Immigrant and Refugee Women Experiencing Severe Domestic Violence in Canada: A Social Ecological Analysis

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Abstract

This research examines the multifaceted challenges faced by immigrant and refugee women who are survivors of severe domestic violence in Canada through a social ecological lens. By exploring individual, relationship, community, and societal factors, this research aims to inform culturally-sensitive policies to prevent and address domestic violence and domestic homicide. Drawing on narratives and life experiences of survivors, the study highlights the unique challenges faced by immigrant and refugee women, including cultural isolation, language barriers, and patriarchal norms. The findings underscore the need for comprehensive approaches to support these vulnerable populations, including programs on safe dating, awareness of rights, accessible information dissemination, and training for service providers. The study reveals the significance of a culturally-sensitive framework in understanding and addressing domestic violence among immigrant and refugee women, offering actionable recommendations to foster safer and more inclusive environments for these vulnerable populations.

May, 2024

Dedication

In the memory of my beloved father João Pereira da Silva Filho.

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1. Introduction

In this thesis I argue how the unique experiences of immigrant and refugee women facing domestic violence in Canada can be better understood through the social ecological model. As a framework that examines the complex interplay between individual, relationship, community, and societal factors to understand and address various social and health issues (Heise, 1998), the social ecological model allows to identify factors that might influence people's behavior, including violence. My research therefore explores the narratives and life experiences of immigrant and refugee survivors of severe and life-threatening domestic violence to inform and enhance prevention initiatives to tackle domestic violence and domestic homicide through culturally-sensitive policies.

Because immigrant and refugee women face specific risk factors, barriers and challenges, such as language limitations, strains of immigration and lack of Canadian knowledge regarding legislation, protection and support (Ahmadzai, 2015), these groups are at high risk for domestic violence, including domestic homicide, and may face a more difficult time seeking help and/or escaping abuse. Previous research has found that domestic violence reflects differently on more vulnerable populations in terms of its prevalence, characteristics, and victimization (Cotter, 2021). The state of vulnerability of immigrant and refugee victims can be observed from particular conditions regarding historical events, developmental experiences and life circumstances that can result in an increased risk of domestic violence victimization (Watt, 2008).

The Canadian Domestic Homicide Prevention Initiative with Vulnerable

Populations (CDHPIVP, 2018) states that domestic violence is the violence "against

current or former spouses or dating partners, whether or not the individuals live together

or have children." On the other hand, according to Krug et al. (2002, p. 10), intimate partner violence means "any behaviour within an intimate relationship that causes physical, psychological or sexual harm to those in that relationship." The World Health Organization (WHO, 2012) refers to intimate partner violence as domestic violence¹.

Domestic homicide, also known as intimate partner homicide², is a global public health issue (World Health Organization, 2012). According to Canadian Domestic Homicide Prevention Initiative with Vulnerable Populations (CDHPIVP, 2018) "domestic homicide is defined as the killing of a current or former intimate partner, their child(dren), and/or other third parties." Domestic homicide is the most extreme type of violence found within intimate and family relationships. In Canada, women are the main victims of domestic homicides (78%), with a rate 4.5 times higher than men (Statistics Canada, 2015).

Despite the severity and frequency of severe domestic violence against women, more research is needed to investigate the intersection between domestic violence and homicide and the immigrant and refugee context in Canada. My reading of existing research has identified some gaps in the approach to this topic. Firstly, the literature on domestic homicide related to immigrant and refugee women appears to be outdated. From 2010 onwards, although important studies have been published in this period (Ozturk et al., 2019; Holtmann & Rickards, 2018; Souto et al., 2016), research progress has been limited. Most research tends to focus on immigration to the U.S. and some European countries, not to Canada. Furthermore, research conducted on immigration to

¹ While the term 'intimate partner violence' only refers to the relationship between former or current partners and 'domestic violence' refers to the relationships in the same households, both expressions are often used interchangeably in the literature. In this research I use the term 'domestic violence' to refer to the issue studied.

² While the term 'intimate partner homicide' is limited to the relationship between former or current partners, the literature often refers to domestic homicide and intimate partner homicide interchangeably.

Canada often addresses the reality of Asian immigrants and refugees, suppressing the experience of a large part of the immigrant and refugee population that does not belong to this group. Finally, most studies use quantitative methods. To address these gaps, the present study proposes to bring a more up-to-date perspective of immigrant and refugee women in Canada, based on recent in-depth qualitative interviews carried out with survivors of severe domestic violence.

My research emphasizes the issue specifically in Canada because of the high level of legal immigration that differentiates it from other countries. While some studies analyze severe domestic violence among the immigrant and refugee populations as undocumented residents in other nations (Ferreira, 2021; Valdovinos et al., 2021; Murshid & Bowen, 2018; Poteyeva & Wasileski, 2016; Zadnik et al., 2016; Levine & Peffer, 2012; Pendleton, 2003), this situation does not reflect the reality of Canada, where immigration policies allow immigrants to live legally in the country if certain conditions are met. My study addresses this gap by exploring the barriers and challenges of immigrant and refugee women who have experienced severe and life-threatening domestic violence in Canada through data collected from the Canadian Domestic Homicide Prevention Initiative with Vulnerable Populations (CDHPIVP).

The CDHPIVP (CDHPIVP, 2018) was a five-year project, with three main objectives: (1) conduct research on domestic violence homicides in Canada; (2) identify protocols and strategies that will reduce risk; and (3) share this knowledge with the wider community. By identifying strategies to reduce risk, the project focused on four specific populations that are identified as having unique needs: Indigenous peoples; immigrants and refugees; people living in rural, remote, and northern communities; and children exposed to domestic violence.

The main goal of the project was to develop a national Canadian database on domestic violence homicide that occurred between 2010 and 2020 to aid in the identification of associated risk factors in these cases. The initiative allowed researchers to identify trends, common risk markers, unique factors, and system involvement regarding vulnerable populations. The CDHPIVP conducted interviews with survivors of severe domestic violence and family members of victims of domestic homicide.

I chose to explore the CDHPIVP's interview data for my research because it provided detailed information about the conditions and context of domestic violence and domestic homicide cases involving immigrant and refugee women across Canada. Following the narratives, I added to the interviewees' stories my perspective, as a non-Canadian woman living in Canada, for interpretive, comparative and reflexive purposes. Hertz (1997), as cited in Presser (2008), explains that the "reflexive ethnographer does not simply report 'facts' or 'truths' but actively constructs interpretations of his or her experiences in the field and then questions how those interpretations came about." Therefore, whereas the researcher's background, characteristics and perceptions influence their analysis (Hammersley & Atkinson, 1995, as cited in Presser, 2008), reflexivity intentionally was integrated into my study and was taken into account in the research design.

1.1. Research questions

The key question framing my study was the following: How does the social ecological model help us understand the challenges of immigrant and refugee women from their experiences as survivors of severe and life-threatening domestic violence in Canada? And the sub-question was: How can their experiences contribute to the

creation of effective policies to prevent lethal domestic violence among immigrant and refugee women?

The social ecological model involves the interaction of environmental/contextual factors that may influence people's behavior, including individual, relationship, community and societal dimensions (Heise, 1998). I decided to analyze violence using this theoretical framework to have a broader understanding of the issue among immigrant and refugee women experiencing abuse from their partners. Addressing the social ecological framework would allow me to identify and comprehend factors that increase the likelihood of becoming victims or perpetrators of violence among immigrant and refugee populations.

Answering these research questions allowed for understanding both the struggles of survivors from their stories and what can be done to prevent or reduce the number of incidents related to domestic violence and domestic homicide regarding immigrant and refugee populations.

1.2. Overarching goal and research objectives

Based on information about the struggles and challenges of immigrant and refugee women, my work sought to underscore their journeys and experiences in Canada and the oppression they suffered due to gender inequality, cultural limitations and social vulnerability when facing domestic violence. My overarching goal was to give voice to these vulnerable groups through their narratives, using the social ecological model. I also sought to suggest prevention programs considering sociocultural and historical aspects and service coordination and collaboration.

Immigrant and refugee women's vulnerabilities consist of barriers and challenges as a result of systemic factors that are contributing to their susceptibility to domestic violence, such as language limitations, isolation, burdens of immigration, and unawareness of local legislation and protective regulations (Ahmadzai, 2015). Thus, new ideas and protective measures to prevent severe domestic violence based on the personal accounts of victims are needed to ensure the safety of immigrant and refugee women upon moving to Canada. Acknowledging these vulnerable populations' hurdles help these groups to overcome limitations and undermine lethal domestic violence.

This research also accomplished specific objectives. I analyzed the immigrant and refugee victims' interviews collected from the CDHPIVP to examine how they have dealt with severe and life threatening domestic violence. I integrated the social ecological model perspectives into victims' narratives to understand their risk factors, challenges, barriers and limitations to seeking help.

Based on the experiences of the victims, I also collected new ideas that can contribute to promoting protection for this vulnerable group. To achieve this goal, I sought to consider policies and programs to enhance the safety of immigrant and refugee women who experience domestic violence.

1.3. Chapter outline

I organized my research as follows. The subsequent chapter consists of the background information. This chapter describes the connection of immigration to Canada and severe domestic violence and domestic homicide, with important details to outline the issue addressed in this study.

Chapter three explores the existing literature on domestic homicide among immigrant and refugee populations. The literature review was essential in helping me understand situations that play specific roles in the journey of immigrant and refugee women experiencing domestic violence, such as immigration status, vulnerability conditions, risk factors and intersectionality. In addition, this chapter allowed me to identify tools to help protect victims of severe domestic violence, such as risk assessment and risk management, and it gave me insights on some policies to enhance victims' safety.

In chapter four, I discuss the theories that framed my study. I have chosen to use the social ecological model to help me understand the influence of violence through ecological dimensions on the individual, relationship, community and societal levels. I also suggested policies to prevent domestic violence to properly address the issue within the heterogeneous group studied.

Chapter five describes the research methods chosen. I used thematic analysis to explore personal experiences of the immigrant and refugee victims of domestic violence and domestic homicide. Thematic analysis allowed finding patterns on the struggles that victims share, providing deeper insights on these vulnerable populations' hurdles from their own experiences.

In chapter six I analyze my findings. I lay out how immigrant and refugee women's particular risk factors, barriers, and limitations may have influenced violence in the four dimensions of the social ecological model (individual, relationship, community and societal). I organized the victims' narratives in a logical sequence according to the levels of the social ecological model and their particularities. This chapter allowed me to confront the literature review, the theoretical framework and the

research methods chapters with the lived experiences of the victims interviewed, resulting in an organized chain of victims' narratives.

In chapter seven, I discuss about my findings and address my research questions. I explore how the levels of the social ecological model were used to help me understand the unique challenges of immigrant and refugee woman who experienced domestic violence and were interviewed as part of the CDHPIVP. I also suggest prevention policies to tackle domestic violence among these vulnerable groups.

In the final chapter, I provide an interpretation of the discussion by connecting it with my personal experiences using a self-reflexive mood (Wolcott, 1994) and conclude this study.

2. Background

My research stems from the intersection of two topics: immigration and severe domestic violence in Canada. In this section, I address a subtopic on the history of immigration in Canada, introducing the concept of immigrants and refugees and how this historical relationship with the country's development has been built over the years. The implementation of settlement measures is a necessary condition to meet the demands arising from the immigration policy and the massive presence of immigrants in the country. Secondly, regarding domestic violence, I introduce the concept of this abuse, and specifically refer to the escalation of violence, which can culminate in lethality. Following brief historical and cultural references, I disclose the importance of working to protect from and prevent domestic homicide among immigrant and refugee women.

2.1. Immigration to Canada

Immigrants are individuals who have voluntarily chosen to move permanently from their country of origin and to settle in a new country. For individuals to be recognized as immigrants, they have to live in the host country for a minimum stay of one year (UNESCO, 2017). In Canada, according to Statistics Canada (2016, p. 1), "immigrant refers to a person who is, or who has ever been, a landed immigrant or permanent resident. Such a person has been granted the right to live in Canada permanently by immigration authorities." This excludes those on a student visa or work visa. Refugees are individuals who migrate involuntarily or by force for a variety of reasons, including war, political or religious persecution, or natural disasters (CDHPIVP, 2018).

Migration has largely been responsible for framing and shaping Canadian traditions and history. From the historic trajectory of the first contacts with Indigenous peoples of Canada to the emerging multicultural Canadian society, the history of Canada has been a history of migration (Messamore, 2002). According to Statistics Canada (202, p. 1), international migration is primarily responsible for Canada's population growth, accounting for 87% of the country's population in 2021. Regarding immigrants' continent of birth, the 2021 Canadian census found that the majority of recent immigrants to Canada (from 2016 to 2021) came from Asia (including the Middle East), with 62% of the total immigrants, followed by Africa (15%) and Americas (11%). The findings demonstrated that more than one in five Canadians are foreign-born (21%) (Statistics Canada, 2017).

In 1947, Prime Minister Mackenzie King's statement officially recognized immigrants' contribution to the country and highlighted the importance of family

reunion and humanitarian arrivals (Vineberg, 2011). This viewpoint has continued to be reinforced over the years, including by the current Prime Minister of Canada, Justin Trudeau's statement, who asserted in 2015 that "immigrants bring unique cultures and perspectives, and make distinctive contributions to Canadian society and the economy. Our immigration system works best when it strikes a balance between Canada's economic needs and Canadians' core values of compassion and opportunity for all." (Hillmer & Lagassé, 2018, p. 235).

Unlike most other countries, Canada coexists with immigration as part of its culture, history and everyday reality as a social, regular and legal phenomenon. Every year, more than 250,000 permanent residents immigrate to Canada and in 2018 more than 321,000 people were admitted in the country (IRCC, 2019).

Given this high level of immigration, some issues and challenges arise as a result of the policy of encouraging immigration. Even though Canada has resources to help immigrants and refugees and policies for reception, guidance and inclusion of peoples from the most diverse ethnicities and cultures residing in the country (CIC, 2013), immigrants and refugees still face many hurdles, such as isolation, language/cultural barriers, difficulty of accessing support resources due to the their lack of knowledge (Ahmadzai, 2015), and racism (Alsinai et al., 2023). These systemic issues represent an extra layer of vulnerability when those populations experience severe domestic violence.

2.2. Domestic Violence and Domestic Homicide

In extreme cases, domestic violence can result in homicide or homicide-suicide.

In addition to the murder of the current or former intimate partner, perpetrators of domestic homicides can also target children, new partners, other family members, or

anyone who has intervened (Jaffe & Straatman, 2020). The United Nations Office on Drugs and Crime (UNODC, 2019, p. 17) estimates that 30,000 female homicides perpetrated by an intimate partner happened in 2017, meaning that "more than one third (34 per cent) of all women and girls intentionally killed worldwide, or 82 every day, are killed by someone whom they would normally trust and expect to care for them." Statistics Canada (2015), through data reported by the police between 2003 and 2013, found that, among intimate partner homicides, the most frequently reported motive was the escalation of an argument or quarrel (nearly 40%), followed by a feeling of frustration, anger or despair (26%), and jealousy (20%).

Until the 1990s domestic violence was considered a private matter; however, is currently treated more seriously. Once reported, criminal charges can be laid and immediate professional interventions may be available when the violence appears potentially lethal (Jaffe & Straatman, 2020). Domestic homicides appear to be predictable and preventable, based on information from various death review processes across Canada, the United States, United Kingdom, Australia, and New Zealand (David & Jaffe, 2021). Domestic Homicide Death Review teams, for example, work to identify risk factors for lethality, promote prevention initiatives, access missed opportunities for intervention, identify barriers and gaps in services, advocate for legislative improvements, and facilitate systemic and interagency communication and coordination (Dawson et al., 2017; David 2008; Bugeja et al. 2015; as cited in David & Jaffe, 2021).

Regarding immigrant and refugee populations, previous researchers have shown that these vulnerable groups are at greater risk for domestic homicide due to a range of migration histories and a diversity of culture and traditions (Pan et al., 2006, as cited in

Jaffe & Straatman, 2020). These areas are discussed in further detail within the subsequent literature review.

3. Literature Review

In this section, I present a literature review on domestic violence and domestic homicide related to immigrant and refugee populations. The review focuses on barriers and challenges that immigrants and refugees face when experiencing severe domestic violence. I will demonstrate how immigration status plays specific roles in the journey of immigrant and refugee women to cope with severe domestic violence, including the intersection of it with gender, race and class on victims' experiences. Furthermore, I will demonstrate how risk assessment and risk management tools can help protect victims of severe domestic violence, and describe some safety policies in my last section as an attempt to prevent them from lethal consequences.

3.1. Immigration Status and Vulnerability

Immigration status is a complex and multifaceted experience and has been recognized as a key contributing factor that increases vulnerability to violence and neglect (Bhuyan et al., 2014). A range of factors, including legal constraints, fear of repercussions, and limited access to support systems, contribute to immigrants' susceptibility to violence (Bhuyan et al., 2014). Researchers have identified fear of deportation, economic dependence, isolation and language barriers, cultural norms and discrimination, lack of awareness about resources and legal services, family dynamics and barriers to reporting as factors that increases immigrants' vulnerability (Amuedo-

Dorantes & Arenas-Arroyo, 2021; Bhuyan et al., 2014; Menjivar & Salcido, 2002; Pendleton, 2003).

Although I am addressing domestic violence among immigrants and it is likely that the perpetrator is also an immigrant and subject to the same conditions, the key difference among them is the gender of the perpetrator and the victim. Immigrant and refugee women may experience an additional layer of vulnerability due to the intersection of their immigration status and their gender (Ahmadzai, 2015). Bhuyan et al. (2014) identify the following circumstances arising from this intersection: social stigma, lack of family support, lack of community support, economic dependence on their partner, legally bound to their partner, fear of losing custody of their children, and risk of homelessness. These intersections favor the actions of abusers who benefit from the immigrant women's limitations and challenges.

In Canada, Tam et al. (2016) found that newcomer women who did not speak English and who were socially isolated by their abusers faced additional barriers in accessing information and assistance. While Canadian-born women have a support network, with family and/or friends around them, immigrant woman, in addition to not speaking the language of the host country, may not know anyone. While all women can experience violence, immigrant women face specific hurdles to seeking appropriate help. Immigrant woman are more likely to have to cope with domestic violence with limited social support or even in complete solitude.

Victims' immigration status in a host country may change risk and heighten susceptibility to domestic violence. Raj et al. (2005) suggest that the odds of domestic violence are higher for: (1) immigrant women who are legally in the country, but hold spousal dependent visas; (2) immigrant women whose partners refuse to sponsor their

immigration status change (eg, from a temporary permit, like study or work permit, to a permanent resident or citizen status); and (3) immigrant women whose spouses threaten to report them to immigration authorities for deportation, when compared with other immigrant women. These conditions increase the risk of ongoing domestic violence for immigrant women because of their dependency on their abusive partners (Alaggia et al., 2009).

Many women tend to enter Canada as a dependent partner, or on a "low-skilled" temporary work visa. As a result, immigration policies tend to favor the victim's sponsor (usually her partner or employer) to retain control over her immigration status (Bhuyan et al., 2014). For example, in the sponsorship process, the sponsor signs an undertaking, committing to be responsible for supporting their intimate partner for three years (Alaggia et al., 2009). Therefore, to help immigrant victims of domestic violence, it is necessary to prevent immigration policies that can reinforce sexism since this condition may lead them to live in poverty or to be unemployed and reliant on their partners (Jayasuriya-Illesinghe, 2018).

Women living with precarious immigration status in Canada – including temporary foreign-born workers, international students, sponsored spouses, and refugees whose claims are denied or dismissed – are usually deprived of access to a number of public benefits (e.g. health care, housing, financial assistance, legal aid), and therefore are often turned away from essential services (Bhuyan et al., 2014). In recent years, the YWCA Metro Vancouver, a women's shelter, has seen the number of women with precarious immigration status seeking shelter steadily increase (Bhuyan et al., 2014). Many of these women were leaving abusive partners who were Canadian citizens or permanent residents and who denied to sponsor them or cancelled their sponsorship mid-

way through (Rupert & Krish, 2014), leaving these women and their children with no financial support because of their precarious immigration status (Bhuyan et al., 2014).

In this context, Crenshaw (1991) explains that a citizen or permanent resident spouse can exert control over his immigrant partner by using the threat of withholding the petition to sponsor her and eventually their children for permanent residency. Without this petition, the immigrant woman and her children with precarious status may become undocumented and are deemed to be residing illegally in the country, a situation that frequently limits the immigrant woman's ability to leave the relationship (Crenshaw, 1991). Salcido and Adelman (2004) illustrate this situation in their research with Gloria, an immigrant victim of domestic violence from Mexico who lives in the United States undocumented. Without the sponsorship of her husband, a lawful permanent resident (LPR), Gloria will be stuck in an illegal grey area, unable to pursue legal employment, and may potentially be subjected to deportation proceedings and custody disputes over her U.S.-born daughter (Salcido & Adelman, 2004).

All women can be subject to various forms of gender-based violence but the literature clearly shows that certain conditions related to immigration and gender can play a role in exacerbating vulnerability.

3.2. Risk Factors and Barriers

Canadian researchers have identified the following risk factors for severe violence or homicide and challenges facing immigrant and refugee communities: (1) actual or pending separation; (2) history of domestic violence; (3) limited awareness about rights, Canadian systems and available services; (4) reluctance to report domestic violence; (5) difficulty accessing culturally-relevant resources; and (6) social and

economic isolation (CDHPIVP, 2021). Other researchers identify language and/or cultural barriers (Menjívar & Salcido, 2002; Keller & Brennan, 2007; Kim & Sung, 2016); masculine gender role stereotypes and culturally conservative beliefs (Edelstein, 2013); and victim mental health issues, including depression (Midlarsky & Plante, 2006).

When examining domestic homicide in the context of immigrant and refugee populations in Canada, it is necessary to consider the diverse life experiences of these peoples and their heterogeneous sociocultural, economic and religious backgrounds (Jaffe & Straatman, 2020): "the risk factors for DH [domestic homicide] among immigrants are multifaceted, interconnected, and situated within the contexts of the country of origin and the country of settlement" (Jaffe et al., 2020, p. 112). The risk factors listed above contribute to understanding the specific vulnerabilities, stresses and barriers faced by immigrant and refugee women seeking help in cases of severe and life-threatening domestic violence.

I will now examine each challenge faced by these victims in more detail. The first two risk factors are not exclusive to immigrant and refugee victims, but are common to all victims of domestic homicide. The others have specific implications for immigrant and refugee women.

Actual or pending separation. The Ontario Domestic Violence Death Review Committee (Ontario DVDRC, 2017), in their annual report, defined actual or pending separation as follows: when the partner wanted to leave the relationship; the abuser was separated from the victim but wanted to restore the relationship; there was a sudden and/or recent separation; or the victim had already contracted a lawyer and was seeking a separation and/or divorce. Separation, whether physical or legal, and divorce have

been consistently identified as risk factors for domestic violence (Dawson & Gartner, 1998; Kropp, 2008; Ontario DVDRC, 2017; Websdale, 1999; Wilson, Johnson, & Daly, 1995). In long-term research from 2006-2014 among 1,763 immigrant women in Western Canada, Park et al. (2021) found that separated and divorced women were at the highest risk for experiencing domestic violence. In cases of ongoing domestic violence, abusers are more likely to continue or escalate violence after separation or divorce as a way to reassert control over the victim or to punish the victim for ending the relationship (Fleury et al., 2000).

Although separation seems like a good way to end violence, it is necessary to take into account the increased risk of lethality for the victim (Brown & Tyson, 2012; Jaffe & Juodis, 2006). When women leave a relationship and begin experiencing or continue to be assaulted by their ex-partners due to a feeling of loss of control, the perpetrators' violent response can be more severe, life threatening or even lethal (McFarlane et al., 2002). According to Fleury et al. (2000), separation homicide is the most extreme result of separation assault and it is common for women to report their perpetrators' telling them that if they cannot have them, nobody can: "homicide, then, becomes the ultimate final control" (Fleury et al., 2000, p. 1365).

Statistics Canada (2019) recorded that almost half (45%) of victims of a former partner said they experienced violence after separation and, of these, 38% said the violence occurred more than six months after their separation. The collected data reinforce that the period after separation or divorce may be critical and high-risk for women in relationships involving domestic violence. Thus, safety planning must take into account this risk exposure, especially when some life events can be understood by the perpetrator as the definitive end of a relationship even long after physical separation.

These life events may include a final divorce hearing, victim's involvement in a new relationship or a final child custody order (Jeffrey et al., 2018).

History of domestic violence. In case reviews conducted from 2003 to 2017, the Ontario Domestic Violence Death Review Committee (Ontario DVDRC, 2017) identified a history of domestic violence within the couple as the highest risk factor for lethality, accounting for 72% of all the cases examined. In a national intimate partner femicide study carried out in the United States, Campbell et al. (2003b) found that there were around nine near-lethal (gunshot or stab wound to head, neck, or torso; choking or immersion in water to the point of unconsciousness; severe head injuries with a blunt object weapon) incidents for every domestic homicide.

The risk of severe domestic violence or homicide is heightened when the prior violence towards the victim occurred within a year. It was also higher if the aggressor used or threatened to use a gun or knife (Folkes et al., 2012), strangled or choked the victim (Glass et al., 2018), or made threats of any kind (Campbell et al., 2003b).

Coercive control exerted by the perpetrator plays a significant role in exacerbating domestic violence. According to Stark (2013, p. 18), coercive control is defined by "a strategic course of oppressive conduct that is typically characterized by frequent, but low-level physical abuse and sexual coercion in combination with tactics to intimidate, degrade, isolate, and control victims." Coercive control is gendered with men as the perpetrators and women as the targets (Anderson, 2009; Stark, 2007, as cited in Thomas et al., 2014). There are indications that situations characterized by "coercive control" are more prone to causing significant harm, such as domestic homicide, compared to situations involving isolated instances of physical violence (Myhill, 2015; Stark, 2007, as cited in Myhill, 2019). Although acts of physical violence may exist,

Stark (2013) argues that they are not a mandatory element in every case to establish the level of entrapment when assessing harm. It means that in some cases of domestic homicide, the only physical violence that occurred in the relationship was the homicide itself and, therefore, coercive control may be present but undetected until that point.

Strangulation has been identified as a behavior that sustains the perpetrator's coercive control (Thomas et al., 2014). Research conducted in the United States found that women who had experienced non-lethal strangulation from their abusive partner were seven times more likely to later be killed by him (Douglas & Fitzgerald, 2014). Given the severity of this prevailing risk factor, the exposure to this hazard and the vulnerability of the victim must be considered when developing a safety plan.

Limited awareness about rights, Canadian systems and available services.

Immigrant and refugee women's lack of awareness about their rights in a host country is repeatedly cited as a barrier to disclose domestic violence (McDonald, 1999; Oxman-Martinez et al., 2005; Thurston et al., 2013).

Immigrant and refugee women face a number of obstacles when trying to access the Canadian legal system, not necessarily because of issues related to the system itself, but sometimes because of past experiences or efforts by abusers to undermine victims' attempts. Domestic violence perpetrators tend to misinform their victims about their rights in the host country, often claiming, for example, that an immigrant cannot obtain child custody from the court (Bhuyan et al., 2005) and that attempting to do so will result in racism or deportation, or the child's deportation if the child is undocumented (Pendleton, 2003; Salcido & Adelman, 2004). In addition, immigrant women who have children born in the host country may be lead to believe that they will lose custody when their partner is a national citizen or permanent resident (Amuedo-Dorantes & Arenas-

Arroyo, 2021). Fear of having their children removed from them can prevent immigrant victims from seeking help or leaving the relationship (Amuedo-Dorantes & Arenas-Arroyo, 2021).

Some immigrants come from countries where women are not heard and have no recognized right to receive justice. Patriarchy is present in all countries, but the forms and degrees of patriarchy differ between nations. In some countries "laws against domestic violence are lacking; or when they exist, they are not enforced; or yet the evidence for the law execution ends up being absurdly onerous for the victim" (Pendleton, 2003, p. 70).

Given this reality, immigrant or refugee victims may believe that Canada's legal system works in the same way as in their countries of origin and that they do not have legal protection. This circumstance puts the victim at risk for continued domestic violence simply because they are unaware of their rights, available protective measures and community resources such as shelter programs (Pendleton, 2003). Therefore, immigrant and refugee women need assistance in becoming aware of their rights and Canadian laws, especially protective orders and child custody (Bui, 2003).

Reluctance to report domestic violence. Although Statistics Canada releases police-reported data on domestic violence every year, not all incidents are reported to police due to complexities involving intimate relationships (Conroy, 2019). This underreporting is exacerbated for immigrant due to their fear and mistrust of police (Nguyen & Gill, 2015). Victims may worry that the police will not help non-citizens or that reporting will result in deportation (Pendleton, 2003; Salcido & Adelman, 2004). Further, some immigrants or refugees come from countries where the police are

instruments of repression, respond only to bribes or believe that women must be subordinate to men (Pendleton, 2003).

Confusion about the role of the police, lack of trust in the police, the lack of knowledge about available social services and Canadian laws contribute to immigrant and refugee victims' reluctance to report abuse. Factors contributing to the underreporting of abuse within marginalized communities, particularly among Black women, also include systemic racism, self-accountability, societal norms that promote protecting perpetrators of the same race from consequences such as imprisonment (Washington, 2001; Langton et al., 2012), and victims' fear of being arrested themselves (Holliday et al., 2020). However, without reporting the occurrence of domestic violence, either to the police or to victim services³, protective measures do not reach these at risk populations.

Research has found that victims are more likely to report their partner's abuse when they trust the police (Amuedo-Dorantes & Arenas-Arroyo, 2021; Miller & Segal, 2019; Muchow & Amuedo-Dorantes, 2020). Making crime reporting channels available and demystifying the role of the police among immigrant communities to encourage their use is essential to ensure the safety of vulnerable populations (Amuedo-Dorantes & Arenas-Arroyo, 2021).

Difficulty accessing culturally-relevant resources. Watt (2008) highlights barriers to accessing community and culturally appropriate resources due to cost or lack of transportation. In many cases, culturally appropriate services are not available.

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³ According to the Office of the Federal Ombudsperson for Victims of Crime (https://www.victimsfirst.gc.ca/serv/tvs-tsv.html), there are many different types of victim services in Canada and they may or may not operate separa tely from the police, courts and Crown Attorneys. The types of services offered are system-base victim services, police-based victim services, court-based victim services, community-based victim services, and volunteers and non-governmental organizations support.

Menjivar and Salcido (2002) note the lack of culturally diverse professionals to offer support to victims of domestic violence. These barriers make it difficult for immigrant and refugee women to receive adequate information and assistance. The lack of culturally diverse professionals and support is a serious issue that may favor the discrimination of immigrants' cultures and religions, often seen as inferior and primitive by individuals and resources that were supposed to help these populations (Shankar et al., 2013).

Existing research found that non-citizen victims are less likely to access shelters and the criminal justice system than citizens (Block, 2003; Websdale et al., 1999; as cited in Watt, 2008). Many immigrant and refugee women have misconceptions about what shelters entail or do not consider the resources to be culturally and linguistically appropriate for their needs (Pendleton, 2003). The services provided do not consider their cultural traditions (e.g., religious restrictions on certain behaviors or dietary requirements), or lack support personnel who share the same language as the victim to ease communication.

Social and economic isolation. Social and economic isolation are powerful risk factors in the victimization of immigrant and refugee women, as they have left family and friends behind in their home country (Kasturirangan et al., 2004; Menjívar & Salcido, 2002). According to Nicholson (2009), social isolation can have a negative impact on mental health outcomes. The isolation leads to women having few or almost no social contacts, lack of network or engagement with others and few meaningful relationships. Raj and Silverman (2002) highlight the additional layer of vulnerability of this population since women find themselves divided between two different and often conflicting cultures. In other words, they may experience a sense of not belonging —

although they are not part of their home country any longer, they are still "othered" in their new location. Berry and Sabatier (2011, as cited in Statistics Canada, 2016), explain that a sense of belonging constitutes an integral aspect of one's identity and requires a significant psychological commitment to develop and change.

In this context, it is necessary to understand the challenges of these women, who may not know how to speak the local language, have little to no knowledge of the culture or geographic area, and have few supports. Given these circumstances, abusers may control and manipulate the victim's life much easier, both emotionally and physically (Menjívar & Salcido, 2002).

The economic status of immigrant women must also be taken into account, with consideration of economic control as a form of abuse across all cultures (Pendleton, 2003). Kim and Sung (2016, p. 61) argue that "lower educational level of victims is highly associated with economic abuse such as economic control and economically explorative (*sic*)⁴ behaviors which in turn reduces the self-sufficiency of victims" (as cited in Postmus et al., 2012). Victims' ability to escape abusive situations is reinforced by their lack of financial self-sufficiency, increasing their vulnerability (Kim & Gray, 2008, as cited in Kim & Sung, 2016).

Lack of recognition of foreign credentials is another issue that impacts immigrants and refugees. Guo (2009, p. 44) argues that "in terms of foreign credential recognition, women from advanced countries (such as the United States, Australia, Britain, or New Zealand) are treated differently from those originating in Third World countries." Immigrant women experience a devaluation of their credentials in the labour market, in a way that "after immigrating to Canada, many immigrant women are

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⁴ Given the context, I believe the word intended here was "exploitative".

unemployed or working in part-time jobs for which they are overqualified" (Guo, 2009, p. 44). Furthermore, Benporat (2010) highlights that unemployment and financial insecurity count as additional stressors to immigration, especially when unemployment is due to discrimination or racism in the host country. Bui (2003) suggests that the fear of financial loss that can come with the arrest of the family's economic provider, produces a barrier to reporting abuse for immigrant and refugee women.

Language and/or cultural barriers. The risk of domestic violence among immigrants who are away from their home countries is increased due to limited language skills (Breidling et al., 2014; Kim & Sung, 2016). The language barrier limits their employability, which tends to bring economic hardships, often related to domestic violence victimization (Bui & Morash, 1999, as cited in Kim & Sung, 2016).

Furthermore, victims' limited language capability acts as a barrier to seeking help for domestic violence. Language barriers may prevent women from speaking freely with community-service providers or in seeking protection through the criminal justice system (Keller & Brennan, 2007; Menjívar & Salcido, 2002; Pendleton, 2003).

Polezzi (2012, p. 349) addresses a paradox associated with needing translation, suggesting that it "carries both protective and aggressive connotations, and constructs translation as both an offensive and a defensive strategy, which, while offering migrants a voice, also reiterates their difference and insists on controlling who does the speaking, where and when." In addition, MacFalane et al. (2020), in research on the use of interpreters for refugees during medical consultations, reported barriers regarding the refugees' lack of confidence and trust in the translators who accompanied them, with complaints of shortened or elaborated interpretation and adjusted information transfer based on interpreters' moral judgements. Some participants also suspected that the

translators' cultural/ethnic background and their gender played a role on the quality of the interpretation (MacFalane et al., 2020).

Latina, Cambodian, Asian, Russian, Vietnamese, and African immigrant women expressed challenges in communicating with service providers when sharing their experiences (Keller & Brennan, 2007). They highlighted that their limited language proficiency acted as a hindrance in seeking help (Bui, 2003; Perilla, 1999; Senturia et al., 2000, as cited in Keller & Brennan, 2007). Ethiopian, Latina and Russian immigrant women were concerned about leaving their husbands for fear that the communication barriers would be an impediment to their financial independence (Senturia et al., 2000, as cited in Keller & Brennan, 2007).

Menjívar and Salcido (2002) argue that a victim's proficiency in the host country's language tends to reduce the abuser's power and control. In addition, promoting acculturation and integration validates victims' sense of security when seeking support in situations of abuse. For this, the community and institutions need to promote genuine opportunities for inclusion, combating racism and promoting respect and equality. It is necessary to provide guarantee mechanisms to immigrants and refugees, so that they "should be able to discern the social norms they require from the dominant society and have their traditional cultural lifestyles, beliefs and norms promoted and protected in a system that does not continue to privileged dominant cultures or genders" (Rees & Pease, 2007, p. 17).

The inability to use the language of the host country is, therefore, a cultural, social, economic and structural obstacle that reinforces the vulnerability of the immigrant victim of domestic violence.

Masculine gender role stereotypes and culturally conservative beliefs.

Culture can be understood as "a multidimensional phenomenon that encompasses processes, products and results of human activity, material and spiritual, transmitted from generation to generation in a non-biological way" (Mironenko & Sorokin, 2018, p. 338). Patriarchy, on the other hand, is defined as "social arrangements that privilege males, where men as a group dominate women as a group, both structurally and ideologically—hierarchical arrangements that manifest in varieties across history and social space" (Hunnicutt, 2009, p. 557). Many immigrant women originate from societies where communal principles are reinforced by governmental, religious, and cultural beliefs that favor male dominance (Holtmann & Rickards, 2018). Although culture is not the cause of domestic violence, some cultural beliefs do shape how domestic violence is understood and experienced and they play a role regarding victims' efforts to seeking help.

In addition to patriarchy, during the last decades, Western nations hosting immigrant populations have faced challenges associated with honor killings and various manifestations of honor-related violence (Korteweg, 2012). Honor-related violence, including homicide, is a premeditated, family-led aggressive reaction triggered by the belief that a woman, whether as a wife or daughter, has infringed upon her family's honor by transgressing sexual norms (Korteweg, 2012). It means that, in order to restore the family's honour, a male family member must kill the person (primarily women) who allegedly brought shame or dishonour to the family by engaging in illicit pre-marital or extra-marital relations (Patel & Gadit, 2008). Throughout history, honor-related violence has been observed in North Africa, the Middle East, South Asia, Latin America, and Southern Europe, with variations in its patterns across these regions (Korteweg, 2012).

According to Edelstein (2013), referring to patriarchal families from underdeveloped countries where honor-related violence is common:

In patriarchal families, there is a clear and rigid division of gender roles and status. (. . .) The men are the main breadwinners and, thus, have decision-making privileges regarding financial and other crucial issues in family life. The wife and children are the property of the husband/father and, as such, they must honor and obey him totally. (. . .) In cases of slight deviance in the behavior of the children or the wife, in patriarchal society, it is considered a legitimate act for the man to punish them forcefully. (p. 2)

This patriarchal view of women as the property of men legitimizes honour-based violence and/or killings (Patel & Gadit, 2008). Most immigrants with this patriarchal background tend to be ethnically isolated, as more conservative men try to preserve their cultural beliefs of origin and their masculine privileges, including the ideology of engaging in violence against women (Jin and Keat, 2010; Kim et al. 2007; Klevens, 2007; Morash et al. 2007; Raj and Silverman, 2002; Azezehu-Admasu, 2011; Tavaje, 2011; Leherer, 1993, as cited in Edelstein, 2013). Victims may be also reluctant to report to the police "because of intense cultural pressure to keep family matters private" (Lee, 2002, as cited in Keller & Brennan, 2007, p. 116).

With that said, Menjívar and Salcido (2002) warn about the risks of stereotyping domestic violence as something belonging only to certain cultures. This belief can lead to the notion that domestic violence does not need state attention or intervention because it is a matter of a specific culture and, therefore, this issue should remain among these groups. Such ideologies not only serve to reinforce host governments' perceptions "that domestic violence among immigrants is inherently a part of their culture—and thus

nothing can be done about it—but also that domestic violence is higher among immigrants because they import it with them" (Menjívar & Salcido, 2002, p. 901).

In contrast to other societies, Canadian culture blends secular individualism with patriarchal tendencies (Holtmann & Rickards, 2018). In Canada, the state promotes the importance of individual rights, public policies are designed to enhance women's autonomy, and the legal system can enforce accountability for men who misuse their power within families (Holtmann & Rickards, 2018).

However, patriarchy is also found in Canadian culture and is not just tied to immigration (Nagra, 2018). Nagra (2018, p. 264) argues that "Canada is a deeply patriarchal society, evidenced by how violence against women, regardless of cultural background, continues to be a serious social problem in Canada." As examples of the issues arising from patriarchy in Canada, Nagra (2018), citing previous studies, highlights: the 65% rate of Canadians who personally know at least one female victim of physical or sexual abuse (Angus Reid Omnibus Survey, 2012); the finding that at least one woman in Canada is murdered by her intimate partner approximately every six days (Statistics Canada, 2014); the increase in cyber crimes against women in Canada, such as online threats, harassment, and stalking (Pew Research Centre, 2014); and the long history of violence suffered by Indigenous women in the country (The Royal Canadian Mounted Police, 2014).

The barriers exacerbated by patriarchal beliefs and stereotypes created, often leading to impunity for abusers, are undeniable and, associated with other instruments of oppression and control as previously indicated, increases immigrant women's vulnerability to domestic violence.

Victim mental health issues, including depression. In many cases, victims of domestic homicide experience poor physical and mental health prior to their death (Abrams et al., 2000; Santa Clara County Domestic Violence Council Death Review Committee, 2000, as cited in Watt, 2008). Many experience posttraumatic stress, anxiety and depression (Midlarsky and Plante, 2006). In many cases, these symptoms can be a direct result of the violence and abuse perpetrated against the victim (Watt, 2008).

Similarly, social isolation and loneliness can result in a number of mental health implications, such as depression, anxiety, and suicide (Beller & Wagner, 2018; Heuser & Howe, 2019; Levula et al., 2016; Teo et al., 2013, as cited in Negi et al., 2021). It also exacerbates physiological risk factors such as high blood pressure, stroke, and inflammation which increase likelihood of mortality (Berkman and Syme, 1979; Hawkley et al., 2010; Holt-Lunstad et al., 2015; Nersesian et al., 2018, as cited in Negi et al., 2021).

In comparative studies of women from Anglo and African American groups, victims of domestic violence are more likely to suffer health problems than non-victims, including problems with sleep, fatigue, recurring nightmares, and headaches, among others (Sutherland et al., 2001). Sutherland et al. (2001, p. 1123) conclude that "the extent to which women experience physical health symptoms is directly linked to their experiences of violence".

Further perspectives involving mental health issues and culture reveal that some immigrant communities, including Somali refugee women living in northern England, tend to not seek services related to mental health due to the cultural stigma surrounding mental illness, judged as weakness (Whittaker et al., 2005). Instead of seeking help, these women tended to distance themselves from each other and from those they know

who have mental health problems (Whittaker et al., 2005). This situation highlights and reinforces how health problems and cultural beliefs can be challenging for immigrant and refugee women and act as further obstacles and impediments for victims to seeking help.

3.3. Intersectionality

Individual characteristics and a large variation amongst different cultural and ethnic backgrounds of victims and perpetrators of domestic violence present additional axes of oppression and reflect on the way the problem is understood. Within an intersectional approach, domestic violence is shaped by intersecting factors that influence its meaning and nature, how it is experienced by the victim, how society responds, how the repercussions are portrayed, and the possibilities for escape and safety (Bograd, 1999).

Kimberlé Crenshaw, a legal scholar and activist, coined the term "intersectionality." She explained the need to consider the intersection of race and gender to comprehend the specific experiences of Black women in the legal and social facets (Crenshaw, 1989). An intersectional analysis therefore begins with an understanding that "no dimension, such as gender inequality, is privileged as an explanatory construct of domestic violence, and gender inequality itself is modified by its intersection with other systems of power and oppression" (Bograd, 1999, p. 275).

An intersectional approach helps add multilayered dimensions of social identities and/or locations and underscores the importance of addressing racism and other forms of discrimination to combat violence against women, such as gender, age, class, ethnicity, ability, geographic location, sexual orientation, indigeneity and immigration status

(Bograd, 1999; Brassard, Montminy, Bergeron, & Sosa-Sanchez, 2015; Crenshaw, 1989, 1991; Davis, 2008; Erez, Adelman, & Gregory, 2009; Mehrotra, 2010; Sandberg, 2013; Sokoloff, 2008a, 2008b, as cited in Jeffrey et al., 2018). Examples of intersectional approaches within an immigration context involve having available translators or keeping victim's facilities such as shelters or victim services as secular settings.

Intersectionality promotes an examination of how other social locations can integrate with gender issues to understand women's experiences of violence (Crenshaw, 1991). According to Bograd (1999), although all women face the risk of experiencing domestic violence, the way a woman perceives herself and is perceived by others may vary based on factors such as her race (e.g., white or black), socioeconomic status (e.g., poor or wealthy), occupation (e.g., prostitute or housewife), and legal status (e.g., citizen or undocumented immigrant).

When examining gender-based violence against immigrant and refugee women, it is crucial to recognize how racism and sexism intersect and shape their experiences (Tabibi et al., 2018). For example, dominant discourses often attribute violence within immigrant and refugee communities solely to cultural clashes, overlooking broader structural inequalities (Razack, 2000, as cited in Tabibi et al., 2018). Consequently, the "othering" resulting from gendered socialization and racial categorization exacerbates the intricate and intersecting forms of violence faced by women of color (Razack, 2000, as cited in Tabibi et al., 2018).

While domestic violence can happen across various socioeconomic status, individuals experiencing economic deprivation and holding a lower socioeconomic status tend to exhibit higher rates of domestic violence (Dahlberg & Krug, 2002). Several studies underscore structural hurdles, including poverty, unemployment, and

economic marginalization, that may hinder women with immigrant backgrounds facing violence as they strive for safety and respect within their adopted home (Menjívar & Salcido, 2002). In Canada, the poverty rate among racialized people (which includes indigenous and immigrant groups) is 22%, more than double the 9% poverty rate for white Canadians (Employment and Social Development Canada, 2013).

A woman's legal status in a country is a component of the complex and evolving factors that, together with race, gender, and class, shape her understanding of and reactions to domestic violence (Adams & Campbell, 2012). Acknowledging how these various forms of marginalization intersect and compound each other is essential for comprehending a woman's experience with domestic violence and the barriers she faces (Adams & Campbell, 2012).

3.4. Risk Assessment

The response of legal and health care systems to violence relies on two related processes: "risk assessment, the process of identifying risk and protective factors for violence; and risk management, the process of preventing violence by influencing risk and protective factors" (Hart, 2008, p. 7). There is an urgent need to identify immigrant and refugee women at the greatest risk for severe and life-threatening violence and femicide so that interventions preventing domestic homicide can be developed and implemented among these groups (Messing et al., 2013). Risk assessment and risk management are therefore key tools for the protection and safety of this vulnerable population (Jeffrey et al., 2018).

Risk assessment evaluates "the level of risk of harm a victim (or others connected to the victim) may be facing including the likelihood of repeated violence or

lethal (dangerous) violence" (Campbell et al., 2016, p. 6, as cited in Jeffrey et al., 2018). Risk assessment is based on a "professional's judgment and/or a structured interview and/or a tool (instrument) that may include a checklist of risk factors" (Campbell et al., 2016, p. 6). Some risk assessments center on the perpetrator, while others are focused on the victim (Northcott, n.d.).

Some risk assessment instruments provide details about the type, manifestation, and severity of violence (Kropp, 2004), whereas others allow assessors to estimate the probability of reoffending (Hilton et al., 2010). Some tools encompass both (Northcott, n.d.). Assessment involves gathering useful information to be considered in decision making (Hart, 2008). In other words, risk assessment informs risk management and safety planning (Jeffrey et al., 2018).

Risk assessment can identify individuals more likely to reoffend and in need of substantial intervention. It also assists in devising effective community-based monitoring, victim safety plans, and appropriate management and rehabilitation strategies for perpetrators that may include suitable monitoring and psychosocial interventions (Campbell et al., 2016). Assessing domestic violence risk may also enhance the responsibility, transparency, and uniformity in decision-making of victim services (Campbell et al., 2016).

Various service providers can conduct risk assessments. Some professionals specialize in domestic violence (such as shelter workers, and victim service workers), while others may work with these issues sporadically in workplaces and post-secondary settings (such as mental health professionals, nurses, doctors, corrections staff, and human resources and security personnel) (Jeffrey et al., 2018). Those professionals may be expected to carry out risk assessment to examine the most appropriate intervention

for each case, aiming to manage and minimize any imminent risk (Jeffrey et al., 2018). The active participation of service providers in risk assessment helps safeguard the domestic violence victims' safety.

There are three main approaches to risk assessment: (1) unstructured clinical decision making, (2) actuarial approach, and (3) structured professional judgment (Jeffrey et al., 2018). Those approaches refer to "how information is weighted and combined to reach a final decision, regardless of the information that is considered and how it was collected" (Meehl, 1954/1996, as cited in Hart, 2008, p. 10).

Unstructured clinical decision-making approaches analyze risk informally. Professionals dealing with domestic violence, particularly forensic psychologists (Acklin & Velasquez, 2021), have been conducting risk assessments for decades in an unstructured way. They rely on subjective perceptions and field experience for conducting these assessments (Campbell et al., 2016; Jeffrey et al., 2018). This approach has been criticized because it is said to be "highly subjective and lacking reliability, validity, and accountability" (Campbell et al., 2016, p. 3). The unstructured approach may not adequately consider other sources of research or the risk factors existing in the literature, favoring personal preferences and biases. For these reasons, many service providers prefer more structured approaches to risk assessment of domestic violence (Campbell et al., 2016; Kropp, 2008).

The actuarial approach to risk assessment, also described as "mechanical" and "algorithmic" (Grove & Meehl, 1996, p. 293, as cited in Hart, 2008), uses instruments including empirically-derived risk factors to estimate an abuser's risk of (re)offending through statistical models (Jeffrey et al., 2018). Actuarial procedures differ from other assessment means by "how the items are selected, combined, and interpreted, rather than

which items are used or whether they are measured at one point (i.e., static) or used to measure change (i.e., dynamic)" (Campbell et al., 2016, p. 4). Examples of common actuarial risk assessment tools are the Ontario Domestic Assault Risk Assessment Guide (ODARA; Hilton et al., 2004) and the Domestic Violence Risk Appraisal Guide (DVRAG) (Campbell et al., 2016). Although actuarial approaches have great reliability, accuracy, and may suggest relevant risk assessment, these tools lack information regarding specific management or preventive tactics or observe contextual or case-specific factors (Douglas & Kropp, 2002). In addition, they also contain questions that are largely centered on the use of physical violence and generally do not include psychological or emotional abuse in their operationalizations of domestic violence (Nicholls et al., 2013).

It bears mention, however, a recent study using ODARA among U.S. Black individuals examined the effects of race and gender when predicting intimate partner violence recidivism in police reports (Hilton & Radatz, 2023). The research found that Black individuals had a recidivism rate roughly double that of their White counterparts in general, and more than two and a half times that of White individuals specifically in cases of intimate partner violence recidivism. On the other hand, the study does not support the predictive accuracy of ODARA in anticipating intimate partner violence or other instances of violent recidivism in women (Hilton & Radatz, 2023).

A final approach to risk assessment, structured professional judgment, uses guidelines for risk assessment that reflect theoretical, clinical, and empirical knowledge about violence (Douglas & Kropp, 2002). Those parameters include the minimum number of risk factors that must be taken into account for each case, recommendations for information gathering (i.e., the use of multiple sources and multiple methods),

communicating insights about risk, and using violence prevention tactics (Campbell et al., 2016; Douglas & Kropp, 2002). This approach allows some flexibility to improve the consistency and visibility of risk judgments (Douglas & Kropp, 2002). Structured professional judgement includes case-specific factors as well as victims' perceptions of risk (Heckert & Gondolf, 2004, as cited in Jeffrey et al., 2018). Examples of common structured professional judgment risk assessment tools include the Spousal Assault Risk Assessment – Version 3 (SARA–V3), Brief Spousal Assault Form for the Assessment of Risk – Second Edition (B-SAFER, a condensed version of the SARA designated specifically for police officers), Domestic Violence Screening Inventory, and the Danger Assessment (DA) (Campbell et al., 2016). According to Douglas and Kropp (2004, p. 627), structured professional judgement to risk assessment is the most suited approach to a violence prevention paradigm because it "allows for a logical, visible, and systematic link between risk factors and intervention, in addition to the ability to identify persons who are at higher or lower risk for violence."

Despite the multiple risk assessments developed to help victims of domestic violence and for lethality prevention, most of these tools do not apply to perpetrators and victims from diverse cultures and backgrounds (Campbell et al., 2016) but may be used with these demographics. Because of specific vulnerabilities of immigrant and refugee women, risk assessments need to be appropriately adapted for use with this at-risk population (Messing et al., 2013), through competent tools such as culturally-informed and multidimensional risk assessments (Jeffrey et al., 2018).

Some efforts have been made to adapt risk assessment tools. The Danger

Assessment has been adapted and revised to identify risk for severe and lethal domestic

violence with immigrant women (DA-I). Other tools, including the PATRIARCH

assessment tool; the Four Aspects Screening Tool (FAST); and the Chinese Risk Assessment Tool for Victims (CRAT-V) include risk factors specific to immigrant and refugee populations (Campbell et al., 2016; Jeffrey et al., 2018).

The DA-I includes supplementary risk factors that have been identified in studies as being unique to immigrant and refugee women coping with domestic violence, such as social isolation, marginalization of immigrant communities, acculturation level, gender norms and patriarchal beliefs, and downward or differential mobility (Messing et al., 2013; Campbell et al., 2016). Messing et al.'s (2013) research indicates that the DA-I is able to predict the reoccurrence and severity of intimate partner violence experienced by immigrant women better than the original DA and the victim's own prediction of risk.

The PATRIARCH assesses risk for "honour-based violence" and it contains 15 factors to be examined in each case, including 10 risk factors and five victim vulnerability factors. The vulnerability factors consists of: (1) inconsistent behavior and/or attitude toward family/perpetrator (e.g., minimizes or denies family/perpetrator's actions; places blame on self); (2) extreme fear of family/perpetrator (e.g., victim's level of fear interferes with self-protective behave; extremely worried for dependents); (3) inadequate access to resources (e.g., victim lacks the knowledge, ability, or motivation to access protective resources; unaware of laws, legal rights, organization); (4) unsafe living situation (e.g., inadequate physical security at work or home; emergency service not readily available), and; (5) personal problems that might influence management strategies (e.g., victim's personal problems interferes with self-protective behavior; financial, legal, mental or substance use problems) (Belfrage, 2005).

The Four Aspects Screening Tool (FAST) is a multidimensional mechanism that can be used either independently or in conjunction with standardized risk assessment instruments (Baobaid, n.d.). When working with minorities and immigrant communities, it assesses four domains of risks: (1) universal experiences, (2) migratory experiences, (3) ethno-cultural influences, and (4) religious/spiritual beliefs (Baobaid, n.d.). Each of these categories includes a set of items that aids the evaluator in comprehending the family's circumstances. It enables them to investigate, recognize, and evaluate various risk elements related to family violence within each area outlined by the tool. The assessment offers a cultural backdrop to the evaluators, assisting them in assessing the risk presented by the abuser(s) and the vulnerabilities of the victim(s)/survivor(s), as well as determining the degree and intensity of the risk (Baobaid, n.d.).

The Chinese Risk Assessment Tool for Victims (CRAT-V) considers the culture and variables that might influence disclosure and reporting domestic violence in Chinese community (Chan, 2012). Adapting the CRAT-V could be beneficial in situations where victims' vulnerability is linked to their immigrant or refugee status in Canada.

Risk assessments culturally tailored to the reality of immigrant and refugee women play a role in assessing the particular risks of this vulnerable population when coping with domestic violence. Those tools are therefore fundamental instruments for the protection of this susceptible group when involved in dangerous intimate relationships.

3.5. Risk Management

The CDHPIVP defines risk management as "strategies intended to reduce the risk presented by a perpetrator of domestic violence" (Campbell et al., 2016, p. 8). Those

strategies should be based on several principles: (1) the tactics should reflect overall judgments regarding the risks posed by the person; (2) the strategies should focus on risk management activities on circumstances that are important in the case to be examined, so relevant risk is assessed (i.e., neutralized or contained) by at least one factor; and (3) the risk management should be personalized to ensure effectiveness for the person (Hart, 2008). Risk assessment should be implemented based on four main activities: monitoring, treatment, supervision, and victim safety planning (Kropp, 2008).

Monitoring. Various mental health, social service, law enforcement, corrections, and private security professionals can provide monitoring services (Hart, 2008). The goal of monitoring perpetrators of domestic violence is to examine modifications in risk over time so that the risk management strategies can evolve as needed (Hart, 2008; Kropp, 2008). Monitoring strategies focus on surveillance and are considered minimally intrusive tactics (Hart, 2008; Kropp, 2008). Examples of monitoring strategies are: to keep in touch with the individual, potential victims and correlate people (e.g., therapists, correctional officers, family members, coworkers); to include field visits at home or work; tactics against the perpetrator, including electronic surveillance, polygraphic interviews, drug testing, and inspection of mail or telecommunications through records (Hart, 2008; Kropp, 2008). Plans for monitoring should specify the form and frequency of contacts needed and any "triggers" or "red flags" that indicate risk of imminent violence or whether it is escalating (Hart, 2008).

Treatment. Treatment entails rehabilitative services for the perpetrator and its goal is to develop the psychosocial adjustment of the individual (Hart, 2008; Kropp, 2008). Healthcare and social service professionals usually administer treatment services in either inpatient or outpatient clinics or agencies (Hart, 2008). Often, treatment is

compulsory, where the person is mandated to receive inpatient or outpatient care according to a mental health act, undergoing treatment in a correctional or forensic psychiatric facility, being directed to participate in treatment as a condition of bail, probation, or parole, or being obligated to partake in evaluation or treatment through an employee assistance program (Kropp et al., 2002, as cited in Hart, 2008). Treatment may involve individual or group psychotherapy; psychoeducational programs designed to manage attitudes toward violence; training programs designed to improve interpersonal, anger management, and vocational skills; psychoactive medications (e.g., antipsychotics or mood stabilizers); chemical dependency programs; and reduction of acute life stresses (e.g., physical illness, interpersonal conflict, unemployment, legal problems, and so forth) (Hart, 2008; Kropp, 2008).

Supervision. Supervision focuses on making it more difficult for the person to engage in further violence by restricting individual rights or freedoms (Hart, 2008; Kropp, 2008). In general, supervision should be applied at an intensity according to the risks presented by the person (Hart, 2008; Kropp, 2008). Community supervision is the most common strategy and it may restrict the individual on activity (e.g., attending vocational or educational programs, not to use alcohol or drugs), movement (e.g., house arrest, travel bans, "no go" orders), association (e.g., orders not to socialize with specific people or groups to avoid violence), and communication (e.g., orders not to communicate with people involved with antisocial acts or potential victims) (Hart, 2008). An extreme form of supervision is incapacitation through involuntary institutionalization of the person in a correctional or health care facility (Kropp, 2008).

Victim safety planning. Victim safety planning aims to improve the victim's security resources and to minimize adverse effects on the psychological and physical well-being of the victim in case violence happens again, even with all monitoring, treatment, and supervision measures in place (Hart, 2008; Kropp, 2008). A diverse group of professionals from social services, human resources, law enforcement, and private security can offer victim safety planning services, available both in institutional and community settings (Hart, 2008).

In dealing with immigrant and refugee populations, effectively managing risks within these specific groups necessitates addressing their unique circumstances within the cultural context they are a part of. The safety of these individuals is significantly influenced by various factors that impact their risk of experiencing violence and are particular to their situation as an immigrant or refugee (Jeffrey et al., 2018). These factors include migration stress, immigration status, settlement location (e.g., rural or urban), duration of stay in the host country, and levels of acculturation (Hancock & Sui, 2009, as cited in Jeffrey et al., 2018). Considering these factors is crucial when devising safety plans for victims from diverse cultural backgrounds (Hancock & Sui, 2009, as cited in Jeffrey et al., 2018). Additionally, the social standing and immigration status of immigrant and refugee women are significant aspects in safety planning as they impact their rights and access to services (Ending Violence Association of BC et al., 2011, as cited in Jeffrey et al., 2018).

Echauri et al. (2013) highlight the relevance of risk management based on culturally-informed treatment programs for abusive male immigrants. Additional policies for culturally-sensitive interventions involve (a) strengthening of informal supports (i.e., family or community), (b) education regarding gender equality, (c)

linguistically and culturally-competent outreach services, (d) programming targeting behaviour change (e.g., gender roles), and (e) supports to increase English language proficiency (Jeffrey et al., 2018; Taft et al., 2008).

Counselling and education are important risk management strategies for immigrants and refugees (Jeffrey et al., 2018). Counselling for immigrant and refugee abusers should assess issues in coping with discrimination after migration, countersocialization (e.g., gender roles, violence supportive beliefs, or sexual coercion), human rights, conflict management, respectful communication, or parenting skills (e.g., what makes a "good" father/man), and substance use (Celaya-Alston, 2010; Liao, 2006; Parra-Cardona et al., 2013; Welland & Ribner, 2010; Yoshihama et al., 2014, as cited in Jeffrey et al., 2018). Education for this vulnerable population should integrate antiviolence awareness into immigrants' communities through their settlement agency, employment environment, or in partnership with their religious leaders and may result in a great opportunity to promote education about domestic violence (Liao, 2002; Shiu-Thornton et al., 2005; Pinzon, 2006; Sullivan et al., 2005, as cited in Jeffrey et al., 2018).

Supplementary risk management tactics within immigrant and refugee populations may involve interventions such as mental health services and support for men to improve their language skills and become socialized to a new cultural context. Programs can assist couples in achieving similar levels of acculturation (Edelstein, 2013; Jeffrey et al., 2018). When both partners are employed, speak the local language, and reach the same level of socialization, the socio-economic situation will be best stabilized and the occurrences of violence tend to reduce (Edelstein, 2013).

3.6. Domestic Homicide Prevention Programs

Immigrant and refugee victims need culturally guided, responsive, and proactive prevention programs to help address domestic violence (Holtmann & Rickards, 2018; Jaffe & Straatman, 2020). Providing culturally sensitive security planning and making security planning an ongoing process are keys to helping immigrant victims on their journeys to cope with domestic violence (Sabri et al., 2018).

Being aware that not knowing how to speak the language of the host country is a risk factor for domestic violence against immigrant and refugee women (Breidling et al., 2014; Kim & Sung, 2016), improved communication is necessary to address the unique needs of abused immigrant women, building trust and long-term funding for public service agencies and organizations (Holtmann & Rickards, 2018). Providing information about the 911 service to immigrant victims, including service availability in different languages, is an example of how to improve communication and make the helpline accessible to victims of domestic abuse (Sabri et al., 2018).

Preventative programs for immigrants and refugees should facilitate victim's understanding of law in a clear way, using efficient translation services, for example (Ozturk et al., 2019). Programs should also ensure that, for this vulnerable population, they can reach legal services, such as the police and lawers (Ozturk et al., 2019). It is essential, however, that those policies do not have many requirements because the victims may avoid seeking help from legal services if they find obstacles in their journey (Ozturk et al., 2019).

In order to achieve structural changes, Sabri et al. (2018) recommend educating immigrant victims and linking them to resources for survival (e.g., food, financial assistance/emergency loans, legal assistance, a sustainable job, education or short careers to eliminate their dependency on partners, English learning or driving classes,

affordable housing, phones and financial assistance to go back to the home country to get away from the abuser). This protective suggestion leads to a broader layer of protection, proving to be quite complete because it includes several measures that aim to help immigrant victims in various aspects of their lives in the host country.

Canada has implemented protective measures at both the federal and provincial and territorial levels to safeguard immigrant and refugee victims of domestic violence, as stated on the official website of the Government of Canada (https://www.canada.ca/). The Canadian Government may issue a special permit to allow victims to stay in Canada, called temporary resident permit (TRP). This protective measure is free, gives victims and their children legal immigration status and allows them to get coverage for trauma counselling and health-care benefits.

The official website of the Government of Canada (https://www.canada.ca/) states that eligibility criteria for TRP considers if the immigrant is physically located in Canada and experiencing abuse, including physical, sexual, psychological or financial abuse or neglect, from their spouse or common-law partner while in Canada; or if the immigrant is seeking permanent residence that is contingent on remaining in a genuine relationship in which there is abuse and if the relationship with the abusive spouse or common-law partner is critical for the continuation of the individual's status in Canada. To assess if an individual is a victim of family violence, officers consider available evidence on a case-by-case basis. Immigration officers may allow victims to provide submissions and supporting evidence by mail, email, facsimile, in-person or telephone interview. Evidence could include police records, criminal or family court documents, assessments by a psychologist, psychiatrist, therapist or counsellor, or other healthcare professional, photos or injuries, copies of emails or text messages, etc.

Immigration officers will give victims information about a temporary resident permit based on the evidence that the immigrant provides. If needed, immigration officers will put the victim in contact with support groups that help victims of family violence. Victims can also contact a Client Support Centre to find community, social, and health services and more resources. The Canadian Government expedites the processing time of TRP for individuals facing urgent family violence situations when applying for permanent residency on humanitarian and compassionate grounds.

The official website of the Government of Canada (https://www.canada.ca/) also lists provincial and territorial help for spouses or partners who are immigrant or refugee victims of abuse. There are family violence prevention programs/initiatives and/or support in all Canadian provinces and territories, such as help lines, free shelters and support for women and children, second stage housing for women and children, counselling, crisis services, financial support/funding, etc. In Ontario, victims experiencing domestic violence can have a free consultation with a private lawyer.

My work aims to shed light and raise awareness on the issues and hurdles that immigrant and refugee women who experienced severe or lethal domestic violence face in their lives. The preventative programs mentioned above work as inspirations for the recommendations I will provide after the analysis of my findings, hoping that they can contribute to hinder the occurrence of domestic homicide.

4. Theoretical Framework

In my research, I chose the social ecological model to help me understand the gathered narratives. I chose to analyze the interviews using the social ecological theory to suggest strategies for preventing domestic violence and domestic homicide.

The initial concept of the social-ecological model was created by Urie Bronfenbrenner in 1994 (Boodram, 2022). It addressed how individual behaviours arose through a dynamic interaction between a person and the environment that surrounds them (Boodram, 2022). According to Heise (1998, p. 263), who adapted Bronfenbrenner's initial theory (Boodram, 2022): "an ecological approach to abuse conceptualizes violence as a multifaceted phenomenon grounded in an interplay among personal, situational, and sociocultural factors." The social ecological model integrates various levels of influence (ecologies) to understand violence against women and recognizes the interconnectedness of risk factors at multiple levels (Heise, 1998). For this reason, the social ecological model is also known as a multilevel framework.

The social ecological approach does not analyze the issue of violence against women as an isolated event. The multilevel framework understands that individuals are both influenced by and influence their environment (Golden & Earp, 2012, as cited in Boodram, 2022). According to this framework, violence has to be understood considering the existence of multifaceted dimensions (Jeffrey et al., 2018). It thus integrates each dimension of influence to inform efforts to reduce women's exposure to violent relationships.

The four-level social ecological model adopted by Heise (1998) includes individual, relationship, community and societal dimensions. These four dimensions can be illustrated as a structure resembling a series of concentric circles, which start from the individual level, and progressively expand outward to encompass the relationship, the community, and finally, the societal dimension (Boodram, 2022). Dahlberd and Krug (2002) explain the application of each level in the World Report on Violence and Health, from the World Health Organization (WHO).

The *individual level* addresses personal characteristics or experiences that tend to increase the likelihood of being a victim or a perpetrator of violence (e.g., biological and demographic factors, impulsivity, low educational attainment, substance use, and prior history of aggression and abuse, including intergenerational cycles). Prevention efforts should involve strategies to undermine violence with the promotion of attitudes, beliefs, behaviours, conflict resolution and life skills training, social-emotional learning, and safe dating and relationship skill programs (Dahlberd & Krug, 2002).

The *relationship level* takes into account how proximal and frequent social relationships are (e.g., relations with peers, intimate partners and family members). For instance, violent friends may encourage an individual to engage in violent acts (Boodram, 2022). Prevention strategies may include parenting or family-focused prevention programs and mentoring and peer programs designed to strengthen parent-child communication, promote positive peer norms, problem-solving skills and promote healthy relationships (Dahlberd & Krug, 2002).

The *community level* explores the community contexts in which relationships occur and the characteristics of the places that contribute to victimization or abuse (e.g., schools, neighborhood, workplaces). Preventative dynamics should focus on improving the physical and social environment in these settings (e.g., by creating safe places where people live, learn, work, and play) and by addressing other conditions that give rise to violence in communities (e.g., neighborhood poverty, residential segregation, and instability, high density of alcohol outlets) (Dahlberd & Krug, 2002).

Lastly, the *societal level* analyzes larger factors that influence violence, such as social and cultural norms that tolerate violence, reducing inhibitions or creating an acceptable climate to support violence as a result. The societal level may also involve

other factors such as health, economic, educational, and social policies that favor economic or social inequalities between groups in society. Prevention efforts should promote societal norms that protect against violence as well as efforts to strengthen household financial security, education and employment opportunities, and other policies that affect the structural determinants of health (Dahlberd & Krug, 2002). Using a modern approach to tackle domestic violence in the societal dimension may include social influencers and media professionals involved in campaigns focusing on promoting messages that reinforce a culture of peace and respect (Boodram, 2022).

Applying the social ecological model to the interviews collected allowed me to analyze a range of factors that put immigrant and refugee women at risk for violence through a complex interconnection between individual, relationship, community, and societal levels. It led me to a comprehensive approach to understand the way victims coped with incidents of serious and severe domestic violence. For example, when analyzing the individual level, I could identify that factors such as cultural isolation, and victim's characteristics and other vulnerabilities played a role in increasing the risk of victimization. On the other hand, when examining the societal level, belonging to a culture that links masculinity to dominance, honour, or aggression emerged as a significant risk factor for violence against these groups.

Although the multilevel framework is the main theoretical guideline for this study, it is essential to acknowledge the limitations of the theory. First, the ecological model may lack precision by omitting behavior-specific or setting-specific elements, hindering the formulation of explicit research hypotheses or intervention strategies (Sallis et al., 2008). Additionally, the multilevel framework fails to elucidate the mechanisms through which specific factors influence behaviors and how various

influences interact at different levels (Ding, 2013). Furthermore, while multilevel interventions are endorsed as effective for inducing behavioral change, their implementation and evaluation pose significant challenges (Sallis & Glanz, 2009). For instance, conducting randomized controlled trials to assess the effectiveness of a particular environment or policy intervention is often impractical due to the inability to randomly assign individuals to neighborhoods (Sallis & Glanz, 2009).

Another drawback of the social ecological theory is not considering the significant influence of globalization, including Canadian traditions, on the behaviors and attitudes of immigrant and refugee women, especially because Canada is known as a multicultural nation. Globalization has the capacity to bring about transformative changes in societies (Castles, 2001, as cited in Boodram, 2022), and it has the potential to have both positive and negative impacts on various aspects, including gender relations, family dynamics, and institutional identities (Ferguson et al., 2008, as cited in Boodram, 2022). Therefore, it is crucial to recognize the complex effects on gender, race, and labor dynamics due to globalization. The factors driving violence against women extend beyond their social and cultural borders, underlining the need for a broader perspective (Fulu & Miedema, 2015, as cited in Boodram, 2022).

In my study, I realized that when dealing with domestic violence among immigrants, cultural norms, that belong to the societal level, exert a huge impact on the way relationships are shaped. I found it difficult to separate the relationship and societal levels in the studied narratives because they were both deeply interconnected by the victims' traditions and cultural background. For this reason, these levels could not be analyzed individually in the findings section.

However, this integrated characteristic of the social ecological model did not impair my research and its outcomes. On the contrary, the ecological approach was proven to be suitable for understanding domestic violence among immigrants and for a broader application in the development, description, and evaluation of violence prevention strategies.

5. Research Methods

5.1. Research Design and Data Collection

I have chosen to use thematic analysis in my study because this research method allowed me to answer my research questions accordingly, namely 1) how the social ecological model can be used to better understand the immigrants and refugees' specific struggles regarding domestic violence in Canada and 2) how the victims' experiences can contribute to the creation of effective policies to prevent lethal domestic violence among immigrant and refugee women. Qualitative research gives voice to individual experiences and engages with the individual holistically. In addition, qualitative methods make it possible to search for "hidden meanings, non-obvious features, multiple interpretations, implied connotations, unheard voices" (Have, 2004, p. 5). Qualitative approaches are therefore well suited for my interest in examining the struggles and barriers of vulnerable populations regarding severe and life threatening domestic violence. This research design gave me the opportunity to achieve my goal of developing deeper insights on the victims' hurdles from their own perspectives.

I analyzed open-ended, in-depth interviews from the CDHPIVP. According to Hackett et al. (2016, p. 55), in-depth interviews allow the interviewer "to probe into the respondents' beliefs, attitudes and opinions in order to facilitate greater meaning and

understanding." The CDHPIVP interviews adopted a narrative and reflective approach, inviting victims to share their experiences, efforts and barriers encountered in the search for help and safety. The interviews also probed into the type of support that could have been more helpful in their situation (CDHPIVP, 2021). The immigrants and refugees' stories of coping with severe domestic violence collected by the CDHPIVP matched my interest.

The interview data focused on actions taken and/or strategies used by victims on their own, by formal services/systems/supports, and/or with informal supports. The data reveal what victims did to manage risk and enhance safety. An open-ended interview guide asked participants to talk about times when they did not feel safe, what they did about it, who they sought help from, and what was helpful and unhelpful. At the end of the interview, participants were also asked what advice they would give to someone else who might be in an abusive relationship, as well as advice for service providers (CDHPIVP, 2021). Appendix A includes the interview guide.

The narratives gathered from the CDHPIVP's questions formed my research data. A narrative is "a spoken rendering of one's personal experience as an agent in the world" (Rosenwald & Ochberg, 1992, as cited in Presser, 2008, p. 2). Immigrant and refugee women described a difficult period of their lives based on their experiences dealing with domestic violence, detailing their stories and hardships. Their narratives rendered a journey to cope with domestic violence and, in some cases, to leave a toxic and abusive relationship. The victims' accounts are used to aid in the development of preventive programs to stop or prevent abuses.

I have chosen to use secondary data in my study. According to Law (2006) "secondary research refers to the use of research data to study a problem that was not the

focus of the original data collection." While data from another research study was collected for a different purpose, there are several reasons why a researcher would prefer to use secondary data than collecting new data (Bryman, 2016). This alternative route, although it represents a unique methodological tool (Andersen et al., 2011), comes with benefits but also limitations (Andersen et al., 2011; Bryman, 2016; Hofferth, 2005).

The most important advantages of secondary analysis include ease of availability, time savings with the data collection stage, and cost saving datasets (Andersen et al., 2011; Bryman, 2016; Hofferth, 2005). Bryman (2016) explains that a number of secondary datasets are readily available in public archives, including some with online search tools, making them easily accessible to researchers (e.g., the Data Archive, at the University of Essex in Colchester). In addition, using pre-existing data can substantially reduce the research duration and cost as data collection has already been carried out, eliminating steps and expenses related to data gathering, participant recruitment, and surveys (Bryman, 2016).

The main pitfall of using secondary data is that it limits the researcher to data that is already collected (Chandola & Booker, 2022), meaning that researchers do not have control over the data collection process or the design of the study that generated the data. They rely on the available dataset. With my study, while my research had a specific purpose, I was aware that the interviews were not originally intended to respond to my specific research questions, since my research objectives did not fully coincide with the goals pursued by the CDHPIVP. I encountered a minor challenge in my research due to the limited information available to enrich my discussion concerning the relationship and community levels within the social ecological model, a theoretical framework that examines how an individual's behavior and development are influenced by interactions

within multiple layers of their environment (Heise, 1998). If I were conducting the interview, incorporating a comment or an open-ended question related to these topics could provide a more detailed elucidation of these points. However, I do not believe that this initial challenge impaired my overall analysis.

In qualitative research, reflexivity concerns the analytic awareness to the researcher's role (Gouldner, 1971, as cited in Dowling, 2006). According to Harding (1987, p. 9, as cited in Presser, 2008), "the class, race, culture, and gender assumptions, beliefs, and behaviors of the researcher her/himself must be placed within the frame of the picture that she/he attempts to paint", meaning that the researcher must clarify their personal characteristics and explain how some factors might influence their examinations and conclusions as a way to improve credibility (Tong et al., 2007). The creditability of findings also depends on the researcher's ability to articulate similarities and differences in their positions as insiders or outsiders in regard to the participants and readers (Dodgson, 2019).

As a researcher, I must acknowledge my education, origin and culture. I am Brazilian, have a degree in Law and I have been working in a judicial system for the Government of Brazil since 2011. Before that, I was a lawyer for five years in Brazil. For this reason, I have preconceived ideas about how to navigate a judicial system and the difficulties lay people find in making themselves heard, a condition that does not seem to be different in Canada. Furthermore, I come from a typically patriarchal and sexist culture that, while creating laws to defend women who face domestic violence,⁵

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⁵ In September 2006, Brazil enacted groundbreaking legislation on domestic violence: the Law no. 11,340/2006. The legislation was named Maria da Penha Law in honor of an activist victim left paraplegic by her abusive ex-husband. The law identified different forms of abuse against women and brought more severe punishment for perpetrators. It also established special domestic violence courts and created 24-

continues to make their application difficult and to soften allegations of severe domestic violence.

I must also acknowledge my gender, race, and current status in Canada. In my intersectional reality as a female, Latina and immigrant in Canada, I understand sexism, immigrant conditions, and discrimination more than if I were male and born in Canada. However, I have never experienced domestic abuse.

My perceptions as a woman and an immigrant living in Canada did not impact data collection, considering that I did not conduct the interviews and I am using secondary data. Therefore, my personal features and background might be acknowledged only from my data analysis onwards.

Regarding my experience with the data, the interviews about the violence suffered by the victims did not affect me intensely, but they did touch me and evoke sympathy for the victims' situation. I tried to stay focused on my research and eventually, when I found myself depressed because of the reports, I disconnected from work a little. I believe that, because I already carry a history of many years of work in the court of Brazil in defense of vulnerable people, I was not highly impacted with the interviews and was able to deal relatively well with the information collected.

5.2. Interview Selection

CDHPIVP's database recorded interviews with 128 participants among four populations that experience increased vulnerability to domestic homicide and/or face unique challenges: Indigenous populations; rural, remote and northern populations; immigrant and refugee populations; and children exposed to domestic violence. Of this

hour shelters for victims of domestic violence. The law was internationally recognized by the United Nations as a landmark in legislation on domestic violence (Government of Brazil, n.d.).

total, 90 interviews were conducted with victims of domestic violence and 38 were carried out with loved ones of murdered victims, classified as "proxies."

For my research, from the total of 128 interviews that CDHPIVP collected, I selected only the interviews from immigrant and refugee populations. I excluded the proxies' testimonies because I wanted to work only with the victims' perceptions on their struggles and the strategies used to cope with their abusive relationships. I also excluded interviews conducted in French because of my limited abilities with the language.

During my first review of the interviews, I noticed that four interviews were conducted with victims who were not first generation immigrants, but Canadian-born. For this reason, I excluded these four interviews. I also found two interviews carried out with victims who only experienced domestic violence before moving to Canada. Both victims reported that they moved to Canada to escape their aggressors, succeeding in their plans since their perpetrators did not follow them to Canada. In these cases, as it was not possible to access the difficulties and barriers of these victims in seeking help in Canada for the abuse to end. I excluded these two narratives.

Two victims interviewed reported that they were babies when they moved to Canada with their families. In these cases, although they are immigrants as they were foreign-born, both had a lifetime to adapt to the traditions and daily life in Canada, sharing the average knowledge of the country's rules, laws and resources as any Canadian citizen. While they may have been influenced in some way by first-generation immigrant family members, as they do not reflect the common hurdles faced by the other interviewees, who were adults when immigrating to Canada as far as I can tell, I did not find it plausible to include such testimonies in my research.

With these interviews excluded, I concluded with nine transcripts for analysis to support my thesis research. The nine victims interviewed were in heterosexual relationships with their abusers. For this reason, my study cannot address abusive relationships involving LGBTQIAP+ groups.

5.3. Data Analysis

According to Alhojailan (2012, p. 40), "thematic analysis is considered the most appropriate for any study that seeks to discover using interpretations" (Alhojailan, 2012, p. 40). Alhojailan (2012) recommends the use of thematic analysis for situations such as data interpretation, deductive and inductive approaches, and for coding and categorising. Thematic analysis therefore was suitable to give meaning to my research since it allowed me to comprehend the experiences of severe domestic violence among a vulnerable population and gave me insights on appropriate prevention programs to help these groups.

Having a defined theoretical framework led me to take a theoretical or deductive or 'top down' way (e.g., Boyatzis, 1998; Hayes, 1997, as cited in Braun and Clarke, 2006) in my research thesis. According to Braun and Clarke (2006, p. 83), "a 'theoretical' thematic analysis would tend to be driven by the researcher's theoretical or analytic interest in the area, and is thus more explicitly analyst-driven" or theory-driven (Clarke & Braun, 2017). Using a deductive approach allowed me to examine the patterns that emerged from the CDHPIVP using the social ecological model as a lens to understand the data.

The steps for a thematic analysis are the following: (1) familiarize with the data; (2) generate initial codes; (3) search for themes; (4) review themes; (5) define themes;

and (6) write-up/report (Braun & Clarke, 2006). Based on the information gathered about thematic analysis as a research tool, I followed Braun and Clarke's (2006) steps to develop my data analysis.

The first step I took to familiarize with the data was pre-screening it, which led to the final total of nine interview transcripts. After that, I carefully re-read the nine interviews, highlighting the most relevant passages for my research objectives. I wrote comments and initial ideas about the victims' statements.

The second step involved "the production of initial codes from the data" (Braun & Clarke, 2006, p. 88). However, before that, I decided to organize the stories by identifying each interview from "A" to "I" and choosing a different color for each narrative. Then, I read the interviews and wrote a code for each statement or idea found, according to the relevance of the narrated story for my research. I created a new document in Microsoft Word with the initial codes and started to copy and paste the victims' reports about it within every code found.

After I had coded and collated all data, the third stage concerned searching for themes. By deciding to try to understand victims' stories through the social ecological model, a theoretical framework that explores how individual behavior is shaped by interactions between personal, social and environmental factors (Heise, 1998), I already had an idea of the aspects I should focus on for my findings. I knew, for example, that I should seek to understand the origin of domestic violence from the perspectives of the individual, relationship, community and societal levels of influence. In the search for repeated patterns, I created another document in Microsoft Word with four columns representing the four levels of influence of the ecological social model and identified the codes that could add to the perspectives of this framework. I also added columns with

my research questions and objectives to integrate all the research aspects in my journey to seek for themes. After studying all the information gathered, I defined potential themes.

In the fourth stage, I reviewed and refined my themes. For the reviewing phase I followed Braun and Clark's (2006) suggestion and I read all the gathered extracts for each theme and considered whether they emerge as a coherent pattern. In this phase I discarded some provisional themes that ultimately did not fit my research focus. After finding a form of roadmap with themes that captured the outlines of the coded data, I checked whether the themes worked in the data set context, as a whole (Braun & Clark, 2006).

During the fourth stage, I also read Sabri et al.'s (2018) research related to multilevel risk and protective factors for intimate partner violence among some female immigrant groups in the U.S. as a source of inspiration for my study. Just like my research, Sabri et al (2018) used the social ecological model to understand some immigrant women's struggles in coping with domestic violence. Their study organized the findings chapter using the perspectives of the individual, relationship, community and societal levels that influence violence and the research analyzed contained themes within each topic. For example, in the individual level topic, the study found themes such as "women's characteristics", "internal sources of strength", among others; in the community level topic, the research found "informal sources of support" and "formal sources of support" as themes, and so on. Sabri et al.'s (2018) research provided insights into my themes and helped me understand the appropriate level of influence on violence associated with them, even though my findings were not exactly the same as theirs. In my research, I found this stage of the analysis complete when the themes seemed

coherent together, telling a story about how domestic violence was experienced by immigrant women in the social ecological context.

Stage five encompassed defining and naming themes, according to the meaning of what each theme is about (Braun & Clark, 2006, p. 92). It comprises the importance of not making the themes too diverse and complex and also the need to create subthemes to give structure to large and complex themes (Braun & Clark, 2006). Following the authors' suggestions, I developed sub-themes within the major four themes based on the multilevel risk of violence in the social ecological model and named them accordingly. Having in mind Braun and Clark's (2006) recommendations, I was careful not only to paraphrase the content of the reviewed interviews, but to integrate the victims' stories, identifying why their narratives are relevant to my research.

After finalizing stage five, I moved to step six and began writing. The last phase involves telling "the complicated story of your data in a way which convinces the reader of the merit and validity of your analysis" (Braun & Clark, 2006, p. 93). I sought to provide sufficient evidence of the patterns within the data with illustrative examples demonstrating my point of view through an analytic narrative (Braun & Clark, 2006). I re-read the interviews several times to make sure I chose the most compelling stories and examples within the themes and sub-themes as I wrote my findings chapter.

Thematic analysis has advantages and disadvantages, but for this research the benefits outweighed its drawbacks. According to Braun and Clarke (2006), the main benefit of thematic analysis is its flexibility, for being independent of theory and epistemology, resulting in a method compatible with both essentialist and constructionist approaches. Braun and Clarke (2006) also consider other advantages. They suggest that thematic analysis is accessible to novice researchers, presents results that are easily

understandable to general public, generate unanticipated insights, and is useful to informing policy development. As disadvantages, Braun and Clarke (2006) cite that the broad flexibility of the method can make it difficult to develop precise strategies for higher-phase analysis and can hamper research attention on what to focus on. In addition, compared to other methods, thematic analysis is not able to examine the use of language employed or the functionality of speech (Braun & Clarke, 2006).

In my study, the advantages above justified the use of thematic analysis as being suitable for the research carried out, aimed at analyzing the victims' personal experiences and finding solutions to fight against domestic homicide in the context of vulnerable populations. As a novice researcher, I believe that the use of thematic analysis as a research tool generated valuable insights for my study, allowed me to develop results that are easy for the general audience to understand, and, most importantly, generated guidelines for presenting recommendations on the prevention of domestic violence among immigrant and refugee women in Canada.

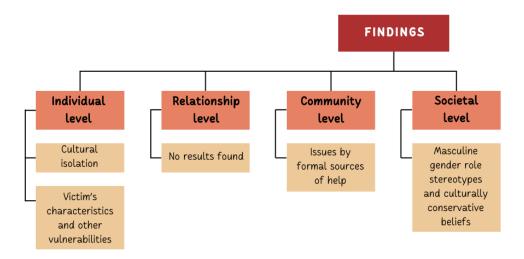
6. Findings/Results

In the following chapter I demonstrate the results of my study, aiming to answer my research questions on how the social ecological model can be used to better understand immigrants' and refugees' specific struggles regarding domestic violence and also how to prevent domestic abuse. By using the social ecological model to generate patterns, I focused on risk factors, hurdles, and other conditions related to immigrant and refugee populations rather than issues that face victims in general.

At the individual level of the social ecological model, I found, in the data, themes related to cultural isolation, victim's characteristics and other vulnerabilities. At the

relationship level, I did not find any specific patterns related to immigration status. I found, at the community level, themes related to formal sources of help. At the societal level, I found patterns related to masculine gender role stereotypes and culturally conservative beliefs.

The chart below visually summarizes the themes in the data I analyzed. In this chapter, I provide details on each drawing on the data and using examples and quotes from the narratives gathered.



6.1. Individual level

The individual level of the social ecological model addresses biological and personal history that increase the chances of a person to become a perpetrator or a victim of violence, such as age, education, finances, substance use, or prior abuse (Centers for Disease Control and Prevention, 2022). Prevention strategies addressing this level may include conflict resolution and life skills training, as well as social-emotional learning, and safe and healthy relationship skill projects (Centers for Disease Control and Prevention, 2022). In the CDHPIVP interviews, I examined conditions, characteristics,

and personal facts of those involved and found several risk factors for victims that contributed to their victimization.

a) Cultural isolation

Isolation, whether social, physical, or linguistic, was the most recurrent theme in the analyzed narratives. The intersection of isolation and immigration status reinforces the state of vulnerability of these women and contributes to the likelihood of domestic violence victimization. It also stands in the way of them seeking help.

Immigrants and refugees experience social isolation differently from Canadian-born victims. When immigrants arrive in a new country, they usually do not know anyone or have no friends or family nearby. While for nationals, there is a prior support network of family and friends that the abuser eventually removes from the victim's life, for foreign-born victims, this prior support network does not exist in Canada. One victim in the interviews stated that "for four years living in Canada" she had "zero friends". The narrative below demonstrates the victim's state of isolation since arriving in Canada due to the excessive control of her abuser:

We were new here and he made sure that I don't have friends because every time I came home and I say "hey look I met this couple and they're inviting us over and again" he would make a huge scene. And when I say scene it would be yelling, calling me names, saying "I forbid you", and then escalating in to grabbing my clothing and holding me like this and "if I find out that you see these people you see what's going to happen." Like, threats. (Victim E)

Social isolation was reinforced by the abusers, who saw moving to another country as an easier opportunity to further oppress their victims and hide the abuse. One victim reported:

He knew I had got nowhere to go and he didn't start getting abusive until after we were in Canada, once he'd cut me off from all of my family and all of my supports. He even cut me off so even having contact with my family. I didn't have contact with them from the moment we got into Canada for twelve years. Yeah, he knew what he was doing. (Victim D)

Physical isolation was observed in some interviews, especially from immigrant victims who went to live on farms and rural areas. Although living in remote places is not a specific condition to immigrant and refugee women, this situation does heighten the risk of domestic violence in Canada. One victim explained that it was difficult for her to leave the property due to weather conditions that she was not used to:

There was one time where it snowed a lot and I was not able to leave the home for a week because there was so much snow, nobody came to clear the snow off the driveway and we had back to back storms and I remember feeling very isolated during that time. (Victim A)

The victim's statement adds a perspective on life in Canada, with structural limitations due to climate at certain times of the year, whether due to heavy accumulation of snow, fires, severe storms, or hurricanes. These circumstances are

experienced by individuals residing in Canada and they play a role as conditions that favor physical isolation.

Linguistic isolation or language limitation was mentioned as an aspect that adds another layer of vulnerability to immigrant victims subject to violence. The absence of a support network and a community sharing the same language and culture adds to the victim's loneliness, preventing her from seeking help when needed. According to a victim:

In coming to Canada I became more isolated (...). I've got little English and in [central Canadian city] I could get away with English, but still it was kind of isolating that I didn't have my community. (Victim I)

b) Victim's characteristics and other vulnerabilities

Some personal circumstances of victims contribute to increased vulnerability to domestic violence, such as limited awareness about Canadian Laws, rights and resources, exposure to prior domestic violence in an immigration context, and immigration status. The following topic describes some of the victims' susceptibility factors.

The lack of knowledge about available resources, as well as Canadian legislation and rights, play a role in domestic violence victimization. Navigating a legal system that differs from their home country is an additional challenge for immigrant and refugee victims, who are not sure what rights they have in the host country. It takes time to get

used to the rules of a new country. A victim explained that she needed to study about her rights:

I think part of the way that I came to Canada was another reason why I wanted to do the study, because I didn't really know what resources were available to me for a long time here. There weren't very many resources available in the town because this is a small town. For immigrants... immigrants period, but also for domestic violence. And I wasn't really able to receive any kind of. (...) So I didn't know the laws in Canada very well, but I knew were probably better. (Victim B)

Another interviewee recognized that this lack of awareness about available resources made her "a little more vulnerable" (Victim A). One victim was surprised after being informed that she "could record a phone call [her phone call] and it would actually count in court" (Victim D). In this case, the use of a call recorder application indicated by a victim support worker was essential for the victim to prove the threats she suffered from her ex-partner and then obtain a protection order. If she had not known about this right and tool, she might never have received the restraining order that she needed for her safety at that moment.

Limited knowledge about the role of the police and/or lack of trust in the institution also contributes to the victims' susceptibility to violence. Immigrants and refugees who have children are concerned about the possibility of having their children removed from the family. In this case, the absence of clarifications about the measures to be taken in cases of domestic violence involving children need to be available to

immigrant and refugee women so that they are not led to believe in the possibility of losing custody of their children. This was a very relevant concern of one of the victims, who was reluctant to call the police for help for fear of losing her children:

One of them [a friend] told me to call the police. (...). At the time you think "you call the police maybe I'm going to lose my kids too". (...) Especially us immigrants we always think that if you call the police they are going to take all the kids to child welfare or something like that, right? (...). I couldn't do that. (Victim I)

Sometimes victims have mistaken or outdated ideas about resources for victims.

A victim reported a misconception concerning to a difficulty in interpreting how a protection order works. She said that the way the police explained the restraining order made it sound like the victim was responsible to keep her abuser away. She explained that the police need to clarify the measures that the protection order holds:

I feel like it needs to be really clear to the person, the restraining order is against that they are the one who has to take responsibility for not showing up not, not the victim saying "I need to prevent him from coming to me." (Victim H)

It was not clear if this issue was related to the limited awareness of the victim's rights or due to linguistic limitations in understanding what was said. However, this misunderstanding about how the restraining order works had some implications for the victim. Even with a protection order issued against her perpetrator, the abuser went to

the victim's house a couple of times to take some documents and she did not report his breaches to the police because she thought that his presence at her house was her fault:

They [the police] will do something to me because I am the one who is supposed to keep him away. They're not going to do anything about him. They'll do something to me because I didn't keep him, I failed in keeping him away.

(Victim H)

This misunderstanding is quite dangerous and could have generated much more serious and severe consequences for the victim, depending on the case. Protection orders are issued precisely to protect the victim and their children from the abuser. The legal system needs to ensure that the information given to victims is understood correctly and in the strict terms in which it operates, requesting a translator if that is the case, otherwise the immigrant victim will be at a heightened risk of domestic homicide.

Exposure to previous domestic violence in an immigration context contributes to intergenerational cycle of violence. A victim explained that her mother came to Canada as a refugee fleeing domestic violence perpetrated by her ex-partner (the victim's father) for years. The victim stated that the cycle of abuse as an immigrant ended up repeating itself naturally because that was all she knew:

Well, that's all I knew. (...). You're doing this because that's all you know. Like, this is, this is the only cycle I know [the cycle of abuse]. (...). But I guess, like, what is a healthy relationship? Especially for people like me who'd never seen healthy relationships. Like, I thought I was in a healthy relationship! So, you

know, understanding: what does a healthy and an unhealthy relationship look like? (Victim G)

This victim highlighted the impact of not being aware of rights and resources available to someone with language limitations like her mother, also an immigrant woman:

I was an educated woman. So, I knew where to access help. (...). So, I always felt very privileged that I knew that. But I imagine, someone like my mom – you know, her first language is Spanish, who didn't know the system, who didn't know all of these things. Can you imagine what it's like? (Victim G)

Another victim reported that her ex-husband and all three children became

Canadian citizens many years ago. She, however, was never allowed by her ex-husband
to apply for Canadian citizenship and "was a permanent resident all this time [15 years]"

(Victim I). The issue behind this limitation between permanent resident and citizenship
status is that as a permanent resident, the immigrant has to renew their status every five
years, needing to start a new application and having to meet and present the requested
documentation, fulfilling requirements for this renewal and within the legally stipulated
period, under the risk of losing permanent resident status. In many cases, the victim's
partner may hold her documentation and use the victim's dependency on him to exert
control over the immigrant victim.

The abusers' web of manipulation also includes deceiving the victim into believing that they will change. In the case of an immigrant victim, the abuser lured her with false promises that he would change when they moved to Canada. Fragile and

vulnerable due to the hope awakened by moving to a new place where the family could start a new life, the victim was easily convinced by her ex-partner:

He was telling me that: "we come to Canada, we settle down, we immigrate, find a job, find a house, and I will stop drinking and I will stop being a jerk." Well he admitted it, right? So that would be a reason why I was hopefully—hope for staying in the marriage, you know? So here in Canada things only escalated things became worse. (Victim E)

Another victim reported that before she came to Canada she used to work regularly, but after she moved she was "a stay-at-home mom" for nine years (Victim I). This is yet another example of abuser dominance as a result of the increased vulnerability of victims after moving to a host country.

6.2. Relationship level

The relationship level of the social ecological model identifies how close relationships may increase the risk of victimization or becoming a perpetrator of violence (Centers for Disease Control and Prevention, 2022). Prevention, at this level, may involve programs and mentoring focused on family members, peer programs aimed to strengthen parent-child relationships, and promote positive peer norms, healthy relationships, and problem-solving skills (Centers for Disease Control and Prevention, 2022).

When reading the interviews, I realized that the behaviors and influences of the closest social circle of those involved, especially family members, were very rooted in

cultural beliefs. Family and peer's advice to victims to tolerate violence and remain in abusive relationships were motivated by their patriarchal ideology. For this reason, as the cultural factor has a much broader impact, encompassing a dynamic of social rules, I decided to address these influences when discussing the societal level of the social ecological model.

No narratives in the data addressed the abusers' and/or victims' closest relationships that could have influenced violence related to immigration status.

6.3. Community level

The community level of the social ecological model identifies the environments in which social relationships are built and their influence on individual's risk of becoming a victim or perpetrator of violence (Centers for Disease Control and Prevention, 2022). Preventative approaches at the community level focus on improving the physical and social environment and by addressing circumstances that may favor violence, such as community poverty, segregation, instability, or high number of alcohol stores (Centers for Disease Control and Prevention, 2022). Under the community level in the model, I examined issues related to formal sources of help and support.

a) Issues by formal sources of help

I found few experiences specifically related to immigration status in regard to the community level. The interviews identified a lack of formal sources of help for victims. Most specifically, the interviews identified issues with the judicial system and passport services.

Immigration status should not influence the judicial system. One victim interviewed described prejudice by a judge for being an immigrant and having an accent:

She insulted me for my accent and she said: "I understand why you don't understand because you're a foreigner." And she attacked me, she literally verbally attacked me with a question: "is he getting the custody? Are you giving him the custody?" and I said I was speechless and, like, she goes: "do you understand the question?" And I go: "yes, I understand your question." I was so intimated [sic] by her. (Victim E)

The clear episode of racism discussed above is yet another example of discrimination suffered by immigrants in host countries and reinforces the racial barrier to access to justice. It is not common for immigrants to avoid seeking help because they think they will never be heard or because they feel diminished by the authorities of the host country. The racism experienced by the victim reveals an institutional barrier that still exists in Canada.

Navigating passport services in the community was also a major challenge for a victim whose husband was imprisoned for a period of time. She reported difficulty having to explain the reason for her ex-partner's lack of signature to get her children's passports. She narrated her situation of having to explain several times to different people in the same institution that she was a victim of domestic violence and that it was impossible for her ex-partner to sign some documents precisely because he was in prison. This is how she described her struggles and her feelings:

They were just basically like, well, "Where's this document? Where's this? Where's that?" And I'm like, this is – and it's like every time I go there, it's just - re-traumatizing. And then, every time I had to see somebody else new! So,

they'd be like, "Well, you missed this document. You have to come back and wait in that line. And now talk to another person and share your story again with that person." And it was just like, "Yeah, here's my profile, I'm [victim's name], Yes, I was beat. Yes, I was Ms. Victim. This is who I am." And it's – it's so, like, dehumanizing. (...) when I first walked in here, he [a cop] was just like, "Oh," Like, it just seemed like a, "Oh, another crazy domestic victim violence lady, walking in and demanding these things." Like, it just – I felt so, gross. Um... humiliated and offended. Yeah! And like, I felt like I was being held on trial for something. It felt like, I said, very dehumanizing at times. (Victim G)

As an important and formal institution, the judicial system should guarantee a safe environment for victims and not serve as a mechanism for discrimination and retraumatisation. The same reasoning applies to public support services for citizens and immigrants, that need to optimize their procedures to deal with issues involving domestic violence.

6.4. Societal level

The societal level of the social ecological model identifies broad societal and cultural factors that encourage and support violence as a normal way to resolve conflicts (Centers for Disease Control and Prevention, 2022). Prevention measures at this level promote societal norms that prevent violence, policies to strengthen household financial security, education, employment opportunities, and health (Centers for Disease Control and Prevention, 2022). Masculine gender role stereotypes and culturally conservative beliefs were themes found from the interviews that related to the societal level.

a) Masculine gender role stereotypes and culturally conservative beliefs

Cultures in which patriarchy is deeply rooted contribute significantly to the acceptance of violence against women as normal. The community can tolerate abuse and women are encouraged to endure the relationship with the violent partner as a traditional part of their lives. The normalization of violence in some patriarchal cultures may be to the extent that certain communities may not even have a specific word like "abuse" in their language. One victim described this situation:

She [a young co-worker] noticed the bruises on my wrist and she's like, "what's that? Is that abuse?" And I'm like, "what's abuse?" That's the first time ever that I heard the word abuse in English. And what is it? There's not such word in my language. (Victim E)

In some patriarchal cultures domestic violence is "sort of kept silent and quiet within the family", according to a victim's description (Victim E). She narrated that her mother witnessed some abuse that she has faced before she moved to Canada and advised the victim to be patient:

She had this advice for me that "you have to drink your bowl to the end." So, "you have to be patient, you have to be a good Christian wife." (...). And she said: "divorce is not an option, you have two little babies and then he has very good plan for you to go to Canada." (Victim E)

The same advice was shared by another victim, who was told to be patient because "you know men in that part of the world, they're like that." She explained that when she confided with three friends from North Africa, they told her that "compared to some of the men, he's ok" or "just be sabr [patient], just try to keep always away" or "men are like this" (Victim I). However, this advice made the victim feel trapped, suggesting that she should focus on her family and forget about herself, her own wellbeing. According to the victim, these cultural beliefs makes a victim believe that she is "being selfish by wanting to leave" (Victim I).

Disabling and limiting feelings related to the individual's culture are quite difficult to overcome. Another victim shared that although she had huge respect for her father, she knew he used to hit her mother. One day when an acquaintance confided with her mother about being beat by her partner, she heard from her mother "something like you need to go back to your husband because he's in charge" (Victim H). It is as if culture serves to justify and cover up abuse: if the man is in charge, he can beat his woman. Whereas this patriarchal culture that accepts violence, when the victim told her father about the violence she was facing, her father's advice could not be different:

He just said: "there are more opportunities where you are right now [she was already in Canada], just stay and make it work." And so I'm just like: "okay, I'm going to stay and make it work." But in hindsight it wasn't the best thing.

(Victim H)

This victim's father still advised her about the cultural consequences of thinking about coming back to her home country:

He said: "If you want to come back here, people will laugh at you." And I said: "Yeah, that's true." So, I tried to make it work and all the other abuse was going on, I didn't say anything else. I just tried to deal with it on my own. (Victim H)

This situation above was also experienced by another victim, but the advice came from her sister: "she shouted in my face and told me I had to go back and make my marriage work" (Victim A).

On the other hand, in some cultures, intimate relationships are understood to be quite volatile:

(...) in my culture we don't deal with that stuff [domestic violence]. Well we're just supposed to um, leave the relationship and just move on. That's it, yeah. I guess maybe we don't know how to reach out for support and get the help. Yeah. Um, they are aware of it but they don't believe in counselling. And reaching out for support, yeah. (Victim C)

This more independent and distant way of dealing with the relationship has downsides because the victim ends up not knowing where to seek for help. In addition, this cultural belief reinforces the idea that leaving a violent relationship increases the risk for violence.

Some social pressures from the community also influence the victim of domestic violence. A victim claimed that she felt pressured to try to hold on to her abusive relationship and make it work because her previous relationships had been short and

there was a lot of judgment from people, as if the problem for not having long intimate relationships was the victim. In her own words:

There's this feeling like "wow you keep changing boyfriends" or "you don't seem to have a long relationship" kind of thing. And you know people always were judging and saying those kind of things. So then I felt like I have to kind of try to hold on and make it work because I have had a terrible track record you know so? (Victim F)

There is also the cultural shock between the culture of the immigrant's home country and the culture of the host country. A victim reported that she was shocked by the "zero tolerance policy" regarding domestic violence in Canada, something very different from what she used to see in her home country. She reported that people from her culture generally do not get involved with couples' issues, even if it is about violence, because "that's they're house (...), that's what happens within their four walls". She describes how it works in her culture, including when the victim seeks help:

I come from a culture very much where the man is dominant and he makes the money and the woman nurtures the children and is the house wife kind of situation. (...) a woman will go to the police station to make a complaint against your husband and the police would write down your statement and they'll say: "okay we have it all written down now go back to your husband." That's a really common thing. (Victim F)

The feelings that arise from this situation are quite frustrating. The victim above stated that she feels hopeless with this circumstance where "the man is the master of his house." She also reports that coming from a culture of male dominance contributed to her staying in the abusive relationship for as long as she did. The victim described that the feeling of depending and needing the man is deeply rooted in her culture, a "very strong thing, like, you need a man no matter how bad he is." On the other hand, she realizes that this perception is very different from the traditions in Canada:

This very, very strong feeling that we have in [South Asian country] that a woman is not complete alone or a woman is not whole, like, she needs a man to lean on to support kind of. She can't, like, be a single women kind of. This is very, very strong culture about that. Like, you know, if you're single than—like here in Canada, you have a lot of women who will say: "I'm single by choice. I'm enjoying my life and there's it, like, okay." (Victim F)

Perceptions of single women also differ between cultural contexts. The same victim above explained that, contrary to Canadian traditions, in her home country people would say that "you're single because you couldn't get married or no one wanted to marry you or something like that."

Appearances and the need to meet certain cultural profiles also contribute to the construction of a woman's social image and limits them from seeking help. According to a victim:

I don't know if that's a cultural thing – probably a cultural thing from our Latino heritage – that you, that we have to like, keep up this way of life. You have to look a certain way, do certain things. So, I think that that was, you know – so, I didn't necessarily feel like I had anybody that I could really speak to about what was going on, that really wasn't my family. Because also, in our – a lot of the times in our culture, too, it's like, "Well, you work it out with your husband." Or you, um, you know. You have like, family, there's this certain lifestyle you have to live, and you have to do. "This is how to be a good mom; this is how to be a good wife; this is how to be a good whatever". So, I think, like, that was, um... really tough. (Victim G)

Within cultural beliefs, a means of reinforcing patriarchal violence occurs through the misinterpretation/manipulation of religion to control, abuse, and belittle women. A victim who reported being religiously abused by her ex-partner described his judgments of her as a mother, using religion to manipulate her and justify his actions:

He always thinks that I'm not a good mother to the kids, especially in their religious upbringing. So if – There's the spiritual abuse again. Yeah, because if they don't memorize the Surah for the class, the weekend class, he will start screaming at me. But then he'll take it physically on the kids, right? You know, he will call them "donkey" and "stupid", "what's this learning of Allah" and saying very mean things to them and using the book to hit them or something like that. (Victim I)

This victim said that after leaving her abusive partner, her children stopped attending Islamic classes because there they were "traumatized religion-wise." She explained that her children were beaten by the Quran teachers. That circumstance was not an isolated fact, but a general condition of the victim's background regarding culture and religion. The victim concluded:

The spiritual abuse is not only in the family but also in the community, the institutions. (Victim I)

Patriarchal beliefs can be quite dangerous for women insofar as they favor male dominance and female inferiority and submission, even if this costs women's marks of violence, sometimes unfortunately lethal.

7. Discussion

Immigrant and refugee women face a number of challenges and conditions that influence and heighten the risk of being victims of domestic violence in Canada. Given this situation, in this study, I sought to answer 1) how the social ecological model could help us understand the challenges of immigrant and refugee women from their experiences as survivors of severe and life-threatening domestic violence in Canada, and 2) how the victims' experiences could contribute to the creation of effective policies to prevent domestic violence among immigrant and refugee women. To address my research questions, I used a multilevel framework to identify specific hurdles that these groups face when coping with domestic violence, such as cultural isolation, language limitations, and issues due to immigration status and patriarchal cultures. Through the

narratives gathered, I was also able to suggest some protective measures for this group of vulnerable women to prevent and to flee domestic violence.

I found that isolation affects immigrant and refugee women in a unique way. Immigrant women often face heightened isolation, having left behind their families and support networks (Menjívar & Salcido, 2002). Upon their arrival in Canada, these vulnerable groups usually do not know anybody in the country. They find themselves in unfamiliar surroundings, where they may struggle with language barriers, cultural differences, and an unfamiliar geographical landscape (Menjívar & Salcido, 2002). Finding assistance when coping with domestic violence in such isolated conditions provides an exceptional challenge. Abusive partners use isolation as a means of control over the victims (Keller & Brennan, 2007). My findings confirmed that this type of isolation extends beyond the usual isolation faced by Canadian domestic violence victims, as the immigrant women's social isolation is not initially imposed by the abuser but rather stems from the immigrant status itself. For this reason, I decided to refer to this particular condition inherent to immigrant and refugee victims of domestic violence as "cultural isolation".

Immigrant and refugee victims' inability to speak the local language was found to place them in a vulnerable position that favors the abuser. Isolation and language barriers are a result of efforts by victims' abusers to limit their contact with others, including places to learn English and to work (Bui, 2003). In addition, victims' insufficient proficiency in English often contributes to the abuse hidden from society and the victim remaining in a helpless situation (Keller & Brennan, 2007). For many of these women, the outcome is a heightened reliance on their abusers, making it difficult for them to reach out for support services within the community (Bui, 2003). My

findings demonstrated that language limitations often prevent immigrant and refugee women from effectively engaging with the police, finding available community resources, and navigating the legal system (e.g., for protective orders). For this reason, proficiency in language can be pivotal for immigrant women facing domestic violence, as it reduces the abuser's capacity to exert control and reinforces the woman's ability to break free from such constraints (Menjívar & Salcido, 2002).

The cycle of violence, a common pattern of repetitive behavior in abusive relationship experiences in general (Walker, 2017), is further worsened when it involves an immigration context. Immigrant victims of intimate partner violence are more likely to relive the story of violence experienced by their immigrant mothers because this is the exact pattern they know in their life stories due to intergenerational transmission of family violence. This means that children who are exposed to family violence are at an increased risk of becoming a victim or a perpetrator of domestic violence (Lünnemann et al., 2019) and that the immigrant status of the victim's mother along with her own status constitutes an additional layer in the cycle of abuse.

I observed that some formal sources of help for immigrants in Canada, such as the judicial system and passport services, are not prepared to deal with cases that intersect immigrant status and domestic violence. For this reason, it makes it overwhelming for victims to have to respond to countless requests that are inappropriate for their situation and unnecessarily having to repeat painful information to several sectors and public servants. In addition to contributing to revictimization, these institutions may hinder immigrant women from seeking assistance for domestic violence, as court decisions can perpetuate culture blaming, institutional discrimination, and xenophobia (Ahmadzai, 2015). For women to receive meaningful support, service

providers need to deliver interventions that cater to their specific needs within the broader context of their lives (Cole, 2001; Lavergne et al., 2008; as cited in Kiamanesh & Hauge, 2019). Being mistreated in a host country by formal institutions that were supposed to offer protection and care may lead immigrant victims of domestic violence to hopelessness and despair when seeking help from formal sources.

Although I analyzed a heterogeneous group of immigrant and refugee women, my findings demonstrated that there is a form of normalization of violence in patriarchal cultures. Traditions that place men as hierarchical superiors over women are more likely to allow men the freedom to abuse their partners, whether in the form of physical, verbal, emotional or spiritual/religious violence. A clear example of cultural norms that support violence as an acceptable way to resolve conflicts is not even having words like "abuse" in the community's native language. Patriarchal immigrant communities', therefore, still prefer to consider domestic violence as a private matter and turn a blind eye to violence against women (Lee, 2002, as cited in Keller & Brennan, 2007).

Belonging to patriarchal cultures is a condition that must be acknowledged comprehensively when analyzing domestic violence incidents to understand the immigrant women's hurdles to seeking help. Patriarchal traditions may invalidate the distresses and sufferings experienced by women who are victims of domestic violence because their submission to their partners' abusive attitudes may be seen as an expected behavior within their cultural beliefs (Edelstein, 2013). Victims tend to accept abuses simply because they do not know life in a different way from what is culturally tolerated in their community. The advice given by victims' family and friends, who share the same patriarchal culture and often experience the same form of abuse, usually encourage them to endure violence and make their marriage work even under abusive conditions.

Therefore, effort must be made in order to help immigrant women to both recognize the abuse and seek assistance to cope with domestic violence.

My research found that it was common for immigrant victims of domestic violence to only realize the possibility of having a life without abuse upon arriving in Canada. Through the acculturation process, immigrant women often become conscious that violence should not be tolerated, that abusive relationships are toxic and that, if they want, there are several protection initiatives available in Canada to assist them. For example, through the website of the Department of Justice Canada (justice.gc.ca), one can easily find a booklet called "Abuse is Wrong", in which there is a definition on what "abuse" entails, sources of help, etc. The main hindrances to fully utilizing the existing support structure stem from broader systems of privilege and disparity, including patriarchy, racial hierarchy, and economic exploitation (Ahmadzai, 2015). Consequently, while these supports offer assistance on an individual level, it is still imperative to examine the systems of privilege that restrict immigrant women from fully benefiting on these resources (Ahmadzai, 2015).

The social ecological model is key to help prevent domestic violence and domestic homicide among immigrant and refugee women since this theoretical framework helps to identify vulnerabilities at different social levels and then match them with appropriate strategies to address the victims' vulnerabilities. Effective programs to prevent abuse intersect with the need to enlighten this targeted group with adequate information on what domestic violence entails and which supports are available to help immigrant victims, taking into account their vulnerable situation.

Culturally-sensitive aspects should be considered in the approach adopted to inform immigrant victims about domestic violence. Given that some immigrant women

do not realize what abuse is due to their patriarchal cultural and religious traditions, specific programs should help clarify in culturally sensitive ways what safe dating and healthy and respectful relationships are like, along with counselling services and social-emotional care. Immigrant victims need to be aware that abuse is wrong and that they have the option to seek for help in Canada so they can make the decision of whether or not to stay in their intimate relationships.

Safety programs should inform immigrant women about their basic rights to stop violence (e.g., police support, protective orders) and access to children custody. In addition, service providers should conduct risk assessment, such as Danger Assessment (DA-I) or PATRIARCH, more often to try to identify risk for domestic homicide among immigrant women considering their heighten vulnerability. Clarifying to immigrant women about their risks and rights is essential so that they are not deceived by their abuser and become afraid to make the necessary decisions to ensure their safety.

Information on where to turn if a victim needs assistance should be made available starting at all airports across Canada to supermarkets, pharmacies, public spaces, public transportation, work-places, schools, and universities. Additionally, it is essential that the key information is short and clear (i.e., so that the victim can quickly read it), and available in several languages (i.e., at least in the top fifteen source countries of immigration to Canada). Safety planning, as an important risk management, should also consider immigration status and language limitations since these aspects may impact victims' access to service providers. The disclosure of multilingual information and the presence of translators or speakers of the immigrant victim's native language in support centers are elements that encourage their willingness to tackle abuse.

Prevention strategies should focus on the promotion of safe environments for immigrant victims of domestic violence. In public agencies, for example, it is necessary to create private rooms to collect information in a sensitive and discreet manner from immigrant women who may be victims of domestic violence (e.g., legal system, passport services). Furthermore, public servants who will assist immigrant victims of abuse must be trained in advance to understand the difficulties and hurdles they face. In order to provide a more accommodating service, the extension of deadlines and the exemption of some documents could be analyzed on a case-by-case basis depending on the obstacles identified.

This analysis uncovers the complex challenges faced by immigrant and refugee women in Canada, illustrating how these hurdles heighten the risk of domestic violence. Using the social ecological model, the study identifies a harrowing reality for immigrant victims where cultural isolation, language barriers, systemic failures, and patriarchal norms interlace to perpetuate abuse and hinder access to support. Addressing this issue comprehensively demands a collective effort involving culturally-sensitive approaches, differentiated and intersectional access to information, policy changes, enhanced legal protections to foster an environment where immigrant and refugee women can break free from the cycle of abuse and envision a life of safety, empowerment, and dignity in their adopted home.

8. Final Thoughts and Conclusion

I am an immigrant woman in Canada. I came to Canada from Brazil as a master's student, but during my stay my husband applied for permanent residency along with me and our son as his dependents and our application was approved. We became all

permanent residents of Canada in 2024, a first step to be able to apply to Canadian citizenship. Thus, using the lens of an immigrant woman I can feel firsthand some of the obstacles that an immigrant woman encounters upon arriving in Canada, regardless of whether she faces domestic violence or not, such as cultural isolation, language limitations, discrimination and belonging to a patriarchal culture of origin.

From my perspective as an immigrant woman, even though I have never experienced domestic violence, challenging factors such as the cultural isolation were felt similarly. In the first months of my stay in Canada I felt extremely isolated and thought several times about returning to my home country. The absence of family, long-time friends and colleagues sharing the same language, culture and the challenges of living abroad were issues that lead me, as an immigrant woman, to homesickness, confinement and at some point to the onset of depression. However, although I experienced this situation, I always had the choice of returning to my home country or relying on my partner to overcome this cultural isolation. On the other hand, I could understand that immigrant victims of domestic violence face additional obstacles because, in addition to this scenario and the abuse endured, they often do not have either the autonomy to decide to return to their country nor can they evidently find support in their oppressors.

I experienced some communication difficulties due to the language barrier, just like some of victims who were interviewed. I felt firsthand the difficulty of having to translate words and expressions before saying them, of missing words in the middle of speeches and papers and having to turn to someone to help me, of not understanding jokes, of feeling out of place in several situations by simply not understanding what people were talking about. Due to my particular challenges, I could realize that

immigrant and refugee women are probably much smarter in their mother tongues and that language limitations in Canada considerably reduce these women's ability to demonstrate their potential and freedom to be who they really are. Language limitations among immigrant and refugee victims of domestic violence not only affects the socialization of these women but also literally silences the ongoing violence, making these vulnerable victims increasingly held hostage by their abusers.

I also went through discrimination as an immigrant in Canada. Just like the interviewees' experiences when seeking help from formal sources, no one ever said a word about it. But discrimination is something we can feel or perceive when we are being seen through judgmental eyes, as if we are always being judged by our accents, our dress, our behaviors, our food, or our immigration status. I was hindered from adopting a kitten at an adoption fair because they made so many demands on me – and only on me – that it made adoption impossible at that time. I cannot imagine any other reason why I was hampered from adopting a kitten other than my immigration status, especially because I could easily adopt a kitten from another shelter in the same day. Given this sad occasion, I believe that discrimination against immigrants in Canada is mostly veiled and disguised as well-meaning (e.g., they said that the uncountable requirements were for the kitten's safety – except that I know that some requirements were made at that moment exclusively for me).

Because I come from a country whose culture is still rooted in patriarchy, I can understand the challenges of being a woman in a male-dominated society. In August, 2023, the Brazilian Supreme Court had to intervene and ban a defense thesis called self-defense of honor previously used by men when trying to justify why they had murdered their partners. This form of crime is known as honor killing and the jury, representing

the Brazilian society, was acquitting these domestic murderers because they understood that in some occasions these killings were justifiable (e.g., when a woman was accused of cheating on her partner). In other words, women who did not meet the standards of behavior expected by society could be easily discarded with no penalty for their murderers.

Patriarchal cultures assert a huge impact on immigrant women's lives. Belonging to a sexist and misogynistic society allowed me to take a comprehensive approach on the dilemmas faced by a woman living in a society founded on the assumption of male superiority. Given my patriarchal traditions, I could feel up close why immigrant women from similar patriarchal cultures often endure the abuse and why seeking help is a hard step: they are used to never being heard. Social tolerance of male violence, lack of understanding about their hardships and fear of reprisals dictate women's behavior and limit them from living their lives to the fullest.

During my research I was pleasantly surprised by the vast information available in Canada to assist immigrant victims of domestic violence. The official website of the Government of Canada (canada.ca) has valuable information available about help lines, victim services, provincial supports and strategies to help immigrant women who are victims of domestic violence, including a temporary resident permit (TRP). Additionally, the Canadian website has shortcuts to allow the victim to quickly redirect the page to Google.ca and in case the abuser monitors the computer, the victim can also quickly delete their browsing history by a single click at the website. The line for obtaining information about the permanent residence process for immigrants (Immigration, Refugees and Citizenship Canada – IRCC) also offers redirecting the call for victims of domestic violence as one of their first options. My only criticism is that

such information is only available in English or French, which limits immigrant victims who cannot speak either of these languages.

The social ecological model allowed me to address my first research question and helped me to understand the challenges of immigrant and refugee women from their experiences as survivors of severe and life-threatening domestic violence in Canada. My research disclosed that the key environmental aspect that links all dimensions studied, for its deep impact on the actions of immigrant and refugee women who face domestic violence, is these populations' cultural background. Unfortunately, the patriarchal traditions of immigrant groups can become a burden upon arriving in Canada when these women experience abuse. Given the cultural isolation, discrimination, linguistic limitations, unpreparedness of institutions to accommodate these culturally diverse populations, and limitations due to a cultural background based in patriarchy, seeking help may not be an option at first. It is possible that the immigrant woman will need to travel a long journey before she figures out that she is being abused and that Canada can provide her with the means to get out of this situation. Therefore, it is necessary to adopt a culturally comprehensive analysis in regard to the hurdles experienced by this vulnerable population.

Regarding my second research question, the survivors' experiences underline the importance of culturally-sensitive approaches to inform victims and prevent domestic violence and homicide. Specific programs are recommended to clarify the concepts of safe dating and healthy relationships, along with providing counseling and emotional support. Women who belong to a patriarchal culture that could hinder them from recognizing abuse would benefit from these programs. Empowering immigrant victims with knowledge of their rights, including police support and protective orders, is another

strategy suggested to prevent manipulation by abusers and to enable informed decisions about their safety. It is also relevant to address the need for easily accessible information about where victims can seek help, particularly in highly frequented places, and stresses the importance of clear and multilingual communication to encourage victims to report abuse. Additionally, creating private spaces in public agencies for discreet information gathering from potential victims and training public servants helps to understand the challenges faced by immigrant victims while considering flexible procedures on a case-by-case basis.

The strengths of this study include perspectives of diverse groups of immigrant and refugee victims of domestic violence across Canada through data collected from the CDHPIVP. In addition, it encompasses immigrant populations with diverse cultural backgrounds, educational levels, and ages, thus reflecting the breadth of diversity observed in existing literature. This diversity enables comparisons of domestic violence experiences among immigrants from different cultures.

There are also some limitations on my research. This study relied on self-reported data and is therefore limited by the use of secondary data, retrospective bias, the willingness of participants to disclose information, and their proficiency in English, given that all participants were immigrant or refugee women. Additionally, the research exclusively focuses on heterosexual immigrant women, thus not including LGBTQIAP+ groups. The immigrant women included in the study were also limited to those residing in Canada. Finally, the study solely incorporates qualitative research, potentially overlooking valuable insights that quantitative studies could offer.

To conclude, in this research, conducted from the unique perspective of an immigrant woman in Canada, a profound understanding of the challenges faced by

immigrant and refugee women who are survivors of severe domestic violence is illuminated. Drawing on immigrant and refugee victims' experiences, the study underscores the deep impact of cultural background on these individuals' lives and interconnects the dimensions of the social ecological model such as cultural isolation, discrimination, language limitations, and the influence of patriarchal norms. The research discloses the complexity of these challenges and the delayed recognition of abuse, ultimately emphasizing the necessity for a culturally comprehensive approach in addressing these issues. In addition, the findings provide valuable insights for culturally-sensitive strategies and interventions to prevent domestic violence and promote immigrant women's safety, including programs on safe dating, awareness of rights, accessible information dissemination, and training of public servants. These conclusions not only enrich our understanding of immigrant women's experiences but also offer actionable recommendations to create safer and more inclusive environments for these vulnerable populations.

9. References

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10. Appendix



SURVIVOR INTERVIEW GUIDE

Notes for the interviewer

Interview Goals:

- To use a narrative approach so that the research participants can share their story without our asking (only) specific questions about risk and safety.
- To invite research participants to reflect on and share their experiences, and describe their efforts to assess/manage risk and/or plan/enhance safety.
- To learn about victims' help-seeking behaviours, barriers to seeking help, and the kind of help that may have been more helpful.
- To allow participants' experiences of risk/safety to provide context for the risk factors that we identify in the CDHPIVP database and Key Informant interviews.

Framing:

Focus is on actions taken and/or strategies (used by victims on their own, by formal services/systems/supports, and/or with informal supports) aimed at managing risk and enhancing safety rather than the actual violence itself.

Hi, my name is
Thank you for agreeing to participate in this research interview about risk assessment, risk management and safety planning regarding domestic violence. This interview is being conducted
as part of the Canadian Domestic Homicide Prevention Initiative with Vulnerable Populations. The Co-Directors are Dr. Peter Jaffe and Dr. Myrna Dawson, and the Co-Investigator for this region is

This interview asks about what you did to try to stay safe or reduce risk when faced with a range of harmful behaviours by an intimate partner. Some questions I will ask may trigger emotional responses. If you find that the things you talked about during this interview leave you feeling unsettled and is affecting your well being, we recommend that you seek assistance through your physician or nurse practitioner. We are also providing you with a list of local support services.

Before we begin, I want to make sure we have gone through the Letter of Information and Consent Infographic and that you have had an opportunity to have any questions addressed.

Prompt: Review the Letter of Information and Consent Infographic.

Do you have any questions? Do I have your permission to record your consent now and then begin the interview?

YES NO

If no, explain that recording their consent and interview is a criteria to participate in an interview. If they are not comfortable being recorded, thank them for their time.

Now that it is recording, do you agree that:

 You have been given the opportunity to read the Letter of Information and the Consent Infographic describing this research project.

YES NO

o All of your questions have been answered.

YES NO

o Agree to participate in this research project and to have the interview recorded.

YES NO

o Agree to allow the insights from your interview to be used in reports and publications with your personal identifying information removed.

YES NO

This interview will take about one to two hours to complete. You are free to withdraw from the interview at any time. If we run out of time, and you wish to complete the interview, do I have your permission to contact you at a later date to complete the interview?

YES NO

Thank you.

INTERVIEW TEXT: INTRODUCTION

Now that we have reviewed the consent form, I would like to introduce the interview in a bit more detail. I understand that you experienced high-risk domestic violence, where you feared for

your safety, the safety of your children and/or family. I realize it may be difficult to talk about these experiences, so direct input from a survivor like yourself will be a very valuable part of this project so thank you for taking to the time to talk to me today.

PAUSE

I am not going to be asking specific questions about the violence you experienced, but as you answer the questions, if the violence comes up, that's fine. As we talked about in the consent process, we'll be exploring issues related to risk and safety.

We want to hear about what people do to try to stay safe or reduce risk when faced with a range a harmful behaviours, including physical or sexual violence, or emotional abuse. We understand that every person's situation is different.

I am going to invite you to tell me a few stories about times that you did something to feel or be safer. This could include something you did on your own or a time when you looked for support elsewhere. The supports might have been informal, such as family and/or friends, or more formal supports from agencies and/or community services.. You can tell me about times you reached out to services, family, friends, or co-workers – whatever experiences come to mind.

I am going to ask for a few different stories depending on the time and how long you would like to continue the interview. For each story, I am going to ask you some questions about the story, and what the story meant for you.

Do you have any questions before we begin?

CONTEXT

First off, can you tell me a little about yourself and the experiences that brought you to participate in this study?

Note for interviewers: This question is aimed at having some context about the violence but there is no need to probe for details. Remember, the interview is not specifically about the violence. Just let the participant say as much or as little as they would like about the violence.

STORY PROMPT

I'm going to invite you to think of a specific time when you did not feel safe. I'm interested in hearing what you did to feel or be safer. Can you describe what happened?

Note for interviewers: This question is the "story prompt"—it's intended to solicit a narrative or an anecdote about something that happened. We hope that the prompt will solicit just one specific experience but sometimes participants will tell several stories in one. You should try to parse out individual stories and ask the subsequent questions about each one. If you do get more than one story here then follow up when the participant seems to have finished talking by saying something like the following: "I am hearing a few distinct stories here so let's see if we can talk about them each individually —it sounds like there is one story about [fill in the details], another about [fill in the details] [and so on . . .]." Then let the participant know that in your next questions you would like to talk about each story, one at a time.

You may have to ask questions to keep the narrative going (e.g., "and then what happened?" or "can you describe what happened next or what you did next?")

STORY EXPLORATION

Note to interviewers: Ask the following questions about this specific experience.

What were you feeling during this time? What emotions do you remember?

In your story, you talked about [mention the actions described]. Would you say these actions you described were more helpful or unhelpful in reducing your risk or enhancing your safety?

- If these actions were more **helpful** at reducing risk or enhancing safety, ask: What about these actions do you think made you feel safer and/or reduced your risk?
- If these actions were more **unhelpful** in reducing risk or enhancing safety, ask: How would you change this story to make you feel safer and/or reduce your risk?

Was there anyone else you think should have been involved at this point?

• *If yes:* Who should have been involved? How do you see that they could have become involved and what should (or could) they have done?

Based on this story, what advice would you give to another person who is in similar circumstances as you?

Based on this story, what advice would you give to the people involved around providing effective support to reduce risk and enhance the safety of someone in similar circumstances as you?

- *Prompt for formal support services:* For instance you mentioned [agency/service involved in case] was involved?
- *Prompt for informal supports:* For instance you mentioned [e.g., family, friend, neighbour] was involved?

STORY INTERPRETATION

The next question is to help me understand what these actions meantto you. I am wondering, if you were going to write about the actions you just described, what would the title be? The idea is to think of a way to sum up the story you've just shared in a few words. You could try to think about a book title, a song title, or maybe a newspaper headline. Or even a hashtag.

Note for the interviewer: This question is designed to gain an understanding of the research participant's interpretation of their own story. This follows principles of narrative research whereby we try to avoid asking about opinions and instead probe the participant's interpretation of their own story. We are interested in what they think their story is about. Some people may find it difficult to come up with a title, while others really like thinking about this question. Be sure to pay attention to whether they are struggling to think of something and to let them know that it's sometimes hard to do this. Let them move on to the next questions and that they can let you know anytime if they think of something.

REPEAT STORY PROMPT, EXPLORATION, AND INTERPRETATION

Note to Interviewer: Repeat the story prompt to generate another action and ask the follow up exploration and interpretation questions. The questions could be repeated as time and energy allows (approximately 2-3 stories or up to 90 minutes).

Thank you for sharing these stories with me.

Note to Interviewer: Ask the question below if all the stories were helpful or if they were all unhelpful. We want to make sure we capture both positive and negative stories, if they had both kinds of actions, so we can learn about effective strategies as well as missed opportunities.

The stories you've shared reflect [helpful/<u>unhelpful</u>] actions. I want to make sure I ask about actions that were both helpful and unhelpful. Were there any [helpful/unhelpful] actions that you'd like to share?

- If yes, repeat questions regarding this action.
- If no, invite another story, whether helpful or unhelpful.

OVERALL EXPERIENCE

I have a few questions about your actions as a whole:

What overall advice would you give to another person in similar circumstances as you to help them stay safe?

What advice would you give to a person who was trying to help someone in your place to reduce/manage the risks and/or enhance their safety?

Prompt if needed: I'm thinking here of informal supports, like family and friends [or others referred to in the interview], or more formal supports, like [say formal supports referred to in interview but if no formal supports involved, say police or social workers as examples].

If you could make two or three changes to help support people going through what you went through, what would they be?

Thank you for sharing your advice and ideas for changes that would help support people going through what you went through. Your advice and suggestions are really valuable.

DEMOGRAPHICS

□ Man

I'm going to now ask some demographic questions that will help me understand a bit more about you and your circumstances at the time of the actions you described. The information we're asking here is for background purposes only. We won't use any identifying information in any reports, articles or presentations. We would just like some demographic information about the people whose stories we have heard.

Note to Interviewer: Ask all questions as open-ended questions. Options below are included in case the participant needs options to answer the question and so you can check the appropriate response(s) instead of writing out the answers to each question. Check more than one box if needed.

Y	ou (can	choos	se not	to	answer	any	question	that	makes	you	uncom	fortab	ole.
---	------	-----	-------	--------	----	--------	-----	----------	------	-------	-----	-------	--------	------

What year	were you born?		
What is yo	our gender?		
	Woman		

	Dating Married/common law and living together Married/common law but not living together Divorced/separated Other
What is yo	our current relationship with the person who harmed you?
	Married/common law and living together Married/common law but not living together Divorced/separated Other
actions you	your relationship with the person who harmed you during the time of a described? Dating
	Freiened not to answer
	West Asian (e.g. Iranian, Afghan, etc.) Other, please specify: Preferred not to answer
	East Asian (e.g. Chinese, Japanese, Korean) South Asian (e.g. East Indian, Pakistani, Sri Lankan, etc.) Southeast Asian (e.g. Vietnamese, Cambodian, Laotian, Thai, Filipino, et
	Latin American Arab Foot Asian (e.g. Chinasa, Japanesa, Koraan)
	White/Caucasian (Including European decent) African, Caribbean or Black
	Indigenous (First Nations, Metis, Inuit) White/Caucasian (Including European decent)
Which eth	nic or cultural group do you identify most with?
	Preferred not to answer
	Non-binary Two-Spirit Participant identified as:

-	=	
	Yes	II 171 0
	0	How many children?
	0	What were their ages at the time of the stories you described?
	0	Who were they living with at the time of the stories you described?
	No	
the name of	f your ci	unity and province did the stories you described take place? As a reminder, ty/community will not be identified in any reports or papers. You can also al community/farm or city if that is more comfortable.

Did you have any children at the time you were being harmed?

PARTICIPATION EXPERIENCE

We are coming to the end of the interview. These last questions ask about your experience doing this interview and participation in this study.

- 1. How do you feel about participating in this research study, now that you have completed the interview?
 - *Probe:* Were there any questions that prompted negative feelings or difficult emotions for you? Were there any positive feelings that came up?
- 2. If you had known in advance what participating in this research interview would feel like, would you still have agreed to participate? Please explain.

We have now come to the end of the interview. We appreciate you taking the time to participate in an interview for this research project. Your contribution is important and will be used to educate service providers and the wider community on helping other people who are experiencing domestic or intimate partner violence. Thank you.