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City Club of Portland Report: Domestic Violence – Everybody's Business

City Club of Portland (Portland, Or.)

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Domestic Violence— Everybody's Business

Submitted July 11, 1997

Second Edition—August 1, 1997



On Friday, July 11, 1997, the City Club Membership voted to adopt the recommendations of this report as a formal position of the City Club of Portland.

EXECUTIVE SUMMARY

Domestic violence is everybody's business. It is cruel and costly. It decreases productivity, increases medical costs, and increases the burden on our police, our courts and criminal justice system. Domestic violence causes children to fail in school, to develop behavioral problems and eventual criminality. It is the leading cause of injury and of homelessness to women. Domestic violence occurs in all strata of society, in all social groups, in families of all income levels, in all cultural and religious groups. Forty-two percent of violent crimes in Multnomah County in 1995 involved domestic violence.

The committee was appalled and outraged at what we learned—appalled and outraged at the unfairness and cruelty of domestic violence, but heartened by the efforts in our community to stop it. Domestic violence is tolerated by society as a private family matter. It can be prevented, but prevention means public awareness, public outrage and public censure of the perpetrator. Prevention means a change in the way we view family violence, in the way we socialize our young—away from violence and toward equal respect—and it means a willingness to put community resources and support behind the effort.

There is no single profile of a batterer. Domestic violence is not an inability to control anger. It is not a mental illness. It is not a function of alcohol or drug abuse, although alcohol and drugs decrease a batterer's inhibitions. Abuse is a choice. The need to control undergirds the abusive behavior. Treatment is difficult and must be tailored to each batterer. There is no magic cure.

In order to focus our efforts, your Committee interpreted its charge to be a study of the extent and causes of violence by men against women in an intimate living arrangement in Portland and Multnomah County.

In 1977, Oregon led the nation in being the first to mandate arrest of a batterer in a domestic violence dispute. Today, all domestic violence support services, shelters, and legal proceedings are hampered by inadequate resources.

In Multnomah County the Family Violence Intervention Steering Committee coordinates public and private agencies dealing with domestic violence. The Portland Police Bureau's Domestic Violence Reduction Unit assists victims and the Multnomah County District Attorney prosecutes offenders and offers the option of treatment and intensive supervision to first time offenders. The deferred sentencing program is supervised by the County's Domestic Violence Community Response Team.

Businesses, health care providers, social service agencies and churches are important community resources for dealing with domestic violence. But they must have training to recognize and effectively serve victims and their children, and must be aware of community assets and legal remedies to appropriately refer them.

Decision makers, service providers, and citizens do not have access to the data they need about the extent and nature of domestic violence to make good policy decisions and effect good legislation.

The City Club in initiating this study has validated the importance of this issue to our community and has recognized anew the right of every person to be free from bodily harm.

A. Priority Recommendations

- **Double the emergency shelter capacity and services for victims of domestic violence.**

Presently, only 10 percent of the women requesting services can be served. More shelter spaces are needed as well as other alternatives such as safe houses, and transitional housing.

- **Increase prosecution rates of abusers.**

Increasing prosecution will send a clear message to abusers that there are consequences for their behavior. A related recommendation is to increase the penalty for domestic violence from a misdemeanor to a felony for abusers where there is a repetition of abuse to the same partner after conviction for a previous domestic violence offense.

- **Require health care and social service professionals to provide information to suspected victims of domestic violence concerning their rights, remedies and services.**

The Oregon Legislature should pass legislation that requires health care and social service professionals to provide suspected domestic violence victims with information that will help them deal with their situation. This would include information about their legal rights such as restraining orders, prosecution of abusers, child custody, and financial obligations, and also provide information about service providers such as shelters and counseling.

- **Increase public awareness of domestic violence and provide training for professionals.**

Strong community norms that assert that domestic violence is wrong and will not be tolerated would serve as an important bulwark against domestic violence. There needs to be increased public awareness throughout the community—at businesses, in religious organizations, in schools, in community organizations, and in the media.

Professionals need training in order to both identify domestic violence and to know how to help victims get the support they need. This includes lawyers, police, social service providers and health care providers such as doctors, nurses, and dentists.

- **Improve data collection and reporting on domestic violence.**

Because domestic violence so often goes unreported, it is very important to have improved reporting. Although Oregon has had a law since 1991 requiring reporting by police agencies, the system is only now becoming operational, and crime statistics provide only a partial view of the problem. The State of Oregon should carry out a crime victimization study in Oregon to identify the extent of domestic violence, and should carry out evaluation studies of programs to determine their effectiveness in stopping domestic violence.

B. Other Recommendations

This report makes further recommendations which are summarized here:

Laws

- Increase the penalty from a misdemeanor to a felony for repeat offenders.
- Allow judges to require abusers to pay support costs.
- Allow judges to award custody of children to the mother as a “rebuttable presumption.”
- Develop a state-wide computerized registry of restraining orders.

Religious organizations

- Provide training for clergy on domestic violence issues.
- Give sermons and talks on domestic violence.
- Train seminary students on domestic violence issues.
- Provide support services for victims of domestic violence.

Health care

- Implement domestic violence protocols developed by the Oregon Medical Association.
- Provide training for health care personnel on domestic violence.

Police and Community Corrections

- Expand the Portland Police Bureau’s Domestic Violence Reduction Unit.
- Expand the Multnomah County Domestic Violence Community Response Team.
- Increase services for domestic violence victims.

Treatment of offenders

- Conduct follow-up and long-term evaluations of treatment programs.
- Promote an integrated approach to treatment.

- State Domestic Violence Council should develop treatment standards.

Prevention and public awareness

- Expand domestic violence prevention training in schools.
- Interested City Club members should create a Domestic Violence Awareness Committee composed of business, education, religious, community organizations, and public citizens to design and implement an ongoing awareness and advocacy program for the Portland Metropolitan area.

Resources

- State of Oregon should continue to fund victims' services as the first priority.
- State of Oregon should coordinate domestic violence efforts.
- The state, county, and city, as well as local school districts, should fund programs for domestic violence prevention.
- Multnomah County should fund two additional district attorneys for domestic violence.

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I. INTRODUCTION

A. Domestic Violence—a Community Responsibility

Domestic violence is everybody's business. The debilitating results of domestic violence affect us all. They can be seen in decreased productivity, in increased medical costs, in increasing loads on the courts and criminal justice system, in the need for more police work, in lost work hours, in the long-term impacts on children who witness domestic violence, in their school failures, in societal violence, in criminality and the cost of prisons, in homelessness. Domestic violence costs American businesses an estimated \$5 billion a year in absenteeism, lost productivity, stress, health care costs, turnover, and work-place violence.

C. Everett Koop, former U.S. Surgeon General, called domestic violence an epidemic and a national health problem, pointing out the high costs of hospital emergency services, public health, and mental health services, with concomitant higher health insurance costs.

In America today, 42 percent of all women murdered are killed by their domestic associates. Domestic violence is a leading cause of injury to women, accounting for one third of all hospital trauma emergency room visits. One and one half million abused women seek medical care each year.

By initiating this study, the City Club of Portland has recognized the importance of this issue to our community and has recognized anew the right of every person to be free from bodily harm.

B. Study Objectives

The study charge directed your Committee to address the following objectives:

- Increase public awareness about domestic violence in the Portland metropolitan area.
- Evaluate the local response to domestic violence.
- Identify needs, gaps in services and funding, and prioritize issues.
- Develop recommendations that could reduce domestic violence and increase and improve services for victims.
- Identify actions that can be taken by government, private sector, and the City Club against domestic violence.

The Committee interpreted its charge to be limited to a study of the extent and causes of violence by men against women in an intimate living arrangement in Multnomah County. The Committee recognizes that dating violence (which shows the greatest increase), violence against the elderly, same sex abuse, physical and sexual abuse of children (child abuse has a high correlation with domestic violence) and prostitution are also expressions of domestic violence.

C. Committee Process

From October 1995 through December 1996 your Committee met weekly to hear testimony from victims of domestic violence, recovering batterers, shelter providers, police, judges, professors, researchers, psychologists, health care professionals, religious leaders, treatment specialists, prosecutors, lawyers, and advocates for women. Each member of the Committee individually interviewed several experts in the field of domestic violence. (See Appendix A.) The Committee reviewed studies, legislation and reports on domestic violence. (See Appendix B.)

As we heard the stories and came to understand the situation in our community, we were appalled, outraged and heartened at what we learned; appalled and outraged at the unfairness and cruelty of domestic violence, and heartened by efforts in Oregon and Multnomah County to stop it. We also recognized the great need for expanded public awareness about this problem.

This report describes:

- why men batter;
- why women don't leave;
- laws regarding domestic violence;
- health care concerns;
- the need for better and more complete data;
- the legal process for domestic violence;
- protection and recovery options for battered women;
- the churches' role in prevention and outreach; and
- public education strategies.

II. BACKGROUND

DOMESTIC VIOLENCE: A COMPOSITE

Nothing in her life had prepared her for domestic violence. Her mother and father treated each other with respect. She had been a popular high school cheerleader; she had been a serious college student majoring in History with a minor in Education; and she had had a long relationship with the man she eventually married.

He had been a football player and wanted to be a law enforcement officer. He tended to be jealous of her friends and wanted her all to himself; he had sudden mood swings and admitted to stringing up a cat when he was younger. But she was able to rationalize all these behaviors as lovable human frailties.

After the wedding, the behaviors intensified and evolved into verbal tirades and belittling, no longer lovable. Within six months, he threatened to hit her if she didn't stop making him angry. He criticized her cooking, her housekeeping. She learned to accommodate to his bombastics, excusing him because he was "under stress on his job." He would allow her no opportunity for a life outside their home.

When the first blows actually came, she blamed herself for not being a better cook, a better housekeeper, for making him angry. She was ashamed to talk about it even with her best friend, because she felt that it was a family matter which she should be able to handle if only she would try harder. And he was so sweet in his contrition.

She did tell her hairdresser, who advised her to get out while she still could. She did tell her minister, who told her to come in with the husband for counseling, which they did. That advice seemed more compatible with her marriage promises, but accomplished nothing more than a brief harmonious interlude.

There were five more episodes of battering, each escalating to more serious injury—finally a very black eye and a broken wrist. A neighbor, hearing her screams called the police who arrested him on the spot. The police treated her kindly, told her that she could press charges, that she could apply for a restraining order, that she could call the crisis line for shelter if she felt she couldn't stay in her home.

While she was unwilling to press charges, she did apply for a restraining order to keep him at bay until she could figure out what to do. His case was prosecuted by the district attorney, and because it was his first offense—at least the first time he'd been caught—he was given the option of deferred sentencing with treatment. If his offense became known his job would be at stake, his reputation would be at stake, certainly his marriage was already at stake, so he accepted deferred sentencing and treatment.

In treatment, after initial attempts at denial, he seemed to be sincerely trying to understand his urge to control his wife. He seemed to earnestly desire the chance to make it up to her. At the end of his six months, he seemed to be a treatment success.

Meanwhile she had joined a support group, discovered new strengths in herself, got a job and filed for divorce. When he was free to make contact again, he was not pleased to find an independent woman who was leaving him. The old urge to control came sweeping over him. He made threatening calls, he cajoled, he followed her to work, he became obsessed with controlling her. Finally, he bought a gun, the ultimate controller, (the deferred sentencing and treatment had expunged his criminal conviction), and he put a bullet through her heart.

A. Historical Perspective

Domestic violence is as old as the urge to control. It thrives where that urge intersects an imbalance of power. Domestic violence becomes a way of life when society accepts it and tacitly tolerates it as a private family matter.

Until the 20th century most religions gave patriarchal privilege to their male adherents—beating their wives was a privilege—and some still do. A rule of thumb, “thou shalt not beat thy wife with a rod thicker than thy thumb,” softened the privilege somewhat in the late 19th century.

Not until the twentieth century did a court rule that “while Husband was still obliged to teach the wife her duty and subjection, he could no longer claim the privilege, ancient though it be, to beat her with a stick, to pull her hair, choke her, spit in her face or kick her about the floor, or to inflict upon her other like indignities.”¹

The nation, the State of Oregon, and the women’s movement have made giant strides since then to elevate the status of women to full equality with men, but domestic violence still remains an obstacle to true domestic balance of power.

Victor Lewis of the Oakland Men’s Project says that “we live in a society that accepts on a deep level that women are the property of men.” Biblical passages from St. Paul’s letters to the Ephesians, such as ‘the husband is the head of the wife, can be interpreted to reinforce that norm.

B. What Is Domestic Violence?

Domestic violence is sometimes described as “wife beating,” “spouse abuse,” “conjugal violence,” or “marital aggression.” However, it is more than any of these. Domestic violence is a system of abuse by a spouse or domestic partner involving psychological control, verbal harassment and abuse, bodily injury, and involuntary sexual relations.

Under Oregon’s 1977 Family Abuse Prevention Act (FAPA), family abuse occurs when a family or household member purposely causes or tries to cause bodily injury to another family or household member, purposely places such person in fear of “imminent serious bodily injury,” or forces that person to engage in involuntary sexual relations.
ORS 107.705.

The Family Violence Intervention Steering Committee of Multnomah County, a coordinating group of agencies and individuals concerned with domestic violence, expanded the definition in its 1994 report, *From Harassment to Homicide: Update*. “Domestic violence is emotional, physical, psychological or sexual abuse or the threat thereof, perpetrated against a person by that person’s spouse, former spouse, partner, former partner, or adult relative, or by the other parent of a minor child. Abuse may include threats, harm, injury, harassment, control, terrorism, or damage to living beings or property.”

The report states that, "Domestic violence can be a single incident, ranging in intensity from harassment to homicide. More often it is a systematic pattern of abuse that escalates over time in frequency and severity. It occurs between partners of the same or different sex." The U.S. Department of Justice Victimization Report finds that 90 percent of domestic violence is perpetrated by men against women.

Abuse can be emotional, psychological, physical or sexual. Many experts believe that emotional abuse though less visible may have longer lasting effects than physical abuse. (See Appendix E for "15 Warning Signs of an Abusive Relationship.")

C. How Extensive Is Domestic Violence?

Domestic violence is a hidden problem, personally painful, one that often family members, even the victims, try to cover up. But it is known to be present in all strata of society, in all social groups, in families of all income levels, in all cultural and religious groups.

Reliable national data compiled by the Surgeon General, the FBI, the U.S. Department of Justice's Bureau of Justice Statistics, and by the Center for Disease Control describe the extent of the problem of domestic violence nationwide:

- Men batter 4 million intimate partners every year.
- Six to ten women are killed by their husbands or boyfriends every day.
- Women age 19 to 29 and women in families with incomes below \$10,000 are more likely than other women to be victims of violence by an intimate.
- 50 percent of all homeless women and children in this country are fleeing domestic violence.
- Women who leave violent relationships are at a 75 percent greater risk of being injured or killed by their batterer than those who stay.
- Women are more likely to be injured in violent incidents committed by intimates than in incidents committed by strangers.
- There are 1,200 shelters in the U.S. for battered women and their children. (There are 4,000 animal shelters.)

In Multnomah County, 42 percent of all violent crimes are for domestic violence.² In 1995 police reported that there were 12 domestic violence homicides. There were 7,132 domestic violence incidents, 3,724 arrests. Of those, there were 1,753 arrests for aggravated assault (with a weapon) and 3,385 for simple assault.

There were 19,000 calls to the crisis lines in 1995, and 23,000 appeals for shelters. There are only 89 shelter beds in Multnomah County.

In Multnomah County the only consistent data reported comes from the police and emergency shelters, skewing the statistics in favor of

victims with the fewest perceived options, generally women with fewer resources.

D. What Oregon and Multnomah County Have Done

In 1978, the Oregon Legislature passed the Family Abuse Prevention Act (FAPA) which makes domestic violence a crime and mandates arrest if there is 50 percent certainty that bodily harm has occurred or will occur. The legislature updated FAPA in 1991, and again in 1995, to mandate adequate data collection. Oregon was the first state to enact legislation mandating arrest of the batterer.

The Family Violence Intervention Steering Committee, formed in 1989, serves a coordinating function for all the services involved in domestic violence in Portland, Multnomah County. It is an exemplary program, bringing together shelter providers, the police, the courts, the district attorney, treatment providers, health care providers, educators, child abuse intervention advocates and local governments to identify and address domestic violence problems in our community. (See Appendix C for a list of crisis lines, shelters, and other domestic violence resources in the Portland area.)

The state of Oregon and especially Multnomah County are recognized for enlightened progressive handling of domestic violence in law enforcement, in court proceedings, in mandatory arrest laws, and in data collection. However, there is still significant room for improvement. Domestic violence has been designated an urgent benchmark by Multnomah County, the State of Oregon, and the Multnomah Commission on Children and Families.

The Oregon Coalition Against Domestic and Sexual Violence serves as an umbrella organization for crisis line, shelter, and direct service advocacy programs throughout the state. The Oregon Domestic Violence Council is a group of social services, court, and criminal justice professionals who came together in 1994 to forge a state-wide, multi-disciplinary response to domestic violence. They worked on data collection issues and enforcement of the data collection mandates in FAPA, domestic violence needs assessment and community safety planning, court protocols, judicial and court personnel training, educational protocols and curriculum, workplace issues, batterer intervention program standards, and mental health protocols. The Governor's Task Force on Domestic Violence, initiated in Fall 1996, continues the work of the Oregon Domestic Violence Council.

E. Why Do Men Batter?

Every batterer is different from every other, although all batterers use violence as a control mechanism to get what they want. Domestic violence is not an inability to control anger. It is not a mental illness. It is not a function of alcohol or drug abuse, although both alcohol and drugs decrease a batterer's inhibitions. Violence or the threat of violence is a

method of control in a situation where there is an imbalance of power. Abuse is a choice. The need to control undergirds the abusive behavior.

Men who beat their wives are not ideologues defending the dominance of their sex, they are using violence to exert control over particular women, defending real, material or psychological benefits.

Specific tactics used by controllers form the pattern of abuse. They may control through criticism, through moodiness, anger, and threats, through over-protection and “caring”, through denying perceptions, by ignoring needs and opinions, through denying a role in decision-making. They may rigidly control the disbursement of money, shift responsibility for anything which goes wrong. They may limit contact with other people, or resort to physical and sexual violence.

Boys who watch their fathers batter their mothers are 15 times more likely to batter their wives when they grow up.³

F. Why Doesn't She Leave?

In the long run, battering a woman to control her is almost certain to fail, for battered women do leave. She may try to stop the violence temporarily by trying to become a “better person,” and it may take five or six batterings to overcome her reluctance to leave.

She knows that at the point when “his woman” tries to escape, the abuser is most dangerous. She is 75 percent more likely to experience severe injury or death when she tries to leave. She may not know how to get a restraining order. He may threaten, stalk, cajole her into staying or returning. He may threaten to hurt the children, her pets or her parents.

She may have no place to go—there are only 89 shelter beds in Multnomah County. Some shelters do not have room for a woman with several children, and most will not take boys 12 and over. She cannot stay in the shelter indefinitely and may not be able to find transition or permanent housing. She may have no means of support, and no skills. She may think she deserves to be battered, may not even consider her situation battering. She may still love the man who beats her. She may be pressured to stay by her family, friends, or church. She may believe that her children need a father.

Whatever the reason for staying or leaving, she needs support and services, so that she may seek safety and a new life for herself and her children. (See Appendix D: If you are being abused at home... You are not alone.)

G. Intervention in Domestic Violence

The safety of battered women and children is the most important goal of domestic violence intervention programs. Safety of the victim and children generally means removing the batterer from the home by arresting him, by issuing a restraining order which restricts his contact with the victim, or having the victim and her children go to a shelter.

In Multnomah County's deferred sentencing program, batterers are given the choice to enroll in a treatment program in lieu of prosecution. With successful completion of a treatment program, there is hope for eventual reuniting of the family, but there is no assurance there will not be further violence. Some argue that if we intervene in domestic violence in a way that separates family members, we collide with the basic value of family preservation. However, the law and the courts take the view that it is more important to protect women and children first, and maintain the family if possible as a second priority.

The focus for changing behavior where it can be changed has to be the community. The community can tell the abuser that his behavior is not acceptable. It can hold him accountable for his abusive behavior. The more negative the consequences of his actions (e.g. a restraining order, court-ordered treatment, prison, being left by his partner, fired from his job), the more likely he will see that his controlling and abusive behavior is not working. Programs for batterers must insist that batterers are responsible for their actions, and reject the notion that men are provoked into violence or lose control of themselves. Domestic violence is a learned and chosen behavior which can be unlearned and unchosen. No one can force the batterer to stop his violence, only he can make that decision.

Batterer intervention programs are only one part of the community-wide response to domestic violence. Intervention programs work best when there is a coordinated community response, including programs for battered women which provide safe housing, advocacy and counseling, aggressive law enforcement, and criminal justice intervention. The reduction of domestic violence is an outcome of a coordinated comprehensive community-wide system.

III. DISCUSSION

A. Laws

Although Oregon's laws are both comprehensive and progressive, there are some gaps in the laws for protecting the victims of abuse. These are as follows.

Misdemeanor designation underrates the seriousness of the crime.

Presently domestic violence is generally a Level 4 Misdemeanor unless a weapon is used. The maximum sentence for a domestic violence misdemeanor is one year of imprisonment. The usual sentence is 18 months probation. Witnesses to your Committee indicated that a misdemeanor classification does not give sufficient sanction to deter habitual abusers and is a societal signal that domestic abuse is not considered a serious crime. Several witnesses recommended that domestic violence be classified as a felony if there is continued abuse following an initial conviction as a misdemeanor.⁴ Senator Kate Brown (Democrat, Portland) proposed a bill in the 1997 Oregon Legislature (Senate Bill 553) to do this. Under SB553, a domestic violence assault would be a felony if "the person has previously been convicted of assaulting the same victim; or the assault takes place in the presence of the person's or the victim's minor child or stepchild or a minor child residing within the household of the person or victim." As of the publication of this report, the Oregon Legislature has not passed this bill.

Victims lack financial resources for themselves and their children.

Women who have been abused often have little or no access to the family's financial resources. This is a major means of control by abusers and a reason a woman does not leave an abuser or seek a restraining order. Twenty-four percent of women who are battered report that they lost their job because of domestic violence. Several witnesses, as well as the Model Code on Domestic and Family Violence⁵, recommended that courts be given the authority to require an abuser to pay certain costs and fees to support the victim, such as rent or mortgage payments, child support payments, medical expenses, expenses for shelter, court costs, and attorney fees. California law allows courts to require abusers to provide financial support to victims. There is no such law in Oregon.

Problems with joint custody of children.

Batterers in Oregon often argue that they should have joint custody of the children. The wealth of experience in domestic violence cases indicates that joint custody is not in the best interest of children or in the best interest of the woman who was abused. Abusers may try to manipulate the custody and visitation process to gain control over the victim, or visitations may put the woman in physical danger of abuse.

Witnesses recommended that the law should be changed so that there is a "rebuttable presumption" that an abuser is not fit to have custody of

the children, or to have joint custody arrangements. That is, the law would presume that sole custody of the children will be with the mother in the case of domestic abuse, unless the abuser can show convincing evidence that joint custody or some other arrangement is in the best interest of the children. This legal presumption is also recommended in the Model Code on Domestic and Family Violence.

Restraining orders are a useful but imperfect means of protection.

Restraining orders are a useful, if somewhat imperfect mechanism to protect women who are being abused or being threatened with abuse. A woman may file a petition for a restraining order without legal counsel and is not required to pay a fee to the court. The restraining order restricts the abuser from specific locations and activities. Violation of the restraining order requires arrest by the police. Restraining orders are imperfect because police cannot monitor an abuser's actions 24 hours a day. Aggressive intervention by police and courts could make restraining orders more effective.

In 1995, 3,718 restraining orders were filed, 1,024 were contested, 634 were violated, and 143 violators were convicted of violations.⁶

Presently there is no state registry of restraining orders.

Although a victim may be able to obtain a restraining order, the present system does not provide a ready means for law enforcement agencies to access this information on file. The need is obvious. A law enforcement officer may stop and question a suspect who is acting suspiciously near a victim's home or place of work and not have the vital information that the victim has a restraining order against the suspect. The Model Code on Domestic and Family Violence recommends a state-wide registry in which all orders are included within 24 hours after issuance.

B. Religious Organizations

Women who are being abused frequently will not seek help. A variety of factors—shame, low self esteem, fear, hopelessness, or simply not knowing where to turn—can isolate a woman who is struggling with domestic abuse. While a woman can access help through formal "points of entry" like the police and the courts, informal points of entry to assistance are also available, such as persons and organizations in the community, a person at church, a clergyman, a friend, a hair dresser, a relative.

Churches can play a vital role in developing community norms and values opposing domestic violence, but religious traditions that establish and perpetuate patriarchal values can contribute to the problem of spousal abuse. Some churches stress the absolute authority of the male in the household. Scripture can be seen as the authority to keep men in a position of authority, even when they use it unjustly.

According to witnesses to the Committee, religious organizations can hold values and beliefs which hinder their role in combating domestic violence. These include:

- Marriage is seen as indissoluble. Women must stay with their husbands, even if they are batterers. Women are counseled by clergy to mend their ways and work harder to save the family.
- Lack of awareness about the extent and severity of domestic violence in their own congregations. One rabbi who spoke with the Committee at first felt there were very few cases of domestic violence at his synagogue. But, upon looking back, he reassessed his statement and found 40 cases that could be considered domestic violence.
- Lack of speaking out about domestic violence. According to witnesses, domestic violence is overlooked and tends not to be a subject of sermon or discussion.
- Clergy usually are not trained in identifying domestic violence or assisting victims. Interviews with colleges that train clergy indicate that no specific, organized training on domestic violence is included in the curriculum. Some faith communities are now recognizing the need for training. Churches in East Multnomah County are doing training for their community on domestic violence.

Witnesses told the Committee that leaders and members of churches, synagogues and other religious organizations can provide a wide variety of support services to help victims of domestic violence. These include:

- Taking a strong stand against domestic violence making it clear that spousal abuse is unacceptable behavior and that it is violence that breaks the covenant of marriage, not the wife's departure.
- Supporting women by accepting victims' stories as true and validating their worth as human beings.
- Providing a temporary safe haven while searching for long-term housing, financial, and other solutions.
- Providing parenting classes, assertiveness training, and support groups for women.
- Encouraging healing through worship services and support groups.
- Providing child care for women when they are in court.
- Serving as volunteers for a "court watch" program to monitor the way judges carry out their duties regarding the issuance and enforcement of domestic violence restraining and stalking orders.
- Providing legal and support assistance for women when they are obtaining restraining orders or bringing charges against their abusers.
- Providing individual counseling, rather than inappropriately forcing a woman into couples counseling with her batterer.

(See also Appendix F: “A Community Checklist: Important Steps to End Violence Against Women—The Religious Community)

C. Health Care Providers

Health care providers—physicians, dentists, nurses, social workers, physician assistants, emergency medical technicians, nurse practitioners—are in a good position to help women who are abused, if they are informed about how to identify domestic violence, and how to provide assistance. Unlike child and elder abuse, health care providers are not obligated by law to report abuse of a spouse or partner unless a deadly weapon has been used.

Oregon law (ORS 146.750) requires any physician having reasonable cause to believe that a person has suffered a non-accidental physical injury, caused by a knife, gun, or other deadly weapon, to report that injury to the medical examiner in the county in which the injury occurred. A subsequent written report is also required.

The Oregon Medical Association’s *Medical Legal Handbook* states that physicians have an ethical duty to diagnose and treat domestic violence:

- Physicians should routinely inquire about abuse when interviewing patients about their medical history.
- Physicians must also consider battering as a possible cause when diagnosing a variety of medical complaints, particularly when treating women.

The Oregon Medical Association, the Oregon Association of Hospitals and Health Systems, and Professionals in Partnership have produced and published a guide on domestic violence, *Recognizing Abuse, A Health Care Provider’s Guide to Identifying and Treating Domestic Violence*, hoping that such a guide will empower health care providers to effectively intervene and/or direct the abused to appropriate services.

Local hospitals and HMOs are working together to develop protocols, continuing education courses, and research, but the training of physicians in domestic violence issues is still deficient. First year interns at OHSU have recently been required to take a full-day domestic violence training course.

Health care professionals do not have to report suspected domestic abuse, unlike child abuse in which there are mandatory reporting requirements. Several witnesses to your Committee recommended that reporting be mandatory. The Model Code on Domestic and Family Violence recommends that health care professionals be trained in detecting domestic violence and that they provide victims with a written statement that describes their rights for protection and the prosecution of abusers.⁷

The Governor's 1996 Drug and Violent Crime Strategy recommends "a bill to require emergency room physicians to refer victims of domestic violence to domestic violence resources in the area and information about the State Crime Victims compensation similar to that already required by police agencies."⁸

There is considerable debate about whether health care providers should be required to report cases of domestic violence. The arguments for mandatory reporting are that health care professionals are a significant contact for domestic violent victims, reporting would make the abuser more accountable, and mandatory reporting would improve data collection.

On the other hand, doctor/patient confidentiality becomes a major issue when reporting is mandated. Will a battered woman feel free to come in for necessary treatment if she knows that the incident will be reported to the police? Will she feel free to make full disclosure of relevant information about her health? Will she be subject to further abuse if the incident is reported? If support services and financial assistance for the victim are not available, health care providers are reluctant to place her further at risk by reporting the abuse.

As a result of these factors, many doctors in states that mandate reporting domestic violence to the police do not always comply with this requirement. A 1995-96 survey of 1,200 California doctors found that 55 percent said they would not report some situations in which the patient asks them not to report the incident. Many domestic violence professionals find that mandatory reporting is a paternalistic approach that violates patient autonomy and ignores the fact that the patient may be in the best position to determine the safest course of action for herself and her children.⁹

As an alternative to mandatory reporting, health care and social service professionals could instead be required to provide information and referrals about community shelters and resources to women they suspect of having been abused, as recommended by the Model Code. (See also Appendix F: "A Community Checklist: Important Steps to End Violence Against Women—Health Care Professionals.")

D. Police and Community Corrections

When domestic violence happens

Police are typically called to a scene of domestic violence by people overhearing or seeing an abusive situation. The officer's first responsibility is to stop any violent behavior. Second, the officer needs to determine if an arrest is warranted. As part of their training in domestic violence situations, police will review a checklist to determine if the situation fits the requirements for a mandatory arrest as required by state law. This checklist is reproduced as Figure A on the following page.

**Figure A: Domestic Violence Checklist
[Carried by Portland Police Officers]**

1. **Is there abuse?**
 - A) Attempting to cause or intentionally, knowingly or recklessly causing bodily injury.
 - B) Intentionally, knowingly or recklessly placing another in fear of imminent serious bodily injury.
 - C) Causing another to engage in involuntary sexual relations by force or threat of force.
 2. **Does the abuse involve family or household members?**

ORS 133.055 defined as: Spouses; former spouses; or adult persons related by blood or marriage; persons of opposite sex residing together or who formerly resided together, or

ORS 107.705 defined as: Spouses; former spouses; adult persons related by blood, marriage or adoption; persons cohabitating with each other or persons who have cohabitated; persons who have been in a sexually intimate relationship with each other within two years; or persons are the unmarried parents of a minor child.
 3. **Is there probable cause to believe that the crime of assault has occurred or that one has placed another in fear of imminent serious physical injury?**
 4. **Who is the assailant or potential assailant?**

ARREST ONLY THE PRIMARY ASSAILANT.

Determine by: (a) comparative extent of injuries or seriousness of threats creating fear of physical injury; (b) history of domestic violence between the persons; (c) whether any alleged crime committed in self defense; and, (d) potential for future assaults.
 5. **If the elements are present, arrest and lodge suspect. Do not issue citations-in-lieu-of-custody.**
 6. **Verify possible existence of restraining order.**
 7. **Present the "If you are the victim of domestic violence" form to the complainant.**
 8. **Advise complainant to contact the DA's Domestic Violence Unit next court morning between 8 a.m. and 11 a.m. for complaint review, 248-3873.**
 9. **Present restraining order information.**
 10. **Document:**
 - List phone numbers: message, in addition to work and home phone.
 - Take photos: Polaroids or request Criminalist.
 - Discuss: witnesses and children; alcohol and drugs; injury; prior situations.
 11. **ORS 133.310 (6) Failure to comply with no contact condition of release agreement.**
- (Refer: ORS 107.705, 133.310, 133.055, and 135.23)**

Police can only respond to reports of physical violence or the threat of physical harm. If they arrest the batterer, they remove him from the premises immediately and take him to jail. The victim is informed of her rights and sources for assistance. Figure B is an example of the information police provide to domestic violence victims.

Figure B: Abuse Prevention Act Information

If you are the victim of domestic violence, you can ask the District Attorney to file a criminal complaint. You also have the right to go to the circuit court and file a petition requesting any of the following orders for relief:

- (a) An order restraining your attacker from abusing you.
- (b) An order directing your attacker to leave your household.
- (c) An order preventing your attacker from entering your residence, school, business or place of employment.
- (d) An order awarding you or the other parent custody of, or visitation with, a minor child or children.
- (e) An order restraining your attacker from molesting or interfering with minor children in your custody.
- (f) An order directing the party not granted custody to pay support of minor children, or for support of the other party, if that party has a legal obligation to do so.

You also have the right to sue for losses suffered as a result of the abuse, including medical and moving expenses, loss of earnings or support, and other out-of-pocket expenses for injuries sustained and damage to your property. This can be done without an attorney in small claims court if the total amount claimed is under \$2,500.

Portland Women's 24-Hour Crisis Line: 235-5333

Domestic Violence Victim Assistance

Crisis Counseling

Restraining Order Information

Emergency Shelter

Transportation

Referral

Restraining Order Information

Circuit Court Data Entry

Multnomah County Courthouse

1021 S.W. 4th, Room 210

Portland, OR

248-3943

O.R.S. 133.055 (3)

Following the arrest of a batterer, the district attorney's office is responsible for prosecution. About 10 percent of persons arrested for domestic violence are prosecuted. Key to successful prosecution is how thoroughly the arresting officers collect evidence of the crime at the time of the arrest. Given the dynamics of domestic violence, the victim is not always willing to testify against her batterer. If the batterer is arrested under these guidelines he is usually charged with a misdemeanor. If it is his first offense, the district attorney may offer the option of "deferred sentencing." To qualify for the deferred sentencing program, the batterer must plead guilty and promise to follow the program requirements which include participation in a treatment program. He is released to his own custody with a "no contact with the victim" order and assigned a parole officer who monitors his adherence to the program.

If an officer determines that a domestic violence situation threatens the life of the victim, the officer conducts a felony arrest and the case continues under standard felony procedures.

Portland Police Bureau's Domestic Violence Reduction Unit

The Portland Police Bureau's Domestic Violence Reduction Unit (DVRU) was created in July 1993 in order to "break the cycle of violence"¹⁰ occurring in families. Prior to the creation of the DVRU, police in Portland received over 11,000 domestic violence emergency calls per year. Family violence has consistently been associated with generating future violence or tolerance for violence in affected children.

The mission of the Portland's Domestic Violence Reduction Unit is to decrease the level of domestic violence in Portland by:

- Investigating selected domestic violence cases;
- Promoting deterrence for domestic violence;
- Assisting victims by removing the obstacles that prevent them from protecting themselves and their children;
- Interrupting the modeling of violence to children as a means of solving problems; and
- Assisting in local and regional training and coordination to improve system-wide response to domestic violence.

DVRU receives approximately 550-650 misdemeanor cases each month. The unit is specially trained to 1) provide victims with information about available options; 2) explain to victims how to pursue a chosen option; and 3) assist victims with the pursuit of a chosen option. A victim who decides to obtain a restraining order is taking an important step toward preventing further violence in her life.

Upon reviewing the reports, the cases are prioritized for follow-up using the following criteria:

- In-custody cases (cases where an arrest was made);
- Cases where children were present;
- Cases where weapons were used;
- Cases where there is a prior domestic violence history involving victim and/or defendant;
- Cases where drugs/alcohol were involved.

In addition to the above DVRU also responds immediately to requests from:

- uniform officers in the field.
- District Attorney requests for follow-up on certain cases
- State Offices for Services to Children and Families and Parole/ Probation requests for assistance on domestic violence related cases.

Given the current staff resources—(1) sergeant, (6) officers, and (1) Hispanic Liaison Specialist, there is a great workload placed upon the unit and prioritization is necessary.

Victims who decide to obtain a restraining order can receive assistance from the DVRU officers, such as transportation to and from the courthouse, child care arrangements, and preparing the required paperwork in order to press charges.

A 1995 evaluation of the effectiveness of the DVRU, reported that “victims who receive DVRU services are more likely to engage in self-help behavior in the form of obtaining restraining orders, and they are more knowledgeable about getting legal help than victims who do not receive the services of the DVRU.”¹²

A survey of domestic violence victims rated the service of the DVRU as very positive. Ninety-six percent felt good about the concern the DVRU officers showed them, 95 percent gave them good or excellent ratings for being knowledgeable, 94 percent rated them as helpful, and 91 percent gave the DVRU officers positive ratings for the respect they showed them. The same respondents also rated the performance of the uniform officers with whom they had been in contact. Lower ratings came from survey participants whose only contact with the police was with the uniformed officers who responded to the 911 domestic violence call. Sixty-eight percent of victims considered the uniform officers’ overall knowledge to be good, 71 percent thought they were helpful, 78 percent gave above average ratings for the officers’ concern, 78 percent thought they were respectful, and 78 percent rated the overall service as good.

Before the creation of the DVRU, Multnomah County’s prosecution rate for domestic violence cases was at most seven percent. Of the cases it

handles, the DVRU prosecution rate is about 30 percent. Restraining orders were filed in 38 percent of the cases.

Multnomah County's Domestic Violence Community Response Team and the Deferred Sentencing Program

Multnomah County's Domestic Violence Community Response Team works with batterers through the County's deferred sentencing program. The Response Team is a program within Multnomah County's Department of Juvenile and Adult Community Justice. The program is designed to correct program shortcomings found by Adele Harrell's Baltimore Study:

1. Short delay between arrest/ deposition/ treatment.
2. Non-compliance sanctions.
3. Treatment programs for the offenders that are appropriate to their situation and of sufficient duration in a collaboration with the justice system, including the community corrections department.
4. Regular check up on the victim to ensure that she has a safety plan and is free of intimidation.

The deferred sentencing program requires the abuser to participate in a treatment program as an alternative to jail. The program works primarily with first-time offenders charged with misdemeanor assault and/or harassment. The program is an alternative to the expense of prosecution and still gets the offender into "the system." If the offender successfully completes the program to the satisfaction of the parole officer and the Multnomah County Family Court judge, the charges are dropped. To qualify for the program the offender must state that she or he is guilty of the charge, have less than five prior non-person convictions, and agree to no contact with the victim for the duration of the program or with permission from the parole officer.

When an offender enters into the deferred sentencing program he works with a team of professionals from the Domestic Violence Community Response Team. They include parole and probation officers, counselors, corrections technicians, and administrative staff. The primary goal of the team is to hold the offender accountable—not letting him get away with physical violence. The program works on behalf of the community—instead of the victim—thereby keeping the focus on the community's response to the abuser's behavior. The second goal of the team is to increase services to ensure that victims received the services they need. This goal is not being met because of inadequate resources. The program is meeting, or close to meeting this goal now, and has two grants pending.

The program benefits from the experience and cooperation shared among the six Multnomah County Family Court judges, the District Attorney's office, the Portland Police Bureau and the Multnomah County

Domestic Violence Community Response Team. All four groups have made the commitment to becoming educated on domestic violence issues and developing a coordinated response that makes a difference to the community.

The deferred sentencing program intensively manages batterers. Each offender meets with his parole officer weekly or monthly depending on the case. Within 72 hours of the offender's arrest a counselor meets with the offender to determine the treatment plan he will follow. The plan includes participation in at least 24 weeks of counseling with a private counseling program such as ASAP, the Men's Resource Center, or Transitions Project, Inc. If the offender is abusing drugs or alcohol, the program may require the offender to participate in additional treatment programs. Program treatment fees are generally paid by the offender, and funds are available to subsidize the fees for low-income offenders. During follow-up meetings the parole officer confirms the client's adherence to the program—including urine analysis—and provides guidance on any other obstacles the person may be facing. If the offender does not follow the program, he is put in jail, or placed on formal probation.

A parole officer or corrections technician checks in periodically with the victim to verify her safety and the offender's adherence to the program's restrictions. This focus on the victim is a departure from standard corrections procedures and recognizes that it is the relationship with the offender that increases the risk for the victim. That relationship and danger to the victim continue even though the offender has been arrested and is in the treatment program.

Each week the Family Court judges review the offenders who have been in the program for their first 30 days. Usually the parole officer recommends continuance. If the offender has not complied, the judge will revoke the deferment and sentence the offender to jail or to probation. In 1995, 230 domestic violence offenders entered the deferred sentencing program. Of those, 133 completed the program within nine months, and 27 reoffended during the period of probation—a seven-percent reoffense rate for the entire case load.

About 50 percent of the offenders in the deferred sentencing program complete the program compared to 60 percent successful completion rate for offenders who are sentenced and given probation. Program staff believe that the lower completion rate in the deferred sentencing program is due to several factors: (1) the unit carefully supervises cases and strictly enforces the requirements, (2) the unit has taken on more difficult cases. However, there has been no long-term evaluation of the effectiveness of the program in preventing future domestic violence by offenders who participate in the program.

With three officers, two correction technicians, and one counselor, the unit had sufficient staff to handle about 200 cases in the deferred sentencing program. Currently, the unit has added supervision on

probation of restraining order violators and those revoked from deferred sentencing. As of July 1997, three more probation officers and one technician have been added to supervise targeted felony domestic violence cases.

E. Shelters and Victim Services

In the Tri-County area, there are seven shelters for battered women and their children with 120 beds. In Multnomah County, there are five shelters, with 89 beds. The average stay in the shelters is between two and three weeks. During this time, shelter counselors determine what the women and children need to keep them safe and to support their struggle for independence from their batterers. They provide the women with information on obtaining a restraining order and give legal advice.

In 1996-97, there were 19,000 domestic violence calls made to 911 and 23,000 calls to shelters and crisis lines (some of these calls may be duplicates as many women must call a number of shelters before they find available space). Shelters turned away 90 percent of the women and children who called, primarily because of lack of space. Only 2,000 women were served. Local domestic violence professionals project the current and future need for shelter to be about twice the existing capacity.

The judges, the lawyers, the police, the social workers, and other witnesses we interviewed listed more emergency shelters as their first priority for victims of domestic violence, and more support for victims as their second priority. Shelters are underfunded and understaffed, and support services, including transitional housing are woefully inadequate. Shelter operators reported an immediate need for 30 more shelter beds and 120 transitional housing units. Battered women are given preference in Section 8 permanent public housing, a fact not generally known. Even with this preference, battered women must often wait six months to get into public housing.

The average woman seeking shelter from a batterer is not indigent. Many come from medium to high economic situations, but do not have access to their resources. They are, according to Dottie Smith of Raphael House, "economically as well as physically abused." Generally, these women are courageous and resourceful, not lacking in self-esteem as is often thought.

If the community can offer temporary financial resources to a victim, she may not have to depend on her batterer to support herself and her children, and she may be more willing to leave an intolerable situation, and be less likely to return to the batterer. A victim's ability to provide for herself and her children is directly related to her willingness to take action.

Non-English speaking victims have particular barriers because of language difficulties and lack of understanding by providers of cultural differences concerning domestic violence. Non-English-speaking victims typically lack financial resources. Victims in the Latino, Southeast Asian, Native American, African-American communities are all underserved.

Currently shelters receive 30 percent of their funding from the City of Portland and Multnomah County, 30 percent from the federal and state governments, 30 percent from individual contributors, and 10 percent from foundations. The local government funding for shelters is in jeopardy because of Measure 50 cutbacks. The only hope for continued funding at current levels is persistent advocacy at the city, county and state levels.

In the meantime, a program, called Non-Shelter-Based Services, has been approved by the Multnomah Board of County Commissioners. The program will provide health clinics, health service agencies, churches and community centers with County and U.S. Housing and Urban Development funding to provide women with:

- Assistance with obtaining a restraining order.
- Information on a "safety plan".
- General information on domestic violence.
- Assistance in transitional housing.
- Legal advice.
- Job information.
- Participation in a support group.

This program will have staff knowledgeable in other cultures and languages. Multnomah County Commissioners have included funding for the program in the County's current budget.

F. Treatment of Offenders

The Debate About Treatment

Treatment professionals do not agree on the best approach towards treatment of domestic violence offenders. There are two reasons: there have been few long-term studies about the outcomes of different treatment methods, and there is not agreement about the root causes of domestic violence in our culture.

Initially, the counseling treatment methods used for other deviant behavior were tried for both perpetrators and victims. Many therapeutic approaches were used including insight therapy, psychiatric examinations for victims, and couples therapy. Domestic violence was seen as being some type of "personal" problem. In the 1970's "wife beating" became a women's rights issue. In the late 1970s and early 1980s, battered women's advocates designed initial intervention strategies to interrupt the cycle of violence by focusing on assisting female victims."¹³ This in turn led communities to consider a punishment approach to perpetrators. Committee witnesses stated emphatically that the batterer should be arrested and then treated.

There is a debate between those who favor a confrontational approach which interrupts the battering behavior, and those who support

approaches that emphasize “curing men” of their battering behavior using a psychological model which looks to early childhood experiences. Treatment methods today are moving toward starting treatment with an intensive behavioral approach to break down a batterer’s rationalization and denial of his battering and then moving to a psychological model. However, Richard Gelles, Professor of Psychology at the University of Rhode Island, states there is no evidence that the confrontational model works best, but treatment professionals like it best.¹⁴

Sherman and Berk’s 1992 Minneapolis study of intervention demonstrated that arrest and a night in jail cut in half the risk of repeat violence against the same victim over a six-month, follow-up period. But subsequent replications in Omaha, Charlotte and Milwaukee refuted those results. Sherman points out that these studies support the hypothesis that the effects of criminal punishment depend upon the suspect’s “stake in conformity,” or how much he has to lose from the social consequences of an arrest.¹⁵ If the abuser is disconnected from society, criminal punishment is less likely to be a deterrent once the abuser is released from incarceration.

The abuser’s capacity for change depends in part on his willingness to change. If change is possible, it is slow. Studies show that treatment is effective only for men who have a stake in society, who have a reputation to maintain. For men who are generally violent, and for anti-social batterers, the only effective way to protect the victim and other potential victims from further abuse is to lock the abuser up for as long as possible. Men who violate restraining orders are particularly difficult to treat and require long-term treatment to change their behavior.

At the present time, there is a growing consensus that the focus of treating batterers should be to stop the battering behavior using social sanctions, such as training batterers not to batter, close probation supervision, and confinement in jail. “The view of battering as a systemic problem is widely accepted throughout the nation. The term, ‘coordinated community-wide response,’ has become well established in the field of domestic violence intervention. From this standpoint, battering is seen as primarily a social problem rather than as a mental health problem. Batterer intervention programs are then regarded as an educational component of a wide range of community interventions.”¹⁶

There are no “quick fixes” in any one aspect of a systemic response. It was clear from our witnesses that a strong law enforcement response to batterers is needed to increase the effectiveness of some intervention approaches. Law enforcement’s response is essential in protecting victims. The first task is to stop the violence. Only then can treatment methods look at other, related issues (childhood abuse, drug or alcohol abuse, or growing up in a family where domestic violence occurred and was learned). If domestic violence is not clearly identified as wrong and

illegal, many victims can be lured back into abusive situations because their batterer is in "treatment". Several witnesses to the Committee were emphatic in their opposition to anger management as treatment for batterers. One said, "get anger management out of the lexicon."

Typologies of Batterers

There has been increasing research on identifying different types of batterers based primarily on clustering selected characteristics about groups of known batterers. Although this research has provided needed insight into the complexity of describing the basis of battering behavior, it has not lead to clarity or direction for intervention. The value of this information is to prevent the application of one type of intervention (e.g. court-mandated treatment) in all circumstances or to imply that men can be "cured" from violent behavior. Two leading researchers in this area, Daniel G. Saunders and Edward W. Gondolf¹⁷ believe that a usable system to categorize types of batterers is a long way off. However, there is guarded promise in this approach which will help in designing interventions to respond to the range of batterers we now know are in our midst. Many feel that treatment can at least change behavior if not attitudes.

Why do they come to treatment?

Abusers have different reasons for coming to treatment. Most (80 - 90 percent) are court ordered in lieu of prosecution as part of the deferred sentencing program. Some come in response to their partner's ultimatum, and some come because they do not like what they have been doing and need help to stop the abuse, according to reports of recovering batterer witnesses to the Committee.

Standards

There has been a rapid expansion of standard setting for "treatment" by states and localities. Due to mandated treatment in many states, there has been pressure to establish standards for treatment. Standards have been approved in Colorado, Iowa, Massachusetts, Pennsylvania and Florida. On a county level there are standards in San Diego and Santa Clara Counties in California. However, as discussed previously, there is not a consensus about treatment approaches and no data about effectiveness or outcomes.¹⁸

In Oregon, the Oregon Domestic Violence Council developed "A Collaborative Approach to Domestic Violence, The Oregon Protocol Handbook." This Oregon approach is less prescriptive than that in San Diego or Santa Clara counties with regard to specific treatment approaches and focuses on principles of treatment and perspectives toward domestic violence prevention.¹⁹

G. Prevention, Public Awareness

The only hope for a long-term reduction in domestic violence is to prevent the pattern of violence from beginning. Prevention means a

change in the way society looks at violence, at the way men look at women, and a change in the way we socialize our young. It means public outrage and public censure of the perpetrator. It means assuring girls that they are human beings of worth, and they do not ever deserve to be mistreated. It means teaching boys that they can be manly without seeking to control women. It means treating boys and girls with equal respect—at home, at school, in the workplace.

It is important that children learn to relate as equals and without the use of violence. They must have the opportunity to develop their own sense of personal power so they will not feel the need to exert power and control over others. They must build self esteem regarding their own gender and how to relate to the opposite sex in healthy ways. All of this should occur at an early age at home and at school.

The Oregon Domestic Violence Council has developed “Education Protocols for Grades K-12” to provide a coordinated community response to prevent domestic violence. The following protocols will enable educators:

- A safe environment in the schools where violence is not tolerated.
- Primary prevention through education in the classrooms.
- Secondary prevention through early intervention with children who witness domestic violence in their homes.
- Secondary prevention through early intervention with young people involved in abusive relationships.

These protocols can be fully implemented only if they are both accepted at the grassroots level and mandated by legislation. A working relationship between schools and local domestic violence programs is a first attainable step toward implementation. Another step would be the provision of standardized domestic violence training in Oregon’s teacher training institutions.

There are two local programs already used in Portland’s schools: “No Punching Judy” and “Chance for Change.”

“No Punching Judy” is a curriculum developed by Community Advocates for Safety and Self-Reliance. It is a domestic violence awareness and prevention curriculum for grades 1-5, designed to break the inter-generational cycle of violence against women and children. It teaches children about domestic violence and domestic violence resources, helps them develop safety plans, encourages non-violent conflict resolution and dispels gender role stereotypes. The program features a puppet show video, a nine-week curriculum and comprehensive six-hour training for educators.

During the first two years of the program, 1,600 students participated in “No Punching Judy.” Staff and volunteers offered children the

opportunity, also known as a “safetime” visit, to speak with them one-on-one about any topic the child chose. Out of 424 “safetime” visits conducted with individual children, roughly one-third of the children spoke about a personal experience with domestic violence.

“Chance for Change” developed by Bradley-Angle House, Portland Women’s Crisis Line, and Clackamas Women’s Services, is a curriculum designed for use with junior high school and high school age youth. It includes gender role socialization, dynamics of domestic violence, healthy communication, cultural issues.

Other promising prevention approaches include:

- Parent education programs teaching parents to be non-violent role models, provide consistent discipline, and limit children’s exposure to violent entertainment.
- Social learning programs for children, to teach them social skills for avoiding violence, and non-violent means to express anger and meet other needs. Gender specific programs for boys and girls that address sex-role stereotyping, non-violence conflict resolution, and self esteem.
- Programs to strengthen community organizations, social networks, and families that promote strong, prosocial values.
- Stronger community policing programs to improve police responsiveness, reinforcement of prosocial values, and increased certainty of arrest and punishment for violent crimes.
- Public awareness programs that articulate community values against domestic violence.

Domestic violence is the subject of both news articles and special features in the print media, radio, and television. There has been greater interest and attention sparked by the O. J. Simpson trial. Several witnesses to the Committee testified that there was a need for a sustained, wide spread public information program to provide accurate information about domestic violence and develop a “no tolerance” attitude in the general public. (See elements of the public awareness program in Appendix G.)

In 1995, Attorney General Janet Reno and the Secretary of Health and Human Services Donna Shalala created the Advisory Council on Violence Against Women to “help promote greater awareness of the problem of violence against women, to help devise solutions to the problem, and to advise the federal government on implementing the 1994 Violence Against Women Act.” The Council developed checklists of “important steps communities can take to end violence against women.” These checklists are targeted to the religious community, health care professionals, sports players and organizations, the entertainment and news media, and business and labor leaders. (See Appendix F.)

H. Data Issues

We have accurate data on the local incidence of domestic violence only from crisis calls, from police records and from calls to shelters. No other agency or service is required to report domestic violence problems. Nationwide, it is estimated that 90 percent of domestic violence incidents are not reported.

The Committee found many reasons for the under-reporting of domestic violence:

- Except for police and shelters, there is no consistent reporting of domestic violence.
- Many women do not define themselves as battered and do not make the call which would record the incident.
- Many victims do not know where to report incidents of domestic violence.
- Victims often fear reprisals from the batterer if police are called.
- There are no standardized methods for gathering domestic violence statistics.
- Some police officers make no serious effort to gather these data, nor do they agree on the official definition of what constitutes domestic violence.
- Often police are called not after the first incident but only after the fifth or sixth assault.
- The victim may feel that she has little hope of obtaining shelter if she calls.

We, as a society, need accurate official local statistics. Without them, we cannot know whether existing efforts at intervention or treatment are working. We cannot document the size of the problem. We cannot gauge the need nor seek funding to address domestic violence. In the event that a program is developed, there is no way to evaluate whether it works absent the data. We cannot devise effective prevention measures without evaluative data.

Data are needed for:

- basic research on the extent, causes and effects of domestic violence;
- resolving debates over proposed legislation and budgets;
- guiding administrative or managerial decisions over program policies and resources; and
- informing the public about the seriousness and extent of these problems in our community.

The National Institute of Justice Research Report on Domestic and Sexual Violence Data Collection emphasizes the need for collaborative data collection within the criminal justice system and from other key sources such as health care providers, employers, and schools.

A 1991 Oregon law mandated local law enforcement agencies to provide domestic violence data. The Oregon Legislature reinforced that mandate in 1995 because these agencies were not systematically collecting this data. The federal Crime Act of 1994, Section 40292 of Title IV—the Violence Against Women Act—specifies that a study shall be conducted on “how the states may collect centralized data bases on the incidence of sexual and domestic violence offenses within a state.”

The Oregon Domestic Violence Council Data and Research Committee reported in March 1996 the first statewide statistics on domestic violence, as recorded from 75 percent of Oregon law enforcement agencies from January through June of 1995. In that report Multnomah County listed 7,132 incidents and 3,724 arrests including: 12 homicides, 1,753 cases of aggravated assault, 3,385 incidents of simple assault, 245 domestic restraining order violations.

Since law enforcement agencies are the primary point of first contact with the criminal justice system and are responsible for enforcing protection orders, their data are a major source for estimating the overall prevalence and severity of domestic violence problems. But incident-based reporting is under reported.

Domestic violence is a complex issue involving many social and psychological forces, so reliance on a single statistical indicator does not present a complete picture of the problem. A truly comprehensive data collection effort for domestic violence incidents would involve multiple service domains. Because of the psychological and social impact that domestic violence can have on victims, awareness and treatment of cases often may not originate in or involve the criminal justice system. Data from health and social service providers could be used to supplement prevalence estimates based on criminal justice sources.

But concerns about client confidentiality may prevent health and social service providers from sharing information on specific individuals with the criminal justice system. It may also be impossible to link data across service domains and agencies to avoid duplicate counting.

Information from prosecutors, courts, and corrections can provide important insights into the processing and subsequent dispositions of cases. However data from these sources are less frequently available than are law enforcement data.

Annette Jolin, a former Portland police officer and associate professor of urban and public affairs at Portland State University, urges the state of Oregon to do a victimization study which can supplement domestic violence crime statistics generated by law enforcement agencies.

The purpose of the survey is to gather information on unreported crimes as well as on aspects of reported crimes that may not be collected through police-generated crime statistics. There is considerable resistance from police to collecting this information. They say these surveys are too costly and too intrusive into citizens' lives. There is also controversy over survey questions and methods. Also, some women may be reluctant to report their victimization, even in a confidential survey.

Some barriers to accurate reporting may never be completely surmounted given the nature of these crimes and the social and behavioral issues involved. But there is ample evidence to recommend the use of multiple sources of data to develop a comprehensive understanding of the problem.

Collecting data represents the formal acknowledgment of the importance of an issue. Domestic violence is now designated as a crime, recognition that such behavior harms not only the individual victim but society as a whole. If we fail to keep systematic records of these individual events, we do not know to what extent we are collectively harmed.

I. Resource Needs

State perspective

The current domestic violence funding situation in Oregon is dismal according to "State of Oregon: Statewide Strategy for Use of Funds to Domestic Violence, 1995." The following excerpts from that report succinctly summarize the major service gaps and resource needs.

1. Victims' Services

- Existing programs for victims of domestic violence are underfunded and inadequate to fill the current need. The sole statewide public funding source to domestic and sexual violence programs remains the Marriage License Tax, which is not equal to the need.
- The demand for shelters and other victims' services is increasing, driven by the general increase in population, the increase in reported incidence of domestic violence and an increase in awareness by victims of services available.
- Racial and ethnic minorities are underserved within the current system, particularly acute in non-English-speaking populations.
- Restraining orders are increasing (15 percent statewide increase in 1994). Numbers of staff and/or volunteers available to assist people through the legal system are declining in relationship to the numbers needing such services.

2. Systems Coordination

- There is a lack of training among primary providers (law enforcement officers, emergency room staff, etc.) on the symptoms and issues of domestic violence.

- Transitional planning and services are lacking. Victims' services focus on the point of crisis, but offer little in the way of education, employment, life skills.
- Treatment is oriented toward short-term solutions of questionable impact, such as anger management, and not on the more long-term, systemic and attitudinal sources of domestic violence.
- There are too few supervision programs for those who have violated restraining orders.

3. Prevention

- There is a generally low level of awareness, and little public education, on the issue of domestic violence.
- Current resources are dedicated to crisis management. Few resources are dedicated to long term, whole system, societal solutions.

4. Legislative Advocacy and Leadership:

- Funding for domestic violence services and resources are short-term and piecemeal. With the exception of the Marriage License Tax and limited local funding, there are no dedicated, ongoing sources of funds for resources or services. Short term funds that are available are inadequate to the need; the application process for those funds creates competition among agencies that could (and should) function as partners.

The state strategy for using domestic violence funds is:

- Direct the bulk of the monies toward victims' services. Task force members deplore the "crisis-oriented" status of the state's current initiatives, but stress that the problem remains in the crisis stage. The provision of services to victims, many of whom remain in life-threatening situations due to lack of resources, is the most critical priority at this time.
- Support coordination of systems and prevention-oriented services, but advocate for funding from other than domestic violence earmarked state and federal funds. These coordination and prevention services are issues that can be integrated with other educational, social service, law enforcement and criminal justice initiatives.

Portland/Multnomah County Perspective

In Portland and Multnomah County, "limited resources and high demand for services present a constant challenge to intervention programs. Coordinated community response offers the best opportunity to meet that challenge and to provide safety and justice for the victims of domestic violence."²⁰

The Multnomah County Family Violence Intervention Steering Committee, in its Domestic Violence Funding Initiative (1996-1997),

recommended that the amount of funding required from Multnomah County and the City of Portland to adequately deal with domestic violence in Multnomah County is \$3.02 million, an increase of \$1,820,000 over and above the current \$1.2 million budget level. This expanded budget would achieve three primary goals:

Goal 1: Stabilize and increase victim resources.

- Ongoing victim services. \$450,000
- Non-shelter-based services. \$225,000
- Emergency shelter operations. \$200,000
- Restraining order advocacy. \$ 25,000
- Legal representation for low-income domestic violence victims. \$ 80,000
- Transitional housing services for victims and children. \$100,000

Goal 2: Improve the response of the justice system to incidents of domestic violence.

- Increase prosecutions, increase staffing in the District Attorney's Domestic Violence Unit. \$150,000
- Supervision of all domestic violence offenders. \$250,000
- Additional staffing, Police Bureau's Domestic Violence Reduction Unit. \$325,000

Goal 3: Develop a community-wide attitude that domestic violence will not be tolerated.

- Annual public awareness campaign, and support for school prevention programs. \$ 15,000

TOTAL (additional funds over current level): \$1,820,000

An additional one-time, \$1.6 million expenditure is needed to build or purchase and remodel two buildings: one for transitional housing (\$800,000) and one for emergency shelter (\$800,000). These funds are most likely to come from federal or private sources.

The Byrne Grant, which accounted for \$175,000 of the City's contribution to emergency shelter, intensive intervention for victims, legal assistance for low-income women, and assistance in obtaining restraining orders, will run out in 1997-1998. Because of other budget cuts, the total loss to emergency domestic violence shelters for 1997-1998 will be \$308,500.

Although there will be a substantial increase in funding for non-shelter services in 1997-1998 due to a new HUD Supportive Services Grant,

these funds can not be used to offset losses in emergency shelter funding. Multnomah County General Fund contribution to non-shelter services does not appear to be in danger of Measure 50 cuts because the county has set a high priority on those services.

In Multnomah County, the Marriage License fee is \$60. Of this amount, \$25 goes to cover county processing costs, \$25 goes to the state's domestic violence fund, \$10 goes to county conciliation services. In 1995, 5,921 licenses were issued.

IV. CONCLUSIONS

A. Laws

1. Presently domestic violence is a Level 4 Misdemeanor unless a weapon is used, with a maximum sentence of one year of imprisonment. This classification understates the seriousness of the crime and does not give sufficient sanction to deter abusers.
2. Women who have been abused typically have few or no financial resources of their own. This lack of financial resources is a major reason why women do not leave the abuser, which leads to further abuse and dependency. Oregon law does not allow judges to require financial support for domestic violence victims from the abuser.
3. Abusers often attempt to obtain child custody as a means to manipulate the victim. Current law allows the abuser to argue for custody in domestic abuse situations. The Model Code on Domestic and Family Violence recommends a different approach: assume that the abuser is not fit to have custody unless fitness can be successfully argued before the court. The primary concern is the safety and well being of the child. Children should reside with the parent who is not a perpetrator of domestic violence.
4. For restraining orders to be effective, police must have information about such orders. Since an abuser can cross jurisdictional lines, it is important to have a state registry of restraining orders to provide law enforcement officials adequate information to arrest violators.

B. Religious Organizations

1. Churches, synagogues, and other religious organizations play an important role in establishing and maintaining the norms and values of a community. Some religious organizations maintain values that tolerate domestic violence. These include patriarchal values and maintaining the family unit, even when it is dysfunctional or abusive.
2. Religious organizations, according to witnesses, have been slow to recognize and speak out about domestic violence. There are some important and notable exceptions, such as clergy training programs on domestic violence and clergy giving sermons about not tolerating domestic abuse.
3. In addition to a role in influencing community values, religious organizations can be an important source of counseling, support, and social services for victims of domestic violence.

C. Health Care Providers

1. Health care providers are key “entry points” for women who are victims of domestic violence. The Oregon Medical Association has developed domestic violence protocols for use by health care professionals which include considering battering as a possible

cause when diagnosing medical complaints and encouraging to the victim to seek assistance. Health care providers need training to recognize domestic violence and to be able to describe to the victim her rights and availability of community services.

2. Although there is required reporting of child abuse to authorities, there is no similar requirement for health care professionals and social workers to report domestic violence cases. While there are good arguments both for and against mandatory reporting, the Committee is very concerned about the potential problems that may arise because of mandatory reporting. As an alternative to mandatory reporting, health care and social service professionals could provide women suspected of having been abused with information about and referrals to community shelters and domestic violence resources, as recommended in the Model Code.

D. Police and Community Corrections

1. Oregon's mandatory arrest law for domestic violence offenders is an important means of protecting victims and serves as a deterrent to further offending. Following arrest, the district attorney may prosecute whether or not the victim is willing to press charges and may opt to offer deferred sentencing if it is the abuser's first domestic violence offense.
2. The Portland Police Department's Domestic Violence Reduction Unit is an effective way to provide assistance to victims and to increase prosecution of abusers, but only 12 percent of priority cases receive DVRU services because of staff limitations.
3. When a batterer is convicted and sentenced to probation, the victim is only safe if the batterer is closely supervised by his probation officer. The specialized unit in Multnomah County's Domestic Violence Community Response Team, provides close probation supervision of abusers and monitors their treatment program compliance. Close supervision is less expensive than imprisonment of offenders. However, the unit has heavy case loads and insufficient staff.
4. Multnomah County's Domestic Violence Community Response Team, specializing in domestic violence in addition to supervising abusers on probation, provides important services to victims.
5. Although the DVRU and the Domestic Violence Community Response Team are promising programs, no long-term program evaluation has been conducted to establish their effectiveness and impact.

E. Shelters and Victim Services

1. Emergency shelters and transitional housing for battered women and their children are woefully inadequate to meet present and future demand. These services were the first concern of our witnesses. The second was for support services to these victims. Cultural and

language barriers and lack of services make it especially difficult for some victims of domestic violence of different ethnic and cultural backgrounds to get needed services.

2. Battered women may be without financial resources as well as physically abused and must be able to support themselves and especially their children if they are to become independent of their batterers. Support services and financial help for battered women and their children are inadequate to the need.
3. The proposed Non-Shelter-Based Services Program for health care agencies, churches, and community centers would provide some needed support services and advocacy, but cannot take the place of emergency shelters.

F. Treatment of Offenders

1. There is very little evaluation of treatment programs, so little can be said about either the effectiveness or reduced violence of batterers who have completed various forms of treatment. There is a need for long-term follow-up studies with offenders and victims.
2. There is growing agreement about the treatment of offenders:
 - The first task is to stop the abuse.
 - A batterer's behavior is about control.
 - An integrated approach to intervention for batterers is essential to protect victims and affect batterers. An integrated approach includes police, courts, medical, treatment, education, and other services.
 - Additional research is necessary in batterer typology and intervention effectiveness. Initial information in these areas is promising.
 - Some batterers cannot be "cured."
 - Anger management is not an effective treatment mode for batterers.
3. The "Standards for Batterer Intervention Programs," in the *Oregon Protocol Handbook*²¹, although preliminary, are useful because of their focus on principles and system perspectives.
4. There is reason to hope that interventions can be designed to accommodate the range of batterers and that treatment can at least change behavior if not attitudes.

G. Prevention, Public Awareness

1. Prevention is the most cost-effective solution to the problem of domestic violence. However, because the problem remains in the crisis stage most domestic violence resources are applied to assisting victims, and few are applied to prevention.
2. Children can be socialized to respect each other and themselves at a very early age even before they go to school. The Oregon Domestic

Violence Council has developed protocols for reaching children in the schools, addressing gender roles and non-violent conflict resolution, and for primary and secondary prevention strategies. These protocols if implemented can be an important mechanism for preventing domestic violence.

3. To prevent further domestic violence, the community must be aware of the problem and willing to provide the resources needed for women to leave violent relationships and prosecute offenders. Comprehensive approaches to prevention and public awareness involve all segments of the community including businesses, churches, schools, community organizations, and health care providers.

H. Data Issues

1. There is a lack of accurate data about domestic violence. Domestic violence data are under-reported and are not being collected from enough sources to accurately gauge the extent of the problem or the efficacy of interventions.
2. There has never been a crime victimization study in Oregon which would identify the extent of domestic violence. In Oregon, there were no state-wide data on domestic violence until 1996, and only 75 percent of localities provided information, although state law requires all law enforcement agencies to report such data. Law enforcement statistics, when they are available, provide only a partial view of the problem.
3. Accurate local statistics on domestic violence are necessary for making intelligent policy decisions, for allocating resources, and for research. Multiple sources and collaborative data collection, including victimization surveys, can yield the comprehensive data needed.

I. Resource Needs

1. Current domestic violence resources are dedicated to crisis management. Few of the resources are dedicated to long-term, whole system societal solutions.
2. The only dedicated source of funds for domestic violence is the marriage license fee, which does not generate enough revenue to meet present and future needs.
3. With property tax limitations and budget cutbacks at the state and local level affecting all governmental services, meeting resource needs for domestic violence services will continue to be difficult.
4. The major service gaps and resource needs are:
 - Victims services including shelters, legal assistance, and assistance within the criminal justice system.

- Systems coordination including training about domestic violence, and development of multi-discipline approaches to handling domestic violence.
 - Prevention to overcome the low level of public awareness and prevent domestic violence before it happens rather than spending most resources on aiding victims and stopping domestic violence.
5. Without strong legislative advocacy and leadership, little progress will be made to close service gaps and generate needed resources.
 6. Programs for victims' services are underfunded and inadequate to fill the current need. Victim services focus on the point of crisis but can offer little in the way of education, employment, life skills. Current resources are dedicated to crisis management. There are few resources available for long term, whole system, societal solutions. Resources for services for racial and ethnic minorities is needed and currently not available.
 7. Funding for domestic violence emergency shelter services in Multnomah County and the City of Portland will not maintain current service levels in their 1997-1998 budgets. Some resources for domestic violence services, but not for shelters, are available from federal grants.

V. RECOMMENDATIONS

The Committee has developed two sets of recommendations. The priority recommendations are the most important and urgent. The other recommendations cover a wide range of concerns identified by witnesses and the Committee. The Committee recognizes that many of the recommendations require public and private resources. Since the City of Portland and Multnomah County have identified domestic violence as one of their urgent benchmarks, they should provide adequate funding and staff resources for domestic violence programs. The community—non-profits, businesses, and individuals—should also support programs for domestic violence.

A. Priority Recommendations

1. Double the emergency shelter capacity and services for victims of domestic violence.

Presently only 10 percent of the women making requests for emergency shelters are served. The Committee recommends increasing the number of victims served to 20 percent, recognizing that there will still be a large number of women needing services who will be turned away by emergency shelters. The Committee sees this as an interim, but achievable short-term goal. The long-term goal should be to meet 100 percent of the need so that no woman has to remain with her abuser because she cannot find refuge and safety for herself and her children.

Similarly, victim services which include assistance in education, training, transitional and permanent housing, child care, and counseling, are a high priority. Women need support and assistance to become self sufficient and productive.

2. Increase the prosecution rate of abusers.

Currently many domestic violence abusers who are arrested are not prosecuted and are released without consequences. Prior to the Portland Police Bureau's Domestic Violence Reduction Unit, 7 percent of all those arrested for domestic violence were prosecuted. The DVRU's prosecution rate for domestic violence "priority cases" is 30 percent. Because of limited staff capacity, the district attorney's office of necessity triages the cases, prosecuting only cases which are considered the highest priority and in which there is a strong likelihood of conviction. Increasing prosecution will send a clear signal to abusers that there are consequences for victimizing their partners and help to break the cycle of violence.

3. Require health care and social service professionals to provide women, whom they suspect are victims of domestic violence, with information on their rights and community domestic violence resources.

The Oregon Legislature should pass legislation to require health care and social service professionals to provide information to victims of

domestic violence concerning their rights, legal procedures, and community resources. Health care and social service providers are in a strategic position to provide such information to women. The Model Code recommends that state public health agencies provide written materials to health care professionals concerning the rights of victims and remedies and services available to victims of domestic violence, and includes examples of information to be provided to suspected victims.²²

4. Increase public awareness of domestic violence and provide training for professionals

Public awareness about domestic violence and development of strong community norms against domestic violence are needed. Abusers and victims need to know that our community does not tolerate domestic violence. Responsibility for stopping domestic violence and helping victims needs to be widely shared throughout the community including places of work, religious and community organizations, and the media. A suggested approach for a public awareness campaign is outlined in Appendix G.

Training for professionals is also needed. These include lawyers, police, social service providers, health care professionals including doctors, nurses, dentists, educators, religious leaders, and human resource professionals and managers in business. Each professional needs to understand the causes and symptoms of domestic violence as well as the particular role they can play in stopping domestic violence and providing support to victims.

5. Improve data collection and reporting on domestic violence.

Social service agencies and health care organizations and others should collect and provide data on domestic violence.

The State of Oregon should carry out a victimization survey, and evaluation studies to determine the effectiveness of programs for stopping domestic violence and for treating offenders.

B. Other Recommendations

The following recommendations are necessary if there is to be a comprehensive, systemic effort to end domestic violence.

Laws

The Oregon Legislature should:

1. Increase the classification of domestic abuse in repeat cases from a misdemeanor to felony.
2. Provide judges authority to require abusers to pay support costs as part of a restraining order.
3. Change laws to allow judges to award custody of children to the parent who is not the perpetrator of domestic violence in both

restraining orders and permanent custody. Awarding custody to the non-abusing parent would be a rebuttable presumption.

4. Develop a state-wide computerized registry of restraining orders.

Religious Organizations

1. Ecumenical Ministries of Oregon and other religious organizations should provide training for clergy to help them identify cases of domestic violence and refer victims to resources in the community.
2. Clergy should give periodic sermons on domestic violence issues such as danger points, and the unacceptability of domestic violence.
3. Seminaries should provide students with curriculum on domestic violence to prepare clergy to deal with these issues.
4. Religious organizations should provide support services for victims of domestic violence.

Health Care

1. Hospitals and other health care providers should implement the domestic violence protocols developed by the Oregon Medical Association.

Police and Community Corrections

1. The Portland City Council should expand the Portland Police Bureau's Domestic Violence Reduction Unit.
2. The Multnomah County Commission should expand the Domestic Violence Community Response Team responsible for supervising the deferred sentencing program to ensure proper case management and a manageable case load.
3. Increase the capacity of the Portland Domestic Violence Reduction Unit and the Multnomah County Community Domestic Violence Community Response Team to provide a multi-disciplinary services for victims (social workers, housing, employment, legal assistance in addition to law enforcement).

Treatment of Offenders

1. Governments, foundations, and others should provide funding to evaluate the effectiveness of batterer treatment methods including long-term follow-ups and batterer typology.
2. Endorse and promote an integrated approach to treatment as presented in The Oregon Protocol Handbook.
3. The Oregon State Domestic Violence Council, in consultation with the Oregon Coalition Against Domestic and Sexual Violence, should develop standards for individual offender treatment and prepare legislation to implement offender treatment standards.²³

Prevention, Public Awareness

1. Schools should expand their programs to teach children about domestic violence following the "Education Protocols" developed by the Oregon Domestic Violence Council.
2. Interested City Club members should create a Domestic Violence Awareness Committee composed of business, education, religious, community organizations, and public citizens to design and implement an ongoing domestic violence awareness and advocacy program for the Portland Metropolitan area.

Resource Needs

1. The state should continue to direct the bulk of domestic violence funds towards victims' services.
2. The state should support coordination of domestic violence systems and prevention-oriented services, and advocate for funding for those priorities from other sources.
3. The state, county, and city, as well as local school districts, should fund programs for domestic violence prevention.
4. Multnomah County should fund two more district attorneys assigned to domestic violence.

Respectfully submitted,

Marie Avery
Mike Balter
Charles Fosterling
Leslie Hildula
Marguerite Oliver
Ann Roemer
Charlotte Schwartz
Pauline Anderson, chair

Tom Pickles, research advisor
Kurt Wehbring, research advisor
Paul Leistner, research director

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VI. ENDNOTES

- ¹ Cited in *Next Time, She'll Be Dead* by Ann Jones, and Sue E. Eisenberg and Patricia L. Micklow, "The Assaulted Wife: 'Catch 22' Revisited," *3 Women's Rights Law Reporter* 138, 138-139 (1977).
- ² Oregon State Law Enforcement Data System, March 1997.
- ³ The Committee saw this statistic in a wide variety of sources.
- ⁴ Testimony of Judith Armatta, Oregon Coalition Against Domestic and Sexual Violence; Rod Underhill, Deputy District Attorney, Multnomah County, October 2, 1996.
- ⁵ The "Model Code on Domestic Violence" was developed by the Family Violence Project of the National Council of Juvenile and Family Court Judges in 1994. Judge Stephen Herrell, Circuit Court Judge, Multnomah County was a member of the Steering Committee and President of the National Council of Juvenile and Family Court Judges.
- ⁶ Source: Coordinating Council for Domestic Violence.
- ⁷ "Model Code on Domestic and Family Violence." Sections 505 and 506.
- ⁸ "Oregon's 1996 Drug and Violent Crime Strategy," June 1996, pp 102.
- ⁹ The Family Violence Prevention Fund. "News and Tips for the Domestic Violence Community." March 27, 1997, Volume 3, Issue 7.
- ¹⁰ Brooks, B. "Portland Police Bureau Domestic Violence Reduction Unit Program Description." Unpublished Document. 1993.
- ¹¹ Dr. Annette Jolin & Maria Clavadetscher. Portland State University Center for Urban Studies. *Implementation and Assessment of a Community Policing Unit to Address Domestic Violence in Portland, Oregon.* January 1995. P. 8.
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- ¹³ Morley, Evelyn. "An Analysis of the Development of Multi-System Interventions Designed to Stop Domestic Violence." Unpublished research paper. 1995.
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¹⁷ Gondolf, Edward W. "Who Are Those Guys? Toward a Behavioral Typology of Batterers." *Violence and Victims*, Vol 3, No. 3, 1988. Pp. 187-203.; Saunders, Daniel G. "A Typology of Men Who Batter: Three Types Derived From Cluster Analysis." *American Journal of Orthopsychiatry*. 62(2). April 1992. Pp. 264-275.

¹⁸ "Treatment Standards for Abusers." *Violence Update - Point-Counterpoint*, Vol. 5, No. 1, September 1994.

¹⁹ Oregon Domestic Violence Council. *A Collaborative Approach to Domestic Violence, Oregon Protocol Handbook*. 1996.

²⁰ Multnomah County Family Violence Intervention Steering Committee. *Safety and Justice: Community Intervention in Domestic Violence, The Multnomah County Model*. 1995.

²¹ Oregon Domestic Violence. *Oregon Protocol Handbook*. 1996.

²² National Council of Juvenile and Family Court Judges, "Model Code on Domestic and Family Violence." Section 506. January 1994.

²³ "Oregon's Domestic Violence and Sexual Assault Strategy for 1996." July 1996. p. 27.

VII. APPENDICES

A. Witnesses Interviewed by the Committee

Judith Armatta, director, Oregon Domestic Violence Council

Belle Bennet, Community Advocates for Self-Reliance

David Butzer, captain, Domestic Violence Reduction Unit, Portland Police Bureau

Stephen Herrell, judge, Family Court, Multnomah County

Marc Hess, counselor, Multnomah County Domestic Violence Community Response Team

Jeff and Mike, recovering batterers

Annette Jolin, professor, Justice Administration, Portland State University School of Urban and Public Affairs

Kathy and Marge, domestic violence survivors

Robert Kruger, pastor, St. Andrews Parish, Portland

Paula Kurshner, judge, Family Court, Multnomah County

Paul Lee, director, Men's Resource Center

Heather McIntosh, counselor, Multnomah County Domestic Violence Community Response Team

Maureen McKnight, family law attorney, Oregon Legal Services

Rev. Judith Meckling, chaplain, Legacy Systems

Bobbie Mekvold, parole officer, Multnomah County Domestic Violence Community Response Team

Jessica Mindlin, attorney and Courtwatch project manager, Legal Access Project of the Oregon Coalition Against Domestic and Sexual Violence

Evelyn Morley, LCSW, Portland State University

Richard Reese, chair, Committee on Domestic Violence, Rotary Club of Portland

Chiquita Rollins, executive director and domestic violence coordinator, Family Violence Intervention Steering Committee, Multnomah County

Patricia Ross, pastor, First Congregational Church

Gary Schoenberg, rabbi, Portland Unaffiliated Jews

Dan Sheridan, Ph.D. candidate, Subject - Domestic Violence, Oregon Health Sciences University

Dottie Smith, community education coordinator, Raphael House

Rod Underhill, deputy district attorney, Multnomah County

Robert Weinrich, clinical director, Men's Resource Center
Elizabeth Welch, judge, Family Court, Multnomah County
Tess Wiseheart, executive director, Women's Crisis Line

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C. Domestic Violence Resources in the Portland Metropolitan Area

24-HOUR CRISIS LINES

Police Emergency	9-1-1
Police non-emergency number	230-2121
Portland Women's Crisis Line (AT&T language line, use of Hispanic Access)	235-5333
Senior Help Line	248-3646
Child Abuse Reporting Line (Services for Children and Families)	731-3100
National Domestic Violence Hotline	1-800-799-SAFE
Emergency Shelter and Food (Metro Crisis)	525-6400

OTHER ABUSE REPORTING LINES (Answered during weekday business hours)

Multnomah County Licensed Foster Care Abuse Reporting Line	248-3000 Ext. 6061
Developmental Disabilities Protective Service Worker	248-3658

COMMUNITY RESOURCES
Services for Victims/Survivors of Domestic Violence.
All domestic violence shelters in the Tri-County area
have 24-hour crisis lines (*).

Asian Family Center	235-9396
case management	
Bradley-Angle House	281-2442*
office	281-3540
emergency shelter, transitional housing, support groups, middle & high school education programs	
Community Advocates for Safety and Self-Reliance	244-7226
elementary school education program, self-defense classes	
Council for Prostitution Alternatives	223-4670
support services—prostitution survivors	
El Programa Hispano	669-8350
for Spanish-speaking / Latina women, counseling, support groups, community health promoter	
Garlington Mental Health Clinic	249-0066
support groups, counseling	
Human Solutions, Inc.	248-5201
support groups	
Portland Women’s Crisis Line	235-5333*
office	232-9751
support groups, restraining order & court advocacy, middle & high school education programs, safe home	
Programa de Mujeres	232-4448
office	238-7831
Crisis line (not staffed 24 hrs; workers will return calls), case management for Spanish-speaking women	
Raphael House	222-6222*
office	222-6507
emergency shelter, transitional housing, long-term housing	
Salvation Army West Women & Children’s Shelter	
office and crisis line	224-7718
emergency shelter, transitional housing	
Volunteers of America Family Center	
office and crisis line	232-6562*
emergency shelter for battered and homeless women with children	
Women’s Agenda Counseling	235-4050
support groups, counseling	

YWCA Women's Resource Center	294-7444*
office	294-7454
emergency shelter, counseling	

The following services in neighboring counties are available for Multnomah County residents who are victims/survivors.

Clackamas Women's Services	654-2288*
office	722-2366
Washington County Domestic Violence Resource Center	640-1171*
office	640-5352
Vancouver (Washington) Safechoice Shelter	1-360-695-0501*
office	1-800-695-0167

Specialized Law Enforcement Units

Portland Police Domestic Violence Reducation Unit	823-0961
Portland Police Bureau Hispanic Advocate	823-0184
Gresham Police Department/ Community Policing Domestic Violence Specialist	618-2394

Batterers' Re-education Programs

Men's Resource Center	235-3433
Phoenix Rising (gays and lesbians)	223-8299
Ruth Ann Harris-Inman (Washington Co.)	590-1853
Transition Projects, Inc.	823-4930

Services for Children Who Have Witnessed Domestic Violence

Community Advocates for Safety and Self-Reliance	244-7226
(School-based prevention education)	
El Programa Hispano	669-8350
(Spanish-speaking children, availability varies, ask for Angelica)	
Parry Center Support Groups	239-7115
(Availability varies with need, ask for Ellen Goldberg)	

Resources for Battered Lesbians, Bisexuals, or Gay Men

Bradley-Angle House	281-2442*
support groups for lesbians and bisexual women	232-7812
Clackamas Women Services support groups for lesbians	722-2366
Portland Women's Crisis Line	235-5333*
support groups for lesbians	232-5103

Phoenix Rising	233-8299
support groups for lesbians	
Men's Resource Center	235-3433
support groups for gay men	

RESOURCES FOR LEGAL ACTION

Statewide:

Oregon State Bar Modest Means Program	1-800-452-7636
referrals for low to moderate priced lawyers	

Multnomah County:

Court Restraining Order (RO) Information	248-3943
Jail Detention Information	248-3689
District Attorney's Victims' Assistance	248-3222
District Attorney's Domestic Violence Unit	248-3873
TTY Line for Hearing Impaired	248-3302
Multnomah County Legal Aid Services	224-4086
legal representation for victims in divorce, custody, visitation, contested restraining orders (low income clients)	
Domestic Violence Legal Advice Line (Tuesday or Thursday - 1:30 - 4:00)	299-6101
Lewis & Clark Legal Clinic	222-6429
RO and Contested RO's, child support (low income clients)	
St. Andrews Legal Clinic	281-1500
family law issues, custody, visitation (sliding fee scale)	
Portland Women's Crisis Line	235-5333
information on RO's, pressing charges, lawyer referrals	

Clackamas County:

Clackamas County Courthouse	655-8447
24 Hour Victim Assistance Hot Line	655-8616
Oregon Legal Services	655-2518

Washington County:

Washington County Courthouse	648-8891
Oregon Legal Services	684-3763
Restraining Order Advocacy	681-3830
Family Violence Intervention Team	681-2886

[Information provided by Chiquita Rollins, Multnomah County Domestic Violence Coordinator, on June 17, 1997.]

D. If you are being abused at home, you are not alone.
(Family Violence Prevention Fund)

Millions of women just like you are also dealing with violence at home. Although it is usually hidden, this kind of abuse is very common and affects people from many different walks of life—school teachers, celebrities, bankers, carpenters, bus drivers, etc.

Nothing you say or do causes your husband or boyfriend to act violently toward you, and it is impossible for you to prevent his attacks by being the perfect wife or girlfriend. Some men think that using violence is the best way to solve problems, and that it's okay to hit a woman. But no one has the right to physically harm you. That kind of behavior is against the law.

Domestic violence does not go away on its own. It tends to get worse and become more frequent with time, and is often harmful to your children as well.

What you can do to protect yourself.

- Talk with a friend or relative you trust about what's going on. They may be a good source of support.
- Contact your local domestic violence program to find out about laws and community resources (i.e. shelters, counseling, legal assistance) before you need them. They can help you plan ways to stay safe.
- Ask your health care provider or a friend to take photographs of your injuries (i.e. bruises, scratches, black eyes, etc.) and make sure that they are put in your medical records, or in a safe place with a written description of what happened. This information will make it easier for you if you decide to take legal action in the future, such as getting a restraining order, pressing criminal charges, or obtaining child custody if you need to do this.
- Arrange a signal with a neighbor to let them know when you need help (i.e. turning a porch light on during the day, or pulling down a particular window shade).
- Keep some money stored in a secret place so that you have access to it in an emergency, or if you decide to leave; be sure to include some coins so you can make calls from a public phone if you need to. You can also pack a change of clothes (and personal care items, an extra set of glasses, important legal papers, etc.) for yourself and your children and ask a neighbor and/or friend to keep it; along with an extra set of keys, in case you need to leave quickly.
- Call 911 if you are in danger or need help.
- If you decide to leave, take important papers with you (i.e. birth certificates, passports, health insurance documents, photo ID/ driver's license, immunization records, checkbook,

medication, food stamps, Social Security cards, etc., for both you and your children).

THERE'S NO EXCUSE FOR DOMESTIC VIOLENCE.

(This information was prepared and distributed by the Family Violence Prevention Fund, 383 Rhode Island St., #304, San Francisco, CA 94103.)

E. 15 Reasons to Leave Your Lover, Warning Signs of an Abusive Personality

1. **A PUSH FOR QUICK INVOLVEMENT:** Comes on very strongly, claiming: "I've never felt loved like this by anyone." An abuser pressures the woman for an exclusive commitment almost immediately.
2. **JEALOUSY:** Excessively possessive; calls constantly or visits unexpectedly; prevents you from going to work because "you might meet someone"; check the mileage on your car.
3. **CONTROLLING:** Interrogates you intensely (especially if you're late) about whom you talked to, and where you were; keeps all the money; insists you ask permission to go anywhere or do anything.
4. **UNREALISTIC EXPECTATIONS:** Expects you to be the perfect woman and meet his every need.
5. **ISOLATION:** Tries to cut you off from family and friends; accuses people who are your supports of "causing trouble"; the abuser may deprive you of a phone or car or try to prevent you from holding a job.
6. **BLAMES OTHERS FOR PROBLEMS AND MISTAKES:** The boss, you — it's always someone else's fault if anything goes wrong.
7. **MAKES EVERYONE ELSE RESPONSIBLE FOR HIS FEELINGS:** The abuser says, "you make me angry" instead of, "I am angry" or "You're hurting me by not doing what I tell you. Less obvious is the claim: "You make me happy."
8. **HYPERSENSITIVITY:** Is easily insulted, claiming that his feeling are hurt when he is really mad. He'll rant about the injustice of things that are just part of life.
9. **CRUELTY TO ANIMALS AND TO CHILDREN:** Kills or punishes animals brutally. Also may expect children to do things that are far beyond their ability (whips a two year old for wetting a diaper) or may tease them until they cry. Sixty-five percent of abusers who beat their partner will also abuse children.
10. **"PLAYFUL" USE OF FORCE DURING SEX:** Enjoys throwing you down or holding you down against your will during sex; says he finds the idea of rape exciting.

11. **VERBAL ABUSE:** Constantly criticizes you, or says blatantly cruel, hurtful things; degrades, curses, calls you ugly names. This may also involve sleep deprivation, waking you up with relentless verbal abuse.
12. **RIGID SEX ROLES:** Expects you to serve, obey and remain at home.
13. **SUDDEN MOOD SWINGS:** Switches from sweetly loving to explosively violent in a matter of minutes.
14. **PAST BATTERING:** Admits hitting women in the past, but says they made him do it or the situation brought it on.
15. **THREATS OF VIOLENCE:** Makes statements like, "I'll break your neck" or "I'll kill you," and then dismisses them with, "Everybody talks that way" or "I didn't really mean it." If he has come this far, it is time to get help, or get out.

(Source: "Dear Abby" column, March 29, 1996 printed with permission from the Project for Victims of Family Violence, Fayetteville, Arkansas.)

F. A Community Checklist: Important Steps to End Violence Against Women

On July 13, 1995, Attorney General Janet Reno and the Secretary of Health and Human Services Donna E. Shalala created the Advisory Council on Violence Against Women to help promote greater awareness of the problem of violence against women, to help devise solutions to the problem, and to advise the federal government on implementing the 1994 Violence Against Women Act.

Members of the Advisory Council created working groups that focused on different segments of the community and what they might do to address the problem of violence against women. Each subgroup created a checklist of important steps communities can take to end violence against women.

The checklists are meant to offer some straightforward, practical suggestions that can make a difference in communities across the country.

The Religious Community

The religious community can provide a safe haven for women and families in need. In addition, it can exhort society to share compassion and comfort with those afflicted by the tragedy of domestic violence. Leaders of the religious community have identified actions to create a unified response to violence against women.

- Become a safe place. Make your church, temple, mosque or synagogue a safe place where victims of domestic violence can come for help. Display brochures and posters which include the telephone number of the domestic violence programs in your area.
- Educate the congregation. Provide ways for members of the congregation to learn about domestic violence. Routinely include

information in monthly newsletters, on bulletin boards, and in marriage preparation classes. Sponsor educational seminars on violence against women.

- **Speak out.** Speak out about domestic violence from the pulpit. As a faith leader, you can have a powerful impact on peoples' attitudes and beliefs.
- **Offer space.** Offer meeting space for educational seminars or weekly support groups.
- **Lead by example.** Volunteer. Volunteer to serve on the board of directors of the local domestic program or attend a training to become a crisis volunteer.
- **Partner with existing resources.** Include your local domestic violence program in donations and community service projects. Adopt a shelter for which your church, temple, mosque or synagogue provides material support, or provide similar support to families as they rebuild their lives following a shelter stay.
- **Prepare to be a resource.** Do the theological and scriptural homework necessary to better understand and respond to family violence and receive training from professionals in the field of domestic violence.
- **Intervene.** If you suspect violence is occurring in a relationship, speak to each member of the couple separately. Help the victim plan for safety. Let both individuals know of the community resources available to assist them. Do not attempt couples counseling.
- **Support professional training.** Encourage and support training and education for clergy and lay leaders, hospital chaplains, and seminary students to increase awareness about domestic violence.
- **Address internal issues.** Encourage continued efforts by religious institutions to address allegations of abuse by religious leaders to insure that religious leaders are a safe resource for victims and their children.

(Adapted in part from materials developed by the Nebraska Domestic Violence and Sexual Assault Coalition and the Center for the Prevention of Sexual and Domestic Violence, Seattle, Washington.)

Health Care Professionals

Health care professionals are in the critical position of providing services to victims of violence as the first contact point. It is crucial that health care professionals intervene appropriately. Immediate recognition of the problem and the provision of medical care and referrals to appropriate resources within the community can make a difference. Leaders in the field have identified the following strategies to make interventions by health care professionals more effective.

- Incorporate training into curricula. Support the incorporation of domestic violence training in medical, nursing, and allied health care professional education curricula.
- Make resources available to patients. Make resource materials available in waiting rooms and restrooms.
- Support incorporation of protocols into the accreditation process. Support efforts to ensure that domestic violence protocols are addressed through the National Commission for Quality Assurance and the Joint Commission on Accreditation of Hospitals.
- Encourage continuing education on violence against women issues. Encourage your state licensing boards and various specialty groups to encourage physicians and nurses to allocate Continuing Medical Education (CME) hours to violence against women related issues for re-licensure requirements.
- Involve medical organizations and societies in increasing awareness. Collaborate with health care professional organizations and societies in your area to increase medical school and health care professional involvement in addressing violence against women.
- Feature violence against women on meeting agendas. Arrange presentations and symposiums on violence against women at various health care specialty annual, regional, and local meetings.
- Highlight commitment to violence against women issues. Give awards, citations, and certificates to exceptional organizations and individuals for their continued commitment to addressing violence against women.
- Develop a standard intake form. Develop a standardized intake assessment form for health care professionals who interact with victims of domestic violence. This assessment form would ensure that certain information regarding these incidents is identified and proper resources are utilized.
- Ensure Employee Assistance Programs are responsive to victims of domestic violence. Determine whether your health care facility's Employee Assistance Program (EAP) includes domestic violence services or referrals. If it does not, speak with your human resources director or the appropriate manager about the possibility of expanding the program to address the needs of employees facing violence in their homes. All EAP personnel should receive domestic violence training and have an understanding of the dynamics of domestic violence.
- Volunteer. Provide a health care series on a volunteer basis to community organizations that serve victims of domestic violence.

Sports

Today, more than ever, our sports players and organizations have an enormous capacity to influence the minds and behaviors of Americans, both young and old. The reason is simple. For many Americans, professional, college and Olympic athletes are today's heroes. We must utilize this outlet to send a positive message to all Americans about preventing domestic violence. Following are a number of ways communities can work with the local sports industry to help stop the violence.

- Bring sports leagues together in a common cause. Encourage local sports teams to come together in a joint effort to combat violence against women through joint awareness campaigns and public appearances.
- Create strict disciplinary policies. Encourage the creation of disciplinary policies for players on domestic violence similar to drug policies. These policies should include stiff sanctions and penalties for committing domestic violence.
- Push for Public Service Announcements during broadcast of sporting events. Write or call sports leagues to support PUBLIC SERVICE ANNOUNCEMENTS about violence against women during the broadcast of major sporting events, including NCAA games.
- Promote the distribution of educational materials. Promote the distribution of educational materials from local shelters and programs to players by offering the materials to the teams.
- Involve local sports heroes in community activities. Involve local sports heroes in rallies and events which bring attention to the problem of violence against women.
- Reach out to potential sponsors. If there are businesses in the area that are known for making or selling sporting equipment or clothing, approach them for sponsorship of community awareness activities.

Media

The media industry is the most influential source of information for millions of Americans. Before we can change people's attitudes about violence against women, we must not only change the way violence is portrayed in the media, but also educate members of the media who report on domestic violence. Leaders in the media industry have identified ways in which communities can work with their local media to encourage responsible reporting of violence against women.

- Use the power of communication. Contact local television, radio, and newspapers urging thoughtful and accurate coverage of violence against women, and the provision of educational messages about the problem when possible.

- Urge action through the local paper. Urge the local paper to print op-ed and letters to the editor pieces on domestic violence.
- Link media with experts. Provide media outlets with a list of experts available for interviews, as well as a packet of materials with information on a variety of related subject areas, such as local shelters and programs.
- Organize public events. Plan a public event, such as a community education forum on violence against women, and solicit local media coverage.
- Encourage employee awareness. Encourage the development of domestic violence awareness programs for employees of media outlets.
- Build a bridge between media and law enforcement. Urge police chiefs to go on air locally to discuss domestic violence.
- Provide a forum for community leaders. Encourage community leaders to speak to media about issues of violence against women.
- Publicize local resources during reporting. Encourage local media to include local services, telephone numbers, during reporting on incidents of domestic violence.

The Workplace

Men and women spend much of their daily lives in the workplace. Domestic violence is a workplace issue which affects the safety, health, and productivity of America's workers. Business and labor leaders have identified several strategies that can be used to create safer and supportive workplaces.

- Get corporate leadership on board. Encourage CEOs or management team to establish a workplace which is intolerant of domestic violence and aids a victim in obtaining assistance and protection.
- Establish employee policies that meet the needs of victims of domestic violence. Work with management and unions to develop paid leave and benefit policies which recognize the needs of employees who are victims of domestic violence.
- Ensure Employee Assistance Programs are responsive to victims of domestic violence. All EAP personnel should receive domestic violence training and have an understanding of the dynamics of domestic violence.
- Provide management with tools to respond to domestic violence. Establish a training program for all supervisors and managers at your workplace to give them guidance on how to respond when an employee is a victim or perpetrator of domestic violence.

- Educate employees about domestic violence. Sponsor a workshop on domestic violence. Invite a domestic violence survivor to speak about her experiences and discuss the impact of violence on her life and her work.
- Share materials about domestic violence. Distribute educational materials about domestic violence to all employees and display posters and brochures which explain the issue. Send the message that there is no excuse for domestic violence. Make victim safety information available in restrooms or in paycheck envelopes.
- Increase safety at the workplace. Arrange training for security personnel and develop safety procedures to handle the special safety needs of battered women who may be stalked at work.
- Coordinate with local law enforcement. Arrange a meeting between security personnel and local law enforcement agencies to facilitate appropriate information sharing and development of collaborative working relationships.
- Join in local community efforts to combat domestic violence. Conduct a drive in your workplace to collect items for local domestic violence shelters or make contribution of company products.
- Donate time and resources. Adopt a local domestic violence shelter and donate money or commit volunteer hours.

G. Awareness Campaign: Report of the Awareness and Education Subcommittee

Background

During the course of the City Club's Domestic Violence Study, there have been sporadic activities to enlighten the public on the extent of domestic violence. Some churches in the Portland area have arranged seminars for women, and in a few cases, men as well. The media have broadcast occasional public service announcements on radio and television, and domestic violence has been the subject of several "talk shows" as well as television plays showing domestic violence as the subject.

Witnesses to the Committee repeatedly said that the low level of public awareness of the severity and extent of domestic violence is one of the major obstacles to the prevention and reduction of domestic violence in our community.

The Committee's Awareness and Education Subcommittee, recommends an Annual Campaign that has strong impact with all sources working together during the month of October on an all-out awareness campaign. This subcommittee report presents ideas for such an awareness campaign. City Club members could play an important role in such a campaign by forming a committee which would advocate for

such a campaign and help to organize a coordinating committee to direct such a program.

Organization and implementation of the campaign

A coalition should be established in order to organize and oversee the implementation of the Domestic Violence Awareness month. This coalition should include representatives from the clergy, schools, business (such as Nike, Intel, Tektronix, Fred Meyer, Mentor Graphics), representatives from the AD2 of the Portland Advertizing Council, Kiwanis, Rotary, the City Club, and organizations representing different cultural and ethnic groups.

Media

Ad2, the junior advertizing proponent of the Portland Advertizing Council, could adopt domestic violence as their project in order to produce a Media Awareness Campaign by producing 85 ads to be aired by all Portland radio and television stations. The public service announcements should focus on:

1. Zero tolerance of domestic violence.
2. Encourage public participation in "Court Watch."
3. Signs and symptoms of abusive personalities.
4. A woman's right to safety.
5. Encourage legislators to enact laws that deal with domestic violence as a serious community issue.

KATU's "Town Hall" could present a program on the topic inviting representatives from the business community, clergy, agencies providing services to battered women, hospitals, police and sheriff's departments, Deputy District Attorney, representatives from the City Club, as well as Rotary and Kiwanis.

Religious Organizations

Clergy during the month of October, could give sermons on domestic violence covering the same points listed above. Religious organizations can also provide support groups and support services for victims of domestic violence.

Schools

During the month of October, teachers can develop programs for the middle school level to increase awareness, to promote discussions of domestic violence with emphasis on "zero tolerance" of such behavior and what actions to take if confronted with it as a family dynamic.

Business

Human Resource departments of business organizations can develop seminars for employees to educate and assist in recognizing symptoms of domestic violence abuse.

Speakers Bureau

The coordinating committee should organize a speaker's bureau, provide materials, and train speakers to provide information and talks at organizations requesting a speaker.

THE CITY CLUB OF PORTLAND MISSION:
To inform its members and the community in
public matters and to arouse in them a
realization of the obligation of citizenship.



For additional copies of this report please write or call:

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