



SCARS ON THE HEART:

Barriers to Safety for Survivors of Domestic Violence



HAWAI'I STATE
COALITION AGAINST
DOMESTIC VIOLENCE



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The Hawai'i State Coalition Against Domestic Violence, with generous financial support from the Hawai'i State Department of Health and Women's Fund of Hawai'i, presents a report documenting the scope and characteristics of domestic violence within the state of Hawai'i. This research is intended to bring awareness to the high rate of intimate partner violence (IPV) across Hawai'i and shed light on the many barriers survivors face that prevent them from seeking and obtaining safety for themselves and their families. Hawai'i State Coalition Against Domestic Violence wishes to express a heartfelt mahalo to all the survivors who courageously participated in the survey and in-depth research interviews that informed this report.

We hope the information shared in this report, while sobering, will inspire and guide action among policymakers, stakeholders, businesses, and the community to identify impactful solutions and funding to help survivors seeking justice and safety.

Methodology

This research was conducted by Anthology Research, a FINN Partners Company, in two phases. The first phase consisted of a quantitative study to examine and document the incidence of IPV, as well as the attitudes, perceptions, and behaviors of Hawai'i residents as they pertain to domestic violence. The second research phase was a qualitative study consisting of a series of one-on-one interviews with survivors of IPV to further explore the key findings from the quantitative survey.



Quantitative Survey: A total of 722 residents 18 years of age or older were interviewed in this study. Fieldwork began on July 27, 2022, and was completed on August 29, 2022. The random online sample was purchased from a third-party sample provider and supplemented with Anthology Research's proprietary consumer panel of Hawai'i residents who opted in to participate in research studies.

The margin of error for a sample of this size ($n=722$) is ± 3.65 percentage points with a 95% confidence level. This margin of error refers to the overall 722 sample and not to subsets of the sample. The overall data were weighted to reflect population estimates of adults by primary ethnicity.

Qualitative Research: Ten (10) in-depth research interviews in total were conducted between July 10, 2023, and August 1, 2023. The interviews were conducted through videoconferencing software. Each session was recorded for transcription and documentation purposes. Subsequently, any identifying information was redacted from each transcript to ensure participant anonymity. Each participant was given a gratuity as a thank-you for their participation.

Terminology

This report deliberately uses the term survivor instead of victim whenever possible. The terms victim and survivor are often used interchangeably to refer to someone who was subjected to a crime, in this case, domestic violence. In legal settings, victim is often used but in the domestic violence movement, survivor is used as a term of empowerment, and a reminder that each day of surviving an abusive relationship is no small feat. The term survivor used throughout this report can include those who are no longer experiencing intimate partner violence but also those who are still experiencing intimate partner violence.

EXECUTIVE SUMMARY

“The kids keep me standing right now, it’s because of them. I have friends that support me, my family is supporting me [in] this situation, but no one can understand how I have a scar on my heart. But I’m slowly, [...] looking for my life to start again.”



Too often, the overly simplistic question asked of domestic violence survivors is, “*Why don’t you just leave?*” However, the question that should be asked is, “*What are the barriers that prevent you from living a life free from violence?*” This study shows that domestic violence is a prevalent issue in Hawai‘i and survivors face complex barriers to seeking safety. Furthermore, seeking safety can result in drastic disruptions in their lives and the lives of their children, as well as economic consequences including impoverishment.

Domestic violence is a prevalent issue in Hawai‘i’s communities. Eighteen percent of adult residents share that they have experienced physical violence or intimidation from an intimate partner and 1-in-5 residents (20%) are survivors of coercive control or isolation. The COVID-19 pandemic only exacerbated this issue for some with over 1-in-4 survivors (28%) saying the abuse worsened during this period. These sobering figures suggest that thousands across the state are currently experiencing physical, emotional, or financial abuse and require support to access safety.

While domestic violence survivors come from a wide range of backgrounds, some demographic groups show a higher incidence of IPV. These groups include younger adults, those of Native Hawaiian or Filipino descent, and those living in larger households. Drawing comparisons between vulnerable populations, this research helps identify specific groups that should be considered when conducting additional outreach and developing resources. For example, those living in West O‘ahu are more likely to be survivors but have less access to support than those living in urban areas of the island.

IPV survivors share that waitlists for services are too long, that they did not have the financial means to seek out the help they needed, or their income exceeded a threshold and, therefore, they were disqualified from receiving services. Those participating in the qualitative interviews shared the need for services, such as legal support for child custody cases, housing assistance, childcare to allow a transition into the workforce, support for higher education, and recovery therapy.

From understanding the profiles of IPV survivors in the quantitative research to exploring survivors’ specific needs through qualitative interviews, it is clear that survivors of IPV have complex needs that require a trauma-informed community response. While existing services have helped change the lives of many survivors, there are still many out there who are either unaware of the resources available to them or cannot find the services to fit their unique needs. Exploring the results of this study is crucial to identifying those who need help and providing solutions to address the staggering number of domestic violence survivors across the state. The long-term economic, public health and safety impacts on the community are undeniable, making it more important than ever to hold those who cause harm accountable for their actions.

Survivors of IPV often experience many forms of trauma and oppressions that include racism, colonialism, and other historical trauma. These findings should sound a loud alarm to our community that addressing domestic violence without addressing these traumas, not just for the Native Hawaiian and Filipino survivors highlighted in this report but also other Pacific Island, Black and Hispanic survivors who are under-represented in these findings, we will never put a dent in the pervasiveness of this issue in our community. We should question any resistance we may have to addressing these traumas and ask ourselves: are we complicit in the dynamics of power and control?

RECOMMENDATIONS

Culturally Specific Services

Explore new opportunities for standalone culturally specific services that work with the entire family and provide culturally responsive real-time crisis response.

In addition to culturally specific programs within mainstream domestic violence service agencies, Native Hawaiian and Filipino survivors would benefit from standalone culturally specific domestic violence service agencies that are grounded in the language and culture, with an emphasis on working with the entire family.

This study found that Native Hawaiians and Filipinos experienced the highest rates of domestic violence at 30% and 24%, respectively. The high rate of domestic violence in the Native Hawaiian community is consistent with studies conducted by the Hawai'i State Department of Health (DOH)¹, and while the reported abuse among Filipinos is lower, they are more likely to be fatal victims of IPV, relative to their proportions in the population.²

To understand how gender-based violence impacts Native Hawaiians, one must acknowledge the effects of colonization and genocide inflicted upon the Hawaiian population. In less than 200 years, Native Hawaiians went from being one of the most literate and educated populations in the world to being displaced from their land, rights, and culture, as a direct result of Western colonization. With limited access to their ancestral lands and basic necessities, Native Hawaiians today have some of the lowest health and life expectancy rates in Hawai'i.³

In recent decades, there has been a resurgence and revival of Hawaiian culture. However, ongoing colonization and settler colonialism have created barriers for Native Hawaiians to fully practice their cultural traditions. Forced assimilation to the oppressor's culture and limited accessibility to cultural resources create challenges for Native Hawaiians. It is important to acknowledge and address these barriers.⁴

Filipinos represent the second-largest ethnic group in Hawai'i, making up nearly 25% of the population.⁵ Many Filipina domestic violence survivors in Hawai'i are also immigrants. Migration means living in a state of permanent homesickness, working multiple jobs, lost cultural practices and language, separation from loved ones, and social isolation in a new place. Filipina immigrants who experience domestic violence often have many barriers to accessing resources and support, including language access and vulnerability due to immigration status.⁶

In contrast to the more individualistic perspective carried by American culture, Filipinas value family and their community, feeling an obligation to preserve familial and community relationships.⁷ Similar to Filipinas, Native Hawaiian women emphasize the value of 'ohana, in both their immediate and extended families.⁸



Prevention



Education and skill-building related to healthy relationships should begin as early as kindergarten and continue through 12th grade. The State of Hawai'i administers Federal and State funding to address issues that intersect with domestic violence, but support is also needed for domestic violence-specific primary prevention efforts. We recommend that the State of Hawai'i supplement the existing Federal and State funds with an investment of general obligation funds for domestic violence primary prevention education and programming.

The data in this study show that 29% of respondents ages 18-34 have experienced domestic violence. Unfortunately for some young adults, college is the first environment where they learn about consent, domestic/dating violence, and abuse. Early IPV prevention education efforts can prevent teens and young adults from experiencing domestic violence in the first place.

The Center for Disease Control and Prevention (CDC) found that strategies to promote healthy, respectful, and nonviolent relationships are an important part of prevention, and programs that teach young people healthy relationship skills, such as communication, effectively managing feelings, and problem-solving can prevent violence.⁹

Lethality Screening and Communication



First responders, including law enforcement and emergency medical personnel, and judicial officers should be trained on an ongoing basis to screen for lethality indicators, with an emphasis on strangulation, as well as other forms of abuse. Furthermore, first responders should communicate the seriousness of the lethality indicators with survivors, in a trauma-informed manner, and make appropriate referrals and warm handoffs to service providers in the community.

Domestic violence survivors are often unaware of lethality indicators, such as strangulation, suicidal ideation of the abusive partner, access to firearms, abuse while pregnant, and abuse of pets. This study found that 5% of those surveyed were strangled, choked, or suffocated, making them 10 times more likely to die by strangulation at the hands of their abusive partner.

Housing



IPV survivors must be considered and included in every aspect of affordable housing initiatives. Survivors are seeking, and deserve, safe and secure housing.

Hawai'i is in the midst of a housing crisis that was worsened by the fires in Lāhainā and Upcountry Maui in August 2023. The fires displaced 7,000 residents and increased the unhoused population on Maui tenfold. Meanwhile, Maui County has the highest incidence of domestic violence in the state at 17.8%, compared to 11.9% for the City and County of Honolulu.¹⁰ Survivors of domestic violence are especially vulnerable to housing and income instability. Since 2000, household incomes in Hawai'i have increased modestly, but median gross rental prices rose by 127%.¹¹

Resources for LGBTQ+ Survivors



Increase support services for LGBTQ+ survivors.

LGBTQ+ people are vulnerable to abuse due to societal stigma and threats of being outed, which prevent them from accessing the same level of care and safety as their heterosexual counterparts. This study found that physical and verbal abuse starts early and LGBTQ+ survivors experienced more tactics of coercive control than their heterosexual counterparts, indicating a need for earlier and more responsive intervention.

RECOMMENDATIONS

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Direct Financial/Cash Assistance



Make flexible funds available for survivors in the form of direct cash assistance whenever possible.

Low household income or an income that is narrowly too high to receive financial assistance but not enough pay for necessities are barriers to seeking safety. Funders should explore ways to remove barriers by allowing the organizations serving survivors to provide them with direct cash assistance. State agencies that are the pass-through for Federal funds such as Victims of Crime Act (VOCA) funds, should carefully review the funding guidelines and adapt their policies to allow sub-recipients to make cash disbursements to survivors.

Law Enforcement Engagement



Deepen community engagement with law enforcement in communities with high incidence of IPV; collaborate with community partners and law enforcement to provide training and education on emerging trends, laws, and topics.

Law enforcement has an important role in the coordinated community response to domestic violence. This requires that they are trained to understand and respond to all dynamics of domestic violence, including coercive control, to maintain the trust of the community.

Mental Health Services



In addition to increasing access to mental health services, ensure mental health professionals, therapists, and counselors are trained to assess for intimate partner violence.

Mental health professionals who do not understand the dynamics of intimate partner violence are more likely to misdiagnose their clients and inaccurately assess lethality indicators.¹²

Legal Services



Increase the availability of free and affordable legal services for IPV survivors; expand income eligibility for services.

Survivors find themselves at a disadvantage when seeking legal services in protection orders, custody, and immigration cases. There are not enough free or affordable services to meet the needs of the community and many find themselves on long waiting lists. Those who do not qualify for free or affordable services may only afford a limited number of hours of legal services, which presents another opportunity for former partners to engage in abusive tactics. Abusers can use the courts to engage in abusive litigation, especially common in child custody cases, where they file frivolous cases intended to harass, coerce, and incur high legal costs.

THE SCOPE OF INTIMATE PARTNER VIOLENCE (IPV) IN HAWAII

“He was very physically abusive as well. So, I was always either bruised up or, you know, I was just too afraid to even leave that area because of how scared I was of him.”



18%

of surveyed residents have experienced intimate partner violence in the past 5 years.

12% had something thrown at them or were hit with something that hurt or frightened them.

8% were slapped, kicked, bit, or hit with a fist.

3% were physically harmed or threatened while pregnant.*

3% had a gun* or knife used on them or were threatened with one.

11% were pushed, grabbed, had their arm twisted, or their hair pulled.

5% were strangled, choked, or suffocated.*

4% reported physical harm to, or threats to harm, the family pet(s).*

4% were forced into unwanted sexual activity by threat, being held down, or were hurt in some way.

1% were kept from taking their birth control, were refused use of condoms or use of broken condoms, or were forced to remove contraceptive rings, IUDs, and patches (reproductive coercion).

1% were burned or scalded with something hot.

*Acts identified with an asterisk are considered lethality indicators.

For more information, visit hscadv.org/domestic-violence-lethality-indicators/

Of the Hawai'i residents surveyed in this study, almost 1-in-5 (18%) were impacted by at least one violent act of domestic violence from a current or former intimate partner in the past five years. The 2020 United States Census Bureau reported a Hawai'i State population of 1,455,271 people with 79.4% aged 18 years or older. Given this data, the incidence of IPV in Hawai'i could reach approximately 200,000 residents who have experienced IPV at any given time within the last five years.

The two most prevalent acts of violence were being hit with an object or having one thrown at them (12%) and being pushed, grabbed, having their arm twisted, and/or having their hair pulled (11%). Additionally, common acts included being slapped, kicked, bit, and/or hit with a fist (8%) and being strangled, choked, and/or suffocated (5%).

5%

of surveyed residents experienced IPV where they were strangled, choked, or suffocated.

Strangulation is one of the most lethal forms of domestic violence: unconsciousness may occur within seconds and death within minutes.¹³

Survivors may not exhibit outward symptoms of strangulation but because of underlying brain damage due to the lack of oxygen during the strangulation assault, they may have serious internal injuries or die days, even weeks later.¹⁴ A person whose abusive partner has strangled them in the past is 10 times more likely to be killed by that partner.

While the report of threats with knives/firearms, harming family pets, self-harm, and abuse while pregnant are low, they are lethality indicators. Awareness of these indicators should be elevated through public education and awareness to survivors, medical professionals, law enforcement, and judicial officers.

WHO ARE THE SURVIVORS?

Several key characteristics differentiate those who have experienced IPV and those who have not. The following infographic highlights key demographic differences between the two groups, including the fact that IPV survivors are younger on average, more commonly of Native Hawaiian or Filipino descent, and live in larger households.

As renters, survivors are vulnerable to untenable increases in rent that outpace the growth in wages, landlords who kick them out or choose not to renew their lease based on the actions of their abusive partner (the former is illegal), or landlords who choose not to rent to survivors because of their source of income such as Section 8 vouchers (also known as source of income discrimination, which is illegal for certain types of landlords).

Experienced IPV

Have not Experienced IPV

39.83

YEARS
AVERAGE AGE



52.74

YEARS
AVERAGE AGE

33%

NATIVE
HAWAIIAN

16%

FILIPINO



16%

NATIVE
HAWAIIAN

11%

FILIPINO

66%

FEMALE

1%

NON-BINARY

33%

MALE

60%

FEMALE

1%

NON-BINARY

39%

MALE

3.12 MEMBERS

AVERAGE HOUSEHOLD SIZE



2.65 MEMBERS

AVERAGE HOUSEHOLD SIZE

62%

RENTERS

29%

HOMEOWNERS

29%

RENTERS

61%

HOMEOWNERS



WHO IS MOST VULNERABLE TO IPV?

This section highlights the demographic segments that had statistically higher proportions of IPV survivors. In particular, intimate partner violence is more prevalent among less affluent respondents, including those who have received less formal education, live in homes with children, or have a sexual orientation other than heterosexual. These vulnerabilities are exploited by abusive partners in their power and control tactics. For instance, survivors with children often fear having their children taken away by child welfare or prolonged child custody battles with their abusive partners. Furthermore, the combination of the high cost of housing and low wages in Hawai'i makes it nearly impossible to live on a single income with children. For LGBTQ+ survivors, they may be threatened with being "outed" to their family or employer by their abusive partner.

The survey revealed statistically higher instances of IPV among certain ethnic groups: 30% of Native Hawaiian respondents and 24% of Filipino respondents reported such experiences, surpassing the overall reported rate of 18%. In particular, the following percentages of each group experienced some form of IPV in the prior five-year period:

DEMOGRAPHIC GROUPS WHERE IPV IS MORE PRONOUNCED	EXPERIENCED IPV	
18 - 34 years old		29%
35 - 49 years old		28%
<\$50K annual income		31%
No college degree		26%
Children in household		29%
LGBTQ+		31%
Native Hawaiian		30%
Filipino		24%

West O'ahu Residents



Higher proportions of highly vulnerable demographic groups, including Native Hawaiians, Filipinos, those without a college degree, those living in larger households, and those with children reside in West O'ahu.

PERCENTAGE OF EACH GROUP RESIDING IN WEST O'AHU

25%	33%	
NATIVE HAWAIIAN	FILIPINO	
23%	27%	24%
NO COLLEGE DEGREE	5+ HOUSEHOLD MEMBERS	CHILDREN IN HOUSEHOLD



TYPES OF ABUSE AND NATURAL AND PUBLIC HEALTH DISASTERS

“You know what shelter for me [...] it doesn’t feel safe. So, for me, it’s like, do I want to go to a place I don’t know about and I don’t know my safety, or do I want to stay with a man who at least is predictable and I know him for the last nine years and if I do need to go, I mean, I have the neighbors [who] can call the cops.”



VERBAL ABUSE

22 YEARS

MEDIAN AGE

26.71 YEARS

AVERAGE AGE



PHYSICAL ABUSE

26 YEARS

MEDIAN AGE

27.82 YEARS

AVERAGE AGE

Physical Abuse

While starting a little later in life on average (compared to verbal abuse), physical violence often begins early in a survivor’s life. Half of physical abuse survivors report experiencing their first incident of domestic violence at, or before, the age of 26. Physical abuse was reported by IPV survivors to have occurred as early as 11 years old. This may suggest that many IPV survivors could have experienced their first physical abuse incident at any point from middle school to college, highlighting the need to provide education and skill-building related to healthy relationships in grades K-12.

Survivors by Sexual Orientation

Compared to heterosexual survivors, LGBTQ+ survivors shared much earlier occurrences of verbal abuse, with the average age being 20.64 years old compared to 28.89 years old for heterosexuals.

STATISTICALLY
YOUNGER FIRST
OCCURRENCE FOR

LGBTQ+
20.64
YEARS

COMPARED TO

HETEROSEXUAL
28.89
YEARS

Impact of the COVID-19 Pandemic

The research indicates that the pandemic had an adverse effect on over 1-in-4 (28%) survivors of IPV who saw an increase in violence from their intimate partner over this time period. In particular, those with higher levels of education (those holding a college degree) were statistically more likely to notice increased abusive behavior from their partner since the beginning of the pandemic. For 37%, the abuse remained unchanged during the pandemic—meaning, only about a third (36%) of IPV survivors experienced some relief during this period.

28%

survivors who saw an **increase** in violence during the pandemic

36%

survivors who experienced some relief in violence during the pandemic

37%

survivors who saw **no change** in violence during the pandemic

COERCIVE CONTROL AND ISOLATION

"I was just too afraid to even leave that area because of how scared I was of him. But yet it was just a, I couldn't, it's a weird. Like, I was so afraid of him. But yet, he made me feel like he was the only one who could protect me in a situation."



1-in-5

20% of all surveyed residents have experienced coercive control or isolation from an intimate partner in the past 5 years.

10%

did something abusive and then denied that it happened (gaslighting).

10%

kept track of them by demanding to know where they were/what they were doing.

7%

tried to keep them from seeing or talking to family or friends.

7%

monitored their cell phone or computer activity.

While domestic violence is often only looked at in the frame of physical harm and violence in the home, a high proportion of respondents say domestic abuse left them feeling powerless and destroyed their financial independence. When interviewing domestic violence survivors for this study, many shared that they felt "numb," "powerless," or "not worth it."

Other impacts include the destruction of personal property, stealing money saved or income, and keeping important documents.

Who is Impacted Most by Coercive Control and Isolation

In total, respondents were presented with 13 acts of coercive control or isolation and asked which ones they had experienced in the past five years from an intimate partner. Of the 20 percent who shared they have been impacted by at least one, those in households with lower income (less than \$50,000 annually) experienced statistically more acts on average (3.99), compared to more affluent households earning above \$100,000 annually (2.58). Similarly, LGBTQ+ residents were affected in more ways on average (3.98), compared to heterosexuals (3.02).

3.99

Less than
\$50,000
Household
Income



COMPARED TO

2.58

More than
\$100,000
Household
Income

3.98

LGBTQ+
Residents



COMPARED TO

3.02

Heterosexual
Residents

ACTS OF COERCIVE CONTROL OR ISOLATION

- Did something abusive and then denied it happened (gaslighting)
- Kept track of you by demanding to know where you were and what you were doing
- Tried to keep you from seeing or talking to your family or friends
- Monitored your cell phone or computer activity
- Destroyed something that was important to you
- Threatened to hurt themselves or commit suicide when they were upset with you*
- Kept you from leaving the house when you wanted to go
- Kept you from having money for your own use
- Threatened to take your children away from you
- Threatened to hurt someone you love
- Kept important documents from you
- Hurt someone you love
- Used your disability to control or isolate you

*Acts identified with an asterisk are considered lethality indicators. For more information, visit hscadv.org/domestic-violence-lethality-indicators/

PERSONAL IMPACTS OF ABUSE

“Once you leave, there’s a part of like, okay, child custody, how is that going to work? And that’s my concern, a lot of us have that concern of, we’re not going to leave because what then he’s gonna end up having 50%, or whatever percentage, and [...] I’m not there to see.”



When asked about the personal impact of the abuse they experienced, many IPV survivors shared that they tried not to think about it, felt constantly on guard, or felt numb. Some even experienced chronic stress, substance use, anxiety, or depression, which was statistically more prevalent among LGBTQ+ respondents (83%).

Additionally, about a third of IPV survivors (36%) sought mental health care/a psychologist/a counselor because of the abuse they experienced.

Respondents who reported that they were physically disabled (57% sought mental health services) were statistically more likely to seek out mental health services compared to those without a disability (32%).

66% try hard not to think about it or go out of the way to avoid being reminded of it.

64% feel like/felt like they were constantly on guard, watchful or easily startled.

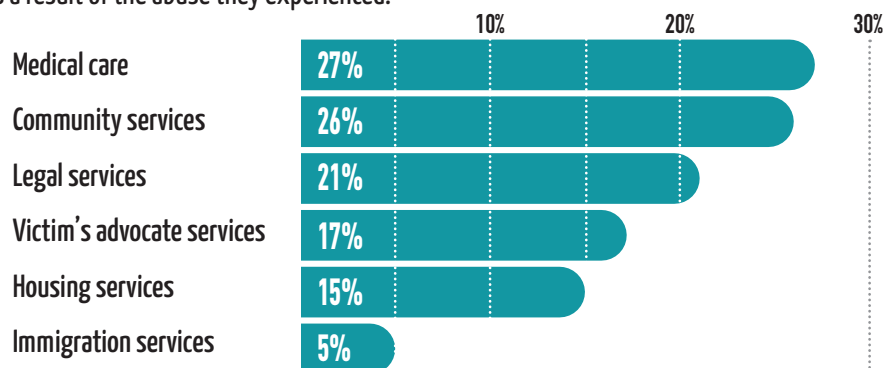
55% felt numb or detached from others, activities, or surroundings.

53% have chronic stress, substance use, anxiety, depression, or thoughts of suicide.

Services Needed

Many IPV survivors shared that they needed a range of services as a result of the abuse they experienced from their intimate partner. The most commonly mentioned services were medical care, community services, and legal services. Most of those who ended up turning to these services shared that they received the help they needed. However, some survivors that were interviewed reported not receiving adequate help for reasons, such as they are “still waiting on getting my own housing,” on a “long wait list,” and their “gross income is too high.”

Survivors of IPV report that they needed the following services as a result of the abuse they experienced:



POLICE REPORTING AND INVOLVEMENT



When considering the police department as a resource to turn to after an act of domestic violence, it was found that survivors do not always turn to law enforcement when they could use it most. While more likely to report acts with tangible proof, such as a stolen vehicle or break-in/attempted break-in, survivors were less likely to report threats of physical harm, physical assault, or stalking. This may result from a fear of not being believed or retaliation from an abusive partner.

While reflecting on services needed, one survey respondent shared:

“No one was able to explain or help explain things to someone that had no idea what to do. HPD didn’t seem trustworthy, and I feared that because I am gay, I would be harmed further.”



TANGIBLE EVIDENCE

Survivors were more likely to report acts where there was tangible evidence, such as a vehicle theft or break-in.



PHYSICAL ABUSE/
STALKING

Survivors were less likely to report threats of violence, physical abuse, or stalking.

Police Satisfaction

Of those who involved law enforcement, only roughly half were satisfied with the outcome. Similar to reporting, police response to acts such as stalking or threats of physical harm often left survivors dissatisfied with the results. This dissatisfaction with the outcome may act as a barrier for survivors calling police in the future and could potentially lead to further harm such as physical assault.

Barriers to Police Involvement

Those who did not involve law enforcement shared several barriers that stood in their way from doing so, but the most common were not believing the incident was serious enough to involve the police and fear of what might happen to them if they reported the incident. The former was especially true for acts of stalking or threats of physical harm where survivors likely believed they did not have enough proof to substantiate police action.



FINANCIAL ABUSE

“I just had to put my kids in towels, because I couldn’t afford diapers.”



Ten one-on-one in-depth interviews with adult female survivors who currently reside in Hawai‘i were conducted to gain a better understanding of the incidence and impact of financial abuse on their lives. The interviews revealed that:

Domestic Violence Resources are Impactful, but Awareness is Low

While public resources, such as the 211 hotline and those offered by domestic violence service providers, have helped many get a foothold and restart after leaving an abusive relationship, initial awareness of these resources is low, with many sharing that they did not know where to turn when they were trying to end the relationship or where to turn once they had ended it.

Financial Abuse is Extensive, Leaving Survivors with Nothing

Many shared that their partners damaged their personal property, caused them to lose their jobs, and drained their bank accounts. Survivors often found they lost their financial independence. While some were able to lean on friends and family members for support, many shared the need for outside financial support to seek safety.

DAMAGE TO PERSONAL PROPERTY

“It’s endless amount of cell phones, holes in the wall, [...] he would break my makeup [...] Anything he thought that was, like, valuable to me, he would destroy them.”

HINDERING THE ABILITY TO WORK

“He also made sure that I couldn’t get certain jobs [...] He’s very jealous as well and has paranoia, so every time he thought I was doing in home visits [for my job], I was off, you know, having relationships with men.”

STEALING MONEY OR BELONGINGS

“It was more of a manipulative type of financial abuse. He would take my money without me knowing or sell my belongings, and stuff like that.”

Financial Dependency is a Major Barrier to Safety

While survivors experienced multiple forms of abuse, including mental and physical, many shared that financial abuse and loss of financial independence was a major barrier to leaving the relationship. Fearful of how they would provide for their children or find a safe place away from their abusive partner, the assurance that financial resources were available to them made leaving their abuser possible.

A Need for Immediate Financial Support

Survivors often have to make a swift decision to leave their abusers, either due to a sudden chance to escape or following a severe incident of abuse. This leaves many unprepared to financially support themselves and their children. While some programs exist to help with housing, food, and other necessities, some mentioned that they are not timely enough. Some survivors had to uproot their lives in a matter of hours, with no immediate resources.

Assistance Transitioning to the Workforce

Having been a stay-at-home parent for several years or not being able to work because of their abusive partner, many survivors found that they had trouble transitioning to the workforce. Some shared that their lack of recent work experience did not make them desirable employment candidates, while others mentioned that they could not afford the childcare needed to work a full-time position.

“Yeah, it was hard because [...] I’ve been almost out of work for 10 years because I was a stay-at-home mom. And so, going back to work, it was hard to find work because everybody was like, ‘Well, you haven’t been working for 10 years. Like, I’m not sure if you can do this job.’”

“Yeah, [childcare] is too expensive. And not a lot of people take [the program] and then you do have to pay the first month, and then the program will pay the next one. So, financially, like that has been a lot. Because I only get a little bit from the welfare, you know, and I have to make it last through the whole month. So just to save up, it’s not enough for me to save up to pay for childcare.”

Financial Independence Is Reliant on Long-Term Support

While short-term resources, such as housing and childcare, can help address the immediate concerns of survivors, many mentioned the need for stability and the desire to become financially independent. Long-term support to serve this need should include resources to help survivors return to school, start a business, or save for retirement.

Tools and Resources Needed for Domestic Violence Survivors

SHORT TERM	LONG TERM
Increased Education and Awareness on Domestic Violence Resources	Stability Planning
Rescue Services & Third-Party Intervention	Legal Support for Child Custody Cases
Transportation and Relocation Assistance	Support for Higher Education
Temporary Housing Assistance	Recovery Therapy
Immediate Access to Child Necessities	
Childcare to Allow a Transition to the Workforce	
Resume Building & Career Coaching	
Mobile Phone Replacement	
Recovering Important Documents	



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