

ALTERNATIVES TO ASSAULT: THE UTILIZATION
OF EMERGENCY SHELTERS BY
IMMIGRANT WOMEN IN TORONTO

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I. INTRODUCTION

A B S T R A C T

The growing number of non-English speaking immigrant women who are seeking a refuge from violence in the home needs to be examined in terms of the specific problems experienced by these women in the Canadian context. This study has been undertaken to evaluate the social service delivery system which is oriented to meeting the needs of assaulted women for emergency shelter and support services in Metropolitan Toronto. Women Working with Immigrant Women, an organization of community agency workers, has perceived an urgent and growing need for support services that address the particular needs of immigrant women who are being assaulted and whose lives are in danger, but who are forced to continue to remain in situations of abuse. The tremendous shortage of shelters for battered women is one barrier which women from the immigrant community face when attempting to escape from assault in the home. At the same time, the existing shelters are not able to provide supports for the primarily non-English speaking, low income clientele in desperate need of help. This study is an examination of the needs of immigrant women who are assaulted in the home and an assessment of the gaps in the existing organization of support services. The objective is to identify the most efficient and practical alternatives for providing these services and to assess the practicality of an emergency shelter specifically organized for immigrant women.

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I. INTRODUCTION

The widespread and commonplace character of assault against women in the home has recently been documented by studies in England, the United States and Canada.¹ The Canadian Advisory Council on the Status of Women estimated that 1 in 10 Canadian women, who are married or live in common law, are beaten by the men they live with.² While the extent of violence against women in the family is shocking to many, even more surprising is the wall of silence amongst professionals which has countenanced this treatment of women. In Wife Battering in Canada: The Vicious Circle, McLeod and Cadieux document the legal, medical and counselling procedures which perpetuate a mythology concerning wife beating, while providing negligible assistance to the victims of assault.

In the last few years, some women have found immediate supports in the emergency shelters and counselling services that governments have funded in response to organized pressure by women's groups. At the present, these alternative services

¹Pizzey, Erin, Scream Quietly or the Neighbours Will Hear, Penguin Special, Toronto 1974; Strauss, M. A., Gelles, R., and Steinmetz, S. K., Behind Closed Doors: Violence in the American Family, Anchor Press/Doubleday, Garden City, New York, 1980; MacLeod, L. and Cadieux, A., Wife Battering In Canada: The Vicious Circle, Canadian Advisory Council on the Status of Women, Ottawa, 1980

²Fact Sheet #3, Wife Battering, Canadian Advisory Council on the Status of Women. This was estimated for 1978.

are overlooked and understaffed, which only underlines the need for a more substantial response from government. Based on the findings of the McLeod and Cadieux study, the House of Commons set up a committee to study family violence, with a particular emphasis on the abuse of women.³ However, while the problem of family violence is studied, the government must seriously consider the immediate needs of women who continue to experience assault in the home. In particular, low income, immigrant women are one of the groups most in need of emergency shelter services in Toronto, but least able to utilize the limited services available.

This report addresses the need for an expanded system of emergency shelters, with particular attention to the needs of the low income, immigrant women with little or no spoken English. There is a large population of women who remain in this group after entering Canada due to their "sponsored" or dependent status which is a condition of their immigration. Perhaps more than any other group of women, the low income immigrant suffers from the mythologies surrounding the assaulted or "battered" woman in the home.⁴ The professional beliefs which invalidate the seriousness of her situation are based on

³House of Commons Debate, (p.1), Vol. 24, No. 142, First Session, 32 Parliament; Friday, February 13, 1981

⁴'Assault' and 'battered' refer to the legal definition of "assault" in Section 244 of the Canada Criminal Code: any action or gesture which threatens, implies or inflicts violence against an individual; "battered" applies to common or more serious assault.

assumptions which are made about her both sexually and culturally.⁵ Our findings show that the legal, social and economic disadvantages of a "second class" status as dependent immigrants places these women at a further disadvantage when it is necessary to utilize the emergency shelter services. These shelters are not set up to accomodate these women linguistically, in terms of counselling support, or as a refuge from which to begin the process of re-settlement for themselves and their children. Without the specific resources required to allow her to function in an emergency shelter, most immigrant women are forced to return to the original assault situation, until other services such as those of the police or the hospital are necessary to use.

This study has been commissioned by the Mental Health Sub-Committee of Women Working with Immigrant Women, an umbrella organization of community agencies in Toronto. Women Working with Immigrant Women is concerned with the lack of services available to the battered immigrant woman and the reasons for this "gap" in services to the immigrant community. Women who have immigrated to Canada and find themselves victims of assault and sexual abuse in the home are a well known clientele in the community agencies which deal with the entire range of immigrant women's problems. Many of these women are fleeing in desperation, some from habitual beatings, rape and

⁵Bodnar, A. and Reimer, M., The Organization of Social Services and its Implication for the Mental Health of Immigrant Women in Toronto.

attempts on their lives and those of their children. As "dependents" upon immigrating, women with the "family class" status experience specific difficulties in attempting to utilize the services of a shelter, .e.g. legal, economic, social and linguistic. The "second class" status of immigrant women will be discussed in Chapter II.

While the proportion of non-Canadian born comprises 43% of the population in the City of Toronto, no provisions have been made for women whose situations differ from that of the non-immigrant who utilizes the shelters.⁶ In relation to the standard services, the non-English speaking woman in particular comes to be viewed as a difficult case with which to deal. In this study we examine the material situation of the low income immigrant woman which creates an extra workload for an already over-worked staff in an emergency shelter.

By examining the needs of women entering into the "re-settlement process" after initially immigrating, this report will attempt to address the problem of how to best bridge the present gaps in support services for immigrant women. Given the fiscal constraints on social services in the present period, recommendations will be made for the most efficient and economical alternatives to the present service

⁶Statistics Canada, 1971 Census figures for numbers of non-Canadian born by Metropolitan area indicates that the proportion for Metropolitan Toronto was approximately 34% while the Metropolitan Planning Department provided the figures for the City of Toronto, approximately 43.5% for 1971.

delivery systems, addressing the requirements of women with limited language, economic and social supports. Since the situation of assault in the home is shared by a range of immigrant groups, we will discuss the common problems shared by non-English speaking women and the common requirements for program delivery for a diversity of cultural groups. In considering what we are calling the "re-settlement process" for immigrant women this examination involves the services provided both by agencies administering settlement services to specified language and cultural groups, and the transition houses which provide emergency shelter and support services to women who are assaulted in the home. In Chapter III we discuss the requirements of the re-settlement process, including the "live-in" experience at a shelter for a woman and her children, as well as the many steps involved in re-establishing herself legally, financially, in terms of a job, housing, immigration status, etc.

METHOD OF INQUIRY

In attempting to investigate the breakdown in the social services delivery system for assaulted immigrant women, we have begun from the standpoint of the women themselves as an entry point for analysis. This has allowed us to address how the women define their options given the social and material constraints which they experience in Canada. It has further provided a view of the institutional processes surrounding entry into a shelter which is grounded in the

services.
concrete needs of these women.
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then By beginning from the standpoint of the immigrant woman we have also been able to examine the institutional views of assault in the home which arise within administrative and professional contexts. From the perspective of policy makers and funders it is often assumed that individuals naturally enjoy a given freedom of movement and capacity to act upon the options offered to them. When this is not the case, explanations are sought to account for why service is not accessible by attributing problems to external variables such as cultural values, personality disorders, etc. What the exploration of the lives of immigrant women and their particular experiences in emergency shelters makes visible is that individual freedom of movement and ability to choose simply does not exist for large portions of the population. Further, by comparing the specific needs of the client group to the organization of service delivery, we find that the appropriateness of social services can only be assessed in terms of the resources a group can bring to bear in attempting to utilize the available programs. Such resources might refer to language skills as well as to a familiarity with the use of emergency housing services outside the network of family and friends. Government policies directly affect the level of resources that a group has in seeking social services. This study examines the connection between government policy and the necessary resources immigrant women have to utilize social

the police

services. Government policies create a situation where immigrant women become a disadvantaged segment of the labour force and then do not acknowledge their disadvantage in the existing social service organization.

In order to ascertain the specific needs of immigrant women who had been assaulted in the home, we began by interviewing them. They related their experiences of assault as well as their perceptions of the assistance offered by the existing shelters and the community agencies. We were able to directly interview 16 women. Of these, 5 were referred to us by the Working Women Community Centre, which also provided translations. Accounts of two women's experiences were related to us by a community worker, because they were in the midst of the crisis. These seven women were of Spanish and Portuguese backgrounds. Another source of information was the YWCA Focus on Change program for sole support mothers. This group was comprised of 11 women from various backgrounds, including East and West Indian, South African, Antiguan, Latin American, Italian and Portuguese. They provided accounts of their experiences at home and at the shelters. The 16 women interviewed were mothers with children and were from low income, working class families, and had very limited resources available to them.

In addition to interviewing the workers at the shelters and the women who used the facilities, we interviewed twenty one workers at eighteen community agencies, four members of the police ethnic relations squad and one legal aid service

worker. All of these informants had some previous contact with battered immigrant women. We selected agencies that were most reflective of the immigrant population in Toronto, including the following: Arab, Chinese, Greek, Korean, East and West Indian, Italian, Latin American, Filipino, Portuguese and Spanish. Fifteen of the agencies were specifically established to provide settlement services to new immigrants in Toronto. The services these agencies provide include interpreting, translation, documentation, individual and family counselling, assistance in job searches (including job preparation, information on labour rights, etc.), legal assistance, English as a Second Language classes, and other services that an immigrant may require. The funding for these agencies is based on the premise that their services are for immigrants facing settlement difficulties in the first thirty six months of residency in Canada. However, community agencies acknowledged that a significant portion of the clientele includes those who have resided in Canada for over thirty six months. Two agencies interviewed, Family Services Association and Woodgreen Community Centre, were not established specifically for immigrants, but have services that are oriented to the needs of immigrants in Toronto.

In light of the anticipated problems in researching a potentially sensitive topic such as assault in the home, we decided to use the informal, unstructured interview, one with open ended questions. We found that by explaining the purpose and design of the study at the outset facilitated and

generated extensive discussions, particularly with community agency workers. When interviewing each woman, we spent some time establishing a rapport and providing a non-judgemental context. We interviewed women in a manner that encouraged at the shelter. These women were assured that the information they shared was to be held in the strictest of confidence and their identities to remain anonymous.

In order to avoid members of any one ethnic group feeling singled out, we assured the community workers that our purpose was not to focus on any one group but to explore service delivery from the perspective of the immigrant in Toronto. We emphasized that the information provided would be useful in assessing whether the existing shelters are meeting the specific needs of immigrant women. Further information on referral patterns between shelters and community agencies was also sought to establish a picture of how this communications network is functioning.

II. SEEKING ALTERNATIVES: THE SECOND CLASS STATUS OF IMMIGRANT WOMEN

The common explanation as to why immigrant women stay in assault situations generally constructs the problem in terms of the individual woman and her cultural background as the root of her continued oppression.⁷ A woman's inability to leave the situation in which she is assaulted is often considered to be due to "traditional" family values, and as

⁷ See Bodnar, A. and Reimer, M., op. cit., Chapter 2, "The Immigrant Woman in the Canadian Context".

her failure to "adapt" to Canadian culture. However, beginning from the standpoint of the immigrant woman reveals an array of institutional processes which place her in a "dependent" status upon immigration. From this second class status it becomes evident that the material, social and legal circumstances leave these women few real alternatives in a crisis situation.

The circumstances of her life in Canada will also affect a woman's experience if she enters an emergency shelter and will organize her needs differently in the re-settlement process. Given the resources which are immediately available to her, the provision of shelter services is both inadequate and inappropriate to her needs in a crisis. The services themselves become an additional barrier to escaping violence because they do not allow her to cope with the realities of her situation. Her dependent, second class status affects every step in the re-settlement process including her initial reasons for staying as long as she has with a man who batters her.

Lack of access to emergency shelter service is part of a larger problem low income immigrant's face in attempting to avail themselves to social services in Canada. Immigrant policies are geared to the needs of the labour force, so that groups which are destined to work in low skill, minimum wage sectors receive minimal or no English language training. One such group is immigrant women who work in the textile and garment industries, as domestics and cleaners in hotels and restaurants. Because

Employment and Immigration's rationale for English courses is to facilitate labour force entry, it is considered adequate for these women to work in these jobs regardless of their knowledge of their labour rights, their facility to communicate with co-workers and the rest of society, or the possibility for them to escape job ghettoization. The lack of language for low income women deepens their isolation and constitutes an additional barrier to finding alternatives in their lives. If a woman finds herself in an assault situation, it is unlikely that she will have access to the information that services are available or that she has the right to take advantage of these services. Even when a woman is able to discover what services are available, she will quickly find out that the existing services are not geared to her specific needs.

In an effort to meet the language needs of women, the community centres have mounted courses oriented to their life situations. However, women attending such course for four hours a week would take five years of uninterrupted attendance in order to receive the equivalent number of instructional hours that are provided in the full time, twenty-four week course. After an exhausting day at Manpower, the factory and the double burden of domestic labour, continuous attendance is highly improbable. The overall effects of government policies not only limit her mobility within the occupational structure, but reinforce her economic dependency on a man and neutralizes her possibilities for initiating changes in her life.

Many of the institutional processes which produce women's dependency upon a man also contribute to her social isolation and vulnerability to assault in the home. Women's dependency in the home is fundamentally produced as a product of government policies which ensure a supply of continuous and captive low skill female immigrant labour. Employment and Immigration policies ensure this outcome by defining her as a "dependent" immigrant which usually renders women ineligible to receive the English language allowance and job training benefits. In addition to being exploited as cheap labour, immigrant women are also discriminated against on the basis of their status in the family. The new regulations of the Ministry of Employment and Immigration totally eliminate language allowances for the married woman. Since her economic contribution is essential in a low income family, she must work at whatever work is available to her. Consequently, she will work in the lowest paying, most oppressive sectors of the labour force, where sexual harassment and unfair labour practices abound, e.g., as seamstresses, domestics, hotel cleaners, kitchen staff and as factory workers.

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Arnopoulous, Sheila, Problems of Immigrant Women in the Canadian Labour Force. Ottawa, Canadian Advisory Council on the Status of Women, 1979.

The social and linguistic isolation these women experience is part of the organization of home life as well, where a wife may alternate shifts with her husband in order to save on daycare costs. While many of the men learn English, most will control the money and have access to an independent social life which is not available to the women. Given her "double day" and the expectation that the household is her responsibility, her access to adult companionship is severely limited.

Under these circumstances, many of the usual tensions are operating upon the couple's stability. Usually the man is not accustomed to the woman's increased role in providing economic support and attempts to reassert his authority over her. The woman, on the other hand, is required to work a double day, to maintain a household on a limited budget, often with a lack of familiarity with Canadian methods of food preparation, household technology and neighborhood organization.⁹ When the man spends money on his own social life, the household budget is short and she is still expected to manage. His sporadic absences often create emotional

9 Ng, Roxana and Ramirez, Judith, Immigrant Housewives in Canada, a report sponsored by the Immigrant Women's Centre, Wintario, 1981.

conflict. Another source of tension results from a woman's inability to fulfill the requirements of proper "mothering" duties in relation to the school. With very little time and little command of the English language, she is disadvantaged in attempting to prepare children for the classroom, overseeing homework, instilling school "readiness" skills, etc.¹⁰

Epstein et. al. found in their study of domestic violence that cultural variables do not seem to relate significantly to violence in the family.¹¹ The Vancouver Women's Resource Centre reported a common experience of women who are battered to the Commons Committee on family violence:

battered women indicate their husbands often view themselves as supervisors of the household and require it to be run according to high standards rarely articulated until the women fail to meet them.¹²

While the immigrant woman also experiences "supervision" and is made to feel guilty for being unable to meet her husband's expectations, she faces the additional isolation and economic dependency which is most severe for the non-English speaking, low income sector of the labour force. Epstein et. al. have described this situation as an economic dependency

¹⁰Cassin, Marguerite and Griffith, Allison, "Producing the Difference that Counts". Paper presented to the Canadian Ethnology Association, Montreal, 1980. Also see special issue of Multiculturalism on women, 2(4) Summer 1979, Cassin, M. and Newton, J. (editors) for further illustrations of how social life is organized by Canadian institutions.

¹¹Epstein, Rachel; Ng, Roxana & Trebble, Maggi, "The Social Organization of Family Violence: An Ethnography of Immigrant Experience in Canada". A report to the Non-medical Use of Drugs Directorate, Health and Welfare Canada.

¹²"Power Cited as Motive for Abuse: Committee Hears Report on Why Men Beat Wives", Globe and Mail, February 19, 1982.

cycle, where the conditions of her arrival build in the confinement of her situation. They conclude that the high levels of assault women experience are a result of their extreme dependence on a man, and that this is more pronounced for recent arrivals to the country. For many women, however, their dependency continues for years after arriving.

One aspect of an assaulted woman who has a sponsored immigration contract is the legal control, or threat of, which a husband may wield as the sponsoring relative. Often women who stand up for themselves are threatened with deportation by their sponsoring husband or his relatives. Many come from countries where they lose custody rights over their children if they leave the man, and are unaware of their rights in Canada.¹³

Even if she is aware of the possibility of breaking the sponsoring agreement and keeping her children, she may still face insurmountable obstacles in becoming economically self-sufficient. A sponsored woman who is not currently working when she attempts to leave can face enormous difficulty if she doesn't line up a job immediately. This is because she doesn't qualify for welfare for the first ten years she is in the country --- even though she likely has worked both on and off the paid labour market, contributing to the taxbase as a wage earner directly, and indirectly by her labour in the home.

¹³An example of the lack of legal authority of women over children is in Chile, where the father has complete legal control. See "Women Suffer Under Chilean Divorce Laws", Globe and Mail, March 25, 1982

These institutionalized relations heighten the dependency a woman experiences, both socially and economically. While many, many women seek alternatives from health and social service professionals, the standard approaches tend to be blind to the institutional context of women's lives and provide no real alternatives.¹⁴ More seriously, these women are generally treated within the framework of the individual pathology model, which dampens her resolve to take action to improve her situation. This approach attributes her extreme isolation and dependency to her psychological make up as an individual failure to "adapt" to Canadian life. The onus is thus on her to change: she is then viewed as the problem.¹⁵ This view reinforces her guilt that she is to blame for an unsatisfactory performance in the home, for difficulties with the children, for failing to gratify the man.

When professionals using the individual pathology model deal with assaulted women, often the situation is viewed as "hopeless". The view of the woman as "traditional" tends to minimize the seriousness and thus the necessity to find alternatives to an oppressive situation. Doctors administer pills for her "nerves", police fail to lay assault charges believing husbands who say they were just having a little quarrel, and Family Court judges push for reconciliation when it is evident

¹⁴Bodnar, A. and Reimer, M., op. cit., Chapter 3, "Psychiatry and the Health Care System".

¹⁵Bodnar and Reimer, ibid. An alternative interpretation is that a particular culture is unusually oppressive to women, so the individual pathology focused on the man, who is then responsible for her isolation, etc.

that no bones have been broken. Those community agency professionals who still view women within this professional model also do not provide any real alternatives. It is only those community and health services which are cognizant of her problems that can begin to provide relevant services. For women who have decided to move out on their own, relevant services must interface with the concrete supports which are required throughout the period of re-settlement.

In the next section we will describe the re-settlement process as it applies to immigrant women. All of the shelter services, e.g. supportive counselling, intake procedures, information regarding her legal rights, entitlement to social welfare, etc., assume an understanding of the difficulties experienced by an assaulted woman. These include the trauma any woman experiences in attempting to leave a man (even if temporarily), the abuse she may have experienced and the stress of coping while re-establishing herself. Most women have to overcome the feeling that she is to blame for the treatment she received, as conventional wisdom has it, it is the responsibility of the wife to provide a stable homelife and satisfy the man. If he beats her, popular thinking goes, she must have fallen short in her performance in some way, and she is therefore at least partly responsible for the humiliating situation she is in. While she may be very well aware that this isn't the case, sympathetic support is often required, nonetheless, to overcome the process of self-blame. She needs to feel some

confidence, as well, that she is capable of taking over her life, especially with all of the barriers to establishing herself as a sole support mother.

And here is the "crunch" for the low income woman: she must begin to put her life back together by dealing with the specific restrictions of her "second class" status and with the limited resources which go with it. If an emergency shelter worker is not knowledgeable of how her status is organized institutionally, she will not be able to realistically address the steps which must be taken in the re-settlement process. In particular, she must overcome the extreme dependency on the man which is a component part of her situation and a structural aspect of the immigration experience. The powerless position in which this leaves a woman, who is usually responsible for raising her children, requires a different effort and degree of stamina should she take the risk of extreme destitution, isolation and possible retaliation against her. If a shelter worker is not knowledgeable of the woman's language and status as an immigrant, it will be very difficult to convey respect and understanding of her history of frustrating experiences on the job, in the home and in relation to a community of professionals who view her as conservative and traditional.

The professional views of immigrant women become the "commonsense" approach, particularly in settings where social

services are administratively organized around the needs of the "normal" client, with the "usual" problems.¹⁶ Rather than struggling with the seeming impossibility of surviving on so few resources and no one to help her, the immigrant woman may appear to be unwilling to strike out and brave the vagaries of life as do many Canadian born women in assault situations. What remains invisible is the differences which must be overcome if she is ever to do this. While it may appear that the ability to utilize an emergency shelter is primarily an individual choice, what happens in the shelter, whether the services are appropriate, plays a crucial role in determining if a woman has "choices" or whether her situation is "hopeless".

III EMERGENCY SHELTER SERVICES AND THE RE-SETTLEMENT PROCESS

Community workers who refer immigrant women to emergency shelters continuously receive feedback from women unable to utilize these services. They report that the services are not geared to their needs, they are isolated, and most return home after an unpleasant experience at the shelter. In this section we explore why immigrant women are not able to utilize these services.

For many women who decide to enter an emergency shelter their decision has been more than an immediate response to a beating: it has been a decision to leave permanently and to try

¹⁶Smith, Dorothy, E., "What the Statistics on Mental Illness Will Not Tell You About Women and Why", Smith, Dorothy and David, Sarah, editors, I'm Not Mad, I'm Angry, Women Look at Psychiatry, Press Gang editors, 1975, pages 76-113.

to make it on her own with her children. This leads us to consider how accessible these services are for a woman entering the re-settlement process. While we begin by describing the experience of this particular group of women, this can only be understood in the context of the overall picture of available shelters for all women throughout Metropolitan Toronto. While the situation is particularly desperate for the immigrant woman, she is in competition for limited spaces which many women are attempting to obtain. The statistics indicate that the demand far exceeds the supply of available beds. (Table I)

TABLE I: Number of Beds Available for Women and Children and the Proportion Accomodated in 6 Emergency Shelters in Metropolitan Toronto

<u>Shelter</u>	<u>No. Beds</u>	<u>Available to Women and Children</u>	<u>Requests</u>	<u>1980 Accom.</u>	<u>Not Accom.</u>
Nellies	29	29			
Stop 86	25	25			
Women's Habitat	25	25	2300	518 (23%)	1782 (77%)
Interval House	22	22			
Women in Transition	18	18	1579	213 (13%)	1366 (87%)
Family Residence	135*		2300	1001* (45%)	1203 (55%)
Totals	254	119 (47%)			

*Family Residence figures include accomodations for families in housing crisis as well as people in a de-toxification program. The number of assaulted women is unknown, and no beds are guaranteed to be made available to women in crisis.

From the available statistics on demand versus supply, it is evident that the overwhelming majority of battered women in crisis are refused emergency shelter in Metropolitan Toronto. And this trend is increasing, if the increase of 735 more women turned away from Women's Habitat in 1980, is indicative. All of the staff interviewed indicated that there is an extreme shortage of beds which can only be met by greater funding for shelters. The above figures moreover, do not account for the overall numbers of women needing shelter spaces, in that they do not include those who were referred but did not make contact, for whatever reason, with the shelter. Nor does this include women in crisis who are unaware of the shelter's existence, e.g. due to language, isolation, etc.

It should also be pointed out that of the six shelters studied, only four accommodated women and their children. Nellies and Stop 86 would only accept women with children in emergencies. These shelters provide short term emergency housing, ranging from two to six weeks, for women in crisis.

While no statistics have been compiled on the number of immigrant women utilizing shelters, Women Working with Immigrant Women is concerned that their clients would not register in the statistics because, in most cases, they do not consider the shelters to be a feasible option. On many occasions the option of using an emergency shelter is not acknowledged by police officers who have initial contact with an assaulted woman. As stated by members of the Police Ethnic

Relations Squad, they do not consider the services of the existing shelter to be accessible to non-English speaking women. When severe beatings have occurred, they would simply take the woman to the hospital. Otherwise, their solution is to encourage the couple to "make up" and solve the problem themselves. This emphasis on re-conciliation of the couple ignores the fact that the woman has been assaulted and that the severity of beatings increases with time and that her life is in potential danger. This lack of referral occurs with other social agencies (i.e. social worker, doctors, community workers, welfare workers) as it is assumed that the woman will eventually return home anyway. *

From interviews with various referral agents, community workers and shelter staff, a number of "gaps" in service can be identified in the service network which relate to the underutilization of shelters by immigrants. The overall shortage of available beds in Toronto affects all assaulted women seeking emergency shelter. However, upon entering a shelter the basic requirements for the non-English speaking woman are less likely to be met, so that she may choose or even be encouraged to leave when the staff are unable to meet the needs of an overload population. This "bottleneck" in service proves unworkable given the trauma the women are experiencing, the pressure to provide a suitable living space for their children, and the many demands of the re-settlement

* Canadian murder data from 1961-74 show that 60% of all female homicide victims are killed within a family context. (Wife Assault in Canada - A factsheet produced by Support Services for Assaulted Women, Toronto, April 1980)

process. As a result, it is typical for the immigrant woman to give up and return home after two or three days in a shelter. Moreover, many women refuse to consider the shelter, or do not follow up on a referral, because they have heard friends report that they were extremely dissatisfied with what happened to them when they went.

An example case was that of Margaret, a Spanish speaking woman, who entered a shelter after a severe beating which led her to fear for her life. She was not aware of the interpreting and support services provided by the community agencies, but was able to have a friend present to translate during the intake procedure. She told of her difficulties participating in the cooperative work routine of the shelter when she did not speak or understand English. Not only was it difficult to cook in the Canadian manner (and get her children to eat the food), but she was shunned by the other women when she failed to perform chores when she was expected to do them. With no one to speak to in Spanish, she kept to herself and tried to manage her two boys, six and eight. Her husband had threatened to take the boys away from her if she left him, she didn't qualify for welfare as a sponsored immigrant, and these pressures were weighing heavily on her mind. The supportive counselling normally provided at the shelter was not forthcoming, however, so she was not even able to discuss her experience when she badly needed support. Nonetheless, she began the process of re-establishing herself by seeking legal aid for a divorce, making an application for Ontario

housing and was able to find a job cleaning offices that would be available within a month. She also had to arrange to see a specialist as she required corrective surgery resulting from her last beating.

While Margaret was informed during the intake procedure that her stay could last six weeks, after two weeks she was told to pack her bags and go. An agency worker later found out that she was viewed as "uncooperative" by the staff and other women, and as not disciplining her children sufficiently. Put out on the street after a trying two weeks of coping without English, desperate for an income and pressured by her husband to come back, it was too much for her to continue on her own without shelter. While leaving home after three years of beatings was traumatic enough, the shelter experience was also very negative for her. At any rate, she had no job, no welfare, no income --- really, she had no choice.

This example illustrates many of the factors which disorganize the re-settlement process for a woman when the shelter has not been set up to deal with an immigrant clientele. The most obvious problem is that without bilingual staff, the services of the shelter are simply not provided to a woman with little or no English. These include crisis intervention, informal counselling, support services, information and lay advocacy while a woman is in residence. Stop 86 also supplies medical counselling, including information on birth control and venereal disease, and Women's Habitat has an ex-resident

group which provides supportive counselling on an ongoing basis.

While some language groups are represented on the shelter staffs, most are not. Further, a woman cannot be guaranteed that a bed will be available in a shelter where her language is spoken. (See Table II)

TABLE II: LANGUAGES SPOKEN BY STAFF OTHER THAN ENGLISH

Nellies	German, Estonian, French, Spanish
Stop 86	---
Women's Habitat	French, Yugoslavian
Interval House	French, Spanish
Women in Transition	---
Family Residence	French (counselling staff); Dutch, Italian, Armenian (kitchen staff)

As Table II indicates, not even the major ethnic groups in Toronto could count on receiving support services in their languages, e.g. Portuguese, Italian, Chinese, Greek. While some residents of the shelters have received backup supports from community agencies, providing this interface of services creates an additional burden for an already overworked shelter staff. The community agencies which deal closely with immigrant women are also understaffed so that the support service interface is non-existent for most women in need. The shortage of funding for all of these services impacts most severely on the success of the already disadvantaged to utilize shelter services. For entering a shelter does not simply involve

the provision of a bed and a roof over your head. At the very least, for an assaulted woman, this must include some crisis intervention to deal with the trauma she has experienced, a reasonably supportive environment which will not involve what would be perceived as further psychological abuse, as well as the information and guidance to initiate the re-settlement process.

First and foremost this requires staff who are either bilingual in the major languages spoken in Toronto, or adequate staffing to utilize interpreting services and community agencies. Without the possibility of communicating, a woman is isolated at a time when she requires support and someone with whom to discuss what she is experiencing. If she believes she is in danger of deportation, of losing custody of her children, and is totally dependent on her sponsorship contract, she needs explanations in her language from trained staff who are aware of the options available to a woman in this situation. This legal information could be crucial to women from countries which place a woman and children under the total authority of the husband. If she believes she is not going to be capable of living on her own, either legally or economically, she may feel that it would be better to return home while the husband is still rational, and hasn't taken action against her with the immigration authorities or tried to take the children away from her.

Secondly, a shelter needs to be organized in such a way as to allow a woman to function as an adult while staying there. Just as it is usually a humiliating experience to go on welfare for many people, so is seeking refuge as a beaten wife, given the common assumption that each of us is individually responsible for what happens to us (or, you get what you deserve in life). The trauma is magnified for the non-English speaking woman who is not able to function independently in an English speaking culture and is forced into a role akin to that of a child, being incompetent in the spoken and written language of the dominant culture. If the shelter work organization, food preparation and social interactions are all geared to customs familiar only to English speaking people, she is required to perform in a foreign medium, without translation, at a time when she has been emotionally and physically traumatized. The helpless, childlike position which she must endure might not be unbearable in itself; however, the knowledge that she is "different", isolated from the other women, and the hostilities which arise around her inadequately functioning in that setting quite often make the situation an untenable one for her. For she may also feel guilty that her children are not eating properly, are unable to attend their regular school, and are unhappy in the shelter. Trying to manage them, pressured to go back to the husband, arrangements for a job, housing, legal aid, her sponsorship contract, an assault charge, etc., while facing conflict over her ability to co-exist with the other

women --- all of these pressures may be enough to wear down her resolve to find a better life for herself and her children.

And finally, while she is, nonetheless, trying to make the best of a bad situation, what many of these women have entered into by leaving home, is a gamble --- that in the space of a couple of weeks, she can gather together enough material resources to survive with her children. If the supports are not available to help her do that, i.e., informational, legal, financial and social, she will fail to acquire enough income, promise of shelter and social support in the very limited amount of time she is allowed in the shelter. The very practical requirements of resettlement must be fulfilled by the network of shelters and community agencies or she has no alternatives to assault.

In our examination of service delivery to immigrant women, we found a "patch work" approach to these women's requirements by the shelters and community agencies: some women received some of the services available, some very few, and others received none at all. While the most obvious problem is the sheer lack of adequate funding for emergency shelters, the mal-functioning of the referral networks between shelters, community agencies and the social services goes a long way to explain why the low income, immigrant woman is unable to escape assault in the home. This raises a more basic question regarding the provision of service to immigrant women. Given the large proportion of immigrant

women in the City of Toronto, that is, 43% of the female, population, are these women not being shortchanged by the lack of a centrally organized shelter oriented to their needs? Below we consider some of the points at which the referral, interpretation and support services network is breaking down for the assaulted immigrant woman.

In most cases, shelter workers conducting intake and counselling do not speak a second language. Shelter workers indicated that they relied on the community agencies for interpreter services. However, the large majority of community agency workers claimed that they were not frequently called upon. Of the seventeen agencies interviewed, only five were called upon for interpreting by the shelters. The shelters most commonly called the following agencies for interpretation: Family Services Association, Costi, the Immigrant Women's Centre and City Hall Interpretation Service. Far from being a standard procedure to obtain these services, it was indicated that in some cases the agencies are contacted only at the insistence of the woman involved.

While a community agency is usually contacted if a request is made, the availability of an interpreter largely depends upon her workload at the agency. While the shelter and community workers are making a genuine effort to provide service under these circumstances, there is usually a delay before assistance actually arrives. This may result from the distance between the community agency and the shelter, as

well as the commitments of the agency worker.

This "patch-work" approach to the non-English speaking woman could worsen her trauma and intensify her feelings of isolation at a time when she needs empathy and support. Thus we see how the inability of the shelters to provide skilled bilingual staff begins to disorganize the shelter experience and prevents her from preparing as quickly as possible for the practical steps of re-settlement. When the community agencies are able to handle the case of a woman in a shelter a whole range of services are provided over and above interpreting: accompanying the woman to a welfare office, lawyers and doctors offices, to court; assisting her in seeking housing, daycare and English as a Second Language classes if she is eligible; providing counselling; arranging for Manpower training courses if she qualifies; assisting in the enrolment of her children at a nearby school.

Another way in which interpreting is done at the shelters is to call on a resident, for example, who speaks a similar language and had some knowledge of English, to be the interpreter. One instance provided was that of a resident who spoke Spanish, who would be asked to attempt to interpret for Italian or Portuguese residents. This approach to lay interpretation frequently led to further problems. Shelter and community workers revealed that the reliance on a lay interpreter --- especially a resident, also a victim of abuse --- affected the delivery of service from the counsellor to the

resident. Being in a crisis situation does not allow for an accurate assessment, especially if parts of the translation are merely guesswork. Thus we see that the language barrier results in an inferior quality of counselling, if in fact any counselling is achieved whatsoever. According to the community workers, this lay interpreter approach was also a source of friction between residents, and one of the factors which then contributed to the isolation of a woman from the activity within the shelter.

Although the needs of the immigrant woman are acknowledged by some of the shelter workshops, we found that they are generally not met. The shelters are unable to meet these needs primarily because of insufficient funds, staff overload and few resources. At the same time, the organization of service delivery is fundamentally oriented to an English speaking clientele, and one which has a different range of needs to fulfill than the battered immigrant woman. Given that she is the least vocal and least able to press for relevant social services, it is no surprise that a "patchwork" approach would be taken to her when the shortage of services is so pronounced. However, what is evident to the workers at the community agencies is that the basic requirements for emergency shelter are being denied to a major portion of the population in Toronto. Rather than approaching these women as an afterthought, services could be organized with possibly half of the potential clientele in mind.

Most of the twenty community workers interviewed had been in contact with immigrant women who were assaulted in the home. Of the agencies interviewed, 61% referred women to the existing shelters on the basis of whatever space is available. Agency workers seemed to prefer Women's Habitat, Women in Transition, Interval House and Family Residence. Most of the workers indicated that the choice of shelters was primarily dependent on space, secondly on whether the shelter accommodated women and children, and thirdly on the responses of clients who had previously been referred. The exact number of women who stayed at the hostel to which they were referred could not be determined due to inadequate statistics; nor do the agencies maintain records on the rate of abused clients referred to a shelter.

Forty per cent of the community agencies indicated that they receive relatively few requests for assistance from assaulted women. This is a significant proportion of the agencies in Toronto devoted to assisting immigrants with settlement problems and indicates an important point at which the services network is not functioning for the immigrant woman. One worker explained that his agency had few requests from battered women because they placed a priority on settlement problems, and because women expect to be blamed for their problems and persuaded to reconcile should they involve a community agency. The result is that women go directly to a shelter or a hospital rather than utilizing the services

of the community agency. While it is probably true that such agencies are not organized to deal with the problems women encounter in Canada, many of these same women will bring their requests for assistance to agencies where they feel more assured of receiving some kind of support, in a non-judgemental fashion, and where there has been a history of satisfactory service for women in a range of problematic situations.

As indicated earlier, shelters do utilize the interpretation services of community agencies, however, the community network is vastly underutilized. Of 18 agencies, 28% indicated that they were called to assist with interpreting and translation. The agencies most often called were Italian, Spanish, Portuguese and Korean. However, 56% of these agencies do not receive any requests whatsoever, for assistance from the emergency shelters.

While the shelters claim that they relied heavily upon the community agencies for interpretation, the agency workers stated that they were not called upon very often. Those that did assist usually interpreted during the intake procedure. The agency workers repeatedly stated that in most cases the interpretation lasted as long as the intake procedure, and that after that a woman was without the possibility of expressing herself. Agency workers suggested that providing interpreting-translation during the intake procedure is of no real consequence to her stay at the shelter, as she requires quality counselling, she needs to

interact with other residents, and to break down the isolation which can be rather severe for a non-English speaking woman. Like everyone at the shelter, they emphasized that these women require the empathy and support that would normally be extended to English speaking residents, and a sense of 'belonging'.

CONCLUSIONS

The low income, immigrant woman is doubly disadvantaged if she is one of the growing numbers of women who are battered in the home. Her second class status at immigration locks her into an economic dependency cycle with the men who physically assault her. Within this location she is even less well placed than her Canadian born counterpart to achieve economic independence, social integration and language skills so essential to the recognition of ones rights as an individual. In accordance with her previous contacts with Canadian institutions, she discovers that emergency shelters are also organized to ignore her basic needs for the most minimal social supports.

As a "problem" immigrant women are most typically discussed by professionals who lament the misfortunes which beset women in traditional cultures. However, when a picture is constructed which begins with the practical dimensions involved in obtaining services, these women appear as modern thinking, rational, responsible adults with one of the social or material supports to do what is needed to improve their

situations, when it is most needed. The dilemma of the assaulted immigrant women raises the question of just how service delivery is to be rationalized to make it possible for them to utilize emergency shelters if they choose.

In order for an emergency shelter to be accessible, a centralized shelter for immigrant women which provided many of the same services as the community agencies would appear to be ideal. A shelter which was staffed entirely by bilingual workers familiar with the provision of settlement services would eliminate many of the service "gaps" which result from the need to bring the interpretation services to the shelters. If non-English speaking women from different groups were under the same roof, there would be less likelihood that women would enter the shelter and feel ostracized by the other women. The non-English speaking woman could feel more integrated in the sense that "everyone is in the same boat" if she is not entirely familiar with the Canadian customs, or still struggling to speak English. From the women's point of view, this would provide a more genuine basis of shared experience, upon which to integrate with other women, start to make new friends and build supports. This process was illustrated in the German documentary on wife battery, "The Power of Men Is the Patience of Women", where women who were going through the same experience in the shelter were able to help one another through the maze of social services, to find contacts on the job market and to

set up cooperative living arrangements.¹⁷

From the expressed concerns of the community agency workers, a number of objectives would be met by having a shelter which is specifically organized to serve an immigrant clientele. Workers were concerned to be able to refer their clients to a shelter where they will not feel psychologically abused, linguistically isolated, and eventually defeated when they have not established themselves on their own. It would also appear logical to locate the interpreting and counselling resource people directly in the shelters so as to avoid totally duplicating the shelter services by an overloaded community agency worker. Not only does it appear that women are being shortchanged in the provision of social services to the workers who are also members of Toronto's ethnic communities, but it is the community workers who must witness over and over again the pain and desperation experienced by assaulted women. Not only does this place a burden on their own caseloads, but invariably such a woman is trapped within the revolving door of the social service maze, being passed from police to hospital to social agency, to doctor, to psychiatrist and back ... with no real alternative to assault.

¹⁷"The Power of Men is the Patience of Women": German film documentary, 1981

IV RECOMMENDATIONS

While recognizing that there is an overall shortage of emergency shelter spaces in Metropolitan Toronto, the following recommendations focus on the needs of a significant group which is grossly underserved by the kind of services currently available. These are based upon the finds of this report that non-English speaking women who are extremely socially isolated and experiencing assault in the home are further alienated when placed in a primarily English speaking setting. For this reason, the existing shelter services are practicably inaccessible to large portions of the immigrant community.

An all immigrant woman emergency shelter is proposed as the most efficient and economical alternative to the existing services. This service would be devoted to the requirements of women with limited language, economic and social supports. The concept of an all immigrant women's shelter is to provide collective supports for non-English speaking women from all ethnic groups. By entering a shelter where women are facing similar difficulties and share similar resources, a woman is more likely to achieve real integration with other adults, and is less likely to feel that she is treated as a "social incompetent" by other women.

RECOMMENDATION I

- A. That an Advisory Task Force be assembled as soon as possible to initiate the organization of an all immigrant women's emergency

shelter. This Advisory Task Force would include representatives from the community agencies which are working with assaulted immigrant women.

- B. That an all immigrant women shelter would be organized to meet the particular needs of non-English speaking immigrant women. This would require a bi-lingual staff, fluent in the languages of the major ethnic groups where a need has been indicated, i.e., Chinese, Greek, Italian, Portuguese, Spanish speaking; allocation of funding and staff time would be provided for interpretation in other languages.
- C. Staff would have cross cultural training and skills, and knowledge of the special needs of immigrant women.
- D. In addition to providing emergency shelter for women and their children, direct services would include individual counselling as well as programs in the following areas:
 - 1) Bi-lingual English as a Second Language classes for women in the shelter, for those preparing to enter the shelter, and for those who have stayed in the shelter in order to acquire the necessary skills to establish themselves economically and socially. These classes would be specifically oriented to the situations and practical circumstances of these women's lives.
 - 2) In addition to individual counselling, ongoing support groups for assaulted immigrant women would be provided for the above specified groups (D.1). These group sessions would have two purposes: one would be to provide a setting for information exchange and sharing in the areas of jobs, housing, daycare, education and training options, legal rights, health information and survival skills. The second would be to provide collective support for the women to examine their lives and to begin to find concrete solutions to their

situations and to consider the consequences of these decisions. This may include cooperative efforts at finding joint accommodations, child care and employment opportunities which the support groups would facilitate.

RECOMMENDATION II

That government funds be made available immediately for the provision of an all immigrant women's emergency shelter. This would include the physical accommodation, staff, programs and operating expenses for at least 50 women and children.

RECOMMENDATION III

That the City of Toronto Mayor's Task Force on Housing and other relevant municipal and provincial bodies include within their priorities a commitment to the emergency housing needs of immigrant women.

RECOMMENDATION IV

That existing shelters recognize the needs of immigrant women by initiating cross cultural training for their staff and by hiring by-lingual workers.

RECOMMENDATION V

That an effective communications-referral network be developed among immigrant women community centres, existing shelters and the proposed all immigrant women shelter.

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APPENDIX IINTERVIEW SCHEDULE FOR SHELTERSA QUESTIONNAIRE GUIDE:A. GENERAL INFORMATION

1. Name of Agency:
2. How many beds do you have?
3. What other services are offered besides the provision of beds?
4. What is the length of stay; policies regarding stay.

B. TARGET POPULATION

1. In the past year how many requests for accommodation did you receive?
2. How many clients needed emergency housing for:
abuse
other
3. Were you able to accommodate all those requesting shelter? How many were you unable to accommodate?
4. Is it possible to get a breakdown of clients who come here?
immigrants -
non-immigrants -
5. What are the procedures when relating to battered immigrant women?

APPENDIX I continued:

C. REFERRAL PATTERNS

1. How do your clients come to your shelter, referred by whom?
2. Do you work closely with the police, medical and legal professions?
3. Do the police refer many women to you?
4. Do you consider the police to be effective when relating to the battered women? Particularly to the battered immigrant women?

Elaborate.

D. STAFF PERCEPTIONS

1. Are there any staff members that speak a language other than English? If yes what are they?
2. What other language(s) would you like to see represented?
3. Are materials (brochures, procedures, etc.) available in other languages?
4. In the hiring of staff is there a conscious decision to meet the needs of immigrant women?
5. What arrangements are made if no one in the shelter speaks a language needed to communicate with a client?
6. What do you think are the problems battered immigrant women face?
7. How and who explains to them what the expectations are?
8. How do immigrant women respond to the tasks?

APPENDIX I continued:

9. Do immigrant women stay as long as the English speaking women?
10. What may influence them to leave?
11. Is this an issue identified in the shelter, is this issue discussed in the staff meetings?
12. What kinds of issues are discussed around immigrant women?
13. What are the other agencies, services that you might contact in the community to provide needs of the battered immigrant women?
14. How long is the average stay of an immigrant woman as opposed to an English speaking woman?
15. If all things were possible what would be most helpful in the operation of your hostel?
16. From your own experiences do you think that there is a need for a separate shelter for immigrant women? Why?

E. BEHAVIOURAL PATTERNS

1. What are immigrant women expected to do in the shelter?
2. Is there any interaction between immigrant women and other residents?
3. With whom do the immigrant women interact in the shelter?
- 4a) Have you encountered instances of friction between immigrant women and other residents?
 - b) If yes, in your opinion what was the cause of the friction?

APPENDIX IIINTERVIEW SCHEDULE FOR COMMUNITY AGENCIESA QUESTIONNAIRE GUIDE:A. GENERAL INFORMATION

1. Name of Agency.
2. What is the mandate of the agency? Policies of the centre?

B. TARGET POPULATION

1. Can you give me a description of the centre's client group, i.e. who are the users of the centre?
2. Does your client group consist of those women who were abused by their husbands?
3. Is wife abuse an issue concerning your centre?
Is it discussed among the staff or at staff meetings?
4. What is the procedure for meeting the needs of battered immigrant women?

C. REFERRAL PATTERNS

- 1a) Do you do any referrals to hostels?
b) Of those you referred, how many actually go?
Why or why not?
2. Is the woman accompanied when she goes to the hostel?
3. Do you feel hostels meet the needs of those women?
Why or why not?
4. What do the clients tell you about their experiences at the hostels?

APPENDIX II continued:

5. Do you receive calls from hostels? (any statistics and names)
6. In what situation do you receive calls?
(wife abuse, interpreting)
7. Are any women referred from hostels here, if so why?
From which hostels?

C. STAFF PERCEPTION

1. Are some hostels better than others, specify?
2. If all things were possible what would you like to see occur in terms of emergency shelters for women?
3. From your experiences would you say that there is a need for a shelter for immigrant women? Why or Why not?
4. Can you elaborate on what those needs may be (of immigrant women).