

ABUSED WOMEN'S USE OF SOCIAL SUPPORT IN A TRANSITION HOUSE

By

ANGELA DEIDRE HENDERSON

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Department of

NURSING

The University of British Columbia
1956 Main Mall
Vancouver, Canada
V6T 1Y3

Date

5th August 1986

Abstract

The purpose of this study was to determine: What are women's perceptions of their need for social support in a transition house? and, In what way do women's past experiences in close relationships influence their perceptions of their use of social support? The participants were eight physically abused women who were in the process of leaving a violent relationship. Data were collected in a total of 19 interviews conducted in the participants' homes after they left the transition house. A phenomenological research methodology was used because this approach allowed the women to explore, in depth and in their own words, the meanings their experiences held for them. The data were analyzed as they were collected, and recurring themes were identified and validated by the participants. Analysis of these themes led to the identification of a process called Framework for Use of Social Support. Another major finding was that women had different needs, depending on what stage they had reached in the process. Findings also supported the conclusion that women's past experiences in close relationships had an impact on the way they used social support. The last major finding was that the children of these women were not having their needs met during their time in the transition house and that this represents a major deficit in the service.

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CHAPTER ONE

Background and Significance

Overview

Wife battering has become a major social issue during the past decade. It has been estimated that one of every ten women, in a permanent relationship in Canada, is being abused by her partner (MacLeod, 1980). However, wife abuse is by its nature a hidden event. Figures from the transition houses participating in the Canadian Advisory Council on the Status of Women study suggest that we may be seeing a small fraction of affected women and that if those who are prevented from getting medical help or from calling the police were added, the figures would be far higher (Status of Women, 1984). It has been estimated that 92% of domestic assaults go unreported each year (Landsberg, 1982). Whatever the actual figures, there is general agreement among experts that action must be taken to help these women (Wife Assault Policy Paper, 1983). Due to the physical and psychological harm incurred by these women, the issue of wife abuse is an important one for nursing. This is true not only in terms of recognizing the signs, but also in terms of encouraging the provision of services to protect and promote the health of these women.

The transition house movement has been one of society's mechanisms for addressing the problem. The core services offered by transition houses are the provision of a safe refuge and counselling, which includes emotional support.

Staff also undertake tasks such as making referrals to other community agencies and giving advice on how to find accommodation. The number of transition houses across Canada has increased dramatically since the late 1970s. Currently there are approximately 150 established houses and almost 100 more are planned (Status of Women, 1984).

As the number of transition houses increases, so does the body of knowledge of their functions. One of the most critical functions is the provision of a refuge where a woman can be safe from the dangers of her relationship. An equally important function is counselling, which is reflected in the number of hours staff spend in this and related activities (Roberts, 1981). Staff also act as outreach counsellors and in most transition houses they spend a great deal of time on the telephone with women who may be undecided about leaving but want information for the future. Concrete advice on such things as what documents to bring and how to get to a transition house is combined with emotional support and validation for the women of the importance of their problems (Roberts, 1981). Staff, in their role of supportive counsellors, help the women through the legal system. Women who are unused to asserting themselves must be prepared for and supported through the legal processes resulting from their situation (Ridington, 1978). Most transition houses are chronically underfunded and, as a result, chronically

understaffed. Because of this, women also rely heavily on each other for emotional support and advice.

Because the counsellors cannot be with the women all the time--for instance, many houses do not have overnight staffing due to lack of funds--the potential impact of the social contact between women residents crowded together is important to consider (NiCarthy, 1982). Close and potentially healing relationships can spring up quickly, but tensions between individuals can arise equally quickly and can be devastatingly destructive. Large numbers of women and their children, all in crisis, and often crowded together for periods ranging from days to weeks, produce situations which can be explosive. Violence directed at residents, by residents, is not unknown and it is common for cliques to form which may exclude a vulnerable resident (Pizzey & Shapiro, 1982). Crowding and high noise levels are omnipresent problems which can fray the nerves of women, already in crisis (Walker, 1979). Their anger, which has been denied expression in their marriages, demands release, and women find excuse for it in minor incidents (Campbell & Humphreys, 1984).

Given the potential for growth, and also for harm, it is important to do everything possible to make a woman's stay in the transition house as supportive and enriching as possible. This must be achieved while guarding against the effects of incompatible relationships and while maximizing the woman's ability to make positive use of the services and resources

available to her. Much has been written in the literature about theories of wife abuse, characteristics of abused women and commonalities in their background. However, little is known on how these characteristics affect women's experiences in transition houses or how best to offer services to them.

As I worked as a volunteer in a transition house I was aware that different groups of residents seemed to show different degrees of support for each other. Some residents were able to form close supportive ties with each other, other residents always seemed to be lonely and unsure of themselves even when they appeared to be part of a supportive group. Each group of women functioned differently. For instance, each woman in one group did all the cooking and clearing up for herself and her children independently of the others; in another group one woman cooked, another cleaned and another babysat, for all in the group. Both of these groups were close and supportive to their members. In other groups everyone in them seemed close but there were constant undercurrents of irritation interspersed with more serious quarrels. Different groups of residents also placed different demands on the staff. Some groups used the staff for counselling on legal issues but otherwise demanded little from them. Others were constantly demanding that the staff intervene to settle disputes between residents.

I was also aware, when working in the house, of my own inability to predict how much support an individual wanted or

would get from the other residents. There seemed to be no overt differences in the composition of these groups yet obviously the members' needs, of each other and of the service, were different.

The literature on transition houses identifies social support as a valuable and important component of life in the transition house, yet interpersonal problems among residents within the house are rarely addressed, even though they cause problems for staff (Pizzey & Shapiro, 1982). It may be that the importance of social support has been overestimated or misunderstood. It is the women's perceptions of their need for social support which is missing from the literature and which has led to this study.

Problem Statement

Transition house staff have long recognized the potentially valuable role of peer support and of the emotional support provided by staff to abused women. It is important that we try to understand the experiences of clients in these houses. Unless this perspective is included, we lose the benefit of unique input when planning services. Lynch and Norris (1977-78) have identified the importance of consulting clients who use a service in order to improve that service, and MacLeod (1980) has urged that we ask women about their needs and perceptions when planning a service.

There are two questions to be addressed in this study: What are women's perceptions of their need for social support

in a transition house? and, In what way do women's past experiences in close relationships influence their perceptions of their use of social support?

The first question is central to the study. The second question gives direction to collect data related to how the women's backgrounds may affect their ability to use social support.

Purpose

Since society has become more aware of the needs of abused women, one of its responses has been to open transition houses. The women's views of their needs for social support during this time have not been described in the literature. This information is critical if these needs are to be met (MacLeod, 1980). This perspective has, so far, been ignored. The purpose of this study is to examine women's perceptions of their experiences of social support. The specific objectives follow.

Objectives

1. To understand women's perceived need for social support during their stay in a transition house.
2. To examine factors from women's past experiences in close relationships which may influence their use of the social support systems available to them.

Definition of Terms

Wife abuse: "Violence . . . expressed by a husband . . . towards his wife . . . to which the wife does not consent, and

which is directly or indirectly condoned by the traditions, laws and attitudes prevalent in the society in which it occurs" (MacLeod, 1980, p. 7).

Transition House: A house geared to the protection and care of abused women and their children, in a location unknown to the abuser.

Social support: Input leading the individual to believe that she is cared for, esteemed and valued, understood, and part of a network of communication.

Assumptions

It is assumed that all abused women are equally qualified to speak on behalf of the group and that all their perceptions are equally valid.

It is assumed that a combination of circumstances has contributed to an individual's need to be in a transition house and that knowledge of these circumstances will aid understanding of the social support needs of abused women.

It is assumed that past experiences in close relationships influence an individual's ability to use social support.

Limitations

Because everyone has a natural desire to be presented in a positive light, women may be selective in the way they perceive and present information about themselves.

Because all the subjects of this research have been exposed to varying degrees of abuse, it may be hard for them

to build trusting relationships. This may limit their ability to be open and frank.

Ethics and Human Rights

It is impossible to overestimate the danger in which abused women live. It is of particular importance that their names do not appear anywhere they could be recognized and their anonymity thereby compromised. It was, therefore, proposed to obtain audio-taped rather than written consents, and to use only first names.

The subjects were approached by the staff of the house because it is they who have knowledge of the women's personal circumstances. The women were told that they would have the right to refuse to participate, and the right to withdraw from the study at any time. Such refusal or withdrawal would in no way influence their right to use the services provided by the transition house.

Participants were asked to volunteer for a minimum of two and a maximum of three audio-taped interviews, to take place in their homes. The procedures for safeguarding the tapes and for their erasure at the end of the study were explained to them. Only first names were used; this was considered a necessary safeguard in view of the extreme danger inherent in their situations. It was explained that there would be no further interviews should the woman return to her husband; this was considered necessary because of the potential danger of violence from the husband, should he discover his wife had

been discussing the abuse. The subjects were offered an opportunity to review the interviews at the end of each session. The tapes were kept in a filing cabinet. Typewritten transcripts were available only to the thesis committee.

The subjects were told that a summary of the findings would be available to them at the transition house; this was to avoid mailing material to the subjects' homes, which might compromise their future safety.

The benefits of the study for the subjects include improving the service available to them, should they stay in a transition house in the future. An added benefit is that their feelings of having contributed to the knowledge of the subject of wife abuse may raise their own level of self-esteem.

Summary

This chapter has identified the functions of a transition house and some of the problems encountered among women residents of such a service. This provided the background for the significance, purpose and objectives of the present study. The questions to be addressed were presented, as were a definition of terms, assumptions and limitations, and the ethical concerns of the study.

CHAPTER TWO

Literature Review

Overview

Two questions provide the focus for this chapter: What are women's perceptions of their need for social support in a transition house? and, In what way do women's past experiences in close relationships influence their perceptions of their use of social support? The chapter begins with an overview of the functions of a transition house. Women's reactions to each other in a transition house and possible interpersonal problems between them are reviewed.

Three factors which, from the literature, are thought to be common to the experiences of abused wives are: Social isolation, low self-esteem and learned helplessness. These factors are examined. The concept of social support is discussed. Links between past experiences in close relationships and the ability to use social support networks are also addressed.

Functions of a Transition House

The two services which are central to transition houses are the provision of a safe refuge and counselling. Of primary importance is the protection of the women and their children. The danger to the women, their children, other residents, staff and volunteers cannot be overestimated. It is for this reason that most operators choose to keep the location of the house secret and to have an elaborate set of

rules designed to ensure that the location is known to as few people as possible (Roberts, 1981). It is important that everyone knowing the location of the house be constantly reminded of the need for secrecy. Because this may include many outsiders, e.g., the police, this is a time-consuming and ongoing concern.

The second major function of a transition house is counselling. This may take the form of crisis intervention, emotional support, help in getting to lawyers and welfare workers, follow-up counselling for ex-residents who telephone or drop in and outreach counselling for those who have not yet used the transition house. Often women phone the local transition house to talk to a counsellor when trying to reach a decision about leaving their marriage, or for information about services which are available in an emergency.

For some women, the residency services of a transition house do not appear to be of interest. Loseke and Berk (1983) used descriptive data from 114 logged telephone calls to look at the kinds of questions women asked when calling transition houses for information and counselling. They found that less than half the callers wanted immediate residency. Transition house staff can spend a considerable portion of their time on this kind of outreach counselling. Loseke and Berk discuss the highly complex work of transition house staff and the fact that this aspect of the service has received no attention in the literature.

Behind all the counselling offered by the staff there is a basic belief about the purpose of such interventions: That the transition house should always be endeavouring to help the women to take control of their own lives (Vaughan, 1979). Ridington (1978) describes such a process as "the process of reconstituting their self-images from that of victim to that of autonomous person" (p. 563). As a result of this orientation, staff are reluctant to intervene when difficulties arise among residents. Such difficulties may be the result of lack of feelings of self-confidence and self-assertion. Therefore residents are encouraged to try to resolve their own conflicts. The philosophy of most transition houses reflects the belief that transition houses exist in a supportive capacity and as a social support system (Ridington, 1978). Women are given the time, support and encouragement necessary to make the decisions they need to make.

Interpersonal Problems Among Transition House Residents

When a woman becomes a house resident she becomes part of a small, intense community that is often far from tranquil. A transition house, because it has to remain inconspicuous, is usually small and part of a normal neighbourhood. This small house must contain a number of women and their children and is, therefore, usually crowded and noisy. It is against this background that the social support between residents, which is

inherent in the situation, is either offered or withheld, sought or rejected.

Much of the literature on the functions and services of transition houses relates to the potential value of the contact between residents (Ridington, 1978; Sutton, 1978; Vaughan, 1979). Within houses there frequently are house rules, many of which are oriented towards preventing the development of problems between residents (Roberts, 1981). For example, there are usually rules on residents' responsibilities in areas such as cleaning, cooking and child supervision. Most transition houses hold residents' meetings weekly which residents are expected to attend. At these meetings a chance is usually offered to discuss interpersonal problems. Even so, disputes and disagreements do occur and are frequently "blown out of proportion" in the emotionally charged atmosphere of the house.

There are significant discrepancies in the ways different groups of women are able to relate to each other. Some women immediately form a bond and provide support for each other. Others get involved in disputes over such issues as parenting approaches or cleaning chores around the transition house, as described by Walker (1979) in her book The Battered Woman. Such minor issues have the potential to become major concerns. Other texts on wife abuse have discussed abusive behaviour, usually verbal but occasionally physical, among residents (Campbell & Humphreys, 1984; Pizzey & Shapiro, 1982). All of

these interpersonal difficulties may be compounded by high noise levels, crowded conditions and the run-down physical state of the clientele. It is not unusual for the residents to have colds and other infectious conditions (Walker, 1979).

It is obvious that any group of strangers might face adjustment problems when forced to live together. Add to this the crisis nature of the situation and the high stress levels among the women and difficulties seem inevitable.

Factors Common to the Experiences of Abused Wives

Researchers have identified three factors as being common in the experiences of abused wives:

1. Social isolation.
2. Low self-esteem.
3. Learned helplessness.

All these concepts recur frequently in the literature on wife abuse and are discussed as having a major influence on a woman's ability to act in the present. It is useful to consider each concept and discuss its possible influence on a woman's ability to use her social support systems.

Social Isolation

Social isolation is defined by Geyer (1980) as "a [relative] breakdown of the system's interaction with its environment" (p. 25). As Geyer notes, "Cases of extreme [social] isolation are rare: When the concept is used in the literature, it usually refers to individuals who are isolated in some ways from part of their environment" (p. 25). Geyer

describes a link between decreased stimulation received by the isolated person and a resulting decrease in attempts by that person to make social contacts. This may be a significant idea when working with abused wives and trying to understand their help-seeking behaviours.

Kuhl (1982) conducted a study which focussed on identifying persons or agencies most likely to know that any particular woman was being abused. Four hundred and twenty women who were seeking help from various domestic violence treatment centres were interviewed. Findings revealed that those most likely to know about the occurrence of abuse were a woman's children, family, neighbours and friends. She reports that a typical response to such knowledge is one of non-involvement, mainly because people do not see themselves as being able to make a difference in the situation, or because of fear that the violence may be directed at them. Whatever the reason, the effect of this non-involvement for the abused woman is social isolation in the sense that she finds herself unable to expect help from her immediate support group. This is the group which an individual might be expected to approach first in time of need. This means that abused wives must look further afield for help when they need it.

A characteristic of men who batter is their need to isolate their partners in order to control them (Ganley, 1981). Women report that their partners have systematically

cut off contacts with the outside, even going so far as to isolate them from their families, to the point that they frequently never speak to another adult without their husband being present. Dobash, Dobash, Cavanagh and Wilson (1978) conducted in-depth interviews with 109 women, seeking to identify the "structural and dynamic aspects of a violent episode in the family" (p. 608). They identified the tendency of husbands to be jealous and possessive about their wives and to systematically isolate them.

When we realize the extent of the physical isolation in which many women live, either due to rural living or to being at home with young children, or a combination of both, and we add to that the psychological isolation imposed by abusive husbands, it is easy to see why women have lacked the support necessary to leave their situations. Given these circumstances, it seems reasonable to hypothesize that a woman from such a background who is finally desperate enough to leave home, might have some difficulty adjusting to an environment crowded with other women in crisis. Evidence has been found that people who have been socially isolated may need to be actively retrained in order to make the most of what is available to them in the area of social support (Jones, 1981). It has also been reported that social isolation is a problem common to the background of people enrolled in a social skills training program (Feldman & Oxford, 1980). People who are included in the list of

high-risk groups are the elderly, families with a handicapped member or a member with a drinking problem, and families in which child abuse takes place (Feldman & Oxford, 1980). Given what is known about the social isolation of abused wives, they should also be included in this list.

Low Self-Esteem

A second factor commonly reported in the literature is the lack of self-esteem felt by most abused women. Women who are abused physically are also abused mentally; they are frequently told by their husbands that they deserve what they get, that it is their fault the marriage is failing and that no-one will believe their stories if they leave (Martin, 1977). Over the years, they begin to internalize these statements and to see themselves as deserving the abuse. Women who have low self-esteem may not see themselves as worthy of friendship or support and may have difficulty motivating themselves to make the effort necessary to gain helpful contacts (Seligman, 1974). It is therefore possible that these elements may influence a woman's perception of, and ability to use, the social support available to her in a transition house.

Self-esteem is established during childhood. Various aspects of developing self-esteem and exposure to family violence during childhood have been studied in relation to abusive relationships. Rouse (1984) conducted a study in which questionnaires were mailed to a random sample of 79 male

home owners. They found that the self-esteem of abusive husbands was only slightly less than the norm. In contrast, abused wives were shown, in this study and others, to suffer significantly reduced levels of self-esteem as a result of the mental and physical abuse during their marriages (Dobash & Dobash, 1978; Hilberman & Munson, 1978; Mitchell & Hodson, 1983). Mills (1984) used data from a national survey of 960 men and 1,183 women. The findings were that decreased self-esteem in women was positively correlated with the severity of the violence they had experienced in their marriages. Again, abusive men's self-esteem was not significantly affected.

Because, by its nature, self-esteem involves internalizing others' reactions to self and using these perceptions to create a sense of self-worth, this judgement is formed over time (Brandon, 1969). It therefore may take time to improve low self-esteem so as to create a more positive sense of self. Brandon thinks that a positive sense of self-esteem is a basic human need and that its absence is life-threatening. This is because low self-esteem is linked with depression and both are linked with an individual's inability to act in his own best interests. Brandon discusses how self-esteem is formed during childhood and the fact that after this time it can be influenced, but with much more difficulty. It is possible that this work has implications for workers with women in transition houses. Women who may

have been in an abusive relationship for many years are usually in a transition house for a short period; one month is a long stay. It may be difficult for the staff to have any significant impact on their low self-esteem in such a short time.

Learned Helplessness

It is not surprising that a third factor thought to be present in abused women's experiences is learned helplessness. This would seem to be an entirely reasonable and realistic response from women because, in fact, they are relatively helpless (Walker, 1978). They are frequently economically dependent, emotionally isolated, and our laws often seem to perpetuate rather than help to solve their problems (MacLeod, 1980). Even if they try to change their behaviour to please their husbands or attempt to leave the marital relationship, the reality is that they have little control over what happens to them and the violence usually continues. Women become passive and accepting of the violence because frequently there is no real recourse for them (Hilberman and Munson, 1978). Transition houses were unknown until approximately ten years ago and are still too few in number.

Walker (1978, 1979) has discussed the relationship between childhood exposure to violence, violence within marriage and the development of learned helplessness. She has continued to study abused wives and recently conducted an international survey on the psychological consequences of wife

abuse to the abused wife (1983). She concluded that experiences in childhood and during the marriage contribute to women's inability to try to stop the violence and she describes this state as learned helplessness.

Walker has been criticized by other theorists for thereby putting women in the role of victim (Breines & Gordon, 1983). Walker's explanation of her use of the word victim is that, indeed, she does see women as being victimized, not only by their situation but also by a society which places them in the victim's role (Walker, 1979, 1983). A great deal of work has supported the validity of examining society's part in the overall picture of the life of the abused wife (Dobash & Dobash, 1978; Pagelow, 1984; Stark, Flitcraft & Frazier, 1979). Walker (1983) suggests that our society, which is sexist, provides "overt or subtle encouragement" (p. 82) to women to remain in abusive situations and thereby places them in the role of victim.

Social Support, Past Experiences and Ability to Cope.

The ability to use available social support effectively has been linked to an individual's previous experiences when seeking help (Fawcett, 1984; Murawski, Penman, & Schmitt, 1978). The factors of social isolation, decreased self-esteem and learned helplessness may be relevant to the ability to use social support effectively. Therefore it makes sense to consider all these dimensions of a woman's previous experiences when attempting to be of help to her in a

transition house. When a woman moves into a transition house her previous social support system, however inadequate, is frequently removed from her. It is often safer for her family and friends if they do not know where she is. This is a further reason why the social support in the transition house may be of such crucial importance. The mediating effect of a new support group may help to offset any stress associated with isolation from family supports (Franks & Rothblum, 1983). The concept of social support has been present in the literature in one form or another since the end of the nineteenth century. Emile Durkheim, a French sociologist, published his work Le Suicide in France in 1897; it was translated into English in 1951. In this book Durkheim discusses the significance of close social ties in people's lives. He made several interesting observations which pointed to the conclusion that people with a support system seemed generally to withstand stress better than those without such a system. An example of this is his observation that individuals who are married tend to commit suicide less than single people (1951 ed.). Durkheim broke with the tradition of the day by seeing suicide as a symptom of social dysfunction rather than solely a symptom of an individual mental dysfunction.

In his 1961 book An Approach to Community Mental Health G. Caplan continued to make the connection between interpersonal relationships and mental health. Caplan

expanded on this theme by extending it from the individual to the community and discussing the idea that high numbers of dysfunctional relationships in a community lead to high incidence levels of mental disorders. Caplan describes the social support system available to an individual as one of the most crucial determinants of his mental health, and identifies key people who may constitute this support system as "blood relations, close friends or people occupying special roles in a person's occupation or recreation group" (p. 20). If these people cannot fulfill their roles, others, such as transition house staff and residents, may take their place.

S. Cobb (1976), in his paper "Social Support as a Moderator of Life Stress," defines social support as information. He saw this information as breaking down into three distinct groups.

1. Information leading the subject to believe that he is cared for and loved.
2. Information leading the subject to believe that he is esteemed and valued.
3. Information leading the subject to believe that he is part of a network of communication and mutual obligation. (p. 300)

Cobb states that the importance of social support is that it "facilitates coping with crisis and adaptation to change" (p. 302). This connection between social support and adaptation to stress continues to be an important focus of the ongoing work on social support (Depner, Wethington, & Ingersoll-Dayton, 1984). In fact, the concept of social support is one of the most frequently written-about in the

field of psychology, with over 400 studies published since the term social support networks was listed in the "Psychological Abstracts" (Brownell & Shumaker, 1984).

Works which attempt to tie together some of the theoretical material into a practical tool for the practitioner have recently begun to appear. An example of this is B.H. Gottlieb's book Social Support Strategies: Guidelines for Mental Health Practice (1983). At the same time, discrepancies in the current literature are being addressed. One identified gap is in showing the precise nature of the demonstrated relationship between social support and adaptation (Depner et al., 1984). Another area of investigation is the nature of the fit between the social support network and the recipient. A recent article proposes a model to examine this relationship (Shinn, Lehmann, & Wong, 1984). This model identifies five dimensions to be assessed when examining an individual's support network, (a) amount, (b) timing, (c) source, (d) structure, and (e) function.

Discrepancy problems in the field of social support research fall into two categories, measurement problems and definition problems. There are numerous methods and tools for measuring social support and researchers have identified the lack of agreement among methods as a reason why so little integration exists in the literature (Brownell & Shumaker, 1984). Depner et al. (1984) have attempted to define a

strategy to enable researchers to make an informed choice among measurement approaches.

There are also differences among definitions of social support. Depner et al. (1984) list 11 definitions by different authors and suggest a method for classifying them under three different headings, (a) whether or not social support exists, (b) type of social support, and (c) structure of the network. Shumaker & Brownell (1984) define social support as "an exchange of resources between at least two individuals perceived by the provider or the recipient to be intended to enhance the well-being of the recipient" (p. 13). Although Cobb's (1976) definition does talk about "mutual obligation" (p. 300), Shumaker and Brownell (1984) believe that their own definition places more emphasis on the reciprocal aspects which they think are central to the idea of social support. Shumaker and Brownell (1984) also think that most definitions, while emphasizing the importance of the network, fail to consider characteristics of all network members when assessing the impact of support. All these considerations will have impact when looking at the social support networks in a transition house.

The importance of the supportive interaction between residents of a transition house is documented by NiCarthy (1982) who discusses the benefits of the sense of community and supportive atmosphere among women with similar

experiences. Ridington (1978) discusses aspects of support among residents:

Talk . . . between resident and resident works to alleviate loneliness and pain, and to achieve understanding that the problems each woman has are not isolated and individual, and therefore her fault, but common to many women, and therefore not just an individual one but a social one as well. (p. 569)

The importance of this discovery that a woman is not alone in her problems is discussed by Vaughan (1979). She says that one of the strengths of the transition house setting is that it provides women with an opportunity to exchange support with others who have been in similar situations. However, the women's perspective was not specifically included in either Ridington's or Vaughan's articles.

Mitchell and Hodson (1983), in their study of 60 abused women in a transition house, examined the relationship between available social support and ability to cope. Their respondents completed questionnaires relating to stress, personal resources, social support, response to being in the transition house, coping and adjustment. Their findings included high levels of self-reported depression and social isolation. They also found that women who had empathetic social contacts also had higher self-esteem.

There may be a relationship between women's childhood experiences and the ability to use the social support networks available to them. Exposure to violence in childhood leads to increased acceptance of violence as a problem-solving method

in adulthood (Owens and Strauss, 1975). A violent childhood, experienced as either victim or observer, provides a specific role model and legitimizes violent action (Post, Willett, Franks, House and Back, 1981). Women who have been socialized to see themselves as appropriate recipients of violence may not recognize either their right to or their need for social support.

Women may have their ability to utilize social support further reduced by the cumulative effects of the threats and violence in the marriage. Star (1978) compared 46 battered and 12 non-battered women in her study "Comparing Battered and Non-Battered Women." Her main finding was that battered women gradually develop a passivity which does not allow them to act on their own behalf. Similarly, Hilberman (1980) found that battered women do not believe that they can help themselves and may experience feelings of passivity and immobilization.

The role of a support network in helping an individual to cope with stress is well-documented (Gottlieb, 1983; McGubbin, Cauble & Patterson, 1982; Mitchell & Hodson, 1983; Murawski et al., 1978) and, as so succinctly stated by Feldman and Oxford (1980), "people need people" (p. 368). A transition house has the potential to provide battered women with a support network of their peers. It is important to understand the relationship between availability of support, previous experiences and the implications for the service which should be provided.

Summary

This literature review has focussed on the two study questions: What are women's perceptions of their need for social support in a transition house? and, In what way do women's past experiences in close relationships influence their perceptions of their use of social support? The chapter began by discussing the functions of a transition house and women's reactions to being there. Interpersonal problems between the women were also discussed.

The three factors of social isolation, low self-esteem and learned helplessness were examined in relation to abused women's ability to utilize social support. The concept of social support was examined in depth. The relevance of past experiences, in childhood and in a violent marriage, was discussed with regard to ability to use social support when needed.

CHAPTER THREE

Methodology

Introduction

Phenomenology was the method chosen for this study. Qualitative methods, such as phenomenology, are gaining acceptance among nursing researchers because they take into account "the dynamic whole that is the living human being with whom the nurse interacts in practice" (Omery, 1983, p. 49). Phenomenology attempts to describe experiences as they are lived by the client.

In this chapter the phenomenological method, a qualitative approach, will be described. The historical background will be presented, followed by a description of the way phenomenology is being addressed today. This section will conclude with a brief summary of the major methodological issues.

The next section of the chapter will describe how the methodology was used in the present study. Procedures for selecting participants, for data collection and for data analysis will be explained in this section.

Phenomenological Methodology

Recently, phenomenology has begun to receive more specific attention in the nursing research literature (Oiler, 1982; Omery, 1983; Parse, Coyne, & Smith, 1985). The phenomenological approach provides a method by which to study human experience as it is lived (Omery, 1983). The purpose of

the phenomenological method is to uncover the meanings that experiences hold for people by analyzing their descriptions of events in their lives (Parse et al., 1985). This helps to make explicit the extreme complexity of human experience. Nursing is concerned with health, a holistic approach to people and all the inherent meanings and richness of their day-to-day lives. Therefore, phenomenology, with its focus on allowing "the unfolding of the phenomenon itself [to] guide the logic of the inquiry" (Giorgi, 1975, p. 72) provides a logical approach.

Phenomenology grew out of the philosophical writings of Husserl in the latter half of the 19th century. In the early part of the 20th century his work was refined by Heidegger, who brought together the ideas of Husserl and Kierkegaard to form existential phenomenology (Tiryakian, 1978). Other 20th century philosophers who have influenced the phenomenological movement are G. Marcel, J. P. Sartre and M. Merleau-Ponty (Parse et al., 1985). There are great individual differences in thought among the phenomenological philosophers so that, as Parse et al. state, "The phenomenologists cannot be placed in one school or category However they are in agreement on a method of enquiry" (p. 15). In other words, phenomenology as a philosophy encompasses a wide diversity of views whereas phenomenology as a research methodology is a clearly delineated approach.

Qualitative methodologies have begun to be used because social scientists have become aware that quantitative methodologies cannot address all the issues to be examined. Anthropologists and sociologists were the first social scientists to take the phenomenological philosophy and develop it into a purposeful approach to research (Swanson and Chenitz, 1982). "Advances in science came from a combination of inquiry into the nature of the event and generalizations about that event as it exists in the world" (p. 242). They give examples of some important scientific advances using qualitative approaches, e.g., Darwinian theory, Einstein's theory of relativity, atomic theory, systems theory and most nursing theory.

The phenomenological approach is chosen when little is known about the topic to be studied, when the topic is complex and requires a holistic view and when the perspective of the client is the focus of the question.

Methodological Concerns

Sampling

The phenomenological approach to selecting a sample is known as theoretical sampling. This term refers to a process in which the researcher continues to add new subjects to the sample population until no new ideas are emerging during the interviews (Wilson, 1985). This means that the size of the sample cannot be estimated until the data collection process is well underway. When the interviews are no longer producing

new ideas, theoretical sampling stops because saturation is reached. "Saturation of categories means that the major recurring patterns have been discovered" (Wilson, 1985, p. 419).

Validity and Reliability

Leininger (1985) states that in qualitative research

. . . validity . . . refers to gaining knowledge and understanding of the true nature, essence, meaning, attributes, and characteristics of a particular phenomenon under study. Measurement is not the goal; rather, knowing and understanding the phenomenon is the goal. (p. 68)

Understanding, therefore, rather than accurate measurement is the important consideration in regard to validity. It has been proposed that qualitative research may be particularly "valid" because the researcher is so deeply immersed in the context of the sample (Duffy, 1985).

Again, Leininger (1985) states that reliability in qualitative research is concerned with

. . . identifying and documenting recurrent, accurate and consistent (homogeneous) or inconsistent (heterogeneous) features, as patterns, themes, values, world views, experiences, and other phenomena confirmed in similar or different contexts. (p. 69)

This means that findings related to ideas which have been raised by several different research subjects are showing a degree of reliability.

The terms validity and reliability must be clearly understood within the context of the research methodology being used; in this case, phenomenology.

Differences in Definition

One concern which serves to confuse matters is the problem with accepted definitions of terms. Psathas (1977), for instance, uses the term phenomenology to describe the entire qualitative approach by some writers "in order to show how ethnomethodology is a phenomenological approach in the social sciences" (p. 74). Others use the term phenomenology interchangeably with other qualitative labels, or group several terms together under another umbrella term (Bowles, 1984; Davis, 1978). Duffy (1985) uses the terms qualitative and grounded theory interchangeably. However, nurse researchers have recently begun to delineate clearly what phenomenology means for the nurse (Ray, 1985) and exactly what the phenomenological method is in relation to nursing research (Parse et al., 1985). There are several major approaches to the process of phenomenological research, of which those of Spiegelberg, van Kaam and Giorgi are among the most recognized (Parse et al., 1985). The next part of this chapter will describe how the methodology was applied in the context of the present study.

Selection of Participants

Criteria for Selection

The participants for this study were selected using the following criteria:

1. They had been resident in the transition house as a result of having lived in a physically abusive relationship.

Rationale: Occasionally women who have not been abused may be placed in transition houses for short periods.

2. They were able to communicate in the English language. Rationale: Self-evident.

3. They did not return to the abusive relationship when they left the transition house. Rationale: It would be too dangerous to interview a woman who was living with an abuser.

4. They would agree to two or three audio-taped interviews, to be conducted in their homes. Rationale: Two interviews were needed to get a woman's complete story. Three interviews were thought to be the most a woman would agree to.

Selection Procedures

The volunteer participants were recruited from the residents of a transition house in a metropolitan area in Western Canada. They were contacted at a weekly meeting of residents at the house. The procedure was as follows:

1. The staff member chairing the meeting was contacted during the day of the meeting to see whether there were any potential volunteers in the house.

2. The staff member informed the women present at the meeting that a researcher would make a presentation at the conclusion of the meeting and that they were invited to stay for it if they wished.

3. A letter explaining the study was posted on the house notice board (see Appendix A). This was an attempt to inform residents who did not attend the meetings about the study.

4. Weekly telephone contact was maintained with the volunteers until appointments in their homes could be arranged. A date, time and place for the first interview was set as soon as a woman knew she was moving out of the transition house. Eight women participated. They will be described in the next chapter.

Data Collection

A total of 19 audio-taped interviews were conducted in the participants' homes. The first interviews took place within 10 days of the women leaving the transition house while the transition house experience was still fresh in their minds. The second and third interviews were conducted one month and two months after the first. By this time the women had a more objective recollection of the experience; it was also possible to gain a better impression of their ability to function independently. The interviews lasted from one to two hours. Open-ended semi-structured questions were used as a guide in an attempt to elicit the women's perceptions of their stay in the transition house and of their experiences leading up to that stay (see Appendix B for samples of the questions).

First interviews concentrated on the women's stories and the meaning they held for the women. Subsequent interviews deepened the understanding of the first by providing opportunity for clarification and by addressing issues raised in the first in more depth.

Data Analysis

Interviews were transcribed immediately after each interview. The transcripts were read and a process of phenomenological analysis such as the one described by Giorgi (1975) was undertaken.

The process of analysis is composed of several steps which begin with the first interview and are carried on concurrently with the data collection process. The interviewer listens closely to the taped interview and reads the transcription straight through to get a sense of the whole. The interviewer then reads the transcript more thoroughly and identifies meaning units (Giorgi, 1975, p. 74). The researcher may return to the participant at any time in the process to clarify discrepancies and ambiguities. The meaning units can be classified as complete thoughts. The central essence of each meaning unit is the theme of the unit. The themes are then examined for possible relationships between them. It is at this stage that the researcher begins to take the findings which are in the language of the participant and abstracts them into the language of the discipline involved.

Quotes from the participants are included throughout the written account of the findings. This provides a base from which the reader can judge the validity of the interpretations. The process has been described in a linear form but, in fact, it is not a linear process. Analysis is

under way at the same time as data collection. Emerging themes are constantly contributing to the refinement of upcoming interviews. In this way the process is a cyclic one.

The present study was analyzed using the approach of Giorgi (1985). There are other modifications to the process of phenomenological analysis, as stated earlier; however, the process is essentially the same although the terms vary slightly. The researcher is immersed in the data, identifies commonalities and tries to explain their meaning in terms of the participants' experiences. The essential purpose of phenomenology is to identify and understand the meaning that people's experiences have for them.

Summary

The phenomenological method was chosen for this study because of its value in understanding the meaning that specific experiences hold for the participants. The areas around which data collection revolved were those of staying in a transition house and previous experiences in close relationships. The underlying purpose was to identify ways to improve the services currently available in transition houses.

This chapter has discussed the phenomenological method of qualitative research and some of the methodological issues involved. The way in which the method was used in this study was described in a discussion of the selection of the participants, data collection and data analysis techniques.

The next chapter will describe the findings of the study.

CHAPTER FOUR

Analysis and Discussion of Data

Introduction

The purpose of this chapter is to describe the findings of the study by considering the women's perceptions of their time in the transition house and events in their lives which led up to their being there.

The chapter will begin by describing the participants in the study in some detail. The participants' previous experiences in close relationships will be discussed, and possible effects of such relationships on their self-concept and help-seeking behaviours will be identified. The data were related to the kinds of exposure to social support women had experienced before entering the transition house and during their stay there. This was because it was hypothesized that their previous experiences of social support might influence their present ability to use it. Women could be expected to fall back on previously-learned behaviours to get the support they needed.

The chapter will examine women's need for and use of social support in the transition house. The women's verbatim accounts will be interwoven with a discussion of the themes which emerged and relevant findings from the literature.

The chapter will conclude with an overview of the process that women appear to go through in their use of the social support systems available to them in the transition house.

Description of Participants

There were eight women who agreed to be in the study. Their ages ranged from 20 to 42 years although most were in their early 20s; the average age was 27 years. In six cases physical abuse had been occurring from the beginning of the relationship with their partners. However, for two women who had been married the longest--13 and 20 years respectively--actual physical abuse had been occurring for relatively short periods of time: 16 and 18 months.

Each woman had one or two children; there were 13 children in all. Apart from two teenagers, the ages ranged from newborn to seven years. With so many dependent children it is not surprising that six of the women were receiving welfare. The other two women continued to work at jobs which they had held for some time. They were able to use their mothers as babysitters when they left the transition house.

Seven of the women continued to have contact with their husbands during their stay in the transition house and after they left. In most cases this contact was necessary because the husbands had access orders to their children that specified times of contact and conditions under which contact could occur. For example, one father was allowed only supervised visits with his child because there was thought to be a potential child abduction concern. In most cases the women did not leave the transition house until these legal considerations had been addressed and, even then, they were

extremely nervous every time they had to contact their husbands.

Two of the women were leaving their husbands for the first time. The other six had left at least once before, two of them six and seven times respectively. Five of the women were still committed to staying away from their husbands when last contacted, which was at least four months after leaving. One of the other three women planned to return to her husband to give him another chance, and, after the second interview, she did so. Contact with the remaining two women was lost between the first and second interviews; it is therefore not known if they returned to their husbands.

Although one woman spent only a week in the transition house, most of the stays were from three weeks to a month. In most cases the length of the stay was governed by the date their new accommodations would be available, although two women were unable to leave the security of the transition house until some legal safeguard such as a restraining order against the husband was in place.

In all but one instance the women had already been in contact with several different services before entering the transition house, from social workers to husbands' probation officers and from marriage counsellors to divorce lawyers, in efforts to improve their situations. The women seemed able to coordinate these service contacts from the safety of the

transition house in a way which was impossible while they were living with their husbands.

Lastly, all of the women except the two with whom contact was lost had some family support available to them. In several cases it was evident that the family was reluctant to interfere in the marriage when the couple were together but, once they were apart, the family was available and in every case helped whenever possible. The women chose to live within easy travelling distance of their families of origin when they left the transition house.

Description of Non-Participants

As previously discussed, the mechanism for selecting participants included attending the transition house residents' weekly meetings and making a presentation about the study after their other business had been concluded.

Those who could have participated but chose not to, did so for a variety of reasons. The first and by far the smallest group consisted of three women who gave an unequivocal refusal upon being approached. Within this group were those who could see no value in the study, either to themselves or to anyone else. This group was unusual in being so assertive.

Six women refused to participate because, although they did not question the value of the study, they were humiliated by the experience and wished to put it behind them.

A far larger group was composed of 17 women who could not quite bring themselves either to commit themselves to the study, or to refuse. They constantly said "Maybe" or "Perhaps," or asked for time to think it over. Some of them had been residents for several weeks and even listened with apparent interest to the presentation two or three times. However, they would then leave the transition house without joining the study. It is possible that some of them lacked the assertive powers necessary to refuse outright. It is also possible that several needed more active encouragement to join the study than it was appropriate to give.

Nine women tentatively agreed to be in the study but then disappeared from the transition house without making contact. There were several reasons why this seemed to have happened. For instance, one woman's husband found the location of the transition house, forcing a sudden move to another house; another was offered an apartment and moved out between contact times. The motives of the other women in this group are not known.

The only other major group of non-participants were women who, although residents of the transition house, did not listen to the presentation about the study. These women either were not home at the time of the meeting, went out directly after the meeting, went to another part of the house when the presentation began or had only arrived that day and had left before the next meeting. It was difficult to keep an

accurate count of these women, but there were between 20 and 30 of them.

Two women occupy a category of their own. One phoned and volunteered to be in the study but then did not answer the door for her interview. Another made an appointment but did not move into the apartment she had rented; it was later discovered that she had returned to her husband.

Those who chose to participate were a group with a high degree of similarity in terms of age, number and ages of children and length of time they had been experiencing abuse. Interpretations of the data in this study are based on accounts of the experiences of these eight women.

Past Experiences in Close Relationships

This section will describe the women's perceptions of three different types of close relationship and the social support they received from each. They are:

1. Relationships within the woman's family of origin.
2. Relationships with friends.
3. Relationships with the marital partner.

Relationships with Family of Origin

Only three women came from a harmonious and intact home. The other five had parents who had divorced--all with considerable ill-feeling--and one of them had an alcoholic mother who had occasionally been physically abused by the participant's father prior to the divorce.

Four women reported close, caring and supportive relationships with a brother. Two of the four had three brothers but reported special closeness to one of them. Two women had sisters with whom they were not in contact. Even where parents had been separated or divorced, relationships between the women and family members had been warm and caring in most cases, although two of the women had lost contact with their families. In one case it was a gradual thing which "just happened," and in the other the woman had cut off contact with her mother, father and sister because she did not like their attitude towards her husband. She said:

C.2

. . . they weren't much help. I used to try to contact them. And he, my husband was always very nice to them. There was no need for them to be [that way] . . . and my sister was very cold just because she didn't like him . . .

This woman had the alcoholic mother and wife-abusing father but even so, she remembered her childhood as essentially happy and close. Interestingly, this woman talked about how she felt she got two different messages from her father, about herself as a woman and herself as a person. She saw him as a very controlling husband.

C.2

It seemed controlled, I mean he controlled her, you know. He told her what to wear, and not to drink. What to say and when to say it . . . So I always felt my dad was kind of the type that oh, he wouldn't have minded if I had gotten any non-traditional type job, he was always pushing me to get ahead, do things. Yet, I was getting, I guess, this other example.

This woman, even though she remembered her childhood as happy and close, did not think that she had learned anything about family support from them or about the way families should be. She said:

C.2

They never talked about it [their lives together]. They had a rough time just communicating, and letting out the feelings, emotional, and stuff like that.

In general, most of the women had positive recollections of their childhoods. In all cases there was at least one person in the family with whom they felt able to share secrets and concerns and to whom they could turn for help. In most cases the women were close to their mothers and had always been able to call on them in times of trouble, but in two cases a brother was the one the woman turned to. In fact, in four cases a brother had been the only close family member who had been actively encouraging the woman to leave the abusive relationship. One brother had sought out information on the topic and brought it to his sister.

C.3

My brother gave me this article out of a magazine and in it it had the profile of a wife batterer. The end of the article listed all those things and he said "You've got to read this, this is [him]."

This is not to say that the other family members were indifferent to the woman's problems. However, there was a general understanding among the women that, although their parents would be happy to support them when they made the move

to leave their marriages, they were not supportive in helping them to make the decision to leave.

C.3

You know, my mom wanted me to leave, for a long time, but she would never come out and say "Get out of there. I want you out of there," or whatever, it was more "I hope you do decide to leave" kind of thing, "I think you should," but she was letting me make my own decision, which is the only-- I mean, I'm the only one that could.

The women accepted their families' position as valid and felt good about the support they would get if they left their husbands.

C.3

Oh, yes, knew that when-- I felt good because I knew if and when I, you know, were to leave that that support would be there. Because, you know, a lot of it you have to do it on your own but it does help to know that you have got that support out there.

One woman was quite surprised that she was getting so much support from the family of her brother's wife.

C.6

He's in [place], so we see a lot of each other. And his wife, she's really supportive too . . . I mean, I spent last Christmas there, because being in the transition home, . . . so I've gotten really close with them, so it's been nice that, in this way, I've found people who are supportive.

The women had a great deal of support from their families once they left their partners. However, in some cases it seemed that family members had not understood the gravity of the situation for some time.

C.4

And I was ready to stay over at my parents' place, but my parents said "No, you go back to him." They didn't think there was any reason for me to stay.

C.5

Well, my mom could see I was upset. She could see I was losing weight. She could see what it was doing to me. Like something was wrong. She didn't want to say anything, she didn't want to get involved. And every time they came over to see [the husband], or just to visit, they would be greeted by this wonderfully courteous man, who would go out of his way, bend over backwards for them, everything, you know, and then as soon as the door would close after they'd leave, he'd be at me again. So they didn't know any of that. So nobody understood. I thought nobody would understand, 'cause he treated everybody in my family really good. Yeah. So how would they understand that he was so awful?

Talking about her father, one woman said:

C.6

. . . he even said to me "Look, who's gonna want a 22 year old with two kids? Go back to him. You're never gonna find anyone better than him."

There may have been several reasons for the fact that the family did not immediately realize the severity of the situation. One, which will be discussed in more depth later in this chapter, is that women tend to minimize or deny the extent and/or the severity of the violence. It may be that the women were not giving very clear cues to their families because, at the time, they themselves did not understand how bad things were. This is borne out by the women's descriptions of talk between residents in the transition house. They describe--again, this will be discussed in more depth later in this chapter--how important it was to compare situations with other women because of the understanding gained during such talks. If this understanding was not achieved until they were residents, then they obviously did

not have it while they were still living at home. It may therefore be true that they were not giving clear messages to their families. They may also have been too humiliated and embarrassed to discuss it.

Both the women and their families operated within the limits set out by the abusive husbands until the women became willing or able to leave the marriage. In two cases the limits were covertly challenged. One woman used to sneak her children out to see their grandparents, which was a forbidden contact. Another had an elaborate telephone contact system set up with her mother, who was not allowed to call her.

C.1

When he was out I used to phone her. We had our phone number changed but I phoned her and I told her my new number because I said "Listen, in case you really need to get hold of me," I said, "I'll phone you once in a blue moon," and she said "Well, if I phone you and he answers the phone I'll just hang up or I'll say 'Sorry, wrong number' (using oriental accent)." She's really good at doing that.

The data from all the women, except one, support the assertion that they had potential support from their families. As will be discussed later, some of the women were slower than they might have been to approach their families or friends for help, because they did not think anyone would understand the situation. However, this reticence was not due to a belief that there was no support for them but rather to their sense that their situation was unique, unbelievable and too hard to explain. All but one of these women had grown up in a family

where there was at least one individual from whom they could get support.

Relationships with Friends

All the women had friends with whom they were close before they entered the abusive relationship. These friendships underwent a great deal of strain during the period of the marriages, and in some cases did not endure.

C.4

And that all changed as soon as I met [husband]. And I don't know what to do. And my friends, I had lost them all, because of him.

I: So you were gradually being cut off?

C: Exactly. Yeah.

I: From everybody?

C: Everybody, and everything.

One woman talked about the fact that once she was married she was allowed to be in contact only with people who had begun by being her husband's friends.

C.5

... I lost all my friends when I met him, 'cause I'm 27, and he's almost 40, so there's such a big age difference. He didn't want anything to do with the people I knew, although he had never met anybody, and known anybody, he figured they were all just . . .

Even the women who were still in contact with their friends during their marriages sometimes found it to be more of a strain than a support, because they were having to defend, to their friends, the decision to remain in the abusive relationship.

C.6

I had my girl friends. Mind you, my girl friends didn't like my husband at all. They didn't like him, and they just kept saying to me "Look, get out of there. You're starting to deserve it if you stay." I

mean, I hid a lot of the times I was beaten, because I didn't want to hear it, because I knew what they'd say.

One woman who was able to keep up a long-term friendship managed it only by making the decision not to talk about the abuse.

C.5

I had one girl friend, that I've been in touch with but she has a beautiful home, with beautiful furniture, nice husband that would do anything, and there's no way she would understand. I didn't fill her in with any of the details. She didn't know that he hit me, or she would've been pretty disgusted with me, so I just never told her anything about that. I wanted to, but I knew she wouldn't understand. She would just tell me "What are you doing? Why are you with this stupid man?" You know, that type of thing.

Throughout the accounts there was a great sense that the women would have welcomed someone knowing what was happening to them but that they found it hard to talk clearly about it. It may be that just as they had some difficulty being clear and explicit with their families, they also had the same difficulty with their friends.

Once the decision was made to leave the situation, most of the women found that they had a great deal of support from their friends. One woman talked with gratitude about the concrete support she had received throughout the extended process of leaving her husband.

C.8

And we stayed for a week at my friend's house, and then we came back for about a week and a half, or two weeks, and he threw us out again, and this time . . . he was hitting me, and, you know, slapping my head, and kicking me, and throwing things at me . . . and I was really afraid, so we stayed at my friend's this time for over a month.

The two women who worked received a great deal of support from friends at work.

C.3

I am going back to work on the 15th. And they have said to me, you know, if you need anything, you know, we are all going to look around our houses for things that you-- it was really nice. Totally. That surprised me because . . . it is a different thing giving . . . emotional support as opposed to [concrete support].

C.4

And I remember he phoned there [work] a couple of times, and each time it was kind of intervened by one of the girls, and they would kind of put him off and say "No, she's not here. We can't give you any information." But, I remember I told my manager what the whole situation was, and she was more upset than I was about the whole matter.

Other women found that when they received encouragement to leave their marriages from friends of their husband, it carried special weight with them.

C.1

[Husband's friend speaking] ". . . don't go back to him right now." And he said that right in front of [husband], and all my friends are saying "Don't go back," so that really helps.

One woman made the final decision to leave because she received a phone call from an old boyfriend just after she had been in an abusive incident.

C.5

. . . so I told him, and found him to be very supportive, and that was another way of seeing that I did have friends out there . . .

The idea of there being supportive people "out there," and what they represented to the women, was very important to them.

C.5

. . . and there was people that cared out there, and that sort of made me realize. I wanted to live the life I wanted to live, and not the kind of life he thinks I should live.

C.3

. . . I felt good because I knew if and when I, you know, were to leave that that support would be there.

In general, the women seemed to think that the social support represented by their friendships gave them strength to do the things they knew they had to do. This is an idea which is confirmed by the social support literature, where the notion is emerging that adequate social networks have a direct and positive influence on general health and well being (Braverman, 1983; Brownell & Shumaker, 1984; Gottlieb, 1983). Caplan (1961) sees the function of social support as providing the individual with feedback and validation. It is also recognized that a strong support network may help to increase personal feelings of well being and thereby influence the way a stressor is experienced by the individual (Brownell & Shumaker, 1984). A recent study by Mitchell & Hodson (1983) discussed "Social Support and Psychological Health Among Battered Women." These researchers interviewed 60 women in transition houses within a week of their arrival at the house. One significant finding is that the structure of the social ties available to a woman greatly influence the social support she receives. Specifically, the more the overlap between her social network and that of her husband, the less the support

she was offered. This is because in most cases the friends were originally her husband's friends.

It is recognized in the literature that battering may be a difficult issue on which to seek support from family and friends (Mitchell & Hodson, 1983). Battered women feel ambivalent and embarrassed about raising the issue and, as Mitchell and Hodson state:

If friends and family are aware of the situation, at least to some degree, a woman's apparent reluctance to "open up" may reinforce their beliefs that it is a "private" matter between husband and wife in which they should not involve themselves. (p. 634)

It may be that all eight women in the current study were able to leave because of their previously established support network. All of these women, even those who had been isolated from their friends during their marriages, were used to having the kind of support found in close friendships.

Relationships with Husbands

All the women had experienced physical abuse within the context of marriage. When talking about this period of their lives, some of the women showed a tendency to minimize the extent of the threat under which they had lived. Some of the things which women said were contradictory, and even when they did acknowledge that the violence occurred, they seemed to imply that some degree, level or frequency of violence was more acceptable than others.

C.2

I wouldn't say badly beaten up, I got pushed around quite a bit. Nothing like cuts and bruises on my face,

but pretty well kicked around.

C.1

We don't physically fight. We scream and yell and throw things, but we don't-- he doesn't usually hit me. A couple of times he's hit me, a couple of times he's threatened me, but-- he just can't bring himself to hit anyone. He'll grab and he'll squeeze-- I've had bruises on my arms, it's just squeezing.

C.4

The threat was there. He has threatened me in many different ways. Mainly verbally. I don't know if he would have ever done it. Actually, at one point, he did throw a boiling pot of water at me. He's thrown ashtrays at me, he's thrown a number of dishes at me. He's put knives beside him, threatened to throw them at me. I don't know.

One woman, talking about the tendency of women she had talked to in the transition house to minimize what had happened to them, said:

C.6

And there's a lot of fears I don't think that they want to hear, you know, because I know-- I'd say "Well, my husband did this." "Oh, mine's never done that. He would never do that. It's not so much that he doesn't beat me, he just kicks me in the head, or punches me." They haven't realized that that's beating.

The tendency of both abused wives and abusive husbands to minimize the extent of the violence in their relationships has been discussed in the literature (Ganley, 1981). Rounsaville (1978b) talks about the fact that women perceived and interpreted the abuse they received very differently even though, to objective observers, the abuse was identical.

However, physical abuse was only one method by which these husbands attempted to exert control over their wives. Every aspect of the wives' behaviour was monitored and

controlled by these men. All eight women had remarkably similar stories to tell in this area. Some examples are:

C.7

Mental stress would be the main thing. You never knew what he was gonna do, and he was always very critical-- I couldn't do anything right, in his eyes. He would-- you know, I might try and do things to the best of my ability, but it wasn't good enough.

C.1

I'd have to get up and do all the housework then sit around and watch T.V. I wasn't allowed to go out very much, and if he wanted to go swimming I had to go swimming, and if he didn't like the way something was done he'd tell me to do it again the way he wanted it done, and it was just a big hassle.

C.4

You know, I was thinking over all the things that have happened and, I mean, when I think about it he wouldn't even let me have a bath. I wasn't allowed to have a bath, because I was sitting in dirty water. I'm not allowed to do that. If I have a bath, I have to take a shower right after that.

Husbands also tried to influence their wives by being nice to them. This is a phenomenon well-described in the literature although there are different interpretations for it (Dutton & Painter, 1981; Ganley, 1981; Walker, 1979). Ganley recognizes husbands' excessive dependence on the women they abuse and notes that men will do more or less anything to keep their wives. Walker's battering cycle describes a "honeymoon period" following a violent incident and sees this phase as resulting from the husband's remorse. Dutton and Painter talk about the unhealthy dependency needs of these husbands.

After being in the transition house the women had a fairly cynical attitude to these influencing attempts.

C.6

Like it makes you sick So, . . . if [he] gave me flowers, I'd just-- it doesn't mean anything, because he had used it for the wrong reasons, trying to make up, you know, but flowers don't make the bruises, or the pain, or anything else go away.

C.5

Oh he said "No, no, you can't go now, this type of thing. I said "Just leave me alone," and he said "You're not going, you're not leaving," this type of thing. And I realized later that what he was doing was, he was thinking of himself at that point, because he always thought if I left him, he was going to charge me with desertion, right? That was his big ploy. He was thinking if I left, being eight months pregnant, going to a transition house, a judge would look upon that as being a pretty desperate woman, to leave under those conditions.

However, even though the women saw these attempts to manipulate for what they were, they also talked a great deal about the feelings they had for their husbands. The women had great feelings of regret and ambivalence and seemed almost to want to clarify the way they felt about their husbands and their marriages.

C.3

Oh, I don't want to live with him, but I'll always be married to him.

C.4

Although he made it happen. I don't think it was a surprise for him, nor for me. You know, we love each other very much, but we just cannot live with each other.

Some of the women talked about their husbands in ways which showed that they still felt a tie or sense of commitment.

C.5

But having kids with somebody, it's a totally different world. It's not like girlfriend/boyfriend stuff, and

you say "O.K., see you later--"

C.8

. . . because-- Oh, I forgot to mention on the tape, just before Christmas, he [was sick, which hadn't happened before], and that scared the living daylights out of me then, and also to leave him knowing that that could happen to him again, and perhaps, because he was living on his own, all by himself, I mean, what kind of guilt trip-- For the first three or four days that I was at the house, and away, I was just as terrified for him, as I was for me.

It seemed as though the women were saying that although they had taken the only action possible, this marriage was important to them and the decision to leave it was a last resort. One woman seemed to sum it up as she tried to explain her husband's feelings towards his violence and her response to it.

C.1

He feels very sorry, he doesn't know why he gets violent and he wants to find out why and work it out, but I said I won't come home until you do. Until I felt safe again.

There have been numerous attempts to explain the dynamics of the relationship between the abuser and the abused. Dutton and Painter discuss the unfortunate effects of one of the most pervasive myths, the "female as masochist", in their 1981 article on traumatic bonding. As they point out, agencies to which a woman may turn to for help often reflect such beliefs in their approach to the women.

There has been a great deal of work in recent years to challenge the masochism explanation for wife abuse (Ferraro, 1983; Langley and Levy, 1977; Rounsaville & Weissman, 1978;

Star, 1978). Other theories related to causation which appear in the literature are Walker's (1978) learned helplessness theory and theories which discuss social and cultural norms of violence (Pagelow, 1984; Stark, et al., 1979; Strauss, 1976). It is beyond the scope of this study to reach any conclusions regarding the relative merits of psychological vs. sociological theories of wife abuse. However, in the context of the present discussion it is interesting to note that a possible connection has been suggested between exposure to violence as a child and willingness to remain in an abusive relationship as an adult (Dutton & Painter, 1981). This may be because exposure to violence in childhood appears to raise the acceptance of it (Owens & Strauss, 1975) or because such exposure may lead to increased perceptions of powerlessness and helplessness (Ball & Wyman, 1978). The next section of this chapter will look at the cumulative effects that close relationships have had on the women in this study.

Cumulative Effects of all Experiences in Close Relationships

These women's experiences seem, in general, to have resulted in women who were somewhat vulnerable to the influences within their marriages but who had the degree of inner strength necessary to help themselves when they needed it. When the data were analyzed, concepts were found to be present which were similar to those described in the literature. This section of the chapter will look at the connection between the women's experiences in close

relationships and these factors mentioned earlier as being common in the lives of abused women:

1. Social isolation.
2. Low self-esteem.
3. Learned helplessness.

Each of these factors will be looked at in terms of its influence on these women's abilities to gain the support they needed.

Social isolation.

There is no doubt that these particular women were socially isolated. All the women discussed the isolation they experienced and the way it made them feel.

C.1

I wasn't allowed to talk to my mum . . .

C.3

They isolate you from family and friends or from my family, I was totally cut off from the, my family.

C.4

Because I was seeing my parents, and my parents were forbidden to be in the apartment, so whenever the subject of my parents come up we always argued over the matter.

C.6

He did [isolate me from] my friends. You know, he didn't like my dad because he preached AA. He didn't like anyone that I knew.

As previously discussed, some of the isolation was self-imposed. The women did not tell friends and family about the abuse. In this sense, there was a certain degree of self-imposed and selective social isolation. These women did not lack social contact as such. They lacked permission to

talk about the fact that they were being abused. In this sense they were socially isolated. They lacked opportunities to gain social support because their social contacts were at a superficial level.

Social isolation can vary in intensity. The effects of a significant degree of social isolation may be nervousness, less comfort in the use of social skills and decreased personal effectiveness (Jones, 1980).

These women did experience a significant degree of social isolation during their marriages; however, all eight had a well-developed set of social skills and a well-developed social network. Therefore the isolation was not complete. Any time the women were able to reach out to their network it was there for them. It can therefore be assumed that this knowledge may have given them some comfort, even at the worst of times; they were certainly not more than a phone call away from someone who cared.

Access to social resources may be an important factor in a woman's decision to stay in or to leave the relationship (Dutton & Painter, 1981). It is a well-documented trait of cult leaders such as J. Jones of the Jamestown mass suicide tragedy, or the Rev. Sun Myung Moon, to isolate their followers in order to decrease the effects of outside influence and increase their own (Aronson, 1984). In the case of these battered wives the attempts to isolate them had not been complete. They did have friends. Therefore, unlike cult

members, they were able to get feedback from outsiders. It may have been partially due to this limited contact that they were able, eventually, to make the break.

Low self-esteem.

All but one of the women had been somewhat affected by the verbal abuse they had received. All discussed a period in their marriages during which they almost lost their confidence as a result of their husbands' "put-downs."

C5

. . . and he kept saying that it was me, it was my fault, and I kept thinking it was, maybe I was stupid, and everything, and I took it really to heart, and it was always on my mind.

One woman was atypical. She described the relationship with her husband as one in which there was never any suggestion that she was responsible for the violence. Occasional disparaging remarks were made but they were never enough to make her feel inferior or to make her feel doubts about herself.

C.2

Not about me, he didn't really put me down. Which was a different thing compared to a lot of other-- well, sure, he would, little remarks, but it wasn't constant. I mean, he'd compliment me, and things, you know. So I didn't feel bad about myself. No, of believing what he was telling me, that I was stupid, or something.

In this case the husband had been severely abused as a child, and they both attributed his violence to this influence.

Both women who worked talked about the mitigating effect that the contact with outsiders had on their ability to withstand their husbands' attacks on their self-esteem.

C.3

I'll tell you what saved me is having my job because I was down in [place] three days a week and sometimes more, not too much, but there I was my own self, right? Nobody was telling me that, you know, what a crummy job I was doing.

There seems to have come a point in several of the relationships where the women suddenly realized that indeed they were worthwhile, and that what was happening was not their fault.

C.1

Yes, I used to think about it as my fault and then the second time I knew it wasn't my fault, at all, like I didn't do anything wrong.

C.5

I didn't believe it. I just knew I wasn't like that. I knew he had pegged me wrong, and from then on I just sort of sat there, and took it, and . . .

All these women had outside contacts with people who valued them and who made it plain that support was available when needed. All but one of these women had had a childhood in which there was closeness and support and a feeling of security. The one woman who had not had this childhood support was in an abusive relationship in which there were no overt attacks on her self-esteem. It is possible that the results would have been very different for her, had this not been so. Therefore, one interpretation which might be drawn is that the background of these women helped them to maintain their self-esteem. It is important to remember that none of these women went to the transition house as an immediate result of a violent incident. Rather, they went there in

anticipation of the inevitable next incident. They realized that their children were being adversely affected, or they realized that nothing would change unless they made the move to leave. This is further confirmation that the women were acting in a carefully considered way and being proactive rather than reactive.

Almost all the researchers in the literature discuss the correlation between women witnessing abuse during childhood and becoming abused as adults (Dutton & Painter, 1981; Langley & Levy, 1977). Dutton and Painter discuss the fact that girls who see their mothers beaten may begin to see themselves as "second-class citizens who deserve to be ill-treated" (pp. 142-143). This view of self contributes to low self-esteem. Gelles (1976) interviewed members of 41 families in which wife abuse had occurred. He found that one of the major factors influencing the likelihood of the wife remaining in the marriage was the amount of physical punishment she had received as a child. The more she had been struck, the more likely she was to stay with an abusive husband. None of these women had been struck as children and their self-esteem had not been irrevocably damaged by their husbands' verbal attacks, although there had been an initial period of self-doubt after the abuse began. It may be that this combination contributed to the ability of these women to begin acting in their own best interests relatively early in the process of leaving.

Learned helplessness.

Several of the women went through periods when they were not sure how to handle the situation. However, none of them ever exhibited the classic kind of learned helplessness described by Seligman (1974), attributed to abused women by Walker (1979) and endorsed by therapists (Ball and Wyman, 1978; Weingourt, 1985). In fact, these women never gave up trying to influence what was happening to them. They did this in many different ways. Several of the women made conscious efforts to involve outside agencies to help them before they actually left the relationship.

C.3

So I started to make plans and I went to a lawyer and I got his advice.

C.8

I phoned everywhere. I phoned the transition home, psychiatrists, doctors, police, lawyers, trying to get help for him . . .

Two of the women tried being very firm with their husbands, explaining that they would not take any more of the abuse.

C.1

And I told him I was going to charge him if he ever hit me again.

C.5

Gave him an ultimatum that he could drink beer, 'cause that didn't change him. I thought it was just drinking that made him abusive, so I gave him an ultimatum. He could drink beer, 'cause that didn't change him violently, or else I'd leave.

However, there were times when they felt "stuck", and unsure of what to do.

C.5

And I didn't do anything. I was stuck, I was pregnant.

One woman developed a mechanism which enabled her to tolerate what was happening to her.

C.3

. . . I would tune him out and turn it off. I mean I would just sort of be all tense inside but that was my way of handling it. I wouldn't cry, I wouldn't break down, I would just sort of sit and hardly-- I mean I just-- because I didn't care.

An illustration of how creatively the women looked for help is found in the account of how one of them found the transition house.

C.5

I was so fed up with everything, so I thought there has to be somewhere where I could go with the children. I'd heard of an unwed mothers' home so I thought, if they've got a place like that, they've got to have a place for battered women, type thing, you know, and their children to go, so I phoned, in the blue pages of the phone book, I phoned a place called Transition House, and I figured that was for ex-convicts, or something, to go after they get out of jail, you know, that type of thing, so I wasn't sure, but I phoned it anyways, and sure enough, it turned out to be the place I was looking for.

Seligman's original concept of learned helplessness linked it with the development of depression (Miller & Seligman, 1975; Seligman, 1975). This link has continued throughout the wife abuse literature (Dutton & Painter, 1981; Mitchell and Hodson, 1983). The women in the present study did not exhibit learned helplessness and they did not report depression in any clinical sense. This may be further support for a hypothesis that previous conditioning in close relationships with families and friends provided them with the

needed defences to cope with their husbands. The overall cumulative effects of their experiences in close relationships was that they were forced to leave the relationship with their husbands and that experiences with families and friends enabled them to do so. There was no evidence from these women that they ever developed feelings of apathy leading to inability to act. Indeed, quite the opposite seemed true; they recognized very reluctantly that they were not able to make the changes in their marriages that they wanted. These determined attempts to influence their situations may be a result of the upbringing these women had received.

Readiness to Leave

Even though these women were originally committed to their marriages, their experiences forced them to abandon the relationships. The decisions to leave were not taken lightly and in several cases seemed to happen only when a child was involved.

C.2

Well, my whole thing about it is that I don't want to have the baby here. I mean, he wasn't hitting me. He wasn't beating me.

C.4

I had his [the child's] welfare to think about. Up to that point, it was just me that I was thinking about. But now, I have a second person that I have to worry about.

C.7

My daughter actually came to me . . . and my daughter came out to me when I was getting supper, and she says "Mommy, I'm shaking." I says "Don't worry, so am I." And I figured right then and there I had to do something to get the kids away from the situation . . .

It has been shown that children of abusive marital relationships function significantly lower in developmental tests and higher on measurements of psychological distress and somatic complaints (Westra & Martin, 1980). The women in this study had a "gut" feeling that it was important to get their children away from the influences in the home. This intuitive feeling is amply supported by the literature on the effects of witnessing violence as children (Hughes, 1982; Moore, 1974; Post et al., 1981; Rouse, 1984). Several women later reported having these initial feelings reinforced during their stay in the transition house when they talked with other women and discovered how bad the situation might eventually become.

Star (1978) conducted a study comparing various psychosocial aspects of battered and non-battered women. Her findings are only partially supported by the present study. She finds that women are not masochistic or submissive but passive, and are less likely than average to act purely on their own behalf. It may be that having children to worry about motivated the women in the present study to act, when they would have been slower to do so for themselves alone, but they never saw themselves as passive.

Several of the women, who did not talk about children as being the motivating force, were able to leave because one particular incident finally convinced them there was no other possibility, or they suddenly "just knew" the time was right.

C.3

Right, it's incredible, you just know, and you just talk to anybody and it is just like the light goes on and you got to get out just to preserve yourself.

C.5

This time I thought, I don't want to go back. I don't want to live-- and I had to reach that point you see, and I find the reason, that's why I'm here right now, you know, I finally reached that point, thinking, O.K., just get yourself out that door, you know, and get yourself going, and don't turn back, 'cause you're making a big mistake, and just admitting to myself I don't want to live this way.

The women were unable to identify exactly what it was that made them determined to leave for good this time--as previously stated, most of them had left several times before. One of the women was seeing a psychologist who warned her that it might take a while for her to be ready to leave.

C.3

Yes. I got some strength from him [psychologist] but it didn't-- you know, I didn't leave though when I was going to him, and, of course, he said "Don't put time limits on yourself too, this could take you a year, could take you a few weeks, could take you a few months," he said, "you will just know." Yes, they call it the final footprint in one of those articles I was reading.

However, the women who had left a significant number of times before recognized that they felt "different" this time.

C.5

Actually the other two times I'd left to go to the house, I felt sick inside, to the sense of: Am I doing the right thing? Because every time I'd left before, I left not for me. I'd left because of my friends saying "Stop taking this crap. Come and live with me." Stuff like that

This last woman had been in the transition house for a relatively long time and had seen a lot of other women come and go. She had a theory related to readiness to leave the

marriage. She thought that a woman was not ready to leave until she was consciously willing to rely upon herself rather than upon others. She talked about it at length.

C.6

I think when you first get into the transition home, first of all you have to be-- it's almost like a graph, you have to be at a certain point before even leaving, and then when you leave you're at another point, but you've still got a long way to go before you make that decision that I'm not going back, ever again. And I think in the first couple of days, or so, it's a thing where you go even lower than what you've ever been in your life. Even within the relationship. It's a really neat pattern, and I think the only times where it really changes is when somebody comes in who's not ready to leave, and that's where it's different, because that's the people who really turn to someone else, instead of themselves, immediately they do that. Well, some of them have-- They come in, they've just been beaten, or whatever, and they go out with their boy friends or husbands. So, you know, that's a pretty good idea that they're turning to that person instead of themselves.

The researchers in the literature do not say what factors predispose a woman to stay away from her husband one time rather than another time when she leaves. It makes sense to think that having a baby or beginning to see children affected by witnessing violence might be one factor which encourages her to act.

This section has examined the effect that women's past experiences in close relationships had on their help-seeking behaviours prior to their arrival at the transition house. The next section will describe the women's perceptions of their need for social support after their arrival at the house.

Women's Need for Social Support in the Transition House

The women were aware of their need to leave their marriages and change their lives, but were not sure of the form the changes would take. They were also aware that they needed something from a transition house, but were not sure exactly what that something was. However, as the women began to talk about their time in the house, some of their needs became more explicit. The needs seemed to divide into (a) the need to talk, (b) the need for information, (c) the need for some degree of privacy, and (d) the need for emotional support.

The Need to Talk

Once the women had arrived in the transition house and recognized the social support available to them, they used the other women to compare situations and to gain some reinforcement and reassurance. The value of comparing experiences was enormous. The women were astounded at the similarity in the behaviour of their husbands.

C.5

Other women? Yeah, in the sense that you had a lot in common with them, and it's almost like you were talking about the same man, you know.

C.3

Very similar. You could've just written a book on those guys, and left blanks for the names, and just plugged it in.

The women felt a sense of relief when they realized that their husbands were so alike. It was this kind of use of the support which began to make them feel stronger.

C.3

Oh, it just made me feel stronger inside that I was doing the right thing. I mean, it just makes you realize there's a lot of people out there like that and, well, I knew what path they were taking, it helped me stay close to my path, stick to my resolves.

C.3

And that gave me even more strength to not go back.

One woman summed it all up and explained why it was so important for her to realize that she was not alone and that her situation was so close to the others.

C.4

Well, I keep on saying to everybody that if I hadn't gone to the house, I'm sure I would've gone back. It's just the idea that you're not the only one there doing it, and you're talking with other people, and you all of a sudden find out - well, my husband's just like that!

It was felt that feelings of self-worth came from these interactions with other residents. However, some of the women talked about meeting other residents who were not prepared to share experiences.

C.1

They all kept it inside, and kept it to themselves.

C.6

But yeah, there's gonna be problems, but the support - I think if the women want it, they're gonna get it. But it's up to the residents too. 'Cause I know when we were in there, there was times there was only one lady who had only been beaten once, and she was going back, and she didn't talk to anyone at all

One woman, talking about the difference between herself in the house at the beginning of her stay and at the end, said that talk was still valuable to her even when she was not ready to join in.

C.6

But, I mean, the day that I was there, the first day, when I didn't want to talk, everything that went on, I heard. I don't care if it was downstairs in the farthest corner of that house, I heard it.

The same woman, talking about her month-long stay in the house, said:

C.6

Oh, it was. Yeah, I'm still in touch with quite a few of the girls that I was there with. I think that helped a lot to leave, we'd really come a long way helping each other. Just having the support, from people who had been there.

The value of talk, both between residents and between residents and staff, was critical and seemed to demonstrate a desire for reassurance. They wanted reassurance that they were not the only ones, that they had really been through a lot and that their decision to leave was the right one.

C.3

. . . we would be sitting in the living room and talking and again the whole thing is the support and the confidence that comes out of discussing these problems with people who understand and have been through it. Not somebody who has never ever had it happen to them.

C.8

And I guess I didn't realize how abusive, until I got to speaking to people in the transition home, and hearing myself tell the story about how he was before made me kind of think, you know, geeze, that's been awful.

French (1983) talks about reassurance as being restoration of people's confidence in themselves and in their environments by alleviating anxiety and fear. Using this definition, the value of talk between residents of a house may be explained. It has long been recognized in the literature that talk between residents is a valuable and important

component of life in the transition house (Ridington, 1978; Vaughan, 1979). The concept of helping women gain confidence is mentioned by Vaughan as "one of the main purposes in providing shelter to battered women" (p. 114). Ridington sees the function of talk between residents in the transition house as being a way of decreasing the perception of isolation the woman might have. It is during this "talking time" that the woman begins the change process which will result in a new independent life (Ridington, 1978). The findings in this study supported this view of the value of talk.

Lynch and Norris (1978) discuss the "victim" needs in their article on providing services to battered women. They discuss the need to be able to reach help, the need for physical safety, material needs, emotional needs and the need to consider "life alternatives" (p. 554). It is interesting to note that none of the women in the present study ever mentioned physical safety or referred to it in any way. It may have been that the topic was so obvious that they never felt there was a reason to bring it up.

The Need for Information

The need for information is a more obvious one and it divides into two categories, the need for information about available legal services and the need for information about the issue of wife abuse. The women recognized the importance of the transition house staff in providing information on legal issues.

C.4

. . . I didn't even know I could qualify for Legal Aid. I didn't even know there was such a thing.

C.3

Information on Ministry of Human Resources. Yes . . . that was good because it was all new to me and that was just wonderful, the help I got there. The literature handouts were great, the more the better.

Some of the women had not even realized that this kind of information was available for them until they were given it. They recognized the staff's role in this area and were grateful for their expertise. This function of transition house staff is a well-recognized one in the literature (Loseke & Berk, 1982; Lynch & Norris, 1978; Roberts, 1981). Most transition houses seem to be prepared to meet this need.

The need for information about the issue of wife abuse was an equally important one. But in some cases, before their arrival at the transition house the women seemed to be totally unaware that such information existed. The women were given some pamphlets and literature about characteristics of abusing husbands and Walker's Cycle Theory of Violence (Walker, 1979), also known as the battering cycle. It seemed that things began to fall into place for them, once they had this kind of information.

Some of the women went so far as to imply that access to the literature was a significant factor in helping them decide not to return to the marriage.

C.3

And brother I'm telling you if I had had it [information] I might not have gone back to him. I'm

not saying guaranteed but at least, you know, I might have been more aware of what I was up against.

C.4

So that kind of helped me right there. I put it down to, if I was not in the transition house I probably would've gone back again. But being at the transition house, having the support, knowing what I went through the past month, knowing the battering cycle, putting all that together, I mean, I don't have any feelings of going back at all.

The pamphlets and handouts given by the staff seemed to assist the women to understand the issue. Another level of understanding may be being achieved during interactions with the other residents.

C.4

I could talk with the girls quite readily. I saw what they had gone through in the past, and how they went back and forth, so I knew pretty well what to expect. The staff supported me on the other side by showing me what is the [battering] cycle, look what's gonna happen, look what you've gone through, reminding me what I've gone through in the past.

The function of this kind of talk may be to take the concrete factual material the staff have supplied and to make it real and personal for the individual resident. In listening to the women's accounts there was the sense of a jigsaw puzzle in which pieces were gradually falling into place for them. There does not seem to be reference in the literature to the need women have for this kind of information. Both of the women who had been in other transition houses said that they had not been given any theoretical material and both stated that such an intervention might have prevented them from returning to their husbands the last time.

The Need for Emotional Support

In order for the women to benefit from the information they received, they needed to be in a state in which they could learn. They all talked about needing a great deal of emotional support. This makes intuitive sense considering the crisis situations in which they found themselves. Some of this need for support was met by the other women and some by the house staff. In general, the women seemed to meet each other's needs for emotional support. An exception was encountered when a particular woman did not get along well with the women in residence. In this case the woman used the staff to fulfill the same function. In either case the support was there when it was needed.

The importance of the staff's role in providing emotional support seemed to be in relation to the way in which they provided information. The women felt cared for and cared about when staff gave information to them in a manner which taught them something but which also related to them as individuals.

C.5

Lots of emotional support, and just that I think the very first time I was in there, 'cause I felt like I came from a situation where I was the only one, you know, in the world, that this had happened to. And once I got there, and they really gave me a lot of support, and [said] it was sad, but true, that it had happened to a lot of women, and all this kind of stuff, and just really were concerned.

C.6

So we arrived at the house, and I remember there was a pot of coffee, you could smell it through the house, and

it was such a warm atmosphere, like as soon as you walked in, you felt safe. [Staff member] greeted me, and she said to come on up, and we can sit and talk for a while. And just in her eyes, I remember, I knew she'd been there, that she understood.

C.8

They make it a point to ask you "How was your day? How did things go? What happened in your day?" and then after you said what happened in your day, "How do you feel about that?"

Most of the articles on transition house services recognize the need to provide the women with emotional support (Loseke & Berk, 1982; Lynch & Norris, 1978; Roberts, 1981; Sutton, 1978). However, the exact form the emotional support should take is not clearly defined. Lynch and Norris discuss the provision of "appropriate supportive and clinical counselling" (p. 558). Sutton talks about one aim of the British service to battered women as being "to offer support and advice and help to any woman who asks for it" (p. 580). Loseke and Berk talk about the job of transition house staff as involving a great deal of interpretation and interaction in order to provide their service.

The Need for Privacy

Although the women seemed to welcome the contact with both the staff and the other women, they also expressed a deeply-felt need to have time to themselves to think things through.

C.4

I'd have preferred a little bit of peace and quiet sometimes, and there was no place to go to get that.

C.5

Yet they never seemed to want to bug anybody about-- they always seemed to be very aware that these women needed a break, they needed to be left alone if they wanted . . .

This need seemed to be one of the hardest to meet because the house was small, most women had small children, and the children were unable to be outside during the bad weather. In fact, when asked what, if any, were the problems in the house, seven of the eight women immediately talked about "the kids". It was the most strongly felt concern. The concern was related to the constantly high noise level and the fact that children were often up early in the morning--making noise--and stayed up late at night--and made noise.

C.1

It was just awful. I used to get so tired. Kids were up and down the halls, screaming at the top of their lungs at five thirty in the morning.

C.2

The kids were all screaming and yelling, and all coming out of violent homes, I could see it in them. They were out of control.

Even though the women were being disrupted they recognized the stress the children were under. One woman remarked upon the fact that seeing the other children helped her to make up her mind that she was doing the right thing.

C.4

. . . because the kids, at that time, they need a lot of support themselves, and I think their support is getting from their mother. I'd like to know how you could keep the kids' attention that long. Because, like I said, they want to be with their mother, more than anything. They're scared that all of a sudden their mother is going to leave them. You know, I just knew-- it made my mind up even stronger that I was doing the right thing, and my son would be benefitting, and I would be benefitting. I

mean, can you imagine my son growing up like that?

It is obvious that the ability to provide quiet and privacy is limited in a transition house which, by its nature, tends to be crowded and noisy. It may also be true that what little might be done to meet this need is not attempted because the need is not recognized. It seems to be an accepted principle in the literature that women heal each other when they are crowded together "sharing the bedrooms and other space" (Vaughan, 1979, p. 114). The concept of sharing is central to what Ridington calls "the transitional process" (p. 569). Jobs around the house, cooking, babysitting and experiences are all shared during this process, the objective of which seems to be to convince a woman that she is not alone. While this might be all quite valid, it seems from the present data that women may need a little time to themselves to move through the process of using the support in the house.

Once the women in the study had decided to leave their marriages and arrived at the transition house, all their needs, to talk, to receive information and to receive emotional support were met without too much difficulty. The only problem area seemed to be the need for peace and quiet. The next section of this chapter will address the way in which the women went about using the support they found in the transition house.

The Use of Support

By the end of the interviews the women were feeling that their decisions to leave were the right ones even when they regretted the necessity of having to make those decisions. They had arrived at the transition house and had put into effect their usual methods of gathering the help they needed. For example, they talked to everyone who would listen, they gathered information and processed it and, unexpectedly, found that it was helpful to them to help others.

As the data were collected it quickly became obvious that the women were all, with minor variations, saying the same things. They were talking about a process which they had gone through in their use of the support they found in the house. The next section will examine the use of the support process.

The framework for use of social support began to emerge during the early stages of analysis. There were obviously themes which were of critical importance to the women and about which they talked at length. A pattern of use of support began to develop from these themes, which suggested that all the women had gone through the same stages. Validation interviews were carried out after the process had been explicitly defined.

S. Cobb (1976) defined social support as being composed of three different types of information, (a) information leading the subject to believe that he is cared for and loved, (b) information leading the subject to believe that he is

esteemed and valued, and (c) information leading the subject to believe that he is part of a network of communication and mutual obligation. The women had all received these kinds of support. From the moment of their arrival at the transition house they were made to feel welcome and cared for. They were sought out and encouraged to talk. Information was given to them in a supportive way. The other residents exchanged stories with them and gave them advice. Overall, there was no doubt that they were cared for and loved.

The women began to recognize that they were getting the information that they were esteemed and valued a little later, and in more subtle ways. For example, this kind of support was implied when other women asked for their opinion, or when the staff refused to make residents' decisions for them. The act of helping a resident to take responsibility for her own decisions was critical to her acquisition of positive feelings about herself.

An understanding of the information that a woman is part of a network of communication and mutual obligation was also implied by the talking and sharing sessions in which the women engaged. The action of sharing experiences was concrete evidence of acceptance into a group and resulted in feelings of mutuality.

Cobb's definition seems to help explain the kinds of support women were given in the transition house and the

process which emerged seems to make explicit the way in which this support was used.

The process is composed of four "stages", to each of which is attached an "orientation", a "need" and an "action". The stage describes what it is that the woman is actually achieving, the orientation describes the time period she is focussed upon, the need is self-evident and the action gives a one-word description of what it is that she is doing.

Table 1

Framework for Use of Social Support

Stage	Orientation	Need	Action
Reassurance	Past	To Listen	Taking
Analysis	Past/Present	To Reflect	Changing
Reciprocity	Present	To Talk	Returning
Independence	Future	To Act	Achieving

All the women went through all of the stages to some degree. Some had begun to work on the process before arriving at the transition house, using other sources of support. Others, because of personality differences, had less need in

one or another area. It is important to examine the four stages separately in order to understand what is going on within each of them.

Reassurance

There were many points about which the women needed reassurance when they first arrive at the house, (a) that they were not the only ones in the world being abused, (b) that they were not "going crazy", (c) that what was being done to them was not their fault, (d) that they were right to leave, (e) that there was help for them, and (f) that they could make it on their own. The way in which they gained reassurance was by "taking"; taking the support and information that was available to them.

C.8

Now that you're away from it you can look at it more objectively, but you have to hear someone else talk about it, otherwise the memories don't come clear enough.

All the women had a need to make sense of what had happened to them, to understand it, and to base their subsequent actions on a solid foundation of knowledge. One of the ways they did this was by gathering information from staff about the issue of wife abuse and the legal implications of their present situation. They also gathered information from the other women about similarities--"I'm not the only one"--and about things that worked and helped them and things that did not work, e.g., going back to their husbands. The feeling they seemed to be describing was one of reassurance.

C.4

But the main thing is, I wanted to confirm to myself that I wasn't the only one.

I: Can you put into a sentence what is the value of comparing your situation?

C: Self-assurance, to validate, you know, what you've done. Each person has to make their own decision as to what to do, but it's nice to know that there's somebody out there with the same situation.

C.5

I think, because the other women had been there before, for a little while-- and you're eager-- you know, to tell their story, everything, but you hear all these and think, What are you doing with that guy? And they say the same to you. Yeah, yeah, it sort of helps, 'cause the support is getting that way.

All the women, talking about how they sought help, mentioned either listening to everything or actually approaching people and all of them spoke about the value of the staff providing the information they needed. There was also little doubt about the women's feelings towards the value of talk among residents.

C.4

To me, it was important you get it from these other women, because they went through it.

C.8

Because if you don't talk about it that way, the things still stay jumbled in your mind . . .

When they described the differences between transition houses, the women picked out loneliness, lack of contact and the lack of talk between residents as being of crucial importance in determining how they felt about a particular house.

The stage of reassurance was first conceived of as being essentially passive, as if the women sat and had what they

needed "poured into them". The women agreed upon the nature of the stage when validating this but disputed the passivity. They saw themselves as extremely active and focussed in the way they went about taking what they needed; even when they listened rather than talked, it was viewed by them as being active. The women were oriented towards the past during this stage even though some of the information they gathered related to their future, e.g., on legal issues. The function of the stage was for women to gather information which they needed to make sense of their past.

Analysis

The function of the analysis stage was to make sense of the past, perhaps grieve for it, then move into the present. What women were doing was "changing" through a process of analysis. What seemed to happen during this stage was that women took what was given to them during the first stage, examined it closely in the light of their own experiences, and came to their conclusions.

The way women began to make sense of things was by using peaceful quiet times to think things through.

C.8

I have to have a quiet time, where I can just sit and stare out of the window, or whatever, you know, and I can think things over, and that, and I used to wait until everybody went to bed, and the workers were gone. I'd sit up at night in the front room by myself and just sort, you know.

When asked what the value of this time was, one woman said:

C.4

Just analyzing. Analyzing what I've done in the past week, or whatever-- past day-- and analyzing what other people had told me, and what they have suggested to me to do and how I could fit it all together, and what I should do.

One woman used time alone to write down what she was thinking about, to help her sort out what had happened to her, and what she could do now.

Another woman talked about the fact that she did not need much "making-sense-of-it" time in the transition house because she had planned her move from home very carefully over a prolonged period of time.

C.3

. . . already done a lot of that initial heavy grieving and planning. Like, I already had a lawyer and I'd planned to take some of the kids' clothes and toys. I'd already done a lot of that thinking stuff so I didn't feel much need for it in the house. I would have, otherwise.

The women were finally able to believe that they were not responsible for the violence, that they were doing the right thing in leaving and that they did have the resources necessary to make it alone. This was the period when they needed quiet, privacy and thinking time. This seemed to be the stage which showed the largest individual variation in degree of need. As previously stated, one woman did not feel she had much need of this time because she had "done a lot of grieving" before she left her husband. Some women needed an hour here and there alone in their rooms to think. One woman talked of looking forward to being the last one left up at

night so that she could sit and think "for hours sometimes." It makes sense that women need thinking time, be it hours or days, when one considers the amount of change that had occurred, and was still occurring, in their lives. The need for quiet and privacy may be one of the hardest to meet in a transition house because of the crisis atmosphere, the crowded conditions and the large number of children usually in residence. However, the result of successfully completing the work of this stage is that the past has been put into perspective and the woman is ready to look at the present.

Reciprocity

Women have a tremendous need to give back to other women the same kind of peer support they themselves received upon arriving at the house. This finding was totally unexpected and unsolicited. All the women made at least two or three references, with obvious sense of pride and enjoyment, to how they helped the others. Thus the way the women used the support they found was to take it, use it for as long as they needed it, then return it to the next in line. Some of them recognized the value that giving support to others held for them, and why they did it. During the validation interviews they talked about the process.

C.4

. . . if I needed help, I mean, somebody would come along and start giving me ideas of how to deal with it. If somebody else needed help, you know, you just give it automatically, and you need that.

C.5

. . . I felt I had more life experience, and I think they realized it too, and more or less took my opinions sort of as a good thing to listen to. If they would listen to me enough to see the value of somebody else's opinion--and you felt that you tried to save them from the misery.

This woman, while still in her marriage, had been phoned by her husband's ex-girlfriend, wanting to try to help the present wife to leave her husband. Having been through abuse herself, with the same man, the ex-girlfriend was trying to help in the same way that she herself had been helped by others five years earlier.

C.5

And she had . . . a lot of sympathy--like compassion--and felt that she had to talk to me before it had gotten out of hand She was the one who did the talking. Then when he came that night, I was looking at him in a totally different way And somebody who had lived with him for six years, that you know what she'd gone through, and you feel this mutual bond

This need to give back is a phenomenon which is not described in the literature. As discussed earlier, there is a great deal written in the literature about women supporting each other but no sense that the giving of such support is a deliberate, conscious move; rather, it seems to be represented as a serendipitous result of putting several women in close proximity to each other. The results of this study show that it was a deliberate act by the residents and that there were positive benefits to both giver and receiver. The need to relate to other women in this way seemed to be a strong need.

C.8

. . . and your heart goes out to those people [the residents]. I still get teary when I think about it you

know. And I go back there sometimes I walk into the house, and there are still women there, and they haven't got a clue who I am, but you want to say "How are you doing?" I'm gonna go back when I get situated better, then I can go back and say "Look, it can be done. Here I am. I've done it and you can too." It makes me feel good. It makes me feel good that I can give some back.

Women, during the stage of reciprocity, were "returning" to the new residents the support and information given to them. This returning action seems to serve several different functions. First, it helps to cement in place what a woman has learned. As one resident put it:

C.3

. . . because, you know, that kind of reinforced-- like teaching somebody something, you get to know it better as you teach them.

Secondly, it further confirmed a woman's own sense of worth and value to have other people listening to her and valuing her opinion. Thirdly, it was concrete proof of how far a woman had come and how much she had learned. Fourthly, it may be that there was an active need on the part of the woman to demonstrate her own equality and mutuality with the group. Whatever the reason, it represented an important milestone in the women's use of the transition house. It may be that as a woman moves to start meeting the needs of other women she is demonstrating a certain level of development in her attempt to leave her husband. The ability to help others may represent achievement of a necessary goal: Moving into the present.

Independence

It was obvious that the women had a clear sense of their own personal growth since leaving their husbands. No-one was upset at leaving the transition house or felt ill-prepared to do so. They all had good memories of their stay but they were ready to leave and confident of their ability to succeed on their own. The action being taken at this stage was that of "achieving" independence and the orientation was a positive one towards the future.

The sense of increased self-esteem and personal growth, which seemed to have begun to grow as soon as the women reached the transition house, continued to grow in the months immediately after they left. The women seemed secure in their decisions. They were discovering a lot about themselves and liking what they found. They had different plans under way and seemed to be well on the road to establishing the kind of independent life which is the objective of the transitional process (Ridington, 1978). One woman even went so far as to say that the entire marriage was worth it because of how she ended up.

C.6

I feel great. It's the best thing I ever did. I mean, I'm not sorry that I went through all that. That probably sounds stupid, but I mean, I've grown so much more, I've got independent. He broke me so low, that I had to grow again.

This is not to say that the women's view of the future was unrealistic. The first interviews took place within seven

to ten days after they left the transition house and the women had some definite regrets and anxieties. They were concerned about what their husbands would do, they had fears about potential problems with maintenance payments and custody battles and they recognized that it was going to be hard and lonely on their own. However, even with all these concerns, there was a general agreement that something had to be done to take control of their lives and that this was a good move.

C.3

And it's strong. Yeah, I thought it through, and I just feel that it will work, whatever it is.

C.4

Just all of a sudden, you wake up, and say, Hey, I'm alive You know, that all of a sudden you open up and say, Hey, there's a whole world out there that I haven't seen, you know, and I want to do things, I want to go places, I want to meet people, I want to-- you know, it's just go, go, go, go.

C.6

. . . I look at myself now and it's almost going from infancy to adulthood, it's just-- I mean, it's been such a dramatic change that sometimes I find myself I have to slow my growth down, so I can absorb everything, because it's just so quick.

By the time of the second and third interviews they were still feeling good about themselves as people and still talked about liking themselves. Along with this went a sense of anticipation for the things which they would achieve in time. Different women talked of going back to school, becoming a registered nurse, taking up painting, and becoming a counsellor. All the plans to meet these goals were made within a reasonable and realistic time frame, depending on

such things as age and number of children, and available time and money.

These, then, were the four stages of the process the women went through in their use of social support in the transition house.

Summary

This chapter has examined the way in which the data were analyzed in this study and the results of the analysis. This was achieved by describing the participants in the study and their experiences in close relationships in some detail, and also their need for and use of the social support in the transition house. A process related to this use of support was proposed and discussed.

The next chapter will discuss implications of the study and possible recommendations.

CHAPTER FIVE

Summary, Conclusions and Implications

Summary

This study addressed two questions:

1. What are women's perceptions of their need for social support in a transition house?
2. In what way do women's past experiences in close relationships influence their perceptions of their use of social support?

The first question was the focus of the study. The women's perspectives on their use of social support has not previously been sought; this perspective is critical to planning a service which women want and will use. The second question allowed the women to tell their stories, which they had a great need to do; it also provided background on how the women had experienced and used social support. Experiences in close relationships were also examined in an attempt to determine if past relationships influenced their present use of support.

Phenomenology was the methodology used for the study. This qualitative approach seeks to understand the meaning that people's experiences have for them. The approach examines people's perceptions of events in their lives and to tries to understand the significance of these events.

Open-ended, semi-structured questions were used as an interview guide. Women's perceptions of their experiences in

close relationships with (a) their families of origin, (b) their friends, and (c) their husbands were examined. Their relationships within the transition house setting, with staff and with other women were also discussed.

Eight women were interviewed for a total of 19 interviews. The women were initially contacted during their stay in the transition house. They were subsequently interviewed in their homes, provided they had not returned to their husbands. The interviews lasted from one to two hours and were recorded on audio-tape. The women's ages ranged from 20 to 42 years; they had 13 children between them. Apart from one woman with two teenagers, the children were small. Six women were on welfare and two were working. All the women had been physically abused.

The analysis process involved examining accounts of the women's experiences for possible relationships between themes which emerged during the interviews. Some of the themes which were discussed were related to factors previously identified in the literature as being common to the experiences of abused women, such as social isolation, decreased self-esteem and learned helplessness. Other themes emerged during data collection and were related to the women's use of social support during their stay at the transition house. A framework was developed to explain the process which all the women went through in their use of social support in the transition house.

The framework for use of social support consisted of four stages:

1. Reassurance.
2. Analysis.
3. Reciprocity.
4. Independence.

During the stage of reassurance women were attempting to make sense of what had happened to them. They were actively absorbing information about the issue of wife abuse, about their legal rights and about the way these matters related to their past. They needed reassurance that they were not going out of their minds, that they were not the only ones and that what was done to them was not acceptable.

The second stage, analysis, was marked by a need for peace, quiet and privacy. During this time the women were using all the information they had gained, to change their understanding of their own pasts and of their needs for the future. Women's needs for solitude varied greatly during this stage but all needed at least some time to themselves, to make sense of what had happened to them.

The third stage, reciprocity, described the women's needs to return to others the help and support which they themselves were given. Once they had done this the women could move on to the last stage.

The fourth and last stage, independence, was characterized by a positive, realistic orientation towards the

future. The women were by this time functioning on their own and believing in their ability to continue doing so. Their self-confidence and their belief in their own abilities was strong and, even though they were aware that they faced difficult times, they believed that they would succeed.

This framework was identified during the study. It was validated during some second and third interviews with the women.

Conclusions

The first major conclusion resulting from this study is that the popular view of day-to-day life in a transition house is inaccurate. The traditional view is that a transition house is where women thrive on unlimited crowding and closeness, gladly sharing bathrooms, kitchens, bedrooms, noise and chaos. Everyone is cheerful and supportive; when disputes arise the group solves them and growth automatically results. While some of this may be true it does not seem to be the total reality. The present study illustrates that although women do have the capacity to exist together in a group and to help each other, they need an aware and understanding staff to make sure things run smoothly. Women do become stressed by constant noise and confusion. They do need to have a place to be quiet and alone.

The second major conclusion is that women's previous experiences of close relationships may influence whether they are able to leave an abusive relationship successfully. All

the women in this study saw themselves as having had a relatively happy childhood. All but one had at least one person in the family of origin whom they could identify as supportive and to whom they could turn. They all had friendship support networks in place and available to them when they left their husbands. The women knew that even though they did not always involve their families and friends in their decision to leave their husbands, these people would be supportive when the decision was taken. It seems logical to conclude that the learned ability to use support, and the availability of that support, are two factors which may influence a woman's ability to leave an abusive relationship; only one of the women from the present study is known to have returned to her husband. All the women grew up in supportive families. It may be that women from different backgrounds might respond differently to the support in a transition house.

Conclusions can also be drawn about the factors mentioned in the literature review as being common to the experiences of abused women: (a) Social isolation, (b) decreased self-esteem, and (c) learned helplessness. The women were isolated from social support networks. Husbands discouraged meetings with friends and family. This does not mean the women were not allowed any social contacts, rather that the husband's friends were acceptable and contact with the wife's friends was lost, at least temporarily. The women were

further isolated by their own unwillingness to raise the topic of their abuse with family or friends. This seemed to be because of embarrassment, disgust or a feeling that no-one would understand. A reluctance by family and friends to hear about the violence may also have contributed to the isolation. The conclusion then is that women were not isolated from social contact during the relationship with their husbands but were isolated from meaningful social support.

Abusive husbands continually attacked their wives' self-esteem. As was suggested in the literature, the husbands were verbally abusive and constantly derogated their wives' attempts to please. All but one of the women in this study had been attacked in this way. However, there was a major difference between the way these women responded and what has been suggested in the literature. Confidence wavered momentarily in some cases but the women's self-esteem did not appear to be permanently affected.

Again, there is indication from the women's accounts that a strong support network was a critical factor in mitigating the effects of their husbands' verbal assaults. The women knew they had families and friends who liked them and knew them to be worthwhile people. This strengthens the conclusion that a supportive network may be a critical factor in determining a woman's ability to leave the relationship.

The third concept from the literature, that of learned helplessness, was not confirmed by the present study. Not one

of the women ever stopped trying to change what was happening to her. When they decided that they were unable to influence their situation from within the marriage they left it; at no point did they see themselves as helpless victims.

Often it was the realization that children were suffering which helped the women to leave. An important conclusion of this study is that the needs of the children in a transition house are not being met. All the women were affected by the children in the house. Most of them recognized that the children were in crisis just as much as their mothers were. There was no program available to help mothers to parent the children through this crisis. The women found this to be the most difficult aspect of life in the transition house.

There were several facets of life in the transition house which the women identified as being valuable in helping them to reach the decision to remain out of an abusive relationship. The atmosphere within the house was important. Women needed to feel cared for, and part of this feeling was gained by knowing that the staff were responsive to their needs. This would involve the staff showing a great deal of perception and sensitivity. Women needed encouragement to talk freely, without feeling obligated to share. They needed to have substantial social contact but they also needed peace and privacy. They needed the staff to respond with emotional support when the other women could not meet that need, but to allow the group to provide the support when possible. This

means that the staff have to "walk a very fine line" and, above all, be constantly aware of the undercurrents between specific pairs or groups of residents.

The study indicated that the availability of information in the house was another factor influencing the women's decision to leave an abusive relationship. The provision of legal and theoretical information on the issue of wife abuse was seen by the women as one of the most valuable aspects of the transition house service. The need for legal counselling is well-recognized in transition house literature. The need for theory on wife abuse is not so well recognized and may be even more important.

The last major conclusion relates to the framework for use of social support, and is: All abused women who have successfully completed the transition from a relationship to independence have worked through all four stages of the process described in the framework. This conclusion may be helpful for staff in a counselling context. For instance, women may need help working through the stages of the process; staff may adapt their counselling approaches to the knowledge of the stages.

Implications

The implications to be drawn from this study fall into three categories:

1. Implications for service.

2. Implications for nurses and other health care professionals.

3. Implications for research.

Implications for Service

There are considerable implications inherent in the framework for those providing service in a transition house. It would be helpful to women, when they first arrive at the transition house, if they were given immediate feedback that they are not to blame and that they have done the right thing in leaving an abusive relationship. It would also be helpful, both to the women and to those working with them during the stage of reassurance, to have a clear idea of the women's support networks. Therefore it is important to prepare histories of family and friends upon their arrival, and thereafter encourage them to maintain contact with those who are helpful to them.

Contacts within the house need to be established. Women must be given time to settle in and to get to know the other residents so that supportive relationships between them can grow. In the first few days, women may appear to be quiet and withdrawn, not talking much, but listening carefully; this is important time and should not be hurried. It is at this stage that women are gathering the information they need to make major decisions about their futures.

The next stage, analysis, begins when the women have gathered the information they need. Ways must be found during

this period to help the women have the quiet time they need. For example, children's bedtimes could possibly be more strictly enforced so that the evenings, at least, are peaceful. Each transition house would have to address this concern within the limits of its physical structure; it may be more difficult in some houses than in others to provide space for peace and privacy.

Another implication, inherent in this stage and in the next, reciprocity, is that a woman's peace may have to be protected from another woman's need to talk. For instance, if one woman needs to talk, and all the others are seeking privacy or have reached independence and are in the leaving process, the staff must move to meet the needs of that woman. Or, if one woman has an overwhelming need to help and the other has an overwhelming need for privacy, the staff must move to protect each from the other.

The framework implies the possibility of substantial benefits to be gained from the interaction of women in the transition house. As described above, it might also help to explain some of the interpersonal difficulties which occasionally arise. Staff must be aware that there may be advantages from women in the house being at different stages in the process; but staff also need to be constantly aware of the potential for problems resulting from women being at different stages. Indeed, achieving harmony between women at

different stages in the process may be one of the most difficult tasks facing transition house staff.

Women in the final stage, independence, place the fewest demands on transition house staff. They might require help with practical matters such as opening a bank account or having a telephone installed but in general they are ready to function with a minimum of support and intervention.

One last implication concerns children of abused women. It is vital that some kind of specific program be placed in transition houses to address the needs of these children. Until transition houses are able to provide this kind of program as an adjunct to the existing service, the cycle will continue. It is recognized that the needs of the women come first, they are the *raison d'être* for a transition house. However, the needs of the children are inextricably linked with the needs of their mothers, and they are not being met.

Implications for Nurses and Other Health Care Professionals

One of the most interesting findings of the study was that there was no evidence of health care workers being involved in the lives of these women. This confirms the opinions and assertions stated in the literature that health care professionals are not doing what they should to address the issue of wife abuse. Only one woman in the study had turned to physicians and nurses for help; all had completely misread the situation and in fact had made it worse. One other woman had volunteered to have a student nurse follow her

family for a period. This woman had apparently not even considered explaining her predicament either to the student, or to a health nurse with whom she had been in contact.

There are two possible reasons for this lack of use of health care professionals, based on the women's experiences and on what is written in the literature. One is that they are generally uninformed on the issue of wife abuse. The other is that abused wives do not regard them as a useful resource. Both reasons are probably valid in a general way, so the implications are obvious: Health care professionals must upgrade their knowledge and review their commitment to help these women and their families to find solutions to what are real health care concerns. Women may encounter physicians and nurses in a variety of settings such as doctors' offices, hospital emergency departments, maternity units and baby clinics. All assessments of women living with a partner should involve questions addressing the possible occurrence of violence within that relationship. Men, too, should be given appropriate opportunities to discuss the occurrence of violence in their relationships.

There are a number of resources available to health care professionals which give explicit examples of how to approach this issue. One of them (Sinclair, 1985) provides sample questions for every possible situation, e.g., what to ask a child if you suspect--and only suspect--violence; how to deal with a situation where violence is suspected and husband and

wife visit the office together. Health care professionals need to become comfortable in asking questions such as "How is anger handled in your family?" or "For instance, some people, when they are angry, might kick, punch, hit or choke; does that ever happen in your house?" This approach gives the client--man, woman, or child--explicit information that it is permissible to talk about violence.

Health care professionals need to be better informed about the issue of family violence and about available resources for the victims of violence. This would involve the inclusion in basic medical and nursing curricula of theory relating to the issue. The ability to use such theory would involve taking time to practice the use of the necessary skills in settings like transition houses. If such content were included in the basic education of health care professionals they would be better equipped to address the needs of their clients.

There is one obvious way in which to involve a health care worker in the lives of women in transition houses: To provide liaison between the area community health nurse and women leaving the transition house. This might help to bridge the transition between life in the transition house and total independence. It might also provide women with a useful resource in their new community.

There are many opportunities for health care professionals in general, and nurses in particular, to make a

positive impact on the lives of abused women. More creative ways to make this happen need to be developed.

Implications for Research

The findings suggest several implications for further research. They fall into three categories, relating to (a) abused women, (b) children of abusive relationships, and (c) the framework for use of social support.

The study should be repeated, using different populations of women, e.g., childless women, elderly women or women raised in non-supportive families, to determine whether they would react in the same way to being in a transition house. It would be useful to interview women while they were still in a transition house because the group who return to their relationships could then be included; in this way, differences between those who do and those who do not return might be identified.

All the women in this study discussed difficulties with children in the transition house; studies of children's use of the house would help to identify their special requirements. It is an accepted principle among those who work in family violence that children of abusive relationships grow up to be abusers or victims of abuse. Yet, little attempt is made to address the needs of these children in any systematic manner.

The framework for use of social support needs to be studied from several different approaches. (a) An attempt should be made to isolate and describe behaviours which may be

characteristic of each stage of the framework; if this could be achieved, the utility of the framework would be improved.

(b) The relationship between successfully progressing through the stages of the framework and the ability to retain independence should be studied. (c) The generalizability of the framework needs to be tested in a variety of situations. (d) The predictive value of the framework needs to be studied.

In conclusion, women in transition houses have a number of needs to be met in the area of social support. The more-informed transition house staff are about these needs and about the ways women go about meeting them, the more valuable they are to the women. The framework for use of social support may prove to be an important guide for staff to use in assisting women to make the transition from an abusive relationship to an independent life.

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Appendixes

Appendix A

Introductory Letter to Potential Volunteers

Dear

I am a registered nurse presently working towards a Master's degree at the University of British Columbia. This letter is to inform you of a study I am going to be doing as my thesis work.

I have become very interested in the general area of family violence and, in particular, of wife abuse. I spent some time working as a volunteer in [Name] House and became interested in how much support women give and receive in such a setting. My study will be aimed at identifying what will help women get the most benefit from such an experience.

This letter is to ask you to participate in the study. Participation would involve approximately three tape-recorded interviews after your stay in the house. No names will be used at any point during the study and any material you do not want to leave the room will be erased from the tape in your presence. If you decide to participate, then change your mind, you can withdraw at any time. Your participation is entirely voluntary. Withdrawal will not influence your right to use the services of the house.

When the study is complete, a report will be written and a copy will be kept at the transition house for you if you would like it.

It is hoped that this study will benefit women who utilize transition houses.

If you are interested in participating, please tell a staff member at the house and they will contact me. Thank you.

Yours sincerely,

Angela Henderson, RN., BSN..

Appendix B
Sample Questions

- : Can you describe life in the transition house?
- : What led up to your being in the transition house?
- : Can you say what was the best thing about being there?
- : What was the most difficult part?
- : Did your feelings about yourself and/or your marriage change during your stay in the house? If so, how?
- : How did you get along with the other women in the house?
- : Is there any way you would like to see the transition house service changed that would improve it for you?