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## CONCOMITANT FORMS OF ABUSE AND HELP-SEEKING BEHAVIOR AMONG WHITE, AFRICAN AMERICAN, AND LATINA WOMEN WHO EXPERIENCE INTIMATE PARTNER VIOLENCE

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### Abstract

This study uses National Violence against Women Survey data to investigate the differential impact of concomitant forms of violence (sexual abuse, stalking, and psychological abuse) and ethnicity on help-seeking behaviors of women physically abused by an intimate partner (n=1,756). Controlling for severity of the physical abuse, women who experienced concomitant sexual abuse were less likely to seek help, women who experienced concomitant stalking were more likely to seek help, whereas concomitant psychological abuse was not associated with help-seeking. Ethnic differences were found in help-seeking from friends, mental health professionals, police and orders of protection. Implications for service outreach are discussed.

### Keywords

Intimate partner violence; help-seeking; ethnicity

Physical abuse rarely occurs in isolation of other forms of abuse, such as sexual abuse, psychological abuse, and stalking (Koss et al., 1994; Smith, Thornton, DeVellis, Earp, & Coker, 2002). Research on intimate partner violence (IPV) that has taken into account its multidimensional nature has demonstrated that the physical and psychological effects of IPV differ depending on the types of abuse experienced (e.g., Basile, Arias, Desai, & Thompson, M., 2004; Howard, Riger, Campbell, & Wasco, 2003; Koss et al., 1994) and that different patterns of co-occurring violence may impact women's help-seeking (e.g., Cattaneo, DeLoveh, & Zweig, 2008). However, perhaps due to its complexity, most examinations of intimate partner violence (IPV) have studied forms of abuse in isolation from one another (Mechanic, Weaver, & Resick, 2008). Increasing our understanding of the relationship between concomitant forms of partner abuse and women's help-seeking behavior has important implications for the development of effective screening and outreach programs. Accordingly, this paper examines the differential impact of concomitant forms of violence on informal (family, friends) and formal (medical or mental health professionals, police, orders of protection) help-seeking regarding violence in intimate relationships. Furthermore, because ethnic differences in help-seeking have been consistently documented (Hutchison & Hirschel, 1998; Ingram, 2007; Kaukinen, 2004; Lewis et al., 2005), this paper also examines the relationship of ethnicity to help-seeking.

Women's efforts to end abuse can be facilitated by external sources of support (Logan, Shannon, Cole, & Walker, 2006). Perhaps the best evidence comes from Sullivan and Bybee (1999) who randomized shelter residents to receive a trained advocate or treatment as usual. Women who worked with advocates reported higher quality of life as well as less violence, even at two years post-intervention (Sullivan & Bybee, 1999). Individuals without professional training can also benefit abused women: women report that the help and support received from family or friends play a crucial role in their ability to leave their assailants (Bowker, 1983). In addition to playing an important role in increasing women's safety, social support has been found to be negatively correlated with Posttraumatic Stress Disorder (PTSD), depression, and other mental health problems among battered women (e.g., Coker et al., 2002; Coker, Watkins, Smith, & Brandt, 2003).

In 1988, Gondolf and Fisher proposed that abused women increased their help-seeking efforts in response to increasing violence by her partner. Testing their theory in a sample of over 6,000 women, Gondolf and Fisher found that severity of abuse (including verbal abuse, physical injury, and severity and frequency of physical abuse) in the context of increasing antisocial behavior by the abuser predicted help-seeking. As an extension of this theory, we hypothesized that women would not only increase their help-seeking as physical abuse became more severe, but also in response to increased exposure to different types of abuse. Thus, women who experienced sexual abuse, psychological abuse, and stalking in addition to physical abuse would be more likely to seek help.

## Previous Studies on Help-seeking as a Function of Type of Partner Abuse Experienced

Few studies have examined the impact of concomitant forms of violence on the help-seeking efforts of physically abused women. To our knowledge, only one study has examined help-seeking behaviors among physically abused women stalked by intimate partners (Logan et al., 2006). No differences in help-seeking were found among women who had experienced physical violence with and without stalking. However, because the sample was recruited from women seeking orders of protection (OPs) against former partners, the findings may have limited generalizability.

Women who are sexually assaulted by a partner may not report it due to fear of being blamed (Kilpatrick, Edmunds, & Seymour, 1992); a fear which may be well-justified. Previous research shows that as the rape victim-offender relationship becomes more intimate, others are more likely to blame the victim as well as minimize perceived harm to the victim (Monson, Byrd, & Langhinrichsen-Rohling, 1996; Monson, Langhinrichsen-Rohling, & Binderup, 2000). Accordingly, in one national sample, women raped by their husbands were significantly less likely to seek help than women raped by strangers (Mahoney, 1999). Yet to be examined are the help-seeking efforts of women both physically and sexually abused by their intimate partners compared to women who experience physical abuse in the absence of sexual abuse.

Finally, findings regarding the relation of psychological abuse to help-seeking have been inconsistent. Duterte et al. (2008) found that severe psychological abuse was related to increased likelihood of formal help-seeking, whereas Dutton, Goodman, and Bennett (1999) found that psychological abuse was unrelated to help-seeking. Although higher levels of distress due to concomitant psychological abuse may lead to increased help-seeking, the controlling behaviors which constitute psychological abuse may render obtaining help more difficult.

In sum, although attention has increasingly been paid to help-seeking in relation to stalking, sexual abuse, and psychological abuse, with few exceptions, these studies have examined each type of abuse in isolation. This tells us little about what happens in “real life,” in which physical abuse frequently occurs in the presence of other forms of abuse.

## Ethnicity and Help-seeking

Culture can influence a woman’s definition of IPV, her decision to seek help, and from whom she seeks help (Liang, Goodman, Tummala-Narra, & Weintraub, 2005). Values emphasizing women’s submissiveness, placing the needs of family before one’s own, and stigmas regarding divorce may present barriers to help-seeking (Liang et al., 2005). In addition, a lack of culturally competent IPV services (Raj, Silverman, Wingood, & DiClemente, 1999; Turner & Kramer, 1995) and distrust toward medical and legal establishments (Gondolf, 1999; Gamble, 1997) also serve as barriers to help-seeking.

Cultural differences may also reflect or be moderated by socioeconomic differences. Women in lower socioeconomic classes are likely to live further from service providers and lack insurance, transportation, child care, disposable income as well as the ability to take off work compared to women in higher socioeconomic classes, factors which make it more difficult for these women to seek help for IPV. Due to these cultural and financial barriers, ethnic minority women of lower economic status may be less likely to access services until the situation has become unmanageable.

As might be suggested by these cultural and socioeconomic variations, ethnic differences in help-seeking have been found. For instance, African American, Latina, and Asian American abused women have been found to be less likely than Whites to use outpatient mental health services (El-Khoury et al., 2004; Henning & Klesges, 2002; Hutchison & Hirschel, 1998; West, Kantor, & Jasinski, 1998), whereas individuals from minority racial/ethnic groups are more likely to use safety net providers (Chow, Jaffee, and Snowden, 2003). Abused African American women are more likely to call the police than White women (Hutchison & Hirschel, 1998; Pearlman, Zierler, Gjelsvik, & Verhoek-Oftedahl, 2003). A better understanding of these patterns is crucial to the development of service outreach. Although ethnic differences in help-seeking have been investigated among battered women (e.g., El-Khoury et al., 2004; Ingram, 2007), few studies have used nationally representative samples.

### The Current Study

We sought to examine Gondolf and Fisher's (1988) theory as well as build upon previous studies that have addressed help-seeking by abused women. We noted several aspects that had not yet been examined by previous studies. For instance, as noted by Lee, Sanders-Thompson, and Mechanic (2002) and demonstrated by the literature review above, most previous studies have examined the impact of different types of violence separately, not as they co-occur. Previous studies on help-seeking have examined broad categories of help-seeking behavior (e.g., formal and informal help-seeking or broad designations of legal, social, and/or medical help-seeking; Duterte et al., 2008; Hutchison & Hirschel, 1998; Kaukinen, 2004). In addition, most studies have recruited women from shelter and criminal justice settings, who have already reached out for help from formal agencies (Henning & Klesges, 2002; Hutchison & Hirschel, 1998; Logan et al., 2006; Macy, Nurius, Kernic, & Holt, 2005). Finally, many previous studies did not examine ethnicity, an important influence on help-seeking behavior.

The relationship of concomitant stalking, sexual abuse and psychological abuse to specific help-seeking strategies (family, friends, medical professionals, mental health professionals, police, and orders of protection) was examined among White, African American and Latina physically abused women from a nationally representative sample. We examined help-seeking specifically related to physical abuse for several reasons: (1) the occurrence of sexual abuse in non-physically abusive relationships is relatively infrequent (McFarlane et al., 2005) and (2) the NVAW survey did not include questions related to help-seeking for psychological abuse. We hypothesized that any exposure to sexual abuse, psychological abuse or stalking by the physically abusive partner would increase the overall help-seeking efforts of women compared to those women who experienced physical abuse alone. We also

hypothesized that the cumulative sum of the types of abuses experienced would be positively related to overall help-seeking behavior. Additionally, we explored whether exposure to certain types of violence related to particular help-seeking behaviors. Although these analyses were primarily hypothesis-generating, we hypothesized that: psychological abuse would be correlated with higher rates of mental health help-seeking; stalking would be correlated with higher rates of seeking orders of protection; and, due to higher rates of injury (Campbell, 2002), sexual abuse would be correlated with higher rates of medical help-seeking. Finally, we examined ethnic differences in the likelihood of seeking help and where women turn for help, expecting that African American and Latina women would be less likely to seek help from medical and mental health professionals and more likely to seek help from the police than White women.

## METHOD

### Sample and Procedure

This is a secondary analysis of data from the National Violence against Women Survey (NVAWS; Tjaden & Thoennes, 1999), funded by the National Institute of Justice and Center for Disease Control and Prevention, and conducted from November 1995 to May 1996. Eight thousand women, aged 18 and older, were interviewed in this random digit dial telephone survey, sampled to be representative of the U.S. population. Respondents were interviewed by women. Spanish speaking respondents were interviewed in Spanish. Seventy-two percent of women agreed to participate. The subsample of women ( $n=1,756$ ) who reported past or current physical abuse by a male spouse, live-in partner, boyfriend, or date was examined in this study. Questions regarding the nature of the victimization, help-seeking behaviors related to the most recent incident of physical violence by an intimate partner, and demographic information were used to test the proposed hypotheses. See Tjaden and Thoennes (2000) for more details on the procedures of the NVAWS.

### Measures

**Sexual abuse**—Questions regarding sexual abuse were adopted from the National Women's Survey (Resnick, Kilpatrick, Dansky, Saunders, & Best, 1993) and included vaginal, oral, or anal penetration with fingers or objects, and attempted vaginal, oral, or anal sex. A dichotomous variable was created, reflecting the occurrence or non-occurrence of sexual abuse by the partner who perpetrated the most recent incident of physical abuse. Sexual abuse that occurred prior to or simultaneous to the physical abuse was included in the analyses.

**Stalking**—Assessment of stalking was based on the definition provided by a congressionally mandated research report published by National Institute of Justice and necessitates the existence of (1) repeated intrusive behaviors, and (2) the respondent's experience of fear due to these behaviors. A dichotomous variable was created reflecting the occurrence or non-occurrence of stalking by the partner who perpetrated the most recent incident of physical abuse. Stalking that occurred prior to or simultaneous to the physical abuse was included in analyses.

**Psychological Abuse**—Seven items measuring psychological abuse were adapted from the Canadian Violence against Women Survey (Johnson, 1996) and are similar to items included in the Psychological Maltreatment of Women Survey (Tolman, 1989). They include questions about the partner's attempts to limit contact with others, possessiveness, and name calling/put downs. Affirmative responses to the seven questions were summed to create a continuous measure of psychological abuse by the partner who perpetrated the most recent incident of physical abuse. Scores ranged from 0 to 7. Cronbach's alpha is 0.70. For the cumulative abuse analyses, a dichotomous variable was created, such that the endorsement of at least one psychologically abusive behavior was operationalized as the presence of psychological abuse.

**Cumulative abuse**—This variable was calculated by summing the total number (0–3) of abuses by the partner which the woman reported experiencing, in addition to the physical abuse.

**Help-seeking**—Participants were asked yes/no and open ended questions about their help-seeking behaviors *in response to the most recent incident of physical abuse*. The target incident could have occurred at any point in time; no time restrictions were placed. From this information, seven dichotomous help-seeking variables were derived including: family (including one's immediate family, family of origin, or in-laws), friends (including friends, neighbors, and co-workers), mental health professionals, medical treatment providers (including dental providers), police, and obtaining an OP. In order to have a more comprehensive measure of help-seeking efforts employed by the woman, we also calculated a simple numerical count (ranging from 0 to 6) of the number of different help-seeking strategies employed by the woman.

## Covariates

**Education**—Educational level has been positively related to help-seeking (e.g., Coker, Derrick, Lumpkin, Aldrich & Oldendick, 2000; Hutchison & Hirschel, 1998). Education at the time of the NVAW survey was used.

**Age**—Although previous studies have consistently documented a significant relationship between age and help-seeking, findings regarding the direction of the relationship between age and help-seeking have been inconsistent (e.g., Henning & Klesges, 2002; Hutchison & Hirschel, 1998; West et al., 1998). Age at time of abuse was used.

**Relationship to the abuser**—Previous research suggest that the type of victim-offender relationship is significantly related to help-seeking behavior (e.g., Kaukinen, 2004). This variable was dichotomized (spouse/other) and included as a covariate.

**Physical abuse severity**—The most recent incident of physical abuse by an intimate partner was assessed using 12 questions from the Conflict Tactics Scale (Straus, 1979), which was designed to assess items in order of increasing coercion and aggression. For the purposes of these analyses, each behavior was numbered in ascending order, from least severe (thrown something at you that could hurt you) to most severe (used a knife or other



weapon on you), and the most severe behavior endorsed by the participant was used as the measure of abuse severity.

## RESULTS

### Participant characteristics

Table 1 presents sample descriptives. Of the 1,756 women who reported past or current physical abuse by a male intimate partner, 247 (14.1 %) experienced sexual abuse, 420 (24.5%) experienced psychological abuse, and 204 (11.6 %) experienced stalking by that same partner. The average age at the time of the target incident of abuse was 28.9 years ( $SD = 9.0$ ) and at the time of the interview was 41.0 years ( $SD = 12.7$ ). Almost two-thirds (61.9 %) of the women in this study had been married (including common law marriage) to their abusers. There were no significant ethnic differences in the types of abuse experienced or in relationship to the abusive partner.

**Data Analysis**—Six separate logistic regression analyses were completed with each of the seven help-seeking variables (family, friends, mental health professionals, medical treatment providers, police, and obtaining an OP) serving as the dependent variable. Additionally, one Poisson regression was completed with the number of types of help sought as the dependent variable. The presence of stalking, the presence of sexual abuse, severity of psychological abuse, and ethnicity served as predictors within each regression. The respondents' age at the time of abuse, relationship to the abuser, and education level, as well as the severity of physical abuse, were included as covariates.

In order to rule out the possibility that the *types* of abuse experienced may have been confounded in the previous analyses with participants' *cumulative* experience of abuse (the total number of types of abuse experienced), we conducted a second set of seven analyses with cumulative abuse as the sole predictor. The dependent variables and covariates remained the same.

**Descriptives**—Table 2 displays the number and percentage of women who sought help from each of these sources by the type of abuse experienced and ethnicity.

**Primary Analyses**—Table 3 summarizes the results of the analyses.

### Number of help-seeking strategies employed

Women who experienced stalking ( $Wald \chi^2 = 25.45, p < 0.0001$ ) sought help from a greater number of sources than women who experienced solely physical abuse. Women who experienced sexual abuse sought help from significantly fewer sources ( $Wald \chi^2 = 12.96, p < 0.001$ ) than women who did not experience sexual abuse. Neither ethnicity nor psychological abuse was associated with number of help-seeking strategies employed. Women who were more highly educated ( $Wald \chi^2 = 6.93, p < 0.01$ ), abused by their husbands ( $Wald \chi^2 = 5.41, p < 0.05$ ), and experienced more severe abuse ( $Wald \chi^2 = 104.53, p < 0.0001$ ) sought help from more sources.

## Family

Exposure to stalking (OR = 1.11, 2.16,  $p < 0.01$ ) predicted increased family help-seeking while exposure to sexual abuse (OR = 0.32, 0.78,  $p < 0.01$ ) predicted decreased family help-seeking than physical abuse alone. Neither ethnicity nor psychological abuse predicted help-seeking from family. Older women (OR = .96, 0.99,  $p < 0.001$ ) were less likely to seek help from the family while women abused by husbands (OR = 1.32, 2.18,  $p < 0.0001$ ) and who experienced more severe abuse (OR = 1.02, 1.10;  $p < .01$ ) were more likely to seek help.

## Friends

Severity of physical abuse, stalking, sexual abuse and psychological abuse did not predict help-seeking from friends. Latinas (OR = 0.30, 0.81,  $p < 0.01$ ) were less likely to seek help from friends than White women. Among the covariates, more highly educated women (OR = 1.06, 1.31;  $p < 0.01$ ) were more likely and women abused by spouses (OR = 0.60, 0.97,  $p < .05$ ) were less likely to seek help from friends.

## Mental health professionals

African American women were less likely than White women to seek help from mental health providers (OR = 0.31, 0.74,  $p < 0.01$ ). Sexual abuse, stalking, and psychological abuse were unrelated to mental health help-seeking. Women who were older (OR = 1.02, 1.05,  $p < 0.0001$ ), abused by their husbands (OR = 1.03, 1.79,  $p < 0.05$ ), more highly educated (OR = 1.19, 1.50,  $p < 0.0001$ ) and experienced more severe abuse (OR = 1.04, 1.14,  $p = 0.0001$ ) were more likely to seek mental health help.

## Medical care provider

Only severity of physical abuse was related to increased likelihood of medical help-seeking (OR = 1.17, 1.32,  $p < 0.0001$ ).

## Police

Ethnicity predicted the likelihood of seeking help from police, with Latina (OR = 1.11, 2.69,  $p < 0.05$ ) and African American (OR = 1.61, 3.27,  $p < 0.0001$ ) women more likely to seek help than White women. Women who were stalked by their intimate partners (OR = 1.39, 2.76,  $p = 0.0001$ ) were also more likely to call the police. Women who experienced sexual abuse concomitant to physical abuse were less likely to seek the help of the police (OR = 0.28, 0.75,  $p < 0.01$ ). Severity of physical abuse was related to a greater likelihood of calling the police (OR = 1.17, 1.28,  $p < 0.0001$ ). Age, education, and relationship to the abuser were unrelated to police help-seeking.

## Order of Protection

Concomitant stalking (OR = 1.81, 3.77,  $p < .0001$ ) was associated with increased likelihood of seeking an OP over physical abuse alone. African American women were more likely to seek OPs than White women (OR = 1.23, 2.77,  $p < 0.01$ ). Sexual and psychological abuse did not predict the likelihood of seeking an OP. Women who were abused by their spouses (OR = 1.00, 1.95,  $p < 0.05$ ) and experienced more severe abuse (OR = 1.12, 1.25,  $p < 0.0001$ ) were more likely to seek OPs.



### Cumulative abuse

Of all seven help-seeking variables examined in this second set of regression analyses, only seeking an OP (OR = 1.056, 1.645;  $p < 0.05$ ) was significantly related to this sum-of-abuse variable.

## DISCUSSION

This study examined the contributions of concomitant abuse and victim ethnicity to the decisions of physically abused women regarding where to seek help. Notably, the majority of women (over two-thirds) in this sample sought formal and/or informal help and, as theorized by Gondolf (1988), women were more likely to seek help when experiencing more severe levels of physical abuse. These findings are consistent with the 1985 National Family Violence Survey (Straus & Gelles, 1986; Wauchope, 1988), in which 68% of severely abused women had sought help, and with several studies linking severity of abuse with increased help-seeking (Coker et al., 2000; Duterte et al., 2008; Macy et al., 2005).

### Concomitant Forms of Violence

With the exception of seeking an OP, the cumulative sum of abuses was unrelated to help-seeking, highlighting that it is not the overall amount of abuse experienced, but rather the specific types of concomitant abuses experienced that relate to help-seeking behaviors. Contrary to hypotheses, not all concomitant forms of violence related to increased helpseeking. Furthermore, the experience of certain forms of IPV related to overall tendencies to seek help, in contrast to particular help-seeking strategies, as had been hypothesized.

Women stalked by their physically abusive partners were more likely to seek help than women who experienced physical abuse in the absence of stalking. These findings differ from those of Logan et al. (2006), who did not find women who were stalked and physically abused to be more likely to seek help than women who were physically abused alone. However, as noted by Logan et al. (2006), the nature of their sample (women seeking protection orders against their partners) may have diminished the variability in help-seeking. Women who are stalked may not experience the same degree of shame or fear of blame as women who experience sexual abuse. Furthermore, given the often pervasive nature of stalking, the abuser may intrude into all aspects of the woman's life, making the abuse more difficult to keep hidden. Under these circumstances, women may be more willing to seek help.

Notably, concomitant sexual abuse predicted *lower* rates of help-seeking compared to physically abused women who did not experience sexual abuse. Sexual abuse may present several additional barriers to helpseeking, including shame that prevents women from disclosing the abuse, embarrassment over the details of the abuse, or fear of blame from others. Recent research indicates that women sexually abused by their partners are more likely than physically abused women to use disengagement coping styles, such as escapist fantasies and actions (Taft, Resick, Panuzio, Vogt, & Mechanic, 2007). This tendency to avoid the problem may result in a decreased likelihood of seeking help.

Our findings regarding concomitant psychological abuse and help-seeking are consistent with those of Dutton et al. (1999), who found that, although traumatic symptoms were mainly predicted by psychological abuse, help-seeking was largely predicted by physical abuse. It may be that women do not define psychological abuse as IPV, despite its ill effects, and are thus no more likely to seek help when experiencing this concomitant form of abuse. Another possible explanation is that behavioral measures of psychological abuse such as the one used in this study are not as highly correlated with help-seeking behavior as more subjective measures of abuse, such as the Women's Experience of Battering (Smith, Earp, & DeVellis, 1995).

## Ethnicity

Although there were no ethnic differences in the overall tendency to seek help for abuse, ethnicity was related to *specific* help-seeking behaviors. Latina women were equally likely to seek help from family, but less likely to seek help from friends, than White women. This finding is consistent with the Latino value, "La ropa sucia se lava en casa," meaning that one must keep family problems within the family. Latinas who subscribe to traditional Latino values will thus be less likely to discuss their abuse with non-family members for fear of bringing shame to their family. Previous research is divided regarding abused Latinas' utilization of informal support, with some studies finding Latinas less likely to seek help from friends and family (West et al., 1998) and others finding Latinas more likely to seek help from family than White women (Ingram, 2007). These discrepancies in the literature may be attributed to differences in acculturation levels across samples: West et al. (1998) found greater informal help-seeking among more highly acculturated Latinas, the most likely explanation for which is that Latinas who have recently immigrated may have fewer family members and friends nearby from whom they can seek help. Unfortunately, we were unable to explore this hypothesis due to lack of data about acculturation in this sample.

Consistent with previous findings (Hutchison & Hirschel, 1998; Pearlman et al., 2003; Rennison & Welchans, 2000; West et al., 1998), African American and Latina women were more likely to seek help from the police and African American women were also more likely to seek OPs than White women. These ethnic differences may in fact reflect socioeconomic differences. Weitzman (2000) reported that women of higher SES were reluctant to identify their experience as abuse, associating abuse with women of lower classes, and a result, were less likely to call the police. More educated women are also more likely to be dissatisfied with the lack of control they perceive when interacting police (Cattaneo, 2010), resulting in a decreased likelihood of calling the police again.

The interpretation that socioeconomic differences underlie African American and Latina women's increased likelihood of calling the police compared to White women is consistent with Cattaneo and DeLoveh (2008), who found a lower threshold of violence severity for calling the police among women with lower incomes. In fact, they found no racial differences in police help-seeking when SES was accounted for. Alternatively, previous research has indicated that African American men are more likely to be arrested for assault against African American intimate partners than White men who assault White partners

(Bachman & Coker, 1995). Women who believe their call will result in an arrest may be more likely to seek the help of the police.

White women's greater propensity for mental health help-seeking behaviors compared to African American women is also consistent with previous studies (Henning & Klesges, 2002; Hutchison & Hirschel, 1998) and may reflect a culturally-based disinclination to discuss problems with strangers, a perceived and/or genuine lack of culturally competent services (Liang et al., 2005), financial and geographic barriers, or distrust toward health care professionals (Gamble, 1997) among African Americans.

## Limitations

Several limitations of this study need to be acknowledged. This data was collected in 1995–1996 from women reporting on abuse that occurred an average of 12 years prior to the survey. The *Violence Against Women Act* passed in 1994, increasing public resources available to both prevent IPV and provide services to such victims. It is possible that abused women today would be more likely to seek help from domestic violence specific services and shelters. In fact, so few women chose this help-seeking strategy in the current study that we could not include it as a variable. It is also possible that, as a result of increased public education about IPV funded by the *Violence Against Women Act*, abused women today would be more likely to seek help overall.

A limitation common to secondary analyses of existing datasets is that the original survey was not designed with our particular questions in mind. For example, because the help-seeking questions referred to only the most recent incident of physical abuse, other analyses were precluded. Also due to the way data was collected, meaningful continuous measures of sexual abuse and stalking were not possible. Querying help-seeking related to all forms of abuse as well as all incidents of abuse would have been better suited to the purposes of this study. Furthermore, we were unable to determine whether the psychological abuse occurred before, during, or after the target incident of violence. Thus, although it is likely that the psychological abuse occurred prior to or concurrently with the physical abuse, the possibility that the physical and psychological abuse did not occur concomitantly cannot be ruled out as the reason for the lack of significant findings related to psychological abuse.

Sampling bias is another concern related to telephone surveys. Women who are poor, homeless, or institutionalized are likely to be excluded from these types of surveys as a result of not having a telephone. At the same time, these women are at greater risk for abuse and have fewer material resources with which to cope with abuse. Thus, this study does not include data from the population of abused women with perhaps the greatest need and whose help-seeking efforts likely differ from the women sampled by this survey.

As with all studies utilizing retrospective recall, this data may be subject to recall bias. Additionally, culturally diverse women were categorized into broad racial/ethnic groups and information on acculturative levels was unavailable, preventing an analysis of important and too-often-ignored within-groups differences. Controlling for socioeconomic status and the presence of children at the time of the abuse may have increased the validity of the results and allowed us to test the hypothesis that ethnic differences may be an artifact of differences

in SES. However, this data was not collected. We used educational level at the time of the survey as a proxy for SES at the time of the abuse. Finally, other sources of support, such as clergy, domestic violence services, and lawyers, were used at such low rates as to preclude analyses.

## Implications

This data sheds light on physically abused women's help-seeking behavior and, in doing so, raises important questions regarding how best to serve the needs of women who seek help, as well as how to outreach effectively to those who do not. With only a finite amount of resources, how can we best allocate these resources to ensure women's needs are met? The current findings indicate that women seeking help for physical abuse may be experiencing other forms of abuse concurrently, underscoring the importance of comprehensive screening for abuse by service providers. Screenings that include questions about all forms of IPV, including sexual abuse, stalking, and psychological abuse (Kothari & Rhodes, 2006), are likely to elicit more reliable responses. Providers should be aware of the multidimensional nature of the abuse their clients may be facing and obtain training to effectively treat the complex sequelae clients are likely to experience or be able to provide appropriate referrals. An important area of future research will be to identify and investigate best practices in the treatment of clients with co-occurring forms of abuse (Cattaneo et al., 2008).

These findings also suggest that building bridges between service providers to coordinate care may help women presenting for help in one setting obtain the range of services they need to help end the abuse. For example, given that ethnic minority women are more likely to seek legal remedies to the abuse than to seek help from mental health professionals, programs in legal venues that facilitate connections with mental health service providers might help these women access needed services that would otherwise not be utilized. Efforts to provide culturally competent mental health services and to reduce barriers to care for ethnic minority women are also important (Liang et al., 2005).

Educating the public that sexual assault among intimate partners exists, is illegal, and that the victim is not to blame, may increase the likelihood that women who are sexually abused by their intimate partners seek help. Also, given that abused women are more likely to seek help from friends and family than formal services, public education campaigns may help reduce negative reactions and improve the level of instrumental and emotional support provided by social networks of abused women. Increasing public awareness of the different forms of abuse that may occur in intimate relationships, the mental and physical health effects of IPV on women and their children, and what to do when someone close to you reveals they are in an abusive relationship may be especially helpful. Information could be disseminated in community gathering spots, such as churches, community groups, recreation facilities, adult education programs and beauty salons (Fraser, McNutt, Clark, Williams-Muhammed, & Lee, 2002).

In sum, although physical IPV has traditionally been the focus of research and service efforts, the experience of concomitant forms of violence are important influences on the help-seeking of physically abused women. The total context of abuse should be considered

in future research regarding help-seeking, as well as in the design of service outreach and delivery.

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## Biographies

Sharon M. Flicker, Ph.D., is a clinical psychologist and an assistant professor at the University of Maryland University College *Europe*. Her research program focuses on the intersection of culture, social relationships and mental health. Her recent research examines women's coping and helpseeking behaviors in response to intimate partner violence as well as the responses of others to women's disclosures of abuse. She is particularly interested in

ethnic differences in women's experiences of and responses to abuse and the factors that may influence these differences.

Dr. Cerulli is the Director of the Laboratory of Interpersonal Violence and Victimization, Associate Professor, with the Department of Psychiatry in the School of Medicine and Dentistry at the University of Rochester. NIMH awarded Dr. Cerulli a five-year grant to conduct a trial in Family Court to assess whether enhanced mental health enables intimate partner violence victims to better navigate safety. She is also Co-Principal Investigator on a NIJ award to assess whether victim participation in prosecution impacts their subsequent safety. She is a founding and current Board Member for the Crisis Nursery of Greater Rochester, Inc.

Xi Zhao, PhD, is currently at Boeringer Ingelheim Japan, providing support for data applications. Her post-doctoral study focused on statistical applications to mental health and IPV research, including intimate partner violence, women's sexual and physical abuse, risk behavior intervention and prevention of victimization and perpetration of violence.

Wan Tang, Ph. D., is Research Assistant Professor of Biostatistics at the University of Rochester. He has been working closely with investigators in psychiatry and other medical fields on a range of projects and grant submissions. His research interests focuses on semiparametric modeling of categorical and count responses for longitudinal studies, smoothing methods, and analysis of data with missing values.

Arthur Watts, B.S. is the lead programmer at the University of Rochester, Department of Biostatistics and Computational Biology. He assists the Neurology and Psychiatry departments with safety monitoring, analysis and data management of clinical research. His current research includes developing SAS procedures and macros to analyze and report on clinical databases.

Yinglin Xia, PhD, MS, is a Biostatistician (faculty) in the Department of Biostatistics and Computational Biology, University of Rochester, Rochester, NY. He holds a doctoral degree in philosophy from Sun Yat-sen University, Guangzhou, China and a master of science in Applied Statistics from the DePaul University, Chicago. His research interests include philosophy, sociology, psychology and mental health. He currently works as a biostatistician for several NIH, and other funded grants. He provides support for data analysis and management for a number of investigators in the behavior science and biomedical fields.

Nancy L. Talbot, PhD, is a clinical psychologist and associate professor of Psychiatry, University of Rochester School of Medicine and Dentistry. Her research is focused on treatments for women with chronic, complicated depression and trauma histories. Dr. Talbot is currently conducting a clinical trial of Interpersonal Psychotherapy for depressed women with sexual abuse histories in the community mental health center within the Department of Psychiatry.

**Table 1**

## Demographic Characteristics of the Sample

	% of sample (n)
Education	
Not completed HS	10.7% (188)
HS diploma	33.8% (594)
Some College	34.3% (602)
College degree	14.6% (256)
Postgraduate work	6.3% (111)
Employment Status	
Employed	65.6% (1151)
Unemployed	4.6% (81)
Retired	7.1% (124)
Student	4.9% (86)
Homemaker	13.4% (236)
Marital Status at Time of Interview	
Single	13.4% (236)
Married	51.2% (899)
Divorced/Separated	30.7% (539)
Widowed	4.4% (77)
Ethnicity	
White	75.3% (1323)
African American	11.3% (199)
Latina	7.6% (133)

**Table 2**  
Percentage of Women Who Sought Help by Ethnicity and Type of Abuse Experienced

	Any help	Family	Friends	Medical care	Mental health care	Police	Order of protection
White	964 (72.9%)	419 (31.7%)	434 (32.8%)	157 (11.9%)	369 (27.9%)	307 (23.2%)	196 (14.8%)
African American	143 (71.7%)	67 (33.7%)	60 (29.9%)	34 (16.9%)	29 (14.7%)	81 (40.8%)	45 (22.8%)
Latina	96 (72.1%)	46 (34.4%)	27 (20.5%)	12 (9.0%)	24 (18.0%)	46 (34.4%)	24 (18.0%)
Physical Abuse (no other forms of abuse)	713 (70.9%)	312 (31.0%)	309 (30.7%)	128 (11.6%)	232 (23.1%)	249 (24.8%)	134 (13.3%)
Stalking	176 (86.3%)	87 (42.7%)	77 (37.8%)	35 (17.2%)	74 (36.3%)	90 (44.1%)	73 (35.8%)
Sexual Abuse	178 (72.2%)	61 (24.8%)	71 (28.6%)	41 (16.5%)	67 (27.1%)	58 (23.3%)	39 (15.8%)
Psychological Abuse	294 (70.1%)	133 (31.6%)	124 (29.5%)	53 (12.6%)	115 (27.4%)	111 (26.5%)	68 (16.1%)
Entire sample	1268 (72.2%)	560 (31.9%)	541 (30.8%)	214 (12.2%)	450 (25.6%)	465 (26.5%)	281 (16.0%)

**Table 3**  
Odds of Help-seeking as a Function of Demographic and Abuse Characteristics: Logistic Regression Analyses

	Any Help		Family		Friends		Mental Health		Medical		Police		OP	
	OR	95% CI	OR	95% CI	OR	95% CI	OR	95% CI	OR	95% CI	OR	95% CI	OR	95% CI
Age at time of abuse	1.00	0.99–1.01	0.98**	0.97–1.00	1.00	0.99–1.01	1.03***	1.02–1.04	1.01	0.99–1.03	1.02***	1.01–1.03	1.00	0.99–1.02
Education	1.13*	1.03–1.24	1.05	0.96–1.15	1.20***	1.10–1.32	1.32***	1.19–1.47	1.04	0.91–1.19	0.97	0.88–1.07	0.91	0.80–1.04
Relationship with Abuser	1.46***	1.18–1.82	1.41**	1.14–1.73	0.87	0.71–1.07	1.86***	1.47–2.37	1.09	0.81–1.48	0.75*	0.60–0.93	2.15***	1.58–2.93
Ethnicity														
African-American v. White	0.96	0.70–1.32	1.09	0.81–1.48	0.70*	0.51–0.96	0.51**	0.34–0.77	1.50	1.00–2.25	2.09***	1.53–2.86	1.90**	1.28–2.82
Hispanic v. White	0.96	0.66–1.38	1.29	0.91–1.82	0.47***	0.30–0.71	0.70	0.44–1.11	0.93	0.53–1.63	1.50*	1.02–2.19	1.47	0.90–2.40
Hispanic v. African-American <sup>a</sup>	1.00	0.64–1.57	1.18	0.77–1.81	0.67	0.40–1.11	1.37	0.76–2.48	0.62	0.32–1.18	0.71	0.45–1.13	0.77	0.43–1.37
Severity of Physical Abuse	1.16***	1.13–1.21	1.08***	1.04–1.11	1.05***	1.01–1.09	1.08***	1.03–1.12	1.23***	1.17–1.30	1.24***	1.19–1.28	1.14***	1.08–1.20
Sexual Abuse	0.54**	0.37–0.78	0.51***	0.35–0.75	0.74	0.51–1.07	0.75	0.50–1.13	0.97	0.60–1.58	0.48***	0.32–0.73	0.63	0.38–1.05
Stalking	2.13***	1.43–3.17	1.59**	1.19–2.13	1.44*	1.07–1.93	1.57***	1.14–2.15	1.21	0.82–1.78	1.83***	1.35–2.49	3.19***	2.26–4.50
Psychological Abuse	1.02	0.95–1.09	1.00	0.94–1.06	1.02	0.96–1.08	1.04	0.97–1.10	1.05	0.97–1.13	0.98	0.92–1.04	1.07	1.00–1.15

Note. Odds Ratios and 95% Confidence Interval.

<sup>a</sup>These results come from an identical regression with African-American women used as the reference group.

\* p < 0.05.

\*\* p < 0.01.

\*\*\* p < 0.001