Availability of Domestic Violence Services for Latinas in New York State, Preliminary Report

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Each year approximately 1500 women are murdered by their partners.\textsuperscript{1} According to the federal National Crime Victimization Redesigned Survey, approximately one million women experience intimate partner violence annually.\textsuperscript{2} Violence between current or

\textsuperscript{1} BUREAU OF INVESTIGATIONS, U.S. DEP'T OF JUSTICE, UNIFORM CRIME REPORTS FOR THE UNITED STATES 19 (1991). Of the domestic violence victims reported to the Bureau, 847 were wives of the offender, and 483 were girlfriends of the offender. \textit{Id.}

\textsuperscript{2} RONET BACHMAN, U.S. DEP'T OF JUSTICE, OFFICE OF JUSTICE PROGRAMS, BUREAU OF JUSTICE STATISTICS, VIOLENCE AGAINST WOMEN: ESTIMATES FROM THE REDESIGNED SURVEY 3 (Aug., 1995) [hereinafter 1995 REDESIGNED SURVEY]. A report based on a prior survey stated that the women most vulnerable to violent crime generally are "black, Hispanic, in younger age groups, never married, with lower family income and lower education levels, and in central cities." \textit{Id.}
former intimate partners, "domestic violence,"\textsuperscript{3} is a continuing threat to New York State's population, particularly to women. According to the New York State Department of Social Services, "[d]omestic violence has emerged as one of the greatest contributors towards family dissolution."\textsuperscript{4}

Despite governmental and community-based efforts, domestic

\textsuperscript{3} In prior articles I have set forth my objections to labeling such violence as “domestic.” See Jenny Rivera, \textit{Domestic Violence Against Latinas by Latino Males: An Analysis of Race, National Origin, and Gender Differentials}, 14 B.C. THIRD WORLD L.J. 231, 232 n.5 (1994); \textit{Puerto Rico's Domestic Violence Prevention and Intervention Law and the United States Violence Against Women Act of 1994: The Limitations of Legislative Responses}, 5 COLUM. J. GENDER & L. 78, 79 n.8 (1995); \textit{The Violence Against Women Act and the Construction of Multiple Consciousness in the Civil Rights and Feminist Movements}, 4 J.L. & POLICY 463, 465 n.6 (1996). Now a part of common social parlance, "domestic violence" is a somewhat misleading phrase for abusive conduct which occurs between current or former intimate partners. It is an oxymoron to speak of violence in any form as being "domestic." However, since domestic violence is now the commonly recognized name for violence occurring in relationships between current or former intimate partners, the term is used throughout this document in reference to this category of violence and abusive conduct.

\textsuperscript{4} \textbf{The DOMESTIC VIOLENCE PREVENTION ACT (CHAPTER 838 OF THE LAWS OF 1987), 1995 NEW YORK STATE DEPARTMENT OF SOCIAL SERVICES ANN. REP. 1 [hereinafter 1995 NYSDSS ANN. REP. ]}. The report explains the extensive impact of domestic violence on individual lives and social systems:

Domestic violence can have traumatic effects on children who witness the abuse, has been identified as one of the most common problems experienced by families receiving foster care and preventive services, and is a major contributing factor in child fatality cases. Its impacts have overburdened the homeless system, the criminal justice system, the health care and the social service system.

\textit{Id.}

In its 1994 Report, the Department of Social Services reached similar conclusions: “Domestic violence contributes to unemployment rates, poverty, child abuse, health and mental health costs, juvenile delinquency and crime levels and homelessness.” \textbf{The DOMESTIC VIOLENCE PREVENTION ACT (CHAPTER 838 OF THE LAWS OF 1987), 1994 NEW YORK STATE DEPARTMENT OF SOCIAL SERVICES ANN. REP. 1 [hereinafter 1994 NYSDSS ANN. REP. ]}. 
violence continues to be a reality for too many of New York State's citizenry. Although New York City had an 18% decrease in 1995 of reported domestic violence offenses, the total number of the city's reported offenses of domestic violence by husbands is 16,104; outside of New York City, domestic violence offenses increased 26% in 1995.5

For Latinas, the system-wide obstacles to service provision, in addition to domestic violence-related obstacles already faced by Latina survivors, create distinct hardships. Unique needs prevalent in a diverse society engender demand for domestic violence services appropriate to identifiable linguistic and cultural communities.

In 1985, the newly formed New York State Spanish Domestic Violence Hotline Advisory Committee, a coalition of Latina community activists, announced as its mission a commitment to ensuring adequate and comprehensive service provision for Latinas who are battered.6 As part of its responsibilities, the Advisory Committee reviews and evaluates the status of domestic violence service provision to the Latino community. The committee relies on information from the New York State Department of Social Services, other service providers, Latino social service organizations, and the New York State Spanish and English Domestic Violence Hotlines.

Concerned about what appeared to be a growing disparity between demand and services, in 1997 the Advisory Committee instituted a study of the availability of existing domestic violence services for Latinas in New York State. This report explores preliminary results of the initial stages of this study, and avenues for improving the availability of domestic violence services for Latina survivors in New York State. The report relies on three information-gathering tools: a written service provider survey; statistical information; and telephone interviews of service providers, anti-

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5 VIOLENCE INTERVENTION PROGRAM, DOMESTIC VIOLENCE FACT SHEET (on file with the author).
6 NEW YORK STATE SPANISH DOMESTIC VIOLENCE HOTLINE, ADVISORY COMMITTEE GUIDELINES (on file with the author).
domestic violence advocates, and women survivors.

Part I sets forth data on the incidence of domestic violence in the Latino community. Part II discusses the New York State legislative and regulatory mandates applicable to service providers. Part III discusses the study methodology and results. Part IV examines possible conclusions and policy concerns suggested by this preliminary study. Finally, Part V sets forth recommendations based on the preliminary results of this initial study.

I. INCIDENCE OF DOMESTIC VIOLENCE IN THE LATINA COMMUNITY IN NEW YORK STATE

According to the 1995 federal Redesigned Survey, intimate partner violence is quantifiably similar throughout New York State’s diverse urban, suburban and rural populations. “In general, there was little variation in the extent to which women living in urban, suburban or rural locations experienced violence by intimates.” Nevertheless, in analyzing the experience of New York State’s Latino community with domestic violence, specific statistics are crucial indicators of regional differences. As such, data from the New York State Spanish Domestic Violence Hotline (NYSSDVH) and Violence Intervention Program (VIP) are extremely useful indices.

The New York State Spanish Domestic Violence Hotline ("Hotline") is a 24 hour, toll-free, multi-service provider, established in 1985. The Hotline provides Spanish-speaking domestic violence survivors, and other New York State domestic violence service providers, with a variety of services, including domestic violence counseling, crisis intervention, counseling referrals, and shelter, police, medical and court advocacy. As of December 1995, the VIP, the only Latina-run domestic violence bilingual/bicultural residential

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7 1995 REDESIGNED SURVEY, supra note 2, at 5.
8 NEW YORK STATE SPANISH DOMESTIC VIOLENCE HOTLINE FINAL REPORT 1 (Feb., 1997) [hereinafter 1997 NYSSDVH FIN. REP.].
9 Id. at 1.
and nonresidential services provider in New York State, has been responsible for the overall operations of the Hotline.\(^{10}\)

Federal and State statistical and other domestic violence-specific data include Department of Justice statistics, census data, and statistics from the State's Spanish and English Hotlines and the VIP's New York City Hotline. The statistics illustrate the severity of domestic violence in New York State. In 1990, for example, 88,227 domestic violence cases were reported in New York State, and 44,677 in New York City.\(^{11}\) During the past two years, the State's and City's English and Spanish hotlines and the VIP's Hotline, combined, have handled over 30,000 calls.\(^{12}\)

As public knowledge about domestic violence and service outreach has expanded, the demand for assistance has increased. For example, in the 1994/1995 contract year, New York State's English language hotline has received approximately 8,000 calls.\(^{13}\) In 1996, the Spanish hotline responded to over 3,500 calls,\(^{14}\) as opposed to approximately 2,500 calls in 1994.\(^{15}\)

Federal reports indicate that while domestic violence appears to

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\(^{10}\) *Id.* at 2. In addition to managing the New York State Spanish Domestic Violence Hotline, the VIP also manages its own New York City hotline. The VIP city bilingual hotline provides crisis and shelter services in both Spanish and English.


\(^{14}\) 1996 NEW YORK STATE DOMESTIC VIOLENCE HOTLINE, QUARTERLY & OCTOBER MONTHLY NARRATIVE REPORT 1.

\(^{15}\) 1994 NYSDSS ANN. REP, *supra* note 4, at 3.
occur in consistent rates among racial and ethnic populations, women with an annual family income less than $10,000 were more likely to report domestic violence incidents than those with an income over $10,000. This is materially relevant in assessing New York State's services availability for Latinas, since 17.8% of the households in New York with incomes below $10,000 are Latino.

Although the State does not maintain accessible race and ethnic-specific domestic violence statistics, the data compiled by the VIP and New York State Spanish Domestic Violence Hotline provide information on Latina service requests. Since 1994, VIP reported a total of 425 calls from Spanish-speaking women in calendar year 1996, more than double the 192 calls it handled in 1995. According to VIP Hotline statistics, of the 372 New York City Spanish-language calls in 1996, the overwhelming majority came from Manhattan. Additionally, the State Hotline received 6000 calls

16 1995 REDESIGNED SURVEY, supra note 2, at 4.
17 Id. The report does not present conclusions based on the information from its survey. We cannot conclude that intimate partner violence is any less significant an issue qualitatively or quantitatively based on educational attainment or economic status. The statistics may reflect, instead, the difficult position and economically marginal status of women with low levels of formal schooling and income, stressing the need for the provision of external resources to assist this population.
19 1997 NYSSDVH FIN. REP, supra note 8, at 1.
21 Id. The breakdown for the calls from the boroughs is: Manhattan (231); Bronx (70); Queens (48); Brooklyn (21); and Staten Island (2). Id. There were 47 calls of unknown origin. VIP also received one call each from Boston, Florida, Massachusetts, New Jersey, Puerto Rico and Virginia in 1996. Moreover, the calls to the VIP Hotline from English-speaking Latinas was 4,582 for 1996, almost double the 1,976 received in 1995. Id. Prior to 1996, the VIP did not track calls by borough. The increase in calls in 1996 may be due to greater public information about domestic violence and to an increase in hotline staff, from one to two, during May through August, 1996.
since 1994. Hotline data specifies the New York State counties with the largest numbers of calls.\textsuperscript{22}

These records indicate that New York City's counties (the five boroughs), and Albany, Dutchess, Erie, Monroe, Nassau, Orange, and Westchester increased in the expected proportions of domestic violence from the five month period in 1995 to the twelve month period in 1996.\textsuperscript{23} However, Onondaga showed no increase and Ulster had only one additional call during the longer period of 1996.\textsuperscript{24} In addition, calls from Rensselaer and Rockland both increased dramatically.\textsuperscript{25} Of these counties with high numbers of telephone calls, the counties with the largest concentrations of Latino and Latina populations are, in descending order: Bronx, Kings, New York,

\textsuperscript{22} \textit{New York State Spanish Domestic Violence Hotline Report} (Nov., 1995) [hereinafter Nov., 1995 NYSSDVH REP.]. The statistics from July to November, 1995 are as follows: Queens (289 calls), Manhattan (New York County) (224), Bronx (229), Brooklyn (Kings County) (207), Orange (including Newburgh and Middletown) (162), Westchester (including White Plains and Yonkers) (87), Nassau (including Hempstead, Long Island) (74), Onondaga (including Syracuse) (35), Suffolk (including Hauppauge and Bay Shore, Long Island) (30), Ulster (including Kingston) (22), Staten Island (Richmond County) (21), Albany (17), Dutchess (including Poughkeepsie) (15), Erie (including Buffalo) (14), and Monroe (including Rochester) (12). \textit{Id.}

During the 1996 contract period, which covered the twelve month cycle from October 1995 to 1996, these numbers changed somewhat notably. During this period the largest numbers of calls were, in descending order, from: Manhattan (523), Queens (421), Bronx (352), Brooklyn (325), Orange (243), Westchester (138) and Nassau (138), Suffolk (74), Staten Island (40), Onondaga (35), Dutchess (30), Albany (27), Ulster (23), Rockland (22), Essex (21), Rensselaer (including Troy) (20), and Monroe (15). \textit{New York State Spanish Domestic Violence Hotline Report} (Oct., 1996) [hereinafter Oct., 1996 NYSSDVH REP.].

\textsuperscript{23} \textit{See} Nov., 1995 NYSSDVH REP., \textit{supra} note 22.

\textsuperscript{24} Oct., 1996 NYSSDVH REP., \textit{supra} note 22.

\textsuperscript{25} \textit{Id.} The number of calls of unknown origin also increased dramatically. During the 1995 period there were 57 and for the 12 month 1996 period there were 688. In the 1995 period Rensselaer had one call and Rockland 3, while in 1996 these numbers increased almost 2000 percent for Rensselaer (to 20 calls) and 600 percent for Rockland (to 22 calls). Nov., 1995 NYSSDVH REP., \textit{supra} note 22.
Queens, Erie, Suffolk, Westchester, Richmond, Monroe, Orange, Rockland and Dutchess.  

Intimate partner violence has so extensively impacted society that it is the subject of several comprehensive federal and state legislative initiatives. As a result of a recent interest in intimate partner violence, various state and city initiatives have been implemented to address the needs of domestic violence survivors, including funding and supervision of residential and nonresidential services. In fact, legislation complements an array of advocacy and policy initiatives developed and implemented by the executive branches of government at the federal and state levels, and supplements the intricate web of services designed and provided by advocates for the survivors and targets of domestic violence.

II. NEW YORK STATE DOMESTIC VIOLENCE LEGISLATIVE AND REGULATORY MANDATES

Article 6-A of the New York State Social Services Law, the

26 BUREAU OF THE CENSUS, US DEP’T OF COMMERCE, 1990 CENSUS OF POPULATION, GENERAL POPULATION CHARACTERISTICS, NEW YORK TABLE #54 327 (1992). The majority of the Latino population is concentrated in New York City and the two counties of Long Island (Suffolk and Nassau combined), totaling approximately 1,948,749, and constituting approximately 82% of the state's Latino population. The other county with a large Latino population is Westchester, with 86,194 Latinos, or 3.6% of the state's Latino population. Id.


28 For a list of New York State domestic violence service providers and their services, see NEW YORK STATE COALITION AGAINST DOMESTIC VIOLENCE, INC., 1996-97 DIRECTORY OF SERVICES FOR VICTIMS OF DOMESTIC VIOLENCE IN NEW YORK STATE (1997) [hereinafter 1996/1997 SERVICES DIRECTORY].
Domestic Violence Prevention Act ("Act"), sets forth requirements and definitions for residential and non-residential services for domestic violence victims.\(^{29}\) The Department of Social Services defines a victim of domestic violence as:

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\text{any person 16 years of age or older, any married person or parent accompanied by his or her minor child or children in situations in which such person or person's child is a victim of an act which would constitute a violation of the Penal Law, including, but not limited to acts constituting disorderly conduct, harassment, menacing, reckless endangerment, kidnapping, [sic] assault, attempted assault, or attempted murder . . .}^{30}
\]

Additionally, the act of violence must be caused by a family or household member, and result in actual injury or create a substantial risk of such injury to the person or child and the act.\(^{31}\) Family or household members are defined broadly to include relatives by blood or marriage, current and former spouses, persons with a child in common, unrelated persons who currently or formerly lived in the same household, and "unrelated persons who have had intimate or continuous social contact with one another and who have access to one another's household."\(^{32}\)

The Department's regulations issued pursuant to its authority under the Act detail the requirements and standards applicable to various categories of domestic violence service providers in New York State. The regulations apply to domestic violence safe


\(^{30}\) N.Y. COMP. CODES R. & REGS. tit. 18, § 452.2(g) (1995).

\(^{31}\) Id.

\(^{32}\) Id. at § 452.2(g)(2)(i)-(vi).
dwellings, programs, and shelters; safe home networks, and safe homes.

The Department's regulations specifically set forth a requirement that residential programs provide for non-English speaking populations.

Each program must either be available to victims and their minor children who have special needs, including but not limited to physically handicapped, hearing impaired, and non-English speaking victims, or have a plan to refer such persons to any available appropriate programs, including residential programs.

\[33\] A *domestic violence safe dwelling* is defined as:

a self-contained residence which is owned, leased, rented or otherwise under the direct control and supervision of a domestic violence sponsoring agency, meets the daily living needs of the residents, has a capacity of nine or fewer persons including adults and children . . . , and has been designated by the domestic violence sponsoring agency to provide temporary shelter exclusively to victims of domestic violence.

*Id.* § 452.2(a).

\[34\] A *domestic violence program* is defined as:

a facility which would meet the definition of domestic violence shelters, except that victims of domestic violence and their minor children, if any, constitute at least 70 percent of the clientele of such programs. The remaining 30 percent of the clientele of such programs may only consist of persons who will not be disruptive of the provision of services and will not jeopardize the safety and well-being of the residents.

*Id.* § 453.2(a).

\[35\] A *safe home network* is "an organized network of private homes offering temporary shelter and emergency services to victims of domestic violence . . . , and their minor children, if any, such network must be coordinated by a not-for-profit organization." N.Y. COMP. CODES R. & REGS. tit. 18, § 454.2(d) (1995).

\[36\] A *safe home* is a "self-contained private residence" approved by a safe home network "for the purpose of providing temporary shelter to victims of domestic violence . . . , and their minor children, if any." *Id.* § 454.2(c).
for victims of domestic violence.\textsuperscript{37}

Moreover, the Department's regulations require programs to recruit paid and volunteer staff to address the needs of the communities served by these programs.\textsuperscript{38} As a consequence, programs serving the Latino community must diversify their staff, both paid and volunteer, to include Latino personnel who speak Spanish.

Programs must develop a plan to recruit paid and volunteer staff who are representative of the cultural values and ethnic composition of the community being served. This includes the \textit{recruitment of bilingual staff when the program is located in an area serving a significant non-English speaking population}. Such bilingual staff must speak the language of the community being served.\textsuperscript{39}

Arguably, any denial of services, or acceptance of Latina non-English speaking survivors without providing appropriate services, violates not only the regulations, but federal and state equal protection guarantees.\textsuperscript{40} Such actions may also violate certain federal prohibitions against discriminatory action, based on national origin, in federally funded programs.\textsuperscript{41}

Almost five years ago, the Puerto Rican Legal Defense and Education Fund raised the issue of rejection from services without

\textsuperscript{37} \textit{Id.} § 452.9(a)(1) (emphasis added). This requirement also applies to domestic violence shelters and domestic violence programs pursuant to § 453.1 and 452.2(e)(1) and (e)(2) of the regulations, and also applies to safe home networks and safe homes pursuant to § 454.2, and to domestic violence sponsoring agencies and safe dwellings pursuant to § 455.1.

\textsuperscript{38} \textit{Id.} § 452.9(b)(1)

\textsuperscript{39} \textit{Id.} (emphasis added).

\textsuperscript{40} \textit{See U.S. CONST.} amend. XIV § 1; \textit{N.Y. CONST.} art. 1, § 11.

proper referral with the Department. The Department to this day claims that Latinas are not rejected from programs because of their language, but agrees that if such conduct were indeed established, that it would be in violation of the Department's policy. Concerned about what appeared to be a growing disparity between demand and services, the Advisory Committee, in 1997, instituted the present study of the availability of existing domestic violence services for Latinas in New York State.

III. ADVISORY COMMITTEE STUDY: METHODS AND RESULTS

The first stage of the Advisory Committee's study synthesizes and assesses information on existing services for Latinas. The Advisory Committee's methodology utilized statistical and experiential data, gathered from census data and service provider records and interviews. Actual experiences of women survivors and service providers were included to the extent feasible. Informational sources include surveys of service provider personnel, and telephone interviews of with service providers, advocates and Latina survivors.

A. SURVEYS

The survey consisted of questions about services and personnel, and specifically requested information about programs and staff available to Spanish-speaking Latinas, such as bilingual and bi-cultural programs. The survey was sent to all the providers listed in

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42 Letter from the Puerto Rican Legal Defense and Education Fund, Inc. to Joseph Semedei, Deputy Commissioner, N.Y. Dep't of Social Services (May 27, 1992) (on file with the author).

43 Included in the survey are the following questions: What services do you provide?; Do you provide services in Spanish?; How many cases do you handle monthly?; [How many cases do you handle]Annually?; How many Latinas do you serve monthly?; [How many Latinas do you serve] Annually?; and, Do you have bilingual staff?; How many [bilingual staff]?
the 1996/1997 Services Directory. There was a high response rate of 45% from the providers listed in the directory. The relevant responses to the survey are summarized below.

Forty-six domestic violence providers returned the survey. The surveys reveal that providers make a broad range of services available, residential and nonresidential, to New York State's domestic violence survivors. As a result of the range of service provision, it is difficult to quantify the responses in this initial study with exact precision. Nevertheless, certain trends and patterns, which are apparent from the responses, are useful in assessing the service availability for Latinas.

Not surprisingly, the survey responses reveal that the majority of bilingual and bicultural services are provided to Latinas by Latina or Latina/o domestic violence providers and community-based social service organizations. These providers' staffs are fully bilingual and thus able to provide comprehensive services to the women and families they serve. The providers in this group who serve areas with high concentrations of Latinos and Latinas are: VIP (New York City), Hispanics United of Buffalo (Buffalo), Círculo de la Hispanidad (Long Island) and Spanish Action League (Syracuse).

These programs provide the following essential and urgently needed services in English and Spanish: hotlines, crisis intervention and counseling, advocacy, housing and shelter referrals, translation, individual and support groups, and community outreach and education. Only VIP, however, provides residential services. The survey results indicate that as a group, not including the VIP hotline,

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45 The report distinguishes between Latina providers, which are run by women, and Latina/o providers or social service organizations which include men and women on staff. In all cases the design and mission of the providers seek to address the unique needs of the Latino community.
46 Descriptions of services and personnel of providers are taken from survey responses and interviews with provider representatives. All of the survey response sheets for this project are on file with the Advisory Committee.
the programs provide services to over 1,000 Latinas annually.\textsuperscript{47}

Notwithstanding the important work of these providers, they are individually, and as a group, unable to address the shelter and nonresidential service needs of all Latina survivors and their families in New York State. Indeed, only VIP provides shelter and nonresidential services. The other programs provide nonresidential services only, which provide residential referral sources for many Latinas. Thus, significant numbers of Latinas seek and receive services from non-Latino providers. The ability of these providers to furnish bilingual and bi-cultural services is critical to the safety, security and well-being of Latinas.

Other than the four Latino providers discussed, the domestic violence providers who responded to the survey fall into two categories: those with no bilingual services or staff, and those with some type of bilingual personnel. Providers comprising the first category total almost one-fourth of the respondents, and those in the second category constitute almost three-fourths. Appendix, Figure 1 represents these results.

Of the first category, approximately 24% of the respondents (11 providers) indicated that they did not have bilingual staff. These providers also indicated that they had no or a very small number of Latinas in their programs. Some estimated numbers as low as one Latina per year.

In the second category of providers, 48% (22 providers) of the respondents indicated that they had some bilingual staff. Another 4% (2 providers) stated that they did not have bilingual staff for the

\textsuperscript{47} Hispanics United of Buffalo’s four-person staff reported handling 150-200 cases annually. The Círculo de la Hispanidad’s four-person staff reported handling approximately 50-100 annually, with a total load of 451 cases from 1994-97. The Spanish Action League’s fifteen-person staff reported handling 146 cases annually, with a staff of 15. The VIP residential program has 21 beds, and the VIP hotline’s staff of four provides assistance to over 5,000 callers a year. The two providers with the largest caseloads, Hispanics United and VIP, have bilingual volunteer staff available. Hispanics United has ten staff members within the entire agency, and VIP has a volunteer to handle the evening telephone calls.
domestic violence work but had access to the bilingual staff within
the agency. Another 15% (7 providers) indicated that they relied on
bilingual volunteers, because they did not have bilingual staff.

The survey indicates imbalanced distribution and provision of
bilingual and/or bicultural services amongst the providers that have
bilingual personnel. Most revealing is the diversity of ratios of
providers' bilingual staff to the client base. The survey suggests that
where the total number of bilingual staff is low, or the ratio of staff
to clients is high, the ability to provide 24-hour coverage is
questionable. When bilingual staff are not available, the providers
refer women to the New York State Spanish Domestic Violence
Hotline. As a result of the range of service provision and uncertainty
as to the availability of bilingual staff, it is difficult, on the basis of
these results, to determine whether the current bilingual staffing
addresses the actual need.

B. INTERVIEWS

A small number of interviews with Latina survivors and
Latino/a providers was conducted to provide additional and
experiential information on the accessibility and quality of services.
These interviews reveal that the greatest obstacle for Latina survivors
is a shortage of residential and nonresidential services. The difficulty
and danger posed by the shortage of services are exacerbated for
women who are Spanish-monolingual or Spanish-dominant. For these
women, many services are beyond their reach because of the lack of
sufficient bilingual services statewide. With respect to residential
services, in some cases women are denied shelter because they speak

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48 The ranges referred to in the text reflect the general range of the survey
respondents. It is difficult to quantify the results to a more exact degree because not
all providers provide the same service, and because of the variety of services
available amongst the providers. Of the respondents who indicated that they had
bilingual staff, excluding the four Latino providers, their bilingual staff-to-client
ratios range from a high percentage of 2 to 3 bilingual staff for 5 to 6 Latinas per
month, to a low of one staff member for 25 Latinas per month.
only Spanish.

It is difficult to quantify the extent of service denials, however patterns reflect that the practice may be more widespread than currently recognized. Even if the infrequency of such occurrences were established, that would not diminish the severity of the incidences and the potential for injury to women. The severity and danger of service denials are best understood and appreciated from the perspective of the woman's situation.

The Hotline, for example, recently attempted to place an otherwise eligible Spanish-speaking Latina from New York City into a residence in Manhattan. At first the shelter representative stated that there was space, but upon learning that the woman did not speak English, the representative refused to accept her on the grounds that their policy prohibited placing roommates who could not communicate with one another. The Hotline's several attempts to convince the shelter to accept the woman failed. There were no other residential programs available at the time. Eventually, the woman left and briefly stayed with a relative until the batterer found her and took her back home. Due to her present situation the woman is rarely able to access a telephone, and has infrequently tried to reach the Hotline.

The practice of sending women from New York City to Upstate providers because of the shortage of residential space in the city is disruptive and traumatizing for many women. The feeling of isolation is particularly severe for Latinas placed in Upstate programs without bilingual personnel and services. Recently VIP assumed the case of a New York City Latina who was placed with her children in an Albany program after her batterer shot her and was imprisoned. As the program lacked bilingual services, the woman did not receive appropriate services, and left after approximately one month. She returned to New York City, where she and her children stayed with relatives. During her stay in Albany, the children's educations were interrupted.

One English-speaking survivor who was interviewed described how her placement out of New York City resulted in little, if any, service provision because she could not permanently relocate to the
Upstate region. The interviewee further recounted how the transfer from New York City to the Upstate region resulted in a break in food stamp benefits because New York City and the Upstate region's respective entitlement agencies had difficulty with the jurisdictional changes.

Latinas also often experience isolation resulting from the transfer to an unknown and distant location. In some Upstate regions, Latinas' feelings of alienation and separation are exacerbated by community responses that are racist, xenophobic or anti-immigrant in character. One woman interviewed for this report described the reaction of some non-Latino children in an Upstate region upon seeing the woman and her two minor children. The non-Latino children looked over at the woman and her two minor children and said, "oh, look niggers." As this hostile environment can exacerbate the trauma associated with displacement into Upstate regions, Upstate providers need to address these issues.

IV. DISCUSSION: COMPLIANCE WITH STATE MANDATES FOR THE PROVISION OF DOMESTIC VIOLENCE SERVICES

The overwhelming problem Latina survivors face in securing domestic violence services is the same as that all other survivors face: insufficient services. There are certain practices which, combined with under-funding, have particular adverse impact on Latinas.49

Despite State legal requirements, Latina domestic violence advocates sensed that Latinas were not being properly served, and, in the most extreme cases were being rejected from programs without proper referrals. The anecdotal evidence suggested a twofold problem. First, non-English speaking or Spanish-dominant Latinas were being accepted into programs, but because the programs were not equipped or insufficiently staffed to provide bilingual/bicultural services, these women often received little if any of the mandated

49 Domestic violence providers consistently cite lack of adequate funding as one of the reasons for the shortage of residential and nonresidential services.
services as required under the Social Service Law and the regulations. Second, Spanish-speaking Latinas were being rejected from programs without a proper referral to other services, or were merely being referred to the State's Spanish Hotline.

Unlike their non-Latina, English speaking counterparts, Spanish-monolingual and Spanish-dominant Latinas do not have equal access to the limited domestic violence resources available. Accompanying the general shortage of services, is a concomitant shortage of bilingual/bi-cultural services.

State reports suggest, and domestic violence services provider information concludes, that monolingual Spanish-speaking Latinas and Spanish-dominant Latinas have been expressly, or in practice, denied access to programs based on “special language needs.” Arguably, such denials violate various state and federal mandates and national origin discrimination prohibitions.

Shelter is one of the most highly-demanded services. As a result of the critical shortage of shelter in New York City, the city implemented the practice of placing city women with Upstate providers. This practice has had some disturbing adverse effects on Latinas, especially Spanish-monolingual and Spanish-dominant women. In particular, in Upstate residential settings, Latinas often do not have access to bilingual/bicultural services because of the lack of bilingual staff typical of these providers.

The practice of Upstate placement for New York City Latinas has also wreaked havoc on the public assistance and food stamp delivery systems, as applied to these women. Jurisdictional problems associated with agency geographical limitations have resulted in failure to receive entitlement, or receiving benefits late. Some

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50 1995 NYSDSS ANN. REP., supra note 4, at 7; 1994 NYSDSS ANN. REP., supra note 4, at 6. The relevant text states, “[s]ome of the ‘Special Needs’ and ‘Other’ denial reasons reported by providers included families with extensive psychological needs, victims under 16 years of age, adults and/or children who are not appropriate for a residential program without 24 hour coverage, adolescent male children and special language needs.” Id.
interviewees of the study experienced difficulty in securing and maintaining continuous public assistance throughout the placement in the Upstate regions and upon relocation to New York City. For example, in the process of leaving an Upstate provider and relocating to New York City, a Latina English speaking survivor recounted how she lost one month's benefits from the upstate entitlement agency and had to wait another month before receiving benefits from the city's program. The Latina City-based provider's counselor, who worked on this case, indicated that she believed benefits were provided within this time frame because of the counselor's involvement, and she speculated at the difficulty, if placed in the same position, faced by a woman who did not speak English in dealing with the entitlement system.

While these obstacles to service provision may be more frequent in New York City, they are by no means unique to New York City. The review of United States Census data, New York State domestic violence service provider information, and the survey results in this study demonstrates that counties with significant numbers and concentrations of Latinos, do not have adequate services available to Latina survivors. Few counties have significant numbers of Latinos and Latinas with programs with bilingual staff. The service providers with bilingual staff are generally the Latino community or Latina-run organizations, or providers in counties with significantly large Latino populations. The difficulty in providing services is often addressed by using translators or, in multi-program providers, by bilingual staff of other non-domestic violence projects within the agency. In addition, even when bilingual staff are part of the program, there may be insufficient coverage due to the insufficient number or availability of staff to provide 24-hour coverage. Future research must explore whether bilingual staffing addresses actual service needs.

Efforts of the small number of Latina and Latino-run providers and community-based organizations to provide services to Latina survivors are insufficient to meet the service demand. In New York State, the only Latina-run bilingual/bicultural domestic violence service provider is the Violence Intervention Program. While other
Latino social service entities provide domestic violence services, VIP is the only autonomous, domestic violence service provider run by Latinas, for Latinas in all of New York State.

The New York State Latino population constitutes 13% of the State's population, yet less than five percent of the service providers are Latina/o run. Of the providers who responded to the survey, almost one-fourth indicated that they did not have bilingual services or staff. The majority of the respondents who indicated that they had bilingual staff or some type of a bilingual services component lacks sufficient and appropriate language capability to adequately assist the State's Spanish-monolingual and Spanish-dominant women. Some stated that they often utilize one full-time staff member, or more than one part-time bilingual staff members, relying on volunteers to translate, or otherwise provide service to Spanish-speaking Latinas. Additionally, the sole statewide Spanish-language domestic violence referral service, the New York State Spanish Domestic Violence Hotline, is under-funded. The Hotline's state grant covers only 74.5% of the operating costs.

Latina survivors and Latina advocates often cite shelter shortage and staffing deficiencies as causes of the long waiting periods Latinas endure in attempting to secure residential placement. Latinas feel isolated in residential programs that lack bilingual staff to address language and cultural issues as they arise, and that lack adequate services for Latinas.

Legal and social responses to domestic violence are insufficient to meet women survivors' requests for assistance. As a result, many women are often left with a Hobson's choice between no services, or partial or inadequate services. According to the New York State Department of Social Services 1995 Annual Report on the implementation of New York's Domestic Violence Prevention Act, 23,164 people were denied shelter in 1995, 27,241 in 1994 and

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29,374 in 1993.52 Appendix, Figures 2-4 delineate some of the data regarding shelter denials. A recent newspaper article reported that 60 of the 65 women a day who call New York City's domestic violence hotline are told there are no available beds.53 One assessment of the need for services in New York City indicated that a mere 1% of battered women requesting shelter receive assistance.54 Moreover, the shortage of beds has resulted in City officials' sending approximately 40 women a month out of New York City, into Upstate facilities.55

The obvious disparity between demand and available beds and services statewide precipitated concern within the Advisory Committee that scarce services would be even more unobtainable for Latinas, particularly those who are Spanish monolingual or Spanish dominant, immigrants and/or below the poverty level. This concern has been justified by the Hotline's experiences in attempting to provide referrals and services for Spanish-speaking Latinas through other service providers. The recent Final Report on the Hotline's annual activities for December, 1995 to November 1996 stated that,

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\text{[t]he demand for additional shelter availability has become a great concern to both the Hotline staff and callers. On several occasions the Hotline staff has found it very difficult to locate appropriate domestic violence shelter for Spanish speaking callers and their families. Shelter availability in the downstate counties, such as Manhattan, Bronx[,] Brooklyn and Queens, where the demand is greater, proves to be}
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52 1995 NYSDSS ANN. REP., supra note 4, at 7. The Report further indicates that the figures for denial "may include a family that has been denied a bed in one shelter and admitted to another shelter as well as families that were turned away by more than one shelter." Id. Even assuming some statistical difficulty with these numbers, they nevertheless reveal a severe shortage of services. The Report does not record numbers of persons denied non-residential services.

53 See Sontag, supra note 12.

54 FOR THE RECORD, supra note 12, at 4.

55 See Sontag, supra note 12.
Hotline counselors have spent days, in which the victim usually remains with the abuser, to finally locate shelter. However, the shelters are usually within the upstate regions, miles out of the victims county and general support system. The victim usually remains in the abusive situation or returns after being located to a shelter miles away and in a county with little or no Spanish speaking service providers and community support.  

The Advisory Committee was particularly concerned by the lack of service provision to Spanish monolingual Latina survivors. During the Hotline's twelve years of service, some Spanish-monolingual women have been denied access to programs, including residential programs, due to the programs' lack of bilingual services and staff. Alternatively, there was concern that even if monolingual women were accepted into programs, they did not receive comprehensive services due to these language-based staffing and program deficiencies.

As Latina advocates succeeded in establishing programs capable of serving Spanish speakers, and as non-Latino programs began to hire bilingual staff or include bilingual volunteers in their programs, fewer perfunctory language-based denials have come to the Hotline's attention. Nevertheless, the practice of rejecting Spanish speakers, or providing less than full services to these women, persists. The Hotline Final Report states:

[although, [sic] denials have become less frequent, cases have arisen where the Hotline has intervened

56 1997 NYSSDVH FIN. REP., supra note 8, at 1. The Report concluded, “Spanish speaking domestic violence victims are in need of assistance of shelter in their communities that can accommodate their future needs. These needs include Spanish speaking counseling; support groups; advocacy; education; employment and community involvement.” Id. at 10.
and followed-up on denials to shelter. Counselors report that non-English speaking or Spanish dominant Latinas are being interviewed and rejected. The rejections are mostly due to the program not being equipped [sic] or having insufficient staff to provide bilingual/bicultural services. Many of these women have also stated that even when accepted, they encounter poor services and improper or no referral services.57

Often, the basis for the denial is not obvious because of provider reporting practices. However, patterns suggest that language is a common factor in many of these denials.

While advocating for these women, counselors have noted that on several occasions the domestic violence program will state denial for reasons other than language issues. Since, [sic] most programs are aware that programs must be available to non-English speaking victims, other basis [sic] for denial are usually stated. These reasons have included no space, no Spanish support groups, the ages of the children, the size of the family, financial means and the immigrant status of the family.58

As State reports suggest, and domestic violence services provider information concludes, monolingual Spanish-speaking Latinas and Spanish-dominant Latinas have been expressly, or in practice, denied access to programs because of language, at times based on "special language needs."59 Arguably, such denials violate

57 Id. at 13.
58 Id.
various State and federal mandates, as well as prohibitions of discrimination based upon national origin.

V. **Recommendations**

The survey and interview results are not an indictment of the service providers who are trying to address crisis situations with scarce resources. Rather, the results indicate that domestic violence services are under-funded generally, and least likely to serve Latinas, particularly Spanish-monolingual and Spanish-dominant Latinas. These women are the most alienated and isolated from governmental and social service systems.

Immediate pro-active steps should be taken to ensure that New York State's commitment to Latina domestic violence survivors is more than an illusory promise. Certain measures require enhancing existing information gathering and accountability mechanisms. Other measures entail initiatives at the policy and legislative levels.

In order to hold elected officials accountable for their policy decisions and to educate legislators on the current status of service provision for Latinas in New York State, Latina anti-domestic violence advocates, Latino/a legislators and community activists should call for immediate meetings with the executives and legislators of New York State and New York City to discuss the issues raised in this study. Specifically, these discussions should consider immediate state action to address violations of state law and regulations so that Latinas will not be denied access to residential and nonresidential services, based on national origin discrimination, because service providers lack bilingual staff and/or services.

Dialogue at the legislative level should not be limited to the State. Where federal funds and legislative mandates implicate and influence State policy and legislation, a dialogue on the federal level should be initiated. This is particularly timely in light of the President's and Congress' commitment to addressing domestic violence as part of a national agenda, and the dangerous impact of domestic violence poses to women's health and security. Latina
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advocates should request a meeting with President Clinton as well as with the Secretary of the Department Health and Human Services, Donna Shalala, to discuss the failure of full implementation of federal mandates in New York State and throughout the Northeast as applied to Latina survivors. This discussion should consider whether state appropriations of federal grants, such as grants under the Violence Against Women Act, maximize both the provision of services to Latinas, and the participation of Latina domestic violence service providers.

In order to address specific issues identified in this study, government entities and service providers should take several curative actions. Upstate providers should take all appropriate steps to alleviate the sense of isolation inherent in the transfer of Latinas from the City to unfamiliar communities. These efforts must include strategies for addressing the displacement and emotional trauma for Latinas caused by exposure to racist, xenophobic, or anti-immigrant responses in the regions to which they are placed.

In order to more accurately assess the availability and provision of domestic services to all women requesting such services, all Latinas referred by New York State's English and Spanish Domestic Violence Hotlines and the Violence Intervention Program's hotline should be tracked. Tracking of these referrals permits the Hotlines and the appropriate state and federal agencies to determine whether services are being rendered in accordance with federal and state legislative and administrative requirements.

Provider reimbursement should reflect actual services rendered. To ensure that money for Latinas in need of bilingual services is allocated to those who actually have and provide these services, actions should be taken to investigate current reimbursement procedures. This may require better tracking of services, particularly of services for Spanish-speaking women.

State and federal appropriations for domestic violence services should be distributed to ensure that Latina/o domestic violence service providers and social services organizations with domestic violence programs or services receive a fair share allotment of the
funds. In order to ensure the appropriate distribution of these funds, appropriate state and federal agencies should provide technical assistance to these Latina/o providers.

The Department of Social Services should investigate shelter denials due to "Special Needs Cannot Be Met" or "Other" grounds, as reported in the Department's annual reports, which involve denials, or a pattern of denials, based on language. The results of this investigation should be disseminated and discussed with Latina advocates in order to diffuse any uncertainty as to the bases for denials.

New York State and New York City should work collaboratively with Latina advocates and social service providers to identify prospective and existing Latina/o domestic violence service providers, including residential service providers. Once identified, these organizations and entities should be provided with information and assistance in establishing and funding domestic violence service programs in New York State and New York City.

Until sufficient comprehensive bilingual/bicultural services are available to Latinas statewide, all providers should be held accountable for compliance with the New York State Department of Social Services regulations. Such regulations require the provision of services or, where not feasible, the development of a service plan for language minority populations.

The Department should encourage and facilitate linkages between non-Latino providers and providers without bilingual services and staff, with Latino organizations and domestic violence service providers for purposes of providing bilingual/bicultural services where needed. Such linkages may include subcontracting arrangements with Latina and Latino institutions to provide nonresidential services, including, but not limited to counseling, advocacy, crisis intervention and therapeutic services.

New York State should conduct a full investigative study into the status of domestic violence service provision for compliance with New York's laws and regulations. All communities should be represented in the study population, as well as in the composition of
the study task force. Since federal appropriations under the Violence Against Women Act promise to increase the funds available to New York's domestic violence survivors, studies should be conducted and completed immediately, to address any inadequacies and inequalities in the current system prior to the distribution of increased funds.

At the local level, New York City should engage in a similar citywide assessment of its services. New York City's mayor and legislators must immediately address the shortage of residential services for domestic violence survivors in the city. New York City must reconsider its practice of placing women seeking residential services with upstate providers, especially in residential settings which lack linguistic and culturally appropriate services. Within the community, Latina advocates must strategize to address the range of problems resulting from the placement of New York City-based Latinas with Upstate service providers, especially in cases involving Spanish-monolingual or Spanish-dominant Latinas.

Lastly, in order to promote the goals of education and outreach, this report and all follow-up studies should be widely disseminated and discussed throughout New York State and among the appropriate federal officials. Existing official entities, such as New York State Governor Pataki's Commission on Domestic Violence Fatalities, should receive this report.

VI. CONCLUSION

Domestic violence programs are under-funded. As a result, the supply does not meet the demand for residential and nonresidential services. In response, New York City has taken drastic steps to place survivors with Upstate providers when, as is the usual case on a daily basis, there are not enough beds for all of the women who seek shelter. While this shortage adversely impacts all women, Latinas face additional barriers to securing services. Spanish-monolingual and Spanish-dominant Latinas particularly are at risk of not finding shelter and/or not receiving services, because of the statewide lack of sufficient bilingual and bicultural services.
The important role of Latina and Latino-run providers in the system cannot be understated. Not only are Latino and Latina providers the predominant service providers for Latinas in New York State, but they support other providers who do not have adequate staff or services for Latinas seeking their assistance. The Hotline also provides a desperately needed service, both directly to Spanish-speaking women, as well as to providers in need of translators and bilingual service assistance.

Without the Hotline, Violence Intervention Program, Hispanics United of Buffalo, Spanish Action League, and the Círculo de la Hispanidad, Latina survivors of domestic violence in New York State would be in an even more desperate situation. The Latina and Latino-run providers and community-based organizations that provide services, however, are insufficient to meet the demand. Principles of distributive justice demand that we reconsider and re-evaluate the current service provision system.
Figure 1. Survey Respondents.

- No Bilingual Staff: 24%
- Bilingual Latino Provider: 9%
- Some Bilingual Staff: 48%
- Bilingual Volunteers: 15%
- Bilingual Staff in Agency: 4%

Source: 1997 New York State Spanish Domestic Violence Hotline Advisory Committee Survey
Figure 2.

NY STATE 1994
NY STATE 1995
NY CITY 1994
NY CITY 1995

Source: 1994 and 1995 New York State Department of Social Services Annual Reports
Figure 3.

NY STATE 1994

NY STATE 1995

NY CITY 1994

NY CITY 1995

Source: 1994 and 1995 New York State Department of Social Services Annual Reports
Figure 4.

Source: 1994 and 1995 New York State Department of Social Services Annual Reports