

Understanding the Role of Culture in Domestic Violence: The Ahimsa Project for Safe Families

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Domestic violence affects women across all racial, national, social, and economic groups. In particular, immigrant and refugee families are at risk for domestic violence because of their migration history and differences in cultural values and norms. The Ahimsa for Safe Families Project is an innovative collaborative project that addresses domestic violence in immigrant and refugee communities in San Diego. The project is designed to increase awareness of domestic violence among Latino, Somali, and Vietnamese communities and to develop and implement culturally specific programs aimed at each community. Here the authors describe the Project's needs assessment and community dialogues that guided the development of specific interventions; present the lessons learned; and describe replicable, culturally specific prevention strategies utilized by the Project.

KEY WORDS: cultural-specific interventions; domestic violence; family violence; refugee/immigrant.

INTRODUCTION

Domestic violence affects women across all racial, national, social, and economic groups. The State of the World Population estimates that 33% of women worldwide suffer physical or sexual abuse from an intimate partner or family member (1). In the United States, 25.5% of women in a national sample reported an act of violence by an intimate partner including rape, physical assault, and stalking during their lifetime and 1.8% of women reported intimate partner violence in the past year (2). Six

percent of women in California reported physical violence perpetrated by an intimate partner in the past year (3).

Domestic violence is linked to a myriad of health consequences, such as physical injury, gynecological problems, and adverse pregnancy outcomes (4–6). Domestic violence is one of the leading causes of injury to women, accounting for approximately one third of all injuries not involving a motor vehicle (7). The World Development Report (8) reported “women ages 15–44 lose more Discounted Health Years of Life to rape and domestic violence than to breast cancer, cervical cancer, obstructed labor, heart disease, AIDS, respiratory infections, motor vehicle accidents or war.” The World Health Organization (9) reported that 40–70% of female homicide victims were killed by a current or former intimate partner. Women in the United States have struggled for over three decades to address factors in the dominant culture that continue to promote violence against women and stigmatize those who speak out against violence and the subordination of women and children. The battered women's movement began as a grassroots, self-help effort that emerged from

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the civil rights movement (10). Many of the pioneers in this arena were white, upper and middle class women, thus, the rhetoric and services developed to address domestic violence were shaped by the cultural experiences of these women. These women worked together to assess the gaps in services and the societal factors that perpetuated battering in the home. Services and interventions were developed, such as shelters and hotlines, and these practices became the standard. However, even in the early days of the movement, women of color stated that their experiences of male violence are different than those of women in the dominant culture. In a few cases, groups of women of color were able to develop services to address their specific needs. For example, in 1974, Casa Myrna Vazquez was founded in Boston by a group of multiracial women who wanted to provide bilingual services to Latinas using a community-based rather than feminist approach (10). Specialization in the field also brought more standardized practices and beliefs that are based on Western schools of thought. Although domestic violence services meet the needs of many women who share the cultural values, background and experience of the dominant (white, middle class) culture, women from other racial, ethnic, socioeconomic populations often cannot access and utilize these services effectively (10–16).

Immigrant and refugee families are particularly at risk for domestic violence because of their migration history and differences in cultural values and norms. Heise and Ellsberg (17) noted that in many cultures, violence against women is often justified when women do not follow traditional gender roles or norms. Differences between the cultural values of a family's native country and the United States appear to cause a great deal of conflict in immigrant/refugee families, especially as women and girls acculturate and try to shift their roles in the family. Espin (18) states

Groups that are transforming their way of life through a vast and deep process of acculturation focus on preserving tradition almost exclusively through the gender roles of women . . . Gender becomes the site to claim the power denied to immigrants by racism. The control of women becomes the means of asserting moral superiority in a racist society. As a consequence, women of all ages in immigrant families face restrictions on their behavior . . . They are often forced to embody cultural continuity amid cultural dislocation . . . For people who experience a deep lack of control over their daily lives, controlling women's sexuality and

behavior becomes a symbolic demonstration of orderliness and continuity and gives them the feeling that not all traditions are lost. This is why women themselves frequently join in adhering to traditions that, from the point of view of outsiders, appear to curtail their own freedoms and opportunities for self-fulfillment. (p. 7)

Findings from the 1999 National Violence against Women Survey indicated that Asian women were least likely of all ethnicities to report physical violence (19). Not only is domestic violence an underreported crime, but there have been no studies thus far with a large enough sample of Asian Americans to estimate the prevalence of domestic violence in the Asian American community. Thus, it is difficult to accurately assess the incidence of domestic violence in Asian American communities. Shetty and Kaguyutan reported that battered immigrant women face many barriers to seeking and receiving assistance. The barriers are cultural, economic, practical as well as legal. They also stated that many immigrant Latinas may be underreporting domestic violence because of fears of deportation (20). The intersection of cultural expectations of gender roles, migration history and religious beliefs create a disparity in the experience, definition and reporting of domestic violence among immigrant and refugee women as compared to the broader dominant culture in the United States.

This paper describes an innovative collaborative project that addresses domestic violence in the immigrant and refugee communities in San Diego: *The Ahimsa Project for Safe Families*. The project was designed to increase awareness of domestic violence in the Latino, Somali, and Vietnamese communities utilizing a needs assessment on attitudes and beliefs about domestic violence and convening a series of community dialogues to foster a deeper understanding of the attitudes and beliefs identified in the needs assessment. We describe the needs assessment and community dialogues process and present several of the innovative, culturally specific prevention strategies currently employed by Ahimsa Project staff.

BACKGROUND

The Ahimsa Project is located in the Mid-City region of the City of San Diego. Mid-City, San Diego, is an area with a large percentage of immigrants of different origins. Mid-City is a home to large communities of refugees from East African, Middle

Eastern, and Southeast Asian countries, as well as immigrants from Mexico and Central America. This region is also one of the most densely populated (13% of the city’s population live in 4.62% of the city’s land mass), culturally diverse and economically depressed communities in the City of San Diego. According to the San Diego Domestic Violence Council, there were 25,000 domestic violence calls to the police department in fiscal year 1998–1999. The San Diego Police Department reports approximately 25% of the city’s domestic violence calls originate in Mid-City.

Culture and how it interacts with domestic violence is the central theme for the Ahimsa Project. Ahimsa is a sanskrit word for nonviolence or nonharm. From the outset, this theme infused the mission, the process and final outcomes of the project. Culture and its relationship to domestic violence influenced our initial decision to serve immigrant communities and informed the hiring and training of the Ahimsa Project’s outreach staff. We chose the Somali community because they had an infrastructure in place for social service provision that served as a good access point for the community. We selected the Latino and Vietnamese communities because of their large demographic presence in the Mid-City neighborhood. We recruited outreach workers from the existing staff within Social Advocates for Youth, San Diego (SAY, San Diego) , a large social services agency and an Ahimsa project partner with a strong track record for working with and hiring from within our target populations.

Cultural norms and the stigmas attached to domestic violence within the Vietnamese, Latino, and Somali communities were identified in the very first team meeting with outreach staff and throughout the training process. During the first team meeting, the outreach staff told the project director that Mid-City was so dangerous they would only travel in pairs by car and in groups of four or more if walking. Even more importantly, they said they would not talk about the issue of domestic violence within their communities because they would be ostracized. We quickly learned that we needed to reframe the issue of domestic violence with outreach staff. After looking at the religious perspectives of all three communities, and researching international approaches to domestic violence, we decided to use the concept of *family harmony* as the key to our staff training, intervention, and prevention efforts.

NEEDS ASSESSMENT

The Ahimsa Project Community Advisory Board members are service providers with experience in domestic violence or immigrant/refugee populations, are in law enforcement, or are members of the staff or faculty of our local universities. The Advisory Board is responsible for providing guidance in the implementation of the project and overseeing project activities. The project staff, with the support of the Community Advisory Board, decided to conduct a comprehensive needs assessment on domestic violence in order to capture the varied perspectives of the three communities, to examine generational and gender differences, and to examine community attitudes and beliefs related to domestic violence. This decision resulted in the design of a needs assessment that consisted of 120 interviews, even though the grant funding for the project provided support for only 25 interviews.

Over a period of 5 months a team of bilingual, bicultural outreach workers and the Ahimsa project manager conducted interviews with 40 members from each ethnic community (10 men, 10 women, 10 boys, and 10 girls from each ethnic community) in the participant’s language of choice (a total of 120 interviews). Participants were between 12–68 years of age. Participants were recruited through community groups and community contacts. Participants were also asked if they had friends or family members who were willing to be interviewed. Table I shows the number and gender of participants interviewed during this process. The Community Advisory Board reviewed and approved a structured interview guide developed by the outreach team. The interview guide was then translated into Spanish, Vietnamese, and Somali. The interviews were conducted in the language of choice for the participant and typically took an hour to complete. The interviews included a series of vignettes portraying typical domestic violence scenarios in addition to questions related to conflict resolution in the family. Vignettes were used to create

Table I. Number and Gender of Participants Interviewed During the Needs Assessment

	Latino	Somali	Vietnamese	Total
Women	10	10	10	30
Girls	10	10	10	30
Men	10	10	10	30
Boys	10	10	10	30
Total	40	40	40	120

an environment where interviewees felt comfortable discussing a very sensitive topic. By describing a hypothetical situation, rather than asking a pointed personal question, such as “are you a victim of domestic violence?” the interviewees could reflect and respond to the issue without fear of repercussions.

In addition, project staff conducted seven focus groups and 20 interviews with social service providers from domestic violence/sexual assault services, law enforcement, and immigrant/refugee services. These interviews included questions on resources for each of the target communities as well as questions related to domestic violence in these communities.

Completed needs assessment forms were translated, analyzed, and interpreted by the outreach team, project manager, and Community Advisory Board members. The needs assessment findings were used to guide the development and implementation of prevention activities. It is important to note that each step of the process allowed those working with the data to filter the information through their own cultural perspectives and experiences. For example, the interviews were conducted in the interviewees’ native languages and then translated into English, so when issues or concepts arose that were not easily transferable among the languages, the translators used discretion in translating.

PRELIMINARY FINDINGS

All three communities reported domestic violence as a concern and most participants believed that domestic violence occurred in their community. The American definition of domestic violence is very different from the definitions of domestic violence in the three target communities. The American definition stipulates that domestic violence occurs between domestic partners and encompasses verbal, physical, emotional, sexual, and financial abuse. The Somali, Vietnamese, and Latino communities’ definition of violence in the home includes intergenerational as well as partner violence, and is primarily focused on physical violence. In many of the interviews, focus groups and community dialogues, participants talked about intergenerational conflict and the differences in child-rearing practices that exist between their native culture and American culture. Parenting skills, in particular, including culturally appropriate alternatives to physical punishment, were identified as a needed service by both community members and social service providers. All three groups reported linguistic isolation and a lack of bilingual/bicultural

service providers as significant barriers to accessing services.

Service providers frequently spoke about “barriers to accessing services” for traditionally underserved populations, such as communities of color, with cultural issues emerging time and time again as a key barrier to both prevention and intervention services. We found that many of the barriers to addressing the problem of domestic violence in the Latino, Somali, and Vietnamese communities in San Diego are the same barriers that are encountered by people born and raised in the United States: in particular, the cultural traditions and norms that reinforce male dominance over women and children through coercion or force. Schechter (10) describes U.S. attitudes toward violence against women in the early days of the battered women movement “[There is] nothing wrong with battering a woman unless the violence went too far. Until the 1970’s ‘mild’ forms of chastisement were still considered necessary and even helpful to keep a woman in line.” Men’s violence against women was viewed as a way of ensuring that women did not overstep culturally sanctioned gender roles such as maintaining tranquility in the home, meeting male expectations for completing household tasks, and preserving the male role as head of household.

Following is a summary of the specific attitudes, beliefs, and needs about domestic violence and family harmony of the Somali, Latino, and Vietnamese communities studied in San Diego.

SUMMARY OF KEY FINDINGS FROM THE SOMALI COMMUNITY

Definitions of domestic violence differ between Somali and American cultures. In Somali culture, domestic violence is limited to physical violence and includes violence between all family members, whereas in American culture, domestic violence includes physical, verbal, emotional, sexual, and spiritual abuse and is limited to violence between intimate partners. Although Somali community members indicate that physical violence is viewed as an unacceptable means of conflict resolution, it is viewed as an acceptable means of maintaining the patriarchal structure of the family. Changes in gender roles and responsibilities since resettling in the United States are cited as a major source of conflict within the family. The power dynamic in the family changed when families settled in the United States because government aid checks are issued to

Table II. Summary of Key Findings from the Somali Community

Community	Issue	Behavior	Culturally specific strategy
Somali	Acculturative stress	<ul style="list-style-type: none"> • Increased conflicts as women and children acculturate 	Help women develop economic independence; educating men about American laws
	Gender equity	<ul style="list-style-type: none"> • Men leave their families when there are conflicts • Conflict resolution based on extended family, which is no longer available • Men divorce wives for becoming too “Americanized” • Men feel decreased worth in family as women begin to work outside home • Women and children use 911 as a threat • Runaways 	Parenting classes Developing understanding of Islamic teaching
	Youth violence and delinquency	<ul style="list-style-type: none"> • Gangs 	
	Economic stressors	<ul style="list-style-type: none"> • Employment opportunities • Hijab • Training/education 	

Somali women. Men report feelings of helplessness and uselessness because they have lost their role as the breadwinner and many try to regain a sense of control through violence.

A Somali woman appears to be responsible for maintaining harmony within the family by respecting and supporting her husband, obeying his wishes, and not angering him. Physical violence perpetrated by the husband is justified in situations where the wife apparently defied the husband’s wishes. It is viewed as the husband’s right to “teach his wife a lesson.” In fact, there is no term for domestic violence in the Somali language. Both men and women report that it is a common belief among women that if a husband does not beat his wife, it means he does not love her. Most Somalis are Muslims, and Islamic traditions are repeatedly cited as a means of reducing tension in families and, subsequently, reducing the incidence of domestic violence. In this community, it is often very difficult to differentiate between religious and cultural traditions because religion is such an integral part of the community.

In addition to Islamic traditions, family members and community elders are frequently identified as a resource for resolving conflict between spouses. Traditionally, the wife would consult with the men in her family and then the men would talk to the husband. However, as refugees fleeing a lengthy civil war, many Somali women in the United States do not have access to this type of family support. During the resettlement process, refugees receive information about American laws related to domestic violence and women are told to call the police to

report violence in the home. Somali community members report that men can divorce their wives if they become “too Americanized.” Involving outsiders in family matters is deemed “Americanized” and is an appropriate reason to seek a divorce. Thus, many women are trapped in violent situations with no culturally viable means of resolving the problem. Table II shows a summary of key findings from the Somali community.

SUMMARY OF KEY FINDINGS FROM THE VIETNAMESE COMMUNITY

The Vietnamese community sees domestic violence as a private family matter and sharing information about the family with outsiders is viewed as inappropriate. Violence, ignoring problems, and seeking outside assistance (court, counselors, police), are cited as unacceptable ways of resolving conflict. Shame appears to be a major barrier to accessing services. In addition, the responses to the vignettes in the needs assessment place the responsibility for maintaining peace and family harmony on the woman, who accomplishes this task by obeying and attending to the needs of her husband. Strong family ties and respect for family members are cited as ways of promoting harmony in the family. Acceptable strategies for conflict resolution include discussing problems in a peaceful manner and listening to the advice of parents and elders.

Our needs assessment revealed that in the Vietnamese community, domestic violence is primarily

Table III. Summary of Key Findings from the Vietnamese Community

Community	Issue	Behavior	Culturally specific strategy
Vietnamese	Youth violence and delinquency Gender equity Economic stressors	<ul style="list-style-type: none"> • Gangs • Runaways • Gambling, sending money to relatives 	Buddhist and Christian writings, hire appropriate outreach worker fits with cultural values of authority and knowledge, providing services to youth

linked to economic stressors. Our findings are similar to that of Bui and Morash (12), who found that “For Vietnamese Americans, women’s economic contributions could not reduce husbands’ dominant positions and violence, but economic hardship could prevent women from leaving an abusive relationship.” Vietnamese participants reported that sending money to family members in Vietnam or sponsoring family members to the United States are major sources of tension. In addition, they repeatedly identified excessive gambling as a cause of tension in the family. Both men and women gamble, and many spend their families’ income either in the casinos or in underground gambling rings. Robberies and burglaries are also linked to gambling. Participants reported that people are often followed home after a large win at a local casino and robbed or burglarized. Table III shows a summary of key findings from the Vietnamese community.

SUMMARY OF KEY FINDINGS FROM THE LATINO COMMUNITY

In the Latino community, family traditions and celebrations, trust, and helping each other are reported as important ways of promoting family harmony. Communication between family members and leaving potentially volatile situations are viewed as acceptable ways of resolving conflict. Physical and verbal violence are considered unacceptable ways of

resolving conflict. Gender roles in this community appear to be slowly changing as families adjust to living in the United States. Men are starting to acknowledge that women may have more to contribute to the family than cooking, cleaning, and childcare. Women are asking for more equitable distribution of labor and decision-making in the household; however, they are still responsible for the vast majority of housework and childcare. Girls reported frustration related to the amount of responsibility they held in the household compared to their brothers.

Economics, immigration status, and substance use are frequently mentioned as causes of tension in the family. Several studies have found that these stressors put women at risk for domestic violence (21, 22). Women from the Latino community reported that immigration status is often used as a means of controlling them and ensuring that they do not leave abusive situations. For example, women reported that men often say that if their wives call the police, they will be deported. When compared to the Somali and Vietnamese communities, the Latino community appears to be more aware of the availability of domestic violence intervention services, but has a limited understanding of how to use the services and how to work with service providers. Language and cultural differences, fear of deportation, and the inability to effectively use identified services are significant barriers to access. Table IV shows a summary of key findings from the Latino community.

Table IV. Summary of Key Findings from the Latino Community

Community	Issue	Behavior	Culturally specific strategy
Latino	Gender equity Economic stressors Immigration status	<ul style="list-style-type: none"> • Runaways • Men are allowed to have several women. Women are supposed to accept this • Women’s role in the home • Employment issues related to immigration status and education/training • Threats using immigration status to keep women in abusive situations 	Educating women about their rights, parenting classes, help women develop economic independence, Christian writings

COMMUNITY DIALOGUES

The Ahimsa Project's needs assessment identified themes related to family harmony and domestic violence that were consistent across the Latino, Somali, and Vietnamese cultures. The Project developed and conducted a series of Community Dialogues based on these themes in order to gain a better understanding of the underlying causes of domestic violence and to guide the development of an outreach strategy that best addressed the needs of these communities. In preparation for the community dialogues, outreach team members developed and translated Dialogue Guides that were reviewed and approved by the Community Advisory Board. Outreach staff recruited participants through their existing social networks, leaders in the community and contacts with professionals in social service agencies. Each community dialogue consisted of 5–10 men, women, boys or girls from each ethnic community. Over a 6-month period, trained facilitators conducted these dialogues in the language of choice for participants and in a variety of easily accessible locations within the Mid-City community, such as the Mid-City Family Resource Center, temples, churches, social service agencies, and participants' homes. The facilitators made notes or audiotapes of each dialogue that they later transcribed and translated.

The six Community Dialogues served as vehicles for raising awareness of interpersonal violence, increasing our knowledge about each community and improving our ability to design and provide culturally appropriate services. In the Community Dialogues, participants from all three communities identified several major areas of need that impacted on family violence: 1) youth development, 2) parenting, 3) racial/ethnic conflicts, and 4) economic opportunities for women in order to promote self-sufficiency and address power imbalances that are based on economic dependence in domestic relationships. Community members were reluctant to discuss intimate partner violence, but eager to address family violence, which included violence between partners, other family members and youth violence. Community members made repeated requests for parenting classes that teach alternatives to corporal punishment, promote healthy communication skills, and provide information on culturally specific and appropriate youth activities. All three ethnic/cultural groups focused on positive alternatives for youth because of chronic problems with teens acting out at

school and in the community. For example, all three communities documented an increasing number of runaway girls and Somali teens recently formed two gangs.

NEED FOR CULTURAL APPROPRIATE INTERVENTIONS

Insufficient information still exists in the literature on domestic violence as it relates to the experiences of immigrant and refugee women (2, 23). As a result, it is difficult to develop culturally appropriate intervention programs designed to prevent domestic violence in these communities. In response to the information gathered in the Needs Assessment and Community Dialogues, the Ahimsa Project developed a series of culturally specific services. For example, Ahimsa staff developed and implemented a series of six parenting classes in each target community. The curriculum for the classes was developed over a 3-month period following the community dialogues. The curriculum was pilot tested on the outreach team. Then the outreach team recruited participants and implemented the parenting classes in their respective communities. In 2003, 280 Latinas and 328 Somali women participated in the Ahimsa parenting classes. Providing parenting education for our families is one approach to preventing domestic violence because parents who embrace nonviolence as a core value in interpersonal relationships and develop the skills to practice nonviolence with their children will also practice those skills in their marital relationship.

In response to requests from the Somali community for viable economic opportunities for women, and to additionally address the rising ethnic tensions between the Somali and Mexican communities in Mid-City, San Diego, project staff developed a collaborative project with the Rotary Club, Horn of Africa and the International Rescue Committee. This project offers sewing classes to Latino and Somali women. The goals of the project are to help women develop marketable skills, find employment in the garment industry or start a home-based business, and encourage cross-cultural communication. During the past year and a half, women from our sewing classes have developed a sewing co-operative, home-based businesses and created an environment where women from the two communities can work together to improve their skills and promote self-sufficiency.

LESSONS LEARNED

The needs assessment process clearly showed that to meet the needs of our target population we needed to take a more global approach to designing and/or implementing domestic violence prevention programs. The needs assessment demonstrated that a gap exists between current social service thinking and community thoughts about domestic violence. To bridge that gap, we needed to learn and understand the social and cultural norms of the three communities. In the development of our domestic violence prevention program, we decided to examine the underlying or root causes of interpersonal violence within the context of a family, community, and culture. We created opportunities for both community members and social service providers to explore and examine their own cultural values around domestic violence, which helped us arrive at a consensus that the family can be nurtured as the foundation for unity and peace. This led us to focus on *family harmony* and safety as the context within which to address domestic violence in the Somali, Latino, and Vietnamese communities of San Diego.

Hiring and training bilingual and bicultural staff from each target community contributed greatly to our ability to develop trust and build strong relationships with each ethnic/cultural group. Project staff spent time with community leaders and gatekeepers in a variety of settings and this has also contributed to the relationships that have developed through the course of the project. In addition, providing assistance outside of our scope of work helped us to build a reputation as a group that is responsive to and cares about the community. This has led to continued community participation in and support of project activities. For example, project staff provided translation services on a wide range of issues, including school and healthcare interactions for individuals in the community, and they attended a large number of community events. Project staff also served as advisors to youth organizations and participated in organizing culturally specific and appropriate youth activities.

CONCLUSIONS

The needs assessment identified six core issues underlying domestic violence in the three target communities: varying definitions of violence, specific definitions of family harmony, strict gender roles, varying conflict resolution strategies, cultural identity,

and spirituality. In addition, the assessment identified common barriers to accessing services, including lack of trust of social service providers, language, transportation, beliefs about family/culture, and lack of bilingual/bicultural staff.

Through the work of the Ahimsa Project, we learned that cultural values specific to each immigrant community must be identified and understood before you can develop effective interventions to prevent domestic violence. To facilitate any change in deeply embedded cultural values, we need to first identify those values and beliefs and understand how they influence the behaviors of the families we are serving. The process of learning about another culture requires communication between community members and social services providers that fosters trust, is nonjudgmental, and does not impose our own cultural values. Dialogue with community members allowed us to design program activities that are culturally appropriate and that address identified needs.

Much of the success of the project is due to the existence of strong relationships with community members, community leaders and other social service agencies. Our Community Advisory Board provided the project with the infrastructure, such as bilingual/bicultural staff and technical support, needed to support project activities as well as access to a broad array of community leaders. Hiring staff that are representative of the communities we serve provided us language capacity, existing networks within each community and a broad range of cultural perspectives. Community leaders provided project staff with access to community members by endorsing the goals and activities of the project and including project staff in a variety of community events.

Our work within patriarchal communities as domestic violence service providers emphasized the complexity of gender violence and revealed how deeply it is embedded within a cultural and social context. Much of the work of the Ahimsa Project has focused on examining and trying to bridge the vast gap between feminism and patriarchy in order to foster nonviolence within families and communities. As a result, the process we used to overcome the many barriers we encountered is one of the most important outcomes of our project. The lessons we learned about culture, gender, and violence, and the relationships that we developed by working collaboratively with our communities may open opportunities for other agencies to replicate the cultural specific intervention and prevention programs presented here.

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