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**BATTERED WOMEN'S PERCEPTIONS OF AN
INTERVENTION SERVICE**

By

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**Dissertation submitted in partial fulfilment of the requirements for
the degree of Master of Social Science in Clinical Social Work**

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DECLARATION

This work has not been previously submitted in whole, or in part, for the award of any degree. It is my work. Each significant contribution to, and quotation in, this dissertation from the work or works, of other people have been attributed, and has been cited and referenced.

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ABSTRACT

The prevalence of women abuse is high globally and South Africa is no exception. The consequences are severe, resulting in the need for effective intervention services to address this problem. This study has been undertaken with the aim of exploring battered women's experiences of the intervention service provided by the National Institute for Crime prevention and Rehabilitation of Offenders (NICRO) Women's Support Centre, with a particular focus on those women who attended the centre once only. The study is located within an integrated theoretical framework, which takes into account various factors including individual, sociological, economic, and socio-cultural factors when trying to understand women abuse. The study uses a predominantly qualitative - exploratory research design, with some quantitative methods, which include the use of a few closed ended questions in the interview schedule. Forty women participated in the study and data was collected using a semi-structured interview schedule containing mostly open-ended questions, via telephonic interviews. Data was analysed using content analysis. Five central categories based on the five objectives were presented. Themes and sub-themes emerged from the content analysis of the interviews' texts. One of the themes revealed that respondents had multiple needs. A second theme showed that these needs were generally met by NWSC's services. Another central theme revealed that the majority of respondents simultaneously found some aspects of the services provided by NWSC to be helpful and unhelpful, and those particular aspects are described in terms of emotional, information and legal assistance and the general approachability of the centre. It was found that most respondents would return to the centre for further assistance and a fourth theme indicated several reasons for respondents not returning to NWSC. A fifth theme indicated that various factors besides help received from NWSC, assisted respondents to cope with their situations. Based on the results of this study, concrete recommendations have been made for NWSC with regards to how they may enhance their services, and suggestions have been made for future research.

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CHAPTER 1

THE RESEARCH PROBLEM

This study examines battered women's experiences of the intervention service provided by the National Institute for Crime Prevention and Rehabilitation of Offenders (NICRO) Women's Support Centre (NWSC), with a particular focus on those women who received only one intervention.

The first chapter will begin by providing an overview of the present study. It will then contextualise the research by describing the service provided by the NWSC in Long Street, Cape Town; defining women abuse; considering the phenomenon of women abuse within the South African context, and indicating the magnitude of the problem. The aim and objectives of the study will be outlined as well as a description of the methodology used in this study.

Chapter Two will include a review of the literature pertinent to this research area. It will begin with an explanation of the various theoretical frameworks for understanding women abuse, along with a description of how each theoretical perspective informs practice for battered women. Existing literature will then be explored with regards to the processes and issues battered women experience when seeking help, their specific information needs, and the barriers that they may encounter when accessing various helping sectors.

Chapter Three will present and discuss the results of the data extracted by the process of content analysis. These results will be located within the relevant literature and within the theoretical framework of the research.

Chapter Four will provide an outline of the key findings of the study and recommendations will be made to improve and enhance services provided by NWSC, along with recommendations for future research.

1.1 OVERVIEW

“The view of the family as ‘a haven in a heartless world’ has been tempered in recent years by the knowledge that all too often it is a place of great cruelty”.
Saunders (1999, p.243)

South Africa has one of the highest levels of violence against women in the world (Legal Resources Centre, 1998). It is estimated that between one out of four and one out of every six women in South Africa are in abusive relationships, and one woman is killed by her partner every six days (Bollen, Artz, Vetten & Louw, 1999). These statistics may in fact be higher due to the high degree of underreporting. Part of the difficulty in exposing woman battering is its occurrence within an intimate privatised relationship (Maconachie, Angless & van Zyl, 1993).

The consequences of women battering are severe (Bollen et al., 1999). The trauma of abuse is life-long and affects a woman and her children not only physically, but also emotionally and psychologically. Women battering is cited as a major risk factor for a broad range of adverse health outcomes, e.g. HIV/AIDS, gynaecological disorders and sexually transmitted diseases (Ellsberg, 1999).

In 1998 the Domestic Violence Act 116 was passed in South Africa, designed to improve upon the former law, namely the Prevention of Family Violence act 133 of 1993, as this act had not succeeded in its attempt to prevent and protect victims of violence (Smit & Nel, 2002). The purpose and aims of the Domestic Violence Act are to reduce the high number of incidents of domestic violence in society, afford maximum protection to the victims of abuse, uphold the rights of all persons and to ensure that the organs of state give full effect to the provisions of the Act (Smit & Nel, 2002). This Act is also “an improvement on the old act in terms of providing a clear definition of domestic violence” (Rasool, 1999 p. 7 cited in Smit & Nel, 2002). The new Act recognises domestic violence as a serious crime that takes many different forms and affects people in many different types of relationships, whereas the former law had excluded anyone who was not related through marriage or common-law marriages and had not defined the term “domestic violence” (Legal Resources Centre, 1998).

Limitations and difficulties have however arisen with the implementation of this new act. It has been noted that people are still often unwilling to render assistance to victims of women battering and a great deal of ignorance and misconceptions still exist regarding the abuse of women (Mashishi, 2000).

In recognition of the fact that woman battering is a serious social problem and with an awareness of the difficulties in attempting to alleviate the problem, NICRO Women's Support Centre (NWSC), a sub-office of NICRO South Africa, was opened in September 1993 to counteract the lack of support for abused women in Cape Town. Its mission is to empower women, communities and the criminal justice system to work towards equality, human rights and the elimination of domestic violence against women.

It is important to ensure that current services for battered women function effectively. Service agencies in all their guises, from the criminal justice system through to counselling agencies, need to evaluate their services regularly and critically (Bollen et al., 1999). In view of the severe problem posed by women battering, along with the host of negative consequences it bears, effective interventions are required to assist in alleviating this predicament. NWSC attempts to assist in combating this problem, and in order to ensure that the needs of clients are effectively met, it is essential that NWSC continuously assess clients' experiences of the intervention offered.

Previous studies have been conducted on battered women's experiences and perceptions of the services offered by the NWSC in which the sample included women who had attended the centre once only, as well as those who had returned for an extended period of time (Durra, 1998; Ponton, 2002). Both of the aforementioned studies make recommendations that additional qualitative research is needed in order to improve intervention services for battered women.

Whilst part of the service offered is a crisis line and emergency counselling service, staff at the NWSC have expressed concern that more women tend to not come back for the extended service offered by the centre, such as group or individual therapy. This has given rise to concern that the programme may not be meeting needs effectively.

Upon analysis of the 2002 statistics at the NWSC, it appeared that out of approximately 470 persons approaching the centre, only 60 came back for more sessions – be it for group therapy, individual therapy or even phoning in again (for the purposes of this study, a session of counselling on the telephone was also regarded as one intervention). Therefore, the difference in focus of this research from others is that the sample includes battered women who have only come once to the centre in attempt to explore their perceptions of what was helpful about the service as well as any deficits they may have experienced.

By conducting telephonic interviews utilising a semi-structured schedule within a predominantly qualitative framework the researcher will attempt to understand more about battered women's needs, their experience of the specific areas of intervention which are most effective in meeting their needs and to identify possible barriers in the service resulting in them not returning for further assistance. This study is located within an integrative theoretical framework taking into account a variety of factors when attempting to understand the phenomenon of women abuse. The following section will provide an outline of NWSC's staff structure, intervention model and services.

1.2 NICRO WOMEN'S SUPPORT CENTRE

The NWSC is run by a team, which consists of social workers, a legal advisor, a community outreach team, administration staff, and a group of volunteer counsellors. Since the centre is not in a position to afford a sufficient number of professional counsellors, it is dependent on volunteers who offer their services free of charge. NWSC has approximately fifteen volunteers who have been through a counselling training course at NICRO. The present training course consists of 20 three-hour sessions which usually run twice a week. Two social workers are responsible for the training of the volunteer counsellors, their ongoing support and educational needs, and for training community members.

This centre adopts a feminist approach to intervention with abused women, which involves the concept of empowerment counselling (Durra, 1998). Empowerment

counselling attempts to validate and affirm survivors' feelings, perceptions and efforts (Dutton, 1992b; Worell & Remer, 1992 cited in Browne,1998). Browne (1998) explains that empowerment counselling is focused on accepting a woman's feelings, identifying her immediate needs, alerting her to useful options, and reinforcing her will to survive with the principle objective to encourage self determination. The counselling process attempts to enlist a woman in the assessment process and guide her towards options that address her needs.

The centre offers a range of services including the following:

- Education / training of professionals and community workers
- Raising social awareness and advocating for changes in legislation, policy and practice for abused women
- Counselling for battered women – crisis counselling and intervention (stabilising clients' external circumstances – e.g. suicide, homicide, child abuse), a telephone crisis line and individual therapy (offered once a week or fortnightly basis), group therapy (primarily psycho-educational in nature)
- Resources – referral (for e.g. to a shelter, or other appropriate centres such as Rape Crisis) and a resource library with information on women abuse
- Legal counselling.

The following section will provide a definition of the phenomenon under study.

1.3 DEFINITION OF WOMEN ABUSE

NWSC uses the terms 'women abuse' and 'women battering' interchangeably when describing acts of violence against women by men. These acts can include physical, emotional, psychological, sexual and economic abuse, and are recognised as a means by which a man maintains control over a woman, usually over the woman with whom he is intimately involved (de Sousa, 1991).

The United Nations Declaration on the Elimination of all Forms of Violence Against Women describes gender violence as:

“ Any act of gender based violence that results in or is likely to result in physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivations of liberty, whether occurring in public or private life”. (United Nations cited in Bollen et al., 1999,p. 8)

Bollen et al. (1999) explain that the notion that violence is ‘gender-based’ derives from the recognition that women and men do not experience the same forms of violence. In many instances, crimes almost exclusively experienced by women (such as sexual assault) are strongly influenced by prevailing socio-cultural beliefs about women and men.

In support of the view that women abuse is gender-based, Maconachie et al. (1993) offer a definition of battering, which places it in the context of contemporary ideologies of marriage and the family, and propose an analysis of unequal power relationships. They referred to women battering as “any repeated acts of physical or psychological force, or repeated threats thereof, used against a women by her partner” (Angless,1990 cited in Maconachie et al., 1993, p. 4). They state that terms such as ‘spouse abuse’, ‘domestic violence’, ‘family violence’ and ‘marital violence’, serve to obfuscate the extent to which predominantly women are the victims of violence from men.

The definition of gender violence outlined above by the United Nations is a broad one, potentially encompassing a wide range of acts (Bollen et al., 1999). In response, they specified four forms of abuse that are not necessarily mutually exclusive and may occur simultaneously. They include:

- Economic Abuse - including any coercive act or limitation placed on an individual that has adverse economic implications on the woman and/or her dependants. For example, not allowing a woman to work.
- Emotional Abuse - any act associated with psychological, spiritual and other forms of abuse that relate to an individual’s sense of integrity,

freedom of expression and well-being. For example verbal attacks and constant belittling.

- Physical Abuse - is considered to be any deliberate physical assault on an individual's body that harms the recipient in any way. It may or may not include visible signs of injury. For example, kicking, hitting, choking or burning.
- Sexual Abuse - is considered to be any unwanted physical invasion of an individual's body that is sexual in nature. For example, from touching and kissing to rape.

For the purpose of this study, the terms 'women abuse' and 'battered women' will be used as they incorporate the various forms of violent acts that may occur in an intimate relationship, and indicate the fact that the abuse is directed at women, in other words, that it is 'gender-based'. These are also the terms used by NWSC to describe this phenomenon. The next section will locate women abuse within the South African context.

1.4 SOUTH AFRICAN CONTEXT

The basic assumption of the Exchange Theory is that "people hit / abuse other family members because they can" (Gelles, 1983 p.157 cited in Levinson, 1989). Family members will use violence to achieve their means so long as the costs are less than the rewards gained by doing so. In America and other societies, the costs are often low because adequate social controls are often not in place (Levinson, 1989). An example of inept social control is when laws prohibiting women abuse, if they exist, are not enforced (Levinson, 1989). This theory also postulates that it is easy to pinpoint certain social arrangements and norms that encourage the weak control of family violence. These can include norms that emphasise male aggressiveness and sexual inequality.

This theory could be applied to South Africa in that there has been a pervasive societal attitude which views violence against women as a private matter, not a matter of public concern, which has compounded the domestic violence epidemic in this country (Legal Resources Centre, 1998). Until recently, the criminal justice system in

South Africa was dominated by men, and it did not treat violence against women as a serious crime. Adding to this, many police viewed family violence as a private matter, and too often refused to exercise the authority they had to arrest the abusers (Legal Resources Centre, 1998). For example, South African women who have been assaulted by their partners and have turned to the state structures for protection and assistance often have reported unsympathetic or hostile treatment at the hands of police, court clerks and prosecutors (Human Rights Watch/Africa, 1995). A common experience is that police have either failed to respond to calls for help or merely warned abusers or referred them to other agencies. In other cases, police have not understood the complexity of domestic abuse and have been reluctant to offer protection to battered women who repeatedly return to an abusive spouse or withdraw charges that have been laid (Human Rights Watch/Africa, 1995).

South Africa is one of the most unequal societies in the world with its inequalities being based to a unique extent on race. The economic disparities between races introduced by the colonial regime were sharply accentuated by the policies of apartheid (Human Rights Watch/Africa, 1995). The legislated inequalities of the apartheid system applied also to gender, and women were brought under direct state control after 1948 (Walker, 1991 cited in Human Rights Watch/Africa, 1995). Women of all races were legally inferior to men, and African women were especially disadvantaged.

Among the effects of the apartheid system was the impoverishment of large sections of the population; black South Africans and women are disproportionately represented both amongst the rural population and amongst the poor (Human Rights Watch/Africa, 1995). South African women are disadvantaged in the workplace, and are additionally almost exclusively responsible for childcare. Even when both parents are present, men in all South African cultures are unlikely to take more than token responsibility for care of children (Human Rights Watch/ Africa, 1995). This places women in a vulnerable position, as they are not able to easily become financially independent, rendering it more difficult for them to remove themselves from their abusive situations. Studies have indicated that financial dependence on the man is a major obstacle to women leaving an abusive relationship (Maconachie et al., 1993; Human Rights Watch/Africa, 1995).

According to the Culture of Violence Theory outlined by Levinson (1989), family violence will occur more often in violent societies. Apartheid over the years has led to an economic and social crisis in South Africa, resulting in exceptionally high rates of violent crime (Human Rights Watch/Africa, 1995). South Africa has the highest per capita figures for violent death recorded in any country not at war, with rape figures being as high (City Press, 1995; The Star, 1995; A Human Rights Watch Short Report, 1995 cited in Human Rights Watch/Africa, 1995). To add to the problem of high levels of violence, South Africa is also greatly under-policed. Under apartheid, little attention was paid by police to the detection and prevention of crime within black communities (Human Rights Watch/Africa, 1995).

The influence apartheid had on the mindset of individuals, communities and society as a whole is significant in understanding the extent of domestic violence in this country. Apartheid led to the fragmentation of communities, which in turn resulted in the fragmentation of individuals' identity (Foster, 1999). These forms of fragmentation have contributed towards the high rate of violence and abuse in South African communities.

Important steps have been taken in recent years to address women abuse issues, including the provision of the Domestic Violence Act. Whilst this legislation has been regarded as a positive development, concerns have been raised about the feasibility of implementing the act (Artz, Moulton & Parnes, 2001). It has been found that expectations placed on the various sectors to respond to abuse situations are often unrealistic due to the fact that little additional resources have been made available by the government to enable the fulfilment of the obligations stipulated (Artz et al., 2001). A discussion will proceed on the magnitude of women abuse in South Africa and within the wider international context.

1.5 MAGNITUDE OF THE PROBLEM

The United Nations has referred to domestic violence as a global epidemic that knows no geographic, cultural or linguistic boundaries, and indicates how abuse affects all women without regard to their level of income (Bollen et al., 1999). Battered women

are representative of “women in the general population with regard to education, employment, and a range of other standard demographic variables” (Greaves et al., 1988 p.41 cited in Harris & Dewdney, 1994). Similarly within the South African context, various studies have shown that battered women have been found to be indistinguishable from other women in terms of most demographic characteristics including, socio-economic status, occupation, and race (Mashishi, 2000; Rasool, 1999).

Within the South African context, there is a popular prejudice in South African society that family violence is predominant in one racial group or culture; for example, that it is an ‘African’ or ‘Muslim’ problem (Novitz, 1996). This view should be overcome, as evidence suggests that the phenomenon of family violence transcends racial groupings and wage earning brackets (Harvard Law Review editors, 1993 cited in Novitz, 1996). It is more accurate to note that those from impoverished backgrounds are more likely to be trapped within a cycle of family violence, because fewer options are open to them, due to limited financial means (Novitz, 1996).

Various authors globally and in South Africa have found that despite the high numbers reported, underestimation of the rate of women abuse continues to be acknowledged as a significant problem (Harris & Dewdney, 1994; Bollen et al., 1999; Jewkes, Penn-Kekana, Levin, Ratsaka & Schrieber, 2001). The main reasons for underreporting of the prevalence of abuse are that women are ashamed, see it as a private matter, do not wish to speak badly about their husbands, are afraid to admit they are abused, or view their experiences as ‘normal’ (Jewkes et al., 2001). A number of studies indicate that the difficulty in determining the exact extent of the problem of women abuse is increased by the fact that most women abused by their partners do not seek help outside an informal network of family and friends (Human Rights Watch/Africa, 1995; Rasool, 1999). Women are often reluctant to report abuse to the police and governmental, legal, and social services due to their negative experiences with police, the inadequacy of the legal system in dealing with domestic violence, and the fragmentation of social services (Advice Desk for Abused Women, undated cited in Human Rights Watch/Africa, 1995).

The Domestic Violence Act was passed with the aim of providing victims of women abuse with the maximum protection from domestic violence that the law can provide, and with the goal of introducing obligations on relevant organs of the state and role players to eliminate the phenomenon (Artz et al., 2001). However, despite this progress on paper, research has shown that there have been practical challenges limiting the effective implementation of the act (Artz et al., 2001). One limitation includes the lack of resources available to service providers, rendering them helpless to effect positive change. Fragmented service provision inter-departmentally and across the various different sectors, such as the health system and criminal justice system, have also added to the difficulty in ensuring adequate support and assistance for victims of violence (Artz et al., 2001).

The most important, and least acknowledged ingredient of social change to end women abuse, lies in the shifting of attitudes (Artz et al., 2001). In a recent study conducted to monitor the implementation of the Domestic Violence Act, it appeared that many of the service providers in the field of women abuse do not understand the dynamics of the phenomenon and may themselves have many unresolved issues about the problem, some harbouring deeply sexist ideas that it is a man's right to hit his wife from time to time (Artz et al., 2001). Negative attitudes towards complainants are most often related to complainants' withdrawal of charges (Artz et al., 2001). To add to this, the traditional values prevailing in all sections of South African society reinforce the attitude that "wife beating" is a private affair, and to complain to the police is therefore to exhibit disloyalty and invite ostracism (Human Rights Watch/Africa, 1995). Battered women often only want the abuse to end, not the relationship, and are therefore reluctant to have recourse to official channels of redress, which often increase the likelihood of estrangement (Fedler, 1993 cited in Human Rights Watch/Africa, 1995).

Despite the difficulties of underreporting, many studies and statistics reveal that women abuse is widespread, and regular. In a survey by the Human Sciences Research Council, 43% of the women interviewed reported marital rape and assault (Cape Times, 19/8/94 cited in Novitz, 1996). Another study mentioned in Maconachie et al (1993) conducted in Mitchell's Plain, Cape Town by Lawrence (1984) found that women battering was the second highest reported crime. Rape Crisis Cape Town held

a phone-in in 1985 in which it was estimated that one in six women in the Western Cape were battered (Angless, van Zyl & Anderson, 1989 cited in Maconachie et al., 1993). Thirty-eight percent of women responding to a questionnaire issued by the Women's National Coalition reported that they knew of a woman who had been battered (Human Rights Watch/Africa, 1995).

In terms of more recent statistics, the first large-scale community-based prevalence study to be undertaken in South Africa revealed that emotional, financial and physical abuse are common features of relationships, and that many women have been raped. Specifically, the study found that 26.8% of women in the Eastern Cape, 28.4% in Mapumalanga, and 19.1% of women in the Northern Province have been physically abused by a current or ex-partner, and considerable emotional and financial abuse was also reported (Jewkes et al., 2001).

These findings are in keeping with a figure frequently cited in other literature (Budlander Ded., 1995; Human Rights Watch/Africa, 1995; Beijing conference report, 1994 cited in Jewkes et al., 2001) which is that 1 in 4 women are abused in their life-time. It is also very similar to the findings of community-based studies in the USA (30%) and the UK (25%) (Jewkes et al., 2001). An American researcher estimates that one out of every two women will be beaten by the man who supposedly loves her (Walker, 1985 cited in Maconachie et al., 1993). According to MacLeod (1980) cited in Davies (1994), in Canada it has been estimated that one woman in ten is abused by her partner. In Bangladesh the assassination of wives by their husbands accounts for 50% of all murders (Stewart, 1991 cited in Davies, 1994). Therefore, the above statistics and studies on the rate of women battering indicate that it remains a global problem.

According to Human Rights Watch/Africa (1995), the types of abuse South African women face in the home are the same as those faced by women all over the world. For example, women abuse may range from verbal abuse, whereby women are humiliated and degraded verbally by their partner, to physical violence, which may include hitting, choking or stabbing. In a 1993 study carried out in Alexandra township, it was found that physical injuries had been inflicted on women by a variety of means, from fists to weapons such as knives, bricks, the traditional knobkierrie, bottles, hammers,

axes and screwdrivers (Motsei, 1993 cited in Human Rights Watch, 1995). In a more recent study, similar forms of abuse were found whereby women had endured different kinds of abuse such as being punched with fists on the face and body, hit with objects, and threatened with dangerous weapons (Makofane & du Preez, 2000 cited in Makofane, 2002). In addition to physical injuries sustained from the abuse, abused women often develop somatic symptoms such as headaches, backaches, fatigue, abdominal and pelvic pain, recurrent vaginal infections, sleep and eating disorders, sexual dysfunctions and other signs of moderate or severe depression (Human Rights Watch/Africa, 1995).

In the worst cases, violence against women by their partners results in death. A study of 115 inquests into the deaths of women in the Johannesburg magisterial district during 1994 found that 25% related to homicide, and of these, a total of 41% were either killed by their partners or their partners were the main suspects (People Opposing Women Abuse, 1995 cited in Human Rights Watch/Africa, 1995).

The above studies indicate the high rate and severe consequences of women battering and point to the need for effective and appropriate forms of intervention to alleviate this worldwide phenomenon. The current research is conducted within this context as it aims to ensure that services available to women suffering from abuse are developed and delivered in the most suitable and appropriate manner. The aim and objectives of this research will be outlined in the following section.

1.6 AIMS AND OBJECTIVES

The broad aim of this research is to explore abused women's perceptions and experiences of the service provided by the NWSC, with a particular focus on those women who have only been to the centre once.

The objectives are:

- To explore the needs and expectations of respondents when they approached NWSC.
- To determine what respondents received from the service at NWSC

- To identify respondents' experiences of the service, i.e. what aspects of the service they found to be helpful and/or unhelpful, and which aspects they felt managed to meet their needs, and which did not.
- To explore respondents' reasons for not returning to the centre.
- To determine respondents' experiences of what has assisted them to cope generally (besides the help from NWSC) in order to further identify battered women's needs.

The methodology used for this research will be described and outlined below.

1.7 METHODOLOGY

1.7.1 RESEARCH DESIGN

This study will be utilising predominantly a qualitative research design whilst incorporating some quantitative dimensions in its methodology.

There are significant differences between qualitative and quantitative research (Schurink, 1998). Whereas in quantitative research, the researcher believes in an objective reality that can be explained, controlled and predicted by means of natural laws (cause-effect), qualitative researchers aim to understand reality by discovering the meanings that people in a specific context attach to it (Schurink, 1998). This methodology enables the researcher to examine issues in depth and in detail. Where the quantitative researcher regards him/herself as detached from the object being studied (he/she does not influence and is not influenced by the study object), the qualitative researcher recognises his/her subjectivity, and interacts with the subject (Schurink, 1998).

The methodology of the quantitative paradigm, as in the physical sciences, states a question or hypothesis, which is then subjected to empirical testing to verify it. In qualitative research, the methodology is dialectical and interpretative. Data are presented in the form of words, quotes from documents and transcripts, and are analysed by extracting themes (Schurink, 1998).

A telephonic questionnaire is generally regarded as a quantitative method of data collection (Delport, 2002). However, due to the use of open-ended questions in the interview schedule, this study is regarded as partly qualitative in design. There are a few closed-ended questions providing a quantitative dimension to the study.

Other qualitative aspects of this study are evident in the researcher's attempt to elicit in detail participant's subjective accounts of the situation, allowing the researcher to explore the meanings and experiences attributed by the participants to the subject under investigation. Methods utilised to gain participant's perceptions and experiences of the subject requires the researcher to interact directly with the participants in order to gather information, and data is analysed and interpreted by using qualitative methods (content analysis).

As described above, the aim of a qualitative method of inquiry is to understand the meaning that people attach to everyday life (Schurink, 1998). This method will therefore be appropriate for the purposes of this study whose research aims and objectives are to gain an understanding from participants of their perceptions of the services offered by the NWSC.

The goals of research can be quite varied and studies usually have one dominant goal (Fouche, 2002). Exploratory research is conducted to gain insight into a situation, phenomenon, individual or community (Bless & Higson-Smith, 1995 cited in Fouche, 2002). The need for such a study could arise out of a lack of information in a new area of interest or out of a need to explore a situation so as to formulate a problem or to develop a hypothesis (Fouche, 2002). Researchers conducting exploratory studies will frequently use qualitative methods.

The goal of this study is to develop an understanding of a specific phenomenon (clients of NWSC'S perceptions of the service) and the research is not conducted in a rigorous manner. It is therefore exploratory in nature, allowing for ideas to become clearer and more developed before further research may be attempted at a later stage, using a more systematic study. The next section will include a description of the method used to capture the sample for the research.

1.7.2 RESEARCH METHODOLOGY

A. SAMPLING

The Population

“A population is the total set from which the individuals or units of the study are chosen” (Seaber, 1988 p. 240 cited in Strydom & Venter, 2002). The population in this study included all clients having attended a once-off session at the NWSC in Long Street, Cape Town in the year 2002, which included approximately four hundred women.

The Sample

“A sample is defined as the element of the population considered for actual inclusion in the study” (Arkava & Lane, 1983 p. 27 cited in Strydom & Venter, 2002). According to Seaberg, 1988 p. 254; Grinnell & Williams, 1990 p. 127 cited in Strydom & Venter (1998), “in most cases a ten percent sample should be sufficient for controlling for sample errors”. Forty women were therefore selected from the population under study representing ten percent of the population.

Sampling Procedure

According to Seaberg, 1988 p. 244 cited in Strydom & Venter (2002), “a probability sample is one in which each person in the population has the same known probability of being selected, and the selection of persons from the population is based on some form of random procedure”. Systematic sampling is one form of probability sampling and has been used to attain the sample for this study. Using this method, only the first case is selected randomly and all subsequent cases are selected according to a particular interval, depending on the percentage sample needed (Strydom & Venter, 2002).

In this study, the population size of four hundred women was divided by the sample size of forty creating a selection interval of ten. The first woman participant in the study was selected from somewhere in the first interval of ten, and that number was randomly chosen. Numbers from one to ten were thrown into a hat and the number three was selected. The selection interval was then applied by adding ten to three so that the thirteenth woman was chosen next. This method was repeated until the sample size of forty was attained. Not all respondents from this sample were contactable and the researcher therefore had to repeat the procedure, by starting from

the beginning again to obtain more names until the target sample number was achieved.

The main advantage of systematic sampling is the ease in conducting the selection process, however it entails the danger of bias in that the selection interval could accidentally coincide with one or another characteristics of the study group (Strydom & Venter, 2002). The researcher attempted to avoid such bias by examining the sample before conducting interviews to ensure that the sample's characteristics were reflective of the overall population, such as language, age and race. An outline will be given next of the data collection method used in this study.

B. DATA COLLECTION METHOD

The data collection method used in this study was a semi-structured interview schedule, using open-ended questions and some closed-ended questions. The manner in which it was administered was via telephonic interviews and questions were structured in such a way so as to obtain information relating to the aim and objectives of the study.

The mainly open-ended nature of the schedule reflects the integrative theoretical framework within which this study is based. This theoretical approach takes a range of different factors into account when attempting to understand women abuse and an open-ended schedule allows for the consideration of various dynamics and causes.

The different types of interviews with individuals can be placed on a continuum from totally unstructured to relatively structured (De Vos, 1998). As described above, the type of interview utilised in this study was a semi-structured interview schedule. Researchers use semi-structured interviews to gain a detailed picture of a participant's beliefs about, perceptions or accounts of, a particular topic. With semi-structured interviews the researcher will have a set of predetermined questions on an interview schedule, but the interview will be guided by the schedule rather than dictated by it. This method gives the researcher and participant more flexibility (Greeff, 2002 cited in De Vos, 2002).

The use of a semi-structured interview in this research allowed for a systematic collection of data and simultaneously allowed respondents maximum opportunity to share their perceptions and experiences.

Basic principles to be adhered to in the interview process are described by Schurink, 1998 cited in De Vos (1998), and these are similar to the general principles employed in social work interviews. Previous experience of seven years in the social work field equipped the researcher with the necessary skills for effective management of the interview process. These principles include being respectful and courteous, accepting and understanding, ensuring confidentiality, maintaining integrity, and allowing interviewee individualisation.

Skills required by the interviewer may include attending to the interviewee, observing their non-verbal communication, communicating appropriately and effectively, and to remain calm and neutral in the face of conflict (Schurink, 1998). The researcher attempted to adhere to the above skills and principles as well as making a conscious effort to not impose and project her own feelings, thoughts and ideas onto participants with the aim of allowing their own experiences to unfold.

Women seldom wish to be interviewed by men regarding issues of such an intimate nature – therefore female interviewers are ideal (Bollen et al., 1998). It was therefore likely to be advantageous that the researcher was a woman.

There are advantages and disadvantages of telephonic interviews (Neuman, 1997). Telephone interviews are a popular survey method because a large percent of the population can be reached by telephone and the method is efficient. Due to the fact that the sample in this study included clients who had been to the NWSC for assistance only once, consideration was given to the fact that asking them to return for an interview for research purposes would be difficult, as many may have not returned for practical and logistical reasons. Telephonic interviews were therefore purposefully selected in order to obtain a higher degree of participation and to reach a larger number of participants.

Disadvantages of this method can include limited interview length, the fact that respondents without telephones are impossible to reach and that the call may come at an inconvenient time (Neuman, 1997). The researcher was confronted with some of these difficulties. For example, some participants only had work telephone lines and had constraints in terms of finding enough time to conduct the interview effectively. An added constraint is that no non-verbal communication is possible, limiting effective communication (Delport, 2002).

Process of data collection

Interviews were conducted from June 2003 to October 2003. The research topic had been endorsed by the NWSC staff who then provided access to case files to gather the sample. The researcher contacted respondents telephonically and explained the aims and objectives of the research to them, the confidential nature of their participation, and obtained their agreement to partake in the study. Interviews lasted between ten to thirty minutes, depending on interviewee's time constraints, and differences in individual personality characteristics. Respondents were thanked for their participation and valuable contributions, and the researcher reminded them of the service offered by NWSC, should the need arise in the future. Immediately after each interview, the themes and sub-themes emerging from that discussion were recorded in detail to ensure for accurate capturing of the data. A description of the procedure used to analyse the data will follow.

C. DATA ANALYSIS

The next phase of the research process was to analyse the results emerging from the data collection process, and the method used to do this was content analysis. The basic task of content analysis is to reduce words to themes or concepts that have meaning to the phenomenon under study (York, 1998).

In this case, the researcher attempted to extract themes out of the data that related to categories based on the aim and objectives of the study. Words and sentences in the transcripts were grouped together and then placed into these categories. For example, if several respondents mentioned that they had found the emotionally supportive aspects of the service helpful, this would form a theme under the category 'helpful aspects of the service provided by NWSC'.

Counting how many times a certain word or concept was expressed by the sources of information being examined can also form a part of content analysis (York, 1998). In this study, the researcher used percentages to show the frequency of responses given by the respondents. Quotations from respondents' reports are included in the study to highlight the themes that emerged during the process of analysis.

The process of content analysis requires the researcher to follow his/her own rules and intuition when extracting themes. The allowance given to researchers' to use his/her own intuition is deemed appropriate in the context of this study's qualitative approach, which embraces the notion of subjectivity (Krippendorf, 1980). Taking into account the fact that the identity of the researcher would inevitably influence the respondents' and visa versa, the researcher attempted to be reflexive throughout the process of content analysis (this will be discussed in more detail below under the heading 'self-reflexive issues'). Following this will include an outline of the limitations of this research

D. LIMITATIONS OF THE RESEARCH

It is essential that the limitations of the methodology used in this study be considered when reviewing the results. Despite the sample size being determined appropriate by Grinnell & Williams, 1990 cited in Strydom & Venter (2002) to provide for generalising of results, a large portion of the population's experiences and perceptions were not taken into account.

Telephonic interviews have various disadvantages as discussed above which may impact negatively on respondents' ability to freely express the full extent of their feelings and perceptions. Respondents may have felt uncomfortable exposing their personal thoughts and feelings to a stranger on the telephone and regarded the process as impersonal, resulting in an inaccurate reflection of their true experiences. To add to this, the absence of visual contact with respondents, hence no non-verbal communication, may also have limited effective communication (Delpont, 2002).

Whilst the interview method has various advantages, such as being able to provide a more complete and in-depth picture of the issue being studied as stated above, various

limitations with this method exist. There is often a difference in the way questions are asked of respondents which results in a lack of standardisation in the interviewing, making it difficult to replicate such a study. In this research, it was found that due to individual differences between participants, certain questions were phrased in a unique way in order to ensure that each respondent understood the information required, and probing was used uniquely so as to elicit the relevant data.

Finally, respondents were asked to recall their experiences at the centre that took place a year to eighteen months previously - and for all respondents' it was a once off contact, and for some this was by telephone. Therefore, a limitation of this research could be that respondents' memories were clouded regarding what services they had received from the centre. Some respondents' had been to various different organisations for help over the same period of time and their experiences at these different places may have blurred into one, distorting their recollections of their experience at NWSC. A consideration of the ethical issues pertaining to this study will follow.

1.8 ETHICAL CONSIDERATIONS

Various ethical considerations were taken into account when undertaking this research. All respondents were fully briefed with regards to the nature and purpose of the research and participation was voluntary. Anonymity was assured in order to protect respondents' identities. Due to the sensitive nature of the research topic, the possibility of feelings and issues being evoked was strong, and therefore referrals back to NWSC or other organisations were made to respondents when the need arose to help them manage and contain these feelings. The researcher was sensitive to the needs of respondents during the interview process and offered containment and support as necessary. In terms of ensuring accountability, a presentation of the findings will be made verbally and discussed with NWSC staff, and they will be also be given the final report in writing. The next section will focus on self-reflexive issues and how these impact on this research.

1.9 SELF-REFLEXIVE ISSUES

Due to the researcher's subjective role as a qualitative researcher, self-reflexivity was very important in order to consider how the researcher's own feelings and perceptions impacted on the research process.

There is an inherent power imbalance in a relationship in which one party is seeking help and the other is providing help. Often, there is an unarticulated hierarchical structure of power in this relationship in which the therapist knows best and understands more than their client (Whalen, 1996). The researcher remained aware of these power dynamics in the relationship between herself, as the researcher and social worker, and the respondents, who were clients of the organisation, and that respondents may have been reluctant to truly share their feelings in fear of saying something that may displease the researcher or be perceived to be incorrect.

A variable that may have influenced the interview process could have been race. It is important to note the history of apartheid in South Africa in which power and control was awarded to specific race groups over others. Political terminology using apartheid categories have been used to describe race groups and this is not intended to be offensive as it is used merely to describe racial differences. The majority of respondents in this study are black or coloured and the researcher is white. The difference in race may have limited respondent's ability to report their feelings freely and accurately, and may have added to the power dynamics described in the above paragraph.

Language is another variable to be considered in terms of its effect on the interview process. The researcher is English-speaking with limited ability to converse in either Afrikaans or Xhosa. Some of the respondents' first language was either Afrikaans or Xhosa and this may have impacted on the degree to which they felt at ease to express themselves.

Persons who work with victims of trauma may experience profound psychological effects that can be disruptive and painful for the helper (McCann & Pearlman, 1990). Scurfield, 1985 cited in McCann & Pearlman (1990) explains the importance of the

therapist confronting his/her own feelings of aggression, grief, horror and loss of control when working with victims of trauma. Listening to respondents' accounts of the trauma they had encountered caused the researcher to confront her own feelings of vulnerability and rage, which needed to be understood and dealt with appropriately in order for them to not impact negatively on the research process.

To add to this, Herman, 1981 cited in McCann & Pearlman (1990) point out the danger of female therapists over-identifying with the victim and directing rage at the perpetrator. The researcher found herself becoming enraged when hearing that some women were still with their partners despite continued violence taking place, and had to monitor her responses carefully to ensure that these were not being projected onto these women.

The following chapter will review the relevant literature in order to provide a conceptual framework for this study.

University of Cape Town

CHAPTER TWO LITERATURE REVIEW

The following review includes an exploration of the literature salient to this research topic and will establish a conceptual framework within which to locate this study. There is growing recognition in the ranks of the South African government that violence against women is a serious problem facing us all, and until now information on violence against women in South Africa have been scanty, although it is increasing (Jewkes et al., 2001). A shortcoming of this research is therefore that there has been limited South African literature to draw on, which is why the review relies largely on international material. Where possible, attempts have been made by the researcher to include some of the recent literature focussing on women abuse within the South African context.

Theoretical perspectives attempting to explain the aetiology and maintenance of women abuse along with their respective models of intervention will be presented in order to provide a background for understanding this phenomenon, and for determining how the needs of battered women may be addressed.

An explanation will be provided for selecting an integrated theoretical framework to locate this research. This theoretical framework takes into account various factors such as psychological, sociological and economic factors when attempting to understand and treat the phenomenon of women abuse. A particular focus will also be made on the feminist model of intervention, as it is within this framework that NWSC develops its program.

In order to understand battered women's experiences of the help seeking process, a discussion of the processes, information needs and barriers battered women encounter when approaching the helping profession will be provided. This will help to gain insight into possible factors which may prohibit these women from seeking and maintaining assistance.

2.1 THEORETICAL PERSPECTIVES FOR UNDERSTANDING WOMEN ABUSE AND HOW THEY INFORM PRACTICE

In order to understand battered women's needs and to subsequently meet these effectively, a thorough understanding is required of the dynamics and factors causing women to enter into and remain in abusive and violent relationships. Many theoretical perspectives along with their proposed models of intervention exist and in order to gain a wider and more general understanding of women abuse and what is needed to address this phenomenon, several of these theories and their intervention strategies will be explored.

Westhues (1989) has grouped theories on women abuse into three main categories, namely psychological, sociological and integrated theories, and this categorisation system will be used to structure this discussion.

As an overview, psychological theories attribute battering to individual pathology and various intra-individual characteristics. Sociological theories view the battering as a result of the external environment and/or situational factors. The feminist perspective is included in this category (Westhues, 1989). The systemic approach regards pathological structural patterns in the family system as the root cause of the battering (Pressman & Rothery, 1989).

Each of these theoretical frameworks contributes to an understanding of women abuse, indicating that this phenomenon is a multifaceted problem. Therefore, it is proposed that a perspective which takes into account the complex interplay between all these factors (intra-individual, sociological, economic and political/cultural) is most appropriate for understanding women abuse and this has led to the selection of the integrated theoretical perspective to frame this research. This perspective will be presented once all the other approaches have been outlined. The next section will focus on psychological theories on women abuse.

2.1.1 PSYCHOLOGICAL THEORY

A. PSYCHOPATHOLOGICAL THEORY

This theory postulates that the individual's personality, which is developed early in life, predisposes him or her to be violent or to submit to violence (Harway, 1993 cited in Hansen & Harway, 1993). Others writing from this perspective describe battered women as having a basic need to provoke violence, as displaying passive hostility that contributes to the violence, and as having masochistic motivation that promotes continued violence (Rosenwald, Snell & Robey, 1964; Whitehurst, 1974; Blum, 1982 cited in Hansen & Harway, 1993). This approach underlies battered women as emotionally deviant in so far as they seek out violent partners in order to fulfil their own distorted psychological needs (Kirkwood, 1993).

Psychopathological theories also focus on intra-individual factors including personality traits/defects, internal defence mechanisms, drug or alcohol misuse and the presence of mental illness (Bograd in Yllo & Bograd, 1988; Gelles & Cornell, 1990). However, there appears to be no empirical support for these findings. For example, studies have not found support that certain personality traits such as masochism or passivity occur more often in battered women than in any other group (Hotaling & Sugarman, 1986 cited in Harway, 1993). In addition, mental illness is no more common amongst wife abusers than it is in the general population (Pressman, 1984 cited in Westhues, 1989). Gelles & Cornell, 1990 p.18 cited in Mashishi (2000) argue that "in societies which hold the belief that alcohol releases violent tendencies, the normal rules of social behaviour are loosened when people drink or are believed to be drunk". Gelles & Cornell, 1990 p. 18 cited in Mashishi (2000) go on to explain that "abusive spouses thus learn that to avoid being held responsible for their violence, they should drink either prior to hitting or at least say they were drunk".

Feminist and sociological theorists have criticised the psychopathological approach as it results in women being frequently blamed for the battering, labels common presenting symptoms in women as pathological rather than appropriate responses to demeaning traumatic life events, and dismisses and distorts the reality of oppressive experiences for women (Maconachie et al., 1993; Chesler, 1973; Greenspan, 1983;

Nairne & Smith, 1985 cited in Pressman, 1989). The intervention model based on the psychological approach will be discussed next.

B. INTERVENTION USING A PSYCHOLOGICAL APPROACH

The underlying assumption of the psychological framework is that women abuse is a private matter, not a public one (Westhues, 1989). Services under this perspective therefore would focus mainly on assisting the individual, rather than intervening systemically or attempting social change.

Individual counselling is characteristically based on a psychodynamic perspective, that according to Pressman, 1989 cited in Pressman, Cameron & Rothery (1989) views behaviour and personality development as a function of childrearing experiences and parent-child interactions. Using this approach, the goal would be to develop insight and awareness into how these past experiences have impacted on current relationships.

To indicate the lack of focus on social change and/ or systemic intervention within this perspective, couple counselling, if it were done, would be based on the premise that the family is a closed system; the involvement of advocacy services would be unlikely, with police only intervening in the most severe cases of assault; and there would be a general lack of social support services available to support women in these situations, for example, child care facilities (Westhues, 1989).

As indicated by various authors (Maconachie, et al., 1993; Chesler, 1973; Greenspan, 1983; Nairne & Smith, 1985 cited in Pressman, 1989) women abuse cannot only be described in terms of individual personality characteristics, and that a range of other factors, including the broader socio-political context need to be considered. The following section will provide a discussion on the sociological theories on women abuse.

2.1.2 SOCIOLOGICAL THEORIES

Various different perspectives are included under sociological theories. These include the social learning theory, socio-cultural, social psychological and feminist

perspectives. The feminist approach along with its particular method of intervention will be discussed separately and in more detail due to its relevance to this research.

A. SOCIAL LEARNING THEORY

The Social Learning Theory rejects the notion that aggression is an inner drive, and rather argues that aggression is both learnt and takes place in a social context (Levinson, 1983).

A social learning perspective pays attention to the intergenerational transmission of family violence theory. Individuals who observed or perhaps experienced family violence in their childhood homes are more likely to be involved in violent marital relations later in life (Straus et al., 1980; Pagelow, 1981; Ulbrich & Huber, 1981; Kalmuss, 1984 cited in Levinson, 1983). Some research has shown that the effects of observing violence may be different to actually experiencing it (Levinson, 1983). Therefore, in accord with the social learning theory, the intergenerational pattern can be explained in terms of individuals modelling their behaviour on that of significant others.

The theory of learned helplessness has been used to explain battered women's seeming passivity in the face of violence (Harway, 1993). This theory is taken from Seligman, 1975 cited in Harway (1993) whose work with dogs showed that they could be trained to expect that any behaviour they may use to escape an aversive stimulus would not be predictable in controlling the consequences they experienced. Similarly, battered women may learn to believe that nothing she can do will permit her to escape or protect her from her partner's violence, and she learns to believe that her actions do not affect outcomes. Learned helplessness is one reason the battered woman does not perceive that she is able to escape the violent relationship (Walker, 1984a cited in Harway, 1993). The following section will provide a description of the socio-cultural perspective on women abuse.

B. SOCIO-CULTURAL PERSPECTIVE

The socio-cultural theory maintains that woman battering occurs as a result of cultural norms that permit violent behaviour (Harway, 1993). Due to cultural differences amongst groups, violence may be especially approved of among certain social classes

and ethnic groups. In a study conducted by Gentemann, 1984 cited in Harway (1993), it was found that 19% of women surveyed agreed that wife assault was sometimes justified – it was older, less educated and lower income women who were particularly likely to agree with this statement.

According to the family organisation theory described by Straus, 1980 cited in Harway (1993), the organisation of the traditional family maintains power inequalities that may further increase the likelihood of violence. Traditional sex roles (as taught and modelled in many typical families) that accept boys as aggressive and girls as passive and submissive, set the stage for these same relationships in adulthood (Harway, 1993).

The socio-cultural perspective, like the social learning theory, also argues that violent behaviour is learnt, but emphasises the legitimisation of violence by society rather than in the family alone (Straus, 1977, 1977-1978; Sutton, 1978; Tomes, 1978; Breines & Gordon, 1983 cited in Westhues, 1989). For example, violence is condoned in American culture in such pervasive ways as the death penalty, widespread ownership of handguns and through the media (Straus, 1977 cited in Westhues, 1989). These cultural practices reflect a value system that leads to 20% of Americans agreeing that it is acceptable to slap their spouse on appropriate occasions and 90% of parents using spanking as a form of discipline with children (Stark & McEvoy, 1970 cited in Westhues, 1989).

The history of African society is one in which women have been subjected to unspeakable cruelties and until recently women were considered first the properties of their fathers and after marriage, the objects of their husbands (Mashishi, 2000). To add to this, South Africans live in a particularly violent society, where most people experience some form of violence (Mashishi, 2000). Members of the society “espouse, forment, incite, and even remunerate violent behaviour so much that violence is accepted as an ordinary, and legitimate solution to conflict” (McKendrick & Hoffman, 1990 p.38 cited in Mashishi, 2000). Women are often the principal and persistent objects of domestic violence between adults due to the patriarchal structuring of gender relationships in a number of societies within Africa (Mashishi,

2000). This is yet another indication of how cultural norms may allow for the use of violence in a society.

According to Westhues (1989) the underlying assumption of socio-cultural theories is that changes can be made in our family and social structures that will reduce, or perhaps eliminate, the incidence of women abuse. The social psychological perspective on women abuse will be presented next.

C. SOCIAL PSYCHOLOGICAL PERSPECTIVE

This view attempts to explain the strong emotional bond that forms between the battered women and the batterer, a condition which Painter & Dutton, 1985 cited in Harway (1993) refer to as traumatic bonding. These authors note the similarity to other conditions in which strong emotional ties are developed under conditions of maltreatment, for example when hostages develop positive feelings for their captors.

The two features present in such a relationship are a power imbalance and the intermittent nature of abuse. As time goes on, power imbalances tend to increase leading to psychopathology in the individuals involved (Painter & Dutton, 1985 cited in Harway, 1993). The authors describe the person in the lower position as becoming more negative in self-appraisal, less capable of existing independently, and more needy of the higher-position person. These authors describe the higher-position person as developing a need to maintain the connection with the lower-position person, thus embroiling the two in a mutually interlocking relationship.

Many studies have demonstrated that intermittent patterns of maltreatment create strong emotional bonds in both human and other animals (Scott, 1963; Harlow & Harlow, 1971 cited in Harway, 1993). This periodicity of abuse has been described by Walker, 1984 cited in Harway (1993) in her 'cycle of abuse' theory whereby the loving and kind behaviour of the batterer after previous phases of victimisation provides a reinforcement for the cycle, allowing the woman to convince herself that her batterer is capable of change, only for the cycle to be continued, with the violence escalating in frequency. The repetition of the build-up, trauma during the battering, and the reconciliation that follows serves to bond the woman to her batterer traumatically and result in her remaining in the relationship (Painter & Dutton, 1985

cited in Harway, 1993). The following discussion will focus on intervention services using a sociological approach.

D. INTERVENTION USING A SOCIOLOGICAL APPROACH

The service delivery system within a sociological perspective, including the feminist perspective, would provide a comprehensive approach focusing on tertiary, secondary and primary services (Westhues, 1989).

On a tertiary level, long-term counselling would be available for women, children and men involved in battering relationships with the aim being to create an awareness of gender role socialisation and how it has led to the inequality of women (Westhues, 1989). For men and women, this consciousness raising would take place in separate gender groups and may be supplemented for women with assertiveness training, conflict resolution and mutual support groups. Counsellors involved in these programs would be committed to advocating for their clients (Westhues, 1989). Feminist counselling models included in this service delivery which focus on addressing oppressive social structures whilst simultaneously treating women's psychological trauma, will be described in more detail under the feminist perspective.

A great deal of emphasis is placed on secondary preventative strategies within this perspective. Members of the helping profession involved in assisting battered women, such as the police, lawyers, medical officers and judges are educated and trained on issues pertaining to women abuse in order to ensure effective and sensitive handling of the situation when it arises. Crisis shelters for battered women exist in most communities providing a range of services such as support, child-care, crisis counselling and ongoing support, including access to subsidised housing, day care and skills training (Westhues, 1989).

On a primary level, education would be provided to help children learn more egalitarian sex roles, and the public would be made aware of services available for battered women. Collective action would be taken to effect changes in laws, policies and procedures that may have a negative impact on women. The service model under this perspective gives a clear message to society that women abuse should and will

not be tolerated (Westhues, 1989). The feminist perspective will be described in the following section.

E. FEMINIST PERSPECTIVE

Many approaches, such as the psychological approaches, excuse the batterer for his violent behaviour and fail to explain why it is predominantly women who are battered and men who are the perpetrators (Gelles, 1976; Steinmetz, 1977 cited in Maconachie et al., 1993). Views that do not question the assumptions underlying the inherent power imbalances between men and women are unlikely to propose far-reaching or effective mechanisms for stopping battering (Hanmer & Saunders, 1984; Angless, 1990 cited in Maconachie et al., 1993). The overriding assumption in this perspective is that women battering is a reflection of a sexist culture and the sexist institutions that control and oppress women (Dobash & Dobash, 1979 cited in O'Leary & Murphy, 1999).

Feminist perspectives state that the traditional view embedded in patriarchal structures of society of husbands needing to hold the balance of power in families is one of the contributing factors to wife abuse. Assault by husbands has in fact been found to be more prevalent where the husband has power over his wife (Palmer & Brown, 1989). McKendrick & Hoffman, 1990 p. 255 cited in Mashishi (2000) state that "stereotypes of women as vulnerable and powerless and men as enlightened, strong-minded and independent legitimate wife-battering and set the stage for violence in marriages".

Feminist analyses also note that certain societies accept ~~violence as a means~~ of resolving conflict (Palmer & Brown, 1989). For example, in the United States a national survey found that 31.3 percent of the men and 24.6 percent of the women viewed physical means of expression as normal aspects of the marriage relationship (Straus et al., 1980 cited in Palmer & Brown, 1989). Another example includes that of South Africa, where the unrelenting nature of abuse suffered by women can undoubtedly be explained by the fact that in particular situations the use of certain forms of violence by men to control and punish women is perceived as being socially acceptable to both men and women of all ages ('Soul City, unpublished; Wood & Jewkes, 1998 cited in Jewkes et al., 2001). The feminist perspective takes the view that family violence is never justified.

Feminist theories are grounded in battered women's own experiences and perspectives, and were the first to challenge patriarchal social relations in which men have power over women (Maconachie et al., 1993). The next discussion will focus on intervention services using a feminist perspective.

F. INTERVENTIONS USING A FEMINIST PERSPECTIVE

Various feminist counselling theories and models have been developed specifically for helping battered women (Whalen, 1996). Differentiations have been made between professional feminist counsellors (those who include in their addressing of the problem not only the social context but also the psychological state of the battered women), and grassroots feminist counsellors (who focus mainly on the social context) (Whalen, 1996). NWSC bases its intervention programme on the feminist perspective, incorporating aspects of both the professional and grassroots feminist approach.

An exploration of these will follow once the basic principles and notions of feminist counselling are described as these relate to a greater or lesser degree to all forms of feminist counselling processes.

Five principles have been outlined by Whalen (1996), and the first applies to the concept of healing. Healing is frequently cited as a goal or outcome of feminist therapy. There are differences of opinion amongst feminist therapists (professional and grassroots) in terms of whether healing should be the central goal or a possible concomitant of feminist therapy. Grassroots therapists believe that if oppressive social and political conditions were changed, women would be healed, rather than those who describe healing as a process that occurs from within the organism, even when the cause of the damage may be external (Brown, 1994 cited in Whalen, 1996).

The second principle is the notion of empowerment, which is defined as the process of helping a powerless individual or group to gain the necessary skills, knowledge or influence to acquire control over their own lives, and begin to influence the lives of others (Smith & Siegel, 1985 cited in Whalen, 1996).

The role of social change is the third principle discussed by Whalen (1996). Grassroots feminist theorists, for example Brown, 1994 cited in Whalen (1996), believe that it is important to involve the client in social change activities as part of the counselling effort, whilst others rely on the idea that consciousness-raising in itself is a form of social activism which connects personal experience with the awareness of women's common oppression in patriarchal society. The original emphasis on social change in and through counselling becomes transformed into an emphasis on the need for counsellors to be involved in social change as part of their professional commitment (Whalen, 1996).

Power in therapy relationships is another basic principle outlined by Whalen (1996). Due to power discrepancies never being able to be eliminated completely in the therapy relationship, the goal of feminist therapists should then be to articulate power, demystify the helping process, and encourage clients to define their needs, make decisions and act (Whalen, 1996). Theorists differ on the extent and nature of power in the counselling relationship.

The fifth principle includes that of the role of the counsellor. Potential counsellor roles include the roles of consultant, educator (for e.g. cognitive restructuring and psycho-education around beliefs of women), container of client pain, supporter of client decisions, enabler of client change, guide, friend, model and companion as well as that of a social activist (Whalen, 1996). Services provided by professional feminist counsellors will be outlined next.

Professional Feminist Counsellors

Whalen (1996) outlines Lenore Walker's work and analysis of battered women, which is grounded in feminist theory. Within the profession of psychology Walker has become the most widely recognised expert in the field of women abuse. Walker has drawn upon the model of learned helplessness (Seligman, 1975 cited in Whalen, 1996), to help explain why battered women stay in abusive relationships. This model was described above under the social learning theory.

For a battered woman to change these responses, she must first be persuaded to leave the battering relationship. Shelters and safe houses are helpful here. Secondly, the

woman needs to learn to reverse her negative cognitive set about the effectiveness of her actions and begin taking control over her life. Therapy to promote self-esteem and relieve depression can help “erase...victim potential” (Walker, 1979 p. 54 cited in Whalen, 1996). Walker’s theories have been criticised as being victim-blaming (Gondolf, 1988 cited in Whalen, 1996). For example, by her using phrases such as ‘victim potential’.

Emerging from Walker’s work is the cycle theory of violence, which identifies some of the behavioural reinforcements the battered woman receives that perpetuate her remaining in the relationship. NWSC draws upon this theory when attempting to intervene with and assist battered women. Rooted in a tension-reduction hypothesis, the theory describes three phases of the battering relationship.

In the tension-building phase, the woman may try to avoid abuse through efforts to please. In the explosion phase the battering incident occurs, and it is the batterer who has control over when he will stop. The third phase is the contrition phase, in which the batterer becomes loving and apologetic. It is this phase that provides the affectional rewards women seek from marriage. The woman hopes that this phase will be maintained and the others will not recur. This is when the woman may become an accomplice to her own battering by continually seeking the third phase. The contrition phase usually becomes shorter and shorter and may eventually change to a phase of no tension, without overt expressions of love or contrition (Walker, 1979 cited in Whalen, 1996).

Techniques to assist in breaking this cycle, as described by Walker, 1984 cited in Whalen (1996), include initially making the woman aware of this pattern. The therapist should then discuss with the woman the details of her abuse so that both the therapist and the woman come to realistically assess the danger. Guided imagery is recommended to help the woman imagine more assertive behaviours on her part and phantasize different outcomes to the tension-building stage. This simultaneously assists in building the woman’s self esteem and in cognitive restructuring, which can broaden the choices available to her.

Grassroots feminists who react strongly to the notion that a battered woman can exercise any control over the battering, or that she would ever be an accomplice have challenged this analysis (Whalen, 1996). Maconachie et al. (1993) support grassroots notions which state that whilst this cycle of violence model may be useful to help some battered women recognise the tension building phase, many have no way of predicting when the violence will occur.

Walker, 1979, 1994 cited in Whalen (1996) offers the conceptualisation of a battered women's syndrome that may be thought of as a subset of post-traumatic stress disorder (PTSD), which has been adopted by many other feminist theorists. The symptoms of nightmares, persistent fear that the violence will recur, anxiety reactions, phobias, and emotional lability that battered women may experience may be quite similar to the experience of post war veterans diagnosed with PTSD. The reliance on PTSD as an explanatory framework for understanding and treating battered women is increasing among feminist professional therapists (Whalen, 1996).

According to various therapists working in this framework, treatment would take the form of assisting the battered woman in healing from the psychological trauma, empowering her to choose, and ensuring her safety (Dutton, 1992; Herman, 1992 cited in Whalen, 1996). Whalen (1996) warns of the dangers inherent in diagnostic labelling, for example, the person may be seen as the diagnosis, however states that the diagnosis of PTSD at least recognises external threats as precipitants, and features an understanding of the disorder as a normal reaction to severe stress and trauma, albeit with unhealthy effects.

Walker, 1980 cited in Whalen (1990) reviews various treatment modalities such as individual, group and couples therapy. Like grassroots therapists, Walker, 1980 cited in Whalen (1996) rejects couples therapy in violent relationships, as according to this perspective, battered women can never be free from intimidation, and therefore cannot participate in the counselling situation freely, equally and without fear of reprisal. NWSC's policy, which does not include access to couple therapy, is based on this principle.

The most helpful treatment modality for battered women, according to the perspective of professional feminist therapists, is individual psychotherapy, that has as its goal increased independence and focuses on the present, although it may use the past to promote an understanding of the current situation (Whalen, 1996). Therapy should be action-oriented rather than analytical, must include a career or vocational planning component and involve cognitive restructuring if changes are to be permanent. NWSC embraces this approach when intervening with women on a one to one basis.

Group therapy with battered women is highly recommended, as a group can reduce the sense of isolation felt by the battered women (Walker, 1980 cited in Whalen, 1990). They can learn new cognitions from others in the group and can benefit from the group norms that support positive behavioural change. To add to these findings, studies on battered women's experience of the services at NWSC (Durra, 1998; Ponton, 2002) indicate that the group counselling offered to them allowed women's feelings of social isolation to decrease and helped them to realise their situation was not unique. This assisted in reducing their feelings of shame and guilt.

Walker, 1980 cited in Whalen (1996) has suggested that groups be divided roughly into two stages. The first would be for battered women in crisis or trying to free themselves from the abusive relationship. The second stage would be for women who have successfully left these relationships and are now facing other developmental life issues, such as establishing new intimate relationships.

Based on the above discussion, it is clear that this perspective emphasises in its counselling approach treatment of the women's psychological state whilst simultaneously meeting the material needs of battered women (for example, safety, occupation and the need to end the relationship). The following section will provide an outline of the services provided by grassroots feminist counsellors.

Grassroots Feminist Counsellors

Grassroots therapists place great emphasis on treating the helping systems as a political strategy (Whalen, 1996). Some of the areas of focus of this approach will be presented below.

Social system change

Gondolf, 1988 cited in Whalen (1996) takes on a grassroots approach when proposing a focus on social system change as opposed to victim change. This perspective asserts that it is community systems of care and intervention - human services, police, courts, and clergy - that need treatment, and argues for an infusion of feminist values based on nurturance and relatedness into the patriarchal institutions of male dominance to transform the system (Walker, 1980 cited in Whalen, 1990). One of NWSC's services includes raising social awareness and advocating for changes in policy and legislation for battered women.

'Survivor' vs. 'Victim' and 'Strengths' vs. 'Weakness'

Alternative conceptualisations to Walker's learned helplessness hypothesis have been made, which includes ~~viewing battered women as survivors~~, who increase their help-seeking behaviour over time, rather than giving up and being psychologically paralysed (Gondolf, 1988 cited in Whalen, 1996) and (Browne, 1998 cited in Gondolf, 1998).

These conceptualisations do not deny psychological explanations of battered women's behaviour, rather it is suggested that low self-esteem amongst other symptoms, may represent a kind of temporary shock to the abuse requiring not so much psychotherapy, as time and space to recuperate. Providing women with an opportunity to spend time in a shelter would be the choice of intervention (Gondolf, 1988 cited in Whalen, 1996). Browne, 1998 cited in Gondolf (1998) continues to suggest that the symptoms of the trauma are in fact coping strategies and should be looked upon as strengths rather than deficits.

One of the most important aspects of intervention with battered women is to identify their strengths, especially because the batterer and the public continuously negate them (Browne, 1998 cited in Gondolf, 1998). Strengths refer to the qualities that resist attack and defeat and maintain survival and personal growth (Browne, 1998 cited in Gondolf, 1998). The aim of focussing on the individuals' strengths is to help identify their potential and assist in engaging and empowering them in the process; an important principle of feminist counselling (Browne, 1998 cited in Gondolf, 1998).

Crisis Intervention

The grassroots shelter system, using a paraprofessional and peer counselling model rooted in crisis intervention philosophy, has been very effective in helping battered women (Walker, 1980 cited in Whalen, 1996). Increasingly, battered women are turning to emergency shelters and telephone crisis intervention services for help, and progressive programs now incorporate crisis intervention for children too (Roberts & Roberts, 1990 cited in Stith, Williams & Rosen, 1990).

Battered women usually reach out for help after an acute battering incident, which takes place after a prolonged period of abuse. When women are at the point of maximum discomfort in which they experiences the pain and torment as unbearable, they are said to be in an active crisis state (Roberts & Roberts, 1990). At this point, there is an opportunity for change and growth, and some women feel ready at this stage to seek help from a 24-hour telephone crisis line, the police, hospital emergency room or a shelter (Roberts & Roberts, 1990).

It is very important to respond quickly to battered women as they may continue to be in danger the longer they remain in a place where the batterer can locate them. The initial contact made by many battered women is by telephone and it is essential that she be able to talk immediately to a trained counsellor who provides her with a caring attitude, as time is of the essence. The overriding goal of this intervention is to ensure the woman and her child's safety (Roberts & Roberts, 1990).

Once the urgent issues have been managed, the counsellor can begin to talk to the victim about her situation and discuss possible courses of action (Roberts & Roberts, 1990). The counsellor may present various options to the woman but allow her to make her own decisions, which are based on the feminist principles of self-determination. Crisis workers are advised to speak to the women they are helping in a steady, calm voice, to ask open-ended questions, and to refrain from being judgmental (Roberts & Roberts, 1990).

Roberts & Roberts (1990) explain the importance of knowing one's referral sources. For example, women who call in may have a compounding problem of alcohol, drug addiction or a psychiatric illness, and may require an additional service. As mentioned

earlier, battered women frequently need a variety of services such as job training, day care, housing and services need to work together in providing a holistic intervention for these women. Once the women are out of immediate danger, group counselling can be initiated (Roberts & Roberts, 1990).

However, Walker, 1980 in Whalen (1990) warns that crisis intervention does not interrupt the cycle of violence or lead to lasting changes. Often, leaving the relationship is the only way to end the abuse.

From the above discussion it is clear that the grassroots and professional feminist approaches differ from one another, by for example, the way in which they understand the symptoms exhibited by battered women. However, the approaches do maintain similarities, for example, the focus on empowerment and the use of group therapy as a form of treatment. The following section will focus on the systemic theoretical perspective for understanding women abuse.

2.1.3 SYSTEMS THEORY

A. SYSTEMIC THEORY

Family systems thinkers maintain that violence is a consequence of specific familial relationship patterns (Pressman & Rothery, 1989). This approach views relationships as consisting of stable sets of interacting patterns that comprise a system (Magill, 1989). Behaviour is viewed as reciprocal and all members of the system are implicated in the maintenance of the behaviour (Giles-Sims, 1983 cited in Magill, 1989).

Violence can be described as one of many symptoms in a troubled marital system, as a sign of more underlying, primary systemic dysfunction. Examples of systemic dysfunction may include, structural rigidity, diffuse boundaries, or as a homeostatic mechanism maintaining the equilibrium of the system (Bograd, 1994 cited in Magill, 1989). Weitzman & Dreen, 1982 in Magill (1989) describe battering couples as locked into a complementary system in which there is rigid unilateral control with little room for negotiation. Any move towards a more balanced relationship threatens the homeostatis and violence may erupt to re-establish the homeostatis. Violence

erupts in the couples struggle for control over the functional rules in the relationship rather than the specific problems in the relationship.

Feminist thinkers have criticised systemic approaches to women battering as constituting another form of victim blaming, perpetuating the unequal distribution of power based on gender, and for not acknowledging the differential processes of socialisation that maintain the imbalance of power (Bograd, 1984; MacKinnon & Miller, 1987 cited in Magill, 1989). However, current systemic models place responsibility for violent behaviour on the man but recognises the maintenance of the interaction that supports the violence as a shared responsibility (Magill, 1989). Therefore, in order to circumvent the problems raised by circular thinking, violence is given a special status and treated independently as a primary problem (Magill, 1989).

To add to this, certain characteristics of violent relationships give credence to a systematic analysis. For example, violence follows a cyclical pattern and is highly resistant to change unless interrupted somehow by treatment or circumstances, and wife battering is the product of an interactional context characterised by repetitive sequences of transactional behaviour, and it occurs in marital systems characterised by certain relationship structures (Magill, 1989).

There has however been an attempt to incorporate a social analysis into systemic thinking (Magill, 1989). Weitzman & Dreen, 1982 in Magill (1989) have explained that families are violence prone for two main reasons – violence is rooted in the phenomenological system of each spouse, through personal experience with abuse as children, through sex role conditioning that encourages exploitation, and through the endemic proportion of violence in society.

In South Africa, hardly a day goes by without media reports of violent and heinous crimes committed against women in and outside homes (Makofane, 2001). As McKendrick & Hoffman, 1990 p. 38 cited in Mashishi (2000) state, “by being a part of the society, the lives of all are touched and tarnished by violence”. Therefore, it is essential to consider the impact that these high levels of violence have on families and communities in South African society. Interventions based on the systemic perspective will be outlined in the following section.

B. INTERVENTIONS USING A SYSTEMIC THEORETICAL FRAMEWORK

Treatment models vary amongst family therapists – traditional models view the violence as a symptom of the dysfunctional system and do not address it directly. Minuchin, 1984 cited in Magill (1989), and other more current models have attempted to develop new formulations and models of intervention that give special status and meaning to the violence (Bagarozzi & Giddings, 1983; Cook & Frantz-Cook, 1984; Giles-Sims, 1983; Taylor, 1984 cited in Magill, 1989). These models treat the violence directly as a primary issue and insist on no violence as a condition of treatment (Magill, 1989).

The treatment plan of Cook & Frantz-Cook, 1984 cited in Magill (1989) is a general representation of current models (Weitzman & Dreen, 1982; Bagarozzi & Giddins, 1983; Magill & Werk, 1985). It proposes initially working separately with each spouse so as to minimise risks of danger. The woman is helped to work out a plan to protect her if she senses that her partner may become violent, and this plan is organised and rehearsed. This step serves to check the women's safety and emphasises the fact that the violence is the man's problem. The man's process is similar and involves becoming aware of when he becomes violent and what triggers his violent responses and then learning alternative ones. Individual work with the man entails gaining his commitment to stop the abuse, which becomes essential if the therapy is to continue. Same-sex therapists work with each individual to reduce resistance and allow clients to feel accepted and more at ease.

Extreme dependency, enmeshment and a lack of boundaries between partners are often features of relationships where violence exists. Differentiation as a therapeutic goal is therefore essential in helping the couple to develop and tolerate separateness (Magill, 1989). A group experience for one or both partners, attending a class, seeing friends or shopping alone, are some of the tasks aimed at individuation. Conjoint sessions, once the above steps have been taken, allow the couple to deal with marital issues that lead to conflict and violence. Identifying sequences and themes, which is continued throughout treatment, attempts to understand the purpose the violence has served in the relationship (Magill, 1989).

Therefore, where systemic models have been criticised by feminists for blaming the woman and making her responsible for the discontinuation of the abuse, it is clear from the above description that certain systemic models have evolved which do not tolerate violence and that do hold the man accountable for terminating the abuse. Magill (1989) states that when faced with the complexity of the relationships of violent couples (the profound attachment between them and the repetitive nature of their interaction) it is essential to consider interactional aspects in order to effectively treat the problem.

If this method is used, it is essential that the counsellor have no bias in favour of preserving family structures (that therapy does not necessarily have as its sole goal to ensure the continuance of the marriage), and that he/she recognises that the goal may become to help them separate (Magill, 1989). Various authors such as Magill (1989) and O'Leary & Murphy (1999) warn that this method of treatment is not the treatment of choice for all violent relationships and that before embarking on a program of couple therapy, the clinician needs to make a judgement about the suitability of such treatment for that particular couple. The integrated theories on women abuse will be presented next.

2.1.4 INTEGRATED THEORIES

Work in the area of the aetiology of family violence has shifted to focus on what might be called an 'integrated approach', and the underlying assumption of this theory is that women abuse is a complex issue that can only be explained by looking at a combination of psychological, sociological, political and economic factors (Westhues, 1989).

Integrated theories recognise that society has some responsibility for the creation and maintenance of the problem of women abuse, and to accept the premise that relationships between men and women must become more egalitarian is to accept the basic premise of feminism (Westhues, 1989). Therefore, those accepting an integrated theoretical explanation of women abuse are almost certainly feminists (Westhues, 1989). As Pressman, 1989 cited in Pressman, Cameron & Rothery (1989) explains, a feminist perspective does not preclude the use of other theoretical perspectives to explain human behaviour. Therefore, the use of an integrated approach in the study

of NWSC's services, which is rooted in a feminist perspective, is appropriate and valid.

Various models within this perspective have been developed to understand women abuse, and they tend to show how various factors interact together to create and maintain this phenomenon. For example, Gelles & Cornell (1990) developed the social situational model showing how a particular combination of factors may cause families to be more at risk to violence. It indicates how abuse occurs in the context of structural stresses (such as unemployment, illness, low income) combined with cultural norms and values that accept violence.

Stith & Rosen (1990) developed 'an interactive model' which also suggests that women abuse can only be understood by taking into account both individual and sociological variables, which exist in the context of cultural norms sanctioning violence against women. The 'interactive model' focuses on the interaction between various factors. Some of these factors include the larger socio-cultural context that may accept violence against women as a norm. Another factor described is that of family and individual vulnerabilities, for example, specific socialisation experiences or/and specific nuclear family characteristics such as marital stress, which may render a person more vulnerable to the use of violence in relationships. Stressors are also mentioned, for example, developmental stressors such as the birth of an infant, or unpredictable stressors such as unemployment or chronic illness. These stressors may push families who are already under strain over the line to abuse (Stith et al., 1990).

Further factors mentioned include individual and family resources and these could include personal resources such as financial, educational, health and psychological resources. For example, having limited financial resources or living in poverty can increase the likelihood of violence occurring as it can attack self-esteem and lead to despair, creating a breeding ground for violence in the family. Another example is of individuals who have high self-esteem and good coping skills (psychological resources) who are thus able to deal more effectively with stress without resorting to domestic violence. A strong social network is another very important resource as studies have shown that social isolation is related to spouse abuse (Steele, 1975; Straus et al., 1980; King, 1984; Kosberg, 1985 cited in Stith & Rosen, 1990).

Therefore, providing social supports is a vital part of any treatment programme to eliminate violence.

The integrated approach shows how various theoretical frameworks are interwoven into one to provide a thorough understanding of the phenomenon of women abuse, allowing for a variety of points of intervention. The following section describes the types of services provided under the integrated perspective.

A. INTERVENTION USING AN INTEGRATED PERSPECTIVE

Services under an integrated perspective would focus intervention on a number of different levels. On an individual level, consideration would be given to the factors in the development of both male and female partners, and to the relationships that have resulted in the explosion of violence (Westhues, 1989). Therefore, intervention on a systemic level would be an option. This model would also place importance on dealing with the trauma associated with the abuse (Pressman, 1989 cited in Westhues, 1989).

The integrative model, similarly to the sociological model, places an emphasis on consciousness raising, assertiveness training and conflict resolution, and would focus on preventative services, yet less so than the sociological perspective.

The above is an examination of a variety of theoretical perspectives and intervention strategies used to understand and assist battered women, concluding with a rationale for the use of an integrated approach within which to locate this research. The following section focuses on the help-seeking processes, information needs and help-seeking behaviour of battered women.

2.2 PROCESSES, INFORMATION NEEDS AND HELP-SEEKING BEHAVIOUR OF BATTERED WOMEN

An exploration of the literature on the various patterns and processes that battered women go through when approaching or deciding to approach the human service sector, as well as an examination of their particular information needs will yield meaningful insights into the needs, experiences and expectations of this population.

To add to this, an examination of the barriers battered women encounter when dealing with various helping sectors will follow in order to gain an understanding of factors which may prohibit these women from attaining the help that they need.

2.2.1 PROCESS OF HELP-SEEKING

Models have been developed by various authors to describe the common patterns and processes people go through when seeking help for their problems (Harris & Dewdney, 1994). Upon examination of some of these models, Harris & Dewdney (1994) extracted some tentative generalisations about information-seeking behaviour in the context of human service information, and these can be related to battered women's behaviours when seeking help. Some of these include:

The decision to seek help or not to is affected by many factors: People seek help when their internal resources run out – people consult external sources when their own observations, memory or experience fails them (Dervin et al., 1983 cited in Harris & Dewdney, 1994). They may stop seeking help either when they find something that helps them meet their goal or when they encounter more barriers in the helping process. These barriers may be physical (such as the inability to travel) or psychosocial (feeling they may be regarded as a failure for seeking assistance). Therefore, throughout the help-seeking process, people are constantly revising their sense of the problem and the kind of help required. Another important aspect involved in a person's decision about whether to seek help or not, is about how in control of this decision the person feels (Harris & Dewdney, 1994).

There is a notion that people seek information that is most accessible: This is based on the principle of least effort often associated with pain avoidance. This idea suggests that given a choice, people would prefer to find a solution easily without a great expenditure of time, and effort and without a loss of self-esteem or other emotional costs. The concept of accessibility applies to more than geographic barriers but could include other barriers such as discrimination, inconvenient hours and professional jargon, which could cause the person to disengage from the help-seeking process (Harris & Dewdney, 1994).

Information seekers expect emotional support: The affective components of the information service should be given significant consideration along with the reliability, content and efficiency aspects of information exchange. Crickman, 1976 p. 239 cited in Harris & Dewdney (1994) remarked, “when a person has a serious problem, he may value support and sympathy as much as information in resolving the difficulty”.

With regards to the process of selecting ‘whom’ to approach for help, battered women, in dealing with ongoing abuse, seem to begin by tapping inner/personal resources. If this fails, then informal social networks such as family/friends are selected, and then finally the formal help network is approached - e.g. police, health (Harris & Dewdney, 1994). The nature of the help battered women look for shifts as the women undergo more and more abuse (Harris & Dewdney, 1994). As violence persists, women begin to focus less on their own emotional needs and more on controlling the man’s violence – wanting less sympathy and personal support and more direct intervention and specific means of escape. Therefore, it depends on what stage the woman is in her relationship as to what she may be seeking and needing at the time (Dobash & Dobash, 1982 cited in Harris & Dewdney, 1994). It is acknowledged that this process does not apply to all abused women, as many never acknowledge their victimisation to others (Harris & Dewdney, 1994).

When attempting to understand the choices battered women make in dealing with the violence in their lives, it is essential to consider “the relative loss of income or social status and security that informs a victim’s assessment of the risks and benefits associated with various options for response (e.g. leaving, taking legal action, seeking other forms of help or intervention)” (Greaves et al., 1988 p. 44 cited in Harris & Dewdney, 1994). Concerns and fears regarding the unknown may seem greater or as terrifying as the continued risk of known and thus far survived violence.

To add to this, it is often presumed that leaving an abusive relationship is a final solution to the problem. However, it has been found that although many women who leave abusive partnerships valued the independence and peacefulness of non-violence, a significant number experienced loneliness, poverty, boredom and difficulties

establishing new intimate relationships as a result of the emotional scars of abuse (Groenewald, 2000/2001).

Therefore, the helper needs to understand the dilemma battered women face when making decisions about how to manage their situations, and view this deliberation as a natural process that many abused women experience. Information needs of battered women will be discussed next.

2.2.2 INFORMATION NEEDS OF BATTERED WOMEN

Various studies have been conducted to determine battered women's needs when seeking help. These studies revealed that some of the needs identified by abused and non-abused women included, the need for immediate protection/ shelter; counselling; financial assistance/advice; police assistance; medical attention; care; food and clothing for children; legal advice; help for husband; a job or training; transportation and counselling for children (Hilberman, 1980; Harris, 1988 cited in Harris & Dewdney, 1994) and Harris & Dewdney (1994). The extent of these needs will vary according to an individual's life circumstances, adaptive capacities and psychological status-one client may need all of these resources, while another may need few (Hilberman, 1980 cited in Harris & Dewdney, 1994).

Various studies have shown how shelters have played an important role for battered women indicating battered women's need for a safe haven from the violence (Harris & Dewdney, 1994); (Maconachie et al., 1993). The shelter allows battered women to start a process of disengagement from a battering relationship and often acts as the turning point before the transition to a 'new' life begins (Maconachie et al., 1993).

Emotional distress appears to be the most important element of the experience of crime victims (Maguire, 1985 cited in Harris & Dewdney, 1994). As a result, many victims report a need for someone to talk to; for emotional support as they try to cope. Studies conducted on battered women's experiences of the services at NWSC confirm the above notion that battered women have a strong need for emotional support (Durra, 1998; Ponton, 2002).

In Harris & Dewdney's study (1994), this need for emotional support permeated the expectations of the study respondents with respect to nearly all the members of the formal help system, for example, lawyers whom respondents hoped would also be potential source of emotional support. Various studies have indicated that this support is not always forthcoming (Harris, 1988 cited in Harris & Dewdney, 1994); (Harris & Dewdney, 1994). Unfortunately, training in the expression of empathy and 'unconditional positive regard' is not typically part of the educational preparation of lawyers, law enforcement officers or even physicians (Harris & Dewdney, 1994). Barriers faced by battered women when seeking help will be described in the following section.

2.2.3 BARRIERS

An objective of this research is to gain insight into reasons why battered women approaching NWSC have not returned for further assistance. Therefore, an exploration of the literature on the barriers battered women come up against in their search for help will be appropriate as it will shed some light on the possible reasons for battered women disengaging from the help-seeking process.

A general discussion will follow on some of the complications that arise for battered women when reaching out for help. In order to understand battered women's experiences holistically, a description of the particular barriers they encounter when dealing with the various helping sectors that they come into contact with will come next.

A. GENERAL DIFFICULTIES

It has been recognised how contemporary ideologies of marriage and the notion of the family endorse and support the silence around woman abuse (Maconachie et al., 1993). While men are expected to be the material providers, women are expected to provide the emotional cohesion in relationships, and are held responsible for their success. For women therefore, to voice marital problems may reflect negatively on them. In a recent study conducted it was found that many battered women had stayed in their marriages because they wanted to preserve the family (Makofane, 2002). They seemed convinced that it was their sole responsibility to keep the family together (Makofane, 2002). Therefore, these notions and ideologies may be a further barrier to

women speaking out, as they feel compelled to uphold the privacy and cohesion of the relationship.

Many battered women remain in violent relationships because of their religious and cultural backgrounds (Wilson, 1997 cited in Mafokane, 2002). A recent study showed that abused women indicated that their religion was against divorce and that they did not feel free to leave their partners in fear of being alienated from and rejected by their fellow church members (Mafokane, 2002). Therefore, battered women may feel obligated to stay in relationships due to the religious doctrine to which they adhere.

As the situations experienced by battered woman are complex and multifaceted, they often require women to interact with several parts of the formal helping system, such as the courts, hospitals, welfare agencies, and housing authorities. Contact with any help source can present communication difficulties; therefore, when obtaining help that involves multiple contacts with agencies and professionals, with varying mandates, communication problems may be compounded. Inevitably, therefore, opportunities arise for abused woman to experience communication problems as they negotiate their search for information and help with the various systems involved (Harris & Dewdney, 1994).

In several studies conducted to determine the barriers people face in their search for information, it was found that some people never reach the appropriate service agency due to various forms of social isolation (Warner et al., 1973; Dervin, 1976; Barugh, 1984; Levinson, 1988 cited in Harris & Dewdney, 1994). Battered women are often isolated and this can keep them ignorant of available resources, and that a lack of time, money and transport can make it increasingly difficult for women to reach agencies (Maconachie et al., 1993). Certain social skills are needed to successfully negotiate the morass of procedures and bureaucracy in obtaining official help, and often a lack of self confidence resulting from the abuse and isolation from the social world serve to erode many women's ability to utilise these skills (Maconachie et al., 1993). Social isolation was also found to be a big obstacle in women's lives when attempting to leave abusive situations (Groenewald, 2000/2001).

Women's lack of familiarity with formal support systems, refusals, rebuffs, and endless referrals may result in long delays before receiving help which may reinforce women's sense of helplessness and isolation, thereby making future approaches to formal support systems less likely (Maconachie et al., 1993). Various studies reiterate these concerns when they describe the obstacles people may encounter that are either deliberately or inadvertently constructed by the agencies themselves (for example bureaucratic complexities such as the application process, inconvenient hours of operation and long waiting lists) (Warner et al., 1973; Dervin, 1976; Barugh, 1984; Levinson, 1988 cited in Harris & Dewdney, 1994). The help-seeker may also be affected by hidden costs obstructing the help-seeking process. These may include lost wages from taking time off work; the cost of transportation to the agency and the cost of child-care facilities (Levinson, 1988 cited in Harris & Dewdney, 1994).

Various studies show that despite the difficulties women encounter when seeking help, many do persist in their help-seeking activities (Borkowski et al., 1983; Harris, 1988; Gondolf & Fisher, 1988 cited in Harris & Dewdney, 1994). Harris & Dewdney (1994) point out that the persistent help-seeking observed in these women is at odds with one widely held view of battered women (informed by the work of Lenore Walker, as described above) which suggests that due to ongoing abuse, the women develops learned helplessness (she becomes passive and gives up as she begins to believe that nothing can be done to change her situation). Instead, some of these studies (Borkowski et al., 1983; Gondolf & Fisher, 1988 cited in Harris & Dewdney, 1994) reveal that women do actively attempt to deal with their situations, however, this is often thwarted by the failure of the social service delivery system in helping them find solutions.

Various references have been made to the fact that economic dependence on the man is one of the major obstacles to women leaving an abusive relationship (Maconachie et al., 1993; Human Rights Watch/Africa, 1995). For example, Maconachie et al. (1993) explain how the shortage of houses intensifies stressors on families, which may precipitate battering and also often is the reason for women being forced to return to battering relationships. These authors further state that for some women finding a place to stay may involve complicated arrangements, which are difficult to

make without money, and explain that independence is a prerequisite for battered women to be able to leave a batterer permanently.

Numerous studies, for example (Martin, 1981; Van der Hoven, 1992 cited in Mafokane, 2002), have indicated that children are a primary reason for women remaining in abusive marriages, and some women even stay in order to protect their children against their violent father. Another recent study found similar results in that a large percentage of women had remained in abusive relationships for the sake of their children (Mafokane, 2002).

The above discussion illustrates the fact that the help-seeking process is often a complicated and frustrating one which tends to compound the difficulties women already experience when deciding to risk breaking the silence surrounding women abuse. Barriers encountered with particular helping sectors will follow.

B. BARRIERS ENCOUNTERED WITH THE VARIOUS HELPING SECTORS

Welfare

Prior to the implementation of the Domestic Violence Act in 1999, literature showed how battered women faced various barriers with the welfare system in South Africa. The social welfare system made little provision for helping women wanting to make new lives for themselves and their children (Angless, 1990 cited in Maconachie et al., 1993). Social benefits were erratically awarded, scarce and arduous to come by, and few specialised social welfare agencies existed to deal with battering in a comprehensive and cohesive way. These authors explain that as a result, social workers often felt helpless, and battered women were referred from one sector to another, ultimately having to return home. The majority of social workers are women and this limits their authority with violent men, and consequently limits the extent of their ability to intervene. However, despite these limitations, Maconachie et al. (1993) found that it was contact with social workers that led women to initiate the process of leaving the batterer; specifically by social workers helping them to negotiate the system, and by providing them with emotional support.

Recent research evaluating battered women's experiences since the implementation of the Domestic Violence Act has shown that abused women seeking the services of

social workers have generally found these services to be helpful and supportive. However, there are still difficulties with regards to accessibility and availability of resources (especially among some rural women), and experiences of demeaning and judgmental attitudes during the helping process (Makofane, 2001). It has also been found that there is a dearth of shelters in South Africa to accommodate battered women, and that the internal constraints within shelters do not support the needs of women (Artz et al., 2001). This makes it difficult for the police and courts to ensure that the legislation is implemented effectively (Artz et al., 2001).

Therefore, despite some improvements made by the new legislation, as Maconachie et al. (1993) point out, without adequate social and economic resources for welfare provision, the crucial issues of lack of accommodation and finance cannot be addressed. As mentioned above, the shortage of houses often precipitates battering and is often the reason for women being forced to return to abusive relationships (Maconachie et al., 1993). Therefore, battering can be seen as a complicating factor interwoven with other emotional and economic problems, and therefore requires a comprehensive treatment approach (Maconachie et al., 1993).

Medical

The health profession provides a service to battered women whereby many medical personnel still remain largely fixed within a medical model of intervention which ignores the social context in which a women's physical, emotional and psychological wounds occur (Langley, 1997). The other non-medical aspects of the abuse (such as the fear, humiliation and shame) framed within silence, largely escapes the medical gaze. This in turn may discount the woman's reality, reinforcing her feelings of isolation and helplessness (Warshaw, 1989 cited in Langley, 1997).

Various studies indicate some of the shortfalls women experience when approaching the medical sector for assistance. For example, Maconachie et al. (1993) found that many women in their study experienced the doctor as being disinterested, and often women would be treated with tranquillisers to help them cope, emphasising a focus on treating the woman as opposed to the battering situation. In a study conducted by Makofane (2001) it was found that most respondents' experience of health services had been negative, for example, having to wait in long queues before being attended

to, and complaining about the emotional abuse they were being subjected to only to be told by the doctor that he could not help.

Much research in the USA and UK has also shown that relatively few medical staff in healthcare settings detect and correctly identify the real cause of battered women's injuries and distress (Langley, 1997). Langley (1997) explains that lack of effective management of women battering on the part of these practitioners may be due to the lack of training and information on the subject of women abuse provided to them, and the lack of formal processes to aid identification of female patients presenting with trauma as abused women.

One of the omissions in the Domestic Violence Act is its failure to place any obligations on health sector personnel to assist victims of domestic violence. Health services often represent the point of first and only contact for women with public sector services, and therefore health care workers are in a unique position to identify abuse and intervene early on (Artz et al., 2001). It has also been found in a recent study that the criminal justice services have little or no interaction with health services, which underscores the importance of intersectoral interventions in assisting domestic violence complainants (Artz et al., 2001). This contributes to the fragmentation of service provision to abused women.

It has been recognised in principle that the health sector has an important role to play in addressing gender-based violence (DOH Strategic plan, 1999-2004 cited in Artz et al., 2001), however, insufficient action has been taken compared with other government departments such as Justice and Security. This failure to act may stem from the perspective that domestic violence is fundamentally a criminal-justice issue (Artz et al., 2001). However this is problematic given the important role that this sector has to play in being the first and most frequently utilised sector by abused women (Artz et al., 2001).

Police

Much research conducted before the implementation of the Domestic Violence Act in 1999 indicates women's lack of confidence in the manner in which police have addressed the problem of battering. For example, in Human Rights Watch /Africa

(1995), it states that women regardless of race would not report incidents of abuse to the police due to the perception that police would often respond in an unhelpful and hostile manner. Harris & Dewdney (1994) and Maconachie et al. (1993) found similar results in their respective studies - women generally lacked confidence in the police because of some of the experiences they had had, for example, police responding two hours after the call for help was made.

There have been a number of developments, including the implementation of the Domestic Violence Act, which have impacted on service delivery for battered women (Makofane, 2001). Makofane (2001) found that services rendered by various service providers have improved remarkably in the last few years, with police services being described as helpful by the respondents in this study. However, at the same time, the police were found not to adhere to procedures as determined by the new Act. In general, the respondents in this study attributed these service providers' negative behaviour to a lack of knowledge, disinterest, insensitivity, inexperience and fear (Makofane, 2001).

In a recent study done on evaluating the implementation of the Domestic Violence Act, it revealed that some of the problems encountered by the South African Police Service included a lack of resources to conduct their work effectively, and limited training on issues around women abuse and the implementation of the legislation (Smit & Nel, 2002). Parenzee, 2001 p.12 cited in Smit et al.(2002) explains that "as a result, there is a great deal of confusion surrounding the implementation of the Act".

Despite the reality that implementation is difficult when resources and support services are lacking, some regions have devised creative means of dealing with some of the hurdles (Artz et al., 2001). For example, at one station police have developed a good working relationship with a social worker who is called on to provide counselling in women abuse situations. However, the struggle service providers face is that while there are times that they can deal with a situation creatively in the short term, there are long term consequences that make problems unmanageable (Artz et al., 2001).

Evidence shows that there are high levels of domestic violence within the police service, and the far-reaching legislation of the Domestic Violence Act will be rendered toothless if it is enforced by those who do not believe in its necessity (Artz et al., 2001). According to Nix, 1998 p 3 cited in Smit et al. (2002), "police attitudes towards domestic abuse as a private matter affects the policing of domestic abuse. Often police view a domestic abuse incident as a family fight or a 'normal man and wife argument'". Harris & Dewdney (1994) explain that there appears to be considerable confusion on the part of individual police over what their roles should be in these situations, and this ambivalence would impact negatively on their ability to intervene effectively.

Whilst many new policies, structures and training initiatives have been put into place to address the high rate of women abuse in South Africa, more vigorous and innovative interventions are required to ensure that the problem is addressed optimally.

Legal

Novitz (1996) presents the particular legal remedies that have been recommended for battered women and explains that in all likelihood not one sole legal remedy will be necessary for battered women, but rather a multifaceted approach to accommodate the multiplicity of needs facing a survivor of domestic violence. These may include compulsory counselling for the offender (and sometimes joint family counselling), mandatory arrest, criminal charges, civil proceedings for injury to the person and interdicts or injunctions (Novitz, 1996).

There have been and still are however many difficulties and limitations with the implementation and provision of legal remedies within the South African legal system. In a study conducted prior to the provision of the Domestic Violence Act in 1999, it was found that making use of legal avenues for battered women in South Africa was often an intimidating, expensive and time-consuming exercise (Maconachie et al., 1993). For example, Human Rights Watch/Africa (1995) explain that because interdicts could only be issued by courts with civil jurisdiction, many women would have to travel long distances to obtain them which would act as a deterrent. It is further described how even when interdicts were received, many were

later withdrawn because of abusive partners threatening to withhold financial support from their partners.

Due to limited resources, infrastructure and personnel, the implementation of the Act has not been as successful as hoped for (Artz et al., 2001). In a recent study it was found that the women referred to the courts by NWSC to secure a protection order experienced a lack of practical assistance and support from this sector, and had to wait for long hours in an unpleasant environment (Ponton, 2002). Courts and police stations that have close working relationships tend to have more effective services than those who do not, however, this does not often transpire (Artz et al., 2001). On the other hand, another study showed that there have been improvements since the new legislation, whereby many women reported to have received more accurate information about how to apply for a protection order (Makofane, 2001).

Women abuse cannot be treated with legal remedies only (Novitz, 1996). Family violence is a social and psychological problem, which can only be eliminated by fundamental changes in societal attitudes to women and children (UK Law Commission Report 207, 1992 cited in Novitz, 1996). Therefore, there needs to be a holistic approach when intervening with battered women. Novitz (1996) explains that 'the ideal approach to domestic violence involves co-ordinated and ready access for victims to all the traditional mechanisms' (Harvard Law Review Editors, 1993 p.1514).

Agencies dealing specifically with Women Abuse

Jaffe et al., 1991 cited in Harris & Dewdney (1994) found that women perceived the most effective help providers to be agencies that specialise in dealing with wife assault (women's shelters, battered women advocacy services, counselling agencies for abused women). NWSC falls under this category.

One of the reasons for these agencies being more effective than others is that in most cases, they avoid what Gondolf & Fisher, 1988 cited in Harris & Dewdney (1994) refer to as the tendency to see the problem as something within the abused women. Most of these programmes embrace the feminist perspective, and therefore, when

responding to an abused woman it is made clear that the woman is not responsible for the abuse she has experienced.

Harris and Dewdney (1994) found however, that a referral to an organisation that does have a mandate to assist battered women still does not always guarantee a helpful response. Some of the agency respondents interviewed in this study reported that they were unable to provide services at the level required because their agencies were over-utilised and under-funded (for example, there is often a lack of sufficient shelter space, insufficient affordable housing, inadequate services for children who have witnessed violence in their homes, and a lack of adequate counselling services, particularly for more therapists to do longer-term counselling). In a recent study done in South Africa, it was found that there is a shortage of shelters to accommodate battered women, which would impact on agencies working in this field when attempting to effectively assist battered women (Artz et al., 2001). Therefore, whilst these agencies are regarded as optimal, various practical limitations such as a lack of finances, can impact negatively on service delivery.

The above discussion illustrates that help-seeking for battered women can often prove to be an arduous process, with various factors operating against them. Abused women's needs are often unmet partially due to the failure of agency responses, as well as as a result of ideological notions of the family held by society reinforcing women's subordinate status. Women abuse requires a multidimensional approach to intervention, and often the various sectors working in this area do not operate cohesively. Compounding these difficulties are the inadequate resources and procedures available to manage women abuse. Despite these obstacles, many women do manage to attain assistance and efforts are being made to ensure that more appropriate services are delivered to this population.

2.3 CONCLUSION

In this chapter various theoretical frameworks for understanding women abuse have been considered. Due to the complex nature of women abuse, an assertion has been made for the use of an integrated framework which takes into account a range of different factors when attempting to explain women abuse and intervene with battered

women. A focus was placed on the feminist approach (within the sociological framework) as the NWSC intervention program is based on this model and this approach forms the fundamental backdrop of the integrated approach.

The last section of this chapter indicated that battered women have an array of needs and shed light on some of the difficulties experienced by battered women in their search for help. This discussion points to the urgent need for co-ordination between different helping agencies involved in assisting battered women and for the shift in society's attitude generally towards women.

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CHAPTER 3

PRESENTATION AND DISCUSSION OF RESULTS

This chapter will include a presentation and discussion of the results of the data collection process. The questions in the interview schedule were created to elicit information pertaining to the objectives of this study as outlined in Chapter One. The results will therefore be presented in relation to these objectives and research questions in the forms of categories, which will be outlined below. Links to selected literature will be made and the results will be considered in the context of an integrative theoretical framework. An overview of the demographic profiles of the participants in this study follows first.

3.1 RESPONDENTS' DEMOGRAPHIC DETAILS

One of the methodological aims of this study was to obtain a ten percent sample of the population, which included forty women who had received a once-off session at NWSC, telephonically or in person. This criterion was met.

Table No. 1: Respondents Demographic Details

Race	Number of Respondent's	Percentage
Coloured/Indian/ Asian	25	62.5
White	9	22.5
Black	6	15
Home Language	Number of Respondents	Percentage
English	24	60
Afrikaans/English	14	35
Xhosa/English	2	5
Age Distribution	Number of Respondents	Percentage
20-29 Years	7	17.5
30-39 Years	17	42.5
40-49 Years	12	30
50-59 Years	4	10
Marital Status	Number of Respondents	Percentage
Married	26	65
Single	6	15
Divorced	5	12.5
Separated	3	7.5
Employment Status	Number of Respondents	Percentage
Employed	25	62.5
Unemployed	15	37.5
Service Utilised	Number of Respondents	Percentage

Session at Centre	35	87.5
Telephone	5	12.5

The total number of respondents taking part in this study was 40, all of whom had been to NWSC for counselling, either telephonically or in person once only. All participants resided in the Cape Metropolitan area, including the northern and southern suburbs, Cape Flats and City Bowl area.

For the purpose of identifying differences in race still prominent in South African society, categories describing census populations have been utilised to outline the sample in this research. The highest percentage of women participating in the study were Coloured/Indian/Asian (62.5%), thereafter White (22.5%) and lastly, Black (15%). The racial distribution in this sample is consistent with that of the NWSC's client population for the period dating April 2002 to March 2003. According to the census for the Western Cape 2001, there were 1.290 710 Coloured/Indian/Asian women (55.35%); 607 040 Black women (26.028%) and 434262 White women (18.62%) residing in the Western Cape. Therefore, the fact that NWSC has a majority of Coloured/Indian/Asian clientele is reflective of the general population within the Western Cape. However, there is inconsistency between the number of Black and White women residing in the area and the number of these women having approached NWSC. This may be due to Black women's relatively disadvantaged social position (compared to whites), which is often associated with reduced access to information about available resources.

The majority of respondents were English speaking (60%), and many of them were able to speak both English and Afrikaans (35%). A small percentage of the women were Xhosa speaking (5%). Respondents' age ranged from the early twenties to the late fifties, with the highest percentage of women being between 30 and 39 years old (42.5%). This is consistent with findings by Orayson & Smith, 1981 cited in Angless (1990) who discovered that women in their 30's seek help more often than women in other age groups.

The majority of respondents were married (65%), and the remaining number either divorced (12.5%) or single (15%). A few respondents were separated from their

partners (7.5%). The majority of respondents were employed (62.5%), whilst 37.5% were unemployed at the time of approaching the centre. Finally, the majority of respondents in this study (87.5%) came into the centre for their counselling session as opposed to receiving telephonic counselling (12.5% of respondents).

3.2 RESULTS

3.2.1 OBJECTIVE 1

Objective 1:

- To explore the needs and expectations of respondents when they approached NWSC

Research questions used to elicit this data:

- What made you approach NWSC?
- What help were you looking for at the time / what were you hoping to receive from the centre?

A. RESULTS

Various needs emerged from respondents' responses to the above questions. These have been grouped into seven themes, namely emotional support, information, legal assistance, someone to speak to the husband, couple counselling, no expectations, and counselling for children. Each theme will be outlined in more detail below.

Emotional Support

Emotional support needs consisted of the following:

- A need for support and counselling – to be understood and listened to, comforted, reassured, and cared for
- A need to talk and to 'let everything out' and to bounce ideas off in a confidential, safe space
- A need to be believed and not blamed
- A need to be listened to by someone objective and neutral, and to speak to someone who has experience in the field of women abuse who would be able to understand what they are going through and guide them appropriately
- A need to rebuild confidence and self esteem.

Information

Respondents' information needs included the following:

- A need to know what to do about the abuse, how to stop it, and to find out what options (assistance; resources) are available
- A need to find out why the abuse is happening, to understand the dynamics of their relationship, and to gain insight into their feelings and responses.

Legal assistance

Needs for legal assistance included the following:

- A need for legal advice, legal information (to be educated regarding their rights) and to be referred appropriately in order to help women stop the abuse.

Someone to speak to her husband

This consisted of the following need:

- For someone to talk to her husband to persuade him to stop the abuse.

Couple Counselling

A need was expressed for:

- The counsellor to work with the woman and her partner

No expectation

The following sentiment was expressed:

- A feeling of not knowing what to expect from the centre and not being sure about what they wanted from their contact with NWSC

Counselling for children

This consisted of the following need:

- A need for help for their children after witnessing the abuse.

Table No. 2: Expectations of the service

Categories	Number of respondents	Percentage
Emotional support	31	77.5
Information	20	50
Legal assistance	13	32.5
Couple Counselling	4	10
No expectation	4	10
Counselling for children	1	2.5
Someone to speak to her husband	1	2.5

B. DISCUSSION

The majority of respondents (77.5%) had a need for emotional support, 50% required information, and 32.5% were in need of legal assistance from NWSC. Ten percent of the respondents had no idea what to expect, and another 10% were hoping to receive couple counselling in order to solve their difficulties. One respondent was hoping to get help for her children whilst another respondent was hoping that the counsellor would speak to her husband to make him stop abusing her.

It is clear from the above table that many women had more than one need. This supports other findings (Harris & Dewdney, 1994) describing how battered women have multiple needs, which in turn require various forms of intervention. The integrated perspective on women abuse similarly advocates taking into account a combination of factors when addressing the problem, and the above findings therefore correspond with this approach.

The high percentage of women hoping to get emotional support corresponds with other documented research which suggest that many battered women report a strong need for emotional support (Harris & Dewdney, 1994; Durra, 1998; Ponton, 2002).

The theoretical framework on systemic therapy (Magill, 1989) shows how couple counselling can effectively treat women abuse and this theory is supported by the fact that 10% of respondents felt that their situation could only be treated if they were to be seen with their partner. NWSC bases its intervention program on the feminist model and does not utilise couple counselling as a method of intervention. The percentage of women hoping to be seen with their partner at NWSC would clearly not have this need met at the centre. Similarly, women who expressed a need for counselling for their children, and for someone to speak to their husband would not have had their needs met by NWSC as these forms of intervention do not fall within the framework of the centre's services.

3.2.2 OBJECTIVE 2

Objective 2:

- To determine what respondents received from the service at NWSC

Research Question used to elicit this data:

- What type of help did you receive from the centre?

A. RESULTS

Respondents reported having received various forms of assistance from the centre, and these have been organised into three broad themes. These themes consist of sub-themes emerging from respondents' descriptions of the services they received from the centre. They include:

Emotional Support, which involved:

- Being listened to, being given an opportunity to talk and express feelings, being supported, reassured, encouraged and being made to feel worthy and important, thereby boosting self-esteem
- Being told that the abuse is not their fault and being believed
- Being understood by someone who has an idea of the trauma and distress they have experienced.

Information Assistance, which involved:

- Being explained the dynamics/cycle of women abuse
- Laying out options and choices in terms of managing the abuse
- Being referred to an appropriate organisation/shelter/ group.

Legal Assistance, which involved:

- Information on how to obtain an interdict, divorce, and financial forms of assistance (e.g. maintenance, pensions)
- Referrals to lawyers, police stations, courts, other legal organisations.

Table No. 3: Services received at NWSC

Categories	Number of respondents	Percentage
Emotional support	37	92.5
Information assistance	27	67.5
Legal assistance	21	52.5

B. DISCUSSION

From the above table, it is clear that many respondents received all three forms of assistance. The majority received emotional support, which is positive in light of the fact that the majority of respondents reported seeking this form of support.

3.2.3 OBJECTIVE 3

Objective 3:

- To determine respondents' experience of the service, i.e. what aspects of the service they found to be helpful and/or unhelpful, and which aspects they felt managed to meet their needs and which did not

Research questions used to elicit this information:

- Did you find the assistance provided by the NWSC to be helpful to you, and if so, in what way?
- What was the most helpful part of the service?
- What was the least useful part of the service?
- Was there anything you feel that could have been offered to you by the centre that was not?

A. GENERAL RESULTS OF HOW RESPONDENTS EXPERIENCED THE SERVICE

Table No. 4: Number of respondents finding the service helpful/not helpful/both

Categories	Number of respondents	Percentage
Some aspects were helpful and others were not helpful	23	57.5
All aspects offered were helpful	13	32.5
Nothing was helpful	4	10

The following discussion will focus on the particular aspects of the service that respondents experienced as helpful and unhelpful.

B. DISCUSSION OF THE HELPFUL ASPECTS OF THE SERVICE

Respondents identified various aspects of NWSC's service as of help to them. These have been grouped into four broad themes, including 1) Emotional support, 2) Information, 3) Legal assistance and 4) Approachability of the centre. These will be discussed in more detail below.

Emotional support

Various sub-themes emerged amongst respondents regarding aspects of the service they perceived to be emotionally supportive, and these are as follows:

Table No. 5: Emotionally supportive aspects of the service

Categories	Number of Respondents	Percentage
Specific skills of the counsellor	33	82.5
Talking about the problem	14	35
Being listened to	13	32.5
Being empowered to make own choices	8	20
Awareness of service for future	5	12.5

Specific skills of the counsellors: The majority of respondents (82.5%) found some of the skills used by the counsellors to be very helpful. Helpful skills were those that facilitated their feeling supported and being able to share their feelings. Some of these counsellor skills and characteristics included:

- Showing an interest in them – some respondents explained how this helped them to feel worthwhile and to believe in themselves again
- Open-mindedness and a non-judgemental stance – this allowed respondents to feel safe enough to share their experiences
- Giving them the time to talk things out – respondents spoke about how meaningful it was to them that the counsellor was patient and did not rush them. This is clear from the following statements of respondents: 'she gave me time and did not chase me away', 'she never put me off', 'she was not in a

hurry', 'she was patient and took her time which made me feel that people out there really do care and this gave me hope', 'time was not an issue'

- Being encouraging, empathic, approachable, attentive, warm and respectful – according to respondents these attributes helped them to 'not give up', especially at a time when they were feeling hopeless, and allowed them to feel comfortable and at ease in the counselling space
- Ensuring confidentiality - this allowed them to trust the counsellor and feel safe enough to share their feelings
- Being believed - a few respondents mentioned that it was important that the counsellor believed them as it allowed them to feel supported and accepted. Being believed appeared to be a novelty for these women
- Conveying an understanding of the phenomenon of women abuse and having worked with other women in a similar situation - this was reassuring for many women as it allowed them to feel less isolated as they realised they were not the only ones in this predicament. A few respondents spoke about feeling really understood by the counsellor. One woman stated 'men don't understand in this way'
- Maintaining objectivity – some respondents said that the objectivity of the counsellor allowed them to recognise all aspects of the problem, including their own part in developing and maintaining the situation.

Other studies have also found these particular skills of the counsellor to be essential in allowing the client to feel supported. For example, Nelsen (1980) explains that a practitioner's attentiveness, non-judgemental attitude, expressed concern and effort to respond helpfully confirm to the client that he/she is a worthwhile human being, adding to their experience of feeling supported, understood and accepted.

Talking about the problem: Thirty five percent of the respondents found 'talking' about their problem helpful, as it allowed them to 'think things through' which alleviated stress and anxiety for them. A few women explained that they had never had an opportunity like this before where they were really able to 'let all there feelings out'. This finding is grounded in psychological theory as presented by Hollis & Woods (1990), who explain that 'ventilation' is a valuable technique entailing a

release or discharge of emotion, which is an important way of reducing the intensity of feelings for clients.

Being listened to: Thirty two point five percent of respondents found that simply being 'listened to' was helpful. It allowed them to feel accepted and to feel stronger. Listening helped one respondent to feel 'different' and it 'lifted her'. Other studies support these findings. For example, Dutton, 1992 cited in Ammerman & Hersen (1999) emphasise active listening and empathic responding when interviewing battered women. The therapeutic effect for a battered women in telling her story to a non-judgemental listener can be very powerful.

Being empowered to make their own decisions: Twenty percent of respondents experienced it as empowering when their counsellors allowed them to make their own decisions. For example, about whether or not they should obtain a protection order. One respondent explained how it made her feel stronger to be able to make a decision on her own. This finding is supported by the feminist theoretical framework, which has as one of its basic principles the notion of empowerment, which entails allowing women to regain control over their lives, resulting in increased self-esteem.

Awareness of the service for the future: Twelve point five percent of respondents stated that after having come to the centre they knew now that there were "people out there that cared". This allowed them to feel safer and not so alone. These results have been found elsewhere in the literature. Kirkwood (1993) explains that when battered women become aware of the availability of support networks they feel less alone and more in control over their situations.

The integrated framework takes into account several factors when attempting to understand women abuse, and one such factor is that of having a strong social network (Stith & Rosen, 1990). Social isolation has been related to spousal abuse (Steele, 1975; Straus et al., 1980; King, 1984; Kosberg, 1985 cited in Stith & Rosen, 1990) and therefore the provision of social support seems to be an important part of an effective treatment programme for battered women.

Information

Respondents experienced various aspects of the information service provided by NWSC to be helpful. Several sub-themes emerged within this theme such as an appreciation for the description of the cycle and nature of women abuse; information about options available to them, and the provision of appropriate referrals.

Table No. 6: Aspects of Information service experienced as helpful

Categories	Number of respondents	Percentage
Description of the cycle and nature of women abuse	10	25
Information on options available	9	22.5
Provision of appropriate referrals	3	7.5

Description of the cycle and nature of women abuse: One quarter of the respondents mentioned that the explanation given to them on the cycle and dynamics of women abuse (via pamphlets and brochures and by their counsellors) allowed them to feel as if it the abuse was not their 'fault' (many had believed they were to blame for the abuse) and provided insight for them into the dynamics of their relationships, which reduced their feelings of shame and guilt. One respondent said that the advice and information she received allowed her to feel empowered - if the same situation happened again she 'would now know what to do'. Therefore, the imparting of information on the dynamics of abuse to the respondents helped them to feel validated, and to become conscious of the displacement of blame onto themselves for the violence.

Information on options available: Twenty two point five percent of respondents mentioned how their counsellors guided them with regards to possible courses of action that could be taken, and allowing them to recognise that there were possible 'ways out' and options to deal with their situation. For example, one respondent said 'my counsellor helped me to identify what I was going through and gave me alternatives and choices which helped'. This finding is supported in the literature. Pressman in Pressman et al. (1989) describe how it empowers battered women when therapists help them to become aware that they have choices and can control their own lives.

Appropriate referral: Nelsen (1980) explains that to function optimally in a given set of circumstances, individuals need to be given relevant information, or be told which already obtained information would be useful in a given situation, thereby allowing them to have greater influence over their environments. This was found in the present study whereby a small number of respondents (7.5%) explained that appropriate referrals were made by counsellors to certain organisations which helped women deal with their situations. For example, one respondent was referred to a shelter, which she said was helpful as it ‘shocked her husband into behaving and made him see she would take a stand’.

Similar results have been found in other studies, whereby respondents experienced referrals to external agencies as invaluable in assisting them to overcome the obstacles they faced (Durra, 1998; Ponton, 2002). The integrated framework recognises that abused women have several different needs, and would therefore require the services of various different agencies and sectors. Referrals to other services would therefore be supported by this framework.

Legal assistance

Respondents found various aspects of the legal service provided by the centre to be of help. These included the following:

Table No. 7: Helpful aspects of the legal service

Categories	Number of respondents	Percentage
Information on how to obtain an interdict	11	27.5
Co-ordination of legal services	6	15
Appropriate referrals	6	15

Various authors have found that where police, legal officials, mental health and health professionals have attempted to work together to provide a comprehensive range of services to battered women, interventions have proved to be more effective (Fusco, 1989 cited in Pressman et al. (1989); Artz et al. (2001). The integrated perspective

combines aspects of the psychological, sociological and socio-cultural approach in its attempt to meet battered women's needs, and it would therefore support the close working together of various different sectors to assist these women.

In this research, the following results indicate how some respondents experienced NWSC to operate cohesively with the various different helping sectors, allowing them to feel contained and supported.

Information on how to obtain an interdict: Twenty seven point five percent of respondents explained how interdicts/protection orders suggested to them by NWSC had helped to stop the abuse. One respondent explained that even though she never followed through in obtaining her protection order, the letter given to her by her counsellor was enough to put a stop to the abuse, as her husband was terrified that she would eventually use it. Another respondent explained that she had attempted to obtain an interdict directly from the police station and this had been a degrading and traumatic experience for her, as she had to wait for a long period of time, and received an unsympathetic response from the staff. She later went to the NWSC and was given information on how to get an interdict via a shorter route through the Family Court, and this provided enormous relief for her. It appears therefore, that for some of the respondents, information on how to obtain an interdict, and the acquisition of one, allowed these respondents to have some control over their situation.

Co-ordination of legal services: One of the sub-themes emerging from the interviews was respondents' (15%) difficulty in obtaining an interdict from the police on their own, and that the counsellor at the NWSC helped to facilitate this process for them. One respondent explained how she had not been taken seriously by the police, due to the police being friendly with the abuser. Only once the counsellor phoned the superintendent at the police station was she taken seriously and assisted. It appears that these women felt supported and were empowered by the centre when a co-ordination between NWSC and the various sectors took place. Therefore, change occurred for these respondents when NWSC took direct action to alleviate the problem.

Appropriate referrals: Some respondents (15%) felt that they were referred appropriately with regards to their legal needs. These included being referred to organisations that could assist them in obtaining a divorce, referrals to lawyers and organisations that could inform them of their legal rights, and steering them in the right direction to obtain grants and maintenance.

Approachability of the Centre

This theme relates to how respondents experienced the centre generally. Only eight respondents commented relevantly in this theme. Various sub-themes emerged which indicate that respondents found specific aspects of the centre itself very helpful, thereby adding to their positive experience there. These are tabulated below:

Table No. 8: Approachability of the centre

Categories	Number of respondents	Percentage
Atmosphere at the centre	4	10
Responsiveness	3	7.5
Affordability	1	2.5

Atmosphere at the centre: According to Hill & Keen (1993), a centre for battered women should above all portray a relaxed and friendly atmosphere so that people can feel comfortable and cared for. NWSC appears to have supplied these necessary ingredients for 10% of the respondents who described the atmosphere at the centre as friendly and safe, enhancing their positive perceptions of the service.

Responsiveness: Three respondents expressed an appreciation for the centre's immediate response to their call for help, as it allowed them to feel supported and reduced them of the acute anxiety they were experiencing. Others support this finding, such as Roberts & Roberts (1990), who state that attending immediately to battered women in crisis situations can do much to alleviate their emotional distress.

Affordability: One respondent found the centre to be financially accessible allowing her to feel supported and free to utilise the service. Other studies have also shown how affordability can be an important factor when seeking help from an organisation.

For example, Harris & Dewdney (1994) explain that people tend to seek help that is the most accessible, and affordability is one factor allowing for ease of access.

C. DISCUSSION OF NON-HELPFUL ASPECTS OF THE SERVICE

A number of respondents reported having experienced some aspects of the service at NWSC to be unhelpful and/or unsupportive, and mentioned services that could have been offered by the centre that were not. These have been grouped into four themes consisting of 1) Emotional support, 2) Information 3) Legal assistance 4) Approachability of the centre. Each theme will be discussed in detail below with a description of the sub-themes emerging within each theme.

Emotional Support

This theme includes aspects of the emotional support service offered by NWSC that were experienced by respondents as being unhelpful, resulting in their emotional needs not being met. These have been divided into the following sub-themes:

Table No. 9: Unhelpful aspects of 'emotional support'

Categories	Number of respondents	Percentage
Counsellor characteristics	9	22.5
Independent decision-making	7	17.5
No follow up	5	12.5
The need for other forms of counselling	4	10

Counsellors Characteristics: Almost one quarter of the respondents mentioned certain issues arising with their counsellors causing them to feel misunderstood, unsupported and unattended to. To note, some respondents found some of the skills used by their counsellors to be helpful whilst experiencing other skills or methods used by them to be unhelpful. This explains why there is an overlap in the figures representing those that experienced counsellors skills or characteristics to be helpful (82.5%) and unhelpful (22.5%).

Some of the issues mentioned by respondents include a feeling of being rushed by the counsellor, making it difficult to open up thereafter. Two respondents felt their counsellor had showed them no physical warmth, which they really needed at the time to feel comforted. Another two respondents perceived NWSC to have been more concerned about getting their money from them than their feelings. One respondent explained how she phoned in a crisis and was told she could only come in if she paid a certain amount, resulting in her experiencing the centre as cold and unsupportive, and causing her not to return for further intervention.

Further examples include two respondents who experienced their counsellor as being 'pushy', urging them to leave their husbands, which they were not ready to do at the time, leaving them feeling uncomfortable and confused. One respondent said that her counsellor made her 'feel stupid for still being with her husband', causing her to feel ashamed. As previously noted, battered women often only want the abuse to end, not the relationship (Fedler, 1993 cited in Human Rights Watch/Africa, 1995). When battered women do not want to leave their partners and counsellors encourage them to leave, it is likely that these respondents will experience the service negatively.

As described in Chapter Two, various factors are considered by battered women when/if deciding to leave an abusive relationship (Groenewald, 2000/2001). Battered women may face social isolation, financial problems, challenges negotiating the helping network, as well as difficulties establishing new intimate relationships. Social isolation and deprivation have profound implications for the experience of a distorted reality and loss of identity. For battered women, their isolation intensifies their sense of confusion about reality (Groenewald, 2000/2001). These are some of the factors which may have contributed to these respondents ambivalence when deciding how to manage the abuse in their lives, and sensitivity around this indecision would have been required from those assisting them.

One person mentioned the fact that the counsellor was the same age as her and expressed concern about the counsellor's ability to really understand her situation. Other studies have revealed similar sentiments, for example, Durra (1998) found that for some of the women aged between 35 and 55 years there was an awareness of the counsellor's younger age, and an expressed preference for older counsellors.

A small number of respondents (2) felt that they had been referred to other organisations (for example to a clinic for depression and to ALONON) before really being given a chance to be heard by their NWSC counsellor, and felt that NWSC could have assisted with the aspect of the abuse in their lives before referring them to other organisations. One woman had a very supportive telephonic counselling experience with a counsellor, however, felt that the counsellor never offered her the opportunity to come in and meet with her thereafter. She felt that this would have enhanced the positive experience for her.

Harris & Dewdney (1994) talk about information transfer failures which include situations whereby a person in search of information locates a potential source of help, and access to that help may be denied or impaired by roadblocks arising due to problematic exchanges with those providing the assistance. Harris & Dewdney (1994) explain that the helper may be confused by the request for help because it may not have been communicated clearly by the help-seeker, and/or the exchange may have been brought to a close prematurely because the helper thought they knew what the help-seeker wanted, and was quick to give unwanted or unnecessary referrals. In some instances, the problem arises because the help-seekers' expectations of what an agency can provide are at odds with what that agency expects to provide.

Whether these respondents who had felt they had been dismissed prematurely from NWSC had unrealistic expectations of the service, and in fact another agency would have been better suited to their needs, or whether the counsellor had assumed too quickly that they needed to be referred out, points to the fact that there were possibly communication failures between the two parties in these particular cases.

According to Bacal (1995) the concept of transference in the therapy process is regarded as the displacement of feelings, thoughts, defences and behaviour, which were initially experienced in relation to significant figures of childhood, onto the relationship with the therapist. Counter-transference on the other hand, is regarded as the totality of the therapist's feelings in relation to the patient and as the problematic aspects of the therapist's feelings in relation to the patient. In other words, counter-transference can refer to the activation of the therapist's unresolved or unconscious

conflicts or concerns (McCann & Pearlman, 1990). According to Bacal (1995) there are two views on transference and counter-transference. One is that they are an impediment to therapy, whilst the other view argues that it may serve as a major vehicle for the intervention process. In order for counter-transference to enhance the relationship, the therapist should understand his/her reactions and the reactions of his/her client, and then to use them to enhance the therapeutic process.

It is important to understand transference and counter-transference as a phenomenon in therapeutic relationships, as it is very possible that some of the respondents' reactions to the counsellors at NWSC, and visa versa, were partly as a result of the transference process. It may be that some of these respondents' perceptions of counsellors' unsupportive stances towards them may be as a result of unprocessed transference and counter-transference. In this case, the fact that the respondents had only one session with the counsellor rendered it difficult for the two to develop insight into the reactions they were having to one other, and then to be able to work through these in a way that may enhance the therapeutic process.

When attempting to deal with women abuse, the integrated theoretical framework takes into account, amongst others, psychological theories which consider individual attributes in the development of relationships (Westhues, 1989). Therefore, the use of transference and counter-transference theories when working within this framework would be relevant, owing to their focus on intra-individual factors, and the impact of these factors on relationships.

Independent decision-making: A sub-theme expressed by 17.5% of the respondents suggests that they found having to make their own choices and decisions about how to deal with the abuse difficult. They seemed to feel that just talking about the situation was a waste of time and what they really hoped for was to be told what to do. These sentiments are clearly visible from the following statements of respondents, 'talking did not help to solve the problem', 'there is so much the centre can do and no more, the centre is unable to help you unless you are able to help yourself', 'it is easy to talk and to be listened to, but this doesn't really help'.

This finding contradicts those findings mentioned above under 'helpful aspects of the service - emotional support (being empowered to make own choices) - where some respondents found being given the opportunity to make their own decisions empowering (20% of the respondents). It seems that some individuals experienced this positively whilst others did not. A few respondents did say that at the time they experienced this as a hostile and 'tough love' approach, but in retrospect recognised the importance of them being given the opportunity to make those decisions themselves.

Various authors (Kirkwood, 1993; Painter & Dutton, 1985 cited in Harway, 1993) when describing the dynamics of control in abusive relationships between intimate partners, explain how women begin to lose touch with their own needs and perceptions, influenced by the demands and perspectives of their partners. These women become less capable of existing independently and increasingly dependent on a dominant person. Based on these findings, women who have become used to others making decision for them, would then find it difficult being awarded this power suddenly by the counsellors at NWSC. Their difficulty in making decisions may also be a reflection of the ambivalence described above, which many battered women experience, when having to make choices about how to deal with their abusive relationships.

No follow-up: A sub-theme emerging amongst respondents (12.5%) was the need for a follow-up phone call from their counsellors. It seems that a follow-up phone call would have reduced feelings of isolation and would have helped women to feel supported knowing that someone out there cared and was interested in them.

According to Ponton (2002), central to participants' experiences of increased social support and reduced isolation was the ongoing contact they had with NWSC, and this was often experienced in terms of telephonic contact initiated by the counsellors. Therefore, it seems that a follow up phone call from the centre would have helped to alleviate some of the distress for these women.

The need for other forms of counselling: A sub-theme expressed by 10% of respondents was the need for their counsellor to call their partners into the session

with them in order to address the problem. One of the reasons for this was that it would be difficult for the women to confront the man on her own, and that they would have liked support from the counsellor in addressing these difficult issues with their partner. For example, one respondent stated 'I had to go and talk to him on my own and I needed help to do this as I am a very soft person'. Other reasons for needing the counsellor to call the man into the session was to receive general marital counselling, and for the man to get help for his own personal problems and abusive behaviour.

One respondent felt that spiritual counselling should be offered by the centre whilst another felt that family counselling should be provided in order to address the problem systemically – that all members of the family get affected by the abuse and all should be offered counselling and support to deal with the specific issues arising from this phenomenon. The integrated framework would support these findings as it indicates that there are various different dimensions that would need to be considered for intervention, such as the family, individual, and the spiritual realm. However, the NWSC does not provide systemic counselling, as it works strictly from a feminist framework, where the focus is placed on the woman and changing faulty societal structures.

Information

This theme is comprised of sub-themes emerging from respondents regarding information they felt should have been provided to them by the centre but was not. These sub-themes include; failure to refer to appropriate services, and information not offered by the centre.

Table No. 10: Unhelpful aspects of the Information service provided by the centre

Categories	Number of respondents	Percentage
Failure to refer to appropriate services	4	10
Information not offered by the centre	4	10

Failure to refer to appropriate services: Some respondents (10%) expressed concern that they had not been referred to shelters or to group therapy programmes.

One respondent said 'I was in no position to go home and I should have been offered a safe place to go to'. Two respondents commented that they had not been told about group therapy offered by the centre and felt that they could have benefited from this service.

Information not offered by the centre: Four respondents felt that information that should have been offered by the centre, was not. Two respondents felt that the centre needed to offer job training and employment opportunities, as without work many women are caught in the cycle of abuse without a means of escaping. Some women explained that once they found jobs it was easier for them to leave the abusive situation and a few respondents spoke about how difficult it was to find employment. Many studies have also shown that one of the common needs expressed by battered women is for assistance in finding employment and skills training (Bollen et al., 1999; Harris, 1988 cited in Harris & Dewdney, 1994; Roberts & Roberts, 1990).

Two women felt that the centre should provide a form of assistance for their children, for example, day care facilities. They explained how difficult it was for them to firstly come to the centre and leave their children at home, and secondly, to obtain employment without suitable care facilities for children.

The integrated perspective on women abuse places an emphasis on tertiary services which would include providing accessible, affordable child care and access to employment opportunities (Westhues, 1989). The above findings, whereby respondents indicated a need for employment and child care services, would be supported by this model as it takes cognisance of the fact that various different forms of assistance are required to alleviate the difficulties facing abused women.

Legal assistance

Certain aspects of the legal service were found to be unhelpful and/or inappropriate. Various sub-themes emerged in this respect and these will be outlined below:

Table No. 11: Unhelpful aspects of legal advice given

Categories	Number of respondents	Percentage
Lack of follow-up from other sectors	6	15
Inappropriate/insufficient information provided	10	25

Lack of follow-up from other sectors: One of the sub-themes emerging from 15% of respondents was the difficulty many women face in getting the legal advice obtained at the centre followed up by other sectors such as the police or courts. Some respondents described how gruelling the process can be to obtain an interdict (for example, waiting in long lines to be told they should be somewhere else) and how this often understandably results in women giving up. According to one woman, 'if you are not strong and determined it will be very difficult to follow it through'. Recommendations were made by several respondents for counsellors to actually accompany the women to obtain the interdict to avoid obstacles and to support her through this process, and one respondent suggested that there be increased communication between the different sectors (social services, police and legal systems).

Another example of legal remedies suggested by the centre which were not followed up by other sectors, is the police's dealings with abusive situations once women have obtained an interdict. One woman explained how the interdict did not help her as on several occasions she had phoned the police when her husband broke the interdict and the police either took too long and the damage had already been done (the abuse had taken place), or the police would not call back.

Various other studies have reported women's dissatisfaction with the manner in which the police have responded or failed to respond to their problems (Johnson, 1985; Harris, 1988 cited in Harris & Dewdney, 1994; Maconachie et al., 1994) and the great difficulty women have experienced when attempting to obtain legal assistance (Ponton, 2002; Human Rights Watch/Africa, 1995). Therefore, the experiences of the women in this study are congruent with other studies in which battered women have experienced ineffective collaboration between the police and legal officials.

It seems that when legal remedies offered by NWSC failed as a result of police or court limitations, it resulted in some of these women feeling hopeless and helpless, impacting negatively on their overall perception of the help provided by the centre.

Inappropriate or insufficient information given: A sub-theme emerging amongst 25% of respondents was that certain aspects of the legal advice offered to them was inappropriate/unrealistic, and/or that they felt they could have been given more legal assistance than was offered. Two respondents suggested that advice given to them to get their children returned to them was useless. For example, one woman was told to go to the Supreme Court, which she would not have been able to afford, while one respondent felt that the suggestion of obtaining a court order was inappropriate, as she had never intended to leave her husband.

Two respondents were reluctant to take legal action in fear of what might happen to their children or to themselves. For example, one respondent said that 'it is all well and good telling me to go the legal route when I am the one who has to deal with the angry man when he comes out of jail'. This sentiment has been found elsewhere in the literature, for example various studies such as Hoff, 1990, Marin, 1985, Pahl, 1985 cited in Kirkwood (1993) show that women who have recently left their abusing partner experienced a sense of vulnerability due to the threat of further abuse from their partners.

In terms of insufficient information provided by the centre, one respondent stated that she felt her counsellor could have given her more input with regards to her rights and another felt that more legal representation should have been offered to her by the centre to help her get her children returned to her.

Information transfer failures include situations in which either communication between the helper and help-seeker is unclear or misinterpreted, or where the help-seeker's expectation of what an agency is able to do is incongruent with what the agency actually does, which leads to help-seekers feeling frustrated and hopeless (Harris & Dewdney, 1994). It is possible that this was another sub-theme where

information transfer failures arose between NWSC and these respondents, resulting in them feeling unfulfilled.

Approachability of the centre

Sub-themes emerged regarding respondents’ negative experiences of the centre generally, which impacted negatively on their overall perception of the service. These will be discussed below.

Table No. 12: Unhelpful aspects - Approachability of the centre

Category	No. Respondents	Percentage
Unhelpful aspects of the centre affecting approachability	10	25

Unhelpful aspects of the centre affecting approachability: One quarter of the respondents found certain aspects of the service generally to be unhelpful and unsupportive. The long waiting hours at the centre was a factor mentioned by five respondents as being problematic. For example, one respondent explained how she had waited several hours to see a counsellor, and another complained that she had phoned in a crisis and was told to wait for the next day to speak to a counsellor. Some of these respondents expressed some understanding of the reasons for the limitations of the service and explained how they were eventually seen to and assisted.

One respondent felt that the location of the centre was difficult if one was coming from far and recommended that there be smaller centres in various locations in the Western Cape. Another respondent felt that it would be more viable for women to come in for help if the centre was open in the evening, especially for those who work. Seven point five per cent of the respondents perceived the atmosphere at the centre to be cold and unfriendly. These respondents felt unwelcome when they arrived, impacting negatively on their general experience at the centre.

Various other studies such as Barugh, 1984, Warner et al., 1973, Dervin, 1976, Levinson, 1988 cited in Harris & Dewdney (1994) have also shown how factors such

as inconvenient hours of operation and long waiting lists can create obstacles for help-seekers, reinforcing feelings of isolation and helplessness.

3.2.4 OBJECTIVE 4

Objective 4:

- To explore respondents' reasons for not returning to the centre

Research Question used to elicit this information:

- Would you return to the centre if the need arose?
- Were there any particular reasons for not returning to NWSC for further assistance?

A. NUMBER OF RESPONDENTS RETURNING TO NWSC SHOULD THE NEED ARISE

Table No. 13: Number of respondents who would return to NWSC for further assistance

Categories	Number of respondents	Percentage
Would definitely return	26	65
Would not want to return	8	20
Uncertain	6	15

Those respondents indicating that they would return to the centre should the need arise included those who felt that they would be returning to the centre shortly, as well as those who did not think they would need help again but regarded the service highly, and would definitely recommend it to others in need.

The sub-themes emerging from the theme 'Uncertain' included feelings such as 'being afraid to open up again', 'feeling unsure about how they wanted to proceed with the situation themselves' and 'feeling ambivalent about the service they had received from the centre and feeling hopeful that things had changed'. Therefore, this theme does not necessarily only indicate negative feelings about the centre, but reflects respondents' differing individual circumstances and responses to trauma.

Those who said they would never return were clear that they had had a negative experience or that the service was unable to meet their needs and therefore would not consider approaching NWSC again.

B. REASONS FOR NOT RETURNING TO NWSC

Nine themes emerged regarding respondents reasons for not returning to NWSC. These will be discussed in more detail below.

Table No. 14: Reasons for not returning to NWSC

Categories	Number of participants	Percentage
One session was sufficient	20	50
Negative experience at the centre	9	22.5
Received counselling elsewhere	6	15
Talking is not going to help make these decisions	6	15
Not feeling ready to make changes	6	15
Insufficient knowledge	4	10
Time constraints	3	7.5
Difficulty in asking for help	3	7.5
Not her own responsibility	1	2.5

One session was sufficient: Half of the respondents did not return to the centre as they felt that what they had received from their once-off session was enough to satisfy their needs, and/or that things had improved since their session and they therefore did not necessarily need further intervention. The following statements of respondents reflect these feelings:

‘Things got much better’, ‘I felt okay after that one session’, ‘I felt stronger’, ‘I took the action recommended by NWSC to get a divorce and things got better’, ‘all I wanted was to know where I stood and I got that advice in the one telephone call’.

There is a discrepancy between the figure representing women who said that one session was enough to help (50%) and those who said that they would definitely return to the centre (65%). This is due to the fact that the remaining 15% of the

women who said they 'would definitely return to the centre', fell into another theme in this category. For example, they experienced the service positively, however, did not return either due to having received counselling elsewhere, or not having time to return, or having had difficulty asking for help.

Negative experience at the centre: Twenty two point five percent of respondents indicated that the service had either been unhelpful and/or unpleasant, resulting in them having little desire to return to the centre for further assistance. Some of the responses indicating this sentiment included statements such as 'I felt rushed by the counsellor and I would have had to start with a new one if I went back and I did not have the energy for that', 'The interdict suggested by the centre never helped so I thought it was pointless going back', 'She told me I would have to bring in money which I did not have before even listening to me and this made me feel as if they did not really care about me'.

Whilst 10% of the respondents indicated that they found nothing helpful about the service, the majority of women portrayed in this theme reflect some of those respondents who found some aspects helpful whilst simultaneously experiencing others negatively. It seems that the unhelpful aspects of the service tainted their overall experience of the centre, resulting in them not wanting to return.

Received counselling elsewhere: Fifteen percent of respondents did not return to the centre as they had managed to attain counselling elsewhere, whether this had come about through a referral from NWSC to these specific agencies (FAMSA, ALONON) or whether the women had found these services themselves. For example, one respondent indicated that she had received 'couple counselling from a therapist at the hospital which really helped and therefore did not need to return to the centre'. Therefore, respondents' need for support and help was met elsewhere, possibly eliminating their need for this form of assistance from NWSC.

Talking is not going to help make these decisions: These respondents (15%) felt that they had received options about what to do in their session with their counsellor and believed it was now up to them to decide which way to go. They did not feel there

was a purpose in discussing it further with their counsellor. The following statements of respondents indicate these sentiments:

‘Talking is not going to solve the problem’, ‘I knew I had to make my own mind up, the centre was not going to do it for me’.

These statements indicate that these respondents did not understand the counselling service to be a longer-term process of talking and working through their feelings, but rather a situation which facilitated quick decision-making, on their own. This may be due to the information transfer failures described by Harris & Dewdney (1994) in that counsellors’ possibly had not explained the nature of the counselling service to respondents, or respondents may have misinterpreted information given to them by their counsellors.

It may also indicate respondents’ frustration with having to make these decisions on their own, and that they were possibly hoping the counsellors would offer instant solutions to their problems, or make decisions for them (as discussed above under unhelpful aspects of the emotional service provided). It is also important to note that due to this being respondents first counselling session, they needed time to process the information freshly received. It would be unrealistic to expect them to make immediate decisions.

Finally, it could also be a reflection of the ambivalence some respondents felt in embarking on the process of help-seeking. As discussed in Chapter Two, battered women often need time to weigh up the possible risks when making decisions about which options to take (Kirkwood, 1993; Harris & Dewdney, 1994).

Not feeling ready to make changes: It emerged that 15% of respondents did not return to the centre as they did not seem ready to challenge the abuser for various reasons, such as financial concerns and/or fears about their children’s safety. Concerns were also expressed about their partner’s well-being, reflecting feelings of continued emotional attachment to their partners. These women therefore decided to maintain the status quo in their relationships. Some of the statements emerging from this theme included the following: ‘I am not ready to make decisions about leaving him as I am concerned about my children and therefore I have not been back as I am

still unsure about what to do' 'I felt my husband needed my support as he lost his job and I felt I needed to be there for him'.

Various studies such as Vogelmann & Eagle (1991); Human Rights Watch/Africa (1995) and Maconachie et al. (1993) explain how battered women often find it difficult to leave abusive relationships because of financial dependency on their partners and concerns about the well-being of their children. These results relate to the findings here, which indicate how some of these respondents experienced real fears and concerns regarding how their children and themselves would manage financially if they were to leave the abuser, and that they felt time was required to consider these options before continuing the process at NWSC.

Insufficient knowledge: Ten percent of the respondents said they did not return to NWSC, as they did not realise they were able to come back for more sessions and/or they had not been offered a follow-up appointment. A few respondents who were immediately referred to other agencies expressed the same sentiment in that they did not feel there was an opportunity thereafter to return to the centre.

Once again, it appears that the information transfer failures described by Harris & Dewdney (1994) may have caused these respondents to misinterpret the nature of the service, or may indicate the counsellor's failure to clarify the nature of the service available. It is clear from some of the above themes that some respondents were under the impression that the counselling service was not a long-term process, and that the service at NWSC was all about giving them options, from which they had to decide themselves, rather than using the centre to support them through the process of making these decisions.

Time constraints: Seven of the respondents mentioned time constraints as their reasons for not returning to the centre. The women reflected in this theme indicated that they found it very difficult taking time off work to come and see a counsellor. This finding is supported by other studies, for example, Maconachie et al. (1993) who explains how a lack of time and money can make it increasingly difficult for women to reach agencies.

Difficulty in asking for help: In Chapter Two under processes of help seeking, it states that battered women may decide not to seek help due to fears that they may be regarded as failures (Dervin et al., 1983 cited in Harris & Dewdney, 1994). This finding emerged in the present study amongst some of the respondents.

It appears that for some of the respondents, to reach out for assistance is to reveal weakness and is a sign of not being able to cope. For example, one woman said that she wanted to see if she could cope on her own and that is why she never returned. Another spoke about how hard she finds it to accept help from others, while a third mentioned her fear of being judged by the counsellor for returning without having managed her situation on her own.

Not her responsibility: One respondent (2.5%) mentioned as her reason for not returning that she felt it was her ex-husband who needed help and not her. She did not feel it was her responsibility to deal with the situation.

3.2.5 OBJECTIVE 5

Objective 5:

- Factors assisting coping generally.

Research questions used:

- What has helped you to cope with and to manage your situation?

A. RESULTS

Nine themes emerged with regards to factors that have helped respondents to cope with and manage their situations. This discussion attempts to exclude aspects of NWSC's services that respondents experienced as beneficial so as to identify interventions and areas of assistance that NWSC may not include in their areas of service, that potentially may assist them in meeting battered women's needs. These have been tabulated and will be discussed in more detail below. Some respondents mentioned more than one factor as having assisted them.

Table No. 15: What has helped respondents to cope with their situations

Categories	No.	Percentage
Counselling	12	30
Initiating process of separation/divorce	10	25
Improved communication skills and conflict resolution in relationship and becoming more assertive	7	17.5
Religion	5	12.5
Nothing has helped	4	10
Other incidents/forms of assistance not mentioned elsewhere	4	10
Employment	4	10
Changes made by abuser	4	10
Family support	3	7.5
Parenting skills and help for children	1	2.5

B. DISCUSSION

Counselling: A significant percentage of respondents (30%) mentioned counselling received outside of NWSC as a factor that helped them to manage the abuse. In this theme, NWSC had only referred two of the respondents to the resources listed below. These included:

- Two respondents received religious counselling with their partner or on their own
- General counselling (at work, at a hospital, clinic or privately) - five respondents explained how their counselling sessions helped them to understand the background to their circumstances, which helped them in dealing with their abusive situations. For example, one respondent spoke about how counselling had helped her to deal with childhood issues and to recognise how these have played a part in her current situation.
- Psychiatric assistance – two respondents mentioned how support from their psychiatrist had played a part in helping them manage their situations, and one respondent mentioned how medication had assisted her in coping.
- ALONON – one respondent spoke about how this organisation had provided her with ways of managing to deal with her husband who was an alcoholic.

- Marriage counselling – two respondents spoke about how couple counselling had helped them in dealing with issues in their relationships. One respondent explained that this form of counselling had taken on the role of a ‘watchdog’ – her husband tended to stop abusing her when he knew someone was ‘watching’ over him.

Initiating a process of separation/divorce: One quarter of the respondents explained how the act of initiating the process of divorce, moving out for a while or even threatening to leave had been a way to stop the abuse and get their partner to reflect on his behaviour. In these cases, respondents had not received input from NWSC to initiate these processes.

Improved communication/conflict resolution skills and becoming more assertive: Seventeen point five percent of respondents spoke about how they had learnt more positive ways of communicating with their partners and resolving conflict, and that this helped them to deal with issues in their relationship. Various processes allowed respondents to attain these tools, for example, their session at NWSC or initiating legal procedures against their husbands. The following statements of respondents indicate how the shift in their communication styles helped to improve the dynamics of their relationships:

‘Standing up to my ex really helped’, ‘I became firmer with him’, ‘The communication really improved in our relationship - I spoke to him after going to NWSC and now we talk daily about problems which has helped us’, ‘I stopped screaming at him, and we started to speak to one another’, ‘I started telling my husband what was bothering me instead of bottling it up inside of me’.

Religion: Twelve point five percent of the respondents indicated that having a belief in God and praying helped them to cope with their situation. This has been found elsewhere in the literature. Makofane (2002) revealed that the majority of battered women in her sample sought solace in prayer, and discovered that their strongly held beliefs sustained them through the difficult times.

Nothing has helped: A feeling emerging amongst four respondents (10%) was hopelessness and frustration with the helping sectors' inability to effect change for them. It is interesting that all of these respondents' needs had centred around child custody issues. The theme emerging here reflects these women's frustrations with the helping agencies' failure to assist them in changing or coping with specific situations. Some of the respondents' statements in this theme include:

'I am still struggling to find work and my child is still living with my mother as I cannot afford to keep her', 'my child is still not living with me', 'the police do not help' ' the High court is too expensive, so I have not been able to try to fight for my children'.

Other incidents or forms of assistance not mentioned elsewhere: Other incidents or forms of assistance mentioned by 10% of respondents which helped them to manage and limit the abuse in their lives included the following:

- One respondent identified the shelter system, referred to her by Stikland Hospital, as a major source of support in helping her to cope with her situation as she was able to share her feelings with people in the same situation to herself, relieving anxiety and giving her strength to proceed.
- Moving to another neighbourhood where there were less negative influences over her husband, specifically with regards to his peer group with whom he would consume alcohol on a regular basis, was in one respondent's opinion a factor helping to reduce the abuse in their relationship. The integrated perspective on women abuse recognises the impact of the larger socio-cultural context on shared values and norms within the family (Stith & Rosen, 1990). This finding would support this notion - moving to a new environment with different influences is likely to have an effect on the dynamics within the family.
- One woman in the study explained how her daughter's attempted suicide forced her husband to reflect on his abusive behaviour, and the impact that it had on the whole family.

Employment: The integrated framework recognises various factors that may increase the likelihood of violence occurring, including personal resources such as financial means (Stith & Rosen, 1990). Ten percent of the respondents in this research believed that finding work helped them to cope with their situations, as it provided them with financial security, independence and assisted in building their self-esteem. This finding is therefore consistent with the integrated approach to understanding battered women.

Changes made by the abuser: Another 10% of the respondents mentioned how their partners had made positive changes with regards to their behaviour, which in turn had a positive effect on their relationship. In most cases, this was due to respondents confronting issues with their husbands. For example, one respondent mentioned that her husband had started to drink less alcohol, reducing his aggression. Another respondent spoke about how her husband had started to show more interest in their child since couple counselling, which helped to alleviate some of the stress in their relationship.

Family support: Seven point five percent of the respondents mentioned their families as sources of support in helping them manage the abuse. One respondent cited her mother's support as having been a major resource, and others explained how general family support and encouragement had played a part in helping them through their predicament. Once again, this finding emulates the stance taken by the integrated framework on women abuse which takes cognisance of, amongst other factors, the importance of a strong social network in order to prevent family violence, and for the treatment of the phenomenon.

Parenting skills/ help with children: One respondent identified the assistance she received from social workers regarding the management of her child to be of great help to her in coping generally with her situation. The social worker taught her parenting skills, enabling her to be firmer with her son and he was placed in boarding school, which according to her 'gave her peace of mind'.

The integrated theoretical framework which takes into account a combination of factors when attempting to understand and treat women abuse, would support the findings in this

category as they indicate that a variety of factors assisted battered women in coping with their situation, occurring on an individual, familial, sociological, and economic level. The above discussion shows that these factors significantly assisted respondents in helping them cope with the abuse in their lives, and suggests that they should be taken into account when attempting to address battered women's needs.

3.3 CONCLUSION

The data reveals that the majority of women approaching NWSC had multiple needs, and the most common of these was a need for emotional support. Respondents' experiences of the services provided by NWSC have been broadly categorised into emotional support, information, legal assistance and the general approachability of the centre. The majority of respondents found some aspects of the service to be helpful while simultaneously experiencing other aspects to be unhelpful or lacking.

In terms of the emotional support provided, it appears that for many respondents simply being listened to, having a space to share feelings, and knowing there was 'someone out there that cared' helped them to feel supported. A smaller percentage of respondents did not feel emotionally supported by their counsellors either due to a lack of follow-up, a perceived lack of warmth or understanding of their needs, being made to make their own decisions, and not being offered other forms of counselling such as couple counselling.

Some respondents experienced aspects of the information service provided by NWSC to be useful and effective, such as the description of the cycle/nature of women abuse, information about what options are available to them and referrals to appropriate agencies. Other respondents (a smaller percentage) found this service to be unhelpful as they felt that certain information, services and/or referrals that should have been offered to them were not, such as linking them to employment or childcare facilities.

With regards to the legal service provided by the centre, the majority of respondents experienced the service as helpful. Helpful aspects included obtaining information on how to get interdicts, appropriate referrals to legal organisations, and NWSC'S assistance in helping them to negotiate the broader legal and police sector. On the contrary, some respondents perceived the centre to have offered them inappropriate legal advice,

insufficient support, and experienced a lack of co-ordination between NWSC and other sectors such as the police or legal system.

In terms of the centre's general approachability, some respondents experienced this positively, specifically with regard to its friendly atmosphere, affordability and because staff responded immediately to their needs. A small percentage, on the other hand, did not perceive the centre to be approachable. Reasons for their perceptions included long waiting hours, an unfriendly atmosphere, and practical limitations such as location and operating hours.

The majority of respondents indicated that they would return to the centre again should the need arise. Various motives were given for not returning to the centre. Half of the respondents felt that one session had been enough to help them. Others specified reasons for not returning such as having received counselling elsewhere, feeling that talking was not going to solve the problem, and that they had not know that they could come back for more sessions. A strong theme emerged regarding respondents' belief that the counselling service was a short-term process, including a once-off session where their options were given to them, and they had to make decisions. Some respondents did not return to the centre due to time constraints, difficulty in asking for help and not feeling ready to make decisions for various reasons such as fears regarding their financial situations. Finally, a percentage of respondents chose not to return due to their negative experience at the centre.

Demonstrated in the findings was a sub-theme reflecting respondents' ambivalence in making decisions about how to go about managing their abusive relationships. It was also found that there was a lack of clarity at times in messages between the counsellors and respondents and the negative impact this had on their perceptions of the services received from NWSC.

Lastly, respondents described various other forms of assistance that helped them to cope with their situations. These included family support, finding work, learning more positive communication skills, other forms of counselling such as couple counselling, religious guidance, parenting skills, changes made by their husbands (such as limiting his alcohol

consumption) and initiating the process of divorce or separation. A small percentage of respondents indicated that nothing had helped them to cope with their situations.

What is evident from the above findings is that battered women require a range of different forms of interventions such as individual, legal, spiritual, familial and economic assistance. This data supports the integrated theoretical framework, which takes into account various factors when attempting to understand and intervene with women abuse. These results show that the various sectors assisting battered women need to work cohesively in order to effectively meet this populations needs.

The following chapter integrates the findings of the study, presents recommendations and makes suggestions for future research.

University of Cape Town

CHAPTER 4

CONCLUSIONS AND RECOMMENDATIONS

This chapter will include a summary of the key findings described in the previous chapter. These findings will be presented according to the research objectives of this study. Recommendations arising from the data will be made, including suggestions for future research.

4.1 KEY FINDINGS

4.1.1 NEEDS OF RESPONDENTS WHEN THEY APPROACHED NWSC

The key findings in this section revealed that most respondents had several interrelated needs, which is in keeping with the integrative approach framing this dissertation. Some of these needs included the need for emotional support, legal advice, for information and couple counselling. A key finding was the large number of respondents hoping to receive emotional support from the centre. This indicated how essential an ingredient this form of assistance is when delivering a service to battered women, even when other needs appear equally pressing.

Another finding was the need for types of counselling not offered at NWSC, such as couple counselling and counselling for children. This finding is supported by the integrated theoretical perspective on women abuse, which recognises systems-based counselling for men, women and children (Westhues, 1989). NWSC, however, with its model of intervention firmly rooted in feminist practice, does not offer family systemic intervention, and therefore, this need would not be met by the centre.

4.1.2 WHAT RESPONDENTS RECEIVED FROM THE SERVICE AT NWSC

The services that respondents reported to have received from NWSC were placed into three broad themes. These included: emotionally supportive services such as being listened to, being believed, affirmed and accepted; information assistance such as having the dynamics/cycle of abuse explained, being given options to manage the abuse, and being referred appropriately; and legal assistance, which included being given information and assistance on legal matters such as how to obtain a protection order.

Many respondents received all forms of assistance, whilst the majority got emotional support from their contact at the centre. Literature suggests that the emotional aspects of an intervention service should be considered crucial along with other components of the service such as reliability, content and efficiency (Harris & Dewdney, 1994). Consistent with this aim, it counts in NWSC's favour that emotional support forms a large part of the service the centre provides.

4.1.3 ASPECTS OF THE SERVICE FOUND TO BE HELPFUL AND/OR UNHELPFUL

One of the main findings emerging was that the majority of respondents found some aspects of the service to be helpful whilst simultaneously experiencing other aspects as unhelpful. A small percentage of respondents found nothing useful about the services, whilst almost a quarter experienced all aspects to be helpful.

It emerged that respondents had unique needs, that were not always able to be met by NWSC for various reasons. Some of these reasons include miscommunications occurring between counsellors and respondents; misguided expectations on the part of respondents regarding what NWSC could offer them; respondents' own ambivalence regarding the ways in which they wanted to deal with their abusive relationships; individual, family and practical resources available to respondents, and NWSC'S limited resources.

Respondents' experienced various aspects of the emotional, information and legal services as helpful and/or unhelpful. The general approachability of the centre also impacted on respondents' experience of the service as helpful or unhelpful. Key findings within each theme will be highlighted below.

Emotional Support

Respondents found several aspects of the emotional support service provided by NWSC helpful. One of the main sub-themes emerging was specific skills used by counsellors which added to respondents' experience of feeling supported. Some of these skills included being empathic, open-minded, non-judgemental, patient, understanding, encouraging, attentive, warm and respectful. Literature supports the

finding that a counsellor's attentiveness and expressed concern can help a client to feel supported (Nelsen, 1980).

Being believed by counsellors was identified by respondents as being important, as this alleviated a great deal of their distress and validated their feelings. For many respondents, simply being listened to and being given the opportunity to talk through the problem in a confidential space was helpful and experienced as supportive. It is acknowledged elsewhere in the literature that allowing clients an opportunity to vent their feelings (Hollis & Woods, 1990), and listening actively to them (Dutton, 1992 cited in Ammerman & Hersen, 1999) reduces stress and allows clients to feel comforted. Discovering that such a service existed contributed to some respondents' positive experience, and talking to someone who had an understanding of the dynamics of women abuse helped certain respondents feel validated and supported.

A further sub-theme emerging was how helpful it was for some respondents to be allowed to make their own decisions about managing their situations. This finding reinforces the empowerment counselling model used by NWSC. On the other hand, a similar number of respondents perceived the empowerment approach as frustrating and unsupportive. This discrepancy may be due to specific individual characteristics, and individuals' unique situations. It is also possible that these women found it difficult and overwhelming to make these decisions because they have been disempowered by their abusive relationships, and have learnt to become dependent on their partners to make decisions for them.

Literature reveals how battered women have various factors to weigh up when deciding how to manage the abuse in their lives and/or whether or not to leave the abusive relationship. These may include financial concerns and the safety of their children, and it is therefore not a simple decision to make (Greaves et al., 1988 cited in Harris & Dewdney, 1994; Groenewald, 2000/2001). In this context, it is understandable that some of these respondents were ambivalent about which way to proceed.

Another main finding in this theme was that some respondents felt unsupported due to specific characteristics of counsellors. For example, counsellors pressuring

respondents to leave their partners, not providing sufficient physical warmth, and referring them to other organisations prematurely were received negatively by women. These perceptions may be partly due to miscommunication between the counsellor and the respondents, and/or a misinterpretation of information given. Harris & Dewdney (1994) have referred to these miscommunication / interpretation difficulties as information transfer failures. Transference and countertransference issues arising between respondents and counsellors may also have impacted on respondents' perceptions of the counselling process. Having only one counselling session makes working through any potential miscommunications and misperceptions extremely difficult.

A key finding revealed that some respondents needed a follow up phone call from their counsellors, as some believed that this would have alleviated feelings of isolation and helped them to feel more supported. Finally, another finding revealed the need for individual, couple and family counselling; and respondents expressed a feeling that NWSC should be offering interventions on various different levels, including both individual and systemic interventions. This finding supports the integrated perspective on women abuse, which advocates that intervention take place on several different levels.

Information

Various findings emerged regarding helpful aspects of the information service provided by NWSC. A valuable finding was that the imparting of information on the cycle and nature of women abuse helped respondents to recognise for the first time that they were not to blame for the abuse, reducing their feelings of shame and guilt.

* Literature reveals that abused women often feel ashamed about the abuse they receive (Jewkes et al., 2001). It has also been found that women fear that by breaking the silence about the abuse, they would be destroying the cohesion of their marriage and this would reflect negatively on them (Maconachie et al., 1993). In this context, it is possible to see how supportive and encouraging it was for these respondents to be believed and validated by their counsellors.

Another key finding in this theme was a sense of relief expressed by some respondents for having been given information on options to help them manage their

situations, for example how to access a shelter or take legal action. Some respondents' had not known that these options were available to them, and this helped them to feel empowered and supported. Respondents found that NWSC linking them to appropriate resources allowed them to access help that they would otherwise not have known about, and this was extremely helpful to them.

Literature shows how the isolation battered women experience often renders them unaware of available resources. A lack of self-confidence as a result of the abuse, as well as a lack of other practical resources such as time and money, further compounds abused women's ability to negotiate their way through the social service network (Maconachie et al., 1993). Therefore, in this context, it is understandable that the respondents in this research would experience it as helpful to be guided through the often complicated helping network by their counsellors.

With regards to unhelpful aspects of the information service provided by the centre, one of the main findings was that some respondents believed that certain referrals, which could have helped them to cope with their situations, for example referrals to shelters or group therapy program's, were not made. This contradicts other respondents' experiences of having received this form of assistance from their counsellors. Therefore, it appears that at times these important referrals were by made by some of the counsellors and other times not.

Walker, 1980 cited in Whalen (1996) explains how group therapy and shelter systems have a similar effect in terms of reducing the sense of isolation felt by battered women. Literature has also shown how group therapy can help battered women to realise their situations are not unique, and reduce their feelings of shame and guilt (Durra, 1998; Ponton, 2002). The integrated and feminist perspective on women abuse recognises group therapy as an important form of counselling, and NWSC incorporates this method in its program. Therefore, in this context, referrals to shelters and group therapy should always be provided as part of a comprehensive service for battered women.

Another sentiment expressed by a few respondents was that certain information or services, which should have been provided by the centre, were not provided. For

example, recommendations were made that NWSC assist women in finding employment, or provide skills training, and a further suggestion was made for the centre to provide child care facilities. It appears that for these women, not being gainfully employed and having limited financial independence constrained them, rendering them helpless in their predicaments. Various references in the literature have been made to the fact that economic dependence on the man is one of the major obstacles to women leaving an abusive relationship (Maconachie et al., 1993; Human Rights Watch/Africa, 1995).

Therefore, it is clear that battered women's needs are multifaceted and that any intervention service dealing with this phenomenon needs to be comprehensive, attempting to provide information and support on various different levels such as emotional, social and economic, as advocated by the integrated perspective on women abuse.

Legal Assistance

Respondents found various aspects of the legal service provided by NWSC to be helpful. One of the main findings that emerged with regards to these aspects included how useful respondents found the help and information given to them about how to obtain an interdict/protection order, as it provided these respondents with a sense of protection, whether they used it or not. For some, simply knowing they could use it gave them a sense of control over their situations, and acted as a warning signal to their partners to curb their abusive behaviour.

Respondents seemed to find it particularly helpful when counsellors facilitated legal processes by for example, giving them letters to take to the police station to obtain the interdict. A few respondents mentioned how difficult the process of initiating legal procedures on one's own can be, and some respondents recommended that counsellors actually accompany women to obtain interdicts to avoid obstacles and to provide support for women taking this difficult step. This finding corresponds with literature described above under 'Information', whereby Maconachie et al. (1993) explains that battered women often lack the confidence or skills to negotiate the social service network on their own. This may explain why this type of support was highly regarded by the respondents in this study.

It also emerged that respondents valued counsellors at NWSC working closely with other sectors such as the police and/or legal officials to ensure that their needs were met. This has been found elsewhere in the literature. Where courts and police stations have close working relationships, it tends to enhance the manner in which services are delivered to battered women (Artz et al., 2001). Adding to this, some respondents found it beneficial when they were referred appropriately by their counsellors to other organisations or relevant persons to deal with legal matters. Once again it was found that having someone to guide battered women, and to facilitate the networking process for them was essential in helping them feel contained and supported.

Regarding unhelpful aspects of the legal service provided by the centre, a key finding included the fact that some respondents had great difficulty in getting the legal advice received from the centre followed up by other sectors, such as the police or legal officials. This tended to taint their overall perception of the help they received from NWSC. Some respondents expressed feelings of frustration due to the lack of support given to them by police and legal officials. This caused them to feel hopeless and helpless in their attempts to get help.

Various authors explain that despite the implementation of the new Domestic Violence Act in 1999, issues such as the lack of resources available to the police and court officials, and insufficient training provided to them, has limited their ability to effectively meet battered women's needs (Artz et al., 2001; Smit & Nel, 2002). Therefore, the findings in this research regarding some of the respondents experience with the police and legal sectors remains consistent with other recent studies conducted on battered women's experiences with these helping sectors.

Another important finding was some respondents' concerns around initiating legal procedures, because of fear for their children and their own lives. Some respondents experienced their counsellor's suggestion of taking a protection order against their partner as inappropriate, because they were terrified of the consequences. Harris & Dewdney (1994) explain that when one tries to understand the choices battered women make when dealing with their abusive relationships, it is essential to consider the fact that fears regarding the unknown may seem more terrifying than the

continued risk of known violence. It is therefore essential that counsellors supporting battered women take these fears into consideration and regard these dilemmas as adaptive and real.

Some respondents expressed that the legal information given to them to get their children back was inappropriate and/or insufficient. Some felt that more representation and advice could have been given to them by their counsellors to help them get their children back. These women appeared to feel powerless in the face of a complicated bureaucratic system, which required them to have financial means, which they did not have. These sentiments correspond in part with those respondents who felt that NWSC should be providing, as part of its service for abused women, help in finding employment in order to become financially independent. This in turn, would help them to attempt to alter their predicaments.

It is clear from the above findings that in order to provide an effective service for battered women, the various helping sectors involved in dealing with this phenomenon need to operate cohesively together, and that services need to be extensive in order to address women's needs effectively.

Approachability of the centre

Various sub-themes emerged regarding both respondents' positive and negative experience of the approachability of the centre generally. One of these sub-themes included experiencing the atmosphere at the centre as friendly and inviting, allowing women to feel safe and accepted. It appears, however, that respondents had different experiences regarding this aspect of the service. Some perceived the atmosphere at the centre as generally hostile and unfriendly, which in turn impacted negatively on their overall experience at the centre. In light of the above, it would be helpful for NWSC staff to ensure that clients are always made to feel comfortable by all staff members when approaching the centre, and that they are received by them in a friendly and respectful manner.

Another theme emanating from the results reflects respondents' appreciation for the counsellors immediate response to their call for help as this alleviated their distress and helped to calm and soothe them. For other respondents though, their experience

entailed having to wait a long time before seeing a counsellor and this added to their frustrations. Literature shows that issues such as endless referrals and long delays before receiving help may reinforce women's sense of helplessness and isolation (Maconachie et al., 1993; Warner et al., 1973, Dervin, 1976, Barugh, 1984, Levinson, 1988 cited in Harris & Dewdney, 1994).

Respondents differed in their opinions about the financial accessibility of the centre: some felt it was accessible, allowing them to feel supported; while others found it inaccessible, resulting in them feeling rejected and helpless. Other issues mentioned by some respondents included the location of the centre. Some women suggested that smaller centres should be situated in various areas in the Western Cape, and that NWSC should be open in the evenings for women who work.

It seems that for some respondents their experience of the centre itself impacted on their overall perceptions of the service provided by NWSC.

4.1.4 RESPONDENTS' REASONS FOR NOT RETURNING TO THE CENTRE

The majority of respondents indicated that they would definitely return to the centre should the need arise, whilst a quarter stated that they would definitely not return. The remaining few felt ambivalent. This indecisiveness may be a reflection of the ambivalence they were feeling generally with regards to how to proceed with their situations.

Various reasons were given by respondents for not having returned to NWSC after their first session. Half of the respondents reflected that one session had been enough to meet their needs, and that their situations had improved. On the other hand, almost a quarter of respondents cited negative experiences at the centre as the reason for not returning. These respondents' needs had not been met initially, and they therefore did not persist with their help-seeking efforts at the centre.

Another motive for not returning to NWSC was that some respondents were receiving counselling from alternative sources. They had either been referred to these

agencies/individuals by NWSC, or other agencies, or had self-referred. Therefore, their need for counselling and support was met elsewhere.

For some respondents, once they had received guidance from their counsellors regarding how to deal with the abuse, they felt it was up to them to decide independently how to manage their situations. They seemed to feel there was little point in talking more about their predicaments until they were clear about which way to proceed. It appears that these respondents did not recognise that the counselling process could take the form of a longer-term process whereby options could be explored in a supportive space without the expectation that decisions had to be made instantly.

Harris & Dewdney (1994) explain that when battered women are attempting to make choices about dealing with the abuse in their lives, it is essential for those assisting them to consider the various factors which may inform the women's assessment of the risks and benefits associated with various options, for example, the loss of finances or social status. This indicates how essential it is that counsellors assisting battered women are sensitive to these predicaments and allow clients to feel that they have a safe space to weigh up these dilemmas. It is important that counsellors discuss with their clients the nature of the counselling process.

Another finding that emerged from the study indicated that some respondents never realised that they could come back for more sessions, either because they had not been offered further counselling, or because they had not understood the counselling service to be a longer-term process. This reinforces the importance of the notion expressed above, namely, ensuring that respondents are made aware of the nature of the counselling service provided and offered more sessions if appropriate.

Another theme arising from some respondents was a feeling of not being ready to make changes in their relationships for various reasons, such as not being able to cope financially if they were to leave their partner, and concerns about their children's well-being. This has been found elsewhere in the literature. Many studies have indicated that "children are the primary reason women remain in abusive marriages,

and some women even stay in order to protect their children against their violent father” (Martin, 1981 p.5; Van der Hoven, 1992 p.257 cited in Mafokane, 2002).

Women also expressed concern about their partners’ well-being, reflecting respondents’ continued emotional attachment to their partners despite the abuse. Various authors have documented how intermittent patterns of abuse create strong emotional attachments between battered women and batterers (Harlow & Harlow, 1971, Painter & Duton, 1985, Walker, 1984 cited in Harway, 1993). These sentiments may also be an indication of respondents’ belief that they should be maintaining the emotional cohesion in their relationship (Maconachie et al., 1993).

Other main themes reflecting respondents’ reasons for not returning to the centre included factors such as not having any time to go back due to other commitments, and finding it difficult to ask for and accept help from others. The latter reason possibly reflects respondents’ fears about being judged and perceived negatively by their counsellors. As mentioned above in ‘Information’, abused women often feel ashamed of the abuse they have experienced (Jewkes et al., 2001). In light of this finding, it is important that counsellors reinforce to their clients that they would not be regarded as failures for returning for further assistance, and that the abuse is not their fault. Explaining the ‘cycle of abuse’ theory which is included in NWSC’S programme will help women to recognise that the process of help-seeking is often a continuous one due to the nature of the abusive pattern.

4.1.5 RESPONDENTS’ EXPERIENCES OF OTHER FACTORS THAT HAVE ASSISTED THEM IN COPING

An attempt was made to identify the factors aiding battered women, excluding those provided by NWSC, to gain a wider and more holistic understanding of what has helped battered women to cope with their situations.

It emerged that a range of different factors on individual, familial, and social levels contributed to alleviating distress for these women. This notion is supported by the integrated approach, which recognises the complexity of the phenomenon of women abuse, and therefore, takes into account various different factors when attempting to understand and intervene with battered women (Westhues, 1989).

Respondents cited various forms of assistance that they found helpful. Receiving counselling proved to be a valuable form of assistance for some respondents, whether it took the form of religious, psychiatric or substance abuse counselling. This excluded counselling received at NWSC. For some respondents, becoming more assertive with their partners and/or communicating more effectively with them, for example not shouting, helped to improve their relationships. Another finding showed how changes made by abusers themselves, often due to being challenged by the respondents, made an enormous impact on improving their situations. This points to the need for abusers to receive help for themselves to change their problematic behaviour patterns.

These interventions could be considered examples of intervention on an individual/psychological level. According to Westhues (1989), interventions on a psychological level would focus mainly on assisting the individual, rather than intervening systemically or attempting social change. The integrated perspective incorporates amongst others, the intra-individual focus in its treatment of women abuse, and from the above findings in this research, it appears that interventions on a psychological level provided a great deal of assistance to some respondents.

Other factors described as being valuable in helping respondents cope included religion, finding employment, family support and acquiring parenting skills. These forms of assistance are not included in NWSC's programme, yet seemed to provide an important source of help for these respondents. For some respondents, as described earlier, having couple counselling had been a useful way of dealing with their problems. This form of systemic intervention is also excluded from NWSC's interventions. It may be, however, that respondents' contact and experience at NWSC helped empower them to initiate further help-seeking processes. Specific incidents arising in respondents lives were also cited as factors assisting them, such as moving into another neighbourhood, which was perceived to be a more positive environment.

Models have been developed within the integrated perspective on women abuse, which show how a particular combination of factors interacting together may place families at increased risk of violence. Stressors such as unemployment and low

income, in combination with cultural norms and values that accept violence may contribute to the presence of violence in families (Gelles & Cornell, 1990; Stith & Rosen, 1990). Therefore, as has been found in this study and elsewhere in the literature, when changes are made, such as finding employment or moving to a new neighbourhood (modifications to the wider socio-cultural environment), they can serve to reduce or terminate the abuse within a family.

For some respondents, separating or initiating a divorce process helped to stop the abuse or to slow it down. There were also some respondents who found that nothing had helped them to cope with their predicaments. All of these respondents had children out of their custody and felt powerless in the face of bureaucratic procedures and had insufficient financial means to change their situations.

It is clear from the above findings that individuals have diverse requirements and needs. Therefore various interventions, occurring on many different levels, are required to accommodate individuals' unique situations. The integrated perspective, as stated above, recognises that to understand and treat women abuse, a variety of factors need to be taken into account (Westhues, 1989), thereby giving credence to women's individual requirements.

4.2 RECOMMENDATIONS FOR SERVICE

4.2.1 RECOMMENDATIONS FOR NWSC

- The findings of this study should be presented verbally to all the staff members at NWSC in a workshop format, empowering staff to come up with ongoing solutions and strategies to ensure an appropriate and effective service.
- An important finding emerging from this research was that various forms of intervention, occurring on many different levels, e.g. couple and family counselling, building family support, finding employment, spiritual guidance, were experienced as helpful by respondents. Therefore, NWSC, which does not currently offer family or couple counselling, should consider the use of these interventions where appropriate or continue to refer appropriately to

such services. This would ensure that individuals unique needs are taken into account.

- Another recommendation arising from the findings in this research is that NWSC considers providing employment training and child care facilities for its clientele, or alternatively, link women to relevant agencies who provide these services (which NWSC already does in some cases).
- NWSC staff should ensure that clients are always made to feel comfortable when approaching the centre, and that they are received in a warm, friendly and respectful manner by the receptionist, counsellors and administrative staff at the centre. It is recommended that NWSC ensure at all times that the waiting room exudes a pleasant and inviting atmosphere. Suggestions for this include placing colourful pictures on the wall, finding interesting magazines to put on the table, and playing soothing music whilst clients are waiting to see their counsellors.
- NWSC should consider variables such as hours of operation, accessibility and affordability of the centre and waiting time for appointments, as this impact on clients' general perceptions of the service provided by the centre. Specific suggestions to facilitate this include staff members giving clients a realistic estimation of the length of waiting time before seeing a counsellor; training more volunteer counsellors; increasing hours of operation to accommodate those women who work long hours; considering the establishment of smaller centres in other areas (decentralisation of the service), some of which NWSC have already established; and ensuring that the service is financially accessible.

4.2.2 RECOMMENDATIONS FOR NWSC COUNSELLORS

- Respondents were not always informed about the services provided by NWSC, specifically with regards to group therapy and referrals to shelters. Therefore, it is important that counsellors advise their clients about their options regarding shelters and group therapy whenever appropriate.
- Transference and counter-transference are inevitable in the therapeutic process. It is therefore recommended that counsellors receive regular supervision to assist them in dealing with transference/counter-transference

issues. This would facilitate the effective processing of complex feelings evoked during their sessions, and prevent these feelings from impacting negatively on the counselling relationship. Supervision may take place in a group or individually, and should be regular and occur on an ongoing basis.

- Since battered women are often socially isolated and lack the skills needed to negotiate the helping network, counsellors should help facilitate the networking process for their clients. It is also recommended that counsellors collaborate with the other sectors assisting battered women, whether this pertains to legal or general referrals, in order to allow these women to feel contained and supported. It is suggested that there be a forum whereby service providers in all spheres meet regularly to discuss issues related to the effective implementation of comprehensive services for battered women. This would allow for increased communication between various role-players.
- Counsellors should provide a follow-up phone call to the women they have assisted, to alleviate feelings of isolation, to help them feel more supported, and to provide an opportunity to offer their clients a follow-up appointment, if appropriate.
- Due to miscommunications arising at times between counsellors and respondents regarding the nature of the counselling process at NWSC, it is recommended that counsellors explain to their clients the nature of this service at the outset of their sessions together. Specifically, it is important that clients are aware that the counselling process can be a long-term process, and that counsellors explain the structure and purpose of the sessions. Finally, it is suggested that counsellors institute a client evaluation at the end of each session to determine clients' experience of the service. This may highlight any misconceptions about the service and allow for a greater understanding between client and counsellor.
- It was found that some respondents perceived their counsellors to expect them to leave their relationships, despite the fact that they were not ready to do so. It is therefore suggested that counsellors at all times be sensitive to the dilemmas that most battered women face when deciding which course of action to take, and to not place pressure on women to leave their relationships.

- NWSC staff should ensure that referrals to external agencies are only made when NWSC cannot address the issues themselves, to avoid women having to further negotiate the formal helping sector unnecessarily. Clients should also be advised on which direction to take. Counsellors should additionally consider making referrals to other sources whilst still keeping NWSC available to their clients, thereby reducing possible feelings of rejection and increasing their clients' support base. To add to this, counsellors should always take care to make appropriate and realistic referrals.
- Counsellors should reassure their clients that they will not be regarded as failures for returning for further assistance.

4.3 RECOMMENDATIONS FOR FUTURE RESEARCH

This study has added to previous research on battered women's experience of interventions provided by NWSC. While undertaking this research, other possibilities emerged for future investigation. Various areas are recommended for future exploration:

- Research should explore counsellors' experience of the supervision they receive to determine how this impacts on the counselling process. Supervision is essential in order for counsellors to process some of the complex issues that inevitably arise in the counselling relationship, and it is therefore important to understand the nature of this support structure.
- The impact of being regularly exposed to accounts of traumatic experiences on counsellors should be determined. This could include an exploration of their emotional needs, and of the coping mechanisms that they use to manage these encounters.
- Emerging from the results in this study was the need for co-ordination between the different sectors', which at times, did not occur. Therefore, topics for future research should include investigating the degree to which the various different helping sectors assisting battered women collaborate successfully, and should explore the barriers preventing this from occurring. This may take the form of a participatory research process whereby the

different sectors plan together structures for inter-organisational support and further learning.

- Various forms of assistance not necessarily provided by NWSC were described by respondents as helping them to manage their situations, for example, family support, finding employment, spiritual counselling and spontaneous life events. It would be useful therefore, to focus a study on battered women's resilience; their strengths, and those aspects of assistance which arise spontaneously and seem to play an important role in helping them cope.

4.4 CONCLUSION

This study aimed to explore battered women's experiences of intervention services provided by NWSC, particularly focussing on those women who came to the centre only once. Battered women's particular needs were highlighted, aspects of the service that were experienced as either helpful or unhelpful were identified, and recommendations for enhancing services at NWSC and for future research were made. It is clear from participants' experiences that comprehensive intervention services are required, including for example legal, emotional and information assistance, and that in order to meet needs effectively, various needs should be addressed simultaneously. It is also essential that the different helping sectors co-ordinate their services and collaborate closely in order to adequately assist battered women, therefore NWSC'S intervention cannot be viewed in isolation, but as part of a wider helping network. Women abuse is widespread and has devastating consequences for the individual, family and community, and there is an urgent need for organisations to be involved in addressing this phenomenon. NWSC plays an important role in intervening with the problem of battering and it is very positive that the centre is constantly engaging in the evaluation of its services to ensure that battered women's needs are addressed optimally.

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ANNEXURE ONE

INTERVIEW SCHEDULE

1. What made you approach NICRO Women's Resource Centre?
2. What help were you looking for at the time / what were you hoping to receive from the centre?
3. What type of help did you receive from the centre?
4. Did you find the assistance provided by the NWSC to be helpful to you, and if so , in what way?
5. What was the most helpful part of the service?
6. What was the least useful part of the service?
7. Was there anything you feel that could have been offered to you by the centre that was not?
8. Would you return to the centre if the need arose?
9. Were there any particular reasons for not returning to NWSC for further assistance?
10. What has helped you to cope with and to manage your situation?