SHELTERS FOR BATTERED WOMEN AND THEIR CHILDREN

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SHELTERS FOR BATTERED WOMEN AND THEIR CHILDREN

A Comprehensive Guide to Planning and Operating Safe and Caring Residential Programs

By

ALBERT L. SHOSTACK, Ph.D.



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PREFACE

S ince the early 1970s, shelters for victims of domestic violence have served as havens for hundreds of thousands of endangered women and children. During this period, the shelter movement grew from a handful of small, informal facilities to a nationwide network of protective programs, many with large populations and substantial resources. Their management has become increasingly complex.

Shelter directors now supervise a hierarchy of counselors, caseworkers, advocates, aides, housekeepers, and administrative employees. There are outreach activities: counseling for nonresidents; community education; lobbying; and collaboration with judicial, law enforcement, school, and welfare professionals. Regulatory and funding agencies demand systematic accounting, recordkeeping, and reports. Clients must be helped to resolve legal, financial, employment, education, health, and housing problems.

Perhaps the most difficult challenge is the need to foster constructive changes in attitudes, beliefs, feelings, and behavior patterns that hinder the progress of victims toward more satisfying lives. To nurture selfunderstanding, self-esteem, and independent judgment, a mix of sophisticated services must be geared to individual needs. Moreover, each facility must somehow maintain a therapeutic social environment for its continuously changing population—a milieu that eases the adaptation of new residents, encourages supportive relations among residents and workers, and contributes to personal growth.

Early shelter operators had little experience to guide them in planning and managing their establishments. Over the last three decades, however, much has been learned about shelter operation. The objective of this book is to distill from recent experience realistic guidelines for conducting caring and effective programs. The needs and policies of operators and staff members, the characteristics of residents, the roles of regulators and funding agencies, and the influence of other network participants are described and evaluated. Emphasis is placed on discerning what works and what has not worked under the widely varied conditions in which shelters carry on their day-to-day tasks.

It is the author's hope that this publication will encourage further exchanges of experience, enhance mutual understanding among the many individuals and organizations concerned with the shelter movement, and above all, help to brighten the futures of battered women and their children.

Albert L. Shostack, Ph.D.

INTRODUCTION

ABOUT THIS BOOK

T he 1970s were marked by the rapid development of emergency shelters for battered women and their children. This movement reflected the growing awareness in western societies of the dangers and suffering endured by victims of domestic violence.

Beginning with a small shelter, Chiswick Women's Aid, founded by Erin Pizzey in England in 1971, shelter programs spread quickly from Britain to other countries, including our own. In the United States, at least 300 shelters were established during the 1970s. Almost all the shelters surveyed for this publication were started between 1976 and 1980.

By 1988, American authors could write, "The battered-women shelter movement is one of our modern miracles. In fifteen years' time, a thousand shelters and major legislation have replaced the virtual ignorance of wife abuse."¹ There are about 2,000 domestic violence programs in the country now, with a large majority operating residential shelters for battered women.²

There was a surge of legislation during the same period to protect victims of domestic violence. Money was appropriated to partially fund and regulate shelter programs. Courts were authorized to issue orders to protect victims and to arrange for their financial support. Prosecutors and police received training in effective ways to respond to domestic violence incidents. Although progress has varied from state to state, the shelter movement has steadily strengthened and gained in community support.

Today's shelters are very different from their tiny, informal, pioneering predecessors. Aided by a sizeable infusion of government and private funds, they have expanded to accommodate many more residents. They provide such supportive services as counseling; legal assistance; care and advocacy for children; and help in finding housing, jobs, and training opportunities. Most reach out into the surrounding community with education programs; training for school, health care, and law enforcement personnel; and

^{1.} Gondolf, Edward W. and Fisher, Ellen. 1988, page 1. A good description of the spread of domestic violence programs in the U.S. can be found in Schechter, Susan, 1982.

^{2.} Interview with Anne Menard, Director, National Resource Center on Domestic Violence, August 26, 1996.

counseling for victims and batterers.

With increased size, funding, and responsibilities has come more formal administration. The staffs of large shelters include full-time specialized workers in a hierarchical staffing pattern. There is systematic accounting of funds and much attention to grant writing, program statistics, and public relations. Some domestic violence programs have annual budgets of a million dollars or more.

Throughout the country, shelters have formed associations to lobby for protective legislation and financial assistance, to educate the public, and to improve shelter services. These "Coalitions Against Domestic Violence" exist in every state. In some states, such as Pennsylvania, they have been assigned the role of channeling state funds to shelters and monitoring shelter adherence to government standards. The National Coalition Against Domestic Violence, headquartered in Denver, conducts information programs and has issued a directory of domestic violence programs.³

Despite growth in the number, size, and complexity of domestic violence programs, there are few sources of detailed information on how to plan and operate effective shelters for battered women. Early shelter operators had to rely on trial and error-their own hard experience-to cope with their unfamiliar tasks. By now, however, almost three decades have elapsed since the shelter movement took root in this country. During that period, facilities have accumulated a vast fund of experience about how to manage their programs. Insights have been gained concerning the characteristics and needs of victims, group life in residential settings, supportive services, the role of government, and community relations. This seems an appropriate time, therefore, to review what has been learned over the years-to identify effective policies and to assess remaining needs that must be addressed.

This book is intended as a contribution to such a review. It describes and evaluates the practices and experiences of a number of domestic violence shelters surveyed by the author. The survey data were supplemented by information and recommendations found in other publications, as well as by interviews with government and other informed sources. From the collected information, the author endeavors to distill effective and practical guidelines for planning and operating shelter programs.

Intensive open-ended interviews of up to seven hours each were conducted with the directors of 11 domestic violence/shelter programs in New Jersey and Pennsylvania during 1996. Introductions to the shelters were provided by the Pennsylvania Coalition Against Domestic Violence and the

A list of coalitions is available in Berry, 1995. Up-to-date information is also available from the National Resource Center on Domestic Violence, 6400 Flank Drive, Suite 1300, Harrisburg, PA 17112-2778. Tel. 800-537-2238.

New Jersey Coalition for Battered Women. The shelters, each serving primarily a single country, were located in urban, suburban, and town settings. They differed in important respects, representing a mix of policies and practices. Shelters in very large cities were not included; those may have special conditions requiring additional study.

The maximum capacities of the surveyed facilities ranged from 15 to 38 residents. Together, they could accommodate about 275 persons, with additional beds often made available for emergency admissions. When surveyed, they actually housed some 80 adults and 90 children. Over the previous year a total of almost 2,700 individuals had been served, of whom about 43 percent were adults and 57 percent were children under age 16.

In addition, talks with shelter directors and other staff members, the author conducted intensive interviews with New Jersey state human service, public welfare, and housing officials who regulate and fund shelter programs. Local welfare personnel who provide financial and other assistance to residents were also interviewed.

The staffs of both the New Jersey and Pennsylvania Coalitions provided detailed information. In Pennsylvania, the Coalition distributes state funds and monitors all domestic violence programs in behalf of the state government.

The Director of the National Resource Center on Domestic Violence also provided helpful information. The Center, which is on affiliate of the Pennsylvania Coalition, provides information and technical assistance to agencies concerned with battered women and their families.

Interview data were supplemented by a search of existing literature on domestic violence programs. This review provided useful information and insights about the policies, populations, and experience of more than 100 shelters in various states. In most cases, however, the information was limited–focusing on a particular shelter service or furnishing only a glimpse of shelter life and outcomes.

Relevant federal and state laws and regulations were also examined. A study of library materials describing and evaluating judicial procedures in domestic violence cases was supplemented by interviews with an attorney expert in this field.

This comprehensive review of shelter policies and needs will be found useful by a wide range of readers. Current and prospective shelter operators will find guidance in evaluating the costs of starting and conducting a program, meeting the requirements of regulatory and funding agencies, and designing policies and services. The book may help shelter boards and managers distinguish effective from unsuccessful policies, anticipate and address potential problems, and achieve the balance of realism and idealism that is essential for the care of victims of domestic violence. State and local human services, health, welfare, and housing agencies that regulate, fund, or provide services to shelters will find the publication helpful in evaluating facilities and procedures. For judges, court social workers, prosecutors, and attorneys involved in domestic violence cases, there is practical information on the needs of victims and the role of shelters in legal advocacy. Legislators and advocate groups concerned with protective legislation can draw on relevant material about the needs of shelters and their clients. Others likely to be interested are supportive community groups, police officials who protect and refer victims to shelters, shelter volunteers, doctors and nurses in emergency rooms and clinics that treat victims and refer them to domestic-violence programs, and teachers and students of social work.

THE EXTENT OF DOMESTIC VIOLENCE

Hardly a day goes by without news reports of domestic violence. Some of the incidents are truly horrifying beatings and torturing of women by their husbands and boyfriends. In some cases, the rage and paranoia of abusers reach bizarre, murderous extremes.

In June 1997, *The New York Times* reported that a city resident was accused of decapitating his wife and murdering his two young sons. This incident occurred only ten days after his release from jail, where he had been incarcerated on earlier charges of seriously injuring his wife, holding her at knife point for two days, and throwing her through a window. Just two months later, *The Times* reported that a Pennsylvania man pleaded guilty to the charge that he, too, had decapitated his wife because she received a dozen roses from a male acquaintance.

With surprising frequency, the intensity of a batterer's rage and need for absolute control of his victim drives him to suicide after the murder. Again, numerous examples can be drawn from *The New York Times*. Murder/suicide incidents were reported in its July 7, 1998; June 14, 1999; August 26, 1999; and October 27, 1999, issues, among many others.

These are only a few examples of the estimated 1,500 women murdered each year by husbands and other intimate partners. But murders represent only a tiny fraction of the domestic violence suffered by women. Much more prevalent are physical and sexual assaults, vicious threats, home invasions, stalking, and other intimidating activities.

Abusive behavior often includes jealous oversight of the victim at home or work, opening or hiding her mail, enforcing unreasonable demands, engaging in degrading sexual practices, and depriving the victim of outside activities or sleep. Abusers frequently try to isolate their victims from family,

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Introduction

friends, and others who might defend them. Some men insist on moving the family to a distant location where the victim has no one to call on for help. In numerous cases, abusers have killed or injured relatives who tried to intervene in violent episodes.

Emotional abuse can be as oppressive as physical violence. Batterers often denigrate their victims as dumb, fat, or otherwise unworthy. Attacks on their self esteem aim to reduce women to helpless dependence on their mates. To impose financial dependence, an abuser may force his partner to quit her job, discredit her with her employer, seize her earnings, and disable her automobile.

The exact extent of domestic violence in the population is difficult to estimate. Many victims suffer in secret or, if the situation is brought before a court, refuse to testify against the abuser. Police called to the scene may defuse a conflict without reporting it or simply categorize it as a family disturbance. Serious incidents may be classified as homicides or assaults, rather than as domestic violence. Victims who require repeated police visits may be counted more than once in crime statistics. Gradually, however, police reporting has improved, and victims seem more willing to come forward.

Available studies differ in their definitions, estimates, and sources. However, a modest estimate of the number of victims who endure beatings by their spouses during a year is about 2,000,000. To this number must be added the many unmarried victims battered by their partners. Nonviolent emotional abuse probably afflicts even larger numbers, but does not show up in police reports and is often endured in silence.

Women are at greatest risk of being murdered or beaten while they are trying to end their relationship to the abuser. Pregnant women also seem to run a particularly high risk of battering. Battering is the leading cause of emergency room visits by women.

A high proportion of men who beat their mates are also guilty of child abuse. There is also some evidence that many batterers tend to abuse their family pets.

Not all abusers are male, but violence by women against male partners is believed to account for only a relatively small percent of all domestic violence. Reports of incidents of this type may be increasing.⁴ However, this may not reflect an increase of victimization, but a greater willingness of male victims to complain to the police. Many men may have been reluctant in the past to reveal that they were victims of abuse because this might mark them as weak and dependent in the eyes of their peers. In addition, advocates of female victims point out that many of the injuries claimed by men are

^{4.} See, for example, Goldberg, Carey, 1999.

inflicted by their partners in self-defense.

Abuse also occurs in lesbian relationships, with many of the same characteristics and effects noted in violence between men and women. Lesbians, like other women, turn to shelters for protection. There is violence in some male homosexual relationships, as well. Although this book focuses on the abuse of women by their husbands and boyfriends, violence by women and abuse in homosexual households should not be overlooked.

Why do abusers beat and torment spouses, partners, and former mates? Poverty, unemployment, and social problems have been linked to domestic violence, but abusers come from all economic classes and racial groups. Drugs and alcohol are often involved, but are absent in at least half the cases. Psychiatric disorders are not necessarily related to battering, for many abusers are perceived as pleasant, competent people outside their homes.

Cultural influences play a large part, particularly among immigrant groups. In some cultures, wife beating is a customary practice. Asked by a New York reporter why he did not notify authorities about serious violence in a next-door apartment, a Colombian immigrant replied, "A lot of what went on in that house is the normal stuff that goes on between couples."⁵ Referring to Kenya as "a country where wife-beating is prevalent and even condoned, *The New York Times* quotes a victim as saying, "If a man does not beat his wife, he is looked down upon as a weakling."⁶ Describing the prevalence of beatings in Polish families, *The Times* cites this proverb: "If a man does not beat his wife, his liver rots."⁷

Cultural influences also contribute to the incidence of abuse by American men. After all, women in our society are often said to be "given away" in marriage and are admonished to honor and obey their husbands. Foreign women who marry American servicemen are said to be at particular risk if cultural differences give rise to unreasonable expectations and frustration on the part of their husbands. This much is clear: domestic violence is not limited to any specific cultures or ethnic groups.

A concept on which most experts agree is that domestic violence is learned behavior. The abuser has learned that violence and threats are an effective means for controlling the lives and thoughts of his partner, and often of other family members as well. In a high proportion of cases, abusive behavior was experienced as a child or observed in the relations between parents and other adults. Over time, abuse can become an habitual way of communicating with and controlling people–a habit that is reinforced because it can serve as an outlet for feelings of frustration, inferiority, and

^{5.} Ojito, M., 1997.

^{6.} The New York Times, October 31, 1997 (author not specified).

^{7.} Perlez, J., 1998.

powerlessness in the outside world.

Why don't victims of domestic abuse simply pack their bags, take their children, if any, and leave their tormentors? Many factors make it difficult to leave one's mate. Love, low self-esteem, and hope that the batterer will change his ways over time may play a part. Religious convictions, fear of stigmatization, and pressures from family members and friends may also convince a victim that she must stay with the abuser. The abuser often expresses remorse, asks for forgiveness, and promises to eschew violence after a beating incident. He or she may even agree to enter a counseling program. But tension soon builds again, and the cycle of violence is repeated.

Battered women are concerned that their children may be taken from them if they leave home. Some fear that if they remove their children, the youngsters will experience emotional damage; will resent the enforced separation from fathers, schools, and neighborhood friends; and will be stigmatized by their peers. Abusers often threaten to demand custody of the children if their mate leaves and even to charge her with kidnapping if she takes them with her.

A common reason why victims do not leave abusers is their lack of independent resources. Typically their mates have retained complete control of the couple's finances. If the victim is employed, she may have to give up her job to move to another area where the batterer will not harass her. She may lack skills required to obtain employment and be unacquainted with available employment and training services. The abuser is likely to cut off financial support, close jointly held bank accounts, and retain or cancel the family credit cards. To many battered women, especially those with middleclass backgrounds, the option of applying for welfare benefits is viewed as a humiliating and stigmatizing experience.

A high proportion of victims are reluctant to seek protection from the judicial system. They are unfamiliar with courts and lack funds for lawyers. Some fear retaliation if they seek restraining orders. Indeed, the risk of death or injury is greater for women who leave their batterers, with or without court protection, than for victims who have not left the home. If a woman successfully presses charges of domestic violence or alleges a violation of a court order of protection, the batterer might be fined, jailed, and/or be fired from his job–making it impossible for him to pay child support or to make rent or mortgage payments.

Immigrant groups face special problems. Not only are they likely to be unacquainted with American legal procedures, but a significant number are illegal aliens who face the threat of deportation if they turn to the courts for help. Some abusers steal their victims' green cards and threaten to notify immigration authorities if they attempt to leave—a serious threat that may lead to deportation and separation from their children. Language difficulties, unfamiliarity with American customs and social services, and lack of awareness of their legal rights also make it especially difficult for the foreign brides of servicemen to seeks protection from a batterer. With their families too far away to provide support and with very little money to fall back on, these women find it hard to leave abusive husbands and to return to their home countries. Fortunately, the military is aware of the problem and beginning to take steps to ameliorate it.

Rural women confront especially difficult barriers to leaving their mates. Those on isolated farms often have only limited access to supportive friends and family members. The area may lack community resources such as legal aid offices, counseling services, hotlines, and shelters. Conservative community attitudes may support the subservience of women and tolerate alcoholism and aggression among males.

In some rural areas, the police have had little training in domestic violence cases, and judges cover such large geographic districts that victims have difficulty reaching them promptly to enforce orders of protection. Rural women who do leave home usually have no transferable job skills and may find themselves unemployed or working for low pay. Large numbers may feel they have no alternative to suffering in silence with their mates.

Native American women on reservations face similar problems. If they leave an abusive husband but remain on the reservation, their address does not remain secret very long and the abuser can continue to pursue them. Flight from the reservation separates them from close friends and relatives at a critical time. Lack of funds and of transferable job skills are other handicaps.

Finally, a woman who does make up her mind to escape a battering situation may have no place to go. Relatives and friends may have been threatened by her abusive mate and be afraid to offer even temporary shelter. She may lack funds for a hotel room and for transportation to a safe location. Affordable housing may be scarce in the area. Even if a victim and her children find a place to stay, she is in constant danger that the batterer will find her.

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SHELTERS FOR BATTERED WOMEN AND THEIR CHILDREN

Chapter I

GETTING STARTED

WHO OPERATES SHELTERS?

 ${f S}$ HELTERS HAVE BEEN STARTED by many kinds of people and organizations. A substantial number were initiated by kind individuals and groups of women who saw a need to protect victims of violence. They included workers in social service and mental health agencies, former victims of abuse, and ordinary sympathetic citizens. These women often started by operating a hotline, sheltering victims in their own homes, and relying primarily on other volunteers.

Women's organizations such as feminist groups, counseling centers, and YWCAs also started shelter programs. Still others have been established by social service agencies such as community mental health centers, community action programs, shelters for homeless people, and drug/alcohol treatment facilities. A significant number of shelters originated with religion-based organizations; Catholic Charities and the Salvation Army are examples.

Relatively few shelters today are directly operated by local governments, although most rely heavily on government financial support. Government agencies are generally not prepared to deal with the intimate personal issues presented by victims of abuse and their children. Operation of shelters is usually more costly for governments than for private groups, and the effort of many shelters to keep their location secret may be inconsistent with public demands for open government.

Shelters that are affiliates of larger agencies have significant advantages. If the parent agency has a good reputation, local residents are less likely to oppose the establishment of a shelter in their community. Affiliated shelters often start with financial assistance and buildings from their parent agencies and receive help from the parent's administrative, maintenance, and grant-writing personnel. The time and expense required to form a separate not-for-profit corporation and to qualify for tax-exempt status under applicable federal and state laws are avoided when a shelter's parent agency already has the desired status.

Despite these advantages, a high proportion of shelter programs are unaffiliated. Of the 22 programs in New Jersey, for example, 14 are independent. Three others are operated by YWCAs, two by Catholic Charities, and three by other community agencies. Three-fourths of the domestic violence programs in Pennsylvania are independent entities. The remainder are operated by various private social service agencies.

Independent programs organized as not-for-profit corporations qualify for tax exemption under Section 501(c)(3) of the federal tax laws. Not-forprofit status is generally a requirement for organizations seeking government and foundation grants. Incorporation provides some personal liability protection for staff and board members.

Virtually all shelter programs are governed by a board of directors. Independent shelters have their own boards while others may be governed by the board of their parent agency. Several of those who were interviewed for this book recommended that even affiliated facilities should have their own boards to ensure that they include former victims, women's rights advocates, and others likely to understand and sympathize with abused women. If a separate board is not feasible, the parent agency might consider appointing a special advisory committee to help oversee shelter activities.

Boards of the surveyed shelters range in size from 10 to 20 members, including several officers, usually a chair, secretary, and treasurer. Treasurers should be bonded. In all cases, new members are selected by existing board members, typically upon the recommendation of a nominating committee. In half the shelters, ordinary board members can serve indefinitely, while officers usually serve specific terms of one or two years in that office. The remaining shelters limit the participation of all board members, most often to staggered terms of three years. Turnover of board members is said to encourage fresh ideas and wider community support.

Shelters need boards that can provide the expertise and influence required to address issues in their complex programs. Almost all surveyed facilities recruit attorneys, accountants, and business leaders to provide legal, financial, and management assistance. Prominent influential people are welcomed as one way to increase community support. Professionals in the fields of health and human services, such as social workers, doctors, probation officers, teachers, and clergy are also found on most boards. They may be helpful in designing and evaluating shelter activities, and enlisting the help of other social-welfare agencies.

Numerous shelters around the country include government officials on their boards: county commissioners, legislators, police chiefs, welfare supervisors, health department administrators, and other government people. Such individuals can facilitate shelter activities, perhaps by assigning members of their staffs to assist shelter residents or expediting the processing of applications from shelter residents. Embarrassing situations may arise, however, when a shelter contests the decision of a board member's agency or advocates for change in its policies.

Most programs try to include on their boards "consumer representatives" such as former residents and members of minority racial and ethnic groups. They often invite a volunteer worker or two to join their governing body. This permits the facility to profit from the hands-on experience of volunteers and to express appreciation for their work.

Persons selected for board membership should have demonstrated an ability to work well in groups, flexibility, commitment to shelter goals, and willingness to give considerable time to the program. They should be available not only for periodic board meetings, but for work on subcommittees concerned with personnel policies, salaries, finance, public relations, and other subjects.

Should men be invited to join the board? They are present on the boards of most shelters, but usually as a minority. Several respondents said in their experience men are particularly helpful in fund-raising. One shelter set up a separate advisory board with a predominantly male membership primarily to assist in raising money.

Boards have to meet frequently to keep abreast of developments and to plan necessary activities. The boards of most surveyed facilities meet monthly, although their chairs, subcommittees, and individual members often work with staff in the intervening periods. Members must visit the shelter from time to time to become acquainted with its routines, meet residents and junior staff members, and evaluate its needs and policies. A board that relies entirely on reports and recommendations from the program's executive director misses important perspectives.

THE OBJECTIVES OF SHELTERS

Staff members generally view their shelters as more than places where abused women can be safe and receive material assistance. Idealists, they try to implement in their programs egalitarian and feminist principles. Most shelters have adopted the goal of empowering their clients. They believe one reason why victims allow batterers to control their lives is that they have been made to feel incompetent and unworthy. Victims are not viewed as disturbed persons requiring care or treatment, but as normal individuals in need of support to validate their feelings, increase their self-confidence, and decide for themselves where and how to live.

Shelter counselors encourage women to be assertive, determine their own objectives, and make independent decisions. Participants in group counseling sessions offer mutual support. To foster self esteem and selfreliance, residents are usually consulted concerning shelter rules, menus, and chores. It is sometimes said that decisions on shelter life are best made by consensus among workers and residents. Author Susan Schecter writes, "If you caretake you don't give a woman what she needs. Shelters where women went back to their husbands were often shelters where they had been taken care of as opposed to being helped to develop their survival skills."¹

For some facilities, the goal of empowerment has led to participation in activist programs designed to raise the status of women generally. Staff members of these shelters lobby for women's rights legislation, participate in public demonstrations against gender discrimination, and support self-help programs such as the "Take Back the Night" movement and the "Million Woman March."

While sharing the concept of empowerment, there are shelters that tend to take a more treatment-oriented approach. They find that battering and the act of leaving home are traumatic for many victims. Women may be emotionally disturbed and confused when they arrive at the shelter, experiencing guilt, anxiety, and ambivalence. They are often too upset to make reasonable decisions concerning their futures. Therefore, treatment-oriented programs stress therapeutic services.

Such shelters may mandate intensive individual and group counseling as often as every day. They may require residents to attend sessions of Alcoholic Anonymous, Al-Anon, Neurotics Anonymous, and other self-help groups as necessary. Intensive counseling is provided for children. Some facilities experiment with couples and family counseling.

Treatment-oriented shelters generally employ at least one degreed counselor or social worker. They are more likely than others to designate a social worker or psychologist as clinical director in charge of evaluating and counseling residents. In larger facilities, the clinical director may supervise other counselors and caseworkers. Shelters may also employ a psychotherapist to help emotionally disturbed residents.

An objective expressed by many shelters is teaching skills that victims will require as they reach for a more-independent life. There are often discussions of parenting, personal hygiene, preventive health care, how to find a job, and how to seek affordable housing. There is instruction in legal rights and procedures. As residents share chores around their quarters, they learn informally how to cook nutritious meals and how to be better housekeepers—skills that can strengthen future family relationships.

Finally, there are a relatively small number of shelters that have a

^{1.} Quoted in Loseke (1992a), p. 33. The quotation implies that a victim's return to her mate is always a negative step. Sometimes, of course, reunited couples do achieve a satisfactory accommodation.

Getting Started

religious orientation. Those shelters may require residents to attend religious services, say grace before meals, and abstain from certain foods. Counseling may be provided by religious personnel and may reflect the facility's religious principles. Residents may be invited to celebrate certain religious holidays. Religion is held out as a solace and guide for meeting life's challenges.

Despite their policy differences, however, the goals of all shelters are basically similar. They all try to provide a safe haven for victims; help them assert their legal rights; and assist them with health care, financial arrangements, housing, and schooling for their children. All shelters provide counseling to help victims understand the dynamics of their abusive relationships, avoid self-harming behavior, and plan more-satisfying lives. Most also engage in community education activities.

Differences among shelters may be diminishing as they gain practical experience. Reliance on government funding requires shelters to meet uniform standards for people they may serve, staff qualifications, and services. The relatively short stays of residents, typically ranging from a few days to a few weeks, severely limit the intensity of counseling or therapy that treatment-oriented programs try to provide. Shelters that try to manage by staff and resident consensus revert to conventional decision-making by supervisors if they find that the process delays necessary action, fosters clashes among staff members, and makes it difficult to assign responsibility for the success or failure of various activities. The demanding day-to-day routines of shelter operation leave little room for innovation and experimentation. One interviewee said that their experience has led shelters to be focused more and more on basic supportive services and less on earlier feminist, egalitarian, activist goals.

HOW MANY BEDS?

In planning to establish or expand a shelter, an essential step is to determine the need for shelter services. Planners must first determine a service. Most facilities serve a city or an entire county. A metropolis may have more than one; New York City had 14 at one point recently. Rural shelters may serve several counties.

The next step is to estimate the number of domestic violence victims likely to apply and qualify for admission. An important source of information is the state Coalition Against Domestic Violence. The Coalition can identify the location of existing shelters and offer informed opinions on the need for additional beds. In addition, it can describe the regulatory and funding requirements for new and expanding programs.