Professionals' Perceptions of Support Resources for Battered Immigrant Women: Chronicle of an Anticipated Failure Journal of Interpersonal Violence 2014, Vol. 29(6) 1006–1027 © The Author(s) 2013 Reprints and permissions: sagepub.com/journalsPermissions.nav DOI: 10.1177/0886260513506059 jiv.sagepub.com



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Abstract

The aim of this study was to explore the experience of service providers in Spain regarding their daily professional encounters with battered immigrant women and their perception of this group's help-seeking process and the eventual abandonment of the same. Twenty-nine in-depth interviews and four focus group discussions were conducted with a total of 43 professionals involved in providing support to battered immigrant women. We interviewed social workers, psychologists, intercultural mediators, judges, lawyers, and public health professionals from Spain. Through qualitative content analysis, four categories emerged: (a) frustration with the victim's decision to abandon the help-seeking process, (b) ambivalent positions regarding differences between immigrant and Spanish women, (c) difficulties in the migratory process that may hinder the help-seeking process, and (d) criticisms regarding

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Erica Briones-Vozmediano, Department of Community Nursing, Preventive Medicine and Public Health and History of Science, University of Alicante, San Vicente del Raspeig, P.O. Box 99. E-03080, Alicante 03690, Spain. Email: erica.briones@ua.es the inefficiency of existing resources. The four categories were cross-cut by an overarching theme: helping immigrant women not to abandon the help-seeking process as a chronicle of anticipated failure. The main reasons that emerged for abandoning the help-seeking process involved structural factors such as economic dependence, loss of social support after leaving their country of origin, and limited knowledge about available resources. The professionals perceived their encounters with battered immigrant women to be frustrating and unproductive because they felt that they had few resources to back them up. They felt that despite the existence of public policies targeting intimate partner violence (IPV) and immigration in Spain, the resources dedicated to tackling gender-based violence were insufficient to meet battered immigrant women's needs. Professionals should be trained both in the problem of IPV and in providing support to the immigrant population.

Keywords

partner abuse, women, immigration, help-seeking, qualitative study

Introduction

Immigrant women all over the world are at higher risk of suffering intimate partner violence (IPV) and mortality from this cause than native women (Agoff, Rajsbaum, & Herrera, 2006; Vives-Cases, Alvarez-Dardet, Torrubiano-Domínguez, & Gil-González, 2008; Vives-Cases et al., 2010). There are substantial findings to support the perspective that immigrant women all over the world experience social inequality due to a combination of their gender, social class, nationality, and ethnicity (Anitha, 2010; Hass, Dutton, & Orloff, 2000; Menjívar & Salcido, 2002). These factors are determinants of health, and influence immigrant women's position in the social structure and their access to resources. Irrespective of country of origin, it seems that gender and cultural background shape how women understand gender-based violence and may condition their access to resources and responses to such violence (Kasturirangan, Krishnan, & Riger, 2004). As a consequence of the effects of cultural backgrounds from the country of origin, immigrant women in particular may face multiple obstacles when seeking support to end abusive relationships (Ahmad, Driver, McNally, & Stewart, 2009; Dutton, Orloff, & Hass, 2000; Hass et al., 2000; Herbert, Silver, & Ellard, 1991; Raj & Silverman, 2002).

The prevalence and likelihood of IPV are frequently higher in immigrant women than in natives (Denham et al., 2007; Lown & Vega, 2001; Raj &

Silverman, 2003). In Spain, the prevalence of immigrant women reporting psychological and physical IPV was higher (14.3%) compared with native women (6.2%)(Vives-Cases et al., 2008; Vives-Cases et al., 2010). This fact could be explained by the intersection between IPV, their greater social vulnerability derived from immigration, and the barriers to access to social and health services (Erez, Adelman, & Gregory, 2009; Vives-Cases et al., 2009). To the best of our knowledge, no studies have been published regarding immigrant women's access to IPV resources and services in Spain.

Some countries have attempted to tackle this problem by developing specific programs targeted at immigrant women or by passing legislation that facilitates their access to legal and other services (Bhuyan, 2008; Hagemann-White, 2008). Spain is a noteworthy example of this, with policies aimed at facilitating access to social, health, and legal services for battered immigrant women and providing the possibility of obtaining temporary residence and work permits (Official Spanish Gazette, 2001, 2004). Despite these supportive policies, the incidence of IPV remains high among immigrant women living in Spain: 35% of the 62 deaths from IPV recorded in 2011 were immigrant, and in this year, 36% of the complaining women were immigrants, of whom 41% withdrew their complaint and 33% requested Protection Orders (National Observatory Against Domestic and Gender Violence, 2011). In Spain, lodging an official complaint in the courts or at the police station is the only means of access to public supporting resources for battered women (Vives-Cases & La Parra Casado, 2008).

The actual implementation of public policies on IPV is strongly dependent on service providers, who may observe, adapt, or completely ignore the policy (Hoff, 2009; Plichta, 2007). Their attitudes and practices can enhance or hinder women's access to advocacy interventions against IPV—which have proven to be effective in reducing the incidence of physical abuse and increasing the use of safety behaviors by abused women (Ramsay et al., 2009). Immigrant women usually have weaker informal social support networks than native women (Agoff et al., 2006; Fanslow & Robinson, 2010). Consequently, formal support networks become even more critical for supporting their help-seeking efforts to leave abusive relationships (Bhuyan, 2012; Fugate, Landis, Riordan, Naureckas, & Engel, 2005; Kim & Lee, 2011; Larchanche, 2012; Latta & Goodman, 2005; Liang, Goodman, Tummala-Narra, & Weintraub, 2005; Menjívar & Salcido, 2002).

Providers' attitudes are critical; on the one hand, discriminatory attitudes may discourage women from continuing with the help-seeking process. On the other hand, services and providers can represent an opportunity to start the help-seeking process and encourage women to persevere with this process and prevent them from giving up (Fugate et al., 2005). Despite the key role of public health and social service providers in supporting (or hindering) battered immigrant women's efforts to seek help, the literature exploring their attitudes and practices remains scant (Bhuyan, 2012; Larchanche, 2012). Spain constitutes an especially fertile setting in which to conduct such research due to the rapid changes that have occurred in terms of both (a) progressive legislation regarding IPV and (b) migration patterns, with a migrant population percentage that increased from 2% in 1998 to 14.1% in 2011 (Spanish Statistical National Institute, 2012), together with the fluctuation between restrictive and prointegration migration policies.

The aim of this study was to explore the experience of service providers in Spain regarding their daily professional encounters with battered immigrant women as well as their perception of this group's help-seeking process and the eventual abandonment of the same.

Method

Design and Participants

Twenty-nine in-depth personal interviews and four focus group discussions were conducted with 43 professionals involved in providing support to battered immigrant women. A total of 40 of the participants were women and 3 were men, and they came from different cities in Spain (Barcelona, Madrid, Valencia, and Alicante). These professionals were employed in nongovernmental organizations (NGOs), public institutions, and specialized services aimed at providing legal, social, health, work, family, and psychological support to immigrant women (see Table 1). We aimed to gain an overview of service provision by including a multidisciplinary perspective and asking different kinds of questions to the various participants, adapting each interview to address the questions appropriate to each participant's profile (Denzin & Lincoln, 2005).

Data Collection

Theoretical sampling was used (Glaser & Strauss, 1970), according to the different professional profiles of the public institutions and NGOs capable of contributing to our research question. The first participant recruitment strategy used was to contact a women's shelter in Alicante. Next, we recruited professionals via a social worker, who enabled us to contact professionals working with NGOs. Recruitment of the latter informants was achieved using more pragmatic and feasible criterion, namely, through snowballing. Basically, in each interview, information was requested concerning possible contacts.

Table 1. Participants' Characteristics by Gender, Occupation, and Workplace.	s' Charact	eristics by Ger	ıder, Occı	ıpation, aı	oM bu	rkplace.					
Profession	Social educators	Social Social Police NGO Intercultural Health educators Psychologists workers Lawyers Judges officers volunteers mediators Sociologists workers Total	Social workers	Lawyers	Judges	Police officers	NGO volunteers	Police NGO Intercultural officers volunteers mediators	Sociologists	Health workers	Total
Gender											
Women	2	80	12	9	_	2	ß	2	_	_	40
Men	_			_		_					m
Workplace											
Social services	m	ъ	9	_							15
Associations/NGOs		_	e	m			S	2	_	_	16
Law/police		2	e	m	_	m					12
Total	3	8	12	7	_	3	5	2	_	-	43

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Note. NGO = nongovernmental organizations.

The interview guide included a series of topics to be discussed during the interview. There was no predetermined sequential order, and questions were open-ended. The interview guide was drawn up after reviewing the literature, and also reflected the experience and knowledge of the research team. The interview was divided into two sections, opening with a question concerning the professional competences of the interviewees' specialist areas in the provision of support to battered immigrant women, and closing with a question about their general evaluation and the possibility of improving support to battered immigrant women. The first section dealt with their experience with battered immigrant women and the problems encountered, and the second with the interventions carried out and their perceptions regarding immigrant women's satisfaction with these interventions and resources.

The interviews were carried out between September 2010 and December 2011 by a member of the research team at the professionals' workplace, and lasted for approximately 35 to 90 min. All the interviews were conducted in Spanish, which was the mother tongue for both interviewers and participants, and until data saturation was achieved, that is, when no new information related to the research question was being obtained (Patton, 1980). In keeping with the principles of the Declaration of Helsinki and the Belmont Report, the purpose and procedure of the study were explained, an opportunity to ask questions was provided, and written informed consent was obtained from each participant prior to data collection. Ethical approval was sought and obtained from the Ethics Committee of the University of Alicante.

Data Analysis

We digitally recorded the interviews and then transcribed them verbatim. We examined the interviews independently, and once completed, held a joint meeting to compare and combine the analyses. All data were imported into qualitative analysis software (Atlas.ti) and examined using qualitative content analysis as described by Graneheim and Lundman (2004). Through the texts, we identified meaning units of a sentence or paragraph with the same content. Then we prepared condensed meaning units, namely, summarized versions of the meaning units. The next step was to develop codes from the meaning units. These codes reflected a higher level of abstraction and were grouped together to formulate categories. Categories reflect the manifest content of the text, what the providers explicitly expressed about the process. Finally, a theme emerged that crosscut all the categories and reflected the latent content of the text, namely, what was implicit in the content of the interviews.

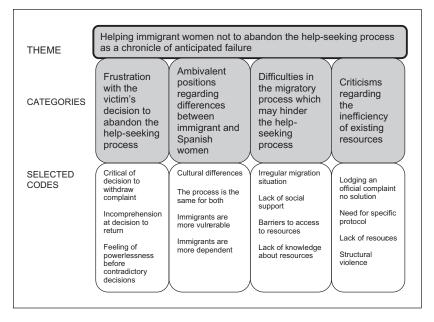


Figure 1. Theme and categories generated from the interviews.

Results

Four categories emerged during data analysis: (a) frustration with the victim's decision to abandon the help-seeking process, (b) ambivalent positions regarding differences between immigrant and Spanish women, (c) difficulties in the migratory process that may hinder the help-seeking process, and (d) criticisms regarding the inefficiency of existing resources. These categories reflect service providers' perceptions and experiences with these women's help-seeking process and their decision to abandon this course of action.

A theme emerged that crosscut the above-mentioned categories: helping immigrant women not to abandon the help-seeking process—a chronicle of anticipated failure (see Figure 1). This theme indicated that service providers perceived their work to be important and necessary, while well aware of the enormous difficulties these women face when they decide to seek help and end a violent relationship. These difficulties induced women to abandon the help-seeking process once initiated and gave rise to feelings of pessimism and frustration among service providers when facing cases of battered immigrant women.

Frustration With Victims' Decision to Abandon the Help-Seeking Process

What they can't do is come here today to report that they've been hit, and then come back next week and ask me how to solve the problem. (Interview 10, mediator, woman)

The professionals responsible for providing IPV support stated that it was common for battered immigrant women to withdraw their complaint or return to the aggressor. They described the same pattern of behavior, which begins with the search for professional help to learn about resources, followed by taking the decision to separate or lodge an official complaint, only to then stop the process and resume cohabitation with the aggressor: "They want us to help them, and they lodge the complaint, but the victims are very fond of withdrawing their complaint. Often the measures are still in place, but we frequently find that they are living together" (Interview 21, police officer, man).

Professionals considered protection orders difficult to apply, due to the breaches and reconciliations that they described as widespread. They also stated that such orders are rarely respected, from the moment they are issued until the judgment is passed. When battered women did not appear at their hearing, the professionals assumed that the women had returned to the aggressor. Even so, they identified breach of protection orders to be behavior that is more typical of aggressors:

Even with restraining orders in place, they're living together. And we say, "My God." I mean, you have a restraining order, how is it you're with him? How can you be with him? Because you're breaking the law too, you know, they could send you to jail for that. Because you have a restraining order, mutual restraining orders, and then you call him on the phone during your session with the psychologist. Why are you calling him? You can't. And there they are, like the best of friends, but well, that's life. (Interview 12, social worker, woman)

The professionals said that these changes of opinion on the part of battered women made it difficult for them to carry out their jobs. The testimony given by the battered woman is essential to complete the process and pass sentence on the aggressor. Professionals were usually disillusioned when the process was abandoned, and even expressed anger. They were frustrated by the ineffectiveness of the advice they gave to the battered women. Among the groups of professionals, the police officers showed greatest exasperation and made value judgments: We often find that they're living together. But they can't live together. "No, I've forgiven him," but it isn't a question of forgiving him, there's been a judicial decision that states that a distance must be maintained, because the other person is dangerous, and for your own safety. (Interview 21, police officer, man)

Professionals in social work and mediation took a more sympathetic view of the battered women. They tried to understand the situation that had driven these women to make the decision to return to their aggressors:

because the worst thing you can say to a woman who withdraws her complaint is you've made a mistake, or don't come asking for help again. You have to ask her, "How're things? I hope it all goes well, you know? I hope we were all wrong, OK?" You can't tell her off or blame her for anything, because that's the worst thing you could do. (Interview 10, mediator, woman)

Ambivalent Positions Regarding Differences Between Immigrant and Spanish Women

No, they all go back [to the aggressor], Spanish women and foreign women, maybe the foreigners a little more often, because they're on their own. (Interview 29, Judge, woman)

This category reflects the contradictions expressed. On the one hand, professionals denied the existence of differences between Spanish and immigrant women in abandoning the help-seeking process. They argued that there were also cases of abandonment among Spanish and European women, who had more support networks. Many explained this decision as being due to internal or emotional factors. They downplayed the importance of the precariousness characteristic of immigrant women's situation. Initially, they declared that knowledge about existing resources was the same for both:

The critical path for Spanish women is no different to that for immigrant women ... I think that it's the same for them as for the majority of Spanish women, with the additional difficulty that their legal, economic and social position is more complex because they don't have networks. (Interview 17, psychologist, woman)

On the other hand, these same professionals indicated that the added difficulties experienced by immigrant women, such as feeling uprooted and experiencing social isolation, made them more afraid and insecure than Spanish women and also more vulnerable to IPV: "It's true that for women immigrants, the consequences of lodging a complaint and the consequences of separation are more serious" (Interview 27, social worker, woman). They pointed out that the inability to speak the language makes it difficult to access resources, and increases fear of and dependence on the aggressor. Above all, they perceived that there was a cultural normalization of violence in immigrant women's countries of origin, produced by family pressure and the internalization of submissive roles, to be a distinguishing factor between immigrant and Spanish women. The participants also considered that there were differences between nationalities, identifying Arab women as being the most likely to remain in a violent relationship due to the gender inequalities that they perceived as arising within certain contexts in Muslim culture. In contrast, they perceived Latin American women to be the most empowered in terms of leaving a violent relationship; they share the same language and their migration patterns may be independent of men, since they too often have jobs.

It is noticeable that there are few Arab women who follow through with all the measures, and the vast majority withdraw their complaint and don't want any measures to be taken, they want to return to the aggressor, even when he has assaulted them physically . . . in their country of origin, the fact that a man hits a woman just because she's his wife is not punishable, they see it as something . . . as the woman's duty to the man, you know? It's like he can do anything he wants. (Interview 21, police officer, man)

The participants described acculturation as a positive factor for immigrant women. They stated that the influence of Western culture in the host country promotes the empowerment required to follow through with the legal process and escape from violence:

Still, it's also true that even in these cultural contexts we're seeing a change, I think it's because of all the information available now. Somehow, the message is getting through to the women affected that this is not normal, and so they're reporting this more, and not withdrawing their complaint or anything, except that usually, in all cultural contexts, there are many in my opinion who then maybe don't want to continue. (Interview 19, judge, woman)

Difficulties in the Migratory Process That May Hinder the Help-Seeking Process

They go back because what is outside is worse than what they had inside. (Focus Group 2, social workers, women)

The professionals indicated that immigrant women's dependence on their partners may be greater than that of Spanish women, due to job insecurity and

their economic situation derived from the migration process. They also indicated that, compared with documented immigrant women, undocumented immigrant women are even more vulnerable. Family reunification is the reason many of them come to Spain, and they have no independent income, place to live, or resources to provide for their children:

That's a risk, certainly it's a risk, because they have no home, no job . . . They go back because they want the economic security . . . they go back because they don't want to be destitute, or unemployed, or homeless, with nothing. (Interview 1, employment advisor, woman)

If they are financially dependent on their violent partner's wages, his immigrant status also affects them. If he has a police record for abuse, this will count against him when he applies for or renews his residence permit. The participants explained that immigrant women may withdraw the complaint because they do not want to harm their partner and/or want to ensure the presumed welfare of their children, to preserve the family unit:

I know that thousands of women endure abuse and put up with everything for the sake of expediency, not for themselves, but for their children. Because they find themselves in a situation where you have children and they're hungry, and they say, "fine, I'll put myself at risk, no matter how I'm treated, but at least my kids will have a home and food." (Interview 15, health agent, woman)

Social isolation is a strategy that aggressors use to dominate battered women, and in the case of immigrant women, it is also a situation that is accentuated by the migration process. The professionals identified the lack of support networks as a factor that makes it more difficult to continue with the process of separation from the aggressor. It also forces battered immigrant women to turn to women's shelters. They observed that women were generally reluctant to do so, because of the difficulties involved in living with other women and their children, the rules of the shelter, and being separated from their environment. The participants also indicated that this could be another of the reasons for going back to live with the aggressor: "Most of them have no social network, and so they return to the aggressor because they don't know where else to go" (Interview 17, psychologist, woman).

All the professionals highlighted the lack of knowledge about their rights as a battered woman in Spain and about the existing resources. This is a risk factor that prevents them from leaving the abuser: "A general lack of awareness about the resources available to them is another of the reasons that make them go back again, because they can't imagine how they would possibly survive [without their partner]" (Interview 17, psychologist, woman).

Their increased apprehension due to this lack of information is combined with a fear of the aggressor and about their immigration status, especially if their situation is irregular. The aggressor uses this fear to threaten the woman. The partner's intimidating behavior may be decisive in the decisions battered women make, and can include emotional blackmail, threats, and stalking:

But they are afraid, because do you know what it's like for a woman who's come from somewhere else to be here alone? He is all they have, they don't have anything else. Then he threatens them, he says "I'll take my children and send you back there again." (Interview 15, health agent, woman)

Professionals' Criticisms Regarding the Inefficiency of Resources

We've sold an idea that isn't true. Lodging a complaint is not the solution. (Focus Group 3, psychologists, women)

I don't know what they mean by "lodge a complaint." She lodges a complaint and then what? Where's the real help? How is she going to make it? (Interview 7, social worker, woman)

The professionals also attributed the withdrawal of complaints to the fact that immediately after a violent event, battered women may find themselves caught up in criminal proceedings without having weighed up the consequences. Fear of the aggressor, fear of a process about which they know little, and the concern expressed by professionals about the risk can push them into making a hasty decision:

What happens is that often, the day that all this happens, it's all very heated and the problem is the momentum. If she has just been punched in the eye, the next day she goes to court and say "yes, yes, he punched me in the eye, I don't want to see him ever again" because that's the normal reaction of a person who has been attacked in her home by her husband, not wanting to have anything more to do with him ever again. But what happens then? The trial isn't held that day, but 3 months later. Many things can happen in three months, and they usually tend towards reconciliation. (Interview 29, judge, woman)

The professionals acknowledged the pressure some of them may exert to convince these women to lodge a complaint, without being able to offer them a truly effective solution later on. All the interviewees asserted that battered women, especially those who are more vulnerable, need to have other alternatives, and did not consider that making a complaint represented a definitive solution to the problem of IPV:

On the one hand we say "make a complaint, we'll support you, we're right behind you," but then there comes a point when "we're with her" only means she's physically here with us at the shelter, but in a legal context the woman is completely unprotected. (Interview 5, social worker, woman)

The providers observed that immigrant women returned to the aggressor because they felt unprotected. They may feel let down by the process and by the inefficiency of the resources available to them:

and we've come a long way with the law but there are still many deficiencies, so the woman finds herself unprotected instead of what she was sold, like the migration project is sold as a panacea but that isn't actually true, and then she suddenly feels . . . and this is a big reason why women go back, it's not that they want to return, but you know. (Focus Group 3, psychologists, women)

Some professionals blamed themselves for the abandonment of the process and a return to the aggressor. Their arguments revealed the failure of the system's attempt to help women leave violent relationships, whether due to their professional work, the ineffectiveness of existing resources, or lack of awareness in society:

Well, I don't know which is worse: an abusive husband or a society that abuses women by not giving them the support they need. (Interview 23, social worker, woman)

Socially speaking, this is the fault of society, not the women. Society should give them the tools to understand that they have full citizen rights, that they have rights, and we're talking about Human Rights here, because there are many who aren't even aware of them. In the end, whether they make a complaint or leave the aggressor, they should be aware of all the consequences it will imply. (Focus Group 3, psychologists, women)

In contrast, an effective solution seemed to emerge whereby these women would be for them to learn to lead an independent life, through promoting their empowerment and autonomy, and enabling them to achieve economic independence through entry into the workforce. Family support resources were also considered as important, and even more necessary for immigrant women who have no support networks, such as close relatives. The professionals also emphasized psychological rehabilitation as an essential resource for breaking emotional dependency on the aggressor:

Exactly, they should be offered concrete resources, tangible ones, so that they can say "Well, I have the possibility that someone will take care of my children while I work," so that they can have a decent job and decent housing. But often, they have to leave, or go back to their aggressor or leave in a way that . . . without a decent life, without quality of life. (Interview 4, social educator, woman)

The professionals identified the need for more resources and also more effective resources, to enable these women to leave the violent relationship definitively. Constant reference was made throughout the interviews to the current climate of economic crisis, which affects public funding of specific resources targeting both IPV and immigration: "But I do think there should be more financial support. I know we are in crisis . . . but if there were more resources it seems to me that they [women's shelters] wouldn't be so full" (Interview 15, health agent, woman).

Although few and far between, some of the professionals interviewed did express optimistic attitudes. They mentioned certain success stories and positive ideas about the existence of resources or the legal instruments available:

In general, I think that an experience is really good when a woman is receiving direct help and she begins to work on a recovery process, she has a job, a place to live and she's happy, she feels better. I think it's this kind of experience that makes this job worthwhile, but it's not always like that. (Interview 23, social worker, woman)

Discussion

We applied the criteria described by Lincoln and Guba (1985) to enhance trustworthiness in qualitative research. Transferability was enhanced by theoretical sampling, selecting participants' profiles based on their ability to contribute to the research question. Triangulation of researchers and participants was also used to improve credibility, involving different service provider profiles. We also made an effort to contextualize the results to help readers evaluate the extent to which our results might be applicable to other, similar settings. To enhance dependability, we used an emergent design and responded to constant change even when that implied modifications to the planned schedule or the interview guides. To stay closer to the text, the original Spanish version was used for coding, and translation into English only took place once categories and themes had emerged. The limitations of this study include the fact that we did not conduct a separate analysis of the individual interviews and the focus group discussions. In addition, social desirability bias may have influenced the responses of the participants, especially in the focus group discussions.

This study shows that professionals perceived battered immigrant women's abandonment of the help-seeking process as a failure of the system. Despite the existence of public policies in Spain targeting IPV and immigration, they felt that the resources devoted to tackling IPV did not represent an adequate response to battered immigrant women's needs. They felt frustrated when women abandoned the process, and these feelings affected how they approached immigrant battered women: with pessimism. They felt discouraged, since they assumed that the women would probably abandon the process. In other studies, health care providers and advocates have reported feeling frustrated at battered women's decisions (Dunn & Powell-Williams, 2007; Kelly, 2009).

The interviewees saw the help-seeking versus abandonment process with two possible outcomes: definitively leaving the aggressor or returning to him. However, research has shown that the process of leaving an abusive relationship is complex and may be long, perhaps involving repeated attempts to leave and then returning to the aggressor (Agoff et al., 2006; Sagot, 2005; Velzeboer, Ellsber, Clavel Arcas, & Garcia Moreno, 2003). Since the critical path of battered women encompasses the process of awareness raising and the quest for solutions through access to social and institutional resources, a battered woman's encounter with professionals constitutes another step in her process of leaving the circle of violence (Landenburger, 1998; Liang et al., 2005; Moss, Pitula, Campbell, & Halstead, 1997; Roberts, Wolfer, & Mele, 2008; Walker, 1979). Seeing this process as a pattern of leaving and returning would imply the need to provide long-term support to the women affected; it can also help providers to consider abandonments not as failures, but as steps in the long process of ending abusive relationships (Koepsell, Kernic, & Holt, 2006).

This study also reveals that providers held contradictory views regarding differences in service accessibility between immigrant and nonimmigrant battered women. "Culture" was considered a key factor affecting access, namely, these women's cultural context was considered more tolerant of IPV compared with Spanish culture. These prejudices have been demonstrated in other studies (Bhuyan, 2012; Larchanche, 2012), which also reported that such attitudes may negatively affect the way providers approach battered immigrant women.

Most of the professionals interviewed recognized the need to provide alternatives to lodging a complaint. Indeed, there is little empirical evidence that Spanish IPV policy is a perfect match for victims' needs. Elsewhere, some authors have questioned the effectiveness of making an official complaint, because this course of action only presents itself when the woman wants to leave or criminally punish the aggressor (Goldman, 1999; Hare, 2006; Moynihan, Gaboury, & Onken, 2008; Shirwadkar, 2004). For immigrant women, and especially for those in irregular situations, lodging a complaint to access public resources may imply a barrier to escape from their abusive relationship. According to Spanish law, having a criminal record of abuse represents an impediment in the process of maintaining legal residence status. Since, in general, these women do not want to harm their partner, they could prefer not to lodge a complaint, or withdraw the complaint once it has been filed. This can lead undocumented immigrant women to feel that the

been filed. This can lead undocumented immigrant women to feel that the public authorities represent a threat rather than a source of protection (Abu-Ras, 2007; Salazar-Torres, 2009).

Implications for Research, the Police, and Practice

The perceptions of the professionals reflected what they felt capable of doing or of not doing. In general, providers feel that laboring under limited resources hinder their work (Melbin, Sullivan, & Cain, 2003). It might be that in the current context of economic crisis, the reduced funding available for the maintenance, implementation, and refining of social resources could lead to a reversal of achievements and future interventions to promote equality and accessibility for battered immigrant women. It is probable that if the same study were repeated in the future, the perceptions of professionals would reflect a worse situation as regards services. This suggests the need for follow-up research, to identify how the situation has changed.

The findings presented in this study suggest that the frustration of professionals working with battered women has practical implications. Professionals constitute the gateway to resources for these women, and their attitudes can increase the effectiveness of existing resources. In general, the interviewees assumed that leaving the aggressor was the best solution. However, other authors have criticized this position because leaving violent relationships does not necessarily guarantee the safety of women and children escaping genderbased violence (Burman & Chantler, 2005; Dunn & Powell-Williams, 2007). Support services should have staff trained in and aware of the problem of IPV, which would help women to feel that they have the ability to get back on their feet (Melbin et al., 2003). Moreover, they should be capable of working with a heterogeneous immigrant population. Since the study explored professional's perceptions rather than their actual practices, future research should focus on quantitatively evaluating practices and service effectiveness. Exploring women's perspectives on the services available to them and contrasting them with the findings from this study could also yield interesting insights.

Increasing the effectiveness of existing services and resources entails broadening the competences of professionals. For example, they should be trained not only in the problem of IPV but also in providing support to the immigrant population. To render help-seeking successful, there must be effective resources in place that support immigrant women's decisions. It is necessary to encourage and implement measures that promote their independence, through workforce entry and social integration (Bui & Morash, 2008). Furthermore, strategies should be implemented that meet their communication needs. For example, the current support services offered to victims of IPV require effective translation services. For this to be possible, the translators should receive training in the problem of IPV. Other studies have also suggested the provision of host country language classes for immigrant women seeking to establish their independence from abusive partners (Erez & Britz, 2006; Erez & Globokar, 2009)

Conclusion

Professionals perceive the encounter with battered immigrant women as unproductive, because they feel that they have very few resources to rely upon. The individual actions taken by women are not sufficient in themselves to put an end to a violent relationship. Structural support is fundamental in preventing battered immigrant women from abandoning the help-seeking process. Besides IPV, battered immigrant women are also subject to the structural violence derived from their status as immigrants, due to the lack of social networks and their lower level of independence. Socioeconomic insecurity is the price these women must pay to overcome IPV. Therefore, they move from interpersonal violence to a more structural violence caused by the ineffectiveness of existing resources.

Acknowledgments

We want to thank all providers who voluntarily participated in this study and gave their time to be interviewed and shared with us their professional experiences. Without them, this study would have not been possible.

Authors' Note

The funding source had no involvement in the study. Researchers were independent of funders.

Declaration of Conflicting Interests

The author(s) declared no potential conflicts of interests with respect to the authorship and/or publication of this article.

Funding

The author(s) disclosed receipt of the following financial support for the research and/ or authorship of this article: This study was supported with funding (PI10/00151) from the Health Institute Carlos III (Ministry of Health, Spain).

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