



ZANIM BĘDZIE ZA PÓŹNO

Before it's too late

**Domestic Violence in the Polish Community: An analytical approach
to defining the nature and prevalence of domestic violence in the Polish community**

Elizabeth Szczepanska



An Australian Government Initiative

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domestic violence in the Polish community

Elizabeth Szczepanska



Partnerships Against
Domestic Violence



2004

Australian-Polish Community Services Inc.

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- Women, who have been randomly interviewed during Polish social events such as the Polish Fair in Rowville, and during meetings in Polish Senior Clubs.
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Elizabeth Szczepanska

Preface



The idea for this project came from the experiences of women of Polish background who approached Polish community organisations and statewide community services due to experiencing violence and abuse at the hands of their partners.

Over time, a number of women reported that the responses of mainstream domestic violence services, as well Polish community organisations, failed to address the needs of women from culturally and linguistically diverse backgrounds, failed to explore the nature and extent of domestic violence in ethnic groups, and failed to promote a comprehensive response to the needs of the community.

This project was initiated by Elizabeth Drozd, Executive Director of the Australian-Polish Community Services (APCS), and was approved by the APCS Management Committee in November 2003. APCS is interested in determining how deep-rooted the problem of domestic violence is in the Polish community and how they, as an ethno-specific organisation, should respond to this very sensitive issue.

1. Introduction



Domestic violence (DV) is a widespread and often hidden problem across Australia. It occurs in all parts of society, regardless of geographic location, socio-economic status, age, cultural and ethnic background, or religious belief, and its often-devastating effects- psychological, social and economic, short-term and long term- rebound on families, children, and the community as a whole. ("Working together against violence". The First Three years of Partnerships against Domestic Violence, 2001)

In 1997 the Heads of Government initiated Partnerships Against Domestic Violence (PADV), an initiative between Commonwealth, State and Territorial governments to work together towards the common goal of preventing domestic violence across Australia and ameliorating its effects.

PADV has established a strategic collaboration to test and research new ways of addressing domestic violence, enhance and share knowledge, and educate the community about domestic violence.

This project responds to some of the principles of PADV and priority areas, which were identified in above- mentioned report, such as:

- The community has a responsibility to work towards the prevention of domestic violence and to demonstrate the unacceptability of all forms of domestic violence.
- Strategies developed to address domestic violence need to take account of the needs of all Australian communities, including the needs of people from culturally and linguistically diverse backgrounds.
- Ongoing strategies are needed to increase community awareness that domestic violence is unacceptable, and it is considered a crime.

This project will look specifically at the issue of domestic violence in the Polish community in Victoria. It is a small project without external sources of funding. Australian-Polish Community Services recognises and acknowledges that this research is not comprehensive and that many other women of Polish background may have accessed other services or sources of assistance, and had different experiences in seeking assistance for domestic violence. The limited resources available to conduct this project means that we are able to develop a snapshot of the experiences of Polish women in Victoria rather than being able to capture the full picture.

2. Project Methodology & Data Collection



The issue of domestic violence is a complex and very sensitive one. To reflect this, the project involved a number of quantitative and qualitative research techniques including:

- Statistical review;
- Literary review;
- A questionnaire combining quantitative and qualitative questions was developed and issued to two groups of women of Polish background; (See Appendix 1)
- Structured interviews with women of Polish background who experienced domestic violence but never approached domestic violence services for assistance;
- An anonymous survey designed to determine the nature, level and extent of domestic violence in Polish families and subsequently experienced by youth of Polish background; (See Appendix 3.)
- A statistical analysis of the data collected through the surveys, questionnaires and structured interviews;
- A summary of all gathered information to formulate further recommendations and strategies to target the issues identified.

The target groups for this project were:

- Women of Polish background who, due to domestic violence, accessed domestic violence related services;
- Women of Polish background who do not identify their experiences as domestic violence and who, therefore, have not accessed domestic violence services; and
- Students of Polish background who study the Polish language at Saturday schools (in order to ensure the safety of the young people and staff who participated, the names and locations of the schools have been excluded from this report).

The questionnaire consists of questions related to the nature and extent of domestic violence experienced by women, sources of support and the symptoms of depression they identified as experiencing. For the purposes of this research the BDI-II A.T Beck Depression Inventory was translated and adopted. (Appendix 2)

The data from Polish women who experienced and escaped domestic violence was collected from women who accessed high security women's refuge between 1994 and 2003. The second group consisted of women randomly chosen and invited to complete the Domestic Violence Questionnaire between December 2003 and January 2004.

The Students' Domestic Violence Survey was designed to explore the nature and extent of domestic violence in Polish families and its impact on Polish youth. For research purposes the

"SOS Quiz" was adopted. This was developed by the Domestic Violence and Incest Resource Centre (DVIRC) in Victoria and is available on their website.

The Students' Domestic Violence Survey combined three groups of questions. The first seven questions related to domestic violence that may have occurred within the family home between parents. Questions 8 –12 explored domestic violence experienced by the students themselves. The last group of questions (13-20) aims to determine the impact of domestic violence witnessed and/or experienced by young people on their emotional well-being.

The participants of this research were given information about the nature of their participation in the study, and were informed about confidentiality and anonymity regarding the information obtained from them. They were also advised about their right to withdraw from the research at any time. All participants who were involved in this research were offered debriefing to neutralize any potential negative feelings relating to their participation.

In total 50 women who accessed domestic violence services and 20 women randomly interviewed during social events participated in the research. 18 other women who were approached declined the invitation to participate in this research.

The Students' Domestic Violence Surveys were conducted in December 2003 at Polish Language classes. The classes and locations of the schools participating will not be identified in this report to ensure the safety of the young people who participated. Permission to conduct the survey was granted by the School Principal. Consequently, teachers of grades 10,11 and 12 were approached and agreed to the administration of the survey on behalf of the Australian-Polish Community Services.

All students of the Polish language classes from grades 10 to 12 were invited to participate in the survey. The survey was administered by the researcher and completed before the beginning of the class.

3. Project Aims



The broad aim of this study was to investigate the issue of domestic violence in within the Polish community and the experiences and barriers Polish women faced in seeking assistance for domestic violence.

The original objectives for the project were:

- To present a profile of Polish women who experienced or escaped domestic violence situations and sought accommodation in the high security refuge system in Victoria between 1994-2003.
- To determine the nature, level and prevalence of domestic violence experienced by women of Polish background.
- To identify issues related to domestic violence experienced by women of Polish background.
- To determine adversity and socio-demographic characteristics of a group of Polish women who have experienced domestic violence.
- To analyse vulnerability and specific environmental risk factors which may potentially lead to the development of domestic violence in Polish families.
- To discuss possible strategies and solutions to address issues of domestic violence in the Polish community.
- To identify how the Polish community perceives domestic / family violence.
- To identify what factors prevent Polish women from accessing

services in response to domestic violence.

- To attempt to identify what the Polish community wants and/or needs in terms of education and options.
- To develop an improved understanding of who is experiencing domestic violence in the Polish community and who the offenders are.

As the project developed it was decided to also explore the mental health impacts of domestic violence on both women who have experienced domestic violence and young people who have witnessed and/or experienced violence and abuse in the family home.

- To identify the impact of domestic violence on women's mental health.
- To explore the impact of domestic violence on young people and their mental health.

Further, it is hoped that this project will:

- Develop and contribute to the knowledge base about domestic violence experienced by women from culturally and linguistically diverse groups.
- Determine the nature, level and prevalence of domestic violence in Polish families through a survey conducted with a group of students of Polish background.
- Identify the nature, level and prevalence of domestic violence experience by youth of Polish background.

3.1 Ethical Considerations



The researcher adhered to the strict guidelines regarding ethical constraints using both prior knowledge and supplementary resources to best ensure a research methodology to obtain clear and decisive results while at the same time maintaining ethical integrity.

While conducting the research, the ethical considerations included the following components:

- Voluntary informed consent was obtained from participants of this research and appropriate information provided about the nature, extent and duration of the participation required.
- All participants were informed of the importance of the research and its beneficial nature to the wider Polish community.
- Due to the sensitive nature of the material, the privacy of research participants was strictly protected by anonymity, implementation of a coding scheme and assurance that all records containing any personal data will be separated from the research data.
- Participants were informed of their rights to withdraw from the research at any time without undue influence to maintain involvement.
- All participants were provided with the information that some questions were very personal and may cause some discomfort in answering them.
- To minimize harm or risk of harm that might result due to the nature of the questions, research participants were offered the option of debriefing to minimize negative feelings or responses through possible re-traumatisation.
- Information about services available for women and young people who experience / witness domestic violence was made available to participants upon request.

4. Literature Review



The needs of groups from culturally and linguistically diverse backgrounds have never truly been addressed, especially in the area of domestic violence.

Research on community attitudes towards domestic violence conducted by Office of the Status of Women in 1995 found that:

- Those born in non-English speaking countries are generally a less well informed population group.
- Older women and those with less education are less well informed.
- Women exhibit a higher level of awareness and understanding of domestic violence than men.
- Among the men, those with higher level of education and those in white collar occupations are better informed than their less educated and blue collar counterparts.

Under the Partnership Against Domestic violence (PADV) two research projects have looked at domestic violence in culturally and linguistically diverse communities. The report, *Cultural Perspectives*, studied people from Vietnamese, Cantonese, Arabic, Turkish, Tagalog (Filipino) and Bosnian communities (2000). In *Reshaping Responses to Domestic violence* (1999) a phone-in and focus groups were utilised to survey attitudes across a range of communities.

In the context of the findings of the above projects prior to the discussion about domestic violence, the most frequently mentioned social issues identified across all language and cultural groups were:

- Financial pressure and financial insecurity
- Unemployment - the effects were seen to be more than economic and include low self-esteem, depression, and other forms of negative behaviours such as gambling, substance abuse, neglect of wives and children.
- Family relationships from the perspective of a culture clash.
- Cultural differences and migration.
- Equity and gender issues.

Domestic violence, as a community issue, was spontaneously mentioned only by a few female participants of this research. However, when the topic of domestic violence was introduced, all participants displayed a reasonably good level of understanding of domestic violence.

There was an acknowledgment by all participants of the existence of domestic violence in their language or cultural group but the most commonly perceived causes of domestic violence were external factors such as: financial problems, alcohol or drug abuse, gambling and stress. These findings suggest that there is an environment for conducting further studies around the issue of domestic violence in various communities and for opening community discussion.

According to data published in the Women's Domestic Violence Crisis Service Annual Report 2001- 2002, 32% of all clients who contacted the service seeking for information, support or accommodation were from culturally and linguistically diverse groups (WDVCS, 2003).

The number of publications that enlighten knowledge on the problem of domestic violence experienced by CALD women in Australia is very limited and there has been no previous publications or research undertaken to investigate the issue of domestic violence in the Polish community.

4.1 Definition of Domestic Violence.



Domestic violence is a very complex and multidimensional issue, which is deep-rooted into the framework of our society, and touches the lives of many people, unprejudiced by social class, age or diverse occupations and professions. Contrary to popular belief and current myths, domestic violence cuts across all ethnic groups and economic lines.

The major difference between domestic violence and other categories of violence is the relationship between the victim and the perpetrator. In situations of domestic violence, the perpetrator uses his intimate knowledge and relationship with the victim to have power and control over that person by utilising a range of behaviours.

Whilst violence committed against strangers is considered to be an assault, violence perpetrated against a family member is usually placed in the category of a family argument. This is where problems arise: whilst a perpetrator of a violent act against stranger will be arrested and charged with assault, the perpetrator of violence against a family member may be reprimanded and told to “cool down and take it easy”. When it is a situation of assault against a person not related to the perpetrator, there are no uncertainties as to who is the victim and who is the assailant. In domestic violence situations the victims are often blamed for what has happened to them and the crimes committed against them.

Throughout this project the term “domestic violence” is taken to define:

“any form of abuse, violence and/or coercion by a partner or previous partner that serves to establish and maintain power and control over another person, is enacted in a context of unequal power and privilege, and has the potential to cause harm to the physical and or emotional well being of that person .

The behaviours which constitute [this] violence include actual or threatened physical assault, sexual assault, verbal, social, spiritual and economic abuse.” (SA Domestic Violence Unit, 1998)

The nature of domestic violence includes a range of behaviours, often in combination with one another.

- **Physical violence** of all types, including pushing, hitting, punching, hair pulling, pinching, poking, spitting, twisting arms, burning, biting, gouging, and using a weapon. The destruction of property, such as smashing furniture or the destruction of possessions valued by the victim. Severity of injuries ranges from no visible signs to tissue damage, broken teeth and bones, to the permanent injury and / or death.
- **Verbal abuse** consists of derogatory comments and attacks on a woman's self-respect, her appearance and her character. Questioning of her mental well being erodes her image of herself and her sense of being capable, of having rights and choices. Critical comments related to her family and significant others, intimidating remarks, constant humiliation and put-downs also contribute to low self-esteem. The perpetrator uses his language to make his victim feel worthless, ugly, stupid and powerless.
- **Psychological/emotional** abuse describes a form of abuse when the perpetrator uses emotional manipulation to control his victim's behaviour by destroying her

self-concept, self-worth and her mental well-being. The most common form of psychological abuse used by perpetrators to control their victims are threats, including: death threats and threat of injury to another person, such as a woman's child, or in situations where women who are newly arrived in Australia as prospective partners or wives are threatened with deportation if they do not obey the perpetrators orders.

- **Social abuse** is behaviour which aims to isolate a woman from her family or friends, forbidding contact with them, ridiculing her in front of others, cutting access to the telephone and other forms of communication, restricting her movement by imprisoning her in her home. It can include actions such as preventing the woman from having contact to other people from her cultural and linguistic background and from learning English in order to prevent her from social contact with others or to gain skills for employment opportunities.
- **Economic/financial** abuse involves the perpetrator maintaining control over family finances and preventing access to money by controlling the woman's expenditure and assets. It can also include preventing women from studying or taking a job and not allowing her to make any decisions on how money is spent. The perpetrator's use of his money for gambling or personal entertainment and demands that the woman then becomes financially responsible for both his and the family's expenses is also a form of financial abuse.
- **Sexual violence** involves any sexual behaviour that has been imposed or forced upon a woman without her consent. It includes forced vaginal, oral and anal penetration or insertion of objects, forcing a woman to preform sexual acts, which she finds bizarre, painful or humiliating.
- **Stalking** is a form of abuse where the intention is to cause fear or personal injuries. Such behaviour may include following, watching, unwanted presence of the perpetrator at the victim's home or workplace, harassment, repeated calls, or unwanted mail. (PADV, 2001).

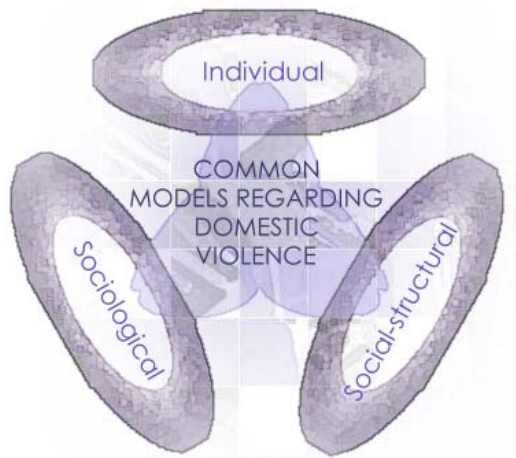
These different forms of violence and abuse are not mutually exclusive and they usually occur in various combinations and degrees. **The common factor of in all forms of domestic violence and abuse is fear.** The fear of being harmed and fear for the well being of her children paralyse the victim's ability to take any action towards escaping. The fear of future violence often becomes the most powerful weapon in the oppression of women. Living in psychological terror has a huge impact on women physically and emotionally, making the task of breaking the cycle of violence very difficult.

4.2 Theories of Domestic violence



The theories of domestic violence can be categorized into three general classifications:

(Dwyer, D.C & Smokowski, P.R & 1995, p.190)



- **Individual** (psychological) models
- **Sociological** (socio-psychological) models
- **Social-structural** (Feminist) models

Individual models - base domestic violence on the belief that characteristics of the perpetrator attribute to his aggressive behaviour. These may include poor self-control, self-esteem, mental illness, propensity to criminal behaviour, ability to ascribe blame or, in the case of victims, internalise blame and substance abuse.

Sociological models explain domestic violence through an examination of social structures of the family. Such models include an analysis of family dynamics and interactional patterns, which are passed from one generation to next.

Social-structural (Feminist) models, construes domestic violence as an abuse of power and analyses male violence as a form of social control men use over women. This approach is based on patriarchal beliefs

that a husband's use of physical force against his wife is an expression of his superior status, authority and power in the relationship.

In western cultures, including Australia, the following explanations of the causes of domestic violence are the most common adopted:

One of the most popular theories is based on the belief that the domestic violence is a result of the inability of the perpetrator to control his anger. This theory simplifies domestic violence by stating it is almost the same as anger. However, there are many non-violent ways to express anger and it is not acceptable to use a woman as a punching bag because she is dependent and powerless. The same men, who theoretically have problems controlling their anger in domestic situations, are generally capable of controlling it in public situations.

The psychological theory of domestic violence places responsibility for the violent and abusive behaviour on psychological problems the perpetrator may be experiencing. In the context of this theory, men are deemed to be violent because they have low self-esteem and do not have communication or stress management skills. However, there are many people with low self-esteem and poor communication skills who do not resort to assaulting and abusing their partners.

A number of theories attempt to justify violence and abuse in domestic relationships as learned behaviour, the result of witnessing or experiencing domestic violence during childhood and adolescence. These theories claim that children who had experience of domestic violence are more likely to become perpetrators of domestic violence in adulthood. However, such theories ignore that not every child who grew up with

domestic violence becomes a perpetrator and that not all perpetrators experienced domestic violence in their childhood.

Some theories attribute domestic violence to the perpetrators alcohol and drug abuse. Historically, alcohol has been held out as a contributing factor in violent behaviour. This is in contrast to the fact that incidents of domestic violence are perpetrated by men without any alcohol in their systems. In some individual cases alcohol consumption may trigger a violent incident but it is more often used as an excuse for violent and aggressive behaviour.

Another group of theories, which locate the cause of the violence outside the individual, include theories of poverty, stress and

culture. They are based on a belief that domestic violence is determined by family financial problems which cause emotional tension between family members and can result in violent incidents. There is also a train of thought that claims cultural identity is a factor in domestic violence, that domestic violence is a "natural" way of relating for people from certain cultures.

All of the above theories impact on the attitudes of the broader community towards both victims and perpetrators of domestic violence. These can subsequently impact on how domestic violence is responded to by the community and create barriers to finding real solutions to the problem of domestic violence.

4.3 Incidences of Domestic Violence



The 1996 Australian Bureau of Statistics Report titled "Women's Safety Survey", established the first national data on the extent and nature of all forms of violence against women in Australia. (The report defined violence as "any incident involving the occurrence, attempt or threat of either physical or sexual assault".)

The ABS surveyed approximately 6,300 Australian women about their experience of actual or threatened physical and sexual violence and estimated that, in the 12 months prior to completing the survey:

- 7.1 per cent of the adult female population or 490,400 women experienced violence.
- 2.6 per cent or 110,000 women who were married or in a de facto relationship had experienced violence perpetrated by their partner.
- 38 per cent or 2.6 million women had recently experienced one or more incidents of violence since the age of 15.
- Of the women who had experienced physical violence, one third experienced more than one incident.
- Women were found to be four times more likely to experience violence from a man than from another woman.
- Younger women were at more risk than older women. Seven per cent of women aged 18-24 experienced violence by their partner, compared to 2% of women aged 45-54 years and 1% of women aged 55 and over.
- 23 per cent of women who had ever been married or in a de-facto relationship had experienced physical violence from a male partner.
- 42 per cent of women who had been pregnant during a relationship had experienced physical violence during the pregnancy, and for almost half of these, the violence began during their pregnancy.
- 56 per cent of women who had children in their care and had experienced violence from a partner said that one or more of the children witnessed the violence.
- Of the women who had experienced violence from a partner in the last 20 years, 80 per cent had not sought help from services at all.
- Only 5 per cent women experiencing violence from a current partner reported the last incident to police.
- 73 per cent of women who experienced violence from a current male partner identified that they lived in fear.
- A 1994 National Census found that 2,149 women escaping domestic violence were accommodated by the Supported Accommodation Assistance Program over the two week period of the survey.
- The Women's Domestic Violence Crisis Service, which provides services to Victorian women, in 2001-2002 received calls from 26,033 women seeking information, support or emergency accommodation for domestic violence in the 2001-2002 period.

- In 2001-20002 Victorian Police received 21,622 reports of incidents of family violence. Out of all of the victims, 79% were women, while men made up 89% of perpetrators.
- In 1998 -1999 there were 21,817 applications for Intervention Orders in Victorian Magistrates' Courts. In 70% of these applications, women were identifies as the Aggrieved Family Member as a result of domestic violence.
- In a survey conducted in the Royal Brisbane Hospital (Queensland) in 1991, 1,211 people who attended the emergency department. Of these, 23.3% of women disclosed a history of domestic violence
- In a study conducted in Melbourne in 1993/94, 28% of surveyed women

who attended general practitioners revealed that they have experienced physical or emotional abuse in their current relationship.

- Of homicide incidents reported in the period between 1989 and 1996, 543 were homicides between people in intimate relationships. In almost 77% of the cases, the offender was male and the victim female.
- A national survey of 5,000 Australian teenagers found that one quarter had witnessed violence against a female parent.

Source: (<http://www.dvirc.org.au>)

4.4 Domestic Violence in Culturally and Linguistically Diverse Groups



A report published in 1992 by the National Committee on Violence Against Women identified that women from culturally and linguistically diverse groups (CALD) are doubly victimised. They do not belong to the dominant Anglo-Australian culture and they do not belong to the dominant gender in our society.

For many people who experience abuse in their domestic relationships, their vulnerability is compounded by their immigrant status and/or because they are culturally and linguistically different from the mainstream community.

According to data published by the Office of the Status of Women (1995), females born in non-English speaking countries have been reported to be amongst the groups who were consistently least informed about various aspects of domestic violence.

A study into community attitudes towards violence against women cited in *Community Attitudes to Violence Against Women* (1995) found that domestic violence was a matter of significant community concern, as were crime and personal safety, and that all forms of domestic violence (physical and psychological) were considered serious.

The research shows that the general community's understanding of the broad issues surrounding domestic violence are reasonably high and that this understanding has improved since 1987 when the Commonwealth Office of the Status of Women commissioned the first survey of community attitudes to domestic violence. (Office of the Status of Women (1988)

The research conducted in 1995 found that, eight years after the initial survey, there was far greater understanding of domestic violence, with the vast majority of respondents agreeing that:

Alcohol is not an excuse for violence (94% agreement),
Domestic violence is a criminal offence (93% agreement),
Domestic violence is not a private matter (80% agreement).

A significant difference was noticed in the number of respondents who saw provocation as an excuse for domestic violence. In 1987 14% justified domestic violence due to provocation, in 1995 only 7% of respondents believed that provocation was an excuse for violence towards partners.

In the opinion of the respondents of the 1995 research, the way to reduce violence against women was to raise the priority given to community education and counselling services for those who perpetrated domestic violence rather than a legal response.

Among women accessing services specifically funded to support women and children escaping domestic violence, such as women's refuges, 42 per cent of women are from CALD backgrounds. This figure is significant when measured against the fact that 21% of all

Victorians speak a language other than English at home and 23.4% of Victorians were born overseas. (ABS 2001 Census).

One of the factors that has an impact on family relationships is immigration. The relocation process and re-settlement in a new country reduced the already limited power status women have. Language barriers, financial pressures, unemployment, lack of support from family and friends may trigger or increase incidents of domestic violence within ethnic communities. It may also prevent CALD women from approaching government funded domestic violence services.

In many instances women from CALD backgrounds do not understand their rights or the Australian legal system, and they do not trust authorities or the police. Powerful barriers to disclose domestic violence include shame, disgrace, a strong sense of obligation, self-blame and fear of deportation. The cultural clashes between the family's values and traditions and those of Anglo-Australian society may also have an impact on family interactions and may cause additional stress in their already difficult situations.

The literature review identifies that knowledge of issues surrounding domestic violence in the many culturally and linguistically diverse communities in Australia is still very limited and further studies need to be undertaken.

4.5 The Impact of Domestic Violence on Women and Young People



The negative and damaging impact of domestic violence on its victims is not questionable. The overall effect of domestic violence on women has been compared with the effect of being a prisoner of war or a victim of torture (Condonis et al, 1989).

The consequences of being exposed to frequent physical and psychological abuse have a serious affect on women's physical health and emotional well-being. The literature review indicates that survivors of domestic violence suffer from a sense of hopelessness, powerlessness and sometimes from a total loss of self. They also experience various symptoms of depression, anxiety and uncontrollable outbursts of anger (Dutton, 1995: p161-195).

The most frequently mentioned health implications for women who experience violence are:

Depression
Unexplained accidents and injuries
Atypical back, chest or abdominal pain
Frequent headaches
Mood swings
Chronic pelvic pain
Menstruation difficulties
Eating disorders
Insomnia
High rates of substance abuse
Anxiety disorders
More suicide attempts
Post traumatic stress disorders
Death

This list of health implications was drawn from a variety of sources (Dobash & Dobash, 1979; Walker, 1984; McFarlane et al, 1992; Dutton, 1995; Poole et al, 1996; Webster et al, 1996).

It is estimated that in Australia, for one state alone, the financial consequences of health problems related to impact of domestic violence on women are \$AU 17.67 million per annum (Cox, 1991). Whilst it is possible to estimate the financial cost of domestic violence perpetrated against women, it is not possible to count the cost of the psychological damage they suffer short and long term.

It is incalculable to determine the cost of women's lost hopes, opportunities, sense of safety, loss of identity, integrity, self respect, autonomy, achievements, trust and fulfilment.

Further research projects must be undertaken to establish how many women, as a result of ongoing domestic violence, become long term recipients of government benefits, including Sole Parent's Benefits and, in later years, may receive a disability pension due to ongoing mental health problems.

Domestic violence is generally viewed as a problem that occurs between two adults. Research conducted over the last ten years, however, indicates that domestic violence has a significant impact on children and young people. As a result of living in violent

environments, witnessing domestic violence or being subjected to physical or emotional abuse, young people may develop various health problems.

Some of the potential health implications are:



Further research indicates that witnessing domestic violence in the family home may have a significant impact on adolescents. Adolescence is a critical developmental period in a young persons life; they become involved in intimate relationships and may transfer social patterns of behaviours which they learn in the family home. There is a risk that if they were victims of domestic violence or witnessed violent behaviour they could behave in the same way towards their future partners or believe that there is no other way to conduct a relationship.

This summary of impacts of domestic violence on women, children and young people has been drawn from a range of sources (Ray, 1994;Jaffe et al 1992;Browne & Herbert, 1997;Worth & Mertin, 1997;Sunderman et al 1995).

The impact and nature of domestic violence experienced and witnessed by young people from culturally and linguistically diverse backgrounds has never been the focus of researchers attention and further studies need to be undertaken in this area.

5. Domestic Violence In The Polish Community In Victoria



Background Information

By Wendy Bennett

In order to have an understanding of the responses to domestic violence and help seeking behaviours by Polish women residing in Australia, it is important to first gain an understanding of the cultural context these women come from. The migration of the Polish speaking population to Australia has occurred in two main waves. The first occurred in the late 1940s and early 1950s following the 2nd World War. Many Poles had been displaced as a result of the war and 50,000 chose to make Australia their new home. Poles are the largest group of refugees to settle in Australia. Then next main wave of migration from Poland to Australia occurred in the 1980s following the Solidarity Movement. Between 1981 and 1991, over 25,000 Poles migrated to Australia, many as either refugees or under the Special Humanitarian Program. Victoria has the largest Polish community in Australia with approximately 20,000 residents born in Poland. Currently 48,000 Victorians identify as having Polish ancestry.

Poland has a strong Catholic history and religious beliefs have a significant impact on how violence and abuse in intimate relationships is viewed by the Polish population, particularly by the middle aged and older members of the community. As with many cultures, many within the Polish community in Australia tend to hold on to the beliefs and traditions that existed in Poland at the time they migrated. The strong religious and traditional beliefs about a woman's place in the family may be a contributing factor for women deciding to remain in the abusive situation. Women may choose to stay in order to avoid being labelled "inadequate" or "bad wives" by other members of the community. Other factors that may contribute to women remaining in the abusive situation can include shame, hope that the situation will change and not seeing a way out.

In Poland, as in other parts of the world, domestic or family violence has been viewed as a private matter. There may be a level of acknowledgement that domestic violence occurs within the community but nobody talks about it. The common explanations or causative factors ascribed to the incidence of domestic violence include: alcohol abuse, unemployment, fights about finances, infidelity and psychiatric disturbances (Centrum Badania Opini Społecznej (CBOD) 1997). The incidence of domestic violence is sometimes ascribed to only occurring within the lower socio-economic groups within the community.

Whilst "domestic violence" has become a recognised term in Australia and other western countries, it is a relatively new term in Poland. It is only in more recent history that "domestic violence" has been utilised as a way to describe violence and abuse against intimate female partners in Poland. Legally, reference is made to "crimes against the family". More commonly, the Polish population would use statements such as: "He has a heavy hand"; "She is being beaten by her husband"; "Her husband tortures her"; "There is violence in the family"; "There is a difficult situation at home"; "He maltreats her"; and "Damski bokser" (He only boxes with women). Women in Poland have tended to use descriptive phrases to identify the domestic violence they are experiencing rather than the use of a label. Generational factors and life experiences also come into play when defining or referring to violence and abuse between intimate partners.

Despite limited recognition of the term "domestic violence", violence against family members has been an important social issue for much of Poland's recorded history. Criminal legislation that has been in existence in Poland since 1932 stated that any offender who was found guilty of physically or morally tormenting another person with whom they were in an interdependent relationship could be sentenced for up to five years. However, these legal measures did not offer any real support or protection for women; they were strictly focused on the punishment of the offender.

Crimes against the family accounted for 14.6% of all criminal matters in Poland in 1995. During this period, 27,063 offenders were found guilty of committing crimes against the family and over 10,000 of these were sentenced to terms of imprisonment ranging between six months and three years (Kosińska-Kozdra, 1998).

Polish Criminal Law in this area was reviewed and amended in 1998. The revised legislation recognised that domestic violence was a crime against the family and included a clause that addressed the psychological impacts of such behaviour. The clause states that any person who physically and morally torments another person with peculiar cruelty whom, as a result of the abuse, commits suicide, can be sentenced for a period of up to twelve years imprisonment (Kosińska -Kozdra, 1998).

Recent statistics released by the Centrum Badania Opini Społecznej (Public Opinion Research Centre) indicate that in 2003, police attended 85,000 domestic violence incidents and that 137,000 Polish women experienced domestic violence. Three years earlier, police attended 86,000 incidents. Whilst police attendance has reduced by 1,000 since 2000, the recognition and identification of domestic violence as an issue has increased. Questions about domestic violence have now been included on the Polish census and in 2002, 1 in 8 women identified as experiencing domestic violence with half of these women indicating they experienced violence and abuse on a daily basis. This figure is down from the 1990s when 1 in 5 women identified that they were experiencing violence and abuse in their relationship. The reasons for the lower figure in 2002 are not identified. In addition, the census indicated that 40 percent of divorced women are disclosing a history of domestic violence, that every year 50 severely abused women attempt suicide, and that there are 200 domestic murders every year.

The term "domestic violence" was identified by some as a possible deterrent to Polish women to identify what they may be experiencing in those terms. Attitudes towards and understandings of domestic violence may vary depending on when the individual migrated to Australia. Women who migrated ten to twenty years ago have different knowledge and attitudes to the issue than women who have migrated more recently; and those who left Poland during the 1980s and 90s would not be aware of some of the campaigns in Poland to raise awareness about the issue. Among some people from the Polish community there may be a reluctance to identify as experiencing domestic violence as this would be akin to identifying as a "victim", a status that equates, for some, as being at the very bottom of the social structure. Accessing social support services in Poland under the socialist regime was viewed in much the same way. It was usually only those people who were considered to be of very low socio-economic status or who had other issues (ie. alcoholics and people with mental illness) who access social services for assistance and for anyone else to do so reduced them to the same level. This may be a contributing factor for some Polish women's reluctance to access services in response to domestic violence.

As indicated above, domestic violence services are relatively new in Poland, most being established only in the past ten years or so. The services currently available are limited to the Blue Line, a free call crisis line and a very small number of newly established shelters for women seeking safe accommodation as a result of domestic violence. The availability of

accommodation in Poland is very limited in any situation. There is a housing shortage, the consequences of which mean that couples are sometimes forced to continue to reside together even after divorce. In real terms this means that women who may wish to escape abusive situations literally have nowhere to go.

It is from this context that the responses from the women in the two groups in the following sections must be viewed. The women who participated in the research have arrived in Australia at various stages over the past 50 or so years and each generation has different experiences, awareness and understanding of domestic violence both in Poland and Australia.

5.1 Polish Women Who Accessed Domestic Violence Services

Survey Results



Case study:

"Agnes" arrived in Australia in 2001 on a fiancé visa. She met her future husband via the Internet. Agnes was in her late twenties at the time. She had a reasonably happy life in Poland, which included a full-time and satisfying job, a rented apartment and friends. Her parents died while she was still at school and she was brought up by relatives.

Agnes was not looking for a husband via the Internet but simply started chatting with a widower of Polish background who had been living in Melbourne for many years. Over time a friendship developed, which included phone calls and flowers from him and he encouraged her to come to Australia as his fiancé. Agnes concluded that he was a good man in view of the fact that he cared for his small children.

Upon her arrival in Australia a wedding was arranged and shortly after Agnes was expecting a child. Following the wedding, Agnes' husband became much more controlling, particularly the finances and all social activities. Agnes had no friends of her own and most of her time was taken with household duties and looking after her step-children. Her only friends were her husband's, which meant that she could not talk to them about any of her concerns, as she felt that their loyalty would be first and foremost to her husband. As her situation grew worse, she opened up to a Polish woman she met at church. With that support, she contacted a community organisation for assistance and Agnes decided to leave the abusive situation. Agnes was in the second half of her pregnancy at the time, had no income and no family support. She was soon to find out that her wedding date coincided (perhaps accidentally) with a date of significance to her husband's first wife.

To determine nature and prevalence of domestic violence experienced by women of Polish background, the Domestic Violence Questionnaire was administered to 50 women. All women participating in this component of the research accessed Polish community services, domestic violence services and counselling services due to domestic violence between 1994 and 2003. All had decided to leave the family home because of the extent of the abuse they were experiencing.

The women in this group fell into two distinct categories:

1. Women who migrated as a prospective spouse; and
2. Women who migrated as a family unit.

All of the women who migrated as a prospective spouse had met their partners

either in Poland or whilst travelling and had developed intimate relationships with these men. The women in this group indicated that they only saw a loving, supportive person prior whilst with their partner overseas and the violent, abusive side once they had arrived in Australia. Some married in Poland just before migrating, others travelled to Australia with expectations of marrying their partners here.

Women in this group tended to fall into two age groups: young women in their late teens and early twenties and women in the 30 – 48 age group. This group is more likely to be able to communicate in English and to have high levels of formal education. These women were generally aware that they had to be in the relationship with their partners for two years before they were eligible to apply for permanent residency. The men

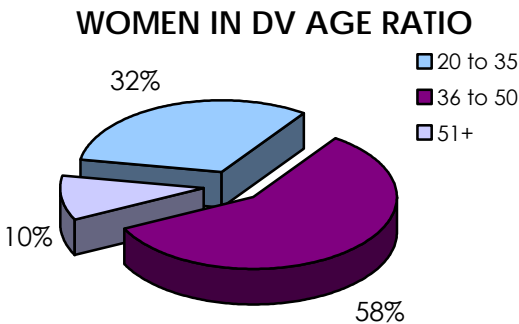
they were involved with all had Australian citizenship.

Of the women who migrated as a part of a family unit, all had experienced domestic violence in Poland but found that the level and intensity of the violence and abuse increased upon their arrival in Australia. These women indicated that the lack of family support in Australia, financial pressures and experiences of migration all contributed to the increase in the violence and abuse they encountered in Australia. This group generally had limited English language skills, experienced higher levels of depression and were not in paid employment. Many of the women in this group worked in the family home raising children and caring for their partners.

Five of the women in this group were married to or in relationships with men of backgrounds other than Polish. All of these women experienced additional isolation as they were not permitted to have access with their families or other members of the Polish community.

Age of Participants

58% of Polish women experiencing domestic violence who accessed high security refuge accommodation were between 36 -50 years of age. 32% were between 20 - 35 years old and 10% were older than 51 years of age.



Residency in Australia

At the time of accessing high security refuge accommodation, 44% (22) of the women had been in Australia for less than 2 years, 30% between 2 and 10 years, and 26% had lived in Australia for more than 10 years.

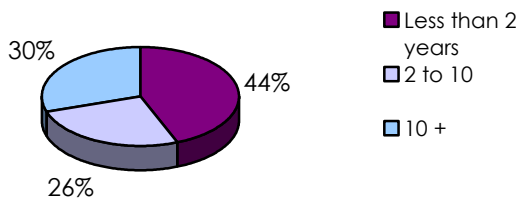
The high number of women seeking assistance for domestic violence within two years of their arrival in Australia is of significant concern. Of this group, 14 women had entered refuge accommodation within 12 months of their arrival in Australia. The majority were women who had met their partners, all Australian residents, and had married recently before, or were intending to marry soon after, arrival in Australia.

Many of this group of women began experiencing extreme levels of abuse soon after their arrival and their lack of permanent residency was a factor in the abuse. These women indicated that the man they came to know in Australia was very different from the one they had met while he was travelling overseas.

Women who travelled to Australia as a part of the family unit were often experiencing violence in Poland. Many identified that the violence and abuse increased in intensity following migration. The increased violence along with social isolation, lack of cultural and linguistic support through social networks, and lack of familiarity with available domestic violence support services meant that these women tended to remain in the abusive situation for longer periods than women who married Australian citizens.

The decision to remain in the abusive relationship was combined with the belief that it was better for the children to have two full time parents and lack of awareness about rights and options, often exacerbated by limited English language skills. By the time this group sought assistance they generally had permanent residency status and were Australian citizens.

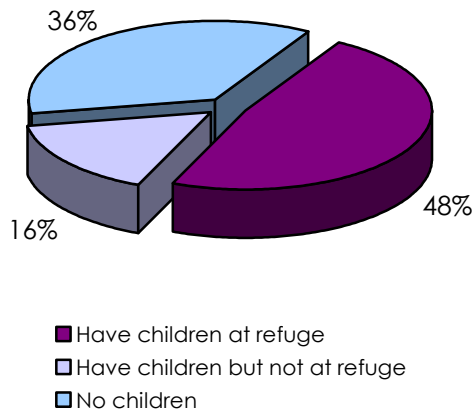
LENGTH OF RESIDENCE IN AUSTRALIA



Children

52% (26) of the women participating in this component of the research had children. 19 women (38%) took their children with them when they accessed women's refuge, while 16% did not have their children accompany them. 48% of the participants were women without children. The women who did not take their children with them when they accessed refuge generally made the decision to leave the abusive relationship after their children had reached adulthood.

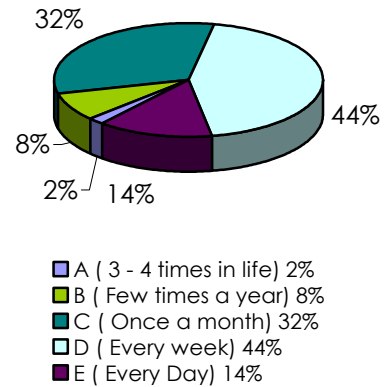
CHILDREN AND WOMEN IN DV



Domestic Violence Experienced

44% of women disclosed that before they made the decision to leave the family home they experienced domestic violence at least once a week. 14% of participants experienced violence on a daily basis and 32% of women were experiencing abuse from their partners on average of once a month.

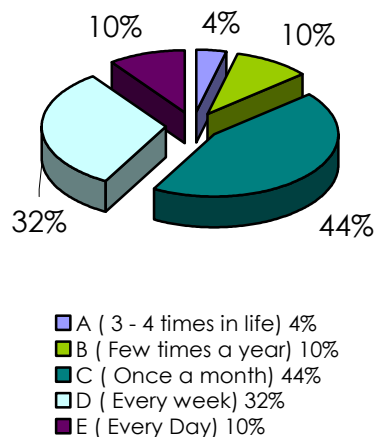
FREQUENCY OF VIOLENCE



Physical Violence

10% of women disclosed that they had been physically abused every day, 32% every week, 44% once a month. Only 14% of women confirmed that their partner physically assaulted them few times during their relationship or less often than a few times a year. The most common reason given that triggered the decision to leave their violent partner was the physical assaults they encountered in the relationship.

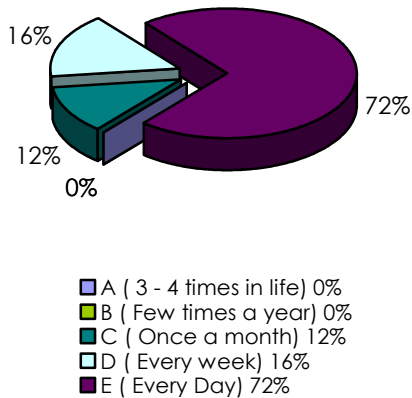
PHYSICAL VIOLENCE



Verbal Abuse

72% of women were verbally abused by their partners on a daily basis and 16% experienced verbal abuse once a week. 12% were verbally abused once a month. No woman in this component of the research identified that they had not experienced verbal humiliation, intimidation or criticism from their partners.

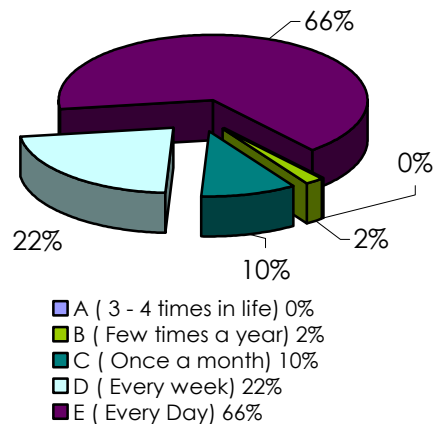
VERBAL ABUSE



Psychological Abuse

66 % of women who escaped domestic violence situations identified that psychological abuse was a significant part of their every day life. 22% experienced psychological abuse once a week and 10% once a month. The most common forms of psychological abuse identified by these women were: threats of being harmed, of having the children removed from their care, or being threatened with deportation from Australia.

PSYCHOLOGICAL ABUSE



Seeking Assistance for Domestic Violence

"I came to change my life. He presented himself in Poland as Mr Perfect. When I came [to Australia] I found out he lived not in the house he showed me a picture of in Poland, but in a bungalow behind the house. He slept on a foam mattress on the floor and was drinking all the time. He took my passport and personal belongings and he used me for sex. I cried into a pillow on many occasions and I became suicidal and finally I called a travel agent to go back to Poland and she advised me I didn't have to leave Australia."

(38yo woman, 6 months in Australia when she sought assistance, no income. Had begun experiencing abuse from the day she arrived as the fiancé of an Australian resident)

"Everything was okay until the children got older. I didn't see a way out. There was physical violence and he was very aggressive a few times a month, mostly around alcohol and money. He was an in Poland. He couldn't get a job as an in Australia. He was simply an unhappy, angry man. I was working as a cleaner, cleaning people's houses. One day the owner of one house noticed my black eye and she told me that I don't have to stay with him and that I don't have to suffer. He has a quick and heavy hand and abused the children. Both children now have problems. Now I know we destroyed our children."

(41yo woman, 18 years in Australia, remained in the relationship believing that she was doing the right thing for the children and because of lack of awareness of available options. Man's qualification excluded to ensure anonymity and safety of the woman)

Whilst some Polish women are aware that there are services to assist women experiencing domestic violence in Victoria, few have knowledge of what they are or how to access them. Generally, the belief is that the police are the first point of contact for assistance and that they will assist to ensure the woman's safety. Alternatively, other women did not call or want contact with the police as police are not "friends" in Poland and there is a social stigma attached to having police involvement. Of the women who accessed refuge accommodation, nearly 50 percent had had some contact with the police. This contact was usually the result of a neighbour or someone else contacting the police when they heard the domestic violence occurring.

"He didn't let me go to school, study English or get my Driver's Licence. I wasn't allowed to call my family in Poland or to have friends. I went shopping and took half an hour longer than he expected so when I came [home] he grabbed me by my throat and threw me against the door. My daughter started screaming and a neighbour called the police."

(22yo woman, 2 years in Australia after marrying Australian resident in Poland. Violence began when she fell pregnant)

Some women identified that they were reluctant to have police involvement because they feared being judged by the police for their limited English language skills. Some women indicated that there was a sense of shame in involving a third party because they were not able to articulate what was happening in 'perfect' English. This was particularly an issue for women who were highly educated in Poland. Women indicated that the responses they received from some police officers when they were speaking undermined their confidence about being taken seriously. Women were only really disclosing the full extent of what they were experiencing when the situation reached absolute crisis point.

When the domestic violence situation did reach crisis point and the participants in this research sought assistance, all women accessed the Women's Domestic Violence Crisis Service, and 80 percent had contact with the Immigrant Women's Domestic Violence Service once high security refuge was accessed. All women were assisted to access services by contact with someone else. Those women who did access domestic violence services were only doing so when there was physical violence, threats of violence or threats to kill them.

Interestingly, none of the fifty women had any contact with domestic violence outreach services, services that may have been able to provide support prior to the situation reaching crisis point and who may have been able to support the women to access alternative options to high security refuge accommodation. This is likely due to a lack of knowledge and awareness within the Polish community, and CALD communities in general, of the existence of such services.

Between 50 and 60 per cent of the women informed friends and family members about the domestic violence they were experiencing and found the responses were generally not very supportive. Women were told they should put up with it as everyone is going through it and there is no family or other supports here in Australia. Domestic violence experienced by women of different generations in the same family also had an impact on the response women got when they disclosed. The social stigma attached to being a victim of domestic

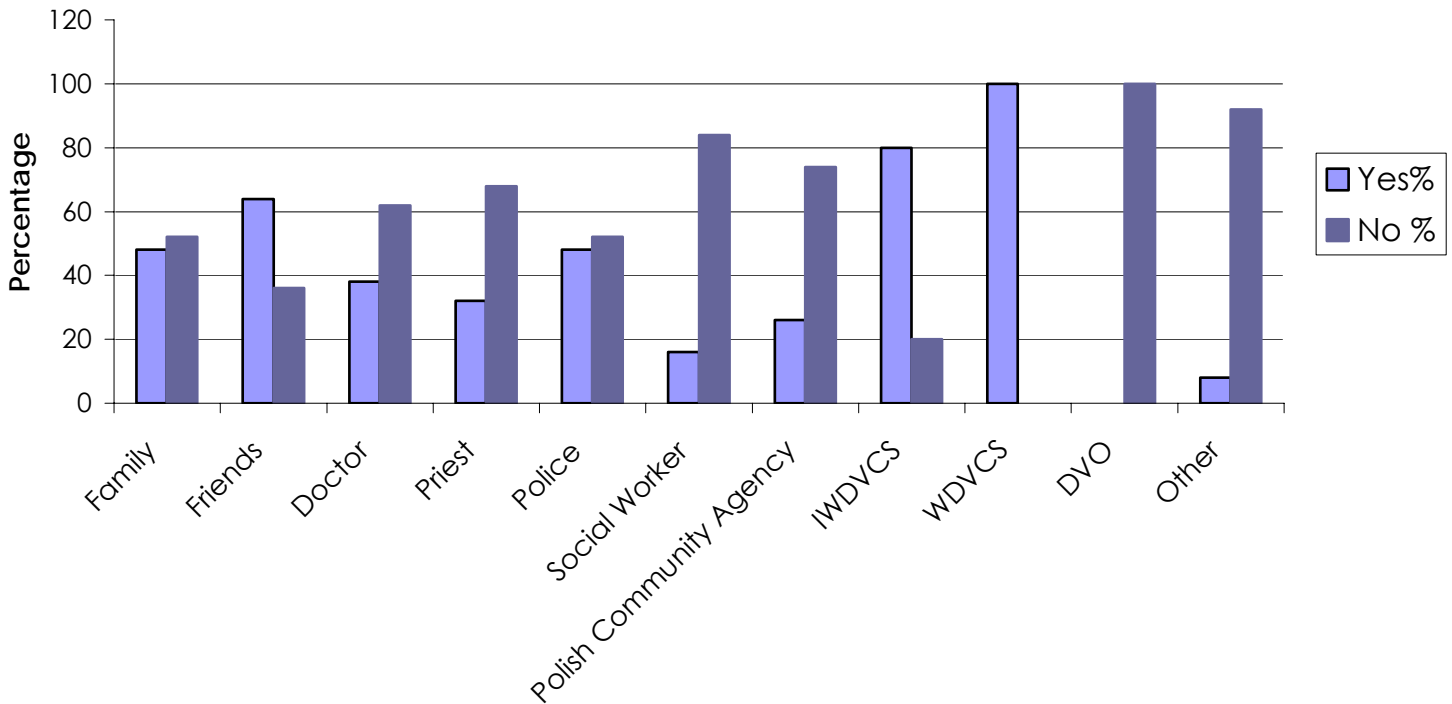
violence comes through in the belief that it is important to put on a front within the Polish community to prevent gossip and judgment. The judgments are generally about the woman. It is the woman's responsibility to keep the family together and they should be equipped to cope. There is a perception in the Polish culture that it's better to have a bad man than none at all. (This view is particularly strong amongst middle aged and older Polish women with very strong religious beliefs.) Some women indicated that they stayed in the relationship in order to maintain social relationships with the Polish community because if they left the situation they would be ostracised by the community. The following story is an example of the pressure women experience to remain in the situation.

A woman who accessed domestic violence services for the first time in her late sixties had lived with the domestic violence for 45 years. Initially she remained in the situation in the belief she was doing the right thing for her children by keeping the family together. When her children were adults they pressured her to remain with her abusive partner as his health was deteriorating and he needed a carer. His deteriorating health did not diminish the abuse she was experiencing and she was referred to women's refuge after seeking medical treatment when he broke her wrist. The long history of abuse and lack of support is summed up by the statement she made after she finally escaped the abusive situation.

"Now I know I wasted 45 years of my life but I know now that I can die with dignity."

Nearly 40 percent of the women who sought assistance from domestic violence services had disclosed the abuse to a priest. Women informed the researcher that they received no really effective actions or responses from priests. Whilst sometimes the priest might talk to the perpetrators of the violence, women indicated that the response they generally received was that they have to put up with it because they can't break up the family. Priests would attempt to justify the man's violence and inform women that they have to forgive their abusive male partners.

WHICH PEOPLE OR AGENCIES DID YOU APPROACH FOR HELP?



A number of women had contact with doctors and other medical services as a result of the violence they had been experiencing. Women attending medical services for the treatment of injuries resulting from the assaults often lied about how they received the injuries because they had been threatened with being killed if they told anyone. Shame is also a significant factor in lying about how injuries occurred as it is very difficult for Polish women to admit to being abused. Unless the violence had been witnessed women often wouldn't acknowledge how their injuries came about. When women saw their general practitioners for depression as a result of the domestic violence they were experiencing, the doctors did not explore what was happening for the woman that may lead to her depression. However, at least one elderly woman had a positive response when she accessed a hospital emergency department with a broken wrist and the hospital staff assisted her to access safe accommodation rather than return to her violent partner.

The less frequent sources of support accessed by women of Polish background experiencing domestic violence were social workers and Polish community organisations. There are currently two Polish welfare agencies in Victoria and women indicated that the responses they received when they did approach these organisations varied from not at all helpful to very helpful. The different responses from the two agencies may be attributable to the fact that neither agency is funded or resourced to deliver services in the area of domestic violence and knowledge of the issue can be dependent on the awareness of individual staff members within the agency. However, some women expressed a concern about accessing a Polish organisation for fear that they couldn't trust the organisation to maintain their confidentiality, although this fear was not limited to Polish organisations. As one woman said:

"You can't trust Polish organisations because of fear of judgement and can't trust Australian organisations because I don't know how the system works."

Australian organisations are viewed by some as “authorities” because of a lack of awareness about how the systems operate – that they are part of a negative system.

Some women in this group felt “let down” by professionals they saw whilst still in the domestic violence situation. A number of women indicated that if they had been asked directly about what was happening when they were seeking assistance for “other” things they would probably have disclosed but no-one asked. When women did disclose to professionals, they identified that they felt they were listened to but they weren’t provided with any options or information, that they were not given any picture of what they could look towards for the future.

Language barriers were also a significant factor in the help-seeking behaviours of some of these women. As indicated above, some women felt that the response they received from police when they tried to explain their situation in English was undermining to their confidence and how seriously their situation was viewed by authorities. Others felt that they wouldn’t be believed and that they couldn’t tell anyone because of their limited English skills. Some women also indicated less than positive experiences with interpreters:

“Using telephone interpreters is not helpful because it involves a third person and sometimes comments were made by the interpreter in Polish – telling me it’s part of migration, don’t break up the family, etc.”

Generally, women in this group, particularly those who had been in Australia for a longer period of time, found it difficult to know where to go for help and even what options were available. Up until the time they entered women’s refuge, the responses they received with disclosure of the violence or when presenting for medical assistance for injuries or with symptoms of depression were not helpful and resulted in women remaining in the abusive situation for longer. The lack of resources about domestic violence available in the Polish language is likely to also have been a contributing factor in these women not accessing services sooner.

Impacts of domestic violence on women’s social and emotional wellbeing

As indicated above, one of the focuses of this research was to identify the mental health impacts of domestic violence on women of Polish background. The following information indicates the extent to which domestic violence contributed to depression / depression-like symptoms experienced by the participants. The BDI-II A.T Beck Depression Inventory was translated and administered to women from both response groups.

The majority of women who had left the abusive relationship and entered high security women’s refuge indicated through the Depression Inventory that they were experiencing significantly high levels of depression.

98 % of women who had left their family home due to domestic violence felt deeply sad and unhappy always or often. All of the

women felt that their life was hopeless and will only get worse always or often and believed that they were a complete failure as a person.

94% of women expressed a complete loss of pleasure in their lives, 92 % felt guilty always or often and 94% felt that they had been punished.

94 % of women disclosed that they disliked themselves and blamed themselves for everything bad that has occurred, including the violence and abuse that was perpetrated against them.

6% of the women revealed that they always think about killing themselves if they had the opportunity. A further 6% confirmed that they think about suicide often, and 4% have suicidal thoughts sometimes. 74% identified that they had not had any suicidal thoughts.

All of the women stated that they cried always or often, 56% felt agitated all the time, and 40% often felt restless.

94% of women indicated that they had lost interest in other people and activities, displayed difficulty in making decisions and felt worthless. 96% suffered from loss of energy.

All women reported high levels of sleep disturbance and tiredness. 92% of women complained of being irritable always or

often, and 98% expressed problems with concentration.

64% of participants noticed frequent changes in their appetite.

50% of women reported a complete loss of interest in sex, 28% confirmed that they are much less interested in sex now than previously.

Women's Responses to the BDI-II A.T Beck Depression Inventory

BDI-II Category	Response to each Question			
	Never	Sometimes	Often	Always
1. Sadness	0%	2%	40%	58%
2. Pessimism	0%	0%	50%	50%
3. Past Failure	0%	0%	54%	46%
4. Loss of Pleasure	52%	42%	6%	0%
5. Guilty Feelings	0%	54%	8%	38%
6. Punishment Feelings	0%	6%	48%	46%
7. Self-Dislike	0%	6%	58%	36%
8. Self-Criticalness	4%	0%	62%	34%
9. Suicidal Thoughts or Wishes	74%	16%	4%	6%
10. Crying	0%	0%	38%	62%
11. Agitation	0%	4%	40%	56%
12. Loss of Interest	60%	34%	6%	0%
13. Indecisiveness	0%	6%	52%	42%
14. Worthlessness	58%	38%	4%	0%
15. Loss of Energy	46%	50%	4%	0%
16. Changes in Sleeping Patterns	0%	6%	40%	54%
17. Irritability	0%	8%	46%	46%
18. Changes in Appetite	2%	34%	40%	24%
19. Concentration Difficulty	0%	12%	54%	34%
20. Tiredness or Fatigue	0%	6%	46%	48%
21. Loss of Interest in Sex	50%	28%	22%	0%

As with other studies, the results of the data collected in this survey show that women who experienced prolonged and/or extremely violent levels of abuse also tend to experience very high levels of clinical depression. The result of this is that these women are more likely to be dependent on disability benefits for extended periods of time and are unable to work or participate in community activities which can further exacerbate the levels of depression.

To investigate an association between nature, prevalence and intensity of domestic violence and an association with symptoms of depression the collected data was statistically

analysed. The correlation coefficient has been calculated with use of deviation scores in the formula:

$$r = \frac{\Sigma yx}{\sqrt{\Sigma x^2 \Sigma y^2}} = 0.893921$$

Ferguson G.A. & Takane Y. (1989) 'Statistical Analysis in Psychology and Education',
Mc Graw-Hill Book Company, pp 124-127

The correlation between nature and prevalence of domestic violence and level of symptoms of depression is +0.89 Refer to Appendices, Table III.

5.2 Key Findings for Polish Women who Accessed Domestic Violence Services



- 58 % of women of Polish background who accessed domestic violence and community services due to domestic violence between 1994-2003 were between 35-50 years of age
- 44% were in Australia for less than 2 years when they sought assistance.
- 88% of women participating experienced domestic violence (all forms) every day, once a week or once a month
- 86% of women were physically abused once a month or more frequently (weekly, daily)
- Verbal and psychological abuse were experienced by more than 90% of women more often than once a month
- Less frequent forms of abuse disclosed by women of Polish background included social and financial abuse. However 78% confirmed that they experienced financial abuse more often than once a month.
- Women seeking refuge accommodation were referred by WDVCS and IWDVS. Slightly more than 20% of victims of domestic violence approached Polish community organisations, less than 20% contacted a social worker. Over 40% of respondents were referred to domestic violence services by the police.
- More than 90% of all women participating identified that they suffer from various symptoms of depression including:

Sadness, pessimism, sense of failure, loss of pleasure, guilty feelings, agitation, expectations of punishment, self-dislike, self-criticism, crying, loss of interest, loss of energy, sleep disturbances, tiredness, irritability and problems with concentration.
- There is a strong correlation between the nature and prevalence of domestic violence and the symptoms of depression for the participants in this project.

5.3 Polish Women Who Didn't Access Domestic Violence Services



To determine the nature and prevalence of domestic violence experienced by women of Polish background, women who had never accessed domestic violence services were approached. This group did not identify their experiences as domestic violence. As an 81-year-old woman in this group, who had experienced all forms of abuse, stated:

"I never thought of myself as a victim of domestic violence. It was simply my life. The same life that my mother, my grandmother lived. This is a woman's destiny."

This is reflective of the comments made by other women in this group.

38 women were randomly approached and invited to participate in the research during social gatherings and meetings of senior's clubs. 18 women declined the invitation either because of the topic or because they had not experienced domestic violence. 20 women who had experienced some level of domestic violence in their relationships agreed to participate and complete the survey. These women were asked the same questions as the women who had accessed domestic violence services.

The researcher was only able to approach women sitting alone. When she approached women sitting in groups, no-one felt safe enough to acknowledge that they were experiencing domestic violence and were willing to participate in the survey due to the stigma attached to the topic. Some of the women who had been unwilling to participate in the research while sitting with other women, approached the researcher on other occasions and completed the survey.

This group of women was generally older than the women who accessed domestic violence services with no-one under the age of 30 participating. This may be due to the locations where the researcher was able to

access women of Polish background in large numbers who were willing to participate in the project.

The majority of this group of women had been in Australia for over 20 years and were either married or widowed. All of the women had children and had migrated to Australia as family units. As a whole, the women in this group were not in paid employment, either staying at home raising their children or on aged pensions.

45% of these women were between 36-50 years old and 40% were over 50 years old. The oldest participant in this group was 81.

This group of women identified as experiencing significantly lower levels of violence and abuse than the women who found it necessary to access high security refuge accommodation. Their views of domestic violence were also strongly influenced by conservative religious beliefs.

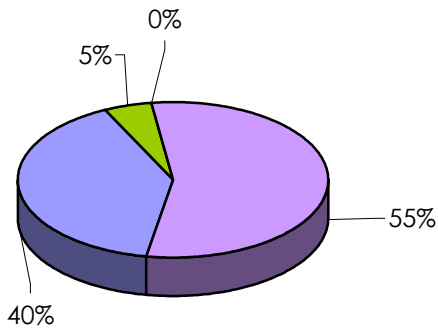
"All people have problems. They argue but that is not domestic violence. It is our everyday bread. [religious reference to the Lord's Prayer] We need to clench our teeth and survive for your children and holy peace."

(37yo woman experiencing all forms of domestic violence a few times a year)

Physical Violence

Unlike the first group of women, all of whom had experienced physical violence, 55% of the women in this group had not experienced physical abuse by their partners.

PHYSICAL VIOLENCE

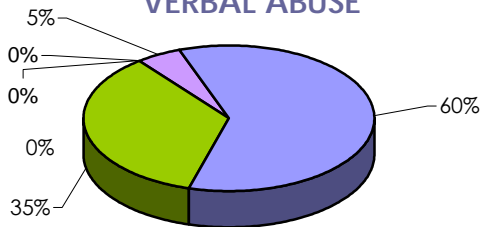


- A (3 - 4 times in life) 40%
- B (Few times a year) 5%
- C (Once a month) 0%
- D (Every week) 0%
- E (Every Day) 0%
- Never 55%

Verbal Abuse

60% of women identified as experiencing verbal abuse from their partners a few times in their life whilst 35% experienced it more frequently, that is a few times a year. None of this group of women identified verbal abuse as an ongoing daily, weekly or monthly occurrence in their relationship. psychological and social abuse a few times in their relationship (3-4 times).

VERBAL ABUSE



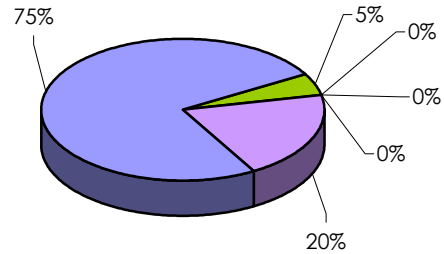
- A (3 - 4 times in life) 60%
- B (Few times a year) 35%
- C (Once a month) 0%
- D (Every week) 0%
- E (Every Day) 0%
- Never 5%

Social Abuse

The vast majority of women in this group identified as experiencing incidences of

social abuse only three to four times throughout their relationship.

SOCIAL ABUSE

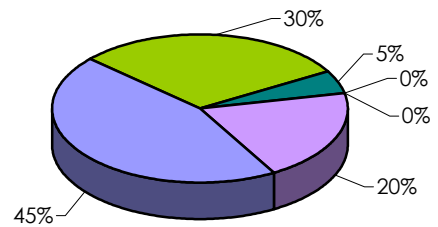


- A (3 - 4 times in life) 75%
- B (Few times a year) 5%
- C (Once a month) 0%
- D (Every week) 0%
- E (Every Day) 0%
- Never 20%

Financial Abuse

75% of these women disclosed that they experienced financial abuse a few times a year or 3-4 times during the relationship, whilst 5% identified more frequent financial abuse (ie. on a monthly basis). Women from this group also identified that when disputes arose with their partners it was often about the family's financial situation. This may have been a significant issue for this group as all had been or are financially dependent on their partners throughout their relationship.

FINANCIAL ABUSE

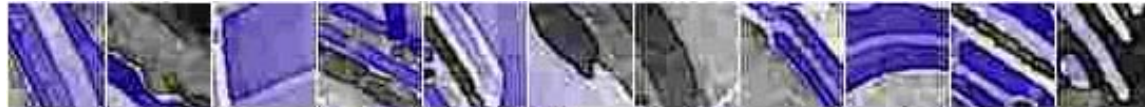


- A (3 - 4 times in life) 45%
- B (Few times a year) 30%
- C (Once a month) 5%
- D (Every week) 0%
- E (Every Day) 0%
- Never 20%

Impacts of domestic violence on women's social and emotional wellbeing

Unlike the women in the first group who showed significant levels of depression, the women in this group displayed minimal symptoms of depression when they completed the Depression Inventory.

5.4 Key Findings for Polish Women Who Didn't Access Domestic Violence Services



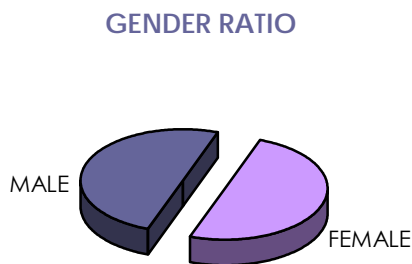
The results of the surveys for women of Polish background who have never contacted domestic violence services or community organisations due to domestic violence show that:

- Women of Polish background did not consider themselves as being in a domestic violence situation if they did not suffer from frequent physical violence. 55% of these women never experienced physical abuse from their husbands or partners in their relationships. 40% experienced some kind of physical violence 3-4 times during their relationship, and 5% reported that they have been subjected to this form of abuse a few times a year.
- The most frequent forms of abuse experienced by this group of participants were verbal and financial abuse. 30% of women confirmed that they have been subjected to these forms of abuse a few times a year.
- All women from the control group reported low level symptoms of depression, and they characterized themselves as happy with their lives, optimistic, with broad interests and high levels of self-esteem.

5.5 The Students' Survey Results

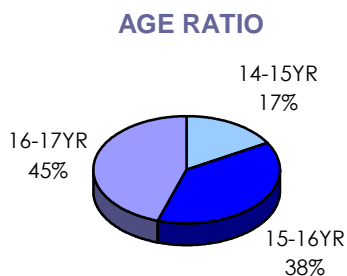
To determine the nature and prevalence of domestic violence in Polish families and to identify the level of domestic violence experienced by students of Polish background, the Students' Domestic Violence Survey was conducted and 102 surveys were completed and returned (105 surveys were distributed). Of these 51 or 50% of respondents were female and 51 or 50% were males.

Figure 1



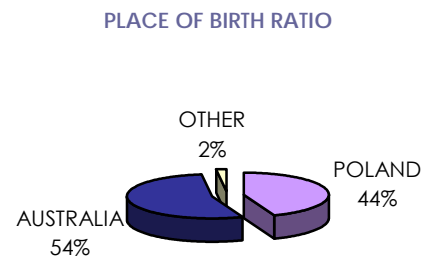
The majority of respondents (46) were between the ages 16 and 17, 39 were aged 15 to 16, and 17 were aged 14 to 15.

Figure 2



54% of students were born in Australia, 45 were born in Poland, and 2 students were born elsewhere.

Figure 3



Results of the Students' Domestic Violence Survey

Questions 1-7: Domestic violence in the family.

25 (24.5%) of students identified that they have witnessed domestic violence at home (29.4% females and 19.6% males).

Questions 8-9,11-12: Domestic violence experienced by participants

20 (39.2%) of female students and 11 (21.6%) of male students identified that they have been subjected to domestic violence themselves.

Question 10: Do your parents look after you and take care of you?

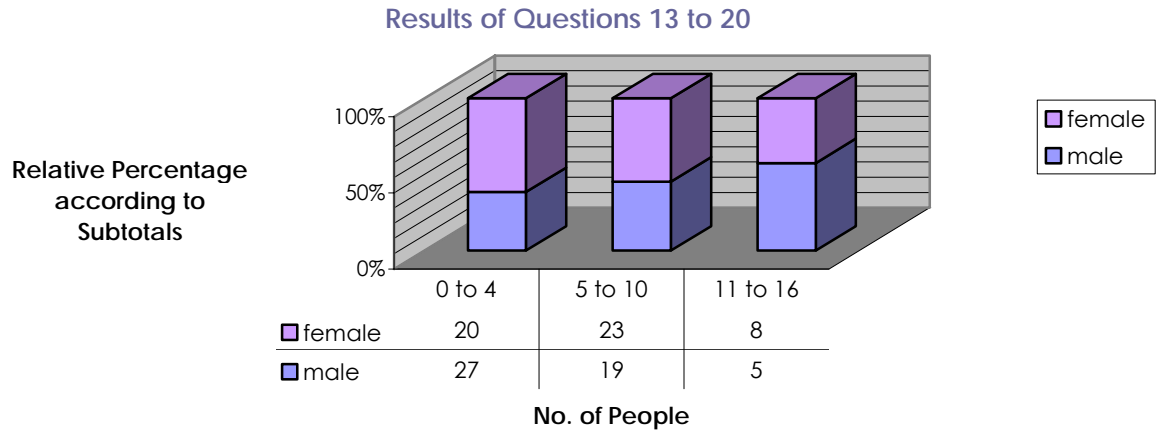
All but one student answered yes to this question.

Questions 13 – 20: Symptoms of depression.

55 students (53.3%) confirmed that they suffer from symptoms of depression such as feelings of sadness, loss of interest, problems with concentration, agitation, sense of being worthless or guilty. 60.7% of girls and 47% of boys expressed that they have feelings of being depressed. Almost 14% of all participants identified that they experience most of the symptoms of depression.

In interpreting this data it is important to take into consideration that some of the feelings of depression experienced by these young people may be related to the usual factors of growing up. However, it is also important

to be aware that the domestic violence being witnessed or experienced by these young people may also be having a significant impact on their social and emotional wellbeing.



5.6 Key Findings from the Students Responses



- 24.5% of students confirmed that they have witnessed domestic violence in the family home.
- 39.2% of female students and 21.6% of male students disclosed that they have been subjected to domestic violence in the family home.
- 53.2% of students indicated that they suffer from various symptoms of depression.
- 60.7% of girls and 47% of boys expressed that they feel depressed.
- 14% of all students identified as suffering from the majority of symptoms of depression such as: feelings of sadness, loss of interest, problems with concentration, agitation, sense of being worthless, guilt and suicidal thoughts.

6. Recommendations



FOR WOMEN OF POLISH BACKGROUND EXPERIENCING DOMESTIC VIOLENCE

The research findings have uncovered that there is currently a need for:

- An increase in the awareness and availability of services available for CALD women that they can approach in the pre-crisis domestic violence stage and in the post-crisis recovery process.
- Free culturally and linguistically appropriate services to provide relationship counselling for newly arrived migrant families.
- Free psychological services accessible to CALD women who experience domestic violence, suffer from complex emotional problems related to deprivation of psychological needs such as sense of belonging, sense of achievement and depression.

In the context of the research findings it is recommended that there is a need to:

- Raise awareness of newly arrived families and prospective spouses about the nature and legal implications of domestic violence in Victoria and Australia;
- Raise awareness of the supports available through domestic violence services.
- Disseminate information about domestic violence among the Polish community in culturally and linguistically appropriate ways.
- Establish professional culturally and linguistically appropriate psychological services designed for women who experience domestic violence and suffer from depression and related psychological disorders as a result.
- Provide regular and culturally relevant information about domestic violence, laws and support options through Polish ethnic radio, newspapers and brochures.
- Provide community education to the wider Polish community about how to recognise, prevent and respond to domestic violence.
- Educate and inform Polish professionals such as doctors, lawyers, teachers and priests about domestic violence and services available for women and children experiencing domestic violence.
- Prevent further violence by supporting the establishment of men's behaviour change programs and counselling to be provided in the Polish language and in culturally sensitive and responsive manner.
- Provide information sessions to domestic violence service providers about the characteristics of the Polish community and to support the delivery of culturally and linguistically appropriate services.

FOR YOUNG PEOPLE OF POLISH BACKGROUND

In brief, the findings of this part of the project have demonstrated the need for:

- Increased awareness of the nature and prevalence of domestic violence amongst young people of Polish background.
- Increased community support for young people by organising workshops improving their knowledge and skills in maintaining emotional problems related to depression.
- Increased community education in the Polish community to raise awareness of the impacts of domestic violence on children and young people.
- Development and implementation of integrated projects/workshops designed for young people from families at risk.
- Further research to be conducted to identify and develop service models that effectively respond to the needs of young people of Polish background who have witnessed and/or experienced domestic violence.

The ability to respond to these recommendations is not possible without the federal and state governments providing realistic funds and resources to provide quality, culturally appropriate services and supports to meet the needs of the families for whom domestic violence is an issue.

7. Conclusion



This project investigated the nature and prevalence of domestic violence in the Polish community. The final analysis of the collected data demonstrated decisively that domestic violence is a significant issue within the Polish community. It is not only important to acknowledge that this is an issue but it is also important to recognise that federal and state governments and relevant service providers need to alter their practices to provide appropriate resources and responses.

WOMEN ACCESSING DOMESTIC VIOLENCE SERVICES

A major focus of this project was to investigate the issues for women of Polish background who accessed Polish community organisations, state wide domestic violence services and the Victims Referral Assistance Service between 1994-2003 due to domestic violence.

50 women responded to the Domestic Violence Questionnaire and identified that they had made the decision to leave the family home because of the extent and frequency of violence experienced from their partners.

The data collected during the research identifies that family breakdown and level of domestic violence increased in 44% of relationships within the first 2 years of arrival in Australia. Of the women participating in this project, most have experienced various forms of abuse on a daily or weekly basis. More than 60% of the women experienced multiple forms of abuse including: humiliation, criticism and threats on a daily basis. They identified that they were physically assaulted on a regular basis.

In crisis situations women of Polish background usually had contact with the statewide domestic violence services. This is understandable as this is the only entry point for access to high security refuge accommodation. However it may be difficult for some women to get into this system given that 26,860 calls were missed in 2001/02 (WDVCS Annual Report 2001/02). In the state of Victoria, there is only one domestic violence service specifically for women from culturally and linguistically diverse backgrounds. The service has limited funding and is able to provide culturally and linguistically appropriate support to a few specific ethnic groups, and then predominantly only to those women accessing high security refuge accommodation.

The research identified that only one in four women participating in this project approached Polish organisations or services to get help for domestic violence. Friends, followed by family members, were the first choice for support and disclosure by women after the Women's Domestic Violence Crisis Service and the Immigrant Women's Domestic Violence Service.

The statistical interpretations of the results of the surveys demonstrated a very strong association between frequency and extent of domestic violence and the level of symptoms of depression. More than 90% of all victims/survivors of domestic violence who accessed women's refuge disclosed that they experience most of the symptoms of depression. They reported overwhelming feelings of: sadness, pessimism, loss of pleasure, guilt, failure, self-dislike, self criticism, loss of energy and interest, worthlessness, irritability, indecisiveness, fatigue and difficulties in concentration.

WOMEN NOT ACCESSING DOMESTIC VIOLENCE SERVICES

The second group of research participants involved women who have been randomly selected and interviewed and who have never accessed domestic violence services, organisations or other supports due to domestic violence. The findings indicate that all 20 women admitted that they experienced violent and abusive incidents during their relationships but that they were sporadic and rarely occurred more frequently than a few times a year. The women in this group did not identify their experiences as domestic violence. All participants from this group reported low and insignificant levels of the symptoms of depression.

In the context of the research, findings have identified that the needs of women of Polish background who have experienced domestic violence are very complex and often related to migration and re-settlement. Access to mainstream domestic violence services is limited by the women's awareness of support services, the funding constraints and models of support available.

YOUNG PEOPLE AND DOMESTIC VIOLENCE

The evaluation of the results of the Domestic Violence Students Survey among 102 students of the Polish language classes shows that 24.5% of all students have witnessed some form of domestic violence in the family home.

They recognised psychological, verbal, emotional, social and financial abuse that has been perpetrated against their mothers or other family members. Female students often perceived domestic violence as more of an issue than male students (39.2%).

More than half of the participating students (53.2%) and 60% of all girls disclosed that they experience some of the symptoms of depression. They feel depressed, have lost interest in most things, had problems with concentration, felt nervous or guilty, felt a sense of worthlessness, and, in some instances, identified that they felt that life is not worth living any more.

Domestic violence is the most common form of assault in Australia today. However, it remains a hidden problem because it occurs within the privacy of the home and those involved are usually reluctant to speak out (Healey 1993). Violence within the home is often a taboo subject throughout the wider community and, possibly because of this, the decision to leave the home and the behaviour of the perpetrator makes it all the more difficult for the victims of domestic abuse. Despite recent recognition and emphasis that violent behaviour is unacceptable anywhere, resources available to women in potentially life threatening situations, especially those from culturally and linguistically diverse backgrounds, are insufficient and often inadequate to meet needs. These women feel neglected, and are often depressed and vulnerable. Later, they are left to feel repeatedly abandoned as they are sent to professionals who not only do not understand their language, but also do not understand the fundamentals of the culture from which they originate.

The silence about this issue is harmful to many people, not just the women experiencing the violence. This issue affects whole families and communities. No one benefits from domestic violence, yet it still occurs everywhere. No community is immune from domestic violence and because of this, no community can afford to ignore it as an issue of priority. The Polish community is one built on many strong ideals and pivotally on integrity. Violence changes the whole community: how it operates, presents itself and its beliefs. For this reason a united community response, with support and funding from the federal and state governments, is needed, one which demands and enforces professional and sensitive support for those

families affected by domestic violence and one that doesn't condone domestic violence as an acceptable way of life and interrelating. Domestic violence should not be classified as a personal issue within the community any longer: it is one the whole community should confront and address.

This research demonstrates that domestic violence is present and is occurring relatively unnoticed in Polish households. We need to find a way to address this important issue, not only in the Polish community, but also in the broader community. Domestic violence and other mainstream services need to be provided with adequate resources to respond to all women and children experiencing and witnessing domestic violence in a culturally and linguistically appropriate way. Whilst strategies targeting early intervention and prevention are important for women and children who may not be experiencing domestic violence now, realistic responses and resources are required to meet the needs of those women and children who need assistance and to aid recovery from the long term impacts of domestic violence. Above all, any strategy responding to domestic violence needs to operate from a flexible model that takes into consideration the diversity of the Victorian (and Australian) population if it is to be effective. Those responsible for setting policy and funding and delivering services need to find ways to work effectively with the diverse communities that make up our society. The knowledge and cultural expertise of ethno-specific and multicultural service providers needs to be taken into consideration when looking to address these issues within the community and these agencies need to be sufficiently resourced to provide this expertise.

Until we begin to take a truly coordinated response to the issue of domestic violence in Victoria, women and children from CALD backgrounds, including Polish women, will continue to access assistance only at crisis point and their recovery will be impeded by restrictive models of service delivery.

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APPENDICES



Appendix 1: Domestic Violence Questionnaire

Appendix 2: Beck Depression Inventory II

Appendix 3: Students Domestic Violence Survey

*Wywiad Środowiskowy do Badania
Zjawiska Przemocy
Domowej wśród Kobiet Polskiego
Pochodzenia.*

Celem niniejszego badania jest uzyskanie informacji na temat przemocy domowej, z którą w swoim życiu może się zetknąć każda kobieta. Przemoc domowa przejawia się w różnych formach. Jest to nie tylko fizyczne znęcanie się nad drugą osobą, ale również ograniczanie jej wolności osobistej, poniżanie, nieuzasadniona krytyka, obelgi, czy też kontrolowanie różnych aspektów życia kobiety (np. podsłuchiwanie rozmów telefonicznych, zakaz spotkań ze znajomymi, śledzenie).

Przemoc domowa ma negatywny wpływ nie tylko na stan fizyczny, ale również na psychiczne i społeczne funkcjonowanie danej osoby. Kłopoty ze snem, bóle głowy, zaburzenia żołądkowe, leki czy stałe uczucie smutku to tylko niektóre z nich.

Wiele kobiet nie zdaje sobie sprawy z tego, jak wyniszczające jest dla nich życie w związku, w którym jeden partner znęca się nad drugim. Z danych statystycznych wynika, że ogromna liczba kobiet, szczególnie tych, które wyemigrowały do Australii, nie czuje się tutaj szczęśliwie i częściej niż Australijki zżywa lekami antydepresyjnymi.

Możliwe jest, że jedną z przyczyn tego stanu rzeczy jest często ukrywane życie w sytuacji przemocy domowej. APCS podjęło się przeprowadzenia badań na powyższy temat. W tym celu przeprowadzane są wywiady wśród kobiet polskiego pochodzenia.

Odpowiedzi na pytania są anonimowe, są to pytania trudne i niekiedy bardzo osobiste. Zależy nam na wypowiedziach szczerych i prawdziwych. Jeżeli jednak chciałaby Pani na temat swoich trudności porozmawiać, prosimy o skontaktowanie się z naszym Biurem, które zorganizuje bezpłatne spotkanie z psychologiem lub inną kompetentną osobą. Nasz telefon 9689 91 70.

Wszystkim Paniom, które wzięły udział w badaniach, za współpracę i pomoc.

Dane personalne:

Pseudonim	wiek	wykształcenie	zawod	Stan cywilny	Dzieci	Wiek dzieci

Sytuacja materialna:	zła	dostateczna	dobra	bardzo dobra

1. Czy w swoim życiu była Pani ofiara przemocy domowej? TAK Nie

2. Jeżeli tak, to jak często?

A 1-3 razy w życiu **B** kilka razy w roku **C** co miesiąc **D** raz na tydzień **E** co dzień

3. W jaki sposób Pani partner znęcał się nad Panią?

3.1 Fizycznie (bicie, kopanie, poszturchiwanie, popychanie) **A** **B** **C** **D** **E**

3.2 Słownie (wzywiska, obelgi)

3.3. Psychicznie (poniżenia, krytyka, groźby)

3.4. Społecznie (ograniczanie kontaktów z rodziną, znajomymi)

3.5. Finansowo (kontrolowanie wydatków, niedawanie pieniędzy na życie)

4. Czy zwróciła się Pani kiedykolwiek z prośbą o pomoc? **Tak** **Nie**

5. Do kogo zwróciła się Pani z prośbą udzielenia pomocy?

Rodzina przyjaciele lekarz ksiądz policjant prac. socjalny

Organizacje polonijne IWDVSC WDVCS DVO inne

6. Czy udzielono Pani pomocy? **Tak** **Nie**

7. Jeżeli tak to jak Pani tę pomoc ocenia?

b.złe **złe** **dostatecznie** **dobrze** **bardzo dobrze**

7. Czy mogłaby Pani krótko uzasadnić tę ocenę?

.....

7. Czy z powodu złego traktowania przez męża/partnera myślała Pani o odejściu od niego? **Tak** **Nie**

8. Jezeli nosila sie Pani z zamiarem opuszczenia meza to dl;aczego zmienila Pani zdanie ?

Dziedzi **rodzina** **klopoty materialne** **trudnosci mieszkaniowe**
balam sie jego reakcji **balam sie zostac sama** **balam sie opini publicznej**
Uleglam naciskom innych **inne** **jakie**.....

Ponizsza lista zostala opracowana na podstawie Inwentarza Objawow Depresyjnych
A.T.Becka(1996)

Lista objawow depresyjnych	nigdy	czasami	czesto	stale
1. Jestem smutna				
2. Mam pesymistyczne nastawienie do zycia				
3. Mam poczucie porazki				
4. Zycie mnie nie cieszy				
5. Czujze sie winna				
6. Czujze ze zostalam przez zycie ukarana				
7. Mysle o sobie zle				
8. Oceniam sie samokrytycznie				
9. Mysli samobojcze				
10.Mam sklonnosc do placzu				
11. Bywam zdenerwowana				
12. Mam liczne zainteresowania				
13.Mam trudnosci w podejmowaniu decyzji				
14.Mam silne poczucie wlasnej wartosci				
15. Mam w sobie duzo energii zyciowej				
16Mam klopoty ze snem				
17. Irytuje sie				
18.Moj apetyt zmienia sie				
19.Mam trudnosci w koncentracji uwagi				
20.Mam poczuciezmeczenia				
21.Moje potrzeby seksualne pojawiaja sie				

Wynik-----

Inne klopoty zdrowotne

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Zazywane leki

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Komentarz

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Interpretacja Wynikow

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Appendix 2: Beck Depression Inventory II

BDI-II Date: _____

Name: _____ Marital Status: _____ Age: _____ Sex: _____
 Occupation: _____ Education: _____

Instructions: This questionnaire consists of 21 groups of statements. Please read each group of statements carefully, and then pick out the **one statement** in each group that best describes the way you have been feeling during the **past two weeks, including today**. Circle the number beside the statement you have picked. If several statements in the group seem to apply equally well, circle the highest number for that group. Be sure that you do not choose more than one statement for any group, including Item 16 (Changes in Sleeping Pattern) or Item 18 (Changes in Appetite).

<p>1. Sadness</p> <p>0 I do not feel sad. 1 I feel sad much of the time. 2 I am sad all the time. 3 I am so sad or unhappy that I can't stand it.</p> <p>2. Pessimism</p> <p>0 I am not discouraged about my future. 1 I feel more discouraged about my future than I used to be. 2 I do not expect things to work out for me. 3 I feel my future is hopeless and will only get worse.</p> <p>3. Past Failure</p> <p>0 I do not feel like a failure. 1 I have failed more than I should have. 2 As I look back, I see a lot of failures. 3 I feel I am a total failure as a person.</p> <p>4. Loss of Pleasure</p> <p>0 I get as much pleasure as I ever did from the things I enjoy. 1 I don't enjoy things as much as I used to. 2 I get very little pleasure from the things I used to enjoy. 3 I can't get any pleasure from the things I used to enjoy.</p> <p>5. Guilty Feelings</p> <p>0 I don't feel particularly guilty. 1 I feel guilty over many things I have done or should have done. 2 I feel quite guilty most of the time. 3 I feel guilty all of the time.</p>	<p>6. Punishment Feelings</p> <p>0 I don't feel I am being punished. 1 I feel I may be punished. 2 I expect to be punished. 3 I feel I am being punished.</p> <p>7. Self-Dislike</p> <p>0 I feel the same about myself as ever. 1 I have lost confidence in myself. 2 I am disappointed in myself. 3 I dislike myself.</p> <p>8. Self-Criticalness</p> <p>0 I don't criticize or blame myself more than usual. 1 I am more critical of myself than I used to be. 2 I criticize myself for all of my faults. 3 I blame myself for everything bad that happens.</p> <p>9. Suicidal Thoughts or Wishes</p> <p>0 I don't have any thoughts of killing myself. 1 I have thoughts of killing myself, but I would not carry them out. 2 I would like to kill myself. 3 I would kill myself if I had the chance.</p> <p>10. Crying</p> <p>0 I don't cry anymore than I used to. 1 I cry more than I used to. 2 I cry over every little thing. 3 I feel like crying, but I can't.</p>
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11. Agitation

- 0 I am no more restless or wound up than usual.
- 1 I feel more restless or wound up than usual.
- 2 I am so restless or agitated that it's hard to stay still.
- 3 I am so restless or agitated that I have to keep moving or doing something.

12. Loss of Interest

- 0 I have not lost interest in other people or activities.
- 1 I am less interested in other people or things than before.
- 2 I have lost most of my interest in other people or things.
- 3 It's hard to get interested in anything.

13. Indecisiveness

- 0 I make decisions about as well as ever.
- 1 I find it more difficult to make decisions than usual.
- 2 I have much greater difficulty in making decisions than I used to.
- 3 I have trouble making any decisions.

14. Worthlessness

- 0 I do not feel I am worthless.
- 1 I don't consider myself as worthwhile and useful as I used to.
- 2 I feel more worthless as compared to other people.
- 3 I feel utterly worthless.

15. Loss of Energy

- 0 I have as much energy as ever.
- 1 I have less energy than I used to have.
- 2 I don't have enough energy to do very much.
- 3 I don't have enough energy to do anything.

16. Changes in Sleeping Pattern

- 0 I have not experienced any change in my sleeping pattern.

- 1a I sleep somewhat more than usual.
- 1b I sleep somewhat less than usual.

- 2a I sleep a lot more than usual.
- 2b I sleep a lot less than usual.

- 3a I sleep most of the day.
- 3b I wake up 1-2 hours early and can't get back to sleep.

17. Irritability

- 0 I am no more irritable than usual.
- 1 I am more irritable than usual.
- 2 I am much more irritable than usual.
- 3 I am irritable all the time.

18. Changes in Appetite

- 0 I have not experienced any change in my appetite.

- 1a My appetite is somewhat less than usual.
- 1b My appetite is somewhat greater than usual.

- 2a My appetite is much less than before.
- 2b My appetite is much greater than usual.

- 3a I have no appetite at all.
- 3b I crave food all the time.

19. Concentration Difficulty

- 0 I can concentrate as well as ever.
- 1 I can't concentrate as well as usual.
- 2 It's hard to keep my mind on anything for very long.
- 3 I find I can't concentrate on anything.

20. Tiredness or Fatigue

- 0 I am no more tired or fatigued than usual.
- 1 I get more tired or fatigued more easily than usual.
- 2 I am too tired or fatigued to do a lot of the things I used to do.
- 3 I am too tired or fatigued to do most of the things I used to do.

21. Loss of Interest in Sex

- 0 I have not noticed any recent change in my interest in sex.
- 1 I am less interested in sex than I used to be.
- 2 I am much less interested in sex now.
- 3 I have lost interest in sex completely.

Appendix 3: Students Domestic Violence Survey

Australian Polish Community Services

Student Questionnaire

Please read the following questions and indicate the answer best represents your situation. With the aid of your responses to this questionnaire we wish to improve the quality of our services in the future. Please indicate your response with a in the relevant box next to each question.

1. Gender	Male <input type="checkbox"/>	Female <input type="checkbox"/>
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2. Age	14- 15 <input type="checkbox"/>	15-16 <input type="checkbox"/>	16-17 <input type="checkbox"/>	18+ <input type="checkbox"/>
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3. Where were you born?	Poland <input type="checkbox"/>	Australia <input type="checkbox"/>	Other Country?.....
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The following questions are about the kind of things that can happen that you don't get talk about. The first section is about things between your parents, and second is about things might be happening to you. (** by parents ,we also mean step-parents ,or your parent's boyfriend/girlfriend and de-facto partners)

	YES	NOT SURE	NO
1. Does one parent act in a way that makes the other feel nervous, intimidated or scared?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Does one parent put the other down, criticize them or call them names (for example, calling them stupid or useless)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Has one parent attempted to hurt the other; by hitting, kicking, pushing or throwing things at them?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Does one parent tries to stop the other from going out or seeing their family or friends?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Does one parent controls all the money or doesn't let the other parent have any money?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	YES	NOT SURE	NO
6. Does one parent bullies the other and always has to be the boss?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Does one parent has threatened to hurt the other?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Has a parent or someone in your family has hurt or injured you, or has tried to hurt or injure you.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Have you ever experienced put-downs by a parent, and made to feel stupid or worthless ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does your parent(s) look after you and take care of you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Has a parent or family member has touched you in the way that you feel uncomfortable or has tricked you into doing sexual things?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Have one or more the things listed above have happened to your brothers or sisters?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Have you felt sad or depressed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Have you lost interest for most things?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Do you feel fatigued all the time?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Do you have problems concentrating?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Have you have felt uneasy or nervous?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Have you have felt a sense of being worthless?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Have you felt notions of guilt?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Have you felt that it is not worth living any more?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Office use only:

Results: I..... II..... III.....

Personal Profile



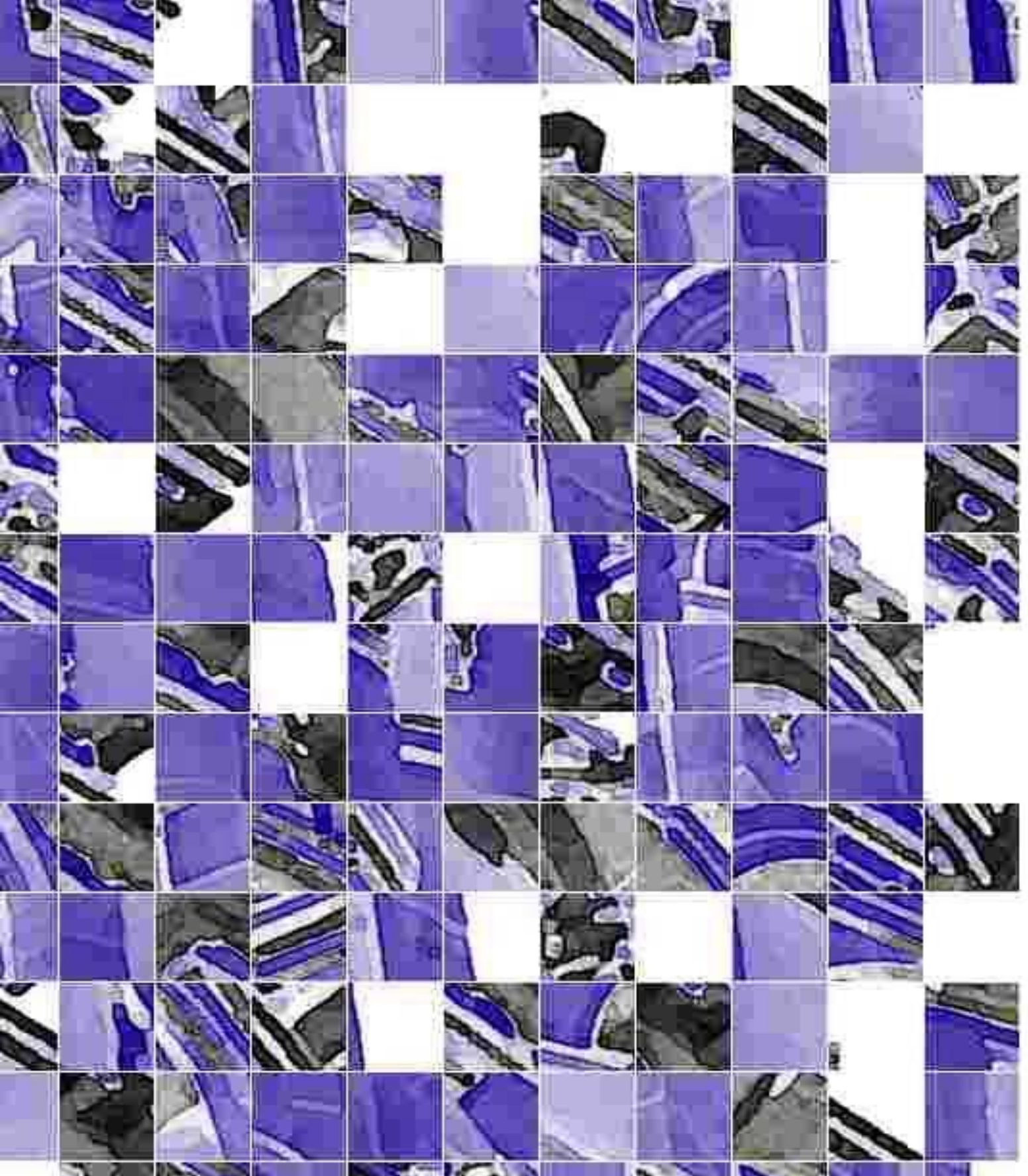
Elizabeth A. Szczepanska is a registered psychologist with a Master's degree in Clinical Psychology (Poland) and postgraduate studies in Psychotherapy/ Counselling. She lectured in Psychology in the Department of Health Science and Sport Psychology at the Academy of Sport and Physical Education. Her main academic and research interests focused on mental health, and its relationship between emotions, health and illness.

Elizabeth has written articles for a variety of professional journals and contributed as the author of the books *Psychology of Sport* (A. Barczyk, A. Stolecka, 1980) and *Psychological Profiles of Athletes of Various Sports* (1979). Her research findings have been delivered at the Polish National conferences dedicated to *Psychological Diagnosis in Counselling and Rehabilitation* (1978) and *Psychological Health of Adolescents* (1983).

She has worked in a number of areas of mental health as a psychotherapist with students and women who suffered from depression, anxiety and individuals with chemical dependency issues.

Elizabeth frequently conducted group therapy and individual counselling, and provided supervision for other professionals, local authorities and voluntary organizations. For the past eight years she has worked with women who have experienced domestic violence in the statewide women's domestic violence crisis services.

Her work underpins a long history of extensive involvement in the Polish community and strong commitment to advocate on behalf of disadvantaged people. She has a registered private practice in Melbourne and actively participates in community projects.



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