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BATTERED WOMEN

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Man istein · Minority Leader · New York State Senate

BATTERED WOMEN

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ACQUISITIONS

RECOMMENDATIONS

This study by the Office of the Senate Minority Leader is New York's first statewide study of battered women. As far as we know, it is the first statewide study in the nation.

The study tries to find out how many battered women there are, where they are, and how their needs are being met by the service delivery system.

The impetus for the recent attention given to the problem of battered women has come from the grassroots. Women's groups were the first to identify the problem and to call for corrective action. They have gathered more information about battering than have any other organizations or agencies.

The participation of women's groups must be actively solicited as an integral part of all of the following attempts to address the problem of battering.

Throughout this report, victims of battering are referred to as female because the weight of evidence indicates that the overwhelming majority of victims are women. There are, however, a significant number of battered men. Obviously, all public programs must apply to victims of both sexes. The wording of existing and proposed legislation refers to battered "persons", thereby including men as well as women.

1. Establish comprehensive statewide reporting requirements.

Again and again, our research revealed that hospitals, police, social agencies, and public health services have little useful data concerning battering.

Thorough, accurate statewide reporting of the number of women who are being battered, and of the circumstances surrounding each incident, is essential. In the absence of such reporting, the scope of the problem cannot be determined. Statewide programs for the delivery of services to victims cannot be developed. The need for funding cannot be assessed.

We recommend that New York's Division of Criminal Justice Services treat battering as a separate category in its statewide Uniform Crime Reporting System.

We recommend that the State Department of Social Services develop uniform reporting procedures for use by all county Departments of Social Services. Reports should include data from hospitals, legal services, and private social agencies within each county. Data should be submitted monthly to the State Department of Social Services, which should combine the data with data obtained from the Division of Criminal Justice Services and from the Office of Court Administration in order to produce comprehensive information.

2. Include data on battered women in the Annual Title XX Program Plan of the Department of Social Services.

We recommend that data on battered women be incorporated into the Title XX Social Services Program Plan of each county Department of Social Services and into the Comprehensive Annual Social Services Program Plan for New York State. Data should also be included in the annual report of the state Department of Social Services, in the Department's budget submissions, and

in a special report to the Legislature.

3. Require reporting by physicians.

Private physicians are already required to report instances of child abuse. They should now be required by law to report instances of battering, or suspected battering, of adults -- with due regard to the victims' privacy.

4. Apply Title XX Foster Family Care for Adults to Battered Women.

Foster Family Care homes which are designated for use by the disabled are often currently unused, although many counties -- including those in New York City -- have approved them.

These facilities should be made available to battered women for temporary shelter or for second-stage housing, with supportive services provided by the county. Foster Family Care for Adults should be permitted under Title XX without regard to income.

5. Open more shelters.

During the past two years, the state has provided non-recurring seed money for the establishment of two shelters for battered women and children -- one in Brooklyn and one in Rochester.

State support should be expanded so that more shelters can be opened. Matching federal funds should be sought. Funds from private foundations should also be sought, so that grassroots women's groups that have been organizing these shelters can maintain their independence.

6. Provide emergency financial assistance.

Emergency financial assistance, now provided to homeless families by the Department of Social Services, should immediately be extended to battered women. Eligibility should be redefined to include those women with children who lack immediate financial resources and who are homeless because of a dangerous situation at home.

Women without children and single women, who are ineligible for this kind of emergency financial assistance, should receive aid under Home Relief.

Methods for helping battered women to become self-sufficient should be explored. Money with which to seek housing, pay rent security and moving expenses, and find employment must be provided.

7. Establish round-the-clock hotlines.

Battering knows no "normal business hours." It often occurs at times when agencies or organizations that might offer help are closed. Tragedy can result. Only a few parts of the state are served by the 24-hour hotlines or crisis centers that have been established in recent years to help victims of emergencies like rape.

Counties and regions should establish toll-free hotlines so that battered women can get help -- fast. Hotlines should offer information to both the victims and their attackers.

8. Publicize services available to victims.

Battered women seeking emergency help or follow-up assistance are commonly misled or given a runaround. Such treatment is inexcusable.

We recommend that the state Department of Social Services prepare comprehensive information kits for county Social Service Departments, law enforcement agencies, private service organizations, and concerned individuals. The kits should list the hotline number and should explain where, when, and how battered women can get local help. Eligibility criteria and legal rights and requirements should be described. Kits should be written in clear, lay language. Where appropriate, they should be bilingual.

9. Plan and deliver coordinated services by all relevant agencies.

All relevant agencies must coordinate plans, share information, and deliver services in concert.

We recommend that each county Department of Social Services set up a task force to plan unified services to battered women by the public and private sectors. Every task force should include representatives of law enforcement agencies, family courts, and public and private health and social agencies.

Each county task force should exchange information with the Information and Referral Service of Title XX of the Social Security Act. Administrative, procedural, policy, or legal impediments to the rapid exchange of data on battering should be eliminated by the task force. At present, county Commissioners

of Social Services often seem unaware that battering is a local problem or that local services to ameliorate it exist.

We recommend that the state Department of Social Services use state and federal funds to establish interdisciplinary, interagency, human-service teams to implement task force plans. Teams should include representatives of all relevant agencies, acting jointly to aid the woman, her children, and the person responsible for the battering. Such team-work is the only way to ensure adequate care and follow-up.

10. Train personnel at all relevant agencies.

Official agencies, including the largely-male police forces, are often unresponsive or indifferent to battering.

Extensive training in sensitivity and in intervention techniques must be given to police and others who are charged with helping victims. The Bureau of Municipal Police of the Division of Criminal Justice Services should include the subject of battering on its training agenda for agencies that cannot conduct training programs of their own. The BMP should also provide technical assistance to departments that do conduct their own programs.

Similar training must be instituted for court personnel, hospital workers, and social workers in both the public and private sectors. Training funds available under Title XX and LEAA should be used.

PREFACE

Violence in the family, particularly physical abuse of women by their spouses or companions, has only recently come under public scrutiny. Battered women are beginning to admit what is happening to them and to demand that their need for help be met.

In the spring of 1976, the New York State Legislature allocated $200,000 in the supplemental budget for seed money for a battered women's shelter in the New York City metropolitan area. This was New York State's first public recognition of the need for an emergency refuge for battered women and their children.

While the need for a shelter was being documented, two issues arose. One was the need to remedy existing social service law to enable a shelter accommodating both adults and children to be incorporated and thus use the available supplementary budget appropriation funds. The second and more pervasive problem was the lack of data on existing services available to battered women throughout New York State.

This report takes a first step in an attempt to address the latter problem: that is, to identify the incidence of battered women statewide and the response by crucial parts of the service delivery system. The crucial components of the system with which battered women interact when seeking help are police, family and criminal courts, social service and mental health organizations, legal organizations, and women's groups. This report will focus on five parts of the system: family court, social service and mental health organizations, women's groups, police, and hospitals. These components were selected because of their importance to battered women and pragmatically because of the relative accessibility of the agencies responsible for these services.

I. INTRODUCTION

Why hasn't the occurrence of wife-battering aroused more shocked indignation from governmental agencies, social scientists, the news media, and the general population?

Statistical evidence randomly acquired nationally on wife-battering makes it obvious that domestic violence is a social problem, and a serious one.

- The Citizen's Complaint Center in the District of Columbia receives between 7,500 and 10,000 complaints of marital violence each year.
- In 1974, Boston police responded to 11,081 family disturbance calls, most of which involved physical violence.
- In Detroit, 4,900 wife assault complaints were filed in 1972.
- Almost one-third of all female homicide victims in California in 1971 were murdered by their husbands.
- Nationwide in 1973, according to the FBI, one-fourth of all murders occurred within the family, and one-half of these were husband-wife killings.
- During the twelve months ending June 1973, 15,818 wives filed petitions in family court in New York State for Orders of Protection against their husbands.*

Assault is a crime in every state. Since wife beating is a form of assault, then wife beating is a crime in every state. In practice, however, wife beating is not treated as a crime,

*Some additional data from courts should be available in the future. In January, 1977, New York State's Office of Court Administration began keeping records of family-offense cases filed in courts. This OCA record-keeping, once voluntary, became mandatory under state legislation signed into law in September 1977.

People who are battered by unrelated members of their households may file petitions for Orders of Protection in criminal court, only. Under a new law effective September 1, 1977, people battered by their spouses may file petitions either in family court or in criminal court.

but as a civil matter.

The police department is the only public agency readily accessible on a twenty-four hour basis in times of crisis. When a battered woman calls the police, she expects an immediate response. But many police departments give domestic disturbance calls low priority, taking anywhere from twenty minutes to several hours to respond, and sometimes not showing up at all. Furthermore, the most common complaint heard from wife/victims is that if and when police arrive on the scene, they rarely do anything at all.

The current approach to family calls is in effect, stacked in favor of the attacker. The police come, and nothing happens to help the battered woman. They tell her of the perils of the legal machinery, the trouble it will cause, quiet her down, and leave. The net effect is that the woman's cry for help has been rejected.

The victim and the police view the immediate problem of the battered wife in entirely different ways. For this reason, it is almost certain that the experience will prove frustrating and disillusioning to the woman. When the victim calls the police, her essential concern is protection. She wants the law to stop her husband from beating her. She is demanding her rights as a citizen to protection from violent force. She is also demanding justice. She wants the person who has committed an assault on her body taken away, punished, or prevented from assaulting her again.

The police, on the other hand, view the matter from an entirely different perspective. From their point of view, their job is to quiet things down and leave, to avoid making an arrest, to keep the matter unreported, and to settle the problem without resorting to criminal charges, the courts, or lawyers.

A verbatim outline, used by instructors at Wayne County Sheriff's Academy in Michigan, to teach officers how to convince a woman not to press charges follows:

Avoid arrest if possible.

A. appeal to their vanity

B. explain the procedure of obtaining a warrant
   1. complainant must sign complaint
   2. must appear in court
   3. consider the loss of time
   4. cost of court

C. state that your only interest is to prevent a breach of the peace

D. explain that attitudes usually change by court time

E. recommend a postponement
   1. court not in session
   2. no judge available

F. don't be too harsh or critical

The procedures used in Michigan are representative of the official police tactics used in all states. The recommended procedure is to make an arrest only as a last resort. Policemen are often officially advised: "Never create a police problem where only a family problem exists."

The police may advise an abused wife to apply for an Order of Protection. The initial step in this procedure involves an interview with the Intake Unit of the court. Unless the injured

party states that the matter is an emergency, the appointment will be scheduled two or three weeks in the future.

After the first interview, the woman will be asked to return in several weeks (length of time varies depending upon each county's calendar) for a court hearing, at which time the offending party must be present. If the judge decides to grant the order, the injured party is then provided with an Order of Protection, according to which, if the order is violated, the offender can be arrested.

The Order of Protection's value is questionable. After filling out forms, filing petitions, and attending a court hearing, what actual protection is a piece of paper waved in the face of a person preparing to beat his/her spouse?

Of course, there is always the social service agency. Almost without exception, social service agencies are subdivisions of monolithic institutions such as state governments or charitable organizations. As such, they usually offer specific services to certain kinds of people. Agencies spend a lot of time determining whether an applicant fits the agency's target population and whether his/her needs are suitable to the agency's stated purposes. Since wife beating has not, up to now, been considered a social problem in our country, very few -- if any -- of the existing social agencies cater specifically to the needs of battered women with nowhere to go.

Out of 58 New York State Commissioners of Social Services receiving our survey questionnaire, 82.8% indicated that they

were not aware of services related to battered women within their counties or that such services were non-existent, and 34.5% did not list the county Department of Social Services as a source of aid. (See Chart A)

Even where the law already permits or mandates the delivery of social services to battered people, those services are not necessarily supplied. For example, Title XX of the federal Social Security Act is the primary channel of federal funding for social service programs in New York State. Under Title XX guidelines, battered women could receive help in the form of prompt investigation, counseling, living accommodations, legal services, medical care, child care, and other aid. Yet the interpretation of eligibility requirements for Adult Protective Services, the vehicle through which these services could be provided, varies from county to county, sometimes including battered women and sometimes excluding them. One county responding to this study specified that Adult Protective Services are the only ones available to the county's battered women; another county offered diametrically opposite information, citing the same program as one that is unavailable to battered women.

Where interpretation of existing law is not inconsistent, it has been unimaginative. The Preventive Services, Social Adjustment Services, and Foster Family Care categories of Title XX could be used to assist battered women. But the programs are not used for this purpose.

There is also a need for geographical coordination. Social

services are not necessarily set up to be easily accessible. A person in need of several different services may have to spend a lot of time traveling from one agency to another.

The wife who grabs her children and flees her violent husband in the middle of the night is lucky if she has time to gather the necessary clothes, let alone the "vital statistics" many agencies require for determining eligibility. A women in this predicament cannot wait until an agency opens its doors in the morning. She cannot wait to be referred by one agency to another. Her needs are immediate, but few agencies offer nighttime and weekend services or are prepared to handle on-the-spot emergencies.

Pressure is being put on communities to help by offering battered wives a place to go with their children for counseling and shelter until they can care for themselves. The battered wife has an obligation to help herself break out of the syndrome of violence in which she finds herself, but society as a whole also has an obligation to help her.

Even the medical profession generally displays an indifference to the problems of the battered wife. Most doctors assume a neutral stance. Doctors are not obligated to report cases of wife abuse as they are when they suspect child abuse. Most are content to treat the injury and let it go at that.

An essential finding, as a result of our survey, is that statistics concerning battered women are grossly inadequate. We found that social service agencies, public health agencies, and police departments lack records of the number of battered

women they see. The agencies that record statistical data often lack accompanying descriptive data. Few institutions define, and therefore record, instances of battering as a separate category. We found no hospital that uses battering as a diagnostic category for adults.

The federal government has no separate category for battering in its FBI Uniform Crime Reports. New York State's Division of Criminal Justice, in turn, does not require local law enforcement departments to report cases of battering; neither numerical nor descriptive data is required.

Because battering has not been treated as a distinct reporting category, the statistics in this report are just a small part of the actual picture. The statistics are missing chiefly because attitudes toward battering are cruelly archaic. But without thorough, accurate and consistent reporting, we cannot grasp the scope and nature of the problem, nor act to remedy it.

The severity of the problem is summarized in the comments of three observers, in different parts of the state, who have attempted to ameliorate matters. From Suffolk County:

> In the main, the women are financially dependent on their husbands, have dependent children, and took abuse from their husbands because they felt they had no other choice except to leave and go on welfare... Attitudes of police regarding family violence need to be changed, since it is felt by members of our staff that the scope of battering is greater than (is) ever reported. Women fear reporting and have no place to go. The need for immediate and short-term shelters as residences is great, as is the (need) to secure immediate financial aid for victims of abuse and (their) children.

From Rensselaer County:

> There seems to be a widespread ignorance concerning the need for services to women, as well as a reluctance to become involved, as wife abuse is not yet considered a problem in its own right, but rather as resulting from idiosyncratic domestic relations.

From Westchester County:

> (Our efforts are) really a Band-Aid over a gaping wound...The needs are great, and feminist resources cannot answer them all...It is a ghastly social problem of horrendous proportions...Please help us.

II. METHODOLOGY

This survey began in the Spring of 1977 and followup contact continued until September 1977. A brief explanation of the steps taken to obtain the data contained herein follows.

Step 1. Letters were sent to all 58 New York State Commissioners of Social Services, requesting lists of "social service and other organizations" in their counties which the commissioner's office either knew offered aid to battered women or believed might do so.

Step 2. Follow-up questionnaires were sent to agencies identified by the social service commissioners as either presently serving or possibly serving battered women. Where general lists were sent describing services available to all eligible people with the option for choosing the agency left to us, we tried to select a representative variety of sources. These included social service and mental health agencies, legal organizations, and groups developing services including shelters.

Step 3. Questionnaires, the same as those used for mental health, social and legal services, were sent to women's groups identified by women's organizations (e.g. National Organization for Women, task forces on rape, and women's centers), by social service commissioners, or by other agencies located in nearby counties.

Step 4. Statistics were gathered from the Office of Court Adminstration on the incidence of wives and others filing petitions for assault, threat, harassment, and reckless endangerment for every county in New York State for January, February,

March, and April 1977. These statistics were then compared to the last five years of comparable petition filing recorded by the Office of Court Administration (1969 - 1974).

Step 5. Approximately 582 questionnaires were sent to every police or sheriff's department identified by the Division of Criminal Justice. These questionnaires were developed with the input of the Division of Criminal Justice, which additionally provided print-outs of each address and analyzed the results by computer.

Step 6. A third questionnaire was sent to every hospital and health-related facility identified by the State Department of Health. (The Department typed each of the 572 envelopes!)

Step 7. Follow-up calls were made to counties and facilities where questionnaires were not returned or where information required further clarification.

A numerical and percentile breakdown of the response we received to our letters to the 58 county commissioners (Step 1) is presented on the following pages in Chart A. It indicates how many and what percent of the commissioners identified services as being available to battered women, or who indicated that no services are directed to the problem.

Chart B, indicates county-by-county the nature of the response that was received from the commissioner of each county. That is, it shows whether the commissioner identified battering of women (or of men) as a problem within his/her county and what types of services were identified in the commissioner's response as being available to battered persons in that particular county.

CHART A

Commissioners' Responses

Number of Counties Polled	58	100%
Number of Responses	58	100%
via letter	52	89.3%
via telephone	6	10.3%
County Dept. of Social Services Listed		
Yes	38	65.5%
No	20	34.5%
Other Service Groups - Public/Private		
Yes	37	63.8%
No	21	36.2%
Specific Services Related to Battered Women		
Yes	10	17.2%
No	48	82.8%
Legal System Courts/Police/Probation		
Yes	38	65.5%
No	20	34.5%
Other Legal Services		
Yes	10	17.2%
No	48	82.8%
Mental Health Services		
Yes	35	60.3%
No	23	39.7%

CHART A

Commissioners' Responses

Hospitals Listed		
Yes	15	25.9%
No	43	74.1%
Women's Groups Listed		
Yes	21	36.2%
No	37	63.8%
Other Types of Services Listed		
Yes	8	13.8%
No	50	86.2%

CHART B - COMMISSIONERS' LISTS

	Response - Letter or Telephone	County Dept. of Social Services Listed	Other Service Groups-Public/Private	Specific Services Related to Battered Women	Legal System: Court/Police/ Probation	Other Legal Services	Mental Health Services	Hospitals	Women's Groups	Other
ALBANY	L	O	O	O	O	O	O	O	X	
ALLEGANY	L	O	O	O	X	O	O	O	O	
BROOME	L	X	X	X	O	O	O	O	X	
CATTERAUGUS	L	X	X	O	X	O	X	X	X	
CAYUGA	L	O	X	O	X	X	X	O	O	
CHAUTAUQUA	L	O	X	O	X	X	X	X	X	
CHEMUNG	L	X	X	O	X	X	X	O	O	
CHENANGO	L	X	X	O	X	O	X	X[a]	O	
CLINTON	L	X	X	O	X	O	X	O	X	X[b]
COLUMBIA	L	O	O	O	O	O	O	O	X[c]	
CORTLAND	T/L	O	O	O	O	O	O	O	O	X[d]
DELAWARE	T/L	X	O	O	O	O	X[e]	O	O	
DUTCHESS	T	O	O	O	O	O	O	O	O	
ERIE	L	X	X	X[f]	O	X	X	X	X	
ESSEX	L	X[g]	X	O	O	O	X	O	O	
FRANKLIN	L	X	X	O	X	X	X	O	O	
FULTON	L	X	X	O	X	O	X	O	O	
GENESEE	L	X	O	O	O	O	O	O	O	
GREENE	L	X	X	O	X	O	X	O	X	
HAMILTON	L	O	O	O	X	O	O	O	O	
HERKIMER	L	X	O	O	X	O	O	O	O	
JEFFERSON	L	X	X	O	X	O	X	X	X[h]	
LEWIS	L	O	O	O	X	O	O	O	O	
LIVINGSTON	L	X[i]	X	O	X	O	X	O	O	X[j]
MADISON	L	X[k]	X[l]	O	X	O	O	O	O	
MONROE	L	X	X	X[m]	X	O	O	O	X	
MONTGOMERY	L	X	X	O	X	O	X	X	O	
NASSAU	L	O[n]	O	O	O	O	O	O	O	
NEW YORK CITY	L	X	X	X	X	X	X	X	X	

CHART B - COMMISSIONERS' LISTS

	Response - Letter or Telephone	County Dept. of Social Services Listed	Other Service Groups-Public/Private	Specific Services Related to Battered Women	Legal System: Court/Police/Probation	Other Legal Services	Mental Health Services	Hospitals	Women's Groups	Other
NIAGARA	L	X	X	O	O	X	X	X	X	
ONEIDA	L	O[o]	O	O	O	O	O	O	O	
ONONDAGA	L	X	X	O	X	O	O	O	O	
ONTARIO	T	O	X	O	O	O	X	O	O	
ORANGE	T	O	O	O	O	O	O	O	O	
ORLEANS	L	O	X	O	X	X	X	X	O	X[p]
OSWEGO	L	O	X	O	X	O	X	O	X[q]	
OTSEGO	L	X	X	O	O	O	X	O	O	
PUTNAM	T	O	O	O	O	O	O	O	X[r]	
RENNSELAER	L	X	X	O	O	O	X[s]	X	O	X[p]
ROCKLAND	L	X	X	X[t]	X	O	X	X	X	X[p]
ST .AWRENCE	L	X	O	O	X	O	O	O	X	
SARATOGA	L	O	X	O	X	O	X	O	O	
SCHENECTADY	L	X	X	O[u]	X	O	X	O	X	
SCHOHARIE	L	X	O	O	X	O	O	O	O	
SCHUYLER	L	X	O	O	X	O	X	O	O	
SENECA	L	X	X	O	X	O	X	O	O	
STEUBEN	L	X	X	O	X	O	X	O	O	
SUFFOLK	L	X	X	X[v]	O	O	X	O	X	
SULLIVAN	L	X	X	X	X	X	X	X	O	
TIOGA	L	O	O	O	X	O	O	O	O	
TOMPKINS	L	O	O	X[w]	O	O	O	O	O	
ULSTER	L	X[x]	X	X	X	O	X	X	X[y]	
WARREN	L	X	X	O	O	O	O	O	O	
WASHINGTON	L	X[z]	X	O	X	O	X	O	O	
WAYNE	L	X	O	O	X	O	O	O	O	
WESTCHESTER	L	O	X	X[aa]	X	O	X	O	X	
WYOMING	L	X	X	O	X	X	X	X	X	X[bb]
YATES	L	X	O	O	X	O	X	X	O	X[cc]

FOOTNOTES TO CHART B: COMMISSIONERS' LISTS

a. Hospital Alcohol Clinic

b. Parents Anonymous

c. Considering provision of specific services for battered women.

d. One church has a house that would be available to battered women, but is not specifically for their aid.

e. County Mental Health Clinic

f. Task Force on battered wives (voluntary, local)

g. Children's Protective Services Division only mentioned

h. No specific group as yet; two individuals are developing shelter.

i. Family Counseling Division only mentioned.

j. Alcohol Center

k. Adult and Family Services Division only mentioned.

l. Salvation Army gives shelter.

m. Coalition formed in Rochester.

n. All requests for aid from battered women are referred to AWAIC in N.Y.C.

o. Adult Protective Services Division only mentioned.

p. Religious groups mentioned.

q. Hotline at women's center.

r. Gave names of two individuals connected with women's groups.

s. Drug and alcohol-related facility.

t. Counseling service

u. Human Services Planning Council forming to deal with subject of battered women and domestic violence.

v. Victim's Information Bureau of Suffolk

w. Task Force on battered women.

x. Family and Adult Services only mentioned.

y. Shelter being organized.

z. Adult Protective Services.

aa. Small shelter sponsored by minister.

bb. 24-hour hotline, religious groups, list of physicians

cc. Suggested physicians and dentists.

III. DYNAMICS OF BATTERING

A man who attacks a woman on the street or who enters her home and beats her is guilty of a criminal offense and may be arrested and jailed. Yet a man who beats his wife can be reasonably certain he will not be arrested or jailed or brought to criminal court unless his intent was clearly to kill her. Is it true, as this legal disparity has led some to believe, that a marriage license is a hitting license?

Many people believe that it is. In fact, many men are surprised to learn that the law does not give them the right to beat their wives. The police are aware of the number of cases in which husbands claim that it is their right to strike their wives and many policemen themselves believe that the law gives a husband that right.[1]

Until comparatively recent times, these men would have been justified to believe as they do. Just as it was once thought correct to beat a child to control his conduct, so it was considered not only the right but the duty of a husband to beat his wife if she had displeased him. The earliest written laws, dating from 2,500 B.C., as noted by the anthropologist Ruby Rohrlich-Leavitt in her study of women's oppression transculturally, decreed that if a woman were verbally abusive to her husband, her name was to be engraved on a brick which would be used to knock out her teeth.[2] The laws of Solon provided that a woman who committed adultry (considered a crime only for women) could not adorn herself or attend public sacrifices and that if she violated this rule any man who met her should

"strip her of her ornaments and beat her." In ancient Rome, by the rule of Patria Potestas, a man could murder his wife for adultery, for drinking wine, or for any other "disgusting behavior." In medieval Europe, all legal systems agreed that a man had both the legal and moral right to beat his wife. French law of the 13th Century, for example, stated: "Provided he neither kills nor maims her, it is legal for a man to beat his wife when she wrongs him, as for instance, when she is about to surrender her body to another man, when she contradicts or abuses him, or when she refuses, like a decent woman, to obey his reasonable commands." Religious institutions condoned and encouraged a husband to chasten his wife by means of corporal punishment. Husbands were urged to beat their wives as a disciplinary measure, and wives to "kiss the rod that beat them." "Women, like walnut trees, should be beaten every day," was, until a few decades ago, included in the Napoleonic Codes. Even today, California law includes a statute to the effect that it is illegal for a man to beat his wife after 10 p.m.[3]

Although the California statute is an exception, and not the rule, and wife-beating is no longer openly condoned by law or by clergy, the attitudes and standards of earlier times continue to operate. An extreme example of this is in the case of Kitty Genovese in which 38 people witnessed the murder of a woman but did not attempt to aid her. Many of the witnesses said they didn't want to get involved because they thought the attacker might be the woman's husband.

A study of the attitude toward assault was recently

conducted by three psychologists at the University of Michigan in which fights were staged to be witnessed by unsuspecting passers-by. The study revealed that men came quickly to the aid of a man being assaulted by either another man or a women, and a woman being assaulted by another woman, but would not involve themselves when they witnessed a man beating a woman.[4]

Murray A. Strauss, University of New Hampshire, noted in his paper "Sexual Inequality, Cultural Norms, and Wife Beating" that "cultural norms legitimizing marital violence are found in the legal system, in literary works and everyday discourse and in sociological and psychological experiments and surveys..."[5]

Thus, while the laws themselves have changed and no longer give a man the right to beat his wife, the underlying spirit of those laws is still a vital force.

Wife battering usually begins early in the marriage, and intensifies when situations occur which place stress on the man involved. Often, the attacks begin or increase when pregnancy occurs. Tupically, a woman will endure the abuse for eight years. In many cases, concern for the welfare of her children will finally motivate her to leave. This often occurs when an abusive husband extends his violent attakcs to include the children, or the children show such obvious signs of the emotional damage caused by continually witnessing scenes of violence that it cannot be ignored, or the mother herself begins to batter the children, using them as a release for her own anger and frustration.

Violent attacks most often take place in the evening or at night, usually in the kitchen, with bedroom or living room as the second most likely place. The bathroom is usually a "demilitarized zone" and it is rare for attacks to occur when a third-party adult is present.[6]

The part that alcohol plays in battering is controversial. Abused Women's Aid in Crisis (AWAIC) did a study of husbands who battered their wives which indicated a high incidence -- about 95% -- of problems with alcohol, and that attacks most often occur in connection with weekend drinking binges. However, studies done in two communities of similar size -- Harlem, New York City, and Norwalk, Connecticut -- indicated that in only 21% of the cases studied had the man been drinking and in only 6% could he have been called intoxicated.[7] Dr. Richard J. Gelles, from the University of Rhode Island, suggested that the relationship between alcohol and battering is just the opposite of what is usually supposed. Men don't beat their wives because they are drunk; rather, they drink because they want to beat their wives. The drinker can then have "time out" during which he is not considered responsible for his actions. It is not clear, then, whether alcohol is involved as a cause or as an excuse, or if it is only marginally involved.

Wife-beating is classless. It is not, as was popularly believed, peculiar to working class or lower class families. Wealthy men beat their wives, as do professionals, intellectuals, and even clergymen. However, middle-class women are more reluctant to call the police for help, and middle-class

men are more likely to feel guilty if they do beat their wives.[8]

Typically, the violent family does not communicate well either with their neighbors or with each other. The family often has only minimal contact with those who live nearby. Dr. Gelles found this to be true in the study he conducted of eighty lower and middle-class families. Violent families proved to have a limited ability to discuss the problem of battering either with a counselor or with each other.

Stanford Sherman, Executive Director of Jewish Family Services in New York, said that men who beat their wives are typically inarticulate. "The main reason the husband resorts to physical rather than verbal abuse is that it's difficult for him to express himself with words." According to Sherman, such a man will prove a poor patient in traditional psychotherapy, "which relies chiefly on words."[9]

Often the violent husband has a lower occupational status or income than his neighbors -- although this is significant only as a cause of stress and frustration. Gelles found that the most violent family in his group of eighty was also the one with the highest income. Violence is also more prevalent when the husband has a lower social status than his wife.

There are certain basic factors that may cause a man to become violent:

He may be carrying out violent patterns learned from his own childhood and enforced by our entertainment media and social attitudes in general.

He may be reacting to job pressure and frustration.

He may be reacting to the threat pregnancy poses to his feelings of dependency, conscious or unconscious.

He may be using this means to deal with the economic stress of his life. Perhaps he feels unable to take care of himself adequately and finds the added responsibility of a family intolerable.

There is often a high degree of emotional instability involved. Violent husbands frequently express unfounded jealousy as a cause of violence. Often severe emotional problems are evident.

The husband may be using violence as a means of establishing place and authority. Murray Strauss notes : "Sexism contributes to the frequency of wife-beating..because of the need of men to rely upon violence to maintain their socially mandated superior position within the family..." [10]

Whatever the causes of this behavior, untold damage is inflicted on the families. An article by J. J. Gaylord, published in the British Medical Journal (1975), cites statistics from 100 case studies of battered wives :

"All subjects had bruises at some time. In 44 cases, it was associated with laceration, and in seventeen of these, it was caused by a sharp instrument, such as a razor, knife or broken bottle. Where all had been hit with a clenched fist--occasionally heavily adorned with rings--59 were also repeatedly kicked. Weapons were used in 42 cases. Strangulation attempts were alleged in nineteen cases and suffocation in two. Burns and scalds occurred in eleven and biting in seven. Fractures of the nose, teeth or ribs occurred in 24 cases and other bones were fractured in eight, while four had dislocations of the shoulder or jaw. Nine women were taken to the hospital after

being found unconcious. Two women had retinal damage with resulting defective vision; two had epilepsy which they claimed was caused through head injuries."[11]

Children in these situations also endure much suffering. Gaylord found that 37 of the women in his study beat their children, "discharging frustrations on their offspring, and 54 claimed that their husbands had extended their violence to the children...In addition to direct physical violence against them, there is the horror of having to watch their mothers being beaten."[12] The number of miscarriages, still births, and mentally and physically defective children resulting from the beatings these women endure during pregnancy can only be guessed at, since no such study has ever been made.

At first it may be hard to understand why a woman in such a situation does not either leave or have her husband evicted from the home. An examination of the typical situation a women faces shows why it may not be possible for her to do either.

Typically, a beaten woman feels guilty. If she is being beaten, it must somehow be her fault. Perhaps this is the typical guilt reaction of the victim of any attack, or perhaps it is because we are socialized to regard beating as a proper punishment for bad conduct. Her feelings of guilt are reinforced if she calls the police for help, since their usual question is what she did to provoke the attack. The same question is often asked by psychiatrists, friends, and relatives. There will be great psychological pressure on the woman from those with whom she comes in contact to feel that she deserves the treatment she is getting. If the woman believes she deserves the beatings,

nothing can prevent them from continuing.[13]

Do women enjoy the beatings? There is a popular mythology to that effect. Some may be sick enough to do so, and some may interpret them as "love," but this is not the norm. Women remain in their situation out of fear. Many are afraid of being on their own. They don't feel competent to deal with the difficulties they will face alone or as single parents providing for themselves and their children. Many women are reluctant to give up the level of material comfort their husbands provide or they must stay so the children can continue to have material benefits which she cannot provide alone--a choice between material benefits and a safe life.

Women are socialized to feel that their place in life and their greatest success will be in raising their children well, keeping their homes, and pleasing their husbands. A woman who does not have a successful marriage has failed as a woman, in the opinion of many. Murray Strauss cites the woman's role in society as a factor in the inability of women to escape from abusive situations : "Society thrusts the full burden of child rearing on women, denies them equal job opportunities, and hence mandates their economic and psychological dependence on the men who beat them."[14]

Usually, the attacks intensify when the woman tries to get help, and fear of increased violence can easily prevent a woman from getting help. When the police answer a call for help from a battered woman, they often do not arrest the man. He is left in the home, his anger intensified by his wife's action. When a wife goes to Family Court for protection against a violent hus-

band, she is given an Order of Protection forbidding the man to beat her again, but he is rarely removed from the home. It is difficult to imagine the wife enforcing the Order herself.

The British Medical Journal article referred to earlier, indicated that inappropriate treatment is often given to women who turn to members of the mental health profession for help. The women in the study reported they had been given tranquilizers and antidepressants by doctors and of the fifty who made suicide attempts, 21 were given shock treatment. In none of the cases was an attempt made to deal with the violent home environment.

Economic dependency is another factor that keeps a woman in a violent home. She may abhor welfare and have no other alternatives--if, indeed, welfare is a possibility. When the married woman knows where her husband is and he is able and willing to support her, she is probably not eligible for welfare aid. If she has not worked for some years, the woman may have difficulty finding work again--a difficulty compounded by her marital trauma.

Maria Roy of AWAIC suggests that one thing a woman can do before marriage to predict whether battering will occur is investigate the situation in which the man was raised. If he was an abused child, or was raised in an atmosphere of physical violence between his parents, he is likely to continue the pattern in his own home.

Dr. Gelles' study indicates that battering is less likely to occur if it is discussed thoroughly beforehand, and if limits are set. He places the responsibility for this on the woman :

"...wives who overtly state what they will and will not accept in terms of violence are less likely to be hit.. But women who meekly try to set a limit on violence, and then let their husbands go beyond the limit, are likely to be struck often and not likely to do anything about it." [15]

A long-range solution is to stop using violence to discipline children. The role such training plays in the transmittal of violent patterns from one generation to the next is evident. "There must be a recognition that it's wrong to insult, yell, and scream at another person," says Murray Strauss. "This is different from arguing and sticking up for one's rights...You face the issues and have confrontations--but not by hurting another verbally or physically."[16]

Two programs now in operation came to our attention that offer models for counseling violent families. One is Project Outreach in Hayward, California, and the other is the Victims Information Bureau of Suffolk (VIBS).

Project Outreach is part of the family crisis intervention unit of the Hayward, California, Police Department. In this project, mental health professionals are hired by the police department to accompany officers on family crisis calls. When it is determined by the officers and the counselor that the situation is not dangerous, the officers leave and the counselor stays with the family as long as necessary. The family may also have up to ten counseling sessions free at the Project headquarters directly when they require help. Referrals to other agencies are also made when indicated. "By the end of the project's first year, the entire patrol division of the Hayward

police force had been trained in family crisis intervention and many had become co-trainers to keep the program going. When the program was evaluated at that time, it was found that repeat calls to police had been reduced by 27%, and total calls by 22%. Domestic disturbance calls took 15% less time for uniformed personnel, no officer injuries or deaths had resulted from domestic disturbance calls at all, and no serious injuries were known to have been sustained in families that had contacted the project."[17]

VIBS, located in Hauppauge, Suffolk County, L.I., is funded by the State Division of Criminal Justice Services. VIBS maintains a 24-hour hotline, and provides client advocacy and in-center counseling services. Originally, VIBS had expected to provide only short-term counseling and to refer those in need of long-term counseling to social agencies and mental health clinics. However, they found that the agencies had relatively little experience in working with family violence and that mental health clinics would not accept persons with a problem of family violence. VIBS, therefore, adapted itself to provide the services needed by the clientele.

Originally, one of the objectives of VIBS was "to relieve the Police Department from the time-consuming support function of mediation in domestic disputes and to free the Department to deal with felony crimes and more severe emergency calls."[18]

The objective was later altered, as it was felt that such replacement would only serve to endanger VIBS counselors while eliminating the impact of police "presence" from the mediation effort. However, VIBS counselors will travel to the scene of

a dispute when requested to do so either by the police or by the victim. This is a part of client advocacy in which counselors give clients support and guidance in their interactions not only with police but with the District Attorney's Office, courts, and hospital emergency rooms.

The hotline is used in two different ways. First, it is a link to the Center; callers are urged to call the Center and avail themselves of its services. Second, it functions as a tool for direct delivery of counseling services in which the counselor "explores with the caller what has happened, obtains a description of other incidents, helps the caller to identify the underlying pattern, and begins to explore behavioral alternatives."[19]

In-center counseling is available for the individual, group, or couple. Some of the strategies counselors use in aiding clients are mentioned in the evaluation of VIBS done by Community Research Applications, Inc. VIBS Project Director, James Walsh, indicated that in every case where both husband and wife participated in counseling, violence stopped within three weeks. That is not to say that the marriage became a good one, but only that the couple could work on their other problems without violence.

These two programs, and in particular the results reported by VIBS, illustrate the attempts to use counseling as a method of dealing with the problems of family violence. As a rule, women do not want to have their "man" arrested, nor do they want to leave home or end the marriage. Further research, therefore, is indicated to identify and understand the variables

that contribute to the positive use of various methods of intervention. Does behavior therapy "work" better with some couples? Are drinking, pregnancy, a history of an abused childhood or sudden economic setbacks significant factors in these violent relationships? In the follow-ups, are there identifiable patterns of coping that can be replicated?

IV. SOCIAL SERVICES

Questionnaires were mailed to 506 social service agencies and women's groups. One hundred eighty-one agencies responded to our survey. Of those 181 agencies, 149 (82%) came into contact with battered women within the past year.

A total of 10,165 battered women were reported by the responding agencies. This figure may include duplications since agencies may have referred women from one agency to another. We have made no allowance for that circumstance occurring. On the other hand, we did not include figures from any agency able only to estimate the number of women seen, as in the case of several New York City agencies who reported seeing many battered women but kept no statistics. Therefore, we are working with a flexible number that may be over or under inflated.

In 1970, New York City's population of 7.9 million was 43% of the total state population of 18,241,266. Our survey indicates that 2,553 (25%) of the total battering cases reported were from New York City. The majority of cases, 7,622 (75%) occurred in upstate New York ("upstate" refers to any county outside of New York City).

Hotlines are important to battered women seeking help at their moment of crisis. We have found that of the agencies

Footnote : All percentages in this chapter were rounded off to the nearest tenth.

surveyed those with hotlines generally saw more battered women.

Our data (see Chart C) indicate that the majority of women who sought services requested counselling most often. It is interesting to note that hospitals or other medical services were rarely requested by women at their time of contact with an agency.

The statistics on Chart C for the ages of the battered women do not include those women from New York City, as most of the agencies there were not able to supply those statistics.

The total number of women outside of New York City on whom statistics were available is 1,644. The breakdown of that number is as follows:

Under 21	12%	(191)
21-30	42%	(684)
31-40	36%	(589)
41-50	8%	(136)
51-60	2%	(30)
61 and over	1%	(14)
		1,644 TOTAL

Women are most often victims of battering during the age span of 21-40.

Out of the total of 518 women from New York City on whom we have marital status statistics, 108 (20%) are single and 410 (80%) are married. Available statistics from upstate New York show that 453 (15%) are single, and 1,935 (85%) are married out of a total of 2,388 women.

Our survey indicates that in New York City a great percentage of women being battered have children. In upstate New York, out of a total of 2,388 women on whom statistics were available, 1,694 have children. In those cases where children's ages were indicated we can state that over one-half were between the ages of 1-12.

Annual income statistics were obtainable only from counties outside of New York City. Out of a total of 908 families where battering has occurred, 602 (66%) are below $5,000 income yearly; 199 (22%) ranged between $5,000 and $10,000; and 107 (12%) were above $10,000.

Many of the agencies responding to our survey deal primarily with low-income families. Women of upper and upper-middle class families will generally go to private doctors and lawyers rather than to social service agencies for help. Questionnaires received from groups other than public agencies, such as women's organizations or private counselling groups, did not include statistics, therefore we cannot make a correlation between income and cases of battered women.

Many agencies surveyed did not have statistics on the number of battered women returning home. Therefore, the number on the chart dealing with the outcome of cases is not reliable. The few agencies which did keep statistics replied that most cases returned home. Reasons they gave for this include lack of money, children's welfare, and shame (reasons not included on chart).

The majority of women seeking aid were given some type of help by the agencies responding. In addition, many were referred to others for further help. Statewide figures show that of a total of 1,898 cases for which statistics are available, referrals were as follows :

Hospitals	4%	(75)
Lawyers	38%	(723)
Public Social Service	26%	(495)
Private Social Service	7%	(127)
Other	25%	(478)
		1,898 TOTAL

We have information on the funding of 132 of the 149 agencies who reported dealing with battered women. Upstate New York statistics show 53 publicly funded agencies, 40 privately, and 17 mixed. New York City figures indicate 6 publicly funded, 11 privately, and 5 mixed. Only 22 out of the 132 responding agencies were located in New York City.

We received data on the percentage of salaried and voluntary staff members of 116 agencies. There are 52 agencies from upstate New York with exclusively paid staff members, 15 with entirely volunteer, and 31 with a combination of both. Located within New York City were 5 exclusively paid, 3 volunteer, and 10 with a combination of both.

There were no statistics available on the number of part-time and full time staff members employed in New York City agencies. Upstate agencies responding to this question reported 65 agencies employing part-time staff members and 79 entirely full time.

Our questionnaire inquired of each agency what services they provided for battered women. Many gave multiple answers such as social services, referrals or shelters but counselling ranked overall the major service available. This coincides with the fact that counselling is most often sought by battered women.

Out of 38 New York City agencies responding to our survey, only 13 (34%) indicated they provide counselling services. Responses from other agencies lying outside of New York City showed that 76 (53%) out of 143 offer counselling for battered women.

Legal aid, as noted earlier in this chapter, is the second most often requested service by battered women. Only a total of 15 (5%) responding agencies indicated they directly provide legal services to women. The remainder surveyed usually referred women to another source when legal aid was being sought.

From the information above, we can get a good idea of the category of individual most likely to be battered. Generally, the victim would be between the ages of 21 and 40. While most battered women were married, an even greater number had children and most of those children (77%) were 12 years old or less. The women were usally not employed, or, if they were, were still dependent on their husbands for most of their needs. So, for the sake of their children's well being they are likely to see no alternative but to remain with their husbands or mates.

Chart C: Service Agencies Response

Chart C, on the following pages, is a compilation of the data received from agencies answering the service delivery questionnaire.

In preparing Chart C, our first step was to compute a county total for each answer or category and to record that total on the chart, to the right of the name of the county. Then the figures for each category from all of the counties excluding those in New York City were added in to get a statewide total for each answer.

Not all of the agencies responsing were able to supply statistics. Many agencies that responded had statistics for some women only or for some questions only, while others had no statistics beyond the total number of battered women seen. In particular, information concerning children and financial background of the women seen was often unavailable.

Some agencies gave answers based on weekly or monthly estimates and where the services had been available for a year or more, these figures were converted into yearly totals. The county totals which include such estimated totals are marked by an asterisk (*) on the chart.

Survey research of this type has its inherent weaknesses. It was felt that for the purposes of this study, the extensive variety of data obtained outweighed some of the difficulties encountered in interpreting the data.

CHART C: SERVICE AGENCIES RESPONSE

COUNTY	Total # Questionnaires Sent	# of Agencies Responding	How Many Saw Battered Women	Total # of Battered Women	How B.W. Came To Attention: Hotline	Referrals	Word of Mouth	From Within Group	Other	Services Sought: Counseling	Shelter	Legal Services	Hospital	Other Medical	Social Services	Other
ALBANY	3	2	2	62	12		50			27	34	5	2		28	1
ALLEGANY	0				NO STATISTICS FOR ALLEGANY COUNTY											
BROOME	5	2	2	22		10	5			10	17	2			10	
CATTARAUGUS	6	2	1	30		M	S			X		X				
CHAUTAUQUA	19	8	8	95		18	43	15	6	15	17	31			15	
CAYUGA	4	3	3	34		11	17	3		25	S	S			3	
CHEMUNG	3	1	1	50		X	X					50				
CHENANGO	3	2	2	72			12			60		8			2	2
CLINTON	4	1	1							GROUP STILL IN ORGANIZATIONAL STAGE						
COLUMBIA	2	1	1	3		X	X				2	1				
CORTLAND	0															

COUNTY	Age: Under 21	21 - 30	30 - 40	40 - 50	50 - 60	Over 60	Marital Status: Married	Single	Children: # Women w/Children	Under 5	6 - 12	13 - 18	Family Financial Income Level: Below $5,000.00	$5,000 - $10,000	$10,000 or above	# women employed	# w/no financial resources
ALBANY	2	7	52	1			36	26	58	18	42	3	50			4	50
ALLEGANY	COUNTY																
BROOME	1	9	3	2			17	5	19	9	8	1	4	10	1	3	10
CATTARAUGUS	Unavailable						M		M				14			3	27
CHAUTAUQUA	9	31	23	7			56	14	70	23	21	9	M	S	F	15	44
CAYUGA		2	16	10			24	10	24	2	21	13	6		3	8	6
CHEMUNG	Unavailable												50			F	M
CHENANGO	2	8	2				11	1	12	6	7	2	12			0	12
CLINTON																	
COLUMBIA																	
CORTLAND	NO STATISTICS AVAILABLE FOR CORTLAND COUNTY																

COUNTY	Outcome: # returning home	# helped w/in Center	Referrals: Hospital	Lawyers	Public Social Service	Private Social Service	Other	Agency Information: Funding: Public	Private	Mixed	Staff: Paid	Volunteer	Paid and Volunteer	Part Time	Full Time	Services Provided: Counseling	Shelter	Advocacy	Legal Services/Asst.	Social Services	Referrals	Other
ALBANY	8	57	2	45	13	1	3		1	1	1	1		1	1 1	1	1		1	2	1	
ALLEGANY																						
BROOME	1	21		3	8	8	1		1	1		1	1	2	1 1	1	1			1	1	
CATTARAUGUS	27			S	S			1				1	1	1	1					1		
CHAUTAUQUA	6	70	1	2	2	1	13	2	2	3	4		3	5	.5 3		1	2	1	4		3
CAYUGA		34		16	6		3	1	1	1	3			1	3 1		1	1	1	3		1
CHEMUNG							X	1				1					1					
CHENANGO	11	72		4			8	2			1	1	1	2	1					1	2	
CLINTON																						
COLUMBIA		1					1		1	1				1		1						1
CORTLAND																						

CHART C: SERVICE AGENCIES RESPONSE

COUNTY	Total # Questionnaires Sent	# of Agencies Responding	How Many Saw Battered Women	Total # of Battered Women	How B.W. Came To Attention: Hotline	Referrals	Word of Mouth From Within Group	Other	Services Sought: Counseling	Shelter	Legal Services	Hospital	Other Medical	Social Services	Other	Vital Statistics: Age: Under 21	21 - 30	30 - 40	40 - 50	50 - 60	Over 60	Marital Status: Married	Single	Children: # Women w/Children	Under 5	6 - 12	13 - 18	Family Financial: Income Level: Below $5,000.00	$5,000 - $10,000	$10,000 or above	# women employed	# w/no financial resources	Outcome: # returning home	# helped w/in Center	Referrals: Hospital	Lawyers	Public Social Service	Private Social Service	Other	Agency Information: Funding: Public	Private	Mixed	Staff: Paid	Volunteer	Paid and Volunteer	Part Time	Full Time	Services Provided: Counseling	Shelter	Advocacy	Legal Services/Asst.	Social Services	Referrals	Other
DELAWARE	1	1	1	17		2		15	17		3		4	17		1	13	1	2			17	0	17	10	8	2	17			1	17	16	17		4				1			1				1	1				1		
DUTCHESS	0								NO STATISTICS AVAILABLE IN DUTCHESS COUNTY																																																
ERIE	27	14	11	798	116	91	75	68432	50	262	159	1	6	181	2	72	142	58	10	4	4	550	148	517	145	39	18	68	88	83	143	209	39	798	3	40	168	13	35	4	4	3	4	1	6	8	10	8	3	2	1		6	6
ESSEX	2	1	1	35	23		12		35							4	12	13	5	1		28	7	32	12	21	14	27	8		9	17	35	35						1			1				1	1						
FRANKLIN	3	0							NO STATISTICS AVAILABLE IN FRANKLIN COUNTY																																															
FULTON	4	3	2	56	25	26	5		6	X	X		X			43	8	5				48	8	45	X	X	X	50	6		4	48	54	56	2	2				1	1		2			1	2	2				1	1	
GENESEE	1	0							NO STATISTICS AVAILABLE IN GENESEE COUNTY																																															
GREENE	5	3	3	226	5	30	1	135	5	50	63	130		20		14	62	53	12	31	4	160	16	150	X	X	X	X	X	X	81	134	44	225	1	25	74		100	1	2		1	2		2	1	1	1		1		3	1
HAMILTON	0								NO STATISTICS AVAILABLE IN HAMILTON COUNTY																																															
HERKIMER	1	1	0																																																					
JEFFERSON	5	4	4	47	43	4			7						4	2	2					3	1	4	X	X	X	4			1	3	3	11					4	2	1		1				1	2		1		1	2	

CHART C: SERVICE AGENCIES RESPONSE

COUNTY	Total # Questionnaires Sent	# of Agencies Responding	How Many Saw Battered Women	Total # of Battered Women	How B.W. Came To Attention: Hotline	Referrals	Word of Mouth	From Within Group	Other	Services Sought: Counseling	Shelter	Legal Services	Hospital	Other Medical	Social Services	Other
LEWIS	0															
LIVINGSTON	3	2	2	26	4	5	2	15		5	1	2			1	
MADISON	2	0														
MONROE	9	4	3	35		2	X	4		15	1	6		3		
MONTGOMERY	4	1	1													
NASSAU	2	2	2	47	20	22	5			15	10	17			5	
NIAGARA	32	11	7	26		12	4	9		18	5	2	1	2	2	
ONEIDA	1	0														
ONONDAGA	6	1	1	7	3	3			1	3	3				2	
ONTARIO	3	1	1	12	M	S				12						
ORANGE	1	1	1	37	2	5	10	20		X	X	X		X	X	

COUNTY	Vital Statistics: Age: Under 21	21 - 30	30 - 40	40 - 50	50 - 60	Over 60	Marital Status: Married	Single	Children: # Women w/Children	Under 5	6 - 12	13 - 18	Family Financial Income Level: Below $5,000.00	$5,000 - $10,000	$10,000 or above	# women employed	# w/no financial resources
LEWIS	NO STATISTICS AVAILABLE IN LEWIS COUNTY																
LIVINGSTON	4	8	8	2			25	1	20	2			20		12	8	
MADISON	NO STATISTICS AVAILABLE IN MADISON COUNTY																
MONROE	2	11 2	2	1			13	1	6	8	8		5	1	5	3	
MONTGOMERY	NO STATISTICS AVAILABLE																
NASSAU	7	4	1				12	0	11				X	X	X	4	
NIAGARA	2	9	10 4				24	2	21	7	8	2	10	4	6	10	6
ONEIDA	NO STATISTICS AVAILABLE FOR ONEIDA COUNTY																
ONONDAGA	1						5	2									2
ONTARIO	6	6					M		M				M		F	M	
ORANGE	5	20 8	2	1	1		30	7	32	X	X	X	X	X	0	37	

COUNTY	Outcome Referrals: # returning home	# helped w/in Center	Hospital	Lawyers	Public Social Service	Private Social Service	Other	Agency Information: Funding: Public	Private	Mixed	Staff: Paid	Volunteer	Paid and Volunteer	Part Time	Full Time	Services Provided: Counseling	Shelter	Advocacy	Legal Services/Asst.	Social Services	Referrals	Other
LEWIS																						
LIVINGSTON	17	2		5	4			2					2	2	2	1					2	
MADISON																	1					
MONROE	10	16	3	3	3		3		1	1	1		1	2	2	2				2		
MONTGOMERY																						
NASSAU				X	X	X			2			2		2		1				2		1
NIAGARA	19	10	1	4	8	3	5	2	2		1	2	2	2	3	1				1		2
ONEIDA																						
ONONDAGA	6				3	1		1				1	1	1	1					1	1	
ONTARIO	12							1			1			1	1							
ORANGE	37	36	1	10	20		11									1				1		

CHART C: SERVICE AGENCIES RESPONSE

COUNTY	Total # Questionnaires Sent	# of Agencies Responding	How Many Saw Battered Women	Total # of Battered Women	How B.W. Came To Attention: Hotline	Referrals	Word of Mouth	From Within Group	Other	Services Sought: Counseling	Shelter	Legal Services	Hospital	Other Medical	Social Services	Other
ORLEANS	10	7	7	85	2	24	40	5	12	32	3	44		2	14	2
OSWEGO	2	2	2	13	13					13	3	10				
OTSEGO	5	1	1	30		3		27		28	15	3			27	
PUTNAM	0															
RENSSELAER	7	6	5	66		46	20			57		9		20		
ROCKLAND	13	6	4	102		22	1	79		102	1	2	1	1	81	
ST. LAWRENCE	1	0	1													
SARATOGA	1	0														
SCHENECTADY	10	5	5	87		24	15			22	29	43			45	
SCHOHARIE	2	1	1	3			3			3	1	3			3	
SCHUYLER	2	1	1	5						5		4		1	1	

COUNTY	Vital Statistics — Age: Under 21	21 - 30	30 - 40	40 - 50	50 - 60	Over 60	Marital Status: Married	Single	Children: # Women w/Children	Under 5	6 - 12	13 - 18	Family Financial Income Level: Below $5,000.00	$5,000 - $10,000	$10,000 or above	# women employed	# w/no financial resources
ORLEANS	18	37	30				70	15	62	33	21	6	M	S	F	11	5
OSWEGO		1	2				3	0	2		1	1				1	2
OTSEGO		20	10				28	2	28				X	X	X	3	28
PUTNAM	NO STATISTICS FROM PUTNAM COUNTY																
RENSSELAER	3	41	16	5		1	46	20	56	37	40	16	14	17	5	17	1
ROCKLAND	10	38	23	8	1	2	52	30	M				79	3			M
ST. LAWRENCE	NO STATISTICS FROM ST. LAWRENCE COUNTY																
SARATOGA	NO STATISTICS FROM SARATOGA COUNTY																
SCHENECTADY	10	39	14	6			72	15	58	24	14	2	27			7	76
SCHOHARIE		1	1	1			3	0	3		2	1				0	3
SCHUYLER		5					3	2	5	X	X	X		X	X	2	

COUNTY	Outcome: # returning home	# helped w/in Center	Referrals: Hospital	Lawyers	Public-Social Service	Private Social Service	Other	Agency Information — Funding: Public	Private	Mixed	Staff: Paid	Volunteer	Paid and Volunteer	Part Time	Full Time	Services Provided: Counseling	Shelter	Advocacy	Legal Services/Asst.	Social Services	Referrals	Other
ORLEANS	25	72		21	20	4	3	4	3		4		3	6	7	4		1	1	3	2	2
OSWEGO	2			10	3		8	1	1			1	1	2	1	2	1				2	2
OTSEGO	24	30	2	5		3	2	1			1					1					1	1
PUTNAM																						
RENSSELAER	46	66	28	5	3			1		3	3		1	3	4	4			1		2	1
ROCKLAND	102			F	S			1	1	1	2		1	1	3	3			1		2	1
ST. LAWRENCE																1			1			
SARATOGA																						
SCHENECTADY	31	67	2	54	48		3	1	2	2	2		3	3	5	1	2	2	1		2	1
SCHOHARIE	3	3			3		3	1			1				1	1			1		1	1
SCHUYLER	5	1					5	1			1				1				1		1	

CHART C: SERVICE AGENCIES

COUNTY	RESPONSE: Total # Questionnaires Sent	# of Agencies Responding	How Many Saw Battered Women	Total # of Battered Women	How B.W. Came To Attention: Hotline	Referrals	Word of Mouth From Within Group	Other	Services Sought: Counseling	Shelter	Legal Services	Hospital	Other Medical	Social Services	Other	Vital Statistics: Age: Under 21	21 - 30	30 - 40	40 - 50	50 - 60	Over 60	Marital Status: Married	Single	Children: # Women w/Children	Under 5	6 - 12	13 - 18	Family Financial Income Level: Below $5,000.00	$5,000 - $10,000	$10,000 or above	# women employed	# w/no financial resources	Outcome: # returning home	# helped w/in Center	Referrals: Hospital	Lawyers	Public Social Service	Private Social Service	Other	Agency Information: Funding: Public	Private	Mixed	Staff: Paid	Volunteer	Paid and Volunteer	Part Time	Full Time	Services Provided: Counseling	Shelter Advocacy	Legal Services/Asst.	Social Services	Referrals	Other
SENECA	5	3	3	8		7	1		8							1	2	5				4	4		3	6	3				1	2	M	8		1	S			1	1	1	3			1	3	2			1	3		
STEUBEN	7	5	5	58		25	28		44	4	8	6		27		5	7	7	8	2		21	7	24	7	12	11	X	X	X	17	13	23 12	7	4	7	4	5	3	2		2		1	1	3	4			1	4	1
SUFFOLK	27	5	5	4308*	4700*	F	F	F	F	2569* 338 843	F				655		A					A	F	A	M		S	M	S	F	S	M	A	M	F	S	S	S		3	2		1	1	2	3	3	5		2	1		4	1
SULLIVAN	9	7	4	83	12	20	38	7	68	24	24	11		3		10	36	34	2	1		61	22	56	22	24	8	18	68		37	32	57	63	10	26	25	2	7	4			2		2	3	4	3			1	1	3	1
TIOGA	0															NO STATISTICS AVAILABLE IN TIOGA COUNTY																																							
TOMPKINS	6	1	1	120*	X	X	X		X	X	X			X	X							84	36	M				X	X		F	M	M	120						1						1	1					1	1
ULSTER	15	6	5	148	13	90	28	4	13	87	60	85	1	103		17	38	68	18	5	2	112	36	138	38	35	56	X	X	X	16	114	117	147	1	6	6	46	102	2	2		2	1	1	2	3	3	1			1	3	2
WARREN	1	1	1	3		X		X		X				X																											1			1			1					1		
WASHINGTON	2	1	1	12				12	12		6						12					12						12			0	12	12 12		6			3	1			1					1				1		
WAYNE	3	2	2	150		20	105	10	15	4	2	10		102		2	40	88	17			135	15	142				115	35		42	100	85			85			50	1	1		1	1		2	1	2			1	2		
WESTCHESTER	15	10	8	92	7	7	21		7	14	23	21			13	X	X	X				80	0	70	9	11	10	X	X	X	5	75	4	19		13	7	20		2	5			4	3	6	1	5		1	1		3	3

CHART C: RESPONSE

	TOTAL	NEW YORK CITY	SUBTOTAL	YATES	WYOMING	COUNTY
SERVICE AGENCIES						
	506	190	316	1	11	Total # Questionnaires Sent
	181	38	143	0	1	# of Agencies Responding
	149	25	124		1	How Many Saw Battered Women
	10,165	2,553	7,612		2	Total # of Battered Women
How B.W. Came To Attention						
	5,429	1,520	4,909			Hotline
	969	377	592		2	Referrals
	610	44	566			Word of Mouth
	496	78	418			From Within Group
	155	38	117			Other
Services Sought						
	3,840	170	3,670		2	Counseling
	1,324	406	918			Shelter
	1,869	338	1,531			Legal Services
	26	3	23			Hospital
	40	1	39			Other Medical
	1,439	79	1,360			Social Services
	65	54	11			Other
Vital Statistics: Age						
	191	few	191			Under 21
	684	most	584			21 - 30
	589		589		1	30 - 40
	136	some	136		1	40 - 50
	30	few	30			50 - 60
	14		14			Over 60
Marital Status						
	2,345	410	1,935		2	Married
	561	108	453		0	Single
Children						
	1,694	most	1,694		2	# Women w/Children
	415	most	415			Under 5
	349		349		X	6 - 12
	178	some	178		X	13 - 18
Family Financial Income Level						
	602	X	602			Below $5,000.00
	199	X	199		2	$5,000 - $10,000
	107	X	107			$10,000 or above
	462	some	462		0	# women employed
	1,144	some	1,144		1	# w/no financial resources
Outcome						
	883		883		2	# returning home
	2,629	516	2,113		2	# helped w/in Center
Referrals						
	75	11	64			Hospital
	723	224	499		1	Lawyers
	495	63	432		1	Public Social Service
	127	21	106			Private Social Service
	478	17	461			Other
Agency Information: Funding						
	59	6	53			Public
	51	11	40		1	Private
	22	5	17			Mixed
Staff						
	57	5	52		1	Paid
	18	3	15			Volunteer
	41	10	31			Paid and Volunteer
	65	~~most use~~	65		1	Part Time
	79	both	79			Full Time
Services Provided						
	89	13	76		1	Counseling
	18	3	15			Shelter
	16	3	13			Advocacy
	15	4	11			Legal Services/Asst.
	22	1	21			Social Services
	84	13	71		1	Referrals
	44	8	36			Other

NO STATISTICS AVAILABLE IN YATES COUNTY

V. POLICE

One of the most common responses of a person who has been assaulted or threatened with violence is to call the police for assistance. The police receive a great number of calls from persons involved in family disputes, and in most cities a large percent of total calls are of this type. In a recent study done in Montgomery County, Md., for example, police said that 44% of all calls were from family crisis situations. "It has been estimated informally, by trainers at the New York City Police Academy, that 40% of all calls for police assistance involve husband/wife disputes."[20] In a New York City study covering a period from May 1st to September 30th, 1975, out of 628,903 cases in which police responded to calls, "approximately 19% of these responses were to situations in which women had been assualted by men with whom a known relationship (husband/wife or common-law relationship) existed. Of the total assaults against women, recorded during this period, those in which a known victim/perpetrator relationship of the type mentioned above existed, constituted 73.3% of the total."[21] Boston Police have reported receiving 45 wife-abuse calls a day, and Atlanta Police said that 60% of all nightly police calls are for domestic disturbances, primarily cases of wife-beating.

Women who call the police for help when they are being beaten or have been beaten many times report that their requests for help are dealt with in a somewhat off-hand manner by the officers who respond. One wife reported: "I kept calling the police and they would come over and just tell me to calm down. They didn't care

until one time he slapped one of them and then they had him up for assualt and battery." Many times police ask, "What did you do to him?" or "How did you provoke him?" They may point out that, if the husband goes to jail, "He won't be earning a paycheck," or they may advise the woman to leave home. One policeman was reported to have commented at the scene of a domestic disturbance call, "Maybe my wife would act right if I beat her, too." One woman reported, "They were completely unsympathetic. The police asked first what I had done to cause the problem. They advised me to leave my home."

Whether such reports fairly reflect police response or not, it is true that the International Association of Police Chiefs Training Manual recommends that arrests not be made in incidents of spousal violence.[22] And about 10 years ago, in what may have been the first attempt by a law enforcement agency to provide such skills, Dr. Morton Bard in the New York City Police Department developed a program to train officers to function as mediators in family crisis situations. The concept has spread to a number of police departments, and many officers are now trained in "crisis intervention" but still do not consider arrest as a necessary option. Sergeant Darrel Stephens of the Kansas City, Mo., Police Department, speaking at the 1976 National Conference on Women and Crime in Washington, D.C., said, "Arrest is appropriate where aggravated assault* already has occurred for that case. But in those cases where our intuition and hopefully our research

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*assault resulting in visible injury requiring medical treatment, such as stitches

says there is a high potential for violence, arrest is inappropriate. Our traditional response to the domestic assault situation tends to aggravate the problem."[23] As an illustration of his point, he cites the common example of a husband who is arrested, but is soon released, angrier than before and ready to repeat the incident.

Counter to these statements, however, a number of officers responding to our survey commented that they do recommend arrest. A pattern commonly cited by police is the battered woman who refuses to file charges even when urged to do so, or after doing so, drops them soon thereafter. Two conclusions are possible to draw: either women do not, in most cases, consider arrest of the battering spouse or companion to be the desirable solution to their domestic difficulties, or they quickly become aware that the law will not be enforced to aid them.

A further influence on the attitude of police officers toward domestic violence calls is that, statistically, officers are more often killed or injured in responding to family crisis calls than in criminal situations such as bank robbery. Either the husband alone will turn his attack on the officer, or, when an officer enters the scene, the battling pair will stop fighting each other and turn, united, against the officer. This attack will occur even when one of the disputants called the officer to the scene in the first place. "You're always in the middle and you get it from both sides," said a New York City police spokesman. "We don't like to go on those runs."[24] "Nationally, 13% of

police deaths and 40% of police time lost due to injuries result from responses to family dispute calls for assistance."[25] The FBI Uniform Crime Report stated that in 1974 28% of injuries sustained by police officers and 22% of all police deaths were the result of responding to family stress calls.[26]

In many states, police officers are not permitted to make an arrest for probable cause in a misdemeanor case. An example of what can be done to remedy this is a bill introduced in the Florida State Legislature in 1976 "authorizing a peace officer to arrest a person without a warrant if the officer reasonably believes that the person has committed an assault or battery upon the person's spouse." Another possibility is that a citizen's arrest be simplified so that a woman who has been injured by her husband or companion may take the responsibility of the arrest, thereby removing the possibility that the police officers present could later be sued for false arrest without a warrant.[27]

On December 7, 1976, a massive class action lawsuit was filed in Manhattan Supreme Court, asking the Court to order police, probation and family court employees to provide battered wives with physical, medical, and legal protection as mandated by state law. The 102-page complaint charges that the New York Police unlawfully refuse to arrest men who beat their wives, and that the administrative employees of the family court unlawfully refuse to allow battered women to see judges to ask for Orders of Protection. According to the suit, the police repeatedly refuse to arrest violent husbands and to give physical help,

such as taking the woman to the hospital when necessary, or protecting her from her husband while she packs her bags to leave. The police, it is charged, do not tell women they have a right to make a civilian arrest of their husbands and to have police assistance in doing so. The suit further suggests that police often express their approval of wife-beating and signal the husband that he has nothing to fear from them.

In the suit, the Court is asked to order the defendants (19 are named, including Police Commissioner Codd; Robert Sullivan, Acting State Director of Probation; and Gerald Hecht, Director of Probation for New York City) to give written explanations of legal rights to all women seeking protection from their violent husbands. According to the complaint, defendants "either deny the existence of violence against married women, or they treat it as a private privilege of marital discipline in which the state should not interfere." The plaintiffs contend that the police send women to family court and the family court sends them back to the police, and that "neither agency enforces the law."

In a court hearing during July 1977, a State Supreme Court Justice denied motions by New York City Police Department, Probation Department, and Family Court to dismiss complaints of 12 battered women who had accused them of failing to respond properly or give adequate assistance when beatings are reported. At the same time, the judge refused to certify the suit as a class action suit.

We mailed 582 questionnaires to law enforcement agencies throughout the state to gather statistics regarding incidence of battered women coming to their attention. Each questionnaire included in its introduction a legal definition of the term "battered" and an explanation of the purpose of the study. We were able to analyze 146 of the returns. The responses to a few of the questions follow:

Victims

Using the definition of "battered" given*, how many female "battered" victims were identified by your agency during 1976?

Number of Victims Reported by Dept.	Number of Depts. Reporting That Figure	
0 - 5	63	39%
6 - 599	97	59%
600 - 1200	1	1%
1201 - 1800	0	0%
1801 - 2400	1	1%
2401 - 3000	2	2%

Of the 160 departments reporting less than 599 victims in 1976, 36 or 22% reported no victims identified during the designated period; 14 or 9% reported one victim; and 13 or 8% reported 5 victims. A further breakdown of this category revealed that 60% of the agencies reporting cited between zero and 10 women as battered during this time period, and 7% between 14 and 18. In spite of the high percentage of departments reporting few victims, it is interesting to note the very high

*For purposes of this study, "battered" is defined as cruel or inhuman treatment or an act which would constitute disorderly conduct, harassment, menacing, reckless endangerment, an assault or attempted assault by a related or unrelated member of the same household.

number of persons reported by 4 law enforcement agencies.

Disposal of Cases

How many of these reported cases were disposed as follows:

a. informally adjusted by the police

b. referred to family court

c. referred to mediation/conciliation center

d. referred to social service agencies

a. cases informally adjusted by the police:

Number of Cases	Number of Depts.	Reporting that Figure
0 - 2	106	65%
3 - 96	54	34%
97 - 193	1	0%
194 - 290	0	0%
291 - 387	0	0%
388 - 485	1	1%

Forty-nine percent or 81 departments reported no informal adjustments by the police. However, 16% or 25 departments reported either 1 or 2 cases disposed of in this manner. At the other end of the scale, at least one department reported 50, 62, 66, 100, and 485 cases informally adjusted by the police.

b. cases referred to family court:

Number of Cases	Number of Depts.	Reporting That Figure
0 - 39	162	99%
40 - 79	1	0%
80 - 119	0	0%
120 - 159	0	0%
160 - 200	1	1%

Forty percent or 65 departments referred no cases to family court. However, 9%, 12%, 8%, and 10% referred 1, 2, 3, and 4 cases respectively to family court. At the other end of the spectrum, in spite of the low percentage recorded, individual departments referred as many as 25, 29, 38, 41, and 200 cases to family court.

c. cases referred to mediation/conciliation center:

This category was rarely chosen as an option by the responding departments. When a response was recorded, 91% indicated it was not used at all; 3% cited one case; 4%, 2 cases; and 1%, 5, 6, and 8 cases.

d. cases referred to social service agencies:

Number of Cases	Number of Depts.	Reporting That Figure
0 - 5	160	98%
6 - 11	2	1%
12 - 17	1	0%
18 - 24	0	0%
25 - 30	1	1%

Although 84% of departments reporting did not refer any cases to social service agencies, 15% referred between one and six cases. This is particularly significant in view of the paucity of available social services.

Assault or attempted assault (71%) and harassment (54%) were the most frequently reported categories under which arrests, when they occur, are recorded, with family offense (37%), menacing (34%), reckless endangerment (33%), and disorderly

conduct (31%) reported with lesser, although nearly equal, frequency. It should be noted that except for assault and harassment, over 48% of the departments did not indicate a response for the remainder of the categories.

The results we obtained from our survey should be interpreted within the following context:

The law enforcement agencies in New York State are not required by the Division of Criminal Justice to have, and therefore tend not to have, a structure for recording any incidents related to battered persons. Since responding to this questionnaire was voluntary and not mandated by the Division of Criminal Justice, several large departments (Albany and several New York City units) made efforts to orally communicate their awareness of the extent of the problem, albeit their inability because of decreased manpower to produce any statistics. Lastly, the printouts only identified numbers of departments reporting, not locations. Although specific locations are identified in the county profiles, it is beyond the scope of this study to be more specific about the responses we have charted.

In view of the above constraints, the percentages of departments responding in the negative to questions regarding number and relationship of victims are unexpectedly high. The remaining responses, however, indicated that up to 10 cases of battered women were identified by 60% of the departments and that 4 departments identified between 600 and 3,000 cases during 1976. The high incidence of battering reported by a few departments, usually

2 through 4, was a characteristic pattern in victims of male, female, and related offenders. As expected, however, 62% of the departments reported between 0 and 5 victims of male offenders and 30% between 4 and 12 beaten by their own spouses. Not expected was statistics on male victims; that is, 2 departments reported 37 and 46 victims beaten by females.

In relation to how cases are disposed, the most frequent referral was to family court, used by 39% of the departments for one to 4 cases during 1976.

Assault or attempted assault (71%) and harassment (54%) were the most frequently reported categories under which arrests, when they occur, are recorded. Family offense (37%), menacing (34%), reckless endangerment (33%), and disorderly conduct (31%) were reported with lesser, although nearly equal, frequency. It should be noted that except for assault and harassment, over 48% of the departments did not indicate a response for the remainder of the categories.

Questions regarding whether departments keep separate records on calls relating to battered women and whether specifically trained personnel are employed for battered women confirmed our impression that most answers would be in the negative. Actually, 86% of departments reporting indicated that no separate records are kept and 85% reported no specifically trained personnel.

In summary, except for sporadic incidents, these statistics could imply that battering is of insignificant importance to law enforcement agencies; that is, it is not an important enough social problem to be recorded by departments. Neither the federal

government, in its FBI Uniform Crime Reports, has a category for battering, nor does the State Division of Criminal Justice require it to be reported from its local departments. And unless it is required, the departments do not report it. Thus, battering as a social problem or as an individual act of violence is statistically non-existent.

VI. FAMILY COURT

The court a battered person goes to for aid depends on the nature of the incident and the type of resolution that is desired.

If a divorce, legal separation, or anulment is desired, the accusing party must see a lawyer and the case must be brought in the Supreme Court.

According to the "Battered Spouse Omnibus Law", Chapter 449, which took effect in September 1977, certain related victims of household violence may now choose in which court he/she prefers to bring charges. Under the new law, family court and criminal court have concurrent jurisdiction, so that a case may now originate in either court. Petitioners must be advised of the possible alternatives in each court.

At the present time, family court can take several steps in the interests of the battered person. It can help the couple get counseling or give the petitioner custody of the children.

It may also order the respondent to stop his/her violent conduct, move out of the home, stay away from his/her spouse and children, pay child support, and may give the petitioner custody of the couple's children.

Usually the battered person first requests an Order of Protection. According to Sec. 821, a proceeding in family court is originated by the filing of a petition which charges that the respondent "assaulted or attempted to assault his spouse, parent, child, or other member of the same family or household or engaged in disorderly conduct, harassment, menacing or reckless endangerment toward any such person" and either requests an Order of Protection or the use of the court's conciliation procedure.

As a result of the new law, criminal court is allowed to issue temporary Orders of Protection as a condition of pre-trial release, i.e., the spouse is warned that future attacks or harassment of the victim can result in a jail sentence. The new law also clarifies present jurisdictional confusion between the State Supreme Court and vamily court when a party to a matrimonial action seeks either a temporary or a regular Order of Protection. Under the new law, either court is required to entertain an application for such an order. Orders of Protection are made more effective than previously by requiring that a copy of the order be filed at the local police agency. Law enforcement officials are thereby aware of its existence in the event of future offenses.

A battered person wishing to file charges in family court must first speak with an Intake/Probation Officer. Unless the

injured party states that the matter is an emergency and requests an immediate interview, the appointment will be scheduled two or three weeks in the future. At that time, during which the injured party should present evidence of injury, a temporary Order of Protection can be granted if it is requested and if immediate protection is needed. In any case, the injured party will be asked to return in several weeks for a court hearing before a judge.

Under the new law, agreements to cease offensive conduct reached in a probation conference are put into writing and presented to a judge for approval. If approved, they become binding Orders of Protection. Also, during a hearing on a request for an Order of Protection, the petitioner has the right to have a "non-witness" friend or relative present to give "psychological support". The offending party must also be present. Evidence to support the necessity for an Order of Protection is presented and the judge then decides on whether to grant the Order at this hearing. If the defendant does not appear, the hearing will be adjourned to a later date. It may also be adjourned to give the accused time to get an attorney.

If violated, the Order of Protection provides for the arrest of the accused. The police must arrest a person who has violated such an Order, but the person will likely be released very soon and told to appear in family court for another hearing. An alternative to arrest for violation of this Order is that the injured party may go back to family court and file a new petition called a Violation of an Order of Protection. The offending

party will be served with a summons and must return to court for a hearing.*

Many women who go to family court for an Order of Protection report that they encounter an attitude of resistance at the initial step, the interview with the Intake/Probation Officer. They report that they are discouraged from filing petitions for Orders of Protection and that, unless they are very insistent, they are not given a hearing until some time later.

In the system as it now operates, women often have to wait weeks or months for Orders of Protection, and these long waits endanger the women, who need immediate help. These waits must be eliminated. We recommend that clerks and officers of Family Court receive more specific training in handling family violence situations, and that they be trained to expedite the granting of Orders of Protection when those documents are requested.

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*For further information regarding procedures see "A Handbook for Beaten Women", Marjory Fields, Elyse Lehman.

Family Court Statistical Reports

In an effort to determine the number of domestic dispute cases brought to family court, we examined records currently kept by the Office of Court Administration. The Office of Court Administration resumed keeping these records in January 1977, and under the new law they are directed to prepare and distribute forms for the purpose of gathering data on family offenses filed in all New York State counties.

Chart D notes Family Court Petitions data for the first four months of 1977. The data show, county by county, how many cases were brought into court in which a petitioner charged assault, threat or harassment, or "other". In some instances, the exact nature of "other" was noted, and we have reported this information wherever possible. However, it was not always noted on the monthly reports filed by the counties, and if it was not recorded by the person filling out the forms, it is unknown. Similarly, the person making the charge, when it is not the wife, is usually unknown. It may be a husband, an in-law, a parent, or the State of New York. Where the information is available, we have identified the "other" making the charge.

CHART D: FAMILY COURT PETITIONS

JANUARY - APRIL 1977

	Petitions Filed	Petitions Referred	Petitions Transferred	Wife As Petitioner	Other As Petitioner	Wife Charges Assault	Wife Charges Threat, Harassment	Wife Charges Other	Other Charges Assault	Other Charges Threat, Harassment	Other Charges Other
ALBANY	183	7	0	170	20	52	111	0	8	12	0
ALLEGANY	29	0	0	26	3	9	14	3[a]	0	2	1[b]
BRONX	468	125	1	447	147	362	84	1	86	58	3
BROOME	151	16	0	148	28[d]	91	55	2[c]	10	20	0
CATTARAUGUS	8	11	0	13	6	3	9	0	4	3	0
CAYUGA	8	16	0	20	4	6	13	1	0	3	1
CHAUTAUQUA	40	22	5	54	13	26	14	14	8	3	2
CHEMUNG	33	0	0	28	5	6	22	0	2	3	0
CHENANGO	9	3	0	12	0	10	2	0	0	0	0
CLINTON	14	13	0	22	5	2	19	1	1	4	0
COLUMBIA	11	23	0	27	7	5	22	0	1	6	0
CORTLAND	13	1	0	11	3	2	9	0	0	3	0
DELAWARE	21	1	0	21	1	5	16	0	0	1	0
DUTCHESS	128	21	8	156	1	1	155	0	0	1	0
ERIE	307	45	0	236	116	74	117	45	33	43	40
ESSEX	10	6	0	16	0	5	10	1	0	0	0
FRANKLIN	34	6	1	34	7	14	18	2	1	4	2
FULTON	33	6	0	31	6	12	6	13	3	2	1
GENESEE	28	14	0	33	9	11	20	2	3	4	2
GREENE	13	11	1	20	5	6	10	4	1	2	2
HAMILTON	0	2	0	2	0	1	1	0	0	0	0
HERKIMER	47	4	0	43	8	12	31	0	5	3	0
JEFFERSON	45	15	0	45	15	12	25	8	4	7	4
KINGS	902	225	10	747	392	492	132	120	162	61	169
LEWIS	2	2	0	3	1	0	3	0	1	0	0
LIVINGSTON	1	16	0	14	3	4	10	0	0	3	0
MADISON	26	6	0	25	7	10	13	0	2[e]	5[f]	1
MONROE	104	58	0	137	25	99	32	6	7	14	4
MONTGOMERY	18	9	0	23	4	4	19	0	2	2	0
NASSAU	675	19	1	449	252	372	26	50	157	32	60
NEW YORK	414	99	2	429	87	304	103	22	29	38	20
NIAGARA	23	35	0	51	7	19	32	0	4	2	1
ONEIDA	40	29	2	55	14	13	41	1	3	9	2

CHART D: FAMILY COURT PETITIONS

JANUARY - APRIL 1977

	Petitions Filed	Petitions Referred	Petitions Transferred	Wife As Petitioner	Other As Petitioner	Wife Charges Assault	Wife Charges Threat, Harassment	Wife Charges Other	Other Charges Assault	Other Charges Threat, Harassment	Other Charges Other
ONONDAGA	234	28	0	221	41	140	65	16	24	14	3
ONTARIO	22	19	0	28	12	22	6	0	4	8	0
ORANGE	74	63	1	110	28	41	69	0	10	17	1
ORLEANS	4	12	1	12	5	7	5	0	2	2	1
OSWEGO	15	13	0	19	9	7	11	1[g]	2	7	0
OTSEGO	4	2	0	6	0	1	5	0	0	0	0
PUTNAM	36	1	0	33	4	19	14	0	2	2	0
QUEENS	565	110	8	474	215	267	203	4	81	118	16
RENSSELAER	72	20	0	77	15	64	10	3	9	6	0
RICHMOND	181	4	0	130	55	94	36	0	16	38	1
ROCKLAND	75	19	0	68	26	44	18	5[h]	12	12	2[i]
ST. LAWRENCE	16	18	0	27	7	13	13	1	2	5	0
SARATOGA	31	32	0	45	18	13	23	15	4	4	1
SCHENECTADY	41	16	0	45	12	36	9	0	5[j]	7	0
SCHOHARIE	8	9	0	10	7	3	7	0	0	7	0
SCHUYLER	10	1	0	10	1	6	4	0	1	0	0
SENECA	10	10	0	17	3	5	10	2	2	0	1
STEUBEN	44	14	0	30	19	20	19	0	8	11	0
SUFFOLK	500	119	1	559	61	259	296	3[k]	36	23	0
SULLIVAN	27	12	0	29	10	16	13	0	7	3	0
TIOGA	22	6	0	24	4	12	9	3	1[l]	2	1[m]
TOMPKINS	11	12	0	21	2	4	17[n]	0	2	0	0
ULSTER	40	38	0	58	20	12	44	2	5	12	3
WARREN	6	23	0	21	8	7	10	4	2	4	2
WASHINGTON	14	10	1	17	8	5	11	1	1	7	0
WAYNE	13	5	0	16	2	8	7	1	1	0	1
WESTCHESTER	524	35	42	428	153	262	166	0	83	70	0
WYOMING	16	2	0	16	2	12	3	1	2	0	0
YATES	3	4	0	4	3	1	3	0	3	0	0
TOTALS:	6320	1523	85	6109	1953	3444	2300	358	864	729	348

Footnotes to Chart D:
Family Court Petitions

a) The charge was menace.

b) The charge was larceny.

c) The charge was reckless endangerment.

d) In the months of March and April petitioners classified as "other" were identified as children, parents, husbands, mother and father-in-law, and the State of New York.

e) In January two husbands charged their wives with assault.

f) In February and March husbands were identified as the "other" charging assault.

g) The charge was identified as argument.

h) In January one charge was disorderly conduct.

i) A February charge was disorderly conduct.

j) In January a petitioner was identified as a husband charging assault.

k) In February a wife charged petit larceny against her husband.

l) In January one charge was identified as assault, no injury.

m) In March a charge of sexual abuse was filed.

n) In January one wife charged that she was "held at in-laws against will" in addition to threat and harassment.

An examination of the statistics for January 1977 through April 1977 brings out the following points:

1. Of the petitions filed, 96% were filed by wives.
2. Of the petitions processed, 77% were charges brought by wives.
3. If we consider battering to mean only physically assaulted, then 54% of the petitions filed represent wives and 43% of those processed represent wives. Further, under this definition, 56% of the wives who were petitioners would be considered battered.
4. If we consider threats as battering (and threats to abuse should so be categorized), then 90% of the petitions filed represent battered women, and 72% of the total processed were battered women. Further, under this definition, 94% of the wives appearing in family court charging assault, threat and harassment were battered.
5. Of the wives filing petitions in New York State, 64% were from Upstate New York.
6. Considering wives only physically assaulted, then 58% were from Upstate.
7. If figures for January through April are taken as representative, then 23,784 petitions will be processed in family court in New York State in 1977; 18,327 will be brought by wives, of whom 17,232 will charge assault, or threat and harassment, and 10,332 will charge physical assault.
8. In January, 29 or 46% of the counties of New York State did not file all the required forms. In February, 30 or 48% did not do so, as was true of 28 or 45% in March, and 21 or 33% in April.

Chart E: Wife As Petitioner

In the five-year period charted, the total number of petitions filed increased by 9%, with Upstate the major source, showing a 17% increase.

The number of battered women from New York State bringing their spouses to court increased from 14,102 to 15,819. Upstate, the number increased by 2,390 or 24.5%. The percent of battered women living in Upstate counties increased by 11%, while New York City reported a 15% decrease. Chart E shows these figures in detail.

Chart F: Types of Petitions Filed

During the same five-year period, the number of assaults decreased by 16% -- 14% in New York State as a whole and 20% in New York City. Of the total number of assaults reported, Upstate showed a percentage increase from 63% to 64%. The number of harassments reported increased by 37%, with a 52% increase Upstate. Of all those reported, the Upstate portion of total harassments increased by 11%, to 83% of the total harassment petitions filed. Over the same period, disorderly conduct charges decreased by 36%, with Upstate reporting a 38% decline. However, as of June 1973 Upstate still reported 78% of all such charges.

Chart G: Comparison of 1969 and 1975 Data

In 1973 assaults represented 30% of all petitions filed, a 16% decrease from 1968. Harassments in 1973 represented 56% of all petitions filed, or a decrease of 37% from 1968. Similarly, disorderly conduct charges decreased by 36%, representing 98% of all petitions filed in 1973.

CHART E: WIFE AS PETITIONER

YEARS	TOTAL FAMILY PETITIONS FILED	TOTAL FAMILY PETITIONS FILED UPSTATE	TOTAL FAMILY PETITIONS FILED NEW YORK CITY	TOTAL NUMBER OF WIVES AS PETITIONER	TOTAL NUMBER OF WIVES FILING UPSTATE	PERCENT OF TOTAL PETITIONS FILED UPSTATE	TOTAL NUMBER OF WIVES FILING NEW YORK CITY	PERCENT OF TOTAL PETITIONS FILED NEW YORK CITY
7/68 - 6/69	16,982	12,024	4,958	14,102	9,739	69.1%	4,363	30.9%
7/69 - 6/70	18,169	13,244	4,925	15,111	10,728	71.0%	4,383	29.0%
7/70 - 6/71	18,732	14,256	4,476	15,682	11,833	75.5%	3,849	24.5%
7/71 - 6/72	18,524	14,221	4,303	15,888	12,230	77.0%	3,658	23.0%
7/72 - 6/73	18,495	14,103	4,392	15,818	12,129	76.7%	3,689	23.3%
INCREASE OR DECREASE 1969 - 1973	+ 1,513	+ 2,079	- 566	+ 1,716	+ 2,390	+ 7.6%	- 694	- 7.6%
% OF INCREASE OR DECREASE	+ 8.9%	+ 17.3%	- 11.4%	+ 12.2%	+ 24.5%	+ 11.0%	- 15.4%	- 24.6%

CHART F: TYPES OF PETITIONS FILED

ASSAULT

YEARS	TOTAL NUMBER OF ASSAULT PETITIONS FILED	TOTAL NUMBER OF ASSAULT CHARGES FILED UPSTATE	UPSTATE PETITIONS PERCENT OF TOTAL ASSAULT	TOTAL NUMBER OF ASSAULT CHARGES FILED NEW YORK CITY	NEW YORK CITY PETITIONS PERCENT OF TOTAL ASSAULT		ASSAULT AS PERCENT OF TOTAL UPSTATE PETITIONS	ASSAULT AS PERCENT OF TOTAL NEW YORK CITY PETITIONS
7/68 - 6/69	6,567	4,088	63%	2,479	37%		34%	50%
7/69 - 6/70	6,519	4,106	63%	2,413	37%		31%	49%
7/70 - 6/71	6,140	3,992	65%	2,148	35%		28%	48%
7/71 - 6/72	5,776	3,840	66.5%	1,936	33.5%		27%	45%
7/72 - 6/73	5,502	3,526	64.1%	1,976	35.1%		25%	45%
INCREASE OR DECREASE	- 1,065	- 562	+ 1.1%	- 503	- 1.1%		- 9%	- 5%
% OF INCREASE OR DECREASE	- 16.2%	- 13.8%	+ 1.7%	- 20.1%	- 3.0%		- 36%	- 11%

CHART F: TYPES OF PETITIONS FILED

THREAT, HARASSMENT

YEARS	TOTAL NUMBER OF THREAT, HARASSMENT PETITIONS FILED NEW YORK STATE	TOTAL NUMBER OF THREAT, HARASSMENT PETITIONS FILED UPSTATE	UPSTATE PETITIONS PERCENT OF TOTAL THREAT, HARASSMENT	TOTAL NUMBER OF THREAT, HARASSMENT PETITIONS FILED NEW YORK CITY	NEW YORK CITY PETITIONS PERCENT OF TOTAL THREAT, HARASSMENT		THREAT, HARASSMENT AS PERCENT OF TOTAL UPSTATE PETITIONS	THREAT, HARASSMENT AS PERCENT OF TOTAL NEW YORK CITY PETITIONS
7/68 - 6/69	7,535	5,651	75%	1,884	25%		47%	38%
7/69 - 6/70	8,592	6,622	77.1%	1,970	22.9%		50%	40%
7/70 - 6/71	9,542	7,840	82.2%	1,701	17.8%		55%	38%
7/71 - 6/72	10,112	8,391	83%	1,721	17%		59%	40%
7/72 - 6/73	10,316	8,603	83.4%	1,713	16.6%		61%	39%
INCREASE OR DECREASE	+ 2,780	+ 2,952	+ 8.4%	- 171.16%	- 8.4%		- 14%	+ 1%
% OF INCREASE OR DECREASE	+ 36.9%	+ 52.2%	+ 11.2%	- 9.1%	- 33.6%		+ 29.8%	+ 2.6%

CHART F: TYPES OF PETITIONS FILED - Disorderly Conduct

YEARS	TOTAL NUMBER OF DISORDERLY CONDUCT PETITIONS FILED NEW YORK STATE	TOTAL NUMBER OF DISORDERLY CONDUCT PETITIONS FILED UPSTATE	UPSTATE PETITIONS AS PERCENT OF TOTAL DISORDERLY CONDUCT PETITIONS	TOTAL NUMBER OF DISORDERLY CONDUCT PETITIONS FILED NEW YORK CITY	NEW YORK CITY PETITIONS AS PERCENT OF TOTAL DISORDERLY CONDUCT PETITIONS		DISORDERLY CONDUCT AS PERCENT OF TOTAL UPSTATE PETITIONS	DISORDERLY CONDUCT AS PERCENT OF TOTAL NEW YORK CITY PETITIONS
7/68 - 6/69	2,830	2,285	80.8%	545	19.2%		19%	11%
7/69 - 6/70	2,547	2,251	88.4%	296	11.6%		17%	6%
7/70 - 6/71	2,211	1,853	83.8%	358	16.2%		13%	8%
7/71 - 6/72	1,994	1,564	78.4%	430	21.6%		11%	10%
7/72 - 6/73	1,805	1,410	78.1%	395	21.9%		10%	9%
INCREASE OR DECREASE	- 1,024	- 874	- 2.7%	- 150	+ 2.7%		- 9%	- 2%
% OF INCREASE OR DECREASE	- 36.2%	- 38.3%	- 3.3%	- 27.5%	- 14.1%		- 47.4%	- 18.2%

CHART C: COMPARISON OF 1969 and 1973 DATA

	TOTAL FAMILY OFFENSE PETITIONS FILED.		TOTAL NUMBER OF ASSAULT PETITIONS	AS A PERCENT OF TOTAL PETITIONS	TOTAL NUMBER OF HARASSMENT PETITIONS FILED	AS A PERCENT OF TOTAL PETITIONS	TOTAL NUMBER OF DISORDERLY CONDUCT PETITIONS FILED	AS A PERCENT OF TOTAL PETITIONS
7/68 - 6/69	16,982		6,567	38.7%	7,535	44.4%	2,830	16.7%
7/72 - 6/73	18,495		5,502	29.7%	10,316	55.8%	1,806	9.8%
INCREASE OR DECREASE	+ 1,513		- 1.065	- 16.2%	+ 2,781	+ 36.9%	- 1,024	- 36.2%
	+ 8.9%							

Using our four-month figures to project 1977 yearly totals (and keeping in mind that these figures are deflated due to incomplete reports for the four months charted), we find that the general trend statewide was for increases in all categories, with only one exception. Threat/harassment showed and overall drop of 11.9% from 1973 to 1977, though in New York City such charges increased by 52.5%. The statewide decrease was due to a decrease of 24.8% in Upstate areas.

73/77 contrasts to 69/73 in statewide figures in that the earlier trend to an increase in threat/harassment was reversed. The decrease of 16.2% in assault charges reversed to an increase of 134.9% between 1973 and 1977.

New York City showed increases in all categories between 1973 and 1977, reversing the earlier decreases.

In Upstate areas, the total family offense filings continued to climb, though at a much slower rate than before. The greatest change in figures from Upstate areas was in the number of assault charges filed; the earlier period showed a decrease of 13.8% (69/73), while 73/77 showed an increase of 105.5% in assault. Threat/harassment charges showed a decrease in the 73/77 period, down 24.8%.

Our survey does not indicate why there has been an increase in assault charges filed statewide. The reason for this requires further research.

CHART H: Comparison of 1973 and 1977 Data

	1973	1977 (Estimated)	Increase/Decrease	
NYS TOTAL	18,495	23,784	+5,289	+28.6%
Wives Filing	15,818	18,327	+2,509	+15.9%
Assault	5,502	12,924	+7,422	+134.9%
Threat/ Harassment	10,316	9, 087	-1,229	-11.9%
UPSTATE TOTAL	14,103	14,442	+ 339	+ 2.4%
Wives Filing	12,.29	11,646	- 483	- 4.0%
Assault	3,526	7,245	+3,719	+105.5%
Threat/ Harassment	8,603	6,474	-2,129	-24.8%
NYC TOTAL	4,392	9,342	+4,950	+112.7%
Wives Filing	3,689	6,681	+2,992	+81.1%
Assault	1,976	5,679	+3,703	+187.4%

CONTINUED

1 OF 2

VII. HOSPITALS AND HEALTH-RELATED FACILITIES

With the help of a list provided by the New York State Department of Hospitals, we sent our questionnaire to hospitals and health-related facilities throughout New York State. The exact number of hospitals and health-related facilities receiving questionnaires within each county in New York State, as well as a detailed report of responses, are included in the county profiles, which form the final section of this report.

We expected to get an idea of how many battered women are seen in hospitals statewide and how, if at all, hospitals and other health facilities attempt to help. The responses from Public Health Nursing Services were varied. Some units returned the questionnaire blank, saying the nature of their service is such that they have no occasion to encounter battered women. Others reported that in going into homes to see patients, they discover cases of battering.

The other health-related facilities we contacted were units of Planned Parenthood, Drug Abuse Counseling and Treatment Centers, and Mental Health Centers. Many reported that, in the course of treatment or counseling, it was disclosed that battering occurred in the home.

We found that no hospital presently uses "battered" as a diagnostic category for adult persons. "Battered" is not noted in patient records unless the battered person admits to the situation, and even then it may not be included, since diagnosis is commonly recorded only in terms of the type of injury sustained.

In many cases, facilities that did give figures reported them as approximate, based on the memories of staff members. This is because either there are no records kept on battering cases or because it is impossible or extremely difficult to retrieve the information. Since cases are not coded as "battered", charts would have to be examined one by one to determine how many women (and men) admitted that the cause of injury was beating by a spouse or companion. It is, therefore, impossible under present conditions for an accurate report to be made as to the number of battered adults seen.

Such is not the case with battering incidents involving children because the law requires that they be reported to a child abuse central registry. We recommend that the New York State Department of Health establish a centralized reporting mechanism or structure for incidents of battering involving adult battered persons. Without betraying the confidence of the victims, this registry will identify incidence, demographic data and socio-economic data relating to adult battered persons. The State Department of Health can determine from this data what services are needed and where, how existing services and resources can be allocated to better aid adult victims of battering, and then realistically plan the development of new services and fiscal assistance.

We recommend that battering cases not only be recorded as such, but that the patients be referred to the appropriate supportive service. The response we received and the comments made indicate that hospitals treat the actual physical injury

but do not, in most cases, attempt to deal with or to record the underlying problem of which battering is only a symptom.

It was frequently pointed out that women (and men) who have been battered are embarrassed and reluctant to admit the truth to doctors or nurses. It would therefore seem that referral to a counselor trained to deal with battered persons should take place during treatment in the emergency room. This counselor should speak with the patient and refer her (or him) to other services and sources of aid as need is indicated. (Arden Hill Hospital, Goshen, in Orange County, has instituted a system of this type which includes record-keeping. Please refer to the profile of Orange County for details of their policy and procedure.) Through a system such as this, hospitals would concern themselves both with the injuries and their cause, and would steer the patient toward those who can help her/him alleviate the violence.

The response we received to our hospitals questionnaire is charted on the following pages. Only those counties from which we received replies are included in the chart.

CHART J : HOSPITAL RESPONSE

COUNTY	Mailing: # Mailed	Mailing: # Returned	Attention: "Yes" Responses	Attention: "No" Responses	Record Kept: "Yes" Responses	Record Kept: "No" Responses	Numbers: # Battered Seen in Last Year	Numbers: # Suspected Battered Came to Emergency Room	Numbers: # Came to Hospital's Social Services Dept.	Numbers: # Came to Other	Marital Status: Married	Marital Status: Unmarried	Ages: Under 21	Ages: 21 - 30	Ages: 31 - 40	Ages: 41 - 50	Ages: 51 - 60	Ages: Over 60	Income Level: Medicaid	Income Level: Non-medicaid	Outcome: Treated in Emergency Room	Outcome: Admitted to Hospital	Outcome: Referred to Hospital's Social Services Dept.	Outcome: Referred to Legal Services	Outcome: Referred to Other	General Comments
ALBANY	8	2	2	0	1	1	18*	7	13	6	5										13	0	25	0	0	
ALLEGHENY	2	2	1	1	[illegible]	2	4	2+	2	0	2	4	0	0	1	3	0	0	0	2	2	2	0	0	0	2
BROOME	10	3	0	3	0	3	0	0	0	0	0															
CHAUTAUQUA	6	2	1	1	1	1	2	0	0	0	0	2	0	0	0	2	0	0	0	2	0	0	2	1	0	0
CATTARAUGUS	6	2	2	0	0	2	1 many		1	0	0	0	1	0	1	0	0	0	0	1	0	1	0	0	0	0
CAYUGA	3	1	1	0	0	1			NO STATISTICS AVAILABLE TO ANSWER ANY OF THESE QUESTIONS.																	
CHEMUNG	2	2	2	0	0	2			NO STATISTICS AVAILABLE TO ANSWER ANY OF THESE QUESTIONS.																	
CLINTON	3	2	2	0	1	1	32		32	0	0	STATISTICAL RESPONSE INCOMPLETE FOR THESE ITEMS. 0	14	4	12	7	12	1	4	9	5	32	3	1	0	0

CHART J : HOSPITAL RESPONSE

COUNTY	Mailing: # Mailed	Mailing: # Returned	Attention: "Yes" Responses	Attention: "No" Responses	Record Kept: "Yes" Responses	Record Kept: "No" Responses	Numbers: # Battered Seen in Last Year	Numbers: # Suspected Battered Came to Emergency Room	Numbers: # Came to Hospital's Social Services Dept.	Numbers: # Came to Other	Marital Status: Married	Marital Status: Unmarried	Ages: Under 21	Ages: 21 - 30	Ages: 31 - 40	Ages: 41 - 50	Ages: 51 - 60	Ages: Over 60	Income Level: Medicaid	Income Level: Non-medicaid	Outcome: Treated in Emergency Room	Outcome: Admitted to Hospital	Outcome: Referred to Hospital's Social Services Dept.	Outcome: Referred to Legal Services	Outcome: Referred to Other	General Comments
CORTLAND	3	2	2	0	1	1	14	can't tell		11	5	9	4	2	6	0	1	1	5	9	10	11			3	
DELAWARE	7	3	3	0	0	3	17	10	3	2	1	12	5	3	2	INCOMPLETE STATISTICS		1	2	3	4	6	2	4	2	
DUTCHESS	8	5	3	2	1	4	about 35	10	35	0	1	almost all	very few	4	about 30		1		18	17	34	0	?	0		
ERIE	34	19	12	7	1	18	70+	60	about 65	?	?	about 50	about 20	0	30	20	10		40	20	50	10	18	22		
ESSEX	5	1	1	0	0	1	0		0																	
FRANKLIN	3	2	2	0	0	2	5	3	3	0	2	4	1	3	0	1	0	1	0	2	1	3	0	2		
FULTON	3	1	1	0	0	1	2	1	0	0	0	2	0	1	0	0	1	0	0	1	1	0	0	0	0	
GENESEE	3	1	1	0	0	1	about 12	?	12	0	0	unknown		2	2	8	0	0	0	unknown		10	2	0	0	0

CHART J : HOSPITAL RESPONSE

COUNTY	Mailing: # Mailed	Mailing: # Returned	Attention: "Yes" Responses	Attention: "No" Responses	Record Kept: "Yes" Responses	Record Kept: "No" Responses	Numbers: # Battered Seen in Last Year	Numbers: # Suspected Battered	Numbers: # Came to Emergency Room	Numbers: # Came to Hospital's Social Services Dept.	Marital Status: # Came to Other	Marital Status: Married	Marital Status: Unmarried	Ages: Under 21	Ages: 21 - 30	Ages: 31 - 40	Ages: 41 - 50	Ages: 51 - 60	Ages: Over 60	Income Level: Medicaid	Income Level: Non-medicaid	Outcome: Treated in Emergency Room	Outcome: Admitted to Hospital	Outcome: Referred to Hospital's Social Services Dept.	Outcome: Referred to Legal Services	Outcome: Referred to Other	General Comments
HAMILTON	0	1	1	0	0	1	1	don't know	0	0	1	1	0	0	0	0	1	0	0	0	1	0	0	1	0	0	
HERKIMER	5	3	2	1	0	3	12	1	12	0	0	9	3	1	0	11	0	0	0	8	4	12	6	0	0	0	
JEFFERSON	6	4	2	2	1	3	18	12	15	0	3	14	4	6	7	4	1	0	0	5	13	15	1	0	1	0	
LEWIS	2	1	1	0	0	1	5	don't know	5	0	0	3	2	(All in 18 to 48 age range)							2	3	5	0	0	0	0	
MONROE	18	5	3	2	0	5	20	about 2	0	4	0	13	7	4	4	4	.			5		1	1	0	0	0	
MONTGOMERY	2	2	2	0	0	2	8	don't know	6	0	0	6	2	2	1	3	2	0	0		6	6	3	2	0	0	
NASSAU	28	10	7	3	2	8	about 90	10+	about 70	6	ANSWERS ARE INCOMPLETE FOR THESE ITEMS. 12	26	10	2	10	15	7	3	1	6	32	21	5	24	10	0	
NIAGARA	9	1	1	0	0	1	4	4	4	0	0	THIS INFORMATION IS NOT AVAILABLE.										4	0	0	0	0	

CHART J : HOSPITAL RESPONSE

COUNTY	Mailing: # Mailed	Mailing: # Returned	Attention: "Yes" Responses	Attention: "No" Responses	Record Kept: "Yes" Responses	Record Kept: "No" Responses	Numbers: # Battered Seen in Last Year	Numbers: # Suspected Battered	Numbers: # Came to Emergency Room	Numbers: # Came to Hospital's Social Services Dept.	Numbers: # Came to Other	Marital Status: Married	Marital Status: Unmarried	Ages: Under 21	Ages: 21 - 30	Ages: 31 - 40	Ages: 41 - 50	Ages: 51 - 60	Ages: Over 60	Income Level: Medicaid	Income Level: Non-medicaid	Outcome: Treated in Emergency Room	Outcome: Admitted to Hospital	Outcome: Referred to Hospital's Social Services Dept.	Outcome: Referred to Legal Services	Outcome: Referred to Other	General Comments
ONEIDA	14	3	0	3	0	3	NO INFORMATION IS AVAILABLE, SINCE RECORDS ARE NOT KEPT.																				
ONTARIO	5	2	2	0	0	2	15	1	5	0	10	11	4	4	10	0	1	0	0	8	7	5	0	10	1	0	
ORANGE	10	3	1	2	0	3	NO INFORMATION PROVIDED IN ANY CATEGORY.																				
ORLEANS	4	1	0	1	0	1	NO INFORMATION PROVIDED IN THESE CATEGORIES.																				
OSWEGO	4	1	1	0	0	1	3	0	3	0	0	3	0	0	1	2	0	0	0	3	0	3	1	0	3	0	
OTSEGO	4	2	2	0	0	2	UNABLE TO FURNISH ANY DATA DUE TO LACK OF RECORDS AND INFREQUENCY OF OCCURRENCE.																				
PUTNAM	2	1	1	0	0	1	NO INFORMATION AVAILABLE IN THESE CATEGORIES.																				
RENSSELAER	9	2	1	1	0	2	6	24	0	0	24	3	3	6	4	0	2	0	0	5	1	0	1	5	0	0	

CHART J : HOSPITAL RESPONSE

COUNTY	Mailing: # Mailed	Mailing: # Returned	Attention: "Yes" Responses	Attention: "No" Responses	Record Kept: "Yes" Responses	Record Kept: "No" Responses	Numbers: # Battered Seen in Last Year	Numbers: # Suspected Battered Came to Emergency Room	Numbers: # Came to Hospital's Social Services Dept.	Numbers: # Came to Other	Marital Status: Married	Marital Status: Unmarried	Ages: Under 21	Ages: 21 - 30	Ages: 31 - 40	Ages: 41 - 50	Ages: 51 - 60	Ages: Over 60	Income Level: Medicaid	Income Level: Non-medicaid	Outcome: Treated in Emergency Room	Outcome: Admitted to Hospital	Outcome: Referred to Hospital's Social Services Dept.	Outcome: Referred to Legal Services	Outcome: Referred to Other	General Comments
ROCKLAND	8	3	2	1	0	3	DATA IN THESE CATEGORIES IS NOT COMPLETE.					1		1							1					
ST LAWRENCE	9	1	1	0	0	1	NO INFORMATION GIVEN IN THESE CATEGORIES.																			
SARATOGA	5	1	1	0	0	1	NO INFORMATION IS AVAILABLE FOR THESE CATEGORIES.																			
SCHENECTADY	7	2	1	1	0	2	NO INFORMATION IS AVAILABLE FOR THESE CATEGORIES.																			
SCHOHARIE	2	1	0	1	0	1	NO INFORMATION IS AVAILABLE FOR THESE CATEGORIES.																			
SCHUYLER	1	1	0	1	0	1	NO INFORMATION IS AVAILABLE FOR THESE CATEGORIES.																			
STEUBEN	5	2	1	1	0	2	3	0	3	0	0	2	1	NO INFORMATION AVAILABLE.							3	0	3	1	0	
SUFFOLK	27	9	4	4	1	8	51	22	51	8	0	23	6	4	6	5	2	1	0	8	10	51	0	23	2	0	

CHART J : HOSPITAL RESPONSE

COUNTY	Mailing: # Mailed	Mailing: # Returned	Attention Kent: "Yes" Responses	Attention Kent: "No" Responses	Record Numbers: "Yes" Responses	Record Numbers: "No" Responses	# Battered Seen in Last Year	# Suspected Battered Came to Emergency Room	# Came to Hospital's Social Services Dept.	# Came to Other	Marital Status: Married	Marital Status: Unmarried	Ages: Under 21	Ages: 21 - 30	Ages: 31 - 40	Ages: 41 - 50	Ages: 51 - 60	Ages: Over 60	Income Level: Medicaid	Income Level: Non-medicaid	Outcome: Treated in Emergency Room	Outcome: Admitted to Hospital	Outcome: Referred to Hospital's Social Services Dept.	Outcome: Referred to Legal Services	Outcome: Referred to Other	General Comments
SULLIVAN	7	2	0	2	NO STATISTICS AVAILABLE TO ANSWER THESE QUESTIONS.																					
TOMPKINS	1	2	1	1	0	2	2	2	2	2	0	2	0	0	0	1	0	0	1	0	1		2	2	1	
TIOGA	3	2	2	0	0	2	about 6	6	0	0	6	4	2	2	3	1	0	0	0	3	3	0	0	6	0	0
ULSTER	5	3	2	1	0	3	6	5	1	0	5	2	4	0	6	0	0	0	0	6	0	3	1	5	5	0
WAYNE	3	2	1	1	0	2	7	0	0	0	1	6	1	1	4	2	0	0	0	5	2	0	1	0	0	0
WESTCHESTER	39	7	4	3	0	7	41	7	41	0	RESPONSE TO THESE CATEGORIES WAS INCOMPLETE. 0	26	15	0	7	4	0	0	0	13	14					
YATES	1	1	0	1	0	1	NO STATISTICS AVAILABLE TO ANSWER THESE QUESTIONS.																			

CHART J : HOSPITAL RESPONSE

COUNTY	Mailing: # Mailed	Mailing: # Returned	Attention: "Yes" Responses	Attention: "No" Responses	Record Kept: "Yes" Responses	Record Kept: "No" Responses	Numbers: # Battered Seen in Last Year	Numbers: # Suspected Battered	Numbers: # Came to Emergency Room	Numbers: # Came to Hospital's Social Services Dept.	Numbers: # Came to Other	Marital Status: Married	Marital Status: Unmarried	Ages: Under 21	Ages: 21 - 30	Ages: 31 - 40	Ages: 41 - 50	Ages: 51 - 60	Ages: Over 60	Income Level: Medicaid	Income Level: Non-medicaid	Outcome: Treated in Emergency Room	Outcome: Admitted to Hospital	Outcome: Referred to Hospital's Social Services Dept.	Outcome: Referred to Legal Services	Outcome: Referred to Other	General Comments
BRONX	36	10	3	7	1	9	about 90	20+	4	10	0	9	5	2	5	3	2	0	2	11	3	4	0	10	0	0	
KINGS	53	18	10	8	1	17	50+	100	147	15	5	28	22	0	22	22	5	1	0	20	8	137	0	20	18	1	
NEW YORK	50	16	3	13	2	14	6	1	0	4	0	4	2	2	0	3	1	0	0	2	2	1	2	2	1	1	
QUEENS	36	7	5	2	0	7	59	67	52	16	1	43	16	1	48	7	2	1	0	39	20	57	0	15	20	0	
RICHMOND	12	2	1	1	0	2	1	3	3	0	0		1	0	1	1	1	0	0	1		(?) 3	1	1	1	0	
NEW YORK CITY TOTALS	187	53	22	31	4	49	206+	191	206	45	6	84	46	5	76	36	11	2	2	73	33	202	3	48	40	0	
UPSTATE TOTALS					5		508	197	385	31	55	295	111	55	139	122	28	7	4	161	123	289	56	130	50	7	
NEW YORK STATE TOTALS					9		714+	388	591	76	61	389	157	60	215	168	39	9	6	234	156	491	59	178	90	9	

VIII. SHELTERS

The first shelter in New York State to be established solely and officially for the purpose of aiding battered women opened in Brooklyn in the fall of 1977. The shelter is part of a comprehensive program established by the Center for the Elimination of Violence in the Family, Inc. In addition to refuge, it provides counseling for residents and non-residents, crisis intervention, a hotline, medical and legal services, nutrition counseling, day care, employment counseling, training advocacy, and community outreach. The Center received a start-up grant of $200,000 from the state, allegedly the first awarded to an independent women's group by any governmental unit in the country for a battered women's program. A second shelter should be opening shortly in Rochester. The Alternatives for Battered Women, a Rochester-based group, received a start-up grant in the summer of 1977 for a shelter in that area.

One major problem the Brooklyn shelter encountered was that under the then current interpretation of the New York State Rules and Regulations, shelters could be licensed either as homes for adults or for children, but not for both together. Consequently, a woman who had to leave home for her own safety could not take her children with her into a shelter. If she did not take them, however, aside from the danger of physical violence in which she might be leaving them, she ran the risk of losing her right to them, since her leaving could be construed as abandonment.

Bill No. S.6618 A.8843, which was signed into law in July 1977, altered this situation by amending the Social Services law so women and children could be housed in the same shelter.

The amendment provides that the Board of Social Welfare may approve the incorporation of special care homes which would offer shelter and supportive services to parents with children in cases where the parent is a victim of physical abuse or threatened with abuse or where the child is an abused or maltreated child. It also allows homes or shelters which presently exist for other purposes to be used as Special Care Homes, subject to the approval of the Board of Social Welfare.* The definition of special care homes was amended to include facilities providing special care programs for any parent accompanied by his or her minor child or children when either the child is abused or maltreated or when the parent is a victim of an act which would constitute disorderly conduct, harassment, menacing, reckless endangerment, or assault or attempted assault by a related or unrelated member of the same household.

The questionnaires we circulated disclosed that the shelter in Brooklyn, referred to earlier, is not the only facility available to battered women. The Salvation Army, at its various locations, is usually able to offer emergency shelter for overnight or a limited number of days to women and young children, as well as emergency food money. In many localities, the YWCA is able to offer shelter to women and their children (girls of any age, boys up to 12 years old), and, though payment is required, it may be deferred in some cases until such time as the woman is able to pay. In some places, members of women's groups, religious groups, and other private individuals have

*Subsequent legislation transferred these responsibilities to the Department of Social Services.

opened their homes to women and their children, and house and feed them at their own expense. Places of shelter identified by groups responding to our questionnaires are mentioned in the individual county profiles, at the end of this volume.

A discrepancy that came prominently to our attention regarding shelters was the great number of women requesting such aid, but the lack of accommodation for them. In spite of the facilities referred to above, there are, in fact, very few places where a woman may go for temporary shelter from the violence of her home situation. We recommend that greater effort be made to meet this need.

IX. TITLE XX SERVICES

Title XX of the Federal Social Security Act is the primary source of federal funding for social service programs in New York State. Twenty different programs are established as recipients of Title XX funding and as such must be directed toward the accomplishment of one of five national goals, which are:

1. Achieving or maintaining economic self-support to prevent, reduce, or eliminate dependency.

2. Achieving or maintaining self-sufficiency, including reduction or prevention of dependency.

3. Preventing or remedying neglect, abuse or exploitation of children and adults unable to protect their own interests.

4. Preventing or reducing inappropriate institutional care by providing community-based, home-based, or other forms of less intensive care.

5. Securing referral or admission for institutional care when other forms of care are not appropriate, or providing services to individuals in institutions.

Fourteen of the twenty programs established under Title XX are mandated without regard to income level of the recipient, i.e., local districts may not set eligibility levels for these services. The other services have income eligibility levels which vary according to the service; local districts may not establish lower eligibility levels for these services.

Three of the mandated services are particularly applicable to battered persons. These are: Information and Referral, Protective Services for Adults, and Foster Care Services for Adults.

Information and Referral

While this service, which is mandated to bring needy persons in contact with community providers of services, cannot aid battered women and other battered persons unless communities have services to offer, it should inform battered persons of all possible sources of aid, public and private. Del Martin, in her book Battered Wives, refers to social services as a "runaround". She recounts tales of women who must go from agency to agency, getting bits of information at each stop, and sometimes finding the most urgently needed things (such as where to get emergency shelter and food money) only by chance. A person in need should not be expected to know about the services available to him/her or how to apply for them. Information and Referral should coordinate and provide to everyone all necessary information and referrals to other services. There is no income level requirement for Information and Referral Services.

Protective Services for Adults

Out of all Title XX programs, Adult Protective Services are the most applicable to the needs of battered women. These services specifically address themselves to National Goal III, i.e., preventing the abuse, exploitation, and neglect of adults who are unable to protect their own interests. The following help is given under this program:

1. Identification of adults in need of protection.
2. Providing a prompt response and investigation upon request of adults at risk of other persons acting on their behalf.
3. Diagnosing the individual's situation and special service needs.

4. Providing counseling to such adults, their families, other responsible persons or to fiduciaries such as representative payees, on handling the affairs of such adults.

5. Arranging for appropriate alternative living arrangements in the community or in an institution, when necessary.

6. Assistance in locating social services, medical care, and other resources in the community, including arrangement for day care in a protective setting if needed.

7. Arranging for guardianship, conservatorship, commitment or other protective placements as needed.

8. Providing advocacy and assistance in arranging for legal services to assure receipt of rights and entitlements due to adults at risk.

9. Functioning as a conservator, representative payee, or protective payee where it is determined such services are needed and there is no one else available or capable of acting in this capacity.

Adult Protective Services are mandated for all qualified adults without regard to income. Those who qualify for aid under this part of Title XX services are persons eighteen or older who "are unable to protect their own interests, harmed or threatened with harm through action or inaction by another individual or through their own action due to lack of awareness, incompetence or poor health which results in physical or mental injury, neglect or maltreatment, failure to receive adequate food, shelter, or clothing, deprivation of entitlements due them, or wasting of their resources."

The above definition should be interpreted to include adult battered women in the population at risk, since they are both harmed and threatened with harm throught the action of another individual and are unable to protect their own interests in the situation they must confront. However, interpretation

of Adult Protective Services eligibility to include or exclude adult battered women varies from county to county. In correspondence with our staff, Essex County Social Services officials stated an adult battered woman does not meet the present criteria for Adult Protective Services, while Social Services officials in Oneida and Wayne Counties specifically mentioned these services as available to battered women.

In New York City, the Human Resources Administration is initiating a program to give aid specifically to battered women that will include a city-wide income maintenance/housing program, to be administered by Protective Services for Adults. The program will provide emergency housing in hotel settings, will be open-ended in terms of the number of women who may be aided, and will be open to women with children.

We recommend that aid through Protective Services for Adults be made available to adult battered women in all counties of New York State.

We recommend that the eligibility of adult battered women to receive aid under Protective Services for Adults be made clear by adding "adult battered persons" to the statement of eligibility.

Foster Care Services for Adults

This service, as presently mandated, is responsible for the placement of physically, mentally, or socially handicapped persons age eighteen and above in approved "community-based settings according to individual need." It is intended to implement National Goals III and IV, and carries an income eligi-

bility level of 62% of the state median income (currently $15,169 for a family of four). Carrying out these services requires the following:

1. Assessment of individual need for Foster Care Services.
2. Location and evaluation of facilities providing foster care to determine their acceptibility.
3. Monitoring of each placement to assure proper care, continued appropriateness, and need for service.
4. Provision of assistance in obtaining other necessary support services.

During the 1977 legislative session, legislation was passed and signed into law that transferred the responsibilities for inspection and supervision of adult care and child care institutions from the Board of Social Welfare to the Department of Social Services. According to the Governor's budget statement for 1977, "The Department of Social Services already operates less expensive programs (such as adult family foster care) than the Board-supervised adult care institutions and the transfer should result in better utilization of these less costly forms of care."

According to the New York City Family and Adult Services Monthly Statistical Report of Service Delivery for November 1976, there were, in New York City, 1,207 individuals participating in the Foster Home Program. The Foster Home Program staff estimated that, accounting for the average number leaving and entering their care each month, there was an average of 1,483 persons receiving aid from the Program as a yearly figure. Since the Adult Foster Care Program in New York City can serve 2,000 persons annually, there are many vacant spaces available. By a modification of the requirements for receipt of aid under

this type of service to include battered persons as well as physically, mentally, or socially handicapped persons, battered persons could have the option of emergency shelter in a home rather than group environment, the vacant space would be utilized, and the National Goals of Title XX more fully carried out.

Two other services potentially applicable to battered persons are Preventive Services and Social Adjustment Services, neither of which is a mandated service. Local districts have the option of choosing whether these services are to be made available at all, and to whom they will be made available.

Preventive Services

This type of aid carries an eligibility level of 62% of state median income. It is designed to assist adults and children in the identification and resolution of problems interfering with effective individual and family functioning. The services offered under this program are:

1. Intensive family casework.
2. Day treatment for adults.
3. Day treatment for children.
4. Arrangement for other services, including legal services.
5. Arrangement of payment for, and home delivery of, daily meals to needy individuals.

Social Adjustment Services

Since the central aim of these services is to encourage the harmonious functioning of individuals within family and

community situations, it should be considered as a means of addressing the needs of battered persons. Specifically, these services are intended to minimize the problems connected with:

1. marital conflict;
2. parent-child conflict;
3. child behavior problems; and
4. disability conditions due to handicaps, blindness, or age.

In summary, guidelines exist for the delivery of social services to battered persons (within the Title XX Social Security Act). The question is <u>why, particularly for the mandated services for persons of all income levels, they have not been used</u>.

FOOTNOTES

1. New York City Mayor's Task Force on Rape and National Congress of Neighborhood Women. Proposal for a Residential and Research Center for Battered Women. New York City: 1976, p. 12.

2. Ibid., p. 7.

3. Ibid., p. 8.

4. Susan Edmiston, "The Wife Beaters," Woman's Day, March 1976, p. 110.

5. New York City Mayor's Task Force on Rape and National Congress of Neighborhood Women, op. cit., p. 8.

6. Edmiston, loc. cit.

7. Jim and Carolyn Barden, "The Battered Wife Syndrome," Viva, May 1976, p. 81.

8. Edmiston, loc. cit.

9. Ibid., p. 111.

10. New York City Mayor's Task Force on Rape and National Congress of Neighborhood Women, op. cit., p. 8.

11. Ibid., p. 12.

12. Ibid., p. 18.

13. Edmiston, loc. cit.

14. New York City Mayor's Task Force on Rape and National Congress of Neighborhood Women, op. cit., p. 9.

15. Edmiston, loc. cit.

16. Ibid., loc. cit.

17. Del Martin, Battered Wives, (San Francisco: Glide Publications, 1976), p. 139.

18. Monica Holmes and Leonard Steinbach, Victims Information Bureau of Suffolk County A Program Case Study... (New York:. Community Research Applications., Inc, 1976), p.3.

19. Ibid., p. 14.

20. New York City Mayor's Task Force on Rape and National Congress of Neighborhood Women, op. cit., p. 15,

21. Ibid., loc. cit.

22. Proceedings: National Conference on Women and Crime, (National League of Cities U.S. Conference of Mayors, 1976), p. 64.

23. Ibid., p. 65.

24. Leslie Maitland, "Courts Easy on Rising Family Violence," The New York Times, June 14, 1976, p. 1.

25. New York City Mayor's Task Force on Rape and National Congress of Neighborhood Women, op. cit., p. 15.

26. Maitland, loc. cit.

27. Martin, op. cit., p. 177.