A Study on Visible Minority Immigrant Women's Experiences with Domestic Violence

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A Study on Visible Minority Immigrant Women’s Experiences with Domestic Violence

By

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Completed in Partial Fulfillment for the

Master of Arts in Social Justice and Community Engagement

Wilfrid Laurier University

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Abstract

The purpose of this exploratory and qualitative research was to better understand the personal experiences of visible minority immigrant women seeking help with domestic violence in Southern Ontario, Canada. Over the course of two months, I interviewed two survivors of domestic violence and three professionals about their personal and professional experiences on the issue of domestic violence impacting visible minority immigrant women. A gender-based analysis of the participants’ narratives revealed that a number of diversity-related axis such as, gender, visible minority, immigrant status and economic status influenced women’s experiences with abuse. The results exemplify the various barriers they experience and supports that are available for visible minority immigrant women seeking help with DV, and presents several policy and practice implications. Specifically, visible minority immigrant women experiencing DV face challenges in respect to foreign credentials and employment, language, culture, isolation, and shelters. In addition, structural barriers such as the police, court, spousal sponsorship policies, legal status and fear of deportation/breakdown of sponsorship further contribute to obstacles in seeking help with DV. However, various supports were outlined as mitigating several of these barriers.
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Chapter I: Introduction

Framing the Issue

In December 2014, when I was about to embark on my research on domestic violence (DV) among visible minority immigrant women, I learned of the death of Zahra Mohamoud Abdille and her two sons, whose bodies were discovered inside their apartment in Toronto. Zahra had fled war-torn Somalia in the late 1990s and came to Canada with no family or support system. According to Dr. Roz Roach, who is the executive director of Dr. Roz’s Healing Place, Zahra had experienced physical, emotional and financial abuse at the hands of her husband, although his involvement in the homicides is still being investigated. Zahra and her two children had stayed in the centre’s shelter for a period of time in 2013, and during her stay there, Zahra battled for the custody of her children. As a public health nurse in Canada, Zahra did not qualify for legal aid and could not afford a lawyer as her husband controlled her income. After leaving the shelter, the family moved into a private rental, but Dr. Roach suspects that Zahra may have been unable to afford rent, forcing her to return to her abusive partner. In Dr. Roach experience, these obstacles are linked to the system (e.g., Zahra’s inability to qualify for legal aid, social assistance or affordable housing), are common for many clients, and set “a trap” (CBC News, Dec 3, 2014; The Star, Dec 2, 2014).

This recent case is significant in showing that DV is not an issue of the past, and it continues to be a relevant topic impacting many visible minority immigrant women, and Zahra’s name can be added to a long list of Canadian DV cases. I must add that Zahra’s situation is different from my research due to the homicide; however, the structural barriers that Zahra experienced are far too common for many visible minority immigrant women seeking help with DV as will be explored in this Major Research Paper (MRP). Visible minority is defined under the Employment Equity Act in the following way:
Persons, other than Aboriginal peoples, who are non-Caucasian in race or non-white in colour. The visible minority population consists mainly of the following groups: Chinese, South Asian, Black, Arab, West Asian, Filipino, Southeast Asian, Latin American, Japanese and Korean. (Statistics Canada, 2009).

Although this research relies on the concept of visible minority to show racialized experiences, I stress that race is a social construction.

I use the concept of DV synonymously with similar concepts that denote partner violence. DV is about men controlling women through the use of violence in intimate partner relationships (Johnson & Ferraro, 2000). More specifically, Johnson’s (2005) concept of intimate terrorism is useful here to demonstrate violence as a general pattern of control. Johnson and Leone (2005) define it as “The attempt to dominate one’s partner and to exert general control over the relationship, domination that is manifested in the use of a wide range of power and control tactics, including violence” (p. 323). Therefore, I am not just concerned with the physical violence aspect of DV, as it can also include verbal, emotional and/or psychological violence as well (this is not an exhaustive list).

**Domestic Violence Facts**

According to Sinha (2013), quantifying the problem of violence against women can be challenging for two reasons. First, the possibility of undercounting can exist due to women’s reluctance to disclose. Second, “estimates of the prevalence of violence can vary depending on the survey” used (p. 11). Sinha (2013) further adds, “Due to the divergent methodologies between surveys, comparisons should be made cautiously” (p. 11). With these statistical limitations in mind, I attempt to present several DV facts.
DV is a pervasive issue impacting the majority of women. According to Statistics Canada, women are at a higher risk of intimate partner violence than men (Mandell, 2005). Canadian Women’s Foundation (2014) indicates, “83% of all police-reported domestic assaults are against women. This pattern is consistent for every province and territory across Canada.” (p.4). This shows that gender plays a key role in the risk of intimate partner violence. In addition, it is important to recognize that all women can experience violence. Duffy claims, “All women, regardless of class, colour, race/ethnicity, ability, age, or sexual orientation, are subject to violence” (as cited in Mandell, 2005, p. 127). In other words, violence does not discriminate: all women are at risk of experiencing violence. However, while all women can experience violence, it is important to acknowledge that certain factors such as immigrant, visible minority and economic status can play a role in exacerbating vulnerability.

Although studies remain unclear in terms of the exact rate of DV in visible minority immigrant communities, Statistics Canada (2009) using police-reported data, did report the following: “Reporting spousal violence incidents to police did not vary between visible minority and non-visibility minority women. Rates of reporting spousal violence against women were also similar between immigrant and non-immigrant women.” (Section 4: Responses to violence against women). Similarly, the 2009 victimization survey revealed that those who identified “as a visible minority or an immigrant were not found to be associated with increased levels of spousal violence” (Statistics Canada, 2011, p. 11). Nevertheless, Mcdonald (1999) argues that “Studies that indicate the prevalence of domestic violence in immigrant communities may do harm by further stereotyping immigrant groups” (p. 166). Thus, inferring numbers from data becomes difficult. However, my aim for this research is not to show whether visible minority immigrant women experience DV more frequently compared to non-visible minority and non-immigrant women, but rather to shed light on the unique experiences of visible minority immigrant women.
seeking help with DV. Thus, the focus is not to do a comparative study, but rather to show how their social position as visible minority, immigrant, women, and being economically disadvantaged may increase their vulnerability to DV. Canadian Women’s Foundation (2013) noted, “Immigrant women may be more vulnerable to domestic violence due to economic dependence, language barriers, and a lack of knowledge about community resources.” (p. 5). Understanding these unique barriers among others will be the primary focus of this MRP.

While examining facts of DV can enhance our understanding of the seriousness of the issue, drawing on existent theory can assist in deepening that understanding. According to Loseke, Gelles, and Cavanaugh (2005) our understanding of violence is incomplete if we do not recognize that DV is about gender and power. The authors further acknowledge the importance of the coercive control model of DV claiming, “It identifies violence as a tactic of entitlement and power that is deeply gendered, rather than as a symptom of a disorder or as a conflict tactic that is individual and gender neutral.” (p. 24). This is also reinforced by Duffy (2005) who asserts, “Men commit violence against women because their power in society allows them to do so” (as cited in Mandell, 2005, p. 141). She stresses that the issue is not individual men but rather a social order (patriarchy) in which, generally men enjoy more power and privilege than women, and institutional structures such as family, education, and the state for example, support male privilege (as cited in Mandell, 2005, p. 143).

**Research Question**

In this MRP, I hope to demonstrate the experiences of visible minority immigrant women in seeking help with DV in Southern Ontario, Canada. More specifically, I will present the various barriers they experience and supports that are available for visible minority immigrant women seeking help with DV. It is important to study the experiences of visible minority
immigrant women dealing with DV because their experiences are unique and multifaceted due to their position as immigrant and visible minority women. The goal of this research is to gain a better understanding of the personal experiences of visible minority immigrant women dealing with DV in a new country, and the various factors that encourage or deter many from seeking help with DV.

The key question framing this study is the following: *What are the experiences of visible minority immigrant women in seeking help with DV in Southern Ontario, Canada?* The sub-question is: *What are the various barriers they experience and supports that are available for visible minority immigrant women seeking help with DV in Southern Ontario?* Framing the research question in this way allowed for understanding both the barriers and supports that shape visible minority immigrant women’s experiences with DV.

I am optimistic that the findings from this research will contribute to new and important knowledge regarding the experiences of visible minority immigrant women seeking help with domestic abuse in Southern Ontario, Canada. I am also hopeful that this may lead to informing and improving immigration/DV policy and practices.

**Research Boundaries**

My study examines how diversity axis such as gender, immigrant, visible minority and economic status shape the lived experiences of women seeking help with DV.

For the purpose of this study, I limited my discussion of DV to heterosexual visible minority immigrant women in Canada, while still recognizing the existence of same-sex relationships among immigrant communities. Additionally, although men may also experience DV, women will nonetheless be the focus of this research as they represent the majority of the victims of DV. I am interested in the diverse experiences of visible minority immigrant women dealing with DV,
and thus, this study does not focus on one particular visible minority immigrant group. Furthermore, my research specifically focuses on the experiences of first-generation immigrant women, which includes newcomer perspectives. I use first-generation to refer to “people who were born outside Canada” (Statistics Canada, 2011).

Moreover, violence against women can take many forms, however this particular research is mainly focused on DV. I also acknowledge that women can experience multiple forms of violence over their lifetime, and thus, by using life story interview method (Atkinson, 1998), it allowed for the two survivors to share other forms of abuse that they may have had experienced. However, both women only mentioned DV, thus, making it the primary focus of this study.

**Chapter II: Literature Review**

I have divided this literature review into three main sections: strains of immigration, barriers to seeking help with DV, and gaps in the literature. The first section sets the context in which I will explore general immigrant experiences. The second section presents the various barriers that immigrant women experience in seeking help with DV. The final section will identify gaps in the literature, keeping in mind that the information presented should not be considered exhaustive. This literature review merely acts as a backdrop for my research.

**Context: Strains of Immigration**

According to Fleras (2010), the “twenty-first century may well become defined by the movement of peoples from one country to another” (p. 247). Merali (2008) further reinforces this notion by stating, “We have reached a time in global history that is marked by an unprecedented level of international migration” (p. 281). Specifically, the 2006 Census of Canada estimated that immigrants represented nearly one in five (19.8%) of the total population, and “the percentage of people living in Canada who were born elsewhere is expected to continue to grow” (Alaggia,
Regehr, & Rishchynski, 2009, p. 335-336). With this expected growth, there is a need to examine some of the challenges that immigrants experience due to moving to a new country, and how some of those challenges create barriers to seeking help with DV for immigrant women. Some challenges include (but are not limited to), learning a new language, securing employment, lack of political power, integration, isolation, and lack of foreign credential recognition (Fleras, 2010; Li, 2003). All of these challenges are pertinent to immigrant experiences, but the purpose of this section is to explore three specific challenges such as, family class sponsorship, Canadian job market and foreign credentials, and integration, as it provides the context for exploring the specific experiences of visible minority immigrant women dealing with DV (see section “Barriers to Seeking Help with DV”).

Family Class Sponsorship

There are three main categories of immigrants under which people are admitted into Canada as permanent residence and these are: Family Class, Refugee Class, and Economic Class (Statistics Canada, 2011). Out of these three categories, Family Class immigration is the principal manner in which foreign nationals enter Canada (Simes, 2010). Moreover, Statistics Canada (2011) reports that “women were more likely to be admitted under the Family Class category”, compared to the Economic Class or Refugee Class (p. 6). Merali (2008) argues, “Although family immigration policies were initially developed to promote family reunification” Canada has experienced “a large influx of female marriage migrants in recent decades.” (p.281). In addition to marriage migrants being predominantly female, sponsorship to Canada is mostly South Asian (Simes, 2010). As of 2011, the three largest visible minority immigrant groups consisted of South Asian, Chinese and Blacks (Statistics Canada, 2011).

Simes (2010) indicates that in Canada, the majority of sponsored individuals immigrating under the family class sponsorship are spouses who are largely women. Consequently, any
policy, law or regulation pertaining to spousal sponsorship will have a disproportionately
gendered effect (Simes, 2010). As a result of this, the spousal sponsorship process puts sponsored
females in Canada in a more vulnerable position, making them more prone to maltreatment.
Merali (2008) wrote, “Their vulnerability to maltreatment has been attributed to the gender-
insensitive nature of family immigration policies” (p. 281). This has led to structural barriers to
seeking help with DV for visible minority immigrant women, which will be examined in greater
detail in proceeding sections.

**Job Market and Foreign Credentials**

According to Statistics Canada, one of the difficulties encountered by new immigrants
was finding an adequate job, with 46% citing this as the most difficult (Statistics Canada, 2012).
If we take this Statistics Canada finding and compare it to immigration practices, one would
assume there is a gap between policy intent and reality on the ground. For example, Fleras (2010)
claims that Canada increasingly looks for those immigrants with higher skill levels and nearly 60
per cent of immigrants are defined as economic, yet once they arrive here they experience
difficulty in finding employment. In addition, Guo (2009) highlights the fact that, “Lack of
Canadian experience and transferability of foreign credentials were reported as the most critical
hurdles to employment.” (p. 43). The author further adds, “Non-recognition of foreign credentials
prevents them [immigrants] from accessing professional jobs in Canada and acquiring Canadian
work experience, which subsequently makes it difficult for them to be qualified for professional
jobs” (Guo, 2009, p. 42).

Moreover, Guo (2009) found that the following barrier hampers the process of foreign
credential recognition: “Lack of agreed-upon national standards” (p. 42). For instance, for
admission purposes “postsecondary institutions conduct their own assessment of foreign
credentials.” (Girard, 2010, p. 132). Additionally, “Professional associations set their own
standards of certification” (Guo, 2009, p. 42). This can create inconsistency in the process, and a lack of clarity when it comes to the job market and Canadian employers. According to Fleras (2010), “Immigrants may be selected for their skills, credentials, and work experience; yet Canadian employers don’t want to use these or don’t know how to” (p. 272). Guo (2009) also claims:

It is only after arriving in Canada that many highly educated immigrant professionals learn of the typical deskilling or decredentializing of their previous learning and work experience. While certain forms of knowledge are legitimized as valid, the learning and work experience of foreign-trained professionals are often treated with suspicion and as inferior. (p. 38).

The author argues, “The assessment and recognition of prior learning, or the lack thereof, is a political act” (Guo, 2009, p. 38).

Furthermore, the lack of recognition of foreign credentials has different consequences for women compared to men. Guo (2009) states, “After immigrating to Canada, many immigrant women professionals are unemployed or working part-time in jobs for which they are overqualified.” (p. 44). Also, according to Statistics Canada (2011), immigrant women had a lower employment rate compared to their male counterparts. These examples show that the lack of recognition of foreign credentials can lead to employment barriers, and its effects play out differently for immigrant women. For instance, it can make immigrant women more prone to economic instability, which can lead to barriers in seeking help with DV, as will be examined in the second section of this literature review.

**Immigrant Integration**

In presenting other immigrant challenges, Modood argues that immigrant integration is a two-way process of mutual adjustment but that this reality has not been fully recognized by
Canadians (as cited in Fleras, 2010, p. 275). Li (2003) defines integration as a term “commonly used in Canada’s immigration discourse to refer to the desirable way by which newcomers should become members of the receiving society” (p. 315). However, Li (2003) is critical of integration, arguing, “In reality the assessment is often based on a narrow understanding and a rigid expectation that treat integration solely in terms of the degree to which immigrants converge to the average performance of native-born Canadians and their normative and behavioural standards” (p. 316). He further suggests that the discourse of integration rests on endorsing cultural diversity, but instead, specific cultural differences are perceived as obstacles to integration, especially those deemed far removed from the Canadian standard (Li, 2003). The pressures of integration have also been felt directly by immigrants themselves, and according to a focus-group study, “Despite Canada’s multicultural commitments, minority managers believed they had to Canadianize themselves—shed their culture and lose their accent—for promotion and success” (as cited in Fleras, 2010, p. 303). This example displays another challenge that immigrants experience as a result of moving to a new country that is culturally and linguistically different from their home country.

**Barriers to Seeking Help with DV**

Many of the dominant literature on immigrant experiences dealing with DV highlight that there are several common barriers that immigrant women (visible minority and otherwise) face in seeking help with DV. In the next following pages, I will present the barriers that numerous academics have conveyed as significant in examining immigrant women’s experiences in relation to DV across several countries. The common denominator between these countries at hand is that they all tend to be Western nations and major receiving countries for many immigrants.
As several of the key authors recognize, it is important to acknowledge that these barriers are not mutually exclusive, and often times overlap, and thus intensifying immigrant women’s experiences with DV. This is particularly highlighted by academics Menjivar and Salcido (2002) who claim that experiences of DV among immigrant women are intensified as a result of their immigrant status by factors such as, “limited host-language skills, isolation from and contact with family and community, lack of access to dignified jobs, uncertain legal statuses, and experiences with authorities in their origin countries” (p. 898). Additionally, Macleod and Shin stress that immigrant women not only confront issues of domestic abuse but also economic, social, linguistic, and cultural marginalization (as cited in Mandell, 2005, p. 145). Specifically, the barriers that will be explored in this section are: cultural, community, social services, language, isolation, and structural.

**Culture: Harmful Stereotypes**

According to Menjivar and Salcido (2002), there has been a common tendency to stereotype domestic violence as part of some ethnic groups culture. Echoing a similar perspective, Sokoloff and Dupont (2005) argue that when violence occurs in communities of colour and immigrant communities, “culture is often alleged to have a particularly influential explanatory power” (p. 46). Pratt and Sokoloff further note that “specific cases are not conceptualized as reflecting individual behavior; instead, entire groups are stereotyped” (as cited in Sokoloff & Dupont, 2005, p. 46). Accordingly, harmful stereotypes about culture can have real life consequences for many racialized immigrant women. For example, Burman, Smailes, and Chantler (2004) argue that DV services to women of particular backgrounds are structured around assumptions about culture, which contributes to barriers in accessing DV services. The authors aver that DV experienced by minoritized women is “rendered less visible, as something that can be overlooked or even excused for ‘cultural reasons’: a homogenized absence” (Burman
et al., 2004, p. 333). They further emphasize, “just as accounts of domestic violence have moved away from ‘woman-blaming’, so it is important to avoid ‘culture-blaming’ minoritized cultures” (Burman et al., 2004, p. 335). These examples show how harmful stereotypes about culture can lead to barriers in accessing DV services for certain groups.

Moreover, Singh (2013) touches on the East and West debate and the underlining assumption that the West has figured out the problem of women’s oppression, while the East still has to catch up, making reference to “Western civility and Eastern barbarism in the liberal democratic imaginary” (p. 32). Singh claims that the West is presented as a serving model for the rest of the world. According to her, this is problematic because it misleadingly suggests that migrant women from the East will enjoy the benefits of female empowerment and the potential for less violence when they cross borders (Singh, 2013). Holding these types of stereotypical beliefs and attitudes are especially problematic because conditions for violence are often exacerbated once immigrant women move to a new country by all the factors listed previously. The analysis by Singh further shows how culture has been used as a standard by which to measure violence against women, and thus, further reinforcing harmful stereotypes about culture.

Nevertheless, Sokoloff and Dupont (2005) acknowledge the importance of understanding the role that culture can play in combating domestic violence but warn against relying on simplistic notions of culture. The authors claim, “Rather, we must address how different communities’ cultural experiences of violence are mediated through structural forms of oppression, such as racism, colonialism, economic exploitation, heterosexism, and the like” (Sokoloff & Dupont, 2005, p. 45). This contention suggests that when examining barriers, we cannot look at them separately as they often overlap.
Community Response

As previously discussed, harmful stereotypes surrounding one’s culture can prevent immigrant women from accessing DV services. While it is essential to contest the harmful stereotypes about culture that mainstream society holds, constructive discussions on the role of culture and community can provide valuable insights in understanding the unique experiences of visible minority immigrant women. For instance, it is important to examine how immigrant communities can present barriers for visible minority immigrant women seeking help with DV. Shankar, Das and Atwal (2013) in their discussion on barriers that prevent South Asian women from seeking help, argue that many women who migrate, often have “no trusted family members they can turn to for support and may be terrified of consequences such as ostracism from the community…if they talk about intimate partner violence or are seen accessing help.” (p. 259).

Moreover, according to Crenshaw (1991) there is often “resistance by the immigrant community to those who attempt to provide support services to abused women mostly in fear about the “image” of the community” (p. 1248). In specifically analyzing the Black community and its response to DV, Crenshaw (1991) argues that the “political or cultural interests of the community are interpreted in a way that precludes full public recognition of the problem of domestic violence” (p. 1256). She indicates that many believe that exposing gender violence within the Black community might reinforce distorted public perceptions and/or generalizations about black men as pathologically violent. Crenshaw (1991) states, “Suppression of some of these issues in the name of antiracism imposes real costs” as the issue of DV may not be addressed as a serious issue (p. 1256-1257).

Social Services

Another barrier that immigrant women face is in relation to social services being ill-equipped to effectively respond to the DV that they are experiencing. Menjivar and Salcido
(2002) in examining DV against immigrant women in Britain aver, “there are several groups that provide shelter to women who are victims of domestic violence, but few do so for immigrants” (p. 914). In addition to the lack of DV services that are specifically geared towards immigrant women, the authors further suggest that in several cases, outreach initiatives use mainstream forms of advertising for their services (i.e., newspapers), and thus, neglect culturally appropriate ways of communicating information, such as informal networks (Menjivar & Salcido, 2002).

Furthermore, Menjivar and Salcido (2002) underline that “cultural sensitivity and immigrant-language skills among professionals in the community” poses another challenge as it affects their ability to effectively communicate with the victims experiencing DV, which in turn hinders the ability to provide adequate information (p. 914). Additionally, Gill highlights limitations with mainstream service providers specifically in Canada, and notes that they may “fail to provide culturally appropriate supports and interventions that can empower these women and perpetuate the racialization of their cultures and religions as inferior, primitive and barbaric” (as cited in Shankar et al., 2013, p. 250). One way to tackle these issues is to recognize that there is no “one-size-fits-all explanation for domestic violence and that, consequently, solutions must reflect these differences” (Sokoloff & Dupont, 2005).

**Language**

Language can further act as a barrier and contribute to the disadvantages that many immigrant women dealing with DV already experience in terms of accessing and communicating their needs to service providers. Crenshaw (1991) argues that language barriers limit opportunities for non-English speaking women to benefit from existing support services. She states, “such barriers not only limit access to information about shelters, but also limit access to security shelters provide” (Crenshaw, 1991, p. 1249). Bui and Morash stress similar sentiments, noting, “Language is a factor that impedes women from learning and accessing services in
receiving communities” but it also impedes on communicating their needs to these services (as cited in Menjivar & Salcido, 2002, p. 903).

The role of language as a barrier for many immigrant women seeking help with DV cannot be understated. Crenshaw (1991) indicates, “Some shelters turn non-English speaking women away for lack of bilingual personnel and resources” (p. 1249). Even in cases where interpreters are available and used, Menjivar and Salcido (2002) assert, “the information given to a police officer may be filtered and distorted by an interpreter who may even favor the aggressor” (p. 914). Accordingly, language barriers can lead to higher levels of vulnerability, alienation and ridicule among immigrant women experiencing DV (Menjivar & Salcido, 2002). However, being proficient in the host country’s language(s) or being able to access appropriate linguistic support can eliminate some of these conundrums. Menjivar and Salcido (2002) further note, “Language can break barriers for immigrant women in domestic violence situations since women’s language proficiency can reduce the batterer’s ability to reinforce his power to control” (p. 903). For instance, language proficiency can provide immigrant women with the means to be able to ask for help. When immigrant women cannot speak English, it will limit their level of communication with the majority of Canadians and thus, leading to issues of isolation and accessing DV services.

Isolation

Isolation is another barrier that can affect immigrant women experiencing DV and hinder them from seeking help. Raj and Silverman (2002) argue that immigrant women experience an additional layer of vulnerability because these “women live within two often conflicting cultures and within a context in which they are isolated and viewed as other” (p. 369). This shows that the experience of moving to a new country can be an isolating one even without the domestic abuse, simply due to being viewed as other, but experiencing DV can further enhance these feelings of
Menjivar and Salcido (2002) note the following:

Isolation may occur more easily for immigrant women as many have left behind families and loved ones. They enter a foreign environment where they may not know the language, culture, or physical geographic area and may recognize only a few familiar faces. In these situations, it is easier for men to control women’s lives both emotionally and physically. Due to isolation, men are better able to gain sole control over resources that could offer legal, financial, and/or emotional support to the women. (p. 904)

The authors further demonstrate how social isolation can have fatal results. They present the case of how several Tamil women in Canada jumped from their apartment buildings to their death due to isolation “compounded with a feeling of powerlessness” (Menjivar & Salcido, 2002, p. 904). This extreme case further presents the effects of isolation and how such barriers can have severe consequences.

**Structural Barriers**

*Role of the State and Criminal Justice System*

Immigrant women dealing with DV may also experience structural barriers. More specifically, Burman et al. (2004) examine institutional racism, and argue that racism continues through immigration practices in ways that reinforce women’s abuse within violent relationships. Moreover, Coker (2001) avers that state intervention can be harmful by, for instance, “prosecution of battered women involved, even peripherally, in criminal conduct” (p. 813). It is important to look at the role of institutions in inadvertently helping to perpetuate women’s abuse and thereby increasing the vulnerability of women experiencing DV. The criminal justice process may also become a barrier due to its ambiguous nature. Goldman states that “the courts have been ambiguous in determining what constitutes abuse and the process remains rigid and bureaucratic” (as cited in Menjivar & Salcido, 2002, p. 912).
Law Enforcement

Another problematic factor that immigrant women dealing with DV can face comes from the police response. In particular, Menjivar and Salcido (2002) argue that race, legality and language can inform a police officer’s actions. Ferraro further claims, “Even when policies instruct police to arrest, officers will rely on the victim’s and the offender’s characteristics to determine whether to arrest, a decision that also will be informed by legal, ideological, practical, and political considerations” (as cited in Menjivar & Salcido, 2002, p. 915). Furthermore, Goldman states, “Sometimes, it is the very involvement of the police and the law that may keep an immigrant woman in an abusive relationship” (as cited in Menjivar & Salcido, 2002, p. 912).

The author argues that under the law, both the husband and wife will be arrested if they have had a physical confrontation before the police arrive, “even if the wife’s actions were in self-defence” (as cited in Menjivar & Salcido, 2002, p. 912). Battered women run the risk of being arrested for DV (i.e., dual charging) due to mandatory charging regimes. This form of state intervention is sometimes not only unnecessarily intrusive, but harmful as well, particularly to women of colour who are both abused and poor (Menjivar & Salcido, 2002, p. 813). Similarly, Richie (2002) argues that an overreliance on law enforcement in poor communities of colour has had several unintended negative consequences such as: increased use of force, mass incarceration of young men of colour, and police brutality. As a result, many women of colour may feel ambivalent about involving the police in DV situations. This further indicates that police attitudes and responses can deter immigrant women from seeking formal help, and thus comprise another structural barrier.

Spousal Sponsorship, Legal Status and Breakdown of Sponsorship

It was previously established that spousal sponsorship policies could have a disproportionately gendered effect on female sponsored spouses. Thobani (1999) succinctly
argues, “The state currently intensifies the dependency of sponsored immigrant women on their sponsors through the sponsorship regulations, making these women more vulnerable to violence and abuse” (p. 14). Specifically, Alaggia et al. (2009) explain that as part of the sponsorship process, the sponsor must sign an “ Undertaking” promising “to be responsible for supporting his or her spouse, common-law or conjugal partner for three years.” (p. 336). Merali (2008) asserts that within this time period “the wife has no independent access to resources and is not eligible to receive any Social Security benefits” (p. 282). Regehr and Kanani (2006) note that exceptions could apply if the abusive sponsor refuses to honour financial obligations, and in cases where the sponsored victims cannot support themselves; they may apply for social assistance (as cited in Alaggia et al., 2009). However, Allagia et al. (2009) emphasize that “the reality is that many of these women are isolated and do not have access to the information or support needed to leave the abusive situations” (p. 336). According to Merali (2008), “Unlike immigrants who come to North America independently, she is not connected to any immigration agencies or social supports apart from her husband” (p. 282). These examples reveal that spousal sponsorship policies can lead to structural barriers for sponsored immigrant women seeking help due to economic and information-related dependency on their spouse, which enhances their vulnerability to abuse. Ultimately, the sponsorship relationship puts husbands in positions of power over their wives, and this makes immigrant women subject to increased patriarchal control (Thobani, 1991).

Spousal sponsorship policies can also create dependency in respect to legal status, which can impact women’s risk for abuse, and it may also affect their choices in staying in abusive relationships. Crenshaw (1991) highlights that immigrant women are vulnerable to spousal violence because so many of them depend on their husbands for information regarding their legal status. Other sponsor-imposed barriers that have been key to female marriage migrants’
experiences in Canada include “concealment of immigration papers” as to limit the woman’s awareness regarding immigration status and facing threats of deportation (as cited in Merali, 2008, p. 282). Moreover, Crenshaw (1991) asserts, “Even if the threats are unfounded, women who have no independent access to information will still be intimidated by such threats” (p. 1248). Another challenge is that because many of the immigration documents are in English, spouses may mistranslate it, thereby further limiting immigrant women’s awareness pertaining to their status.

There are certain measures in place that offer spousal sponsored immigrant women who hold permanent resident status some protection from losing their status or facing deportation because of leaving an abusive relationship. However, she is still at risk of losing her status if her sponsor claims: 1) that the relationship was not genuine; and 2) the sponsored woman omitted or falsified information on her application (“Do you know a woman who is being abused?”, 2013). Consequently, this can put immigrant women in vulnerable situations, as they may fear their own legal status, which can prevent them from reporting abuse, and thereby letting it overshadow their personal safety. Furthermore, immigrant women’s vulnerability to abuse is further heightened because of the recent amendment that came into force in 2012, which introduces conditional permanent resident status in order to weed out fictitious marriages (Government of Canada, 2012). The conditional measure requires the sponsored spouse to cohabit in a “legitimate” relationship for two years after arrival in Canada; otherwise the sponsored spouse’s status could be revoked (Government of Canada, 2012). This can present obstacles for immigrant women experiencing abuse, as they may be unable to obtain legal status once they leave the abusive relationship before the two-year period. This new amendment also reinforces the state’s power over women by preserving patriarchal immigration structures.
In instances where immigrant women experience abuse or violence by a sponsor, resulting in a relationship breakdown, they can make an application for humanitarian and compassionate grounds in Canada (Allagia et al., 2009). However, assessment of applications involves a degree of subjectivity as immigration officers use their discretion in assessing. Allagia et al. (2009) claim, “These policies and practices can potentially put sponsored women who are abused in untenable situations” (p. 336). This may discourage immigrant women from seeking help with DV, and consequently, puts them at an increased risk of physical harm.

Gaps in the Literature

Based on my interpretation of the available research, there appear to be several gaps. Firstly, there seems to be a lack of recent articles (in the last five years or so) on the issue of visible minority immigrant women and DV in Canada. The majority of the articles that I found reflect immigrant experiences in other Western nations (e.g., U.S. or Europe), and even those articles appear to be not as recent (i.e., late 90s to mid-2000s). Secondly, the literature that is available on visible minority immigrant women dealing with DV in Canada tends to predominantly focus on South Asian women’s experiences, and therefore does not reflect the diversity of experience that my research is interested in. Also, by mainly focusing on South Asian women’s experiences with DV, it not only neglects other visible minority immigrant groups, but it can also reinforce harmful stereotypes about the South Asian community. Alternatively, when research solely examines immigrant women’s experiences with DV more generally, it tends to homogenize their experiences by pooling all immigrant women together. This not only undermines their subjective experiences, but it may also fail to account for the racial component that shape immigrant women’s experiences with DV. As a result, my specific research aims to bridge this gap by opening it up to examine various visible minority immigrant women’s experiences with DV,
while at the same time acknowledging the importance of race in shaping these experiences. Lastly, the articles that are available on the experiences of visible minority immigrant women dealing with DV in Canada, include little to no discussion on Canadian laws and policies in respect to immigration and DV. Research and information on Canadian immigration and DV laws and policies are available, however, it requires a separate search.

The existing literature has provided me with a starting point to focus more specifically on the experiences of visible minority immigrant women dealing with DV in Southern Ontario, Canada. My research is unique in that it focuses on individuals’ experiences with DV based on their position as visible minority, women, immigrant, and economically disadvantaged in Southern Ontario. Moreover, while the existing literature examines immigrant women’s experiences, there tends to be very little research dedicated to visible minority immigrant women’s stories, which includes their personal voices. I believe that it is essential to include the voices and perceptions of those directly affected by the issue of DV. As a result, my particular study focused on the women’s stories in conjunction with the professional experiences in order to provide complementary and contrasting views, and thereby allowing for the extension of knowledge pertaining to the issue of DV. Although, this research does not draw from a large pool of participants in Canada, I nonetheless believe that the experiences of these participants can provide us with important insight on the issue of DV, and it can add value to new and existing knowledge.

Chapter III: Research Method

Introduction

I undertook a qualitative study that examines the life experiences of visible minority immigrant women who were survivors of DV. I personally recognize the value in gaining
knowledge from people’s experiences/understandings/social reality, and view knowledge as socially situated and socially constructed (co-constructed). Knowledge is generated/co-constructed through interactions with individuals; it does not exist in isolation from people (Potts & Brown, 2005). As such, all the knowledge generated from this research was co-constructed between the participants and myself. I was not concerned with looking for a “truth” but rather looking for meaning, specifically in lived experiences (Potts & Brown, 2005).

**Theoretical Perspectives**

My research project was developed under the broad umbrella of an anti-oppression theoretical perspective. According to Potts and Brown (2005), anti-oppressive research “involves making explicit the political practices of creating knowledge” (p. 255). The notion that knowledge is a political practice highlights the influential and powerful role that research plays in either maintaining the status quo or challenging it. From an anti-oppression point of view, the aim of this research is to challenge the status quo by generating/co-constructing knowledge that acts as a counter narrative to the dominant form of knowledge or “truth”, which has silenced or distorted the experiences of marginalized groups. As a researcher, it is essential for me to engage in research that challenges the status quo in both its *processes* and *outcomes* (Potts & Brown, 2005). Under the umbrella of an anti-oppression perspective, this research uses a feminist lens and draws on feminist-based theories of DV. In addition, it also contextualizes the experiences of the study participants, taking into account a range of diversity axis such as, gender, visible minority, immigrant and economic statuses that shaped the experiences of visible minority immigrant women dealing with DV.
Ethical Considerations

This research received approval from Wilfrid Laurier University Research Ethics Board in May 2015. Several ethical standards were in place during this research. Firstly, to ensure confidentiality and anonymity of participants, pseudonyms were utilized as an alternative to their real names. Participants were provided with the option to choose their own pseudonyms. Secondly, participants were recruited from geographically diverse areas in Southern Ontario to ensure privacy among the participants and thus, minimizing the risk of participants knowing each other. Third, I strived to maintain maximum flexibility in terms of scheduling the interviews. The participants were provided with the option to select the best date and time for them, as well as the location. Lastly, the participants were provided with the informed consent forms ahead of time so that they could look it over on their own time as to reduce some of the pressure. This also allowed for them to think in advance about any questions or concerns that they may have had about the research, and to bring it forth on the day of the interview. This option was not meant to replace going over the consent form on the day of, but rather served as a complimentary option. This was also in line with my personal goal of remaining honest and consistent about my intentions in doing the research; benefits of participation were not embellished.

Recruitment Process

For this research, I sought out two specific groups of participants who fit the following criteria:

- **Group 1:** Participants who identified as heterosexual, female, first-generation visible minority immigrants over the age of 18 from Southern Ontario.

- **Group 2:** Professionals who are service providers in the field of DV (or other related fields, such as violence against women and settlement services) in Southern Ontario, and
All participants were fluent in English. I interviewed a diverse sample along ethnic backgrounds, consisting of five participants total: two visible minority immigrant women who are survivors of DV and three female service providers. The specific recruitment process differed between group one and group two. I gained access to the two survivors of DV through the assistance of a third-party (i.e., professionals & service providers). Interested participants were given recruitment letters, emphasizing their completely voluntary participation, and they had the option to contact me directly. Alternatively, the professionals and service providers were directly sought out and contacted by me through using Google search, which identified potential organizations in Southern Ontario. My research utilized purposive sampling, where participants were deliberately sought out from Southern Ontario, who represented specific knowledge and experiences with DV.

**Qualitative Interviewing**

My specific research method was qualitative interviewing (Rubin & Rubin, 2012), which I found to be a useful method for delving into the depth and complexity of personal narratives. Qualitative interviews provided the platform for research participants to share their personal experiences: giving a voice to those who have been silenced and marginalized by allowing them to discuss their respective experiences with oppression. Rubin and Rubin (2012) emphasized “the importance of working with interviewees as partners rather than treating them as objects of research” (p. xv). This I endeavoured to keep at the forefront of my awareness when I carried out my research. Explicitly acknowledging that participants have epistemic privilege as a result of their lived experiences can be empowering for them (Solorzano & Yosso, 2002). In terms of my research project, the experiential knowledge of the participants (survivors of DV and
professionals in the field of DV) proved to be a critical source of information and insights that deepened my understanding of the experiences of visible minority immigrant women seeking help of DV.

The two groups of participants were interviewed using two different interview methods. Specifically, with the survivors of DV, I used the life story interview method because of its emphasis on the importance of participants sharing their personal stories on their own accord and in whatever form, shape and style that is most comfortable for them (Atkinson, 1998). According to Atkinson (1998), “The point of the life story is to give people the opportunity to tell their story the way they choose to tell it” (p. 9). Atkinson (1998) defines a life story interview as “a fairly complete narrating of one’s entire experience of life as a whole, highlighting the most important aspects” (p. 8). Using life story interview with the two survivors was extremely useful because it focused on their entire life, and this allowed for insight into their experiences of pre-migration and post-migration.

Alternatively, with the professionals, I conducted semi-structured, in-depth interviews. Rubin and Rubin (2012) explain semi-structured interviews as the following: “The researcher has a specific topic to learn about, prepares a number of questions in advance, and plans to ask follow-up questions” (p. 31). In adding to this, Glesne (2010) states “questions may emerge in the course of interview and may add to or replace pre-established ones” (p. 102). Using a semi-structured interview method with the professionals was suitable, because it allowed me to ask specific questions pertaining to the experiences of visible minority immigrant women seeking help with DV, while at the same time, its loose structure fostered an interview environment that was less formal and rigid, allowing for the interview to go into a flexible direction.

All five interviews were one-on-one and audio-recorded, and participants had the option to choose a location of their preference. The interviews lasted anywhere from 45 min to 3 hours.
The data was collected and subsequently transcribed verbatim. However, for the purpose of clarity and clearness, participants’ used quotes have been slightly retouched. During the transcription process, the data was anonymized to protect the identity of all five participants. As an alternative to the participants’ real names, pseudonyms have been used throughout this study. All of the data was collected and analyzed solely by me between June 2015 and October 2015.

**Analysis**

The method of analysis utilized for my research was a gender-based analysis plus (GBA+) framework (Government of Canada, 2015). The plus indicates that that it goes beyond gender and “includes the examination of a range of other intersecting identity factors (such as age, education, language, geography, culture and income).” (Government of Canada, unpaged, 2015). Specifically, GBA+ is used by government personnel in the assessment of policies, programs and initiatives. In terms of the research at hand, it was useful as a method to analyze the experiences of visible minority immigrant women dealing with DV by taking into consideration their positions as women, visible minorities, immigrants, and economically disadvantaged. Accounting for the diversity axis is critical for contextualizing the experiences of visible minority immigrant women.

Once I collected the data, I subsequently anonymized the interview transcriptions to ensure confidentiality and anonymity by removing identifiable information about the participants (e.g., their names and geographical location). Once transcribed, the interview data were coded thematically using NVivo, an electronic database in order to produce consistent and rigorous research. Emergent themes were identified through constant comparison and immersion in the data. Emergent themes were then contextualized and compared with the literature. More specifically, cross-sectional categorical indexing that allowed for various explanations and
interpretations of the interview data rather than viewing the data as an end product was more valid and reliable. It is important not to treat the categorically indexed slices of data as uniform or static (Mason, 2002). In order to ensure accuracy of the findings, I used a number of strategies, such as, audio recording of the interviews, seeking out differing or opposing points of views, cross-referencing different types of data, and cross-checking of factual information.

Once I sorted and ordered the data, I returned to analyzing my data in respect to my research question, keeping in mind that it is not an analytically neutral process (Mason, 2002). The data was read literally, interpretively and reflexively, with the latter two being most vital for my research (Mason, 2002). Thus, most of the focus was on my interpretation of the data and considering my role in generating and interpreting the data. In order to ensure reliability of my research, I made sure that my data generation and data analysis were consistent with my research question and that this was done in a careful, honest and thorough way.

**Chapter IV: Research Findings and Discussion**

The following section presents a summary and analysis of the results accrued from all five interviews. As mentioned earlier, I interviewed two DV survivors and three professionals (all five participants were women). The first section provides the two survivors’ (Anamika and Azin) personal story in a chronological manner, followed by a brief bio of the three professionals (Mariam, Sadia and Aamira). The second section consists of a combined results and analysis section, which draws on the results from all five interviews. These results are broken down into common themes and subthemes, which are supported with quotes and excerpts from the participants’ interviews. The two most significant themes identified in the data are: barriers to seeking help with DV and available supports.
Anamika’s Personal Story

It was a hot summer day, and I was waiting for Anamika, an immigrant woman who came to Canada in 2006 from India, to arrive. She has both her Canadian citizenship and Indian citizenship and proudly identifies as Indian-Canadian. Because of our pre-existing relationship, it allowed for a certain level of ease and comfort during our meeting together. Anamika’s lived experience with DV, and now her work as a professional in the field of DV makes her an extremely valuable person to talk to because she is able to provide a unique insight having experienced both sides. Since her lived experience with DV, she has volunteered in the field of DV for a number of years, and she now works as a shelter counsellor and has her own clients – a fact that she is proud to share. Even though Anamika is back to who she used to be before the abuse, it was nevertheless a tough road to get here. Luckily, she had the love and support of her family, friends and the DV shelter staff, who have been part of her journey. Anamika shared her personal story candidly in hopes of shedding light on some of the issues that newcomer immigrant (visible minority) women deal with, in addition to the abuse that they are experiencing.

Anamika recalled her life as a young Indian girl growing up in Bhutan, a small country geographically located between China and India. Her father was employed in Bhutan, so that is where she spent most of her childhood. But after grade 10, Anamika moved to India without her parents for higher studies. Even though she has not lived in Bhutan for a very long time, she still feels very closely connected to it. She remembers Bhutan fondly and she lights up whenever she speaks of it: “I loved Bhutan. It’s beautiful, and even now if I get a chance, I’ll go back there.”

Anamika finished grade 12 in India and continued on to do a degree in Home Science (BSc), which she clarifies as ‘Home Economics’ in the Canadian context. After her first degree,
becoming a lawyer never crossed her mind, but when the opportunity for law college (i.e., law school) came, Anamika qualified for the one seat they had available on the basis of merit. She ended up getting in and accepted their offer. Even though she felt more confident as a science student, she managed to pass law school. But when she started practicing law, she felt that the theory that she had been studying in school was very different in practice, and thus, she really started enjoying the field: “I started loving it actually because it was so close to my passion. My passion has always been advocating for people and working for the community, and what better way to advocate for someone than law?” She noted how it is interesting how things worked out in a way that it automatically pushed her into where her heart always was. In hindsight, she is very happy she ended up in law.

**Arranged Marriage**

Anamika was practicing law in one of the high courts in India for seven years until she married someone from her own community. Anamika met her husband (now ex-husband) through arranged marriage, which is a common practice for many Indians according to her. She highlights that there are misconceptions about arranged marriage, which she does not mind clarifying:

One of the common questions that I get is about arranged marriage, and I end up explaining what arranged marriage is. It’s not like what people think arranged marriage is, it’s normal. Like the general conception about arranged marriage is that your parents pick out whomever and that’s it, you don’t even get to see him or say anything, and that is not how it works. And being a lawyer, I can say for sure that’s not how it works because that’s forced marriage. There are consequences for that.

As a lawyer, she was able to eloquently explain the difference between arranged marriages and forced marriage, highlighting that forced marriage is illegal in India. She draws parallels between
arranged marriage and blind dating within the Western world. Similar to blind dates, arranged marriages involve meeting potential partners through your friends, family or marriage bureaus:

We have marriage bureaus. We find people through marriage bureaus or through family or whoever. And we do our own background check, of course to make sure we have some common ground. And after that, if there is some common ground, that’s when we meet each other, and the family meets each other. Then, if we feel like it, we can give it a try.

This elaborate explanation of arranged marriage by Anamika highlights the great level of agency that is involved in choosing a partner. This has also been her experience with arranged marriage. Anamika further added that not only can you go out with a potential partner, but you can also take your time getting to know them. Once you both decide that you want to get married, then you inform your parents of your decision, who will go on to arrange the wedding. She laughingly added that it is not the bride and groom who do everything, instead, they can just go and enjoy their wedding, which she appreciates about Indian weddings.

**Spousal Sponsorship**

When Anamika met her husband, he was already a Canadian citizen and living in Southern Ontario. After marriage, Anamika left her rewarding job, family and friends to join her husband in Canada. In 2006, he sponsored her under the family class sponsorship policy, and more specifically through spousal sponsorship. The sponsorship process was fairly quick for her, and within three months she landed in Toronto. Of the sponsorship process, she shared that her level of education and profession were considered in her application and part of the point system. Anamika further explained that she got immigration status immediately after she landed. Before exiting the airport, she received her landing document, an extremely important document that confirms permanent residency in Canada, and allows immigrants to access social services in Canada.
Arriving in Canada

Anamika entered Canada on a cold winter evening in February 2006. She described it as one of the coldest winters she had experienced, and only comparable to the recent winter that we had. Despite the extreme cold, Anamika was in awe by the beautiful scenery with snowflakes dwindling down. She stated, “It was kind of romantic.” Prior to her arrival in Canada, the only picture she had of Canada was the famous Niagara Falls and its extreme cold winters.

Anamika’s husband picked her up from the airport and they drove straight home. On the way home, she was surprised by how dark the city was: “It’s probably around 8 o’clock and all the houses had their lights off. It’s dark everywhere. ‘What’s going on? Like, what happened? Where are the people?’ I asked my husband.” He told her that around that time everyone sleeps here. To Anamika that was like dinnertime so she was not used to that. This was her first introduction to Canada: cold, quiet and beautiful.

Marital Problems

After they got married in India, her husband came back to Canada; for a while they had a long distance relationship. During this time, she did not foresee any problems within their relationship. Also, there was not a lot of interaction between them because of the long distance. Her husband had no parents; it was just his two siblings, who were both younger than him, and his aunt. Although both of his two siblings had been “nasty” to her, Anamika had passed it off as a family dynamic that is always going to be there. She thought that once she moved to Canada, and they were on their own, things would be different, as they would be free from family interference. However, this was not the case.

Her marital problems started the day that she landed in Canada. She had inquired of her husband about whether she should bring proper winter attire from India; he told her that he will get it for her, as they will only add weight to her luggage. Anamika trusted his judgment, but
when she landed there were no winter clothes in sight. She tried rationalizing his actions: “He has been living on his own, guys right? I am giving him the benefit of the doubt and rationalizing [that] he is a guy. Guys don’t even think about all these things.” In addition, when they arrived home, she had to cook food for both of them. After she cooked and was ready to serve the food, she found out that there was just one plate, cup, and spoon for him. He had no dishes or cutlery for her. Anamika remarked: “So apparently I should’ve brought mine with me…He’s like, ‘Do I have to explain all of these things? It should be common sense. You should bring your own stuff, I have my stuff here.’” Anamika felt odd about the whole situation, because it was not something that she had been used to, or was even able to understand. She continued, “I’m like, what is this you and me? I am not a roommate coming to your house, it’s your wife coming to your house.” Despite this, she ended up serving her food on the lid of a container, and this is also when she started feeling like things were not right, but she told herself “I’ll work on it and see; maybe I am thinking too much.”

Another incident happened the following day causing their first big fight. Her husband was a qualified mechanical engineer from India, but similar to Anamika’s, his credentials were not recognized in Canada. He also had not upgraded his education to meet the credential requirements for Canada. Regardless, he had secured a good position within a company. At the time of their marriage, he was working night shifts. Since Anamika had just arrived, she did not have any other commitments, so she decided to organize their home, in hopes of surprising him. She noted, “I’m thinking he’s going to be so happy to see the house, everything is so organized and looks beautiful, and that’s not what happened.” Instead, he started yelling at her: “How dare you touch my stuff and who asked you to do this?” Anamika was in shock and could not wrap her head around what was happening. This situation was totally new for her, and she had never witnessed these types of behaviours in her household or her friends’ growing up. She grew up in
a household where there was lots of happiness. It was also not the norm for her to live in a household where material things are being divided, and she is being told “How dare you touch my things and this is my house.” Her husband continued on to accuse her of looking through his stuff and she replied bewilderedly “I’m like looking through your stuff for what? Like, are you hiding something from me? This is our house, our things, and I was so happy to start our life.” This incident was a sign of what was to come.

**Insult and Isolation**

Anamika shared that her husband accused her of marrying him for his money and the opportunity to come to Canada, to which she responded, “If I wanted to come to Canada, I don’t need you. I have my education; I know how immigration works, I already have all the requirements. I don’t need a man for that.” Despite being a lawyer and speaking fluent English, her husband called her uneducated and made remarks such as, “You don’t even know how to speak English properly.” In critically reflecting back on the situation, Anamika stated that he knew everything about her level of education and that she spoke English, but he was trying to put her down. She shared:

Now when I look back, I get what was happening. He thought that he was probably making me insecure. He wanted to crush me somehow, and make me lose my confidence, and make me feel like worthless, good for nothing, and somehow control me, and that’s exactly what was happening. But at that time, I didn’t see it or understand what was going on. I’m like, what is he talking about? He knows my education, he knows that I was practicing as a lawyer, he knows that I speak English because we actually spoke to each other mostly in English or Hindi.

However, the insults started to affect her. She started to become more closed off and he started isolating her from everyone.
Anamika was not allowed to communicate with her family. Her parents were not allowed to call her, but she never told her parents because she did not want them to be heartbroken. She shared that all of these problems were happening but that she was not telling anyone, because she wanted to fix it on her own. Also, she became disconnected from all her friends, which was out of character for her. Her friends began to worry, and they started asking her parents about her. Anamika told her parents to tell them that she was busy because she just got to Canada. She started to make excuses. She reiterated how she was not allowed to have any contact with her family or friends, and how every time she spoke to her parents, she would get beaten up. By then, the emotional abuse had escalated to violence, and Anamika recalled being strangled, kicked, and bleeding.

In addition, her husband told her that he did not want to be seen with her in public, which left Anamika confused, asking “Why not? I am your legally wedded wife” and questioning whether he was hiding something from her. Also, he did not introduce her to any of his colleagues or friends. If she walked outside, no one would know her or recognize her. Moreover, when her husband was being physically abusive, he would say to her:

Even if I end up killing you, nobody would find out. People don’t know about you, nobody knows you. Anything that you say, nobody is going to believe you, and anything I do and say to you is within these four walls…This was something he would always say to me, tell me when he would beat me up.

Anamika did not know anyone in Canada, so if something were to happen to her, nobody would know because she did not have any family or friends here: “I didn’t have anybody at that time, so he was basically isolating me.”
Physical Abuse and Family Interference

In addition to the verbal and emotional abuse, Anamika discussed in great length the physical abuse: “He would beat me up, like banging my head on the wall, throw me on the floor, strangle me, kick me.” The first time her husband beat her up so badly that she was bleeding from her nose for about a week. At the time, she was a new immigrant, and had not yet received her health card so she could not go to a hospital. Neither did she know where a hospital was located. She asserted that when he was physically abusive, he would call his siblings back home and say to them, “She’s being nasty with me and she doesn’t listen to me.” His siblings would also call Anamika and yell at her. His sister told her, “You’re there to take care of him and his house until we come there, and after that, you are out of the house.” Further, his aunt told Anamika that after marriage whatever her husband says, she has to tolerate it and agree with it. Anamika narrated the exchange that she had with his aunt:

His siblings are yelling at me on the phone, he is beating me up, and I am telling his aunt that you’re the elder person in the family, and instead of you telling him to stop this behaviour, you’re encouraging it by telling me to tolerate it? My parents did not marry me and give me to him to beat me up. And she’s like, ‘If you want to cry, go to the washroom, lock the door and cry’ And I am like bleeding from my nose, it’s been over a week, and she’s like, ‘you just wash it with water.’”

Anamika shared that all of these things were happening in the first few months of her arrival in Canada and her parents had no idea.

Foreign Credentials and Employment

Like many immigrants before her, Anamika’s foreign credentials were not recognized in Canada. After she moved here, she was hoping to continue practicing law, but she did not realize how daunting and difficult that process would be. She stated that in contrast to many other
countries, Canada’s upgrading process is much longer and more difficult. She shared that based on her assessment in Canada, while she doesn’t have to go through law school again in entirety, there are still courses she has to take, which will take two years and are very expensive. Even if she qualifies for OSAP (Ontario Student Assistance Program), it will not be enough to cover her full tuition and living expenses. Also, because there is no option to take correspondence courses, she would have to quit her job and relocate to Toronto to access the universities that offer those courses. Even though Anamika cannot make this financial commitment right now, she has not given up on the dream to pursue law again one day in Canada.

As a newcomer, Anamika was ambitious to find employment right away, even if it was entry-level jobs. She immediately signed up for resume and cover letter training that was offered through a community resource center, which also assisted her with job searches. During the time that she was actively seeking employment, she also started volunteering at a senior centre close to her home. Despite all her efforts in relentlessly looking for jobs, securing employment proved to be difficult. She felt an immense amount of pressure from her husband to find something soon:

He’s like, ‘You don’t know you should look for a job?’ How do you know I am not looking for a job? You are the one who took me to all the places to submit my resume.

We walked downtown, to all the stores here in the mall, like everywhere. I submitted my resume everywhere.

Anamika was not finding a job quickly enough so her husband pressured her into working as a stripper and at the casino. When Anamika refused, he beat her up. She stated that she would get beaten up for reasons such as, not finding employment, cleaning the house, touching certain things in the house, or if she talked back to him. In addition to this, he would call her a prostitute when she went out to look for jobs: “He’s like, ‘Well you go out everyday. You’re going out to sleep with men, you prostitute!’”
Frost Bite

It was snowing during the time that Anamika was job searching, and she did not have winter boots or proper winter attire to stay warm. Despite her best efforts to protect herself against the extreme cold, she ended up getting severe frostbite on both her hands and feet. She noted that once you get frostbite, those areas remain sensitive for the rest of your life: “Even if it [gets] a little bit cold, I have to start covering up my hands. I enjoy spring and fall, but I have to cover up because there is discoloration on my skin.”

Bus Tickets

As a newcomer, Anamika had to walk everywhere because her husband would not give her bus tickets. Not only was she unfamiliar with the bus route and where to purchase a bus ticket, but she also ran out of whatever money she had brought with her. She shared, “He never showed me how to create a bank account. Eventually I ended up getting a bank account, but whatever money I had with me was all done because I was the one who was spending.”

Call Centre Job

Anamika eventually got a job at a call centre. When she first started the position, she worked night shifts. She asked her husband if he could pick her up after work for the first few days, because she was unfamiliar with the area and afraid to walk home alone. He refused, and she had to walk home alone after her shifts, because she could not afford bus tickets and had to wait for her paycheque to come in. Reflecting back on this situation now, it feels both scary and surprising to her that so much transpired in only two months of being in Canada.

The Final Straw

As a devout Hindu, Anamika set up a prayer setting in her house, which is a very common practice for many Hindus. Every morning and evening, they light up a lamp in front of God. One evening, Anamika lit up a lamp and held the locket around her neck and told her
husband, “You tied this around my neck, and I want you to stand in front of God and tell me what you said. I want you to repeat what you told me, that you married me to only have sex.” For Anamika, what the locket represents is very pure and significant. She shared that the husband ties a “Tali” (small gold locket with a chain) around the bride’s neck during the wedding. However, before it gets tied around the bride’s neck, the bride’s parents take this locket and the ring to the temple and do prayers on the day of the marriage. Because of its significance, Anamika held her locket when she asked him whether he married her for sex: “He said, ‘Yes, that’s why I brought you here.’ I said okay, this is the end of our relationship. You are not going to even touch me because that’s not why I tied this and came here. I came here as your wife.” His answer signified the end of their relationship for Anamika. As a result, she presented him with the following options:

You be patient, because our relationship is over anyways. I am not going to allow you to touch me anymore. I am going to make arrangements for me to go back home and end this relationship. Until then, we are going to be in separate rooms, but if you get in and beat me up, then things are going to be different.

During this time, Anamika’s mother was in the hospital so she would call her mother to check up on her. However, every time she was on the phone talking to her family, she would get “beaten up, strangled and kicked.” One night, Anamika called her parents to find out if her mom was okay because she had just returned home from the hospital. As a result of making this phone call, Anamika got strangled with the phone cord. Everything changed that night for her: “I had never pushed him, I knew I was done that night. I managed to push him, push the door open and run out. By that time the neighbours had come and they saved me.” The neighbours called the police; they showed up right away and arrested him. She bravely remembered this painful moment with tears in her eyes.
As a result of what had transpired, his brother, sister and aunt were all calling Anamika that same night, yelling at her and threatening her. One of the police officers that was there picked up the phone, and warned his brother that if he called Anamika again, he would make sure that he is never able to come to Canada. That was the end of the phone calls from his family.

**Seeking Support**

That same night, Anamika called her parents and finally informed them of everything that had happened since her arrival in Canada. Her parents were in complete shock after finding out; her father fainted and her mother was crying over the phone. Anamika was particularly scared for her mother because she is a heart patient. However, her parents were extremely supportive:

> My parents are like, ‘How come you never told us? This is not why we got you married and sent you there. Just because we got you married, does not mean you tolerate these things, this is not tolerable…and if this was going on, we wouldn’t care, we would have just brought you back.’

Her parents told her to just come back home.

The police officer took Anamika’s statement and two women from victim services arrived shortly thereafter. The women from victim services and the police officer were a big support to her, and they explained what options were available to her. She was informed that she could either stay at the DV shelter nearby, or if she wanted to, she could continue staying in the apartment without him. Anamika told them that she did not want to be in the apartment anymore and just wanted to be in a safe place. That is when she was given the full details about the DV shelter. Anamika knew nothing about DV shelters prior to this, and initially felt scared about going to one:

> [Because] I don’t know what this place is. Yeah, the police are saying it’s a safe place to go to, I don’t know, right? I am a newcomer so how do I know if it is actually a safe
place? What if it’s a place where they take women in and use them in other ways?”

Despite her scepticisms, Anamika thought to herself “an officer would not send me to something like that. Still, I was not hundred percent [sure], but just because there was that officer telling me that, it helped me a little bit.” Anamika agreed to go to the shelter.

**Arriving at the Shelter**

Anamika vividly recalled the first time that she walked through the main entrance of the shelter with the automatic doors locking behind her. She shared:

> I will never forget this in my entire life. The moment I stepped through that first door and the automatic door closes behind me…and so it’s locked now. And I am thinking, I’m stuck and I am looking around to see if there is an escape door just in case if this was a trap.

She confidently added, “Of course, it’s not a trap. It’s the most safest place ever, but from the point of a newcomer, it’s just like you go to a strange new country, you don’t know anything about that country.” Anamika also felt initially scared and paranoid, thinking, “What if all these people are working together? What if this is a trap?” She added that you hear of so many different things happening to girls, many of them going missing, so as a newcomer she had her doubts.

Anamika tries to share this particular experience with professionals and service providers because it is very difficult for many of them to imagine that anyone would think that way. She stated:

> They have always lived here. This is where they work and that’s how they think. So for them, it’s like, why would anybody think this way? This is a safe place. Well, you feel that way because you know what it is. But to a person who is totally new to this country, and who doesn’t know anything about this country, it is very different. You have to think
from that person’s perspective, because when we are in a service provider’s hat, we cannot think about what we feel; we have to put ourselves in the other person’s shoe. So I always make sure I share that this is how a newcomer feels…that was my first feeling, I was terrified, I was scared.

After learning about the shelter, Anamika discovered that it was indeed a very safe place. In looking back now, she is extremely grateful for having the support of the shelter and being provided with its services.

**Settling into the Shelter**

In addition to her initial fears about shelters, Anamika had a difficult time accepting the fact that she was now staying in a shelter:

Being in the shelter itself was crushing for me because that’s not a norm for me. Back home, if there were a problem, I would go to my parents’ house, not a shelter. And going to a shelter is like you don’t have anywhere else and you don’t have anybody in your life, and that’s when you end up in a shelter.

Staying at a shelter was particularly hard for her because she did have her family and their support, but they just were not physically in the country. Anamika also stresses this part of her story to professionals and how the idea of staying in a shelter can be difficult for people to come to terms with.

Furthermore, Anamika also had to come to terms with applying for social assistance, such as Ontario Works (OW). She arrived at the shelter with no money, worrying how she would feed herself. The shelter assured her that she would be provided with basic necessities (e.g., food), and she could apply for social assistance. Anamika initially objected to the idea of receiving social assistance and told her caseworker:

I don’t want any charity. And this is not coming from arrogance, that’s how I grew
up….Even today, I tell people don’t think it’s coming from arrogance [because] it’s very difficult for people to accept charities, especially if we are not used to it. Back home, we are not used to getting donations or getting used clothes, it’s not coming from arrogance, but it’s part of who we are.

Anamika is thankful to have had that available to her, but advises others to not expect a newcomer to say yes right away to social assistance, as it can impact their self-esteem. She herself wanted to work instead of applying for social assistance, but her casework explained the following to her:

You’re going through a lot. You need to sort out many other things: your relationship with your husband, with the court case, with what you want to do, whether you want to stay here or go back to India…and this is not a charity, it’s there from the taxpayers, you will be paying tax one day so you will be contributing. You’re a lawyer, so you should understand about your rights, this is your right.

After this explanation, Anamika felt more comfortable with accepting financial help, and applied for OW and subsidized housing.

**Court**

Anamika spoke about her experience with the court, her husband’s bail hearing, and waiving her rights. For example, she said she had the right to go to court and give her statement, the right to get divorced immediately, and get spousal support and compensation, but she waived everything. She shared, “The reason I am waiving everything is that I know how all this works in the court. I am from the same profession and I don’t have time for all these things.” Due to the long and arduous court process, Anamika did not want to drag it on: “It’s a fighting game in court.” Instead, she wanted to focus on herself and her safety, hoping to move on with her life. Her main priority was herself and she did not care what happened to him nor did she want his
monetary support. She preferred to stay out of the court, especially since she had already given her statement to the police, and did not want to be involved any further.

**Perceptions of Culture by Professionals**

Anamika emphasized that it is not just the abuse that we need to focus on, but also everything that occurs after the abuse “that’s where we all need to pay attention to.” Based on both her lived experience with DV and professional work experience, Anamika found there to be similarities in immigrant experiences of various backgrounds (i.e., not just immigrants from India or Pakistan) in terms of professional perceptions about culture: “Yeah, the language and everything may be different, but the experience is almost always the same.” Specifically, in her professional work experience, she has witnessed the following attitudes from professionals:

Why don’t they just leave? This is part of their culture…this may be common for them and okay for them, but that’s not how it works [in Canada]. How do you know it’s okay for them? Did you live in that country to know that? You can’t make assumptions based on what you hear [in the] media or from hearsay. Because the media has so much about Canada too, if you go on the news, every single day there is sexual assault cases, there is murder, killing, abuse, domestic violence, rape, everything you want, you hear on the news. And all those people are white Canadians, does that mean that all Canadians are like that? Is that the culture of Canada? I don’t think so. So how can you make assumptions about a country, religion, or culture based on what you hear from wherever?

So of course, they would not have answers for that.

She mentioned that she has dealt a lot with these types of perceptions from professionals in both her own situation and seen it with others.

Anamika discussed at length her own experiences with professionals when she was seeking help with DV. After her husband made bail and was put on a one-year probation period,
she had to go and meet his probation officer, which she described as “one awful experience”. She noted, “So I go to meet her and I am sitting in front of her, and she’s like, ‘I don’t understand your culture, and this is all because of your culture and your religion.’” The probation officer continued on to say to her, “Do you even understand the law? Do you even speak English? Do you get these things? Like you just got married to him for money and to come to Canada, right?” Anamika shared that everything was already a traumatic experience for her, and on top of it she is crying in front of this professional who is “saying these things in a very arrogant loud voice.” Anamika somehow mustered courage and told the probation officer:

   Excuse me ma’am, I think I am speaking English with you. And by the way, I understand law very well because I used to be a lawyer….What has happened is not because of culture or religion, it is not accepted in my religion, it is not accepted in my culture….This is because of my abusive husband and abuse has nothing to do with anybody’s religion or culture. And if you don’t understand my culture, then you either shouldn’t have taken this client or you should’ve made the effort to try to understand.

Anamika then left and reported the incident to her caseworker.

   Anamika tries to pass on what she has learned from these experiences to professionals: “It’s already overwhelming for newcomers, and then when they get targeted like this, it’s even worse [because] I didn’t need that. I was already going through a trauma. I didn’t need this additional drama or stress.” She added that living with abuse or leaving an abusive situation is traumatic for any woman, regardless if you are a newcomer or a long-term resident; however, for a newcomer woman, it’s double the trauma. She shared, “The reason I say double the trauma is because, so the long-term residents are the white Canadians, it’s traumatic for them when they leave, but one thing positive in their life and in their situation is [that] they know this country.” Anamika emphasized:
No one is targeting them by saying this is because of your culture or your religion…they are abused by their partner, but at least they are not being abused by society or the community. An immigrant woman is being abused by her partner and his family, and when they are slowly preparing to leave, because it’s scary, it’s a new country, the only familiar face is her husband, who is abusive. So it’s a while for her to make that decision to get out of the relationship, and when she is prepared to leave that situation, she gets abused and targeted by the community.

Anamika noted that it is double the trauma for immigrant women because they are attacked from both sides: “How can we change that? How can we support that? By educating the community, by educating the service providers and the professionals, because professionals and service providers have no excuse to be unprofessional and ignorant.”

Aside from the professionals, Anamika also experienced ignorance from other shelter residents who would say to her, “Oh so sad, this happened to you because of your culture, this is part of your culture, right? This is because of your arranged marriage?” To which she responded, “You’re telling me that all the women who are in the shelter are [here] because of arranged marriage or because of their culture/religion? If that is the case, then most of the residents are not immigrants.”

**Lessons for Professionals**

Anamika shared that in her experience unprofessionalism and ignorance has been one of the biggest obstacles:

When we sit in a service provider’s chair and we call ourselves professionals, we have to actually be professional. Just the job title does not make you a professional, you have to behave, you have to talk, [and] and you have to provide services professionally. And that includes not being ignorant; there is no excuse for being ignorant or making racial or
discriminatory comments.

Anamika’s personal experiences have provided her with important insight as to how to approach situations as a professional herself. For instance, when she has clients seeking help, she focuses on their situation at hand, and how to best provide them with support and keep them safe, instead of asking unrelated questions and making assumptions regarding the client’s culture. Clients should not be facing ignorant comments such as, “I am so sorry this happened to you, this is because of your culture, right? Are you safe if you go back to your family? Is your father going to kill you?” Anamika continued, “That’s why I feel like immigrant women go through way too much, because for them to get help for one thing, they have to go through all [of these] unnecessary attacks” that have little to nothing to do with why they are in their situation.

**Discrimination**

As an immigrant woman who belongs to a visible minority and has an accent, Anamika shared that she constantly feels the pressure to prove herself: “Whether you are a newcomer or whether you have lived here for 30 or 40 years, if you belong to a visible minority and your skin shows that and your accent reveals that, you have to keep proving yourself.” Even though she has now been in Canada for ten years, and has managed to successfully navigate through this community, Anamika still feels that she has to prove herself, which is a constant struggle. She gave the example of an experience that she had while being on the board of directors for the city’s museum, a position she continues to hold. Despite her strong level of interest and commitment to the board, Anamika intentionally pulled herself back from attending some events that they were organizing: “The reason is because I used to participate in the events all the time, because as vice president or board of directors, I wanted to be involved. I am not just there for the title. But I always get these strange looks like how come she is here.” She narrated that it is because of the colour of her skin, and when people find out that she is on the board of directors,
she always gets this common question, “Oh you’re on the board of directors? How did you manage to get on the board?” She playfully added, “Sometimes I feel like asking, why not?” She notices the disparity in people’s comments, because when other board members are being introduced, even if they are new, they are always being congratulated for being on the board.

Anamika has also experienced judgment in regards to her faith, where a stranger at an event asked her, “Your culture, you’re evil, right?” simply based on the fact that she was wearing a Bindi, which suggested that she was Hindu. The stranger further commented, “Hindus have all these different Gods, it’s evil.” Anamika asked her where she had learned about Hinduism because that is simply not the case: “They are different forms of one God. We believe in one God in different forms.” When Anamika tried to teach the stranger about Hinduism, she was told that she was tough to talk to. She added that it is an everyday struggle for her.

**Training for Professionals**

According to Anamika, professionals need a lot more training than what they currently have: “I feel like there is no training at all. And even if there is training, it is being provided by white Canadians who think what they are saying is diversity training and cultural training, which is like from their perspective.” There are a number of diversity training programs that tend to have the same basics, but the training that is necessary is having a proper cultural understanding. Anamika further stressed, “They [professionals and service providers] need to hear the negatives. They need to be made aware of how these behaviours are affecting people, and is not appropriate and it is not acceptable.” Moreover, she added that there should be a level of accountability “because any time these kinds of things get reported, it’s like, that’s not what they meant, you are just thinking in a different way, you always feel that people are discriminating against you.”
Meeting Resistance

When Anamika has spoken out about what changes are needed; it has often been met with resistance. Her former boss regulated her ability to speak to researchers. At one point, there was research being done by certain community groups on services that were being provided and what changes were needed. Anamika shared her honest opinion with the researchers:

I was very open and honest with them, [and told them] this is what is wrong…and if you’re genuinely looking for feedback and want to change, then you need to first be prepared to hear the negatives, the bitter truth…only then will we know what is actually wrong. If we don’t know what is wrong, how are we going to fix it?

Anamika emphasized that we should be open to feedback instead of challenging it so we can make a real change. Specifically, she got into trouble with her former boss for sharing her honest opinion and lived experience. Her former boss was also unhappy about her presenting at schools and universities. This shows that there are consequences for speaking up.

Anamika’s former colleague was also unimpressed with her critical perspectives and told her: “You’re now Canadian. You should always be talking good about Canadians. This is your community and this is your home.” Anamika described the exchange that they had:

You are telling me, you have come to this country, this is your adopted country and your community, and you have to just tolerate it and keep quiet [about] anything and everything that happens. If I am not allowed to speak up and share how I feel, and try to make a difference in this community, then how can I feel that this is my community?

This is indicative of a double standard. Anamika mentioned that if we can be critical of abuse and not tolerate it, then we should also be able to be critical of the community if there is something that is not right about it. There cannot be two different rules.
Positive Experiences

Anamika stressed the amount of good work that is being done in the community, stating, “That’s not the large part of the community and we need to nourish all that’s good.” She added that every organization might have that one rotten apple that causes dysfunction in the organization: “It’s unfortunate for the client who gets dumped on that rotten apple, they are not the reflection of the organization.” Most of the professionals and service providers are actually professional and are doing the right thing, but it may not be everyone. However, the most important lesson to take away is to be open to hearing honest feedback and criticism:

The world is so big, we cannot know about every culture, religion and every belief. It’s about how we can try to be professional in dealing with situations and clients, rather than judging them and attack their culture and religion. If we can just focus on the situation for what it is.

Anamika believes that we can make a lot of difference in this community if we continue to respect one another. She stated that by learning about each other, we are enriching ourselves in the process, and thereby make a difference in the community. This is beneficial for both parties. She herself has learned a lot about various cultures by simply being open to learning.

Support Network

After Anamika got both her Canadian Citizenship and Overseas Citizenship of India (OCI), she traveled back to India after five years to reunite with her family and friends. She recalled the emotional moment when she finally got to see her parents again, and they hugged and cried together. She was finally able to get closure: “That personal touch was needed for both of us, for me and my parents.”

Anamika credits her strong support network for helping her through that difficult time in her life when she experienced DV. In addition to the tremendous moral support from her parents,
Anamika stated, “Yeah, I was strong, I was stubborn…[but] so many angels came into my life to help me through it, to support me.” The biggest angel was the DV shelter and their incredible staff. The second big angel has been her adopted Canadian family:

I call them aunty, uncle, their children are like my sisters and brothers, their kids are like my niece and nephew, and they call me their adopted brown skinned daughter. It’s lovely. It’s so relaxing for my parents to also know [that] there is somebody here of their age to keep an eye on their mischievous girl, so it’s really awesome. I am lucky to have all those angels.

Her friends have also been a big support for her, including her childhood friends who she has reconnected with. Anamika is grateful for the tremendous support from her family, adopted family and friends.

**Azin’s Personal Story**

It was a beautiful Monday afternoon, with rays of sunlight glancing through a small office window. I patiently waited for Azin to meet me. Outside of email exchanges, this was the first time I would meet Azin, a Guyanese immigrant woman originally living in New York City (NYC) for several years before permanently settling in Canada in 1994. Today, Azin has her Canadian citizenship, but she still remembers those tumultuous years that now feel like ages ago. Traveling back and forth for numerous years between Canada and NYC became a regular occurrence, with her eldest son born in Montreal and her daughter being born in New York. Due to the constant uprooting, She recognized that her two children needed more consistency because they were about to start school and thus, they permanently settled in the province of Ontario. Without holding back, Azin bravely started sharing her personal journey of initial pain and
heartache, but which eventually became a tale of personal strength, bravery and perseverance. Azin’s intersectional experience of DV and immigration sets the tone for her personal story.

**New York & Canada: Immigration & Abuse**

*Canada: The Birth of her Son*

Azin met her husband (now ex-husband) in NYC in the mid 1980s. She initially fell in love with his sweet and charming personality, but six months later, she felt that he had changed and became a different person altogether. Her initial move to immigrate from NYC to Canada was mostly motivated because she did not want to live with him anymore due to the abuse. Although they both moved to Canada, Azin shared that they moved with the understanding that they each would go their separate way. He moved to Vancouver and she moved to Montreal, but her pregnancy with their first child reunited them again. Her son was born in Montreal and around the same time; her ex’s dad passed away. This life and death scenario suggests reincarnation in Azin’s faith:

Our belief is that when you give birth to a child, and you had somebody in your family pass away, they believe that that’s the person reincarnated in the child. So he felt well, you know my dad passed away and now I have a son, so that’s probably my dad being reborn. And then he made an effort to get back together but the abuse continued for many, many, years. And I kept leaving him and going back, leaving him and going back.

After her son’s birth, they moved together as a family to the province of Ontario. Azin recalled this period in her life as very abusive; her husband was verbally, physically and emotionally abusive. He isolated her from her family, and she could not make any friends or even talk to the neighbours. Also, she could not even speak to her family on the phone without suspicion from him. Even though her family would only call to check up on her, he would constantly question why they were calling her, and feared that she had told them about the abuse. Azin stated, “It
reached a point where my family was afraid to call because they felt that when they get off the phone, he’ll probably kill me and they wouldn’t even know. So that’s how bad it was.”

New York: The Birth of her Daughter

Even though the abuse continued after Azin had her son, it did not start worrying her until she became pregnant with their daughter: “He had beat me up really bad, and so I left him and went to New York City. And my daughter was born in New York City.” The reason Azin went back to NYC was because she already had her papers from there and a more secure immigration status compared to Canada, where she was just starting over again as an immigrant. Azin was still in the hospital when her husband found out about the news and drove to NYC to see his daughter. Azin stated:

He didn’t really come to see her, he wanted [to] get me back, so he said that he will take my son out for a drive to spend time with him so I could get some rest, and then he’ll bring him back. And hours went by and he didn’t come back. And what he actually did was kidnap my son and he brought him back to Canada.

When Azin found out, she immediately took the bus back to Canada, because she believed that that was the only way she would get her son back. Also, her son did not have papers for the U.S. and thus, she had to go back to Canada. Once in Canada, she ended up staying with her husband because she thought, “If I leave, how am I going to feed these kids? Where am I going to live? How am I going to take care of them?”

Seeking Support: Women’s Shelter

Azin sought the help of a women’s shelter twice. The first time, she cannot remember exactly what happened other than that her husband’s friends convinced her to get back together and do counselling: “Anyways, I came back. Six months later, he didn’t take no counselling, he didn’t change, everything was still the same.”
Azin recalled the second time that she went to the shelter more vividly. It was a hot summer day and she picked up her kids after daycare. A neighbour had asked her whether she wanted to go to the conservation park with the children to cool off, and she agreed. Azin shared that the children wanted to go in the water and because she did not have a bathing suit on, her clothes got wet. As a result, her bra ended up showing, and when she came home, her husband aggressively questioned her about where she had gone, and who she was “screwing”. The verbal abuse escalated and Azin remembers fearing for her life:

He said, ‘I am going to chop you up’ and I heard him pull a drawer where we keep the meat cleaver. I wasn’t about to wait for him to chop me up so I went out the door without any shoes on. And my daughter was just about two at the time, so I had her in my hip, and I grabbed my son, but because he wanted to get his shoes on, he got stuck on the door, and he yanked him back in the house and locked the door on him.

Eventually her husband opened the door and let her son out. Azin asserted that he did not want people to know and have this ruin his image because “everyone thinks he’s Mr. nice guy.” Azin went back to the shelter, and this time around, it was the final straw.

**Information and Services**

At the shelter, Azin started to receive information about what options were available to her; options that she did not know were out there. For instance, because her husband had sponsored her, Azin was under the impression that he was responsible for her for ten years, as was stated in the application. She stated, “I thought well, if he is responsible for me for ten years, then I need him. How am I going to live?” However, the shelter staff informed her that under the Humanitarian Act, Azin could apply for welfare, which was called Mothers’ Allowance Act at the time. The shelter also aided her in finding a place to live through a program called second-
stage housing. And then later she qualified for subsidized housing, and moved into a permanent home with her children while filing for divorce.

**Separation and Divorce**

Even though Azin had separated from her husband and filed for divorce, the difficulty had not ended there. The court considered a one-year separation period to see if there were grounds to reconcile, as per a request by her husband. However, within that year, he became more abusive by trying to access her house and take the children away: “By then, my heart and my head was in the same place where I was strong enough to know that I didn’t want to go on living like that anymore.”

**Depression and Credentials**

Even though Azin had taken a huge step in terms of moving forward with the separation and divorce, she became really depressed. Azin recalled those moments vividly:

> Once they [the kids] left to go to daycare, I would just go back to bed because I didn’t want to get up and I didn’t want to do anything, because I would say to myself, I only had high school education at that time, but I got commercial, well we called it commercial school. The typewriter kind and all that, and I was working as a legal secretary. But when I was living in New York City, I was even babysitting and doing housekeeping jobs to get my papers from the States. And so by then, computers came in, and I had no clue [or] anything about computers, and then I had the kids so I couldn’t go back to school and upgrade myself, because I had no family or support system here.

Although Azin had family living in Montreal, she did not have a support system in Ontario, where she was living. Her older sister had offer for her to come stay with her in Montreal, but Azin wanted to do this on her own, especially because when the abuse was happening, she would go back and forth between her abusive husband and staying with family members. She stated, “I
didn’t want to be with my family, I needed to be independent and on my own, so I could strengthen myself, whatever potential I had, and make something of myself.”

Azin started volunteering at both her children’s school and at a nursing home. These volunteer experiences were key in helping her get over the depression and gaining her confidence back. She mentioned that the volunteer experiences were less about getting her back into the workforce and more about getting her out of the house so that she could be around people. She shared, “And not feel sorry for myself and stay in bed until the kids come home from school [because] it was so easy to, you know? [Because] they had been picked up in the morning by a taxi, and when they were gone, I would go back to bed.” However, once her children started elementary school, Azin started volunteering.

**Employment in Canada**

During the time that Azin was volunteering, her neighbour presented her with a job opportunity. It was a cleaning job at a high-rise building and Azin started working there alongside her neighbour. She eventually ended up replacing her neighbour and took on the job full-time. In addition to the cleaning job, she also started working at a nursing home. This was a very busy time in Azin’s life as she was juggling the two jobs with her responsibilities of motherhood: “I would take them [her children] with me [to work] after I fed them dinner, and then I would clean, and then we’ll come home.”

Azin compared her employment experience to a domino effect as she took up a third job simultaneously:

I also had a private job that I developed on my own because the high-rise building that I worked for, they had quite a few elderly people who wanted people to clean. So I started cleaning for them, and then I ended up having like 12 private clients. So I was juggling the nursing home, the apartment building and private clients.
While juggling these three jobs, Azin also briefly took on a fourth job with Canada Revenue Agency before starting to get burnt out and quitting: “I would only sleep like 4 hours at night [because] I would have to get up at 4:30.” At the time, her mother came to stay with her to look after her children: “Even though she couldn’t physically do anything for the children, [but] just having a living person there to see that they come home and they are okay.” However, Azin did the cooking and cleaning for them. Eventually her mother’s health started deteriorating and she went to a nursing home.

After a while, Azin quit all her jobs for a new position that was offered to her by the general manager of the nursing home where she worked. They both left the nursing home and started working at a university campus, a position she continues to hold. Since this job, Azin has moved out of subsidized housing and bought her first home.

**Life After Divorce: Ex-husband**

Azin’s marital relationship ended completely when her divorce got finalized and she gained custody of her children. Her ex-husband received visitation rights, but he missed several meetings with his children. He also went missing for a few years because of something that had happened between him and the new woman that he was dating: “He was abusive to that girl too…and [they have] two daughters.”

During her ex-husband’s disappearance, Azin and her children had no contact with him. By the time he came back into their lives, their son was about ten years old. Azin shared that because her ex-husband could not directly abuse her anymore, he would now go through their children. For instance, he would sabotage Azin’s romantic relationships by telling the police that her boyfriends hit their children, and as a result, Children’s Aid Society (CAS) would get involved. However, CAS did not do anything because the children were not being abused by anyone.
However, after a while, her children did not want to have anything to do with her ex-husband, especially her son. Her daughter was too young to remember the abuse, but her son still remembers a lot of the things that her ex-husband did:

He said, ‘Remember that day when my dad choked you, and your chain broke and you tried to crawl up the stairs to get your chain?’ And I said “yeah”, and he goes, ‘I remember that my dad tried to kick you down the stairs’…I never thought that he would remember, but he does, he did. So whatever abuse I went through, he went through with me, so he’s the one that I feel hurt for the most [crying] because he is the one that seen it and remembers. She [her daughter] doesn’t remember any of it or maybe she blocked it, I don’t know.

Azin stated that that her daughter has not been affected by the situation in any way that she can see it, but her son “has that anger in him” because he remembers witnessing the abuse.

**Current Relationship: Ex-husband**

Although Azin’s ex-husband is still in the picture, she noted that as her children have gotten older, they have come to realize that their father is a controlling person. As a result, they only spend a few hours with him. Azin shared a recent incident that occurred between her son and her ex-husband:

Last time my son went there to see him, and my son is 26, he called me [and] he says, ‘Mom, I don’t know what’s wrong with this man, like he is throwing me out of his house, he is chasing me out down the hallway and cursing at me.’ I said, ‘Well then get out of there…because it’s not worth it to risk yourself.’

Azin mentioned that when her ex-husband is not drinking “he is the sweetest guy ever, he would take the shirt off his back and give it to you, but when he starts to drink” he becomes aggressive:
When he starts to drink, he is nasty, he is outright nasty. I mean he is nasty and he could be mean even when he is not drinking, but it comes out more and the level it has gotten to, he uses my family to turn the screws, to hurt me emotionally.

Even though they have been divorced for a long time, Azin added that the insults towards her family continues, with her ex-husband cursing her mom and brother who both have passed away: “Leave them in peace, they are not the reason for your life being the way it is. His family hardly want anything…to do with him because of the same attitude.” However, Azin has learnt not to let his behaviour bother her.

**History of Abuse**

Azin is not the first or only woman that her ex-husband has abused. Specifically, she stated that he also abused the woman he was dating after their divorce:

He used to hit me in my head so when I have bumps and marks you can’t see it…and a couple of times, I had a black eye and that’s how I know he was abusing the other girl, because one day she came and she had sunglasses on, and I’m like, ‘Why are you wearing sunglasses?’ She goes, ‘Oh, my head hurts,’ and I said to her, ‘You have a black eye, don’t you?’ And she turned away, and then I knew, and then my kids started to tell me.

Azin explained her ex-husband’s violent behaviour as having no respect for women. She stated that he was not raised in a violent household, and links his behaviour to growing up “spoiled”. For instance, her ex-husband’s parents had money and when his mom tried to discipline him by giving him a curfew, his grandmother would let him in and so “he’s learned to realize that he can manipulate women.”

**Stories of Abuse**

Aside from the conventional forms of abuse, Azin also experienced body shaming. Azin shared that when she first met her ex-husband she was thin:
He would come home at 1 o’clock, 2 o’clock in the morning [and say] I want you to eat. And if you [didn’t] eat, he would throw the food at you, or he’ll spit it in my face, stuff like that, and so I would eat just to avoid having issues.”

However, she put on a lot of weight after being pregnant with her children. But before she gained weight, she shared that she would only wear boutique clothing and dressed nicely: “Then I started like letting myself go down. I didn’t care how I looked…I was really really fat.” So when her husband accused her of flirting with men, she thought, “How am I making people or guys look at me or smile at me when I’m like this?” She stated that her husband was unhappy when she was thin, and then when she gained weight, he would say to her “look at how fat you are, you are just a blob.”

**Experience with Seeking Help: Language and Support Network**

*Language*

Azin described her experience with seeking help as overall more pleasant than it usually is for most newcomers and immigrants. She shared, “For me as an immigrant, it was easier because I speak English” but for a lot of women, that is not the case. She added, “I know what I went through and it’s not an easy thing, and it’s worse if you don’t speak English [because] it’s hard to communicate with other people, so in that way I felt that it was easier the transition, the help.”

*Support Network: Shelter, Friends and Family*

In addition to the language component, Azin shared that she was blessed to have people around her that were extremely supportive and helpful. In particular, the staff members of the shelter were a great support system in terms of financial support and housing:

It was just a good experience….I know there are a lot of women out there that don’t speak English and feel like there is no help out there at all for them, but there really is, because I
thought there was no help. I thought I would have to live with this man until my kids are older and they are in school full-time where I can find a job. And then my other question to myself was, well I am not that educated where would I find a job to feed two kids and house them?

Azin reiterated that she was blessed to have the support of the shelter staff: “I mean that’s their job, but I think I gained a lot of respect for them.”

Aside from the professional support, Azin cited the support of her friends as instrumental in her experience. She expressed the following sentiments “I always say there is two people in my life that have been older brothers to me.” Specifically, she has developed a really close friendship with the former general manager of the nursing home, and they are still in contact with each other even though they do not work together anymore. She is grateful to him for hooking her up with her current job: “He has always been so good to me.” Additionally, her other friend has also been very supportive, and if Azin ever needs anything, he is always there for her.

Azin also had tremendous family support. Specifically, her two sisters have been really great and supportive, and more notably her eldest sister who passed away a few years back. But her memory lives on for Azin as she remembers her fondly:

Being in this terribly abusive relationship as hard as it was, I felt better about myself to not run to my sister. And she actually turned around and said to me, ‘I am really proud of you for all that you have accomplished. You have raised two children and you [are] a good person and a good sister.’

Even though everyone else in Azin’s family was critical of her husband, her older sister always gave him the benefit of the doubt until “he proved himself”. Azin still remembers her sister’s advice: “She said, ‘If you got two children with him, and he would still abuse you and hit you in front of these children, then he is not a good person for you. But when you are ready to move on,
we will be there for you.’ And she’s always been there.” In addition, her sister was very proud of Azin when she bought her house, and even offered her help but Azin declined, as she wanted to do it on her own. Azin has owned her house for ten years now, noting that it is not always easy to run a home while working, but she laughingly stated, “I’m still trying.”

Final Words

Azin provided me with some final words, and spoke about her experience with isolation:

What I would like to share is that an abuser, they isolate you, and you don’t even really realize they are isolating you. And their reason for isolating you is to make you not have a network there to help you…in the beginning, there was couple of my sisters, they didn’t want nothing to do with me because they felt like, ‘Well, what is so special about him that he treats you so bad, and you keep going back?’ And I said, ‘I really don’t know’ because I honestly didn’t know, I thought I loved him at the time.

Azin stressed that her ex-husband did not just isolate her, but he also isolated her son because her son was too attached to her: “When he isolated me, he also isolated a child.” The reason her children started to go to daycare is because a physician recommended it, as they needed to have a social life. Azin added that her son did not know how to play with other children or how to interact with other people.

In addition to the isolation, Azin cautions against feeling sorry for the person abusing you. She provided her personal experience as an example and how she felt sorry for her husband, even though he was the person abusing her:

I [was] finding all the reasons in my head to say it’s the kids’ birthday, it’s Christmas, it’s this and that, [and he’ll be alone]. And you keep feeling guilty for them, but I didn’t realize that I shouldn’t feel sorry for him…I should feel sorry for myself.
Azin emphasized, “You have to realize that you did not do anything wrong, you were a person who has been injured [and hurt], not them.” It took Azin a long time to realize that: “I used to think I was the problem and that’s why he would do what he did to me. That’s why he would hit me or kick me or spit on me or break a drink in my face or whatever. So it’s not you. It’s them.”

Professionals: Bio

Mariam

Mariam is a supervisor of community counselling, and she has been working in her current position for seven years. Mariam has her Master’s degree in counselling psychology in addition to a number of other degrees. She has always been interested in working with people and “helping them through their emotional problems.” Her workplace offers DV prevention services, serving women and children who are victims of DV. They also provide services for men who are perpetrators of DV. It is important to note that Mariam’s workplace does not specifically focus on visible minority immigrant women dealing with DV, but rather women in general. They occasionally get visible minority immigrant women seeking help with DV, but it is not a large number. Mariam described the location of her workplace as a “white” city, mostly unchanged from when she started her work there. She has not been seeing a lot of women of different cultural backgrounds coming for support, and as a result, she started outreach programs in order to reach these women (although at times it was met with resistance).

Throughout the interview, Mariam was very candid about her professional experience in providing help and support with DV to visible minority immigrant women. She shared her extensive personal insights on cultural and community barriers to visible minority immigrant women seeking help with DV. I valued Mariam’s perspective both in terms of being a
professional working in the field of DV, and for her personal insights as a Middle-Eastern Immigrant woman. She said: “My skin colour is not visible, but my accent is and my name is.”

**Sadia**

Sadia, a South Asian immigrant came to Canada when she was 20 years old and has been residing here ever since. She came to Canada with a Bachelor’s degree in fine arts and psychology, but it did not have the equivalent value in Canada, and thus, Sadia went back to school to study graphic design. She worked in graphic design for numerous years and volunteered at a number of places before transitioning to her current field nine years ago. Despite it being a busy job, Sadia described it as very fulfilling.

As a settlement worker, Sadia does not directly work in the field of DV, but instead her work is predominantly with newcomers and immigrants. Talking to Sadia was valuable in better understanding the general challenges that newcomers and immigrants may experience in addition to the DV. In instances where their clients experience DV, her office provides support and connects them with appropriate organizations. Some of the ways that her office finds out about DV cases is by women either confiding directly to settlement staff or by opening up to individuals during programs (e.g., ESL school). Sadia explained, “We just empower them to take the steps themselves so we don’t have to do it.” However, Sadia is familiar with how to provide support with DV because of training that she received as a result of working with victim services.

**Aamira**

Aamira is a counsellor and activist, and she has her Master’s in social work. She has been born and mostly raised in Canada since the age of four. She shared, “I started doing work around violence against women when I was about 16, having experienced violence in my own life and seen it happen like many of us.” She initially started volunteering, but has been working in the field since she was 19 years old. She identifies herself as a “South Asian, Muslim, queer, social
worker that works from a feminist, anti-racist perspective.” The majority of their clients are “racialized women”, and Aamira specifically works “with Muslim and South Asian women.” Speaking to Aamira was beneficial in order to gain a better understanding of both gendered and racialized experiences in respect to violence.

Aamira preferred using the term violence against women over DV because “there is such a range of violence.” Additionally, she opted for using the word newcomer over the word immigrant explaining, “I like the word newcomer more, because it encompasses people of refugees, people with precarious status in immigration, and we use newcomer here at the agency.”

**Emergent Themes**

**Barriers to Seeking Help with DV**

The following themes emerged from the analysis, which include, but are not limited to, foreign credentials and employment, language, role of culture, isolation, shelters, and structural barriers. The first section examines how the lack of recognition of foreign credentials can lead to employment barriers and financial disadvantage. The next section explores language as a barrier to seeking help with DV, and the usefulness of trained interpreters. The third section presents how destructive discussions on culture (i.e., culture blaming) can perpetuate harmful stereotypes about the role of culture in respect to DV. The fourth section highlights factors that can contribute to experiencing isolation, which can lead to barriers in seeking help with DV. The fifth section displays how shelters can present challenges due to lack of accommodation and communal living. The final section demonstrates how structural barriers (i.e., the police, court system, and immigration policies) can heighten women’s vulnerability to DV and can create additional barriers to seeking help. Although the above themes have been divided according to
separate sections, the experiences of visible minority immigrant women were influenced by factors such as gender, visible minority, immigrant and economic status, which presented unique and overlapping barriers to seeking help with DV.

*Foreign Credentials and Employment*

Azin and Anamika discussed challenges regarding the lack of recognition of foreign credentials within a new country, which resulted in barriers to employment in their fields of qualification. As a result, they experienced economic instability, which added an additional layer of vulnerability to their experiences with DV. The findings of my data supports the notion that financial dependency on the abuser can make immigrant women more prone to staying in abusive relationships. This was particularly the case for Azin, whose experience with DV shows that the desire for leaving the abusive situation can be superseded by concerns regarding the lack of economic independence, which created barriers to seeking help. It was only after Azin received information regarding financial assistance, that she permanently left the abusive situation. This suggests that the availability of material resources and knowledge of their availability can make a difference in terms of whether women stay or not in abusive situations (Coker, 2001). Studies have shown that economic disadvantages and lack of material resources available can reinforce women’s economic dependency on their spouse, which can create barriers to leaving abusive relationships (Menjivar & Salcido, 2002; Leone et al., 2004).

Most of the literature that I consulted explored the impact of foreign credentials and work barriers on immigrants more generally (Fleras, 2010; Guo, 2009), and thus, was limited in showing its specific impact on visible minority immigrant women dealing with DV. A factor that contributed to Anamika’s and Azin’s economic instability in Canada was the lack of recognition of their foreign credentials, which in turn made it more difficult to extract themselves from abusive situations. As a qualified lawyer from India, Anamika was unable to practice law in
Canada until she met the Canadian educational requirements. As a result, she pursued entry-level employment opportunities to financially support herself, but even securing entry-level positions proved to be challenging, resulting in financial insecurity and deprivation.

Similarly, Azin, previously a legal secretary in Guyana, took on low-paid jobs, such as babysitting and housekeeping upon immigrating because her foreign credentials were not recognized. Immigrating to a new country led to barriers in terms of what jobs were available to her, and that those that were available were mostly low-paid gendered jobs, occupied largely by women of colour. These examples suggest that the lack of recognition of foreign credentials can have gendered and economic consequences for immigrant women in terms of employment or lack thereof. Indeed, studies have shown that immigrant women have a lower employment rate, and are also more likely to work part-time compared to their male counterparts and non-immigrant women (Guo, 2009; Statistics Canada, 2006). Thus, there is a need for policies governing the process of accreditation to take into account unique gender differences so as to produce more equitable outcomes. Both women’s experiences also show a serious chain effect: due to immigrating, their foreign credentials were not recognized, thus leading to barriers in securing employment in their field of work, resulting in entry-level jobs, triggering economic disadvantage, and thereby creating greater vulnerability to abuse, and ultimately affecting their safety and well-being. Additionally, this further shows how intersecting identity factors such as gender, immigrant, visible minority and economic status collectively contributed to Anamika and Azin’s level of vulnerability to DV and posed challenges to seeking help.

Anamika and Azin’s social positions as visible minority immigrants further shape their experiences with the process of foreign credential recognition, which establishes a hierarchy between western education and other forms of education by presenting other ways of knowing as less than. Guo (2009) by exploring multiple studies found that, “while immigrants from Third
World countries encountered difficulties with their foreign credentials and work experience, those from developed countries (such as the United States, Australia, Britain, or New Zealand) have relatively successful experiences” (p. 47). Guo (2009) further states, “It can be argued that knowledge has been racialized in Canada.” (p. 47). These convictions point to the built-in racism found within the assessment process in terms of what counts as a legitimate form of knowledge and by whom. Pease (2010) note that the West “has been presented as an ideal model of progress for all countries in the world” (p. 41). He further adds that the “belief in the superiority of Western values and rationality is what constitutes the myth of Eurocentrism” (Pease, 2010, p. 41).

The Usefulness of Volunteering

In addition to discussions on foreign credentials and work experience, Anamika and Azin noted the usefulness of volunteering as a support. For both women, volunteering made a positive difference in their lives. Even though they themselves did not make the direct link between volunteering and employment, but their personal narratives suggest that their engagement with volunteering led to employment, whether it was the intended outcome or not. As a newcomer, Anamika started volunteering right away at a seniors’ centre while actively seeking employment. One could infer from Anamika’s experience that volunteering was useful in gaining Canadian work experience, and thus, could be used as a gateway to access the job market. She did secure a call centre job shortly afterwards.

Alternatively, Azin explicitly shared that she used volunteering as a way to get over her depression after separating from her ex-husband. Azin’s volunteer experiences were key in helping her with her depression and gaining her confidence back. She explained that these volunteer experiences were less about entering the workforce and more about getting out of the
house to be with people. Although the volunteering was not about getting back into the workforce for Azin, it did inevitably lead to that as she secured employment not long after.

In Anamika and Azin’s experiences, volunteering was more explicitly beneficial in terms of gaining Canadian work experience, it allowed for networking and social skills, and overcoming depression. This shows that volunteering can be beneficial in several ways for visible minority immigrant women who are experiencing DV and isolation. Especially since it is easier to secure volunteer positions than paid positions. However, it is important to keep in mind that while volunteering did increase the women’s social capital, it did not directly contribute to their economic capital or bring change to their economic condition.

**Language**

All five participants discussed language in some capacity. Four of the participants pointed out the importance of language and how not speaking the English language can act as a key barrier to integrating or accessing services. Sadia discussed how in her experience, language has been the number one necessity, stating: “I mean, without language it’s very difficult to actually settle and integrate.” While language is a common barrier for many newcomers and immigrants, it can pose unique challenges for visible minority immigrant women seeking help with DV.

Specifically, for Anamika and Azin who speak fluent English (although with an accent), language was not a direct barrier to seeking help with DV. While it was not a barrier for them, it is a common barrier for many other visible minority immigrant women seeking help with DV. Azin also acknowledged this fact, and shared that her experience with seeking help was more pleasant than it usually is for a lot of women because she spoke English, which made it easier in terms of the transition and getting help. Alternatively, Anamika’s experience with seeking help with DV was less pleasant due to the fact that some service providers made the assumption that she could not speak English. As a professional, Aamira sheds light on how making assumptions
can pose challenges for many visible minority newcomer women seeking help with DV. She gave the example of how people make assumptions about an individual’s level of education based on accents, stating the following, “So we assume that they are not educated because they have an accent.”

The above comments suggest that not only can lack of English proficiency act as a barrier to seeking help with DV, but also how speaking with an accent with its attached assumptions can lead to unique challenges. Several academics have also examined the role of language as a disadvantage that immigrant women dealing with DV can experience, which can lead to barriers in accessing services and communicating their needs to service providers (Crenshaw, 1991; Menjivar & Salcido, 2002). However, the role of accents as a challenge to seeking help was largely absent from the literature that I examined.

*Interpretation Services*

Several of the participants shared very similar viewpoints on the importance of offering interpreter services to mitigate language barriers. Mariam spoke about how her workplace is “really big” on making use of interpreters when there is a communication barrier. She shared that they are connected to multicultural interpreters that are within 15-minute radius, thus making it very accessible. She also added that they do not just offer this service to women experiencing DV, but it is also extended to their men’s program, which includes perpetrators of DV.

Sadia discussed how her workplace has dealt with many clients of diverse backgrounds and who speak countless languages. As a result, they used to provide interpreter services, but due to the liability issue, they stopped offering them, and now refer clients to certified interpreters nearby. Sadia believes that it is a good thing to have professional interpreters who are certified, commenting, “Either you hire people who are licensed or not at all.” Sadia further noted that when it comes to using interpreters in DV cases, it is essential to consider whether interpreters
should be from out of town as to protect confidentiality and anonymity of the clients, otherwise it can pose additional barriers to seeking help with DV.

Furthermore, Aamira spoke about how their agency offers interpreter services for women experiencing violence that do not speak English as the first language. But she goes one step further, stating:

We actually train interpreters...around feminist anti-oppressive practice...so sometimes interpreters know the language great and so it’s training them on those pieces. So I’ve done a lot of my counselling actually with interpreters, which I think is really important, and I do groups with the interpreters as well.

Aamira stressed that it is very important to have interpreters that are trained in not just interpretation, but also working with women that experience violence. It is also preferable to have interpreters that are women when interpreting for gender-based violence cases, as it could alleviate some of the trauma that the victims have experienced as a result of the male violence.

These professional viewpoints emphasize not only the importance of offering interpreter services, but also making sure that the interpreters are accessible, certified and preferably trained with regards to violence against women. Otherwise, untrained interpreters can pose another barrier for visible minority immigrant women seeking help with DV. Moreover, some other challenges include the lack of availability of interpretation services as well as concerns regarding filtered and distorted information given to police by interpreters (Crenshaw, 1991; Menjivar & Salcido, 2002).

**Discussions of Culture**

Culture as a concept was discussed by four of the participants in some form or another. Although cultural and community barriers to seeking help with DV were acknowledged by some
of the participants, almost all of the participants cautioned against destructive discussions about culture in order to avoid the racialization of culture and culture blaming.

In seeking to explain and define culture, I take a stance similar to Polavieja (2015) in that culture is a very elusive concept and there are countless definitions of culture. Such controversies concern the important question of what is culture and consensus has yet to be reached. While recognizing this lack of agreement surrounding definitions of culture, I will rely on the definition of culture as presented by Polavieja (2015) in hopes of providing clarity to the result of my study:

Members of a given social group share a given value, preference, or belief (i.e., a given trait) due to experiencing similar socialization processes. Social groups can be defined in terms of geography (e.g., nations), time (e.g., cohorts), religion (e.g., denominations), kinship (e.g., families), or social space (e.g., classes), depending on the particular question under investigation. (p. 170).

In addition, Polavieja (2015) explained, “Individuals belong to various social groups simultaneously” and this suggests its multi-level character (p. 170). Moreover, Kasturirangan, Krishnan, and Riger (2004) make the following conviction, “Culture is not a static phenomenon; individuals interact with their culture so that the culture is constantly challenged and redefined.” (p. 319). Additionally, time and space also affect culture (Kasturirangan, 2004).

When the participants discussed culture, the concept itself was often presented as very elusive and subjective, and it remained undefined. Some of the participants understood and presented culture as a given (except for Aamira who asked what is culture?). The examples that they provided mostly alluded to sharing a similar geography or national background. For instance, participants discussed having a similar background as synonymous with culture and religion. But at the same time, they recognized belonging to various social groups simultaneously, and thus, showing the multi-level character of culture. This was the case for
Mariam, who understood culture through the lens of being Middle-Eastern. She recognized that as a Christian she could still share a common culture with a Middle-Eastern Muslim.

Alternatively, Aamira questioned, “What is culture?” When asked about whether she received cultural sensitivity training in her place of work, Aamira said:

We don’t really. Cultural sensitivity training is actually based in racist ideals, so having to be sensitive to somebody’s culture, like what is culture? So we have actually anti-racist conversations about really dismantling ideas that there is one way to understand a culture….So we talk more about how to work from an anti-racist, feminist perspective, and that’s an ongoing conversation and training opportunity here.

Aamira continued to share that most of the cultural sensitivity training that is emerging right now is based on the understanding that some cultures are more violent than others. She added, “I get nervous about people being like culturally competent because it’s challenging, but I think working from a place that there is not one way, as one of my youth says…it’s not a right way or a white way.”

Most of the participants emphasized the need to avoid destructive discussions on culture in order to circumvent culture blaming. The participants stressed that when we discuss culture, it is important not to reduce it to specific groups from particular parts of the world. They stated that culture and cultural barriers could be found among various groups of different backgrounds. These comments implicitly suggest that culture is often attached to a homogenized group, one that tends to be racialized. Specifically, some of the participants felt inclined to provide Canadian culture and Eastern-European culture as examples, thus showing that race and culture are not one and the same. They stressed not to intertwine culture and race in understanding individuals’ experiences with DV.
Harmful Stereotypes of Culture and Community

Anamika’s culture and religion were often perceived by professionals to be the cause of the DV that she experienced. She was put in situations where she had to defend her culture and religion against harmful stereotypes when she was seeking help with DV. Anamika’s experiences underline that individual cases are not considered as such, and instead entire groups are being stereotyped as culturally more violent (Sokoloff & Dupont, 2005). Several of the participants noted that despite differences in background or culture, DV occurs for similar reasons (i.e., power and control) across all backgrounds, but there is a tendency to stereotype DV as part of some ethnic groups culture. Thus, it is important to examine harmful stereotypes about culture and culture blaming (Menjivar & Salcido, 2002; Sokoloff & Dupont, 2005; Pratt & Sokoloff, 2005; Burman et al., 2004). These negative types of understandings of culture can have real life consequences for visible minority immigrant women seeking help with DV as reflected in Anamika’s experience. She shared that experiencing DV was already traumatic enough, and then when she sought out help with DV, she experienced additional trauma and stress due to harmful cultural perceptions held by professionals. This example shows that culture blaming can prevent visible minority immigrant women from fully benefiting from DV services, and they may actually experience greater trauma.

Aamira further discussed harmful assumptions about certain communities and how that can lead to challenges in accessing services:

I find sometimes people assume that certain communities don’t have violence the same way. So East Asian women may not experience the same access to services than compared to say South Asian or Muslim women, because there is an assumption that our communities have higher rates of violence, and there’s been community organizing within this.
She further added, “Then we make these assumptions that immigrants and refugees or newcomers, import violence into this country and like somehow those communities are more nutty than other communities.”

Moreover, Aamira spoke about the idea of liberation and not belittling women who wear a hijab by telling them, “Just so you know--you are here now, take off your hijab, you are safe. And the women being like actually, ‘it’s a part of my liberation to wear this.’” She emphasized that it is really important to have spaces that are anti-racist, feminist and understanding. Along similar lines, Mariam shared that we should stay away from making remarks such as, “But this is how we do it in Canada.” She stated that comments such as these dismiss everything the women believe in. She noted, “It’s good to explain to them how it is in Canada but don’t expect that they are just, ‘oh yeah, yeah, yeah, let’s do it that way.’” Aamira’s and Mariam’s comments show that it is crucial to have inclusive and non-judgemental spaces where visible minority immigrant women can feel safe. Otherwise it can become another form of a barrier for them in seeking help with DV. These comments depict how culture has been used to explain the level of violence against women, leading to culture blaming and reinforcing barriers to seeking help with DV.

*Cultural and Community Barriers*

Although participants cautioned against harmful stereotypes and assumptions about culture, some participants still considered the role of culture and community in posing barriers to seeking help for visible minority immigrant women. Mariam stated the following:

Culture is very important. To me it is, even the bad parts of it. There is a connection, there is a sense of, you know that connection to the collective? I think in these cultures, it is very important, and it gives you a sense of identity, so for the women it becomes even harder [to leave].
Mariam’s comments highlight that women may derive their sense of identity from belonging to a particular culture and so when they are experiencing DV, it becomes difficult to leave the abusive situation or seek help with DV, especially if it is a taboo topic within that community. Mariam further added, “The general rule is, they’ll come and they are here [shelter] and whatever, and then they’ll go back” because of judgment instead of support from the community. It is important to note that Mariam mostly spoke about culture from a Middle-Eastern lens, stressing that she cannot speak for all other cultures. However, she did mention that in her line of work, she has witnessed that cultural pull being present in other communities as well (e.g., the Asian community and Eastern Europe).

Along similar lines, Sadia stated, “Sometimes social and cultural pressures prevent women to really come out and ask for help, especially immigrant women, and I’m thinking from all different backgrounds. It’s not just East Indian women or Muslim women.” She further stressed how DV is about power and control, which is exactly the same reason everywhere and in every country:

There is no difference whatsoever if it happens to someone who is born in Canada or if it happens to someone who is not born in Canada, it’s the same reason. It’s the cultural barriers sometimes that become a nuisance…and trust me, I have seen people from many, many, many different cultural backgrounds, and they all have their different kinds of barriers, they can be different from one country to another, but they do have those.

Mariam and Sadia’s comments suggest that cultural and community barriers can be present in women’s experiences in seeking help with DV, but it is critical to dismantle ideas surrounding the racialization of culture and the notion that certain racialized groups are more prone to violence because of their culture. Other researchers have also examined community responses to
DV and issues surrounding ostracism and resistance from the community, leading to barriers in seeking help with DV for immigrant women (Shankar et al., 2013; Crenshaw, 1991).

Moreover, Aamira spoke about community violence in terms of policing, feeling shunned and shamed, and feeling isolated from both the outside community and from within. Aamira shared, “Also within their communities the policing that happens, the gatekeeping. So I know best for you or like religious leaders saying, ‘Well, you should just go back to him like you know good wives do that.’” Moreover, both Aamira and Mariam mentioned the pressure of being a good wife and mother, and staying in the abusive situation for the sake of children. These are some examples of community deterrents that visible minority immigrant women may experience in seeking help with DV.

*Culture as a Tool to Connect with Victims and Survivors*

All three professionals discussed whether having a similar cultural background were useful in providing support to visible minority immigrant women experiencing DV. For Mariam, having a similar cultural background with victims or survivors was sometimes useful in providing support, stating:

Especially from my own culture, and I’m Christian, but I find that a lot of the Muslim they connect with me just because I know the culture, like the religion doesn’t matter. And they’ll say things like, ‘You know what I am talking about?’…And it’s like, ‘Yeah, I do,’ without them even saying it, or sometimes you know little things about how he treats her and they are having a difficult time describing it to the other workers. And then, they’ll just look at me, and I’ll just say, ‘I understand,’ and that’s such a relief for them. Mariam also had other experiences where women of different cultural backgrounds were drawn to her because of her accent and would request to speak to her even though she did know their language. Mariam’s experience demonstrates that cultural and immigrant similarities, perceived
or otherwise, can provide a sense of comfort for immigrant women seeking help with DV. Nevertheless, Mariam also recognizes the importance of considering individual experiences: “Just because I’m from the Middle East and you’re from the Middle East, doesn’t mean we are going to have the same experience, and we might have different needs.”

In discussing individual experiences, Aamira shared the following:

We work from an individual basis that not one person can name. So like we’ve had South Asian counsellors here, I am South Asian, I can’t represent all the South Asians….I can’t be a cultural negotiator for them, and be like, ‘Well, this is what your culture is like.’ Some of our clients would be like, ‘Well, you understand?’ and I’m like, ‘No, I want you to break it down for me,’ because sometimes they would be like, ‘My culture is more violent than other cultures.’

Moreover, Sadia shared that for the women talking to someone from their home country can be helpful because it establishes a level of trust and understanding, and the professional will know what they are talking about right away. Sadia further made the conviction that even though it can be helpful, but being a good professional is more important than a mediocre level professional that happens to share the same language or background. Nevertheless, there are also times when having a similar background can pose barriers. Mariam stated, “I think sometimes it’s a barrier because they are suspicious of you, like you’re the spy. So I’ve had that, and they just don’t want to talk to me.” But despite this example, Mariam emphasized that they usually welcome the similarity.

These above comments indicate that while having a similar background as the women can be useful, but what matters most is being a good professional. If we take Anamika’s experience as an example, one of the biggest challenges that she faced was the professionals’ attitude of culture (i.e., culture blaming). This suggests that professionals need more training that is not
necessarily “culturally sensitive” but rather that is anti-racist and anti-oppressive. Interestingly enough, most of the literature that I consulted stressed cultural sensitivity training and culturally appropriate services to alleviate issues around culture blaming and racialization of culture (Menjivar & Salcido, 2002, Shankar et al., 2013). However, what appears based on the results of my data is that it is difficult to try to pin down culture. Not only because definitions and understandings of culture may vary, but also because there are countless cultures, making it difficult to know about each culture. Instead, in order to improve the experiences of visible minority immigrant women in services is by providing ongoing anti-racist training for professionals, as this appears to be a key obstacle. Thus, DV training initiatives should consider the different diversity axis that shape women’s experiences with DV in addition to their gender.

**Isolation**

Several of the participants discussed isolation as a barrier to seeking help with DV. Both Azin and Anamika experienced isolation in tandem with DV. Azin’s experience with isolation shows that when individuals are experiencing abuse they may lose their support network (i.e., her sisters ended communication with her). This lack of support network can lead to barriers in seeking help with DV because the abuser is able to exercise greater control. Alternatively, Anamika did not disclose the abuse to her family and friends, thus, enhancing her experience with isolation.

In addition to their abusive partners isolating them in terms of preventing their contact with family, friends and strangers, they also experienced isolation as a result of immigrating. Particularly, Anamika’s experience with isolation was heightened because she entered a foreign environment where the physical geographic area was unfamiliar to her. Lack of knowledge on how to use public transportation further enhanced her feelings of isolation. Aamira mentioned that when individuals are severely isolated, they may not know how to use the subway, but there
is an assumption that people know how to use the subway. Moreover, Sadia discussed isolation as a big part of DV and how many women do not leave because of isolation. She has dealt with cases where clients would tell her, “I am stuck in this situation. I don’t see any way out; I don’t know anyone.” Other concerns have been: “Who is going to be my friend, and I have no family here if I take this step.” Sadia shared that many of them do not even know the amount of help that is available in Canada because they are so isolated, thus leading to barriers in seeking help with DV. Connecting newcomer women with mandatory services (e.g., on how to use public transportation) could alleviate feelings of isolation. This shows that factors such as gender, being an immigrant and geography can enhance victims’ experience with isolation, which in turn can make them more vulnerable to DV.

**Shelters**

Several of the participants discussed shelters as a barrier to visible minority immigrant women seeking help with DV. Sadia shared that there are challenges that face women as a result of not knowing or understanding where they will be once they make the call for help. This was also the case for Anamika who was initially fearful of going to a shelter. Sadia further added that fear of a women’s shelter is huge because in many countries women shelters are not very safe. In addition to the fear factor, immigrant women may also have a hard time coming to terms with living in a shelter, especially if going to a shelter is not a “norm” for them, as expressed by Anamika.

Moreover, Mariam shared that being in a shelter can also be challenging because they “face a whole group of other women that sometimes don’t understand them. They look at them weird, especially if they are wearing their ethnic dress, or if they cook things differently, they don’t eat certain things.” This can give rise to conflicts between the women, so trying to fit in or function within the shelter setting can be challenging for those that are perceived as different.
In addition to challenges resulting from communal living, shelters may also be unaccommodating to certain needs. Aamira had a client that was experiencing extreme violence and it took her a number of years to finally decide to go to a shelter. However, once she got there, the shelter turned out to be unaccommodating in term of her dietary needs: she was told that if she wanted to eat halal food, she had to buy it herself. Aamira shared, “So here is a woman who has never left the house, has no access to a bank account…and is put in that position.” She further added that they had to work so hard to get the woman to leave, and then their shelter experiences turn out to be very challenging: “I think there is a study in the U.S. about South Asian women in shelters. Women weren’t just staying in shelters because they were just like, ‘This is not working for me.’”

The above examples show that in addition to fear of women’s shelters, other challenges involve the lack of accommodation in shelters, and also the potential conflicts that can result from communal living, which can all create barriers to seeking help with DV. Women’s shelters may be ill equipped to effectively respond to the particular issues related to DV that immigrant women may experience, which are shaped by certain aspects of their identity such as gender, visible minority and immigrant. There are no “one size fits all” explanations, and solutions must reflect these differences (Menjivar & Salcido, 2002; Shankar et al., 2013; Sokoloff & Dupont, 2005).

**Structural Barriers**

**Police**

Visible minority immigrant women can also experience structural barriers when they seek help with DV. Specifically, Mariam gave the police as an example: “The women would come and say, ‘Just get the police to go talk to him. I know he’ll listen to them. They can tell him to stop and he will stop’. The police is not going to go do that, right?” Mariam shared that back home
that is usually how it works. If her family is supportive, her brothers would tell him to stop “or
else, and it works, usually.” Mariam stressed that a lot of the time that is an expectation that the
women have, but based on how our systems are set-up, the police are not going to do that.
Mariam noted that what actually ends up happening is that because often immigrant women do
not understand the North American system yet, they talk to the police “thinking they will just tell
him to stop” and fail to realize that “he can be charged and arrested.” Mariam claims that lack of
knowledge of the North American system can put immigrant women in vulnerable situations.
This provides a unique insight into how visible minority immigrant women may want to use the
police as more of a scare tactic to get their abusive partners to stop the DV, and instead can
actually find themselves in a more vulnerable condition because of mandatory charging policies,
which instruct the police to make an arrest. Subsequently, this can deter many women,
particularly visible minority immigrant women from reporting abuse if their intention is not to get
their abusive partners arrested.

Alternatively, there might be instances where the police might fail to make an arrest, even
if they are instructed to do so under policies. This may be due to officers’ reliance on victim and
offender’s characteristics, which is informed by their personal biases (e.g., gender, culture, race).
This is an example of how police involvement might do more harm than good, and can
consequently keep an immigrant woman in an abusive relationship (Menjivar & Salcido, 2002).
Moreover, Sadia shared that the fear of calling the police is huge because in many countries the
police are corrupt and that keeps women from calling or running. These examples highlight that
visible minority immigrant women may feel ambivalent about involving the police in DV
situations, and this can lead to barriers in seeking formal help with DV. Thus, law enforcement
policies should take into consideration the unique impact of its policies on visible minority
immigrant women, whose experiences are shaped by overlapping factors such as, gender,
immigrant, race and culture. The gendered and racialized impact of such policies can discourage visible minority immigrant women’s decision for police involvement.

Court System

Aamira discussed how our court system could perpetuate certain assumptions about culture, leading to structural barriers to seeking help. She gave the example of a recent case involving an Iranian immigrant man who received a lesser sentence for beating and raping his wife for years. She stated how the judge said that the wife did not have knowledge about the violence being wrong or against the law: “so he gave him a lesser charge because culturally it gave him an excuse.” This example reveals that state intervention and the court system can act as a barrier for visible minority immigrant women seeking help with DV, as rulings can enforce and reinforce culture blaming, institutional racism and xenophobia. Moreover, gender, ethnicity and culturally insensitive laws and legislations and their application can result in the revictimization of visible minority immigrant women seeking justice for DV by granting protection to their perpetrators.

In addition, Azin’s experience also shows that legal policies that require women seeking divorce to consider reconciliation with abusive partners may have negative consequences. As reflected in Azin’s situation, during the one-year separation period, which was mandated by the court, her husband became more abusive, and this put her at a higher risk for abuse. Thus, it is necessary to re-examine such legal policies and its specific effects on women. Furthermore, Anamika’s reluctance with regards to legal charges against her husband is indicative that the court system may not always be perceived as the most favourable avenue for visible minority immigrant women dealing with DV. After all, Anamika was more concerned with moving on with her own life and prioritizing her safety rather than seeking retribution through an extremely time-consuming court process. Anamika’s desire for minimal court involvement was reinforced.
by her bad experience with her ex-husband’s probation officer who made cultural assumptions pertaining to the DV that she was experiencing.

*Spousal Sponsorship, Legal Status and Deportation*

Aamira spoke about the importance of considering the systematic forms of trauma and violence that visible minority newcomer women may experience. For instance, the immigration system has important implications for immigrant women due to the unequal allocation of resources for men compared to women. Aamira’s comments touch on the gendered effect of the immigration system, and more specifically, she was critical of the new law, which requires women to stay with their partner for two years in order to attain permanent residency (i.e., conditional permanent resident status). She stated that this puts pressure on women, resulting in fewer and fewer women going through the immigration system. Although academic literature is fairly limited on the subject, other academics have pointed out the obstacles that the required three-year spousal dependency period can pose for immigrant women seeking help with DV (Alaggia et al., 2009; Merali, 2008; Regehr & Kanani, 2006).

Azin’s experience with the spousal sponsorship policy further shows how the required mandatory period of ten years can reinforce women’s dependency on their spouse and pose barriers to seeking help with DV due to fear of legal status and financial insecurity. Even though the current law reduces the sponsored individual’s dependency on their spouse from ten to three years (Merali, 2009), it nonetheless continues to encourage dependency and power imbalance between the sponsor and the sponsored individual. This shows that spousal sponsorship policies, with required mandatory time periods, can have different implications for women dealing with DV whose experiences are influenced by interacting factors such as gender, economic status and immigration status. Such policies need to take into account the different diversity axis that shape visible minority immigrant women’s experiences with DV. Otherwise, they can deter visible
minority immigrant women from reporting abuse due to structural barriers that may inadvertently force them to choose legal security over personal security.

Moreover, Sadia discussed fear of deportation as a barrier to seeking help with DV for many immigrant women. She shared that once women are sponsored, they sometimes face threats by their spouse or their spouse’s family to be sent back, and this can keep them in abusive situations (Crenshaw, 1991). In Sadia’s professional experience, women have expressed their fears about calling for help due to concerns regarding arrest and deportation. For Sadia, what could alleviate some of these barriers to seeking help with DV is by providing all newcomers with information pertaining to their rights in Canada.

Although lack of knowledge and information regarding rights and Canadian laws can lead to sponsor-imposed barriers (e.g., deportation threats), the breakdown of sponsorship remains a possibility for many visible minority immigrant women. For example, Aamira worked on one particular case where a woman had married an abusive partner and was dealing with the breakdown of sponsorship. As a result, she was put in a detention centre and “she had the choice to either bring her child with her in detention…or leave her child outside of jail.” Aamira’s comments are important as it sheds light on not just the impact of breakdown of sponsorship on immigrant women, but also their children, and the link to detention centres. The majority of the literature that I examined was limited in exploring issues around breakdown of sponsorship and detention centres, and the deterrent effect on immigrant women seeking help with DV.

**Available Supports**

This section explores the various supports that are available for visible minority immigrant women seeking help with DV. Azin’s and Anamika’s experiences regarding the support that they received with DV will be presented first. The results in this section are broken
down into two main components: participants’ professional level of training, which includes their perspective on training in general, and their agencies’ innovative responses to DV.

Both Azin and Anamika expressed their tremendous gratitude for the support that they received from the shelter and its staff in seeking help with DV. While the professionals and service providers have in general been a helpful force in both women’s experiences, I believe it might be useful to examine whether professionals and service providers receive sufficient training in dealing with visible minority immigrant women who are seeking help with DV. As such, this might shed some light on Anamika’s experience with seeking help, which was tainted by a few “rotten apples”.

**Examining Participants’ Professional Level of Training**

Examining the three participants’ professional level of training can provide direct insight into whether there are adequate levels of training being provided at organizations. As consistently mentioned by the participants, a key barrier to visible minority immigrant women’s experiences is the harmful attitudes of professionals and service providers. However, the examples presented here are not meant to be representative of all organizations across Canada or even Southern Ontario for that matter. Instead, it serves to expand upon existing knowledge pertaining to the various supports that are available and how to best improve those available supports.

All three professionals discussed their level of training and believed that they had sufficient knowledge in dealing with visible minority immigrant women experiencing DV. Aamira works in a feminist workplace that offers training every two months for staff on different issues and topics (e.g., feminism, the court system, forced marriage, etc.). Aamira emphasized the importance of using a framework that is anti-racist, feminist, anti-oppressive and decolonizing. She further stated that all their staff members are women of colour (except for one white woman who is queer), and they all learn from each other and have extensive conversations about their
work. Aamira herself also does training across Canada and the US, working from an anti-racist framework that challenges Islamophobia.

In addition, Sadia mentioned that at her workplace, they get diversity training at an ongoing basis on different issues and topics. She spoke about how she has adequate knowledge in dealing with immigrant communities and the issue of DV, and she commented how the training has been mostly responsible for that: “I think the more training you get, the better knowledge you have, the better understanding.”

Furthermore, Mariam discussed diversity workshops that are offered in the wider community that their staff members can attend, but these are not mandatory. For Mariam, what has been helpful is to ask questions and to do outreach with various communities to raise awareness about their services and provide help with DV. Particularly, she has done a lot of outreach and programming with the local mosque, stating, “so that’s how I got to meet a lot of the women and kind of started working with them, and you know since then we’ve had a few cases come in.” This is exemplar of how some professionals take unconventional initiatives to access certain groups of women and raise awareness regarding the services that are available to victims/survivors of DV.

These comments suggest that there is no centralized training being offered across all organizations. As a result, the training being provided to professionals and service providers is inconsistent, which can lead to some organizations being better equipped to deal with visible minority immigrant women than others. This suggests a need for a mandatory agreed-upon national training standard in order to alleviate disparity in DV services. Also, it is crucial that training programs be anti-racist and anti-oppressive in addition to being feminist as to tackle the issue of racism found within services. Moreover, the three professionals that I spoke to are all considered visible minorities under dominant definitions, resulting in a greater awareness of the
issue of race. Their lived experiences as women of colour informed their professional attitudes to some degree, as they were able to detect harmful stereotypes and assumptions about particular groups. However, for those professionals and service providers that lack both appropriate anti-racist training and lived experience, it can be challenging to provide services effectively without having that knowledge.

**Professional Perspectives on Training**

Four of the participants shared that in general there should be more training and preparation for DV workers dealing with visible minority immigrant women. Based on Anamika’s lived experience, professionals need a lot more training than what they currently have: “I feel like there is no training at all. And even if there is training, it is being provided by white Canadians who think what they are saying is diversity training and cultural training, which is like from their perspective.”

Aamira also noted that DV workers in general do not have enough training when working with marginalized groups. Specifically, she recommended anti-racism training that is ongoing, stating: “I think the problem with anti-oppression training is sometimes they’re like a catchall, and they’re like, ‘Okay, you did it in one-day.’” Sadia further added that DV workers know how to deal with the issue of DV extremely well, but the main barrier for them is understanding the cultural and language perspective. She concluded that the training that people need is to see without colour and deal with all individuals the same way. These comments support the idea that more training is needed for professionals, especially when working with marginalized groups, such as a visible minority. Although their suggestions vary slightly, they all point to ongoing anti-oppressive training that takes into account marginalized voices and perspectives.

However, both Aamira and Mariam stressed that it is not just the workers that need more training, as change is needed in other areas (i.e., systemic and societal) as well. Aamira stated that
while professionals do need better training, it should not just be on the workers. She believes that it needs to be on society as a whole: from the way in which our media reports violence to our court system. Aamira also suggested training for doctors, nurses, immigration workers and police. Moreover, Mariam shared that like any other field; there can never be enough training. However, she believes that it is not necessarily frontline workers that need more training, but rather training those who have set up our systems. Specifically, she mentioned that it is more policies, procedures, guidelines and mandates that we need to look at, and the fact that we cannot step outside of that or “think outside of the box” because everybody has to be treated the same under an apparently misguided notion of what constitutes equality. Both Aamira’s and Mariam’s perspectives stress that in addition to more training for professionals and service providers, we need systematic changes as well.

**Innovative Responses to DV**

*Work with Men and Families*

Two of the professionals discussed innovative responses to DV with which their agencies are involved. Mariam shared that their work with the men (perpetrators of DV) is innovative because “Domestic violence is not a woman’s issue, not a man’s issue; it’s an issue that impacts the whole family.” Mariam believes that it is not enough to just provide support for the women and children because “he [perpetrator] is moving on to the next person” or if “she loves him, she is going to go back to him.” She further stated that they have been working with the men for over 20 years and they have seen that that makes a difference. Moreover, Mariam shared that other programs that are innovative include working with the whole family that are experiencing severe conflict, and so working with the mother, father and children in separate groups. She added, “But they are all getting the same information at the same time, so it’s like a continuity in service for the whole family, as they are going through the change and the healing.”
Community Service Collaborations

Deeper collaboration between services has been useful to two agencies. Aamira highlighted how her agency’s collaborative piece, which brings together 20 different organizations, has been helpful in terms of innovative policies and practices. Along similar lines, Mariam listed collaborating with other community organizations (e.g., police, hospital, sexual assault support, FACS) as an innovative example. However, she wished that they did more community collaborating around cases involving specific cultural needs, where they would all come together and talk so that specific situations do not escalate.

Promoting Engagement and Change

Aamira further spoke about various innovative programs that her agency offers. Specifically, they have a young Muslim women’s program that looks at various forms of violence (anything from partner abuse to forced marriage) that the women may have experienced. Another innovative program that they have is community-based research. Aamira explained the program involving a “team of young Muslim women who are survivors in different ways or just community leaders that want to do work in their community around violence against women.” These innovative responses directly respond to visible minority immigrant women’s needs as it includes their voices and lived experience in seeking change. Furthermore, Aamira shared that they have an immigration lawyer at their agency, and they do a lot of immigration law reform. They also have programs that look at anything from policy to counselling in order to create safer spaces for Muslim women.

These immediate micro-level supports and innovative responses are extremely useful and undoubtedly make a positive difference in the lives of visible minority immigrant women seeking help with DV. However, the main obstacles to fully benefiting from these supports have been the larger structures of privilege and inequality such as patriarchy, white supremacy and class
exploitation. Thus, while these supports are beneficial on a micro level, there is a need to examine the structures of privilege, which limit visible minority immigrant women’s full access to completely benefiting from these supports.

**Limitations and Future Research**

Based on the extensiveness of the results of my data, I was limited in exploring other important themes that came out of my research due to either pragmatic concerns (i.e., time and resources) or it was simply beyond the scope of my research. I will suggest several ways that this research could be built upon to advance and extend its findings.

First, the experiences of visible minority immigrant women with children could be explored to show the unique barriers that they may face. Several of the participants in my research discussed how FACS (Family and Children’s Services) and duty to report could pose challenges to seeking help with DV for visible minority immigrant women with children (e.g., language and lack of knowledge around FACS and duty to report). Future research could examine the experiences of women with children and DV. The experiences of children were not built into my research question, and thus, was beyond the scope of my study.

Second, further research could investigate the vicarious trauma that professionals may experience in their line of work, and the impact that has on both service providers and the women that they are serving. Two of the professionals in my study spoke about vicarious trauma and the impact that had on them. If service providers are feeling overwhelmed or burnt out, and there is a lack of appropriate relief mechanisms in place, it can impact the women that they are servicing, and this can create another barrier for visible minority immigrant women seeking help with DV.

Third, I worked with a small sample and thus, the findings from this research cannot be generalized to all visible minority immigrant women seeking help with DV in Canada. Further
research could obtain data from working with a larger sample size. In addition, other research could do a comparative study and examine the difference between rural and urban geographical locations to show whether that makes a difference for visible minority immigrant women seeking help with DV.

Lastly, an exploration of how intersecting forms of violence (e.g., forced marriage, sexual violence, honour killing etc.) can shape visible minority immigrant women’s experiences with seeking help could be beneficial. Additional research could also examine the effect of DV on the mental health of visible minority immigrant women. Moreover, further research could investigate the impact of other immigration categories on visible minority immigrant women dealing with DV: economic class and refugee class.

Furthermore, one of the limitations that I found in the existing literature is that it was mostly done in the late 90s and 2000s, but what is interesting about this fact is how relevant the information presented still is. For instance, some of the key barriers that visible minority immigrant women seeking help with DV faced then are also similar barriers that they continue to face now, as confirmed by the results of my data. This shows that even though conditions have improved to some degree for visible minority immigrant women seeking help with DV, there is still a long way to go, as significant change is still needed. In the next section, I will elaborate on this change, and present my recommendations for action.

Chapter V: Recommendations and Final Thoughts

Recommendations

The potential for any real change would involve systematic changes. In order to alleviate the barriers that visible minority immigrant women experience in seeking help with DV, there should be a clear focus on transformation of current institutions. The experiences of visible
minority immigrant women dealing with DV are multi-faceted and cannot be easily understood in black and white terms. The first step should be towards an analysis and acceptance of systematic discrimination. However, until then, several immediate and micro-level changes could improve the experiences of visible minority immigrant women seeking help with DV. The primary goal of this research was to examine local knowledge regarding the experiences of visible minority immigrant women seeking help with DV, and as a result, I will aim to provide some specific recommendations that could improve these women’s experiences in Southern Ontario.

- Introducing compulsory courses into our educational curriculum as early as elementary school to teach about social inequality, and to include the perspective and experiences of marginalized groups. This is to challenge dominant forms of knowledge that have been constructed based on the perspective and experiences of the powerful that currently dictate our education system.

- Mandatory anti-sexist, anti-racist and anti-oppressive national training for professionals and service providers that is ongoing in order to alleviate the sexism, racism and xenophobia that is currently present in services.

- Even though interpreting services are available, this does not mean that visible minority women are receiving the appropriate information or support. Feminist and anti-racist training for certified interpreters should be offered.

- Informing all newcomers of their rights in Canada and provide basic information regarding Canadian laws pertaining to immigration.

- Connecting all newcomers with settlement services upon arrival to Canada as a mandatory practice, which could provide them with information regarding the availability of services in the community. As part of their introduction to settling in, newcomers can
be educated on basic information pertaining to banking and public transportation (these are just two example), as to mitigate financial abuse and isolation.

- Community organizations collaborating together in order to best serve visible minority immigrant women seeking help with DV. Emphasis is on building and sustaining relationships across various sectors by information sharing.
- Police officers could reduce barriers when working with visible minority immigrant women dealing with DV by showing a greater understanding for women’s apprehensiveness in involving authorities.
- Shelters need to be more cooperative in terms of cultural and religious accommodations.
- There is a need for reform of our current immigration system in order to lessen the vulnerability of visible minority immigrant women dealing with DV (e.g., breakdown of sponsorship, spousal dependency period etc.).
- Recognition of foreign credentials and work experience would benefit visible minority immigrant women experiencing economic disadvantage when crossing borders. Or at the very least, there should be fewer educational requirements (i.e., lessening course load), and more financial support for immigrants upgrading their education.
- Increase in the availability of material resources for visible minority immigrant women seeking help with DV.

This research can help raise awareness on the many issues and intersecting barriers that visible minority immigrant women dealing with DV face. Although the suggested micro-level changes are specific to the needs of my sample in Southern Ontario, I believe it could be used as a model to serve other visible minority immigrant women across Canada as they may experience similar barriers to seeking help with DV.
Final Thoughts

This study explored the experiences of visible minority immigrant women seeking help with DV in Southern Ontario. As such, it has contributed to the understanding of the various factors that encourage or deter visible minority immigrant women from seeking help with DV. Overall, my literature review and the findings of my research show very similar barriers that visible minority immigrant women face. However, where the results of my data and my literature review primarily diverge is in relation to culturally appropriate services. Prior to data collection, I took the preliminary stance that culturally appropriate services and training are needed in order to improve the experiences of visible minority immigrant women seeking help with DV. However, speaking to the participants changed my own understanding of culture, making apparent the complexities involved in trying to pin down culture. What I found was that definitions and understandings of culture vary, and by proposing cultural sensitivity training, I may inevitably perpetuate harmful stereotypes myself. Thus, what appears is an actual need for centralized anti-sexist/anti-racist/anti-oppression training that accounts for difference in a constructive way. This indicates that we are not past racism, as unequal race relations continue to structure our society.

Additionally, although the goal of gender equality has been formally achieved in Canada, it has yet to be realized in practice, as the majority of women continue to be at a high risk for DV. However, while all women are at risk and can experience violence, this study has shown that in addition to gender, other interconnected factors such as being an immigrant, visible minority and economically disadvantaged can play a role in exacerbating vulnerability. The participants candidly discussed the barriers (i.e., foreign credentials & employment, language, role of culture, isolation, shelter and structural barriers) that visible minority immigrant women continue to face in Southern Ontario, but in spite of this, they were pleased with the various supports that are
currently in place. Particularly, the innovative responses that various organizations are involved with, is a step in the right direction. Nevertheless, the majority of the participants determined the necessity for systematic changes, but in the meantime pushed for anti-racist services, policies and programs that could benefit visible minority immigrant women dealing with DV.
References


