

A Research Report on

The Experiences of Domestic Violence and Help-Seeking Behaviors of Minority Ethnic Women in Hong Kong



Kareen Tonsing, Ph.D
Oakland University, Michigan

Jenny Tonsing, Ph.D
The University of South Pacific, Fiji

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Prepared by:

Kareen Tonsing, Ph.D
Oakland University, Michigan

Jenny Tonsing, Ph.D
The University of South Pacific, Fiji

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PRINCIPAL INVESTIGATORS

Kareen Tonsing, Ph.D.

Oakland University, Michigan

Jenny Tonsing, Ph.D.

The University of South Pacific, Fiji

RESEARCH COLLABORATOR

Hong Kong Christian Service Ethnic Minority Services

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Address all correspondence about the research to:

Kareen Tonsing, Ph.D.

Department of Sociology, Anthropology, Social Work & Criminal Justice

Oakland University, Rochester, Michigan 48309

Email: kareentonsing@oakland.edu

Preface

Despite the acceptance of domestic violence as a threat to women's human rights was formalized at the Platform for Action of the 1995 United Nations' Beijing World Conference on Women, incidence of violence against women are still burning issues. More importantly, the prevalence of domestic violence is universal which not only has detrimental effects on the women directly involved, but also the family and the community at large.

There are claims that the numbers of reported incidents of domestic violence represent only a tip of the iceberg, in which many violence incidents of varying levels of severity are typically underreported by ethnic minority victims. The way ethnic minority especially South Asian women perceive and experience it is in many aspects unique to their community. Fear of stigmatization, being ostracized, limited services and coupled with language limitation that might prevent women from ethnic minority communities to seek help outside their personal networks. It highlights a need for a further victim centred in-depth research on the experiences of domestic violence and help-seeking behaviors among ethnic minority women in the Hong Kong context.

Protection of women against repeat or future violence is of utmost importance and should be extended to all women regardless of their ethnicity. It is anticipated that the research will enhance public awareness on the situations of ethnic minority women who had faced or are facing domestic violence as well as promoting development of culturally appropriate intervention practice framework and facilitating further studies.

On behalf of Ethnic Minority Services, I am grateful to HER Fund for providing funding and making this research possible. I wish to express my deep gratitude to the distinguished researchers Dr. Kareen Tonsing and Dr. Jenny Tonsing who conducted the project with dedication, diligence and provided invaluable advice in every stage of the study. Gratitude is also extended to our volunteer team members, in particular, Thapa Gopa, Qurat-Ul-Ain, Rai Puja, Maskey Limbu Jalpa, Yasir Najma, Kosar Rehana, Bi Fakhra, Rai Sirjana, Abeer Tafazzul and Rai Tirtha Maya for their assistance in the survey and one on one interviews. Special thanks to all the South Asian ethnic minority women who participated in this research to share their experiences and thoughts. Without their contribution and willingness to participate, this study would not have been possible.

Cheung Muk Yan, Mike
Chief Supervisor
Ethnic Minority Services
Hong Kong Christian Service

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1. BACKGROUND

The Research Project titled “Experiences of Domestic Violence and Help-Seeking Behaviors among Minority Ethnic Women in Hong Kong” was conducted by Dr. Kareen Tonsing and Dr. Jenny Tonsing, in collaboration with Hong Kong Christian Service (hereinafter called the “HKCS”), with a support grant from HER Fund Hong Kong, in November 2015. The goal of this project was to improve understanding of minority ethnic women’s experiences of domestic violence and their help-seeking behaviors.

Domestic violence against women is a worldwide social problem, and one of the leading causes of injuries for women (Garcia-Moreno, Jansen, et al., 2006). It is often accompanied by emotionally abusive and controlling behavior that is only a fraction of a systematic pattern of dominance and control (Campbell, 2002). It is important to note that domestic violence does not always manifest as physical abuse. Emotional and psychological abuse can often be just as extreme as physical violence. Lack of physical violence does not mean the abuser is any less dangerous to the victim, nor does it mean the victim is any less trapped by the abuse.

The important role of social support in the lives of immigrant women, as well as those in abusive relationship have also been observed in previous literature which help them make decision to ask for help in alleviating their situation (e.g. Goodman & Epstein, 2005; Yoshioka et al., 2003). Empirical research on help seeking among South Asian women facing abuse has indicates greater reliance on personal social networks such as friends and family than on community-based services (Bui, 2003; Raj & Silverman, 2003, 2007; Yoshioka, Gilbert, El-Bassel & Baid-Amin, 2003). Women who are still in abusive relationships often do not seek help from outside their personal network due to fear of stigmatization, of being ostracized by the community, or fear of intensification of the abuse (Raj & Silverman, 2007). The presence of social support act as a buffer for women enduring abuse, and may also help abused women not only to cope with the abuse but to also seek outside help and leave the abusive relationship (Goodman & Smyth, 2011).

Previous research on isolation have observed that women who are more isolated are at higher risk of abuse by their partner than other women (Levendosky et al., 2004; Stets, 1991). Isolation can further affect abuse women’s self-esteem and prevent them from seeking help (Bui, 2003; Gill, 2004). For South Asian women, cultural isolation, coupled with lack of social support, language barriers, and other immigration related factors may also hinder them from seeking help. Previous studies have observed that isolation is often employed by abusive husband/partner as a means of controlling their wives (Malhotra, 1999).

Literature and past researches has shown the harmful effects of being brought up in, or witnessing domestic violence on children's bio-psycho-social well-being. Children who are exposed to domestic violence are at higher risk of experiencing abuse themselves, which can have significant negative consequences on their social, emotional, and cognitive development (Carpenter & Stacks, 2009; DeVoe & Smith, 2002). However, there has not been any research to investigate this among the minority ethnic children in Hong Kong. Given the serious consequences of children's exposure to domestic violence, there exist the need for intervention and preventive measures and approaches to be put in place to help improve children's bio-psycho-social development and well-being.

Domestic violence is not a new phenomenon, and there is a huge growth of literature on domestic violence, especially among ethnic minorities and immigrant groups, most of which has been conducted in western countries (e.g., Abraham, 2000; Dasgupta, 2000, 2006; Han, Kim, & Tyson, 2010; Nguyen, 2007; Raj & Silverman, 2003). However, this topic remains under-researched and unexplored, to a large extent, in the context of South Asian minority ethnic communities in Hong Kong. To date, only a handful of studies on the experiences of domestic violence have been conducted in the context of Hong Kong (e.g., Tonsing, 2012; Kapai, 2015; Hong Kong Christian Service, 2007).

1.1. Aims of the study

The primary purpose of this study is to examine the experiences of domestic violence among minority ethnic women, and their help-seeking behaviors. Previous studies that focus on impact on children who witness domestic violence has relied on mother's perception since it is difficult, and in some cases unethical, to interview a child. Therefore, in this study we also explored mother's perceived impact of witnessing domestic violence on their children, and whether this also serves as a motivating factor in their help-seeking when facing domestic violence.

This research also seeks to increase awareness of minority ethnic women's experiences of domestic violence in the family context, the community, and the larger society. Findings from this study can provide helpful suggestions for practice and service delivery for minority ethnic women and their families.

1.2 Research Questions

The specific research questions are:

- a) What is the extent of domestic violence among minority ethnic women in Hong Kong?
- b) What are the help-seeking behaviors of minority ethnic women who have experienced this violence?
- c) What socio-cultural factors (i.e., social support, social isolation, and patriarchal beliefs) are associated with their help-seeking behavior?
- d) What is the mother's perceived impact of witnessing domestic violence on their child/children? (In-depth interview).

2. METHODOLOGY

To answer the research questions, a mixed method approach in the form of quantitative and qualitative research design was employed. This study received ethics approval from the Institutional Review Board at Oakland University, Michigan.

2.1. Quantitative Study

Data for the quantitative study were collected through survey questionnaire between July 2016 and January 2017. Survey instruments were translated into the ethnic languages (i.e., Hindi, Urdu, and Nepali), following the back-translation method, by professional translators. Participants were given the option to complete the survey in their preferred language. Respondents completed the self-administered survey at the premises of HKCS, which took about 30-45 minutes.

2.1.1. Sample

Respondents for this study are South Asian minority ethnic women aged 18 years and above, and who have or are in an intimate relationship within the past year at the time of conducting this study. To reach a wide cross section of minority ethnic women, the questionnaire survey was conducted among community sample, rather limiting the inclusion criteria only to women who had experienced/faced domestic violence.

2.1.2. Recruitment Process

Staffs of Hong Kong Christian Service (HKCS) assisted in identifying and recruitment of potential participants for this study. Potential participants were informed about the objective of the research, confidentiality of their responses, and voluntary nature of participation in this study. All those who volunteered to participate in this study gave written consent. No personal identifiers such as their name or address were collected. Only women who voluntarily agreed to participate in a follow-up one-on-one interview provided their contact detail.

At the end of the survey, a HK\$50 supermarket voucher was given to each respondent as a token of appreciation for their participation in the survey.

2.1.3. Survey Instruments

The survey utilized a number of instruments that sought to provide information on issues that were pertinent to understanding minority ethnic women's experiences of domestic violence and their help-seeking behavior. This includes the following:

Social Support was measured with the Multidimensional Scale of Perceived Social Support (MSPSS) developed by Zimet and colleagues (Zimet et al., 1988).

Isolation was operationalized as ties and integration to informal social networks and was measured with items from the Social Isolation Scale developed by Stets (1991).

Patriarchal belief was measured with the Husband's Patriarchal Belief Scale (Smith, 1990).

Domestic violence was measured with items from the Revised Conflict Tactics Scale (CTS2) (Straus & Douglas, 2004).

To assess *help-seeking behavior*, respondents were asked to indicate if they sought help, sources of help sought, and perceived helpfulness of support received.

Socio-demographic information such as participants' age, relationship status, ethnicity, education level, household composition, employment status, monthly household income, length of residence in Hong Kong, residency status, as well as proficiency and preference for speaking a given language in various settings, and preference of native/English/Chinese media, were also collected.

2.1.4. Data Analysis

The quantitative data was analyzed using SPSS 22. Descriptive statistics were obtained to describe the basic patterns in the data such as the mean and standard deviations. Logistic regression analysis was used to examine which were significant predictive factors of the dependent variables.

2.2. Qualitative Study

Participants for the qualitative study comprised of a sub-set of the quantitative sample. During the survey, respondents who selected at least one of the items listed on the CTS2 were asked to provide their contact details if they agree to participate in a follow-up one-on-one in-depth interview. Of the 12 women who provided their contact details, only ten were contactable and gave their consent to participate in the in-depth interview.

2.2.1. Interview Process

All interviews were conducted at the premises of the Hong Kong Christian Service in March 2017 by social workers from HKCS. Depending on the preferred language of the respondent, interviews were conducted in English, or Hindi, or Urdu, or Nepali, which lasted approximately 45 to 60 minutes. Interviews were audio-taped with consent from respondents. At the start of each interview, respondents were once again provided with information about the purpose of the study, confidentiality of their responses, and the voluntary nature of participation. Respondents were also assured that no identifying information will be kept in the transcript, nor used in any publication or report arising from this study.

A HK\$120 supermarket voucher was given to each interviewee as a token of appreciation for the time taken for the interview.

2.2.2. Data Analysis

Interview data were analyzed following the transcript-based analysis method, which is based on contextual rather than on statistical processes, and as such did not follow sophisticated procedures of coding and interpretation of data.

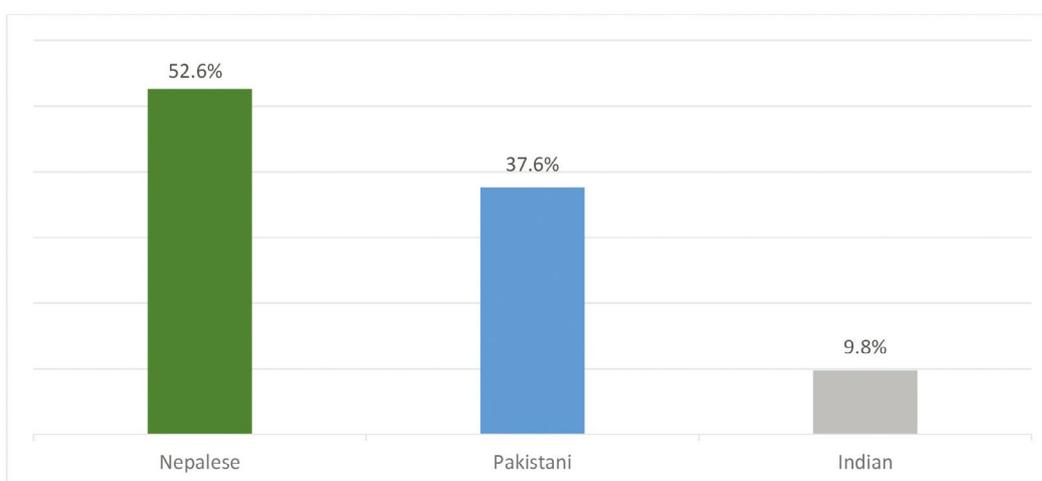
3. DESCRIPTIVE FINDINGS FROM THE SURVEY

3.1. Respondents' demographic characteristics

3.1.1. The total sample size is 133 women. Of these, 52.6% completed the survey in Nepali, 24% in English, 22.6% in Urdu, and 0.8% in Hindi.

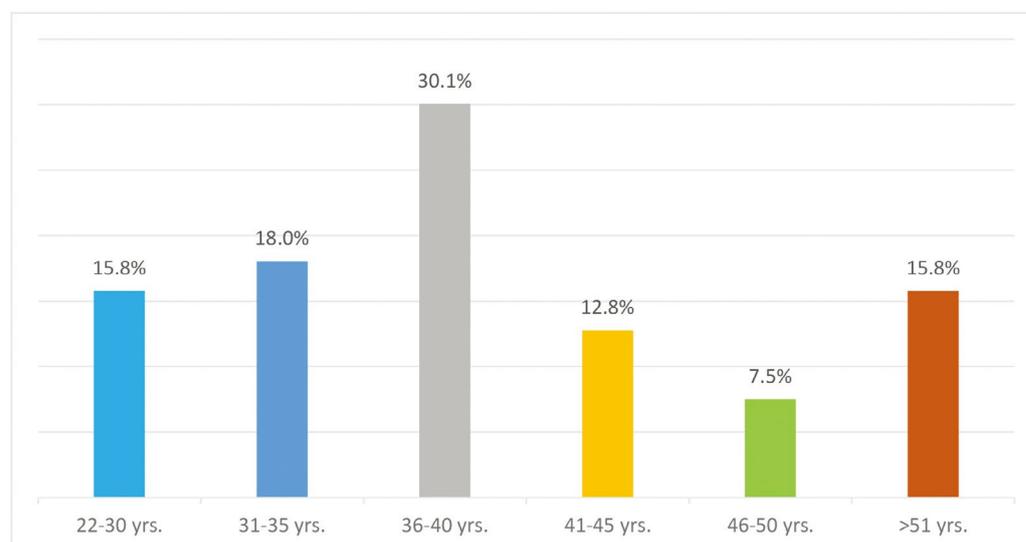
3.1.2. The ethnic compositions are 52.6% Nepalese, 37.6% Pakistanis, and 9.8% Indians (Figure 3.1).

Figure 3.1. Percentage of respondents by ethnicity



3.1.3. Respondents ranged in age from 22-82 years, with a median age of 38 years. About one-third are between the ages of 22 and 35 years, 30.1% are between 36 and 40 years, 20.3% are between 41 and 50 years, and 15.8% are 51 years and older (Figure 3.2).

Figure 3.2. Percentage of respondents by age group



3.1.4. Among the respondents, about nine in 10 (93.2%) are married (Figure 3.3).

3.1.5. Majority have one or more children below 15 years of age (Figure 3.4).

Figure 3.3. Percentage of respondents by marital status

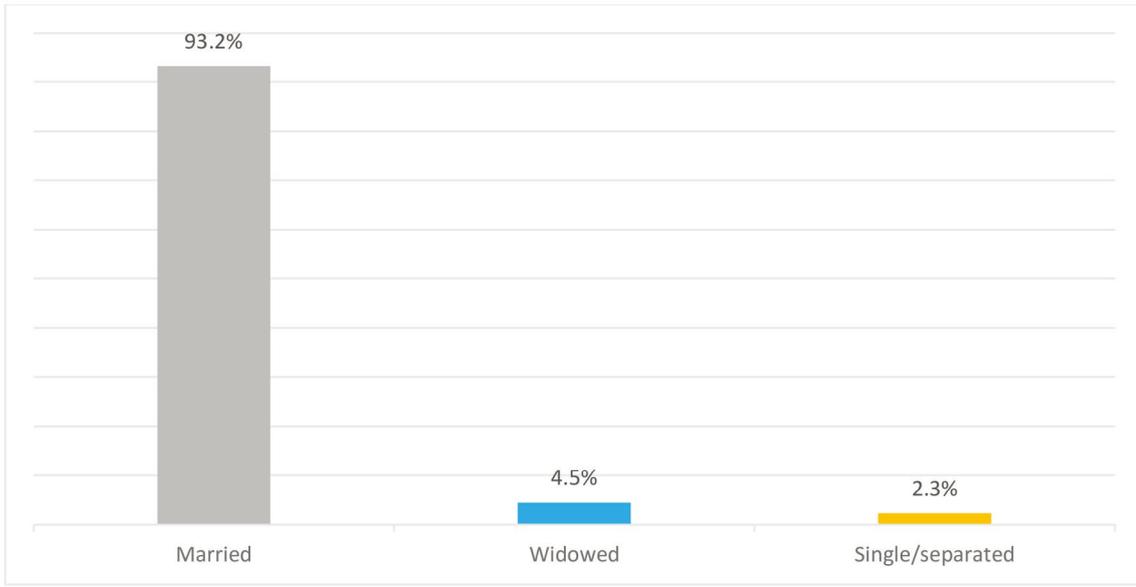
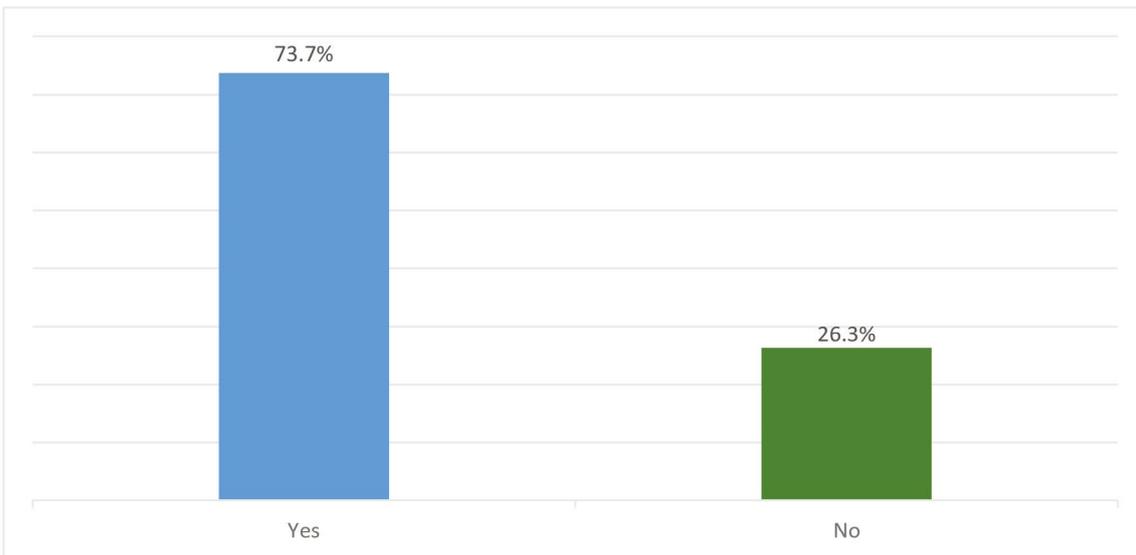
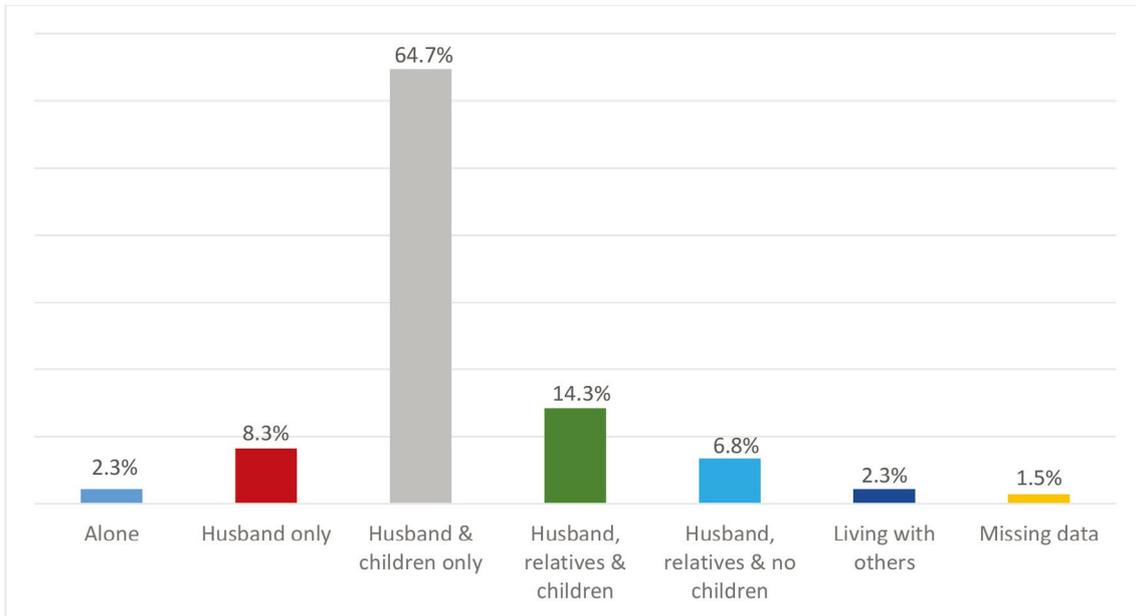


Figure 3.4. Percentage of respondents with children 15 years or below



3.1.6. About 65% of respondents live with their spouse and children (Figure 3.5).

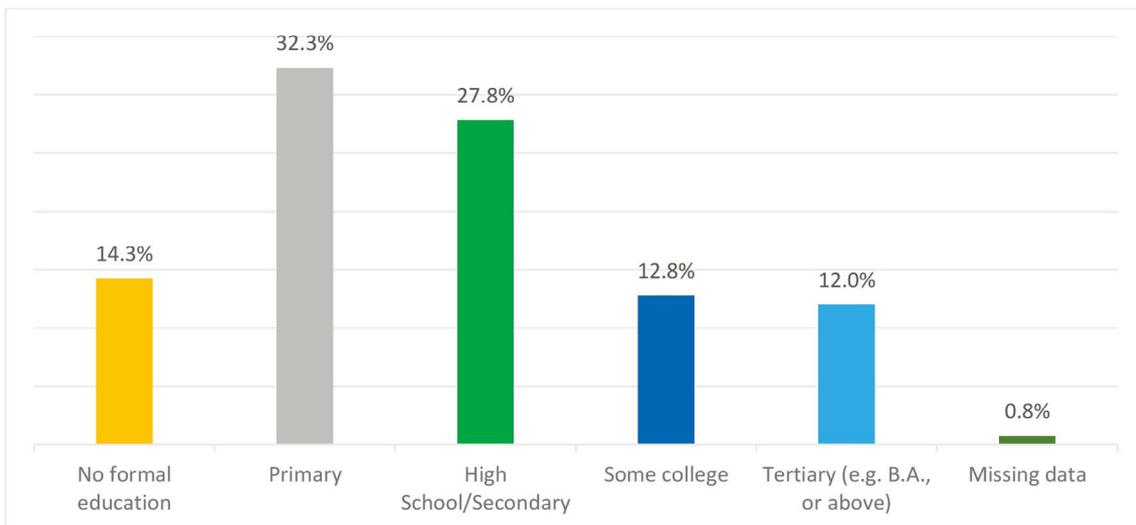
Figure 3.5. Percentage of household members living together



Note: Percentages do total 100 because of rounding.

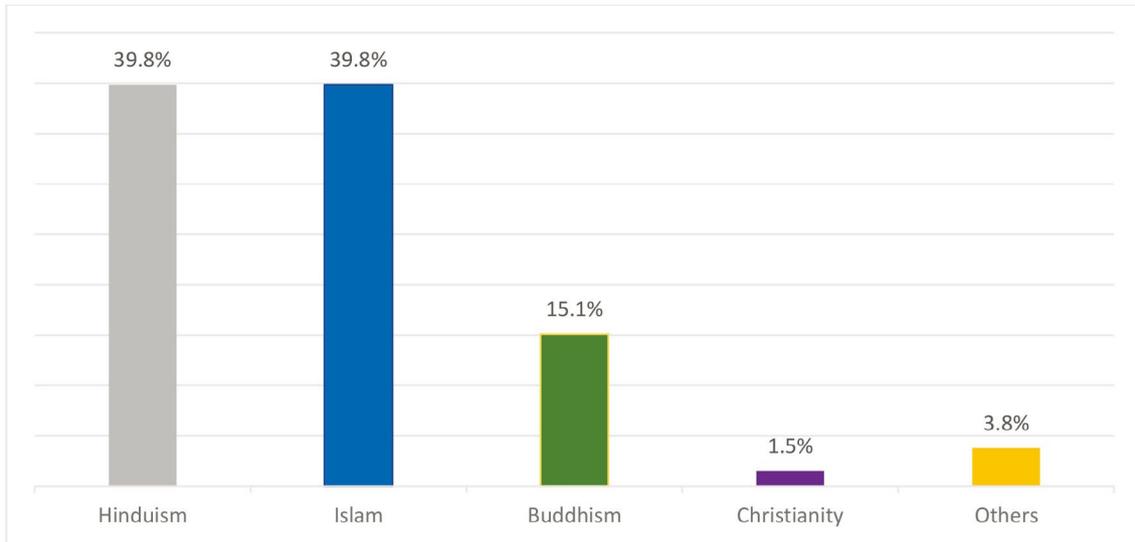
3.1.7. As Figure 3.6 shows, 14.3% did not have formal education, 32.3% have primary level, 27.8% have completed high school or equivalent, 12.8% have some college education, and 12% have a bachelor's degree or higher (Figure 3.6).

Figure 3.6. Percentage of respondents by education level



3.1.8. In terms of religious preference, there was an equal proportion of respondents who reported Hinduism (39.8%) and Islam (39.8%). About 15.1% followed Buddhism, whereas there was only a handful of Christians (1.5%) (Figure 3.7).

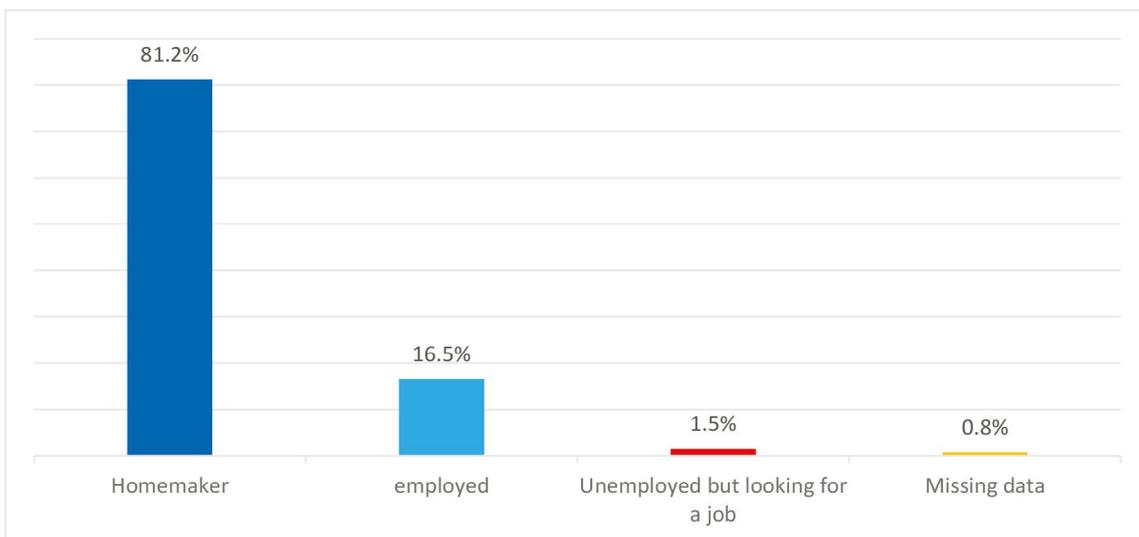
Figure 3.7. Percentage of respondents by religious preference



3.2. Employment and household income

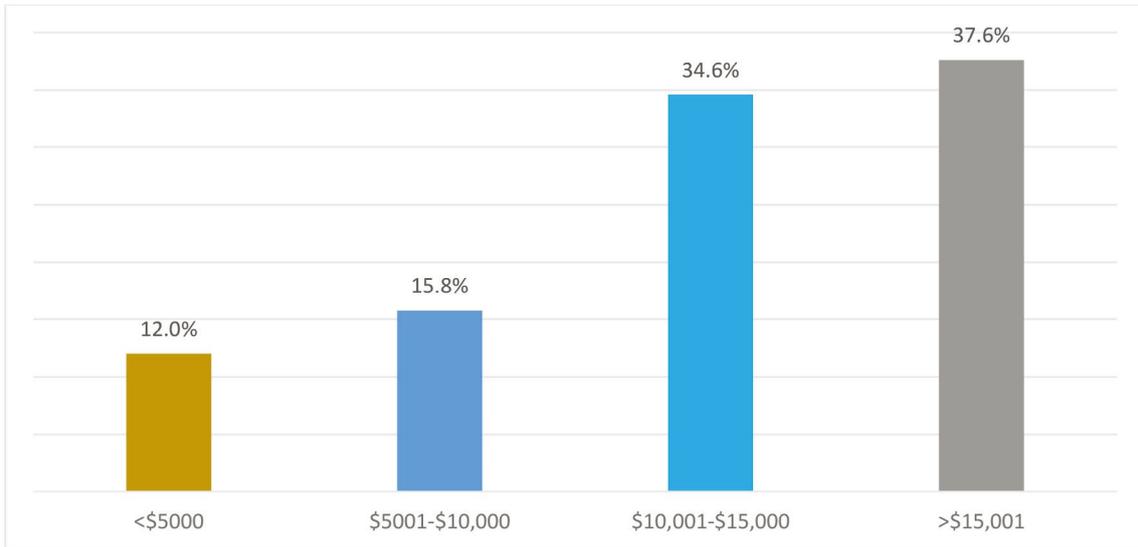
3.2.1. Figure 3.8 provides detail about employment status. At the time of this study, 81.2% are homemaker/ housewife, 16.5% were currently employed, and 1.5% were unemployed but actively seeking a job.

Figure 3.8. Percentage of respondents by employment status



3.2.2. As seen in Figure 3.9, about 12% respondents reported a household income of \$5,000 or less, 15.8% had between \$5,001- \$10,000, 34.6% had between \$10,001 to \$15,000, whereas 37.6% had a total of \$15,001 or more.

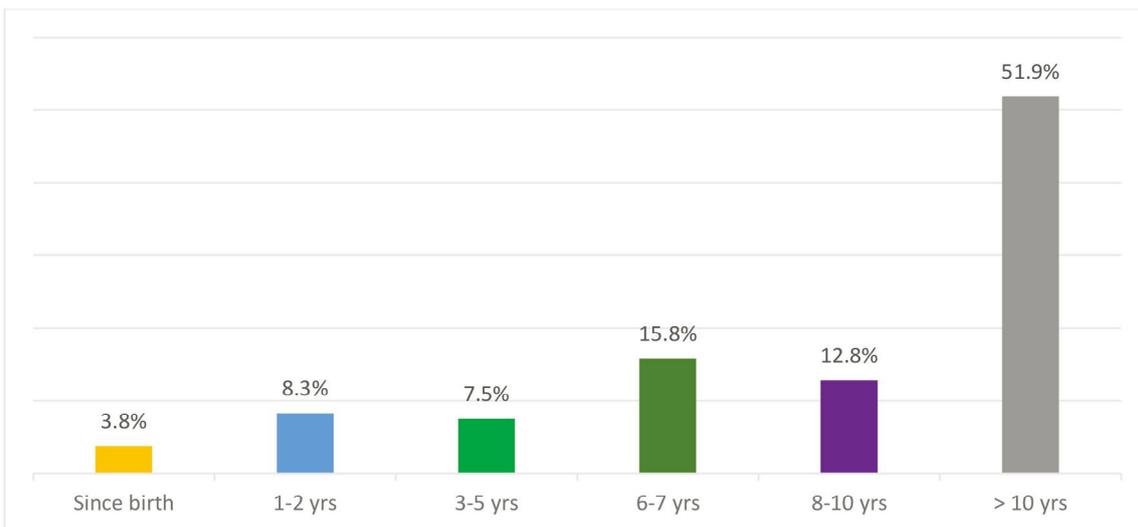
Figure 3.9. Percentage of respondents by monthly household income



3.3. Length of time in Hong Kong and residency status

3.3.1. The median year of living in Hong Kong was 12, with a range from one year to 57 years. Among these, 3.8% were born in Hong Kong, whereas a little more than half (51.9%) has lived in Hong Kong for 10 years or more (Figure 3.10).

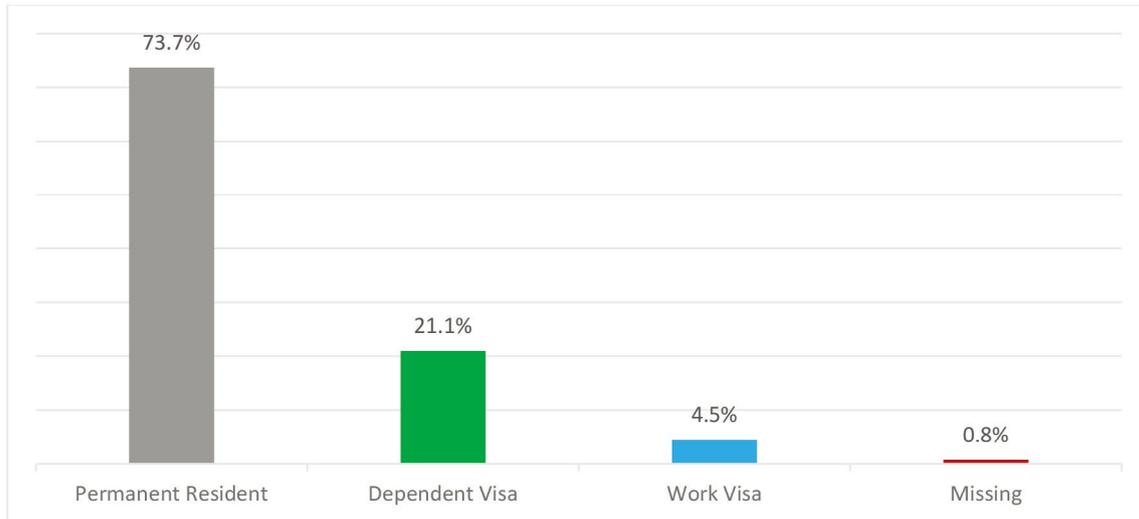
Figure 3.10. Percentage of respondents by length of time in Hong Kong



Note: LoRes=Length of time in Hong Kong; Percentages do not total 100 because of rounding.

3.3.2. Majority of respondents are permanent residents (73.7%), with 21.1% on dependent visa, and 4.5% on work visa (Figure 3.11).

Figure 3.11. Percentage of respondents by residency status



Note: Percentages do total 100 because of rounding.

3.4. Language use

To assess language use in various settings, respondents were asked to indicate the language they generally use in their daily communication, at home, with friends, and while thinking. Table 3.1 shows that majority (76%) used their native language in their daily communication, at home (80.4%), and with friends (82.8%). A few respondents indicated using a mixed of native language and English in their daily communication (15.8%), at home (15.8%), and with friends (11.3%). Only a handful used Cantonese for daily communication (5.3%), at home (3.8%), or with friends (4.5%). This indicates that the majority of women in this study interact mostly with people from their own ethnicity or with people who speak their native language.

Table 3.1. Frequency of language usage

| | Only Native | Only Eng | Only Canto | Both Native & Eng | Both Native & Canto | Both Eng & Canto |
|---------------------------------|--------------|--------------|--------------|-------------------|---------------------|------------------|
| <i>Language generally used:</i> | <i>n (%)</i> | <i>n (%)</i> | <i>n (%)</i> | <i>n (%)</i> | <i>n (%)</i> | <i>n (%)</i> |
| in daily communication | 101 (76.0) | 2 (1.5) | 1(0.7) | 21 (15.8) | 7 (5.3) | 1 (0.7) |
| at home | 107 (80.4) | 0.0 | 0.0 | 21 (15.8) | 5 (3.8) | 0.0 |
| while thinking | 116 (87.2) | 3 (2.3) | 0.0 | 11 (8.2) | 3 (2.3) | 0.0 |
| with friends | 110 (82.8) | 1 (0.7) | 1(0.7) | 15 (11.3) | 6 (4.5) | 0.0 |

Note: Native = Native language; Eng = English; Canto = Cantonese

3.5. Preferred language for media

To assess the preferred language for media (i.e., T.V., movies, and radio programs), respondents were also asked to indicate their preference for native or English or Chinese media. Table 3.2 shows that the most preferred language for TV programs (49.6%), movies (63.1%), and radio (78.9%) was in their native language, followed by preference for a mixed of native and English language (27.8% for TV, 20.3% for movies, and 11.2% for radio programs), and a mixed of native and Cantonese (12% for TV, 9% for movies, and 5.3% for radio programs).

Table 3.2. Frequency of preferred language for media

| | Only Native | Only Eng | Only Canto | Both Native & Eng | Both Native & Canto | Both Eng & Canto |
|--------------------------------|--------------|--------------|--------------|-------------------|---------------------|------------------|
| <i>Preferred language for:</i> | <i>n (%)</i> | <i>n (%)</i> | <i>n (%)</i> | <i>n (%)</i> | <i>n (%)</i> | <i>n (%)</i> |
| TV programs | 66 (49.6) | 10 (7.6) | 1 (0.7) | 37 (27.8) | 16 (12.0) | 3 (2.3) |
| Movies | 84 (63.1) | 7 (5.3) | 0.0 | 27 (20.3) | 12 (9.0) | 3 (2.3) |
| Radio programs | 105 (78.9) | 4 (3.1) | 0.0 | 15 (11.2) | 7 (5.3) | 2 (1.5) |

Note: Native = Native language; Eng = English; Canto = Cantonese

4. ANALYTICAL FINDINGS FROM THE SURVEY

This section provides findings from the statistical analyses. Of the total 133 respondents in this study, 49 (36.8%) had experienced at least one of the items listed on the Conflict Tactics Scale 2 (CTS2) in the past year and were classified as “abused group”, whereas 84 respondents did not indicate experiencing any form of abuse in the past year and were classified as “not abused group”.

4.1. Social Support, Isolation, and Patriarchal Beliefs

The average mean score of 4.22 (on a scale of 1-5) on the social support scale (see Table 4.1) indicates that the women perceived substantial social support in their lives, such as from family members, friends, and a special person, who provide them with comfort and emotional support. There was no statistically significant difference in the perceived availability of social support between the abused and not abused group.

With regard to isolation scale, the average score of 1.64 (on a scale of 0-4) indicates that overall the women in this study have limited social interactions or ties with their family and friends, and/or participate less in ethnic and cultural groups and organizations in the past year (see Table 4.1). Results of t-tests revealed that compared with the not abused group, abused women were more likely to be isolated, have fewer ties with family and friends, and less likely to engage in informal social networks ($t = 3.13, p < .01$). This finding indicates that while the women in this study perceived having adequate social support in their life, abused women are more likely to be isolated, have fewer participation in informal social gatherings and fewer connections with family and friends compared to women who did not experience abuse.

In terms of patriarchal beliefs, although results did not reveal any statistically significant difference between the abused and not abused group, the average mean score of 2.45 (on a scale of 1-5) on patriarchal belief scale indicates that the women in this study have moderate levels of adherence to patriarchal social norms (see Table 4.1).

Table 4. 1. Descriptive of the study variables (N=133)

| | All respondents (N=133) | Not abused group (n=84) | Abused group (n=49) | |
|---|----------------------------|----------------------------|------------------------|---------------|
| <i>Category</i> | Mean (SD) | Mean (SD) | Mean (SD) | <i>t-test</i> |
| Social support scale (scores: 1-5) | 4.22 (0.55) | 4.18 (0.56) | 4.29 (0.53) | -1.13 |
| Isolation scale (scores: 0-4) | 1.64 (0.79) | 1.80 (0.80) | 1.38 (0.70) | 3.13** |
| Patriarchal belief scale (scores: 1-5) | 2.45 (0.82) | 2.42 (0.72) | 2.50 (0.98) | -0.55 |

** $p < .01$ (statistically significant)

4.2. Experiences of Domestic Violence

The Conflict Tactics Scale-2 (CTS2) was utilized to measure experiences of domestic violence in the past year, pertaining to psychological aggression, physical assault, sexual coercion, and injury. Psychological aggression includes abusive behaviors such as yelling, shouting, swearing, destroying personal things, and threats of physical violence. Physical assault includes abusive acts such as being pushed, shoved, slapped, punched, or kicked. Sexual coercion is defined as behavior that is intended to compel the partner to engage in unwanted sexual activities, including verbal insistence to physical force. Injury refers to partner inflicted physical injury, indicated by bruising, sprain, needing medical attention or feeling pain for a day or more. Respondents who indicated experiencing at least one of the items in the CTS2 scale in the past year were classified as “abused group”, and respondents who did not indicate any form of abuse were classified as “not abused group”.

Among all the respondents, 49 women (36.8%) reported experiencing at least one form of abuse from their intimate partner in the past year.

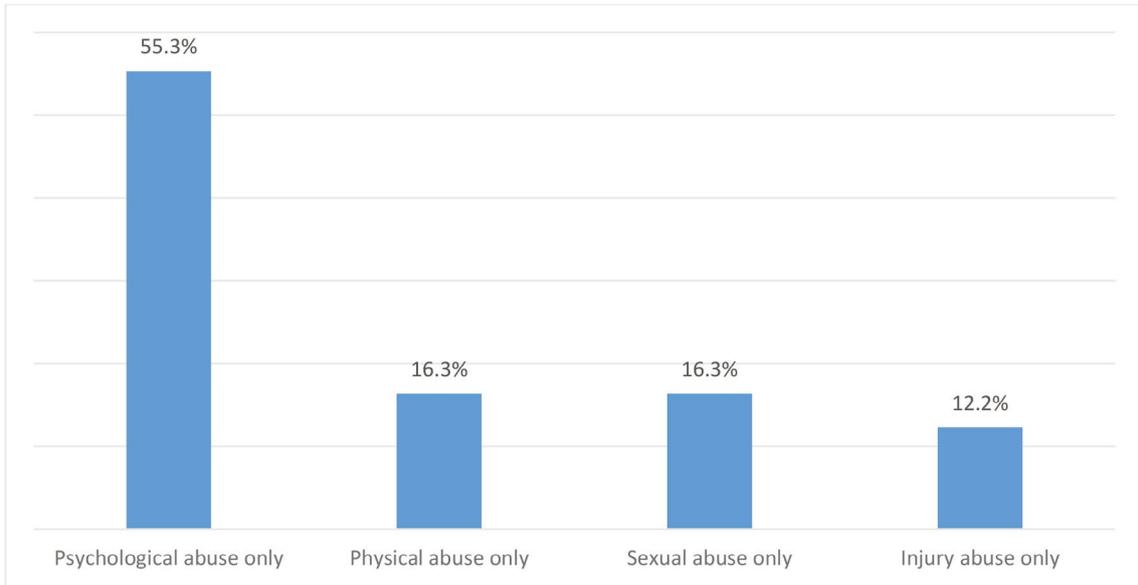
Types of domestic violence experienced

As Figure 4.1 shows, among all the types of abuse experienced in the past year, the highest form of reported abuse was psychological abuse.

Of the 49 women who reported experiencing some forms of abuse in the past year:

- 55.3% women reported experiencing psychological abuse only (e.g., being threatened, shouted, or yelled at by partner);
- 16.3% women reported experiencing physical abuse only (e.g. being pushed, shoved);
- 16.3% women reported experiencing sexual abuse only (e.g. partner insisted on having sex even when the women did not want to);
- 12.2% women reported experiencing injury abuse only (e.g. bruising, or feeling pain the next day)

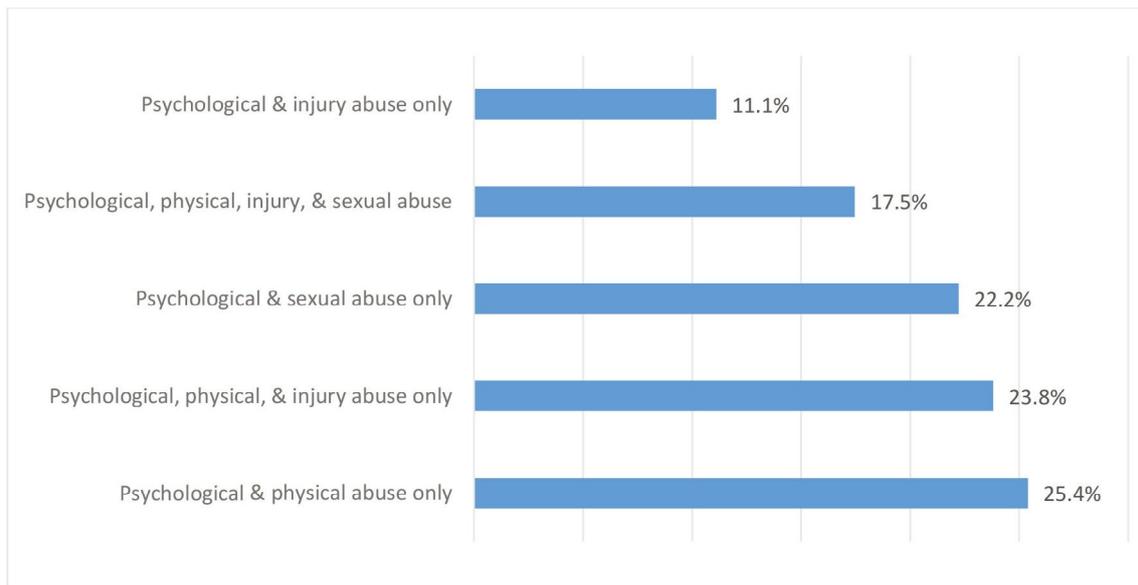
Figure 4.1. Types of domestic violence respondents experienced in the past year (N=49)



Note: Percentages do total 100 because of rounding.

Respondents also reported experiencing combination of abuse in the same or separate incident (see Figure 4.2). Among these, the largest group (25.4%) reported experiencing psychological and physical abuse, while the next largest groups reported psychological, physical, and injury abuse (23.8%), followed by psychological and sexual abuse (22.2%).

Figure 4.2. Combination of types of domestic violence respondents experienced in the past year (N=49)

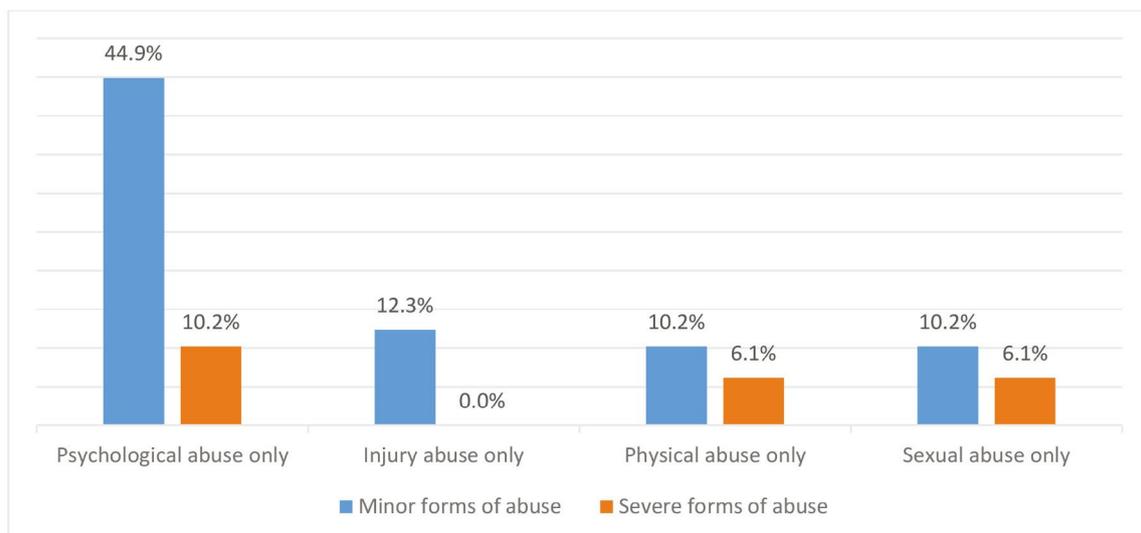


Note: Numbers do not equal 49 because some participants indicated more than one type of abuse.

Severity of Domestic Violence

- The CTS2 used to measure domestic violence in this study also consists of items that measure both minor forms of abuse (e.g. being slapped, shouted or yelled at, or insisting on having sex even when the woman does not want to), and severe forms of abuse (e.g. being choked, punched, or being forced to have sex). Respondents who reported experiencing domestic violence in the past year were further classified as to whether they experienced minor or severe form of abuse.
- Of the 49 women who reported experiencing domestic violence in the past year, 77.6% (n = 38) reported experiencing minor forms of abuse. Of the 38 women, 22 (44.9%) reported experiencing minor forms of psychological abuse (such as being shouted or yelled at), six (12.3%) reported minor forms of injury abuse (such as being bruised), five (10.2%) reported minor forms of physical abuse, and five women (10.2%) reported minor forms of sexual abuse (see Figure 4.3).
- Of the 49 women who reported experiencing domestic violence in the past year, 22.4% (n = 11) reported experiencing severe forms of abuse. Among these, five (10.2%) reported experiencing severe forms of psychological abuse, three (6.1%) reported severe forms of physical abuse, and three other women (6.1%) reported severe forms of sexual abuse (see Figure 4.3).

Figure 4.3. Severity of domestic violence reported by respondents (N=49)



4.3. Extent of help-seeking behavior

- Of the 49 women who experienced domestic violence in the past year, 37 women reported seeking some form of help.
- Of the 37 women, only 33 answered the questions about the type of help sought. Among these, 32 sought help from informal sources, and 11 women sought help from formal sources.
- Respondents who answered the questions on help-seeking were also asked to indicate their perceived helpfulness of the support they sought or received with a rating of 1= not at all helpful, 2= a little helpful, 3=somewhat helpful, 4= very helpful, and 5= extremely helpful.

4.4. Informal Sources of Help and Perceived Effectiveness of Help Sought

- As shown in Table 4.2., of the 32 women who reported seeking help from informal sources, majority were most likely to seek help from their immediate family members (65.6%), and friends (40.6%). These women were also equally likely to seek help from extended family members (25%) and partner’s family members (25%). Fewer women sought help from religious leaders (12.5%) and from co-workers/colleagues (6.2%).

Table 4.2. Frequency of informal sources of help used by participants (N=32)

| <i>Informal sources of help sought from:</i> | <i>N</i> | <i>%</i> |
|--|----------|----------|
| Immediate family | 21 | 65.6 |
| Friends | 13 | 40.6 |
| Extended family | 8 | 25.0 |
| Partner’s family | 8 | 25.0 |
| Co-worker/ colleague | 2 | 6.2 |
| Religious leaders | 4 | 12.5 |

Note: Numbers do not total 32 and percentages do not total 100 as respondents may have used multiple sources of help

- In terms of perceived effectiveness of the sources of help sought, about 34.4% of the women who sought help from their immediate family members rated it as “very” or “extremely” helpful. On the other hand, there were also 28% of women who rate it as “a little” or “somewhat” helpful (see Table 4.3).
- On average, women who sought help from friends perceived it as “a little” or “somewhat” helpful (25.1%). Fewer women found it to be “very” or “extremely” helpful (15.7%).
- On average, women who sought help from their extended family members did not find it helpful at all (12.5%), or find it to be “a little” or “somewhat” helpful (12.6%).
- Respondents who consulted their partner’s family members rated it as “a little” or “somewhat” helpful (15.7%).
- Only a small percentage of women consulted religious leaders (12.5%), most of them did not perceive it as helpful at all (6.3%).
- Support from colleagues or co-workers was perceived as “not at all helpful” (3.1%), or “a little” helpful (3.1%).

Table 4.3. Frequency, mean and SD of perceived effectiveness of informal sources of help (N=32)

| | <i>Perceived effectiveness</i> | | | | |
|-------------------------------|--------------------------------|-------------------------|-------------------------|---------------------|--------------------------|
| | <i>Not at all helpful</i> | <i>A little helpful</i> | <i>Somewhat helpful</i> | <i>Very helpful</i> | <i>Extremely helpful</i> |
| <i>Sources of help</i> | <i>n (%)</i> | <i>n (%)</i> | <i>n (%)</i> | <i>n (%)</i> | <i>n (%)</i> |
| Immediate family | 1 (3.1) | 4 (12.5) | 5 (15.6) | 7 (21.9) | 4 (12.5) |
| Friends | 0 (0.0) | 6 (18.8) | 2 (6.3) | 2 (6.3) | 3(9.4) |
| Extended family | 4 (12.5) | 2 (6.3) | 2 (6.3) | 0 (0.0) | 0 (0.0) |
| Partner’s family | 1 (3.1) | 3 (9.4) | 2 (6.3) | 1 (3.1) | 1 (3.1) |
| Co-worker/ colleague | 1 (3.1) | 1 (3.1) | 0 (0.0) | 0 (0.0) | 0 (0.0) |
| Religious leaders | 2 (6.3) | 1 (3.1) | 1 (3.1) | 0 (0.0) | 0 (0.0) |

Note: Numbers do not total 32 and percentages do not total 100 as respondents may have used multiple sources of help

4.5. Formal Sources of Help and Perceived Effectiveness of Help Sought

- Of the 33 women who reported using some form of help in the past year, 11 women accessed formal sources of help, such as the police, shelter homes, medical, and legal support (see Table 4.4).

Table 4.4. Formal sources of help and perceived effectiveness (N=11)

| <i>Formal sources of help sought from:</i> | <i>N</i> | <i>(%)</i> |
|--|----------|------------|
| Police | 4 | 36.3 |
| Shelter homes | 3 | 27.3 |
| Social workers/ Counsellor | 2 | 18.2 |
| Medical services | 1 | 9.1 |
| Lawyer/s | 1 | 9.1 |

- In terms of the perceived effectiveness of the formal sources of help sought, three of the four women who sought help from the police rated it as “not at all helpful” (see Table 4.5).
- Of the three women who accessed domestic violence shelter homes, respondents were equally likely to rate it as “not at all helpful” (9.1%), “somewhat helpful” (9.1%), and “very helpful” (9.1%).
- Two women sought help from social workers, and perceived it as “somewhat helpful” and “extremely helpful”.
- One woman sought medical services (e.g. doctors or nurses) and one sought the service of a lawyer, both of whom found it “somewhat” and “very” helpful.

Table 4.5. Frequency, mean and SD of perceived effectiveness of formal sources of help (N=11)

| | <i>Perceived effectiveness</i> | | | | |
|---------------------------|--------------------------------|-------------------------|-------------------------|---------------------|--------------------------|
| | <i>Not at all helpful</i> | <i>A little helpful</i> | <i>Somewhat helpful</i> | <i>Very helpful</i> | <i>Extremely helpful</i> |
| <i>Sources of help</i> | <i>n (%)</i> | <i>n (%)</i> | <i>n (%)</i> | <i>n (%)</i> | <i>n (%)</i> |
| Police | 3 (27.3) | 0 (0.0) | 1 (9.1) | 0 (0.0) | 0 (0.0) |
| Shelter homes | 1 (9.1) | 0 (0.0) | 1 (9.1) | 1 (9.1) | 0 (0.0) |
| Social workers/Counsellor | 0 (0.0) | 0 (0.0) | 1 (9.1) | 0 (0.0) | 1 (9.1) |
| Medical services | 0 (0.0) | 0 (0.0) | 1 (9.1) | 0 (0.0) | 0 (0.0) |
| Lawyer/s | 0 (0.0) | 0 (0.0) | 0 (0.0) | 1 (9.1) | 0 (0.0) |

4.6. Reasons/circumstances that led women to seek some type of help

- Of the 33 women who reported using some type of informal and formal help, 27 women provided the reasons/ circumstances that led them to seek for help (see Table 4.6).
- The response format to this question contained multiple options and respondents can select more than one option that applies to them.
- The largest group of women (55.5%) reported it was the concern for their children’s well-being that led them to seek for some type of help.
- Of the 27 women, 40.7% indicated that a family member or a friend encouraged them to seek for help.
- Other reasons such as increased abuse (11.1%), to gain knowledge about legal options (7.4%), counselling (7.4%), and “last option” (7.4%) were listed by fewer women as the reasons for seeking help.

Table 4. 6. Reasons for seeking help (N=27)

| <i>Reasons for help-seeking</i> | <i>Frequency</i> | <i>%</i> |
|---|------------------|----------|
| Concern for their children’s well-being | 15 | 55.5 |
| Recommended by a family member/ friend | 11 | 40.7 |
| Increased abuse | 3 | 11.1 |
| Last option | 2 | 7.4 |
| To know about legal options | 2 | 7.4 |
| To know about counselling information | 2 | 7.4 |
| Medical reason or injury | 1 | 3.7 |

Note: Number do not total 27 and percentage do not total 100 as respondents may have indicated multiple reasons that led them to seek for help

5. PREDICTORS OF DOMESTIC VIOLENCE AND HELP-SEEKING BEHAVIOR

A series of regression analyses was conducted to assess the predictive factors of domestic violence and help-seeking.

5.1. Predictive factors of domestic violence

A binary logistic regression was performed to determine which of the variables (i.e., age, residency status, children age 15yrs or younger living with them, perceived social support, isolation, and patriarchal beliefs), predict the likelihood of respondents being abused.

The full model containing all predictors was statistically significant, $\chi^2(6, N=133) = 25.88, p < .001$, indicating that the model was able to distinguish between respondents who reported and did not report being abused in the past year. The model as a whole explained 24.3% (Nagelkerke pseudo R^2) of the variance in domestic violence.

As shown in Table 5.1, the strongest predictor for domestic violence (i.e., abused or not abused) is age, $B = -.06, p < .01$, recording an odds ratio of .939. This indicates that for every 1 year increase in age, respondents were .94 times or 6.1% times (.939-1=0.061) less likely to report being abused, controlling for other factors in the model. In other words, the risk of being abused decreased as age increased. Previous studies have also reported that younger women (e.g., age 18-34) are most at risk for different types of violence than older women (Broadhurst, Bouhours, & Bacon-Shone, 2012; Mouzos & Makkai, 2004).

Residency status (i.e., whether permanent resident or not) also emerged as a significant predictor for domestic violence, $B = 1.09, p < .05$, with an odds ratio of 2.98. This indicates that those who have permanent residency status in Hong Kong are 2.9 times more likely to report being abused (see Table 5.1) compared with women who are on dependent visa. Previous studies have observed that immigrant women who are dependent on their (abusive) spouses for legal and/or economic protection often experience threats of deportation and other controlling forms of abuse (Orloff, 2002), and were less likely to report when facing abuse.

Isolation also emerged as a significant predictor of domestic violence, $B = -.08, p < .05$, recording an odds ratio of .922. This indicated that for every 1-point increase in isolation scale (measuring ties with family, friends, social and cultural groups) respondents were .922 times or 7.8% times ($0.922 - 1 = -0.078$) less likely to experience abuse, controlling for other factors in the model. In other words, women who have stronger ties to their family, friends, and social and cultural groups are less likely to report experiencing domestic violence (see Table 5.1).

The variables of social support and patriarchal beliefs did not emerge as statistically significant predictor for abuse. Hence, no further discussion is provided for these two variables.

Table 5.1. Logistic regression analysis for predictive factors of domestic violence (N=133)

| | B | S.E. | Wald | Exp (B) | <i>p</i> |
|------------------------------------|-------|------|------|---------|---------------|
| Age (years) | -0.06 | 0.02 | 7.79 | 0.939 | .009** |
| Residency status | 1.09 | 0.52 | 4.83 | 2.980 | .037* |
| Have children age 15yrs or younger | 0.32 | 0.52 | 0.74 | 1.381 | .532 |
| Social support | 0.03 | 0.03 | 0.78 | 1.035 | .284 |
| Isolation | -0.08 | 0.03 | 5.05 | 0.922 | .013* |
| Patriarchal Beliefs | 0.01 | 0.05 | 0.02 | 1.013 | .782 |

p*<.05; *p*<.01 (statistically significant)

5.2. Predictive factors of help-seeking behaviors

A binary logistic regression was conducted to determine if any of the independent variables, i.e., age, residency status, children age 15yrs or younger living with them, social support, isolation, and patriarchal beliefs, predicted women’s help-seeking behaviors (sought help or not sought help). Due to inadequate number of cases, age and residency status were excluded from this model. For the purpose of analysis, help-seeking was transformed to a dichotomous variable: 1=sought help; 0= did not seek help.

A total of 49 cases were included in the analysis in this model. The full model containing all predictors was moderately significant, $\chi^2(4, N=49) = 9.98, p <.05$. The model as a whole explained 25.4% (Nagelkerke pseudo R^2) of the variance in help-seeking behaviors.

The log of the odds of help-seeking (i.e. sought help or did not seek help) is positively related to whether one have children 15yrs or younger living with them, $B=2.12, p<.05$. The Wald test of the regression coefficient associated with having children 15yrs or younger is a significant predictor of seeking help, recording an odds ratio of 8.38 (see Table 5.2). This indicated that respondents who have children under age 15yrs living with them were over eight times more likely to seek for some kind of help when facing domestic violence than those who do not have children, controlling for other factors in the model.

The variables of social support, isolation, and patriarchal beliefs were not statistically significant as a predictor for help-seeking. Hence, no further discussion is provided for these variables.

Table 5.2. Logistic regression analysis for predictive factors of help-seeking (N=49)

| | B | S.E. | Wald | Exp (B) | <i>p</i> |
|--------------------------------|-------|------|------|---------|--------------|
| Have children 15yrs or younger | 2.12 | 0.93 | 5.21 | 8.377 | .022* |
| Social Support | 0.06 | 0.06 | 0.88 | 1.058 | .349 |
| Isolation | -0.09 | 0.07 | 1.86 | 0.909 | .172 |
| Patriarchal Beliefs | -0.07 | 0.06 | 1.09 | 0.931 | .296 |

**p<.05 (statistically significant)*

6. QUALITATIVE ANALYSIS

This segment of the report presents the findings from the qualitative in-depth interview conducted with ten women from a subset of the quantitative study in March 2017. All interviews were conducted by social workers of HKCS at the premises of the Hong Kong Christian Service. Except for one, all interviews were conducted in the native language of the respondents with the help of a translator.

The qualitative study was conducted to supplement the quantitative data in understanding women's experiences of domestic violence and their help-seeking behaviors. Additional question with regard to their perceived impact of witnessing abuse on their children were also asked during the interview.

Findings from the qualitative data are presented below and organized under the following themes: experiences of domestic violence; sources of help sought and perceived effectiveness of those sources; and mother's perceived impact of witnessing domestic violence on their children. Pseudonyms are used for each participants (e.g. R1=Respondent 1, and so on).

6.1. Demographic characteristics

Respondents of the qualitative study ranged in age from 25 to 43 years, with a median age of 37.5. All the ten women are currently married to their spouse (median years of marriage =19), and have two or more children living with them. Of the ten women, 40% are Pakistani, 40% Nepali, and 20% Indian.

6.2. Experiences of domestic violence

Of the ten women, seven reported experiencing minor conflict/ disagreement with their husband, whereas three women indicated that they did not experience any domestic violence.

All seven women reported that they did not experience any physical assault or injury or sexual abuse or threats during such conflict or disagreement with their spouses.

Some of the reasons for the conflict/disagreement cited by the respondents were due to conflict of interest (R1 & R4), husband's extramarital affair (R2), due to husband coming home late at night (R5 & R6), or due to minor daily issues (R3 & R9). Because there was no physical abuse or violence, the women viewed it as "conflict", and not as "domestic violence".

6.3. Sources of support/ help sought and perceived effectiveness of those sources

Of the seven women who reported experiencing conflict/ disagreement in their relationship, most sought help or talk with various sources such as their parents and/or siblings (n=4); in-laws (n=2); and friends (n=2). Two of the respondents said they did not share or talk to anyone.

The responses they received from their sources of support were in the form of “advice” regarding how to handle or deal with the conflict/disagreement. Some were advised to “follow their husband” (R3 & R9). Some of the respondents said they felt “relief”, “good”, and “better” after talking/sharing to their sources of support.

Although three of the respondents indicated that they did not experience any abuse or violence in their relationship, when asked to share if, hypothetically, they ever experience abuse/ violence in their relationship what they would do. One said she will seek outside help only if her husband becomes physically abusive, and two said they would seek help from social worker and/or the police. Interviews with social workers in this study also noted that often minority ethnic women will not seek formal help unless they and their children are at risk of serious harm or threat.

6.4. Mother’s perceived impact of witnessing domestic violence on their children

Respondents were also asked if their children ever witness the conflict between them and their spouse, and what impact it might have on the children. Three of the respondents said their children witness the conflict between the couple a few times (R1, R2, & R3), and two respondents (R5 & R9) said their children did not witness the conflict as it usually occur after the children slept, or in the privacy of their bedroom, but felt that it could have adverse impact on their children if they witness or are aware of the conflict between the parents.

One respondent shared that her child (age 5) might be affected psychologically as the child speaks slower than peers of the same-age, and has difficulty in expressing her feelings. Two of the women who reported that they did not experience any abuse also shared that witnessing domestic violence in the family can have negative impact on the children, which can also affect their education. Another respondent shared that her older son (9 years old) became withdrawn and wary of his father after witnessing the conflict between his parents.

7. SUMMARY AND CONCLUSION

Using survey questions and in-depth interviews, this study examined the experiences of domestic violence and their related help-seeking behaviors among minority ethnic women in Hong Kong.

7.1. Extent of Domestic Violence

A total of 133 minority ethnic women participated in this study. Of this, 37% reported some form of psychological, physical, sexual, or injury abuse from their spouse in the past year. Broadhurst, Bouhours and Bacon-Shone (2012) surveyed a random sample of 1,297 Hong Kong women between December 2005 and March 2006 in Hong Kong and reported a one-year prevalence rate of intimate partner violence of 1.5% for physical violence only, 0.9% for sexual violence only, and 1% for any type of violence. Although our sample is not a likely representative sample of minority ethnic women or South Asian women in Hong Kong, the current study found a much higher one-year prevalence rate of 6% for physical abuse only, 6% for sexual abuse only, and 4.5% for injury abuse only. Thus, the 36.8% of women in the current study who reported experiencing some form of domestic violence in their intimate relationship may be an underestimate.

7.2. Types of domestic violence

Among all the women who reported experiencing domestic violence, psychological abuse was the most prevalent forms of abuse reported by the largest number of women. Psychological abuse varies from verbal abuse and insults to destroying personal belongings. The frequency of being shouted at, or swore at, or being yelled at was greater than other forms of psychological abuse such as destroying the woman's personal belongings. Because the impact of psychological abuse cannot be immediately visible compared with the impact from physical abuse or injury or assault, the woman, the family, and the community may downplay or minimize the extent of the abuse, or may not even consider it as abuse. In the qualitative interview, most of the women in this study who reported the use of "abusive words" by their spouse during their conflict/disagreement also did not consider it as a form of abuse. According Dr. Edward Chan Ko-ling, even social workers often find it difficult to identify psychological abuse (SCMP, 26 November, 2016). As psychological abuse can escalate to physical abuse (Davies et al, 2007), and because it can have adverse impact on the psychological well-being of the woman, which usually deteriorates over time, it is important that women themselves, and the family, and the community be made aware that psychological abuse are just as harmful and detrimental even in the absence of physical violence or assault or injury.

7.3. Help-seeking and sources of help sought

In this study, majority of the women sought informal help from family and friends, and only 11 women reported seeking help from formal sources such as police, or shelter homes, or social workers. Of the 11 women, only one woman rated the support from social worker as “extremely helpful”, whereas three of the four women who approach the police said they did not find it helpful at all. Anecdotal sharing from South Asian women and past studies (e.g. Tonsing, 2014), have also noted that the advice often received from the police is to “go home”. If the home environment is not safe for the woman to return home, such advice, without understanding the circumstances may be detrimental to the safety of the woman.

Due to language barriers and lack of cultural sensitivity, minority ethnic women are often deterred from seeking help or accessing formal support systems such as the domestic violence shelter homes (Tonsing, 2014). Interviews with social workers in this study also noted that lack of cultural sensitivity on the part of mainstream service providers and public services (e.g. police, social workers/helping professionals) may hinder them from providing appropriate services to minority ethnic women.

7.4. Social ties and integration

In this study it was observed that abused women were more likely to be isolated and have fewer ties to social and cultural networks. The mean score on the social isolation scale (which measured ties with informal social networks including social and cultural groups) was significantly lower for abused women compared with women who did not face domestic violence. As majority of abused women in this study are housewives, and not engaged in employment, they may have less opportunity for social integration and interaction with the community, and thus may also be less likely to seek help, or know where to seek help if they need to.

7.5. Social support

Although social support did not emerge as significant predictor for help-seeking, overall, respondents in this study scored high on the social support scale, indicating that they have adequate social support in their lives. This can be observed from the findings that the preferred mode of seeking help among women who faced domestic abuse was from informal sources such as family and friends.

However, social support from family and friends can have both a negative and positive dimensions. While majority of the women in this study said they received support from family and friends, and felt “relief” and “better” after talking with them, sometimes the advice they received from those sources may not always be helpful, such as, being advised to “follow” the husband, or to try and work things out with their husband [abuser].

8. RECOMMENDATIONS

- ▶ Past studies have revealed that language barrier is a major problem for minority ethnic women's living and adjustment in Hong Kong, which also hinder them from accessing supportive services when encountering domestic violence.
- ▶ Based on research data as well as sharing from frontline workers, minority ethnic women often rely on their informal networks as they are unable to access information about resources or supportive services due to language barrier. To ensure that minority ethnic women are able to gain access to essential public information and social service, such as knowledge about domestic violence, legal, financial aspects, etc., it is imperative that the government provide essential public and social service information, as well as making referrals to related department, in the ethnic minority languages, so as to minimize the barriers of getting the appropriate services.
- ▶ Additionally, NGOs can also utilize the strength of community peer support group and train ambassadors, to disseminate information about public and social services to minority ethnic community, through outreaching and conducting mobile information booth in the community. This will also help to ensure that minority ethnic women are able to get access to pertinent information about available supportive public and social services.
- ▶ As existing domestic violence shelter homes and refuge centers in Hong Kong are mainly targeted for Chinese-speaking clients, there is an urgent need to establish ethnic minority women refuge center so that appropriate and culturally supportive services can be provided in a timely manner.
- ▶ Moreover, there are no interpreters available at existing refuge centers or shelter homes who can provide immediate assistance to social workers, especially for crisis situation. Therefore, they can only rely on outsiders such as interpretation services provided by HKCS CHEER Interpretation Services or Hong Kong Translingual Services. In addition, government should provide more resources for training interpreters at Police stations, Court and related departments, to provide appropriate services to service users.

- ▶ On-going and mandatory cultural sensitivity trainings for mainstream service providers are needed. Greater awareness and cultural sensitivity training among agency personnel of existing shelter homes and refuge centers, frontline helping professionals, and first responder such as the police, should be promoted for better understanding of how domestic violence is manifested among minority ethnic women in order to provide better legal protection, and other services to victims of domestic abuse. There is also a concerted need for mainstream service providers to tailor and use culturally relevant prevention and intervention messages and protocols to meet the needs of these women.

- ▶ To develop better understanding of diversity, it is also important to start with educating the next generation with acceptance and diversity, better attitude to people who are from different ethnicity.

- ▶ Women approach to help-seeking is shaped and embedded by a combination of the individual and structural perspectives. Attempts at convincing women to leave abusive relationship are unlikely to be effective. As the family is often the first source of support sought, greater effort should be targeted at developing and strengthening family support interventions to help in reducing the stressful impact of domestic violence in the lives of the women.

- ▶ There is also a concerted need to promote greater awareness in the community about different forms of domestic violence and its consequences, and where to seek help. Unlike physical assault or injury, psychological abuse does not leave any visible physical scars and can remain undetected and often undermined by the women, which can be detrimental to the women's psychological and mental health well-being.

- ▶ Furthermore, witnessing domestic violence in the home can have detrimental impact on the psychological well-being of children. Therefore, it is also imperative to promote awareness about the impact of witnessing domestic violence on the bio-psycho-social well-being of the children. Policy and practices for helping minority ethnic women victims of domestic violence should also encompass supportive services for the welfare of children.

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🏠 33 Granville Road, Tsimshatsui,
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