times did you try to get help?
10. If the police were ever called, either by you or by someone else, did you find them to be sympathetic and helpful? Why or why not?
11. What were reasons that made you go for help?
   (Couldn’t take it anymore, Badly injured, He threatened to or tried to kill you, He threatened or hit the children, He threw you out, You were afraid you would hurt or kill him? Financial reasons?)
12. What were reason that made you stay?
   (Financial reasons, You loved him, You didn’t want to be single, You thought you could change him, You didn’t think it was that bad, He apologized and promised to be better, You were afraid you would lose the children, You had nowhere to go (housing issues), You were unemployed)
13. How would you describe your feelings when you finally decided it was time for you to leave forever?
14. Where did you go?
15. How many times would you say you left before it was for good?
Other Experiences

1. Did you ever experience violent acts from a relative or from someone at school or work?
2. Were you ever forced to to have sexual intercourse or perform a sexual act when you did not want to? If so by whom? From a relative, neighbor, or stranger? How old were you?
3. How old were you when you first had sex? How was the experience?
4. When you were a child did you witness your mother being abused physically or sexually by your father or any other person?
5. Did you tell anyone about these experiences?
6. As far as you know, did your partner or anyone who hurt you ever experience physical or sexual violence in their lifetime or witness this as a child?

Katrina

1. Tell me about your experience during Hurricane Katrina.
2. Did you evacuate?
3. Did you experience an increase in violence of any kind after the hurricane?
4. Did you have trouble with FEMA?
5. Did you have trouble with any restraining orders or custody issues?
6. Did you feel safer after the storm?
7. Were you separated from your social networks? If so, how did this affect the level of violence in your relationships?
8. Did you see a level of crime rise immediately after the hurricane?
9. How do you think services have changed since the hurricane?

Financial Autonomy

1. What would you say are the major assets you own, yourself?
2. Did your partner/husband control your finances or did you both share them equally?
3. Did you ever have to quit a job because of your partner?
4. Have you had trouble making ends meet due to violence?

Miscellaneous

1. What are some of the most effective interventions you experienced when seeking help regarding domestic violence?
2. Were the police adequately trained?
3. Did you have a positive experience with the legal system if you chose to seek legal help such as a restraining order, pressing charges, or obtaining custody of your children?

4. If you sought help from social services, was your experience positive? What would you change?

5. What would you recommend to the system to see a better and more fluid approach to dealing with domestic violence in New Orleans?

6. Do you think different socio-demographic groups deal with domestic violence differently?

7. What are the major challenges facing New Orleans regarding domestic violence?
APPENDIX THREE

Social Network Interview Guidelines:

1. What do you perceive as violence? (Perception and definition of domestic violence; physical, emotional and monetary)
2. Why do you think violent acts take place between intimate partners? (Causes of domestic violence)
3. What is the most common type of domestic violence? (Forms and characters of domestic violence)
4. How would you describe domestic violence offenders of women and why do they abuse women? (Attitudes and beliefs about offenders, causes of domestic violence)
5. What are the main strategies women use to cope with offenders?
6. What are the main challenges you face when working with abused women?
7. What are some effective interventions and what are some of the greatest obstacles to effective interventions?
8. How would you categorize women who are victims of domestic violence?
9. Are there differences among different demographic groups in terms of coping strategies?
10. Do they use the same strategies or are they different?
11. How would you like to see the system change in order to see more effective systems aimed at protecting women who are experiencing domestic violence?
12. Do victims of domestic violence often know about their legal rights?
13. Would you say the police are adequately trained to deal with domestic violence?
14. What are the main challenges New Orleans faces in combatting domestic violence?
15. How did Hurricane Katrina affect services?
16. How have services changed since Hurricane Katrina?
Kelley Ponder grew up in Fairhope, Alabama and has resided in New Orleans for the past twenty years. She earned a B.S. degree in Biology from Birmingham-Southern College. Following graduation, she served in the United States Peace Corps in Benin, West Africa. She served in the Guinea Worm Eradication Program, from 1993 to 1996 as well as conducted health education classes to underserved women in remote areas. In 1999 she earned a Masters of Public Health in International Health from the Tulane School of Public Health and Tropical Medicine. She worked in various positions with the United Nations, Tulane University, USAID, and the Rockefeller Foundation, all on health and human rights. Her current research on domestic violence in New Orleans focuses on social and economic issues that affect help seeking behaviors among women in post-Katrina New Orleans. Having a great love for the city of New Orleans she has dedicated this research to the women who have suffered from domestic violence and lent their voices to empower themselves and others while promoting women’s gender equality and empowerment.