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SOUTHEAST ASIAN IMMIGRANT WOMEN'S PERSPECTIVES  
ON DOMESTIC VIOLENCE

A dissertation submitted in partial fulfillment of the requirements for the degree of  
Doctor of Philosophy at Virginia Commonwealth University

by

PATAPORN SAENGKHIEW

B.S.N., Boromrajonani College of Nursing Buddhachinaraj, Phitsanulok, Thailand, 1986  
M.N.S., Chiang Mai University, Chiang Mai, Thailand, 1999

Director: Judith A. Lewis, Ph.D., R.N.C, F.A.A.N.  
Professor, Department of Maternal Child Health  
School of Nursing

Virginia Commonwealth University  
Richmond, Virginia  
December, 2006

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## **Abstract**

### **SOUTHEAST ASIAN IMMIGRANT WOMEN'S PERSPECTIVES ON DOMESTIC VIOLENCE**

By Pataporn Saengkiew, M.N.S., B.S.N.

A Dissertation submitted in partial fulfillment of the requirements for the degree of Doctor of Philosophy at Virginia Commonwealth University

Virginia Commonwealth University, 2006

Major Director: Judith A. Lewis, Ph.D., R.N.  
Professor, Department of Maternal and Child Health, School of Nursing

This study addresses the question, "What is the lived experience of Southeast Asian immigrant women who live in the United States related to domestic violence, including the relationships with their partners, their knowledge of domestic violence, and the existence of domestic violence in the Asian community?" Fourteen Thai women engaged in semistructured interviews during which they were asked to describe their experience. This study chose the phenomenological approach, using content analysis that identified six major themes representing essential aspects of the experience, as described by the participants: (a) Knowledge about Domestic Violence and Sources of Information, (b) The Experience of Domestic Violence, (c) The Existence of Domestic Violence among Thai Women, (d) Factors Considered to be Violence-protective, (e) Life as a Thai Wife, and (f) Ability to Perform Duties as a Woman. Ten of the participants had not experienced domestic violence by their husbands; two had been abused in previous marriages; one was currently being abused by her husband; and one had abused her

husband early in their marriage. The women defined domestic violence as abusive actions identified by physical, verbal, emotional, psychological, and sexual abuse, including assault and threatening behavior. The women's knowledge of domestic violence was based on personal experience, witnessing abusive behavior in other relationships, or reports in mainstream media sources. The study's findings confirm the existence of domestic violence in the Thai community. The participants identified the husband's infidelity as the main cause, followed by family background creating a generational chain of abusive behavior. Protective factors that prevent domestic violence are the husband's supportive characteristics, the wife's financial independence, and confidence in the U.S. legal system. Although the majority of the study participants did not experience domestic violence, they encountered various constraints, such as feelings of frustration and helplessness, attributed to the challenges of immigrant women adapting to a new society and culture. Despite limitations involving recruitment, this study expands the knowledge of domestic violence among Thai immigrant women, providing valuable insight for healthcare professionals interested in improving culturally sensitive resources for these women. The study's findings also provide important evidence that suggests the need for further research to examine domestic violence among Southeast Asian immigrant women living in the United States.

## CHAPTER ONE

### Purpose, Background, and Significance

Violence against women is a form of discrimination, a violation of human rights, and a major health concern all over the globe (United Nations, 2006; World Health Organization [WHO], 1997). It causes untold misery, cutting short lives and leaving countless women living in pain and fear, which prevents them from fulfilling their potential and, in turn, restricts economic growth and undermines development (United Nations, 2006). Domestic violence is the most common type of violence against women (WHO, 2002) and is a term commonly used when referring to women who experience physical injury inflicted by husbands or intimate male partners (Ranieri & Thompson, 2000; WHO, 2002). UNICEF (1997) reported that 25 to 50% of women in all nations experience this type of abuse, and the United Nations estimated that up to 38% of women have been physically assaulted by intimate partner violence (Ranieri & Thompson, 2000).

In the United States, 1.9 to 4 million women are physically abused in their home each year (Evins & Chescheir, 1996; Flitcraft, Hadley, Hendricks-Matthews, McLeer, & Warshaw, 1992; McFarlane, 1989; McFarlane, Greenberg, Weltge, & Watson, 1995; Tilden, Schmidt, Limandri, Chiodo, Garland, & Loveless, 1994; Tjaden & Thoennes, 1998, 2000). Some estimates reported that as many as 12 million women nationwide are involved in abusive relationships (Flitcraft et al., 1992; Johnston & Koflanovich, 1991). In reviewing U.S. and Canadian population-based surveys conducted during 1985–1998,

Campbell (2002) found that between 8 to 14% of women reported physical assaults in the previous year by a husband, boyfriend, or ex-partner. In addition to physical and psychological abuse, it is estimated that 50 to 70% of abused women are sexually abused by a present or former intimate partner (Cuthbert & Slote, 1999). The Healthy People 2010 report emphasized that a need exists to reduce domestic violence incidents through specific focus objectives (U.S. Department of Health and Human Services, 2000).

### *Purpose*

The purpose of this research was to assess and describe the lived experience of Southeast Asian immigrant women who live in the United States regarding their perspectives on domestic violence. The study included experiences of their relationships with their partners, their knowledge of domestic violence, and the existence of domestic violence in the Southeast Asian community. The phenomenological approach was the preferred technique to answer the research question, “What is the lived experience of Southeast Asian immigrant women who live in the United States related to domestic violence, including their relationship with partners, their knowledge of domestic violence, and the existence of domestic violence among the Southeast Asian community?”

### *Background*

The National Violence Against Women Survey conducted by Tjaden and Thoennes (2000) included a nationally representative sample of 8,000 women and 8,000 men ages 18 years and older. The researchers found that 7.7% of the surveyed women reported being raped by an intimate partner, and 22.1% of the surveyed women reported

being physically assaulted by an intimate partner. In April 2002, the U.S. Department of Justice, Bureau of Justice Statistics, announced that violence rates among intimate partners (including a current or former spouse, boyfriend, or girlfriend) differ greatly according to the victim's age. Trends over the period from 1993 to 1999 showed that the rates of intimate partner violence fell for females in the age ranges of 20 to 24, 25 to 34, and 35 to 49 years. For the age range of 25 to 49 years, Black and White women experienced intimate partner violence at similar rates. However, among the age range of 20 to 24 years, Black women were more likely to be victims than White women, with 29 violent victimizations per 1,000 Black women compared to 20 per 1,000 White women.

In 2001, 588,490 women reported they were victims of nonfatal violence committed by intimate partners, a figure that represents 85% of all such reported violence (Intimate Partner Violence: Bulletin Reports, 2002). Additionally, domestic violence comprised 20% of violent crimes committed against women. Wolf, Ly, Hobart, and Kernic (2003) reported that barriers to domestic-violence victims seeking help from the police are predisposing characteristics: situational and personal factors, fears of and negative experiences with police response, and fears of possible repercussions.

Domestic violence touches all aspects of women's lives (Preisser, 1999) and has become a leading issue in the Asian American community (Yoshioka, DiNoia, & Ullah, 2001). Although national survey findings revealed that Asian American women are significantly less likely to report incidents of rape and physical assault than women of other racial and ethnic backgrounds (Tjaden & Thoennes, 1998), selected studies have found that partner violence is a major concern among these women (Huisman, 1996;

Tang, 1994). Most Southeast Asian women who live in the United States and are victims of battering from husbands or lovers seldom report it to authorities because the traditionally male-dominated societies from which the women come treat domestic violence strictly as a family matter (Women's International Network [WIN] News, 1992).

### *Significance to Nursing*

During the last two decades, domestic violence has been a focus of scientific research. The issue of domestic violence in immigrant communities in the United States, however, has not been examined comprehensively and discussed within the mainstream battered-women's movement or in the literature on domestic violence (Bui & Morash, 1999).

It is important for domestic violence in immigrant communities to be addressed in research because of the unique situation of immigrant women. On the one hand, the women have brought their traditional cultures and their experiences with the legal norms and social structure of their countries of origin to America. On the other hand, they have also accepted to some degree American culture as a result of resettlement and adaptation to a new life, and they and their families often experience stress related to relocation and a change in social status (Bui & Morash, 1999).

The issue of cultural and structural variance among ethnic communities is of particular importance if domestic violence in immigrant communities is to be understood. Immigrants in the United States can be influenced by at least two cultures: the culture of their countries of origin, which is practiced and even reinforced in immigrant communities, and American culture (Bui & Morash, 1999).

The effects of each culture on the behavior of immigrant people vary depending on the process of assimilation. Immigrants, however, differ considerably in their potential for assimilation. For example, immigrants most likely to be assimilated are those with the potential for cultural compatibility, which is highly dependent on the ability to speak English. However, immigrants with little education, minimal occupational skills, and poor English-speaking abilities are more likely to live on the fringe of American society (Roberts & Starr, 1989). Some groups may even actively resist assimilation and emphasize preserving ethnic identity (Dasgupta, 1998). The present study was an initial attempt to effectively address gaps in research on the issue of domestic violence among Southeast Asian immigrant women in the United States.

#### *How the Researcher Became Interested in this Phenomenon*

In Thailand, domestic violence is perceived as a family matter. However, the United Nations Development Program 2000 Country Report for Thailand pointed out unequivocally that there has been growing concern about the problem of domestic violence and the recognition that women are subjected to domestic violence—including physical, sexual, and mental abuse—by their husbands (United Nations Development Program, 2000). According to data collected in Bangkok, Thailand, by the World Health Organization in 1994, 20% of a representative sample of 619 husbands acknowledged physically abusing their wives at least once in their marriage (WHO, 2002). In addition, the first population-based survey on women's health and violence against women, which was conducted in 2000 and sponsored by the World Health Organization, found that 41 to 47% of women reported they had experienced physical or sexual violence by their

intimate partner at some time in their life (WHO, 2006). No data were available about domestic violence among Thai women living in the United States, but the variation that exists among different population groups suggested the need to explore the lived experience among Southeast Asian women.

### *Researcher's Perspective*

I became interested in this topic when I found myself having difficulties witnessing and listening to stories from family, friends, and patients regarding their experiences of domestic violence within Asian society. Based on these experiences and stories, I developed the perception that Southeast Asian women carry their own beliefs and behaviors of how to be a good wife. To achieve this duty, the wife fulfills her role by setting aside her own needs and trying to please everyone else's needs. Throughout my previous personal and clinical experiences, the women shared that they accepted their condition of life—being abused—as a result of their karma.

I selected this study on Southeast Asian women's attitudes and beliefs toward domestic violence because I believe violence affects women's ability to function normally in society. I hoped the study results would provide evidence to improve future health outcomes for Southeast Asian women. By using the methodology of phenomenology, I believed the study would display the women's experiences through their own eyes and perspectives. I considered phenomenology a valuable research tool to examine each woman's attitude, value, and belief as her own unique experience.



## CHAPTER TWO

### The Context of the Study and Review of the Literature

The literature reviewed here examines the context of domestic violence and research on domestic violence among Southeast Asian women. Also discussed are the feminist philosophical and theoretical underpinnings of the present study. Additionally, an overview of Thailand and the Southeast Asian countries and their cultural issues relating to the experience of women who have been abused is provided.

#### *The Context of Domestic Violence*

*Definitions of domestic violence.* Violence against women is identified as any act of gender-based violence that results in or is likely to result in physical, sexual, or mental harm or suffering to women, including threats of such acts and the coercion or arbitrary deprivation of liberty, whether occurring in public or in private life (WHO, 1997). McAllister (2000) defined domestic violence as the "...physical and verbal expressions of a dominant person's attempt to have power and control over a member of one's family system, social relations, or a kin network during any developmental stage of the life span" (p. 176). Conditions likely to generate domestic violence are those in which the dominant person has power over others, often according to socially attributed male characteristics of power and control in which the victim, most often female, remains powerless and financially and psychologically dependent on the male.

Domestic violence is often described as a family-centered problem in which the aggression that transpires between domestic partners is openly injurious and socially scandalous. As observed by Gerard (2000), the "...pattern of physical, sexual, and psychological attacks that adults or adolescents use to control their intimate relationships" (p.52 ) is remarkable because such behavior tends to impact generation after generation.

"Domestic violence" and "intimate partner violence" are frequently used interchangeably. Both are defined as patterns of abusive and coercive behavior that includes physical, sexual, and psychological attacks and economic coercions used by adults or adolescents against their intimate partners. Sometimes, both terms are used to refer to family violence, a situation having a wide-ranging meaning, including child abuse, spousal abuse, and elder abuse (Wallace, 2002). The World Health Organization launched the first *World Report on Violence and Health* on October 3, 2002, using the term "intimate partner violence" when referring to violence against women performed by a husband or an intimate male partner. Intimate partner violence includes acts of physical aggression, psychological abuse, forced sexual intercourse, and other forms of sexual coercion and various controlling behaviors such as isolating a person from family and friends or restricting access to information and assistance (WHO, 2002). However, for the purpose of this study, the phrase "domestic violence" is used.

*The nature of violence against women in families.* Violence directed by men against their spouse or partner is the most common cause of injury to women; more women are injured by domestic violence than are hurt in auto accidents, rapes by a

stranger, and muggings, combined. Women are more likely to be injured, raped, or killed by a current or former partner than by any other person (WHO, 1997). A growing number of community-based, small-scale studies indicate that widespread violence against women is an important cause of morbidity and mortality (WHO, 1997). Three different types of violence against women are described below in detail.

### *Types of violence against women*

#### *Physical abuse*

Physical abuse of women includes acts of physical aggression such as kicking, slapping, punching, beating, or having acid thrown in their face (Campbell, 2002; Heise & Garcia-Moreno, 2002; Wallace, 2002; WHO, 1997). Among women who have been abused, the most common areas of body injuries are the face, neck, upper torso, breasts, and abdomen (Campbell, 2002). In 48 population-based surveys from around the world, between 10 to 69% of women reported that they are physically abused at some point in their lives and that the physical abuse is often accompanied by psychological abuse (Heise & Garcia-Moreno, 2002). Most women who are targets of physical aggression experience multiple acts of violence (Heise & Garcia-Moreno, 2002).

#### *Sexual abuse*

Sexual abuse includes rape and sexual violence (Campbell, 2002; Wallace, 2002; WHO, 1997). Surveys in a number of countries demonstrated that from 10 to 15% of women reported they are forced to have sex by their intimate partner (WHO, 1997). In the United States, an estimated 61,000 wives are victims of rape by husbands each year;

in addition, the sexual abuse and rape of girls by male relatives such as fathers, stepfathers, uncles, and brothers are also reported to be wide-spread.

### *Psychological violence*

Psychological violence includes repeated verbal abuse, harassment, confinement, and deprivation of physical, financial, and personal resources (WHO, 1997). Domestic violence is a pervasive problem for women, and depression is the most prevalent, negative, mental-health consequence of such violence (Dienemann, Boyle, Baker, Resnick, Wiederhorn, & Campbell, 2000). A recent meta-analysis of more than 40 studies of mental-health effects of domestic violence concluded that physical violence has a considerable impact on mental health, leading to elevated levels of depression, suicide attempts, anxiety, and post-traumatic stress disorders (Golding, 1999, as cited in Carlson, McNutt, Choi, & Rose, 2002).

### *Impact of Domestic Violence on Abused Women*

The negative impact of repetitive violence on an individual's health brings victims of domestic violence into the medical setting (Wallace, 2002). Women who are abused are frequently treated within the healthcare system; however, the major reason for seeking such assistance is not because they have been physically abused, but because of other health reasons, such as frequent visits to emergency departments (Campbell, 2002). With regard to health sequelae, abused women are more likely to have negative health problems resulting in poor health status and inferior quality of life and are more likely to have been injured in other ways (Campbell, 2002). Moreover, two studies found that abuse during pregnancy, intimate partner stalking, and femicide are urgent health

concerns for women (McFarlane, Campbell, Sharps, & Watson, 2002; McFarlane, Campbell, & Watson, 2002).

Psychological sequelae are common in abused women, and the most prevalent mental health conditions accompanying domestic violence are depression and post-traumatic stress disorder (Campbell, 2002; WHO, 1997). Depression is much more common in women than in men. Women are two thirds more likely to experience depression in both yearly and lifetime estimates (Kessler, 1994). Depressive symptoms are likely to include feelings of guilt, low self-esteem, low energy, inability to experience pleasure, insomnia or hypersomnia, decreased appetite, feelings of helplessness, and suicidal ideation (Ranieri & Thompson, 2000).

Whenever depressive symptoms are apparent, it is crucial to ask about suicidal and homicidal ideation (Ranieri & Thompson, 2000). Some women who have been abused may have chronic depression, which is exacerbated by the stress of a violent relationship, with longitudinal evidence of depression lessening with decreasing intimate partner violence (Campbell, 2002). Some studies have shown that women who have been abused experience higher levels of depression when compared with nonabused women; that is, the severity of abuse was significantly correlated to the severity of depression (Constantino, Sekula, Rabin, & Stone, 2000; Dienemann et al., 2000; Sackett & Saunders, 1999).

The physical and emotional strains of abuse can lead to suicide, which represent a dramatic testimony to the scarcity of options for abused women seeking to escape from existing relationships (WHO, 1997). Wilson, Vercella, Brems, Benning, and Renfro

(1992) found that abused women usually seek help by either residing in a shelter or attending a support group.

*Needs of abused women.* The Texas Offices on Temporary Assistance to Needy Families conducted a study to explore the needs of victims of domestic violence in the context of the services offered through the implementation of the Family Violence Option (Lein, Jacquet, Lewis, Cole, & Williams, 2001). The study revealed that childcare, healthcare, housing, and transportation were most often mentioned as the victims' most critical needs and as issues that threatened their ability to move into the workforce and care for their families (Lein et al., 2001). Many problems are common to mothers with low incomes. Victims of domestic violence, like many other mothers, are living "for the sake of the kids." Many of the women's primary concerns about meeting their families' basic needs and escaping violent partners arise from their lack of financial resources. Some women stay with abusive partners because they rely on them for financial support to meet their basic needs (Lein et al., 2001).

#### *Feminist Philosophical and Theoretical Underpinnings*

The present study viewed domestic violence from a feminist perspective. Using the feminist perspective, the central concept is women's oppression and power inequality (Crotty, 1998; Jackson, 1997). Feminist theory encompasses a broad body of knowledge and ideas. Feminism is dedicated to the elimination of patriarchal systems in which power, benefits, and burdens are unequally distributed (Kirkley, 2000).

Domestic violence from the feminist perspective is one form of violence against women. In the domestic violence situation, the role of women and men are fixed. Women

are victims, and men are perpetrators. Males are dominant, and females are oppressed. Causes of domestic violence provided by this perspective are patriarchy and male domination. The terms commonly used to define the victim are “wife abuse,” “wife beating,” and “wife battering” (Yick, 2001). The feminist perspective examines how gender inequality contributes to power struggles within the family (Lenton, 1995). Feminist-based intervention seeks to empower women to step out of their presocialized roles, teach women that they have a choice, and provide women with adequate resources to overcome any difficulties (Yick, 2001).

The essence of feminism, like that of nursing, rejects dualism and objectification and attempts a fuller understanding of everyday experience. Parker and McFarlane (1991, p. 60) suggested the following criteria for conducting feminist research:

- The principal investigator is a woman.
- Feminist methodology—including one or more of these characteristics of interaction between the researcher and the participant, nonhierarchical relation between the researcher and the participant, expression of feeling, and concern for values—is used.
- The study has the potential to help the participant as well as the researcher.
- The research focus is on the experience of women and how they live through the phenomenon of interest.
- The purpose of the investigation is to study women.
- The word “feminist” or “feminism” is used in the report.
- Bibliographic references to feminist literature are included.

- Nonsexist language is used.

In this study, as noted earlier, the phenomenon of interest was domestic violence among Southeast Asian immigrant women in the United States. The study was guided by Parker and MacFarlane's (1991) feminist criteria. The phenomenologic method with feminist perspective was chosen because it captured the real, lived experience of the study's participants. Participants were interviewed by the researcher in order to document their actual experience, including their relationships with their partners, their knowledge of domestic violence, and the existence of domestic violence in the Southeast Asian community. Because abusive relationships have not been extensively examined in previous research, the present study's findings and recommendations may be useful in identifying needs and, therefore, improving resources available for Southeast Asian women in overcoming such abuses.

#### *Cultural Issues and Violence*

Asian Americans are one of the fastest-growing ethnic minority groups in the United States. Their number more than doubled from 1.5 million in the 1970 census to 3.5 million in the 1980 census and, then, doubled again to 7.3 million in the 1990 census. However, they are still a minority, accounting for only 2.9% of the U.S. population (Hong & Friedman, 1998). The majority of Asian Americans are Chinese, Japanese, Korean, Vietnamese, and Filipino Americans, respectively. These groups share many cultural commonalities. According to the 2000 decennial census, over 570,000 foreign-born residents represented 8% of the population. The majority of Virginia's foreign-born residents are from Asian and Latin American countries, almost half of whom have arrived



since 1990. Approximately 68% of this population resides in North Virginia (Joint Legislative Audit and Review Commission, 2004).

China, Japan, Korea, and Vietnam all share a cultural heritage strongly influenced by Confucianism, Buddhism, and Taoism. Filipino culture differs markedly from these Asian cultures because of the 500 years of Spanish influence and, more recently, the 50 years of U.S. influence (Hong & Friedman, 1998).

In Asian American families, several core values reflect a strong belief in the importance of the family over the individual. These include respecting parents, the elderly, and authority; maintaining peaceful and agreeable relationships by accommodation, compromise, conformity, and other nonconfrontational means; avoiding disagreement and conflict; and saving face. Losing face is often viewed as not merely a personal shame. Consequently, preventing shame is a major social-control mechanism (Hong & Friedman, 1998).

Conceptualizations of honor and shame are locally constructed and are negotiated by Asian women in unique ways according to the flexibility and risk women face in specific cultural issues. In contemporary Asian cultures, shame is typically equated with both female sexuality and social deviance. Fear of shame routinely silences women about their experiences of violence and encourages them not to resist sexual coercion (Miller, 2000).

In many cultures, acceptable levels of sexual aggression by men within marriage often result in normalizing women's experiences of sexual abuse (Abraham, 1999). Sexual abuse is often tolerated by institutions and by cultural beliefs that uphold the

superior position of men, the sacredness of the family, and women's socioeconomic dependency on men (Dobash, E., & Dobash, R.P., 1992). Several studies have examined Asian abused women related to cultural issues, but none of the studies considered religion as an issue within the abuse context.

Bui (2003) examined help-seeking behavior among abused Vietnamese American women to understand factors associated with decisions to seek help. The findings revealed that the decisions of Vietnamese American women to reach out are complex and diverse and are shaped by various structural, cultural, and organizational factors. Structural factors included economic dependency, social isolation, racial discrimination, and a lack of understanding of the law. Cultural factors included lack of English-language proficiency and culture adaptation, and organizational factors included inadequate social services.

Locsin and Purnell (2002) pointed out that cultural values are not easily adjusted or changed. Healthcare professionals and researchers must recognize the value of increasing awareness in identifying the causes of violent behavior in Asian American communities. There is a critical need to educate both Asian women living in America and healthcare professionals regarding culturally appropriate communication styles and interventions. These strategies may not only preserve the integrity of the relationship, but also save lives.

Preisser (1999) found that, in the South Asian community, domestic violence occurs not simply between a woman and her husband but between a woman, her in-laws, and the community at large. The reason may be that certain practices and traditions have

legitimized the subordination of women to elders in South Asian cultures. A woman may agree with this value system and may not consider it negative in the normal course of life. But when the woman is abused, issues such as obedience to family elders, upholding of family honor, fear of losing children, and the dictates of religious practices may influence her suffering in silence rather than seeking help.

#### *Domestic Violence in Asian American Women*

Studies published in the United States on domestic violence are usually focused on Asian women who are of the majority (e.g., Chinese, Vietnamese, Japanese, and Korean) and on women from India, Pakistan, Bangladesh, Sri Lanka, Bhutan, Nepal, and Maldives Islands. Dasgupta and Warrier (1996) conducted interviews to examine the ideologies and conditions that created women's vulnerability to spousal abuse in the Asian Indian community in the United States. Participants were 12, highly educated women from India who had sought outside help as a result of spousal abuse. The study focused on the multiple factors involved in Asian Indian women's experiences of domestic violence in the United States: their minority status, life as an immigrant, and pressures to preserve a flawless public image of their community. The results revealed that the most important factor in these women's lives seemed to be childhood indoctrination into the ideals of being a good wife and mother, which includes sacrificing personal freedom and autonomy.

In their retrospective cross-sectional study using epidemiological and anthropological methods, Hicks and Li (2003) examined the associations between partner violence and major depression in Chinese Americans and provided new data on partner

violence in Chinese Americans. Participants were 181 Chinese American women. Results indicated that a history of partner violence was associated with significantly higher rates of major depression, extending to a 12-month poststudy period and across their lifetime. Partner violence was examined as a specific life event, with marital conflict, interpersonal problems, and family conflicts also categorized as general life events.

Huisman (1996) examined the specific needs of Asian women who were abused and explored the various structural and cultural constraints that inhibit women from seeking help from mainstream social-service providers in the United States. The results showed that Asian women (particularly, recently arrived immigrant and refugee women) who were abused have needs that differ markedly from most battered women in the general U.S. population. The needs of the refugee women focused on language, cultural, immigration, and legal issues. Moreover, several internal and external forces worked in tandem to keep the needs of Asian women from being formally included in the mainstream battered-women's movement.

Lee and Law (2001) examined the perception of sexual violence against women and help-seeking responses to sexual victimization among four Asian groups: Chinese, Japanese, Korean, and Southeast Asians, including Cambodians, Laotians, and Vietnamese. Findings indicated a split opinion among the four Asian groups regarding the perceived severity of the problem. There was a perceived insignificance in the role of family members in inflicting sexual violence; a general tendency of not choosing an immediate, confrontational stance against the perpetrator to stop sexual violence; and a preference to utilize help from the private domain in situations of sexual victimization.

Additionally, findings supported the feeling of shame in deterring individuals from seeking outside professional help. The findings demonstrated the existence of intergroup differences regarding perceptions of the severity of the problem of sexual violence against Asian American women, particularly among the Chinese participants.

Significantly more Chinese respondents “disagreed” or “strongly disagreed” that sexual violence against women is a serious problem than did Japanese, Korean, and Southeast Asian respondents.

Preisser (1999) found that younger South Asian women who were victims of domestic violence and who were raised in the United States were more likely to seek institutional services than did older immigrant women. Cultural differences between the victim and the local social-service institutions and service providers continue to be problematic. The researcher suggested that service providers require a culturally sound model in order to deal effectively with South Asian victims.

Raj and Silverman (2002) identified the prevalence of male-perpetrated intimate partner violence against South Asian women residing in the greater Boston metropolitan area. Domestic violence was a serious and highly prevalent concern among this group of 160 South Asian women. The study explored forms of abuse, abuse-related injuries, and help-seeking behaviors of South Asian women reporting intimate partner violence. It also assessed the relationship between current intimate partner violence victimization and history of nonpartner abuse, acculturation, and victim-blaming attitudes. The study participants’ knowledge of available services was limited, and victim-blaming attitudes were common. The authors suggested that culturally tailored domestic violence services

and intimate partner violence education are needed for this underserved segment of the population.

In a study of Chinese university students, 21.4% of those surveyed disclosed being a victim of physical violence by a partner since they started dating (Yick & Agbayani-Siewart, 2000). Yick, Shibusawa, and Agbayani-Siewert (2003) examined cultural aspects, experiences, and the mental-health consequences of partner violence among families of Chinese descent. Findings showed a positive correlation with depression and physical violence; that is, participants who experienced physical and verbal aggression by a spouse/intimate partner in the last year were more likely to experience depression. Participants reported a high level of verbal aggression both perpetrated and sustained, and rates of physical abuse were lower than rates of verbal abuse. The prevalence of physical and verbal violence among the participants dispels the “model minority myth,” which assumes that this problem does not exist among the Chinese. The myth stems from the low utilization rate of domestic-violence services among Chinese women (Yick et al., 2003).

Yoshihama (2002) investigated the various types of coping strategies that women of Japanese descent (both Japan-born and U.S.-born) chose and their perceived effectiveness in dealing with their partners' violence. Culture is a variable that has been overlooked in examining coping strategies utilized by abused women. In some cultures, leaving a relationship may incur serious familial or social sanctions, such as being stigmatized or ostracized (Yoshihama, 2002). For some Japanese women, confronting their partners or seeking outside resources may mean going against their cultural norms.

Thus, some women may appear “passive” in their victimization because of such cultural realities (Yoshihama, 2002). Japan-born respondents were significantly less likely to use “active” strategies and perceived them to be less effective than did U.S.-born respondents. For the Japan-born, the more effective they perceived “active” strategies (seeking help from outside resources and family members), the higher their psychological distress; whereas, the more effective they perceived “passive” strategies, the lower their psychological distress. In contrast, for the U.S.-born, the higher the perceived effectiveness of “active” strategies, the lower the psychological distress. Additionally, the perceived effectiveness of “passive” strategies had little influence on their psychological distress.

#### *The Emigration of Thai and Southeast Asian Women to the United States*

The emigration of Thais to other lands has been a more recent phenomenon. Historically, Thais were neither great travelers nor adventurous. There were no pressures driving people to move out (Asia Pacific Migration Research Network, 2005). Natural resources were rich, and the country was not densely populated. As a result, the country needed more laborers for production. Thus, foreign workers were welcomed to immigrate. However, the development of Thai emigration can be divided into three periods. During Period One (1975–1981), migrants had many choices because a large need for labor existed in many countries. Salaries were high, and employment recruitment was professional and fair. These were the “golden days” of emigration. During Period Two (1982–1987), the majority of Thai migrants worked in countries of the Persian Gulf region. However, these emigrants experienced rampant exploitation and

had little, if any, legal protection. Period Three started after 1987 and involved labor migration primarily to newly industrialized countries in Asia. The number of Thai workers going to Southeast Asian and East Asian countries grew faster than those going to the Persian Gulf region. For example, the Thai government estimated that 370,500 Thais worked abroad during 1993. Among these, 33,000 went to the Middle East and 221,000 went to Asian countries (Asia Pacific Migration Research Network, 2005).

No data are available on when and why Thai natives emigrated to the United States. It is hypothesized that Thais began to migrate to the United States in the first period (1975–1981) because a great need existed in the labor force in many countries. More often than not, Thai women emigrated to the United States to join their spouses. In addition, when immigrant women moved to the United States, they brought their traditional cultures and their experiences, along with the legal norms and social structure of their countries of origin. Moreover, despite having accepted—to some degree—American culture as a result of resettlement and adaptation to a new life, these women and their families often experience stress related to relocation and a change in their social status (Bui & Morash, 1999).

#### *Buddhism and Cultural Issues*

Thai Buddhism remains essentially unchanged in its American context. In Thailand, the Buddhist temple—the Wat—is the center of the community, and monks are not only spiritual leaders but also community leaders. The monks and the Wat are intimately involved in the daily life of the community and, because Buddhism has been in Thailand for over 1,000 years, Buddhism is a part of daily life.



Buddha taught that the human condition is embedded in fear, suffering, disease, and death. The wise person acknowledges this condition and looks for a way to resolve it. Self-knowledge, love, and universal goodwill are three primary virtues of Buddhism, and the best path to self-knowledge is through proper conduct, self-control, humility, generosity, and mercy (Hong & Friedman, 1998).

The Thai people cannot remove religion from their lives and beliefs, and they accept their condition of life as the result of their past actions—karma (Cooper, R., & Cooper, N., 2003). Thais use their religion, sacred places, and persons to cultivate the harmony of mind, body, and spirit. Buddhism provides them with peace and comfort (Pincharoen & Congdon, 2003). The essence of Buddhism conveys the daily life. Thais maintain religious beliefs, practicing religious activities and accumulating religious merit as ways to help them experience comfort and peace and to gain patience and harmony as they age. Merit-making activities include acts of loving kindness, patience, and care for the sick and handicapped (Cooper, R., & Cooper, N., 2003). The Wat is the most common location in which to realize merit and, in addition, serves as a community social center that provides a setting for performing peaceful actions. By following the rituals and teachings of Buddhism and performing actions to accumulate merit, Thais obtain psychological strength and harmony (Cooper, R., & Cooper, N., 2003; Klausner, 1993).

Instead of defining marriage, Buddhism accepts whatever forms of union that have spread throughout various Asian societies (e.g., monogamy, polyandry, and polygamy). Singala Sutta, a moral guide for laity, describes five reciprocal ways a wife and a husband should minister to each other. The wife should perform all her duties well,

be hospitable to the kin of both, be faithful to her husband, watch over the goods he brings, and be skillful and industrious in discharging all her tasks. The husband should minister to his wife by praising her and upholding their relationship, not looking down on her, being faithful, letting her be in charge of home and family, and giving her clothes and presents. Buddhists also follow the prevailing norm that wives and children are the property of the male head of household (Young, 2004). Promoting harmonious and cooperative relationships is valued, and avoiding conflict is practiced widely in Thai culture (Cooper, R., & Cooper, N., 2003).

#### *Thai Women's Role and Marriage*

Historically, Thailand was primarily an agricultural society in which both women and men worked alongside each other in the fields. However, despite this mutual arrangement, women in Siam had a heavier burden within the domestic sphere and not only shared the legal status of water buffalo (until 1868) but also functioned as objects of exchange and treaty consolidation (Costa & Matzner, 2002). Women's roles were mainly defined in terms of home and family; that is, as daughter, wife, and mother (Wongsith, 1991).

In Thai families, daughters are expected to care for their aging parents. Furthermore, women are expected to stay in their parental home until they start their own family. Many women decline marriage proposals in order to fulfill their roles as dutiful daughters (Tansubhapol, 2002). When a daughter marries, her husband will move in with her family for 3 to 4 years until the couple has their first child. The contemporary Thai family has a distinctive life-cycle pattern in which only one married child in each

generation resides in the parental household (Yoddumnern-Attig, 1992). This cycle begins when the first daughter marries and, along with her husband, continues to live with her parents. The couple will not move out to establish their own household until the wife's younger sister marries (Limanonda, 1995; Yoddumnern-Attig, 1992).

In Thailand, although the traditional ideal is parental selection of their children's spouse, marriage is a flexible process in which individual choice, courtship, and romantic love play an important part (Limanonda, 1995). Generally, in both rural and urban areas, Thai women select their own spouse with the advice of parents, relatives, and friends (Limanonda, 1995). A formal ceremony, elopement, and cohabitation are three different forms of marriage in Thailand. Although the formal ceremony is considered to be the ideal arrangement, elopement and cohabitation are regarded as acceptable for pragmatic reasons among poorer families (Cherlin & Chamrathirong, 1988).

According to Bhurisinsit (2005), Thai wives are expected to devote themselves to their husbands. This standard is reflected in a poem titled "Supasit Sawm Ying" (translation, "A Maxim for Ladies") written in 1844 by Sunthorn Phu, a famous Thai poet. In his poem, Sunthorn Phu describes the proper behaviors associated with being a good Thai woman and a good Thai wife: walk slowly; do not swing your arms too much while walking; do not stare at anything, particularly at a man; do not run after men; do not run your fingers through your own hair; love; be faithful to your husband; be humble in front of your husband; when your husband goes to bed, *wai*\* him at his feet every night, without fail; massage your husband when he has aches and pains; do not permit

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\**Wai* is a gesture of respect in which one's palms are pressed together, with fingers held upward, and the head is lowered to touch both thumbs.

corroborate this claim with statistical evidence (Edwards, Fuller, Vorakitphokatorn, & Sermsri, 1992; Hoffman et al., 1994; Sripichyakan, 1999).

### *Summary*

Although many studies have broadly examined domestic violence, few have specifically addressed domestic violence among Southeast Asian women living in the United States. From a feminist perspective, oppression and power inequality foster abuse to women and cause more suffering than any other form of repression (Kreps, 2003). Immigrant women who are abused and relocating to the United States bring with them traditional cultures and experiences of their countries of origin. In doing so, they often experience stress that is related to their relocation and a change in their status. Additionally, immigrant women who have been abused must deal with language barriers, along with unfamiliar cultural and legal issues, which need to be addressed. Findings among other population groups and immigration studies suggest that Southeast Asian women's perspectives of domestic violence should be examined. The following chapter details the present study's methodology.

## CHAPTER THREE

### Methodology

This study chose the phenomenological approach using content analysis (Morse & Field, 1995) to provide a description and understanding of the lived experiences of Southeast Asian immigrant women who live in the United States. Several scholars suggest this research method is appropriate when little is known about a phenomenon or when aspects of the phenomenon cannot be easily quantified (Colaizzi, 1978; Giorgi, 1985; Osborne, 1990; Sandelowski, Davis, & Harris, 1989). The present study specifically addressed the following research question: “What is the lived experience of Southeast Asian immigrant women who live in the United States related to domestic violence, including their relationship with partners, their knowledge of domestic violence, and the existence of domestic violence among the Southeast Asian community?” In this study, the perspectives of each participant was documented, not the researcher’s suppositions of “how it should be.”

Phenomenology focuses on the lived experience of individuals. Husserl (2001), the founder of the discipline, considered it to be philosophy, a theory, and a method for studying the world. The purpose of phenomenological research is to describe experiences as they are lived, in phenomenological terms, in order to capture the lived experiences of study participants (Streubert Speziale & Carpenter, 2003) and to discover the meaning of the lived experience of phenomena through analyses of participants’ descriptions

(Marshall & Rossman, 1999). The central focus of phenomenological inquiry is the lived experience of the world of everyday life (Streubert Speziale & Carpenter, 2003).

In present study, the perspective on domestic violence was a reflection of the nature of Southeast Asian women. In addition, the language used by these people illuminated the nature of the phenomenon of interest, which is domestic violence.

Phenomenologists view the person as integral to the environment, and phenomenological inquiry requires that the integrated whole be explored (Streubert Speziale & Carpenter, 2003). All phenomenologists agree no single reality exists and each individual has his or her own reality. Reality is considered subjective; therefore, an experience is considered unique to the individual. The true value generally resides in the discovery of human phenomena or experiences as they are lived or perceived by subjects rather than researcher-defined (Sandelowski, 1986). In order to explicate the specific experiences of Southeast Asian women, interviews with 14 Southeast Asian immigrant women were analyzed for this report.

### *Purpose*

The purpose of this phenomenologic research was to assess and describe the lived experience of Southeast Asian immigrant women who live in the United States regarding their perspectives on domestic violence. The study included experiences of their relationships with their partners, their knowledge of domestic violence, and the existence of domestic violence in the Asian community. The study sought to reveal more fully the meaning and essence of the experience through the eyes of the women who participated in the study.

*Research Question*

What is the lived experience of Southeast Asian women who live in the United States, including their relationships with their partners, their knowledge of domestic violence, and the existence of domestic violence among the Southeast Asian community?

*Criteria for Participation and Number of Participants*

The study criteria were women in the Southeast Asian community living in the United States who did not have to personally experience domestic violence and would share their knowledge about domestic violence. However, all participants were Thai immigrant women.

The participants were recruited from the Thai community in the Commonwealth of Virginia and in California. Fourteen women volunteered to take part in the study. Two women were interviewed in person, and the interviews were audio-recorded. Twelve women were interviewed via telephone. Three of the interviews were audio-recorded via speakerphone. The researcher took notes of the nine telephone interviews. Six of the participants heard about the study through flyers posted in the community. The remaining eight learned about the study through word of mouth from their friends who had already participated in the study. The researcher used the technique of purposive sampling (Patton, 1990) to choose women who could describe their perspective on domestic violence from their personal experience. Patton (1990) also suggests that the logic and power behind purposeful selection of participants is that the sample should be information rich.

Some scholars recommend approximately six to eight participants for phenomenological research because of the extensive amount of information that is gathered from each participant using personal and in-depth interviews (Creswell, 1994; Morse, 1994). The present study looked for the meaning of the women's story. However, the sample size for this study was guided by the principle of data saturation. Data saturation occurred when themes and categories in the data became competitive and redundant and when no new information could be gathered by further data collection. In this study, the common theme and the story repeated itself within the first eight interviews. The remaining six interviews confirmed the redundancy. Data saturation was achieved with a sample of 14 participants. The existence of data saturation was verified through collaboration on the data analysis with experienced qualitative researchers on the dissertation committee.

#### *Process of Informed Consent*

Participants' access and recruitment took place after the researcher received university IRB approval. Flyers and advertisements were placed within the communities selected for the study area, with the consent of the appropriate shop owner or official. Participants' access and recruitment initially took place in the Southeast Asian community within a 150-mile radius from Richmond, Virginia. Flyers and contact information were posted in Asian grocery stores, beauty salons, social and religious centers, and women's bathrooms of the Asian restaurants within the community. With approval of the monk, flyers were placed in the women's bathroom in the Buddhist temples. The researcher recruited the participants through personal contacts and



snowballing technique in which participants asked other women who fit into the study criteria to contact the researcher.

The university IRB proposed and approved a waiver of written documentation of consent. The participants' risk of signing the consent and having their name associated with the study outweighed the benefits of having a signed consent form. All participants received the waiver of written documentation of consent to protect potential name identification. The consent form consisted of a statement introducing the study, explaining its benefits, and assuring the confidentiality of the women's participation. Before obtaining the subjects' verbal agreement to participate, the researcher also discussed the women's right to withdraw from the study at any time and for any reason. The women had as much time as they needed to review the consent form and ask questions before agreeing to participate. Only one woman who had initially agreed to participate was later reluctant to share her story and, so, was not included in the study.

Participation in this study was strictly voluntary. During the initial in-person interview, the researcher presented a brief overview of the study and reviewed the contents of the consent form. Similarly, during the initial telephone interview, the researcher provided a brief overview of the study, read the contents of the consent form, and answered the participant's questions and concerns regarding the study. The researcher was aware that the participants might experience certain levels of distress while sharing their experience on domestic violence and might develop concerns about their safety. To ensure the participants' safety, each woman was informed about her rights to withdraw from the study at anytime.

Participants were interviewed in a safe place of their selection (e.g., their home, a commercial building, or public park) or over the telephone. All interviews were conducted by the nurse researcher who has a background in mental health nursing, knowledge of feminist theory, and clinical experience with women's mental health issues. Generally, interviews lasted between 30 and 60 minutes, with the average interview lasting 45 minutes. The interviews were transcribed verbatim. Data collection took place over approximately three months.

One of the in-person interviews was conducted in a public setting, and another took place at the participant's house. Twelve of the participants consented to a telephone interview. They gave the researcher an exact date and time that was convenient for them to receive a call at home. To collect the women's perspectives, the researcher employed rapport building, listening, attending, empathizing, communicating warmth, paraphrasing, clarifying, and summarizing.

Sometimes, talking about issues such as domestic violence causes women to become upset. The researcher asked several questions about situations that happened in the participant's life and family—questions that could be perceived as unpleasant. The potential risks involved in this research were the participants' safety and any emotional distress they experienced during or after the interview. Thus, the researcher advised the participants to select a comfortable interview setting that upheld their privacy and safety. They were also encouraged to choose a date and time of the interview based on their convenience. At the conclusion of the interview, the researcher conducted a debriefing

process, which included thanking the participant for her contributions and restating the confidentiality techniques of the study. Additionally, each participant received a list of support agencies, shelters, and resources, along with contact information for current or future use. The researcher instructed each participant that, if she became distressed at any time following the interview, she could call the researcher at the telephone number provided on the bottom of the consent form.

### *Data Collection*

For this study, feminist theory was a sensitizing orientation for the development of the interview guide and was the rationale for conducting a gender-specific analysis. Content analysis was conducted to examine the interview responses for common domains, themes, and subthemes, using the techniques developed by Morse and Field (1995). Data were collected via semistructured interviews designed to determine the women's experiences or view points of domestic violence. Specifically, the researcher asked each participant the following questions:

- “In as much detail as possible, can you please tell me about the relationship of you and your husband?”
- “In as much detail as possible, can you please tell me about your knowledge on domestic violence? Or what do you think domestic violence is about?”
- “Have you experienced domestic violence directly or indirectly in your life and/or your marriage? And can you elaborate on that?”
- “What do you think caused the abuse?”

- “Have you known if there is domestic violence in your community? And can you please elaborate on that?”
- “What was the most helpful to you at this time?”
- “What would have been helpful if it had been available?”
- “What do other Thai women need to know about this experience?”

The interview procedures outlined here were developed to collect data according to techniques developed by Marshall and Rossman (1999) and by Morse and Field (1995) and to reduce risks to the participants. These techniques were:

- Before the actual interview, the researcher prepared the participant for the meeting, and the participant selected a safe setting, date, and time.
- The researcher established rapport with the participant before the interview began.
- The researcher answered any of the participant’s questions about the study.
- The researcher described consent procedures, which consisted of a statement introducing the study, explaining its benefits, and assuring the confidentiality of the woman’s participation. It also guaranteed the woman’s right to withdraw from the study at any time. No documentation of signatures was conducted in order to provide anonymity.
- The researcher listened attentively to the participants while they told their stories.
- The researcher informed each participant that no real names would be used to identify the woman.

- The researcher determined that any of the participants' quotations used in the dissertation or future publications would be identified by number only.
- The researcher conducted a debriefing at the conclusion of the interview.
- Participants received a list of resources and the researcher's contact information as support measures if they became distressed following the interview.

Phenomenology is the study of the lived experiences and the ways we understand those experiences to develop a worldview (Marshall & Rossman, 1999). The purpose of phenomenological interviewing is to describe the meaning of a concept or phenomenon that several individuals share (Marshall & Rossman, 1999). For the phenomenological inquiry conducted in the present study, the researcher adapted the interview process suggested by Adames and Campbell (2005). The in-depth interviews composed from phenomenological inquiry included information about the intimate relationship as well as factors that are essential in the relationship, the knowledge about domestic violence, and the participants' experiences with domestic violence (Adames & Campbell, 2005).

For the present study, the researcher began the interview process by asking general questions in order to establish rapport. The general questions included inquiries regarding the participant's demographic data and asking the woman to share any further background or personal information she felt comfortable revealing. Additionally, the researcher shared some of her own background, believing it would increase the opportunity to establish rapport and allow the woman to feel more comfortable with the interview. As Lather (1991) noted, study participants regularly want to know something

about the researcher. However, for the present study, the researcher was fully aware that the focus of the interviews was the participants' experience. Thus, the interview then progressed using the processes stated above and asking each participant specific questions about herself, her relationship, and her perspective on domestic violence. The researcher advised each participant that she could stop the interview at anytime, that she did not have to answer questions she may prefer not to address, and that her responses were kept in strict confidence.

The researcher maintained a separate file of code identifiers. In addition, each woman who was interviewed in person was informed that the interview would be audiotaped and transcribed verbatim by the researcher and that all identifying information, names, and location would be omitted. Confidentiality was assured by assigning each participant a code number. The researcher kept the list of the participants' names and their code number in a locked cabinet in the researcher's home. A waiver of signed consent forms was conducted to protect identification of the participants' names.

In order to remain fully present for the participants during the in-person interview, the researcher did not take notes. Instead, the personal interviews were tape-recorded and transcribed. For the first seven participants who were interviewed by telephone, the researcher advised the participants that, during the interview, she would take field notes, as described in the consent form (Appendix B). For the last five telephone interviews, three were recorded via the speaker phone. All interviews were conducted in Thai, according to the participants' selected preference.

At the conclusion of the in-person interview and after the debriefing process, each participant received a \$20 gift card for her participation in the study. For the women who chose telephone interviews, the researcher asked for permission to send the gift card via regular mail and assured the mailing would not specify participation in the study. After the participant provided her preferred address, the researcher sent the gift card to her. The types of gift cards used were a restaurant gift certificate or a prepaid phone card.

All of the interviews were transcribed verbatim. To improve accuracy, each typed transcript was reviewed while listening to the audiotapes as many times as needed. This in-depth review process also provided an important opportunity for the researcher to relive the interview and become substantially more familiar with the data (Maykut & Morehouse, 1994). Audiotapes and computer disks were kept separately from the printed transcripts. All interview transcripts were translated into English for data processing; however, both the Thai and English versions of the transcripts were used for data analysis to avoid losing the original meanings of Thai terms and idioms through translation. For back-up translation, both the Thai dissertation researcher and another Thai doctoral student translated the transcripts separately. The two researchers then met to discuss any translation variations. The researcher also kept written memos.

### *Data Analysis*

According to Morse and Field (1995), coding is a central process of data analysis in qualitative inquiry and helps the researcher not only to sort data but also to uncover underlying meanings in the text. Data analysis usually assumes two mechanical forms, including interparticipant analysis, the comparison of transcripts from several

participants, and the analysis of categories (sorted by commonalities), consisting of segments of transcripts or notes compiled from transcripts (Morse & Field, 1995). In the present study, data analysis was guided by content analysis (Morse & Field, 1995).

Content analysis is analysis by topic, and each interview is segmented by these topics into categories (Morse & Field, 1995). Latent content analysis was the selected method. In using latent analysis approach, passages or paragraphs are reviewed in the context of the entire interview to identify and code thrust or intent of the section and the significant meanings within the passages (Morse & Field, 1995).

For this study, the researcher originally reviewed randomly selected transcripts to generate an initial coding scheme for the data. The researcher read the transcripts and identified important topics, which became the primary categories. Then, two dissertation committee members met with the doctoral dissertation researcher to analyze nine additional transcripts in order to establish common domains and themes. In the next step, the remaining five transcripts were examined to confirm classification and determine exemplars. The interviews were examined to ensure saturation was established; no new data emerged with this analysis. Finally, four dissertation committee members—all of whom have extensive research and clinical experience with women and with female victims of domestic violence—reviewed the domains, themes, and exemplars to confirm classification and placement. When possible, the exact words of the participants were used to describe the themes. The findings were examined within the frameworks of feminist theory and cultural context for the final analysis.



### *To Achieve Rigor in this Study*

As mentioned earlier, the aim of phenomenology is to understand the lived experience of individuals. Truth values reside in the discovery of human phenomena as they are perceived or lived in that experience. This truth is participant-oriented rather than researcher-defined. The artistic approach to qualitative studies emphasizes the irreplicability of the research process and product (Sandelowski, 1986). There are different views of the criteria of rigor commonly associated with scientific inquiry. Sandelowski (1986) suggests the following outline to achieve rigor.

*Achieving auditability.* Auditability is achieved when the researcher specifies a clear decision trail concerning the entire study. Any reader or another researcher will be able to follow the progression of events in the study and understand the logic (Sandelowski, 1986). In the present study, auditability was demonstrated primarily in the description, explanation, and justification of the research report and was achieved in the following chapters:

- How the researcher became interested in the subject matter of the study (Chapter 1)
- How the researcher viewed the phenomenon (Chapter 1)
- The specific purpose of the study (Chapter 3)
- How the participants came to be included in the study and how they were approached (Chapter 3)
- How the data were collected (Chapter 3)
- How long data collection lasted (Chapter 3)

- The setting in which data were collected (Chapter 3)
- How the data were transformed for analysis (Chapter 3)
- Specific techniques that were used to determine the truth value and applicability of the data (Chapter 3) (Sandelowski, 1986).

*Ensuring credibility.* Sandelowski (1986) observed that qualitative research is credible not only when it presents familiar descriptions or interpretations of human experience that the people having the experience would immediately recognize, but also when other researchers can recognize the experience when confronted with it after having only read about it in a study. For this study, several strategies were utilized to ensure credibility:

1. checking that the significant statements and meanings of the data contained both the typical and atypical elements;
2. obtaining validation from the faculty on the dissertation committee; and
3. reviewing scholarly literature after the data were analyzed to support women's experiences in the data sources.

### *Summary*

As a method of research, phenomenology is an approach to investigate phenomena. For this study, data were gathered using semistructured interviews until saturation was achieved. Content analysis was used to analyze data. The criteria of rigor associated with scientific inquiry were performed according to Sandelowski's (1986) method for achieving auditability and credibility.

## CHAPTER FOUR

### Findings of the Study

The purpose of this research was to assess and describe the lived experience of Southeast Asian immigrant women who live in the United States regarding their perspectives on domestic violence. The study included experiences of their relationships with their partners, their knowledge of domestic violence, and the existence of domestic violence in the Asian community. The findings of the study are presented in this chapter.

The chapter begins with an overview of the women as a group, followed by a description of the personal background of each study participant. In order to preserve the safety, confidentiality, and anonymity of the participants, their detailed biographies are protected and pseudonyms are used.

The remaining sections of this chapter provide eidetic descriptions of the women's perspectives on domestic violence. From an overall framework of five themes identified by the researcher, six themes emerged during the data analysis.

### Descriptions of the Participants

#### *General Synopsis*

Fourteen Thai immigrant women agreed to participate in this study. Ten of the participants did not identify themselves as having been abused by their husbands. Two participants experienced domestic violence in their previous marriage with Thai men. One participant identified herself as having been abused by her husband; and another one

revealed that she had abused her husband during the first five years of their marriage. The women ranged in age from 28 to 67 years, with a mean age of 43 years and median age of 50 years. The length of time they had lived in the United States ranged from 4 to 34 years. All of the women spoke Thai fluently, and 13 spoke English fluently. The interviews were conducted in Thai, according to the participants' preference. Seven of the women were American citizens, one was in the midst of applying for citizenship, and six were legal permanent residents. Five of the participants had earned graduate degrees, four had completed college, and the remaining five had some college degree similar to an associate degree. The yearly household income ranged from \$50,000 to \$90,000 for five of the participants; from \$90,001 to \$140,000 for seven of them; and over \$140,001 for two participants. Ten of the women were employed and, among those women, five ran their own business.

Twelve of the women were married to White American men, and two of the women were married to Asian Americans. The duration of marriage ranged from 3 to 38 years. All of the women were born in Thailand. Twelve of them came to the United States before they got married. Eight of the women had children and, among those women, three had children from their previous marriage in Thailand.

Seven of the participants disclosed they had come to the United States to study and, later, met and married their husbands. Three of the women traveled to the United States as tourists and worked illegally before meeting and marrying their husbands. Four of the women came to the United States because of their marriage.

Overall, the participants were heterogeneous in terms of age, socioeconomic status, and the duration of marriage. A diverse sample broadens different aspects of the lived experience, allowing the researcher a more holistic view of the phenomenon (Polkinghorne, 1989). A brief description of each woman is provided below.

### *Individual Profiles*

Each woman is introduced here in terms of her background, including her relationship with her immediate family, her husband, and her support system, as well as her knowledge and experience of domestic violence. The profiles provide a sociocultural context for understanding the women based on their perspective. Pseudonyms are used to protect the women's identities and ensure their confidentiality. The women are divided into three groups according to whether they had experienced domestic violence, had observed it, or had not experienced domestic violence.

#### *Women who experienced domestic violence.*

Lalana, 52, was a divorced mother who came to the United States after Thailand's economic crisis in 1997. She started her new life in the United States in her late forties and worked as a chef at Thai restaurants. After spending one year working in the Washington, D.C., area, a young friend got her another job in western Virginia where she met and married her husband. Her husband had been one of her customers. When he first saw Lalana, he liked her very much, but she was not interested in pursuing a relationship. Lalana's young friend, however, convinced her to date him. Lalana felt she had nothing to lose. Furthermore, she was afraid of being deported to Thailand, and the customer was willing to help her out by marrying her. After marriage, Lalana quit her job and became a

housewife. At the time of this study, she and her husband owned a small business. Lalana claimed she had experienced abuse in her prior marriage.

Malini, 41, was in her late thirties when she began dating her husband. She had taken a trip to the United States for 6 months. A few months before the end of her trip, she met her husband. After Malini returned to Thailand, he visited her every 2 to 3 months for a year. They felt they loved each other very much and, so, were married in Thailand. Malini then moved to the United States to live with her husband. Six months after arriving, she received a job offer and worked until 2 weeks before her son was born. Malini's husband was divorced and had children of his own from a previous marriage. Malini reported that her husband expected her to accept his children, take care of them, and get along well with them. Her abuse experience began within the first 6 months of her marriage. Malini's husband was physically, verbally, and psychologically abusive. At the time of this study, Malini was a housewife still living with her husband. She rated her marriage as dissatisfactory.

Niramon, 51, was in her late forties and had two daughters when her first marriage ended in divorce. She and her second husband had worked at the same place in Thailand and dated for 3 years before they decided to get married. Niramon and her teenage daughters moved to the United States after she and her second husband were married for 2 years. She earned her master's degree and had been a teacher and later a college professor for 26 years. She quit her job in Thailand and became a retired government official. At the time of this study, Niramon's husband had moved back to the United States from Thailand, had a steady job, and took care of Niramon and her

daughters. In her first marriage with her Thai husband, Niramon had been verbally, physically, and psychologically abused. She reported she did not experience domestic violence in her second marriage.

Varuni, 48, came from a family with twelve siblings. She earned her college degree in Thailand and, eventually, moved to the United States to be with her Thai boyfriend. After a long period of dating, he wanted to marry her but, at the same time, he asked if he could have another woman while they were married. The situation was unbearable for Varuni. She left her boyfriend and worked for her sister at a Thai restaurant in California. She married and, after 7 years, divorced. Later, at her sister's restaurant, she met her second husband, a divorced man with one daughter. Varuni's sister supported her dating the man. At the time of this study, Varuni owned a jewelry shop and lived with her family in California. She revealed that she had experienced domestic violence as a victim and as an abuser.

Tanya, 50, grew up as the oldest daughter of her family, with one younger sister and one younger brother. After working as a musician in Thailand, she took a vacation and traveled to the United States. She claimed she was very independent and stated she was "not like a typical Thai woman." She met her husband, a Canadian native, through a friend. She reported no violence in the relationship with her husband. However, Tanya's experience with domestic violence, which she described vividly, occurred in her childhood family. She grew up in a male-dominated household. Her father was verbally abusive. Tanya had an unpleasant relationship with her father since she was 18 years old. In college, she had to take care of herself financially. Consequently, she claimed a

passion to help young children in Thailand. At the time of this study, Tanya and her husband owned a small business and resided in southern California.

*Women who observed domestic violence*

Areeya, 39, grew up as the oldest daughter in a happy family of three children. Her two sisters married before she did. In Thailand, Areeya had a steady job in the government sector. After working for over 10 years, she became exhausted and discouraged with her job, boss, coworkers, and colleagues. At that time, Areeya thought about getting married. She told her parents about looking for a husband on a dating Web site. Luckily, her parents understood, and they encouraged and supported her efforts. For six months, Areeya communicated with a man before he decided to travel to Thailand in order to meet with her. They were engaged, and Areeya's husband-to-be returned to the United States to process the fiancée visa. After receiving visa approval, he traveled back to Thailand and married Areeya, after which they both came to the United States. Areeya's experience with domestic violence was an indirect one. Her knowledge of domestic violence came from reports in the Thai newspaper in her area. She believed that domestic violence existed among the Thai community, even though the situation did not occur to her.

Busaba, 28, grew up as the oldest daughter of her family. In Thailand, she earned her college degree and took her first job in a large bookstore in Bangkok. Busaba came to the United States to study in an English program. She also worked as a nanny for a Thai family who had known her father. After a while, she realized she was unable to continue working legally in order to earn more money, so she decided to return to Thailand. In the



meantime, her father found another family she could stay with before going back to her homeland. Busaba met her husband at this place. They got married, and Busaba secured a visa to remain in the United States. Busaba's experience with domestic violence was not present in her relationship with her husband; rather, it occurred in her own family. Her father was unfaithful to her mother and, at the time of this study, had another woman. Busaba believed that her mother was abused emotionally and, on a frequent basis, verbally. She also believed domestic violence exists in the Thai community.

*Women who did not experience domestic violence*

Duangrat, 38, grew up as the youngest daughter in her family. In Thailand, after graduating from the university, she had a steady job working in an international company. She traveled to various places and to several countries in Asia. Her last position at the company before coming to the United States was as a supervisor. She decided to further her studies in the United States. She quit her job in Thailand. Within the first month she was in the United States, Duangrat met her husband-to-be at her workplace. They dated for 9 months before getting married. Duangrat continued her studies in graduate school and eventually earned a master's degree. She then became a housewife and worked part time as a waitress. Duangrat reported she did not experience any abuse in her relationship with her husband; however, she stated she knew from her friend's accounts that domestic violence existed among Thai women.

Indira, 50, was a car dealer in Thailand before she traveled to the United States. She wanted to expand her business line in Thailand and, so, decided to come to the United States to further her studies and look for a business. On the first day of her arrival

in the United States, Indira's husband-to-be saw and fell in love with her at her rental house. He was a Vietnamese American who was born in Vietnam and raised in Laos before immigrating to the United States. He knew some Thai language and could speak quite well. Indira said he tried to coax her to be his girlfriend and offered to help and take care of her. At first, she refused; however, soon after, she accepted his offer and decided to marry him. Indira reported she did not have any experience with domestic violence. At the time of this study, she had two adopted daughters and two biological sons, and she owned a Thai restaurant in northern Virginia.

Kanda, 30, grew up as the youngest daughter of a wealthy family in Bangkok. After finishing college, she traveled to the United States to visit a friend. Her mother convinced her to further her studies in the United States, so Kanda enrolled in graduate school where she studied full time and worked part time to support her financial needs. She met her husband-to-be at a computer fair. They got married after dating each other for 2 years. Later, Kanda earned two master's degrees. At the time of this study, she worked as a consultant at the U.S. Food and Drug Administration, and her income was twice the amount of her husband's earnings. Kanda reported she was not the victim of domestic violence but might be considered abusive to her husband.

Orapin, 61, grew up as an only child with her parents. After graduating from college, she married her first husband. The marriage was unsuccessful because her husband had to take care of his own family, financially. Their marriage ended on a friendly basis. At this time, Orapin was in her early twenties and a single mother of a daughter. She met her second husband-to-be in Thailand while he was serving in the U.S.

Air Force. When Orapin decided to move to the United States and get married, her parents did not allow her to take her daughter with her. They took care of Orapin's daughter until she graduated from college, after which they allowed her to be reunited with her mother in the United States. Orapin reported that she and her second husband have one son. At the time of this study, Orapin was a housewife, considered herself a career-oriented woman, and worked as a volunteer in her community. She did not experience domestic violence in either one of her marriages.

Patra, 50, was a college professor in Thailand and moved to the United States to pursue her doctoral degree. She was in her late forties and single when a friend introduced her to her husband-to-be, an Asian American. They dated for a while and discovered they got along well together, sharing the same point of view and having a sense of humor. They decided to get married. At the time of this study, Patra was continuing her doctoral program and living as a housewife with her husband in northern Virginia. She reported having no experience with domestic violence; however, her knowledge of the topic came from accounts in the media and from word-of-mouth reports among Thais.

Raviwan, 52, grew up as the oldest daughter of her family. She moved to the United States to attend college but, after a few years, ran out of money to support her financial needs. She quit college and started working as a clerk in the U.S. Army. At her workplace, Raviwan met her husband-to-be and shared the same boss. They bought a house and, after 3 months of living together, he asked her to marry him. At the time of this study, Raviwan had quit her job with the U.S. Army, owned her own beauty salon,

and did not have any children with her husband. Raviwan's parents moved to the United States and, after her mother's death, her father continued to live with Raviwan and her husband in the same house. She reported not having any experience with domestic violence.

Srisuda, 67, followed her younger brother to the United States in order to study. A friend introduced her to her husband-to-be. They dated and, then, decided to get married. The couple did not have children. Srisuda's husband worked in the U.S. Navy and, at the time of this study, was retired. Previously, Srisuda owned a beauty salon. She related that her husband used to work in Thailand, can speak Thai, and loves Thai foods. Both of them go to the Wat every weekend. Srisuda also said she volunteers to teach young people to learn how to craft fruits and vegetables at the Wat. She identified herself as a housewife and claimed being satisfied with her husband. Srisuda also reported having no experiences with domestic violence.

#### Themes from the transcripts

While the interview process continued, the researcher analyzed some of the completed transcripts in order to establish preliminary themes. Sixteen initial themes were identified (Table 1). An ongoing open-coding technique generated the topics, which allowed the researcher to strike quotations and identify key descriptors that seemed particularly relevant to the focus of inquiry. As data analysis continued, more themes emerged. The additional themes were added to the original 16, examined for commonalities, and grouped together as categories with accompanying components, which enabled labeling at a higher level of abstraction (Table 2).

Table 1

## Discovery I – Initial Themes from Transcripts

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Definition of domestic violence

Sources of information

Unfaithful

Method of discipline

“It is like a chain”

Wife abuse

Domestic violence in Thai community

Husband’s characteristics

Wife’s characteristics

Legal system

Adaptation into society

Cultural difference

Connecting with the family in Thailand

Good wife

Good daughter

Good mother

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Table 2

Discovery II – Themes/Categories and Accompanying Components at a Higher Level of Abstraction

Themes/Categories	Components
1.) Knowledge about domestic violence and sources of information	<ul style="list-style-type: none"> <li>• Definition of domestic violence</li> <li>• Sources of information</li> </ul>
2.) The experience of domestic violence	<ul style="list-style-type: none"> <li>• Infidelity as a cause of domestic violence among Thai women</li> <li>• Abuse as a parenting style</li> <li>• Abuse is like a chain</li> </ul>
3.) The existence of domestic violence among Thai women	<ul style="list-style-type: none"> <li>• Wife abuse</li> <li>• Domestic violence in the Thai community</li> </ul>
4.) Factors considered to be violence-protective	<ul style="list-style-type: none"> <li>• Husband's characteristics</li> <li>• Wife's characteristics</li> <li>• Confidence in the legal system</li> </ul>
5.) Life as a Thai wife	<ul style="list-style-type: none"> <li>• Adjusting to a new context/society</li> <li>• Learning and accepting a cultural difference</li> <li>• Connecting with family in Thailand</li> </ul>

Table 2

Discovery II – Themes/Categories and Accompanying Components at a Higher Level of Abstraction (cont.)

Themes/Categories	Components
6.) Ability to perform duties as a woman	<ul style="list-style-type: none"> <li>• Being a good wife</li> <li>• Being a good daughter</li> <li>• Being a good mother</li> </ul>

#### Perspectives on Domestic Violence

In this study, six themes emerged from the data analysis to describe Southeast Asian immigrant women's perspectives on domestic violence. Among each of the six themes, additional components were identified. The first theme addressed the study participants' knowledge about domestic violence and their sources of information. It included the components of each woman's definition of domestic violence and her source of information. The second theme described the participants' experience of domestic violence. Embedded in this category were the following components: infidelity as a cause of domestic violence among Thai women; abuse as a parenting style; and the phrase, "Abuse is like a chain." The third theme identified the existence of domestic violence among Thai women and included the components of wife abuse and domestic violence in the Thai community. The fourth theme, described factors that the participants considered

to be violence-protective. The components of this category were the husband's characteristics, the wife's characteristics, and confidence in the legal system. The fifth theme addressed life as a Thai wife and included the components of adjusting to a new context or society, learning and accepting a cultural difference, and connecting with one's family in Thailand. The sixth theme described the ability to perform one's duties as a woman. The components for this category included being a good wife, being a good daughter, and being a good mother.

The six themes identified above exemplify the essence of perspectives on domestic violence for the participants of this study. The following sections in this chapter provide a more complete description of each of the six themes and their accompanying components. Quotations from the individual transcripts are appended throughout the discussion of the themes.

#### *Theme One: Knowledge about Domestic Violence and Sources of Information*

No data were available to determine whether Thai immigrant women knew about domestic violence. Thus, for this study, it was essential to assess the participants' knowledge about domestic violence and how they acquired it. The women were asked to define domestic violence.

#### *Definition of Domestic Violence*

Eight participants identified physical and verbal abuse as the most common types of domestic violence. Four women referred to psychological and sexual abuse, assault, threats, and a husband's control against the woman's will. The following statements and phrases illustrate the study participants' definition of domestic violence.



- *Domestic violence in my understanding is husband beats, curses his wife or forces her to have sex. (Areeya)*
- *I saw husbands beat their wives, fight against each other, curse or use bad words. (Busaba)*
- *Domestic violence is the action that husband abuse wife physically, such as beat, slap, as well as psychologically or emotionally. Force his wife to have sex is also domestic violence as well. (Duangrat)*
- *Domestic violence includes the action that husband abuse wife or wife abuse husband physically, or verbally. (Indira)*
- *It [domestic violence] means that husband abuse wife or wife abuse husband physically and verbally. Assault or threaten. In conclusion, whatever the husband/wife makes each other to do what they are not willing to do. (Kanda)*
- *[D]omestic violence...[husband and wife] mean fight against each other. (Lalana)*
- *Domestic violence is a husband abuses his wife or a wife abuses a husband in verbal or physical. (Malini)*
- *Domestic violence in my understanding is the action the husband and wife physical abuse each other... Using bad words or cursing created conflict within the family... It also includes if a wife doesn't want to do anything but a husband control or coerce her to do. Verbally abuse is psychological abuse. (Niramom)*

- *Domestic violence in my opinion is verbally abuse, or physically abuse. Bad words can hurt over and over in our head. It is psychological abuse, I think.*  
(Orapin)
- *It [domestic violence] refers to husband and wife fight against each other, physical aspect. It includes physical—beating and psychological aspect.* (Patra)
- *[Domestic violence is] beating or slapping...* (Raviwan)

The participants' knowledge of domestic violence also included comments about relevant factors associated with domestic violence. Two of the women talked about the lack of having a job and money as precursors of domestic violence. One participant identified alcohol and amphetamines as contributing factors. Being independent was mentioned as an attribute that may protect women from experiencing domestic violence. The following statements demonstrate the study participants' perception of factors that may lead to domestic violence:

- *I think because of no job and money enhanced the abuse.* (Duangrat)
- *I've seen a lot about husbands got drunk and beat their wives...sometimes also used amphetamine.* (Patra)
- *I believe if women are independent and have a job, their statuses will be better. ...I believe if woman is independent, no one can beat or abuse her.* (Orapin)
- *The cause of the abuse problem is about no money, no occupation, and no job.*  
(Srisuda)

### *Sources of Information*

Eleven of the participants in this study stated that their sources of information about domestic violence were through their personal experiences or through witnessing the experiences of others around them, as well as from word-of-mouth accounts and reports in the media. The following statements reflect the women's responses concerning their information sources:

- *I heard about husbands got drunk and beat wives physically. These often seen on the newspaper cover. (Areeya)*
- *My parents had a fight sometimes...the cause of fighting was my father had another woman. I believe the fact that my father has another woman had abused my mother psychologically. (Busaba)*
- *I know there is a Thai woman who has been abused. I didn't know her personally, just know from her close friend. (Duangrat).*
- *Domestic violence, you mean fight against each other...[with] my Thai husband, yes, because we were young. We fought very often. (Lalana)*
- *He abused me physically, cursed, called me name. (Malini)*
- *I had experienced domestic violence myself. (Niramon)*
- *I had a Japanese friend who had been abused by her husband. I saw her eyes, and asked her. She said her husband beat her. (Orapin)*

- *Oh! I remembered that a Thai woman here, she owned a Thai restaurant. Her husband attacked her until she had a fracture wrist. (Patra)*
- *When I see an American husband abuse Thai wife, I try not to involve in the situation. It is the husband and wife matter. It's not good to get involved.... I saw many couples, they fought and later they got back together. Some couple moved to Thailand or other states. (Srisuda)*
- *My brother was also an abuse victim. Actually, his wife abused him and he abused his wife. His wife abused him physically because he went out and had another woman.... (Tanya)*
- *Not like my dad, when he got drunk, he abused my mom, not good to be close to him. He hit us real hard, sometimes hit my mom too. (Varuni)*

### *Theme Two: The Experience of Domestic Violence*

Four of the study's participants had experienced domestic violence in their marriages and, among those women, three provided vivid descriptions of their abuse as victims. Not all of the study's participants experienced domestic violence directly. However, as a general definition, all of the participants identified domestic violence as an action in which the husband abuses the wife or the wife abuses the husband. Additionally, they recognized abusive actions as being physical (e.g., beating or slapping); verbal (e.g., cursing, using bad words); emotional; psychological; and sexual (e.g. forced sex). They also included assault and threatening behavior as abusive actions.

*Infidelity as a cause of domestic violence among Thai women*

Analysis of the study's data revealed that the husband's infidelity is a major component of domestic abuse among Thai couples. Three of the participants disclosed their earlier partner's unfaithfulness in their relationship. Two of the participants said their husband's infidelity occurred when they gave birth to their children—a time when being a parent should be a moment of joy and blessings. One of these two women—Niramon—described how she acknowledged her husband's unfaithful behavior and tried to discuss it with him:

*I had experienced domestic violence myself. When I had a first child, there was no problem. Two months after my second daughter was born, I learned that he has another woman. I told him if he had somebody else, we should talk. He denied and tried not to face with me.*

Lalana indicated she experienced infidelity repeatedly and, in her personal background, recounted incidents while she was dating and when she was married. The unfaithful behavior elicited verbal abuse in her experience:

*My Thai husband, yes, because we were young. We fought very often. My current husband is very quiet and calm. With my first husband, we dated when we were young since we were 14 years old and got*

*married at age 21. Married for 7 years then got divorce. He has other women. I wasn't happy. We used bad words a lot, not physical. I told him I wanted to divorce him. When I went to the hospital to deliver my son, he also had a nurse.*

In the past, polygamy was a customary practice in Thai society. A woman accepted her status in the family, whether she was the husband's first, second, or third wife. This arrangement seemingly still exists in present-day Thai society, in which the woman is expected to remain an obedient, submissive wife while the man is allowed to pursue other relationships. Varuni's experience with her Thai boyfriend illustrates this apparent expectation of women. Despite having been in a long-time, intimate, dating relationship with Varuni and asking her to marry him, her boyfriend wanted to have one more woman in their marriage. Varuni described her situation as follows:

*I had a broken heart from Thailand before I came here. My Thai boyfriend and I loved each other very much. We dated since we were in high school through college. The relationship continued until we graduated from college. I had dated him for 12 years, but later I found out that he had another woman while he had me. He wanted to marry me, and asked if he could have one more woman. She was his secretary. I thought this was not good. I felt Thai men are not faithful. Thai men abuse their wives by didn't respect them. It was like respect,*

*but it wasn't. I felt I was forced to accept the situation. At first, I didn't felt that because I thought—oh!—he loved me, he wanted to marry me. But another thought, why I had to share the one who I loved with other woman. (Varuni)*

#### *Abuse as a Parenting Style*

According to a Thai proverb, “Rak Wua Hai Poog Rak Loog Hai Thee.” Translated into the English, the proverb states, “If you love your cows, you have to chain them, and if you love your children, you have to flog them. As Tanya stated, abusive behavior can be used to discipline children:

*But in my family, there is no abuse. I will not use bad words because I grew up in a family that my dad used verbal abuse a lot. He didn't use bad words, but used the words to look down you. I was a musician—he said why I had to do that. At that time, he had another woman, it broke our family apart*

#### *“Abuse is Like a Chain”*

Domestic abuse can be viewed as a cycle or an ongoing process that can occur from generation to generation. Two of the study's participants compared abuse to a chain that can either be passed on to somebody else or ended.

*It was like a chain. When you had been abused and then you use it, by abuse somebody else. But I don't, the chain of abuse ends here and now. I will not abuse my husband or my daughter. I don't use verbal or emotional abuse. I saw that in family, if there is a fight, it makes family members unhappy. (Tanya)*

*So if I saw that someone was aggressive or like to beat, I would avoid that person. If there is love, there is no violence. It continues like a chain. Because the one who love me, he will not abuse but care about me. (Varuni)*

### *Theme Three: The Existence of Domestic Violence among Thai Women*

#### *Wife Abuse*

At the time of this study, Malini was the only participant currently being abused.

She provided the following description of her experience:

*My husband is a Marine. He always expresses his feelings like this. Aggressive and curse a lot. The first 6 months was the adaptation period. Language, food, his behavior to use his foot point at an object, uses his hands to touch my head, wear shoes in the house. We frequently fight. Over and over again. He complained that I wasn't the person who he expected to see. I didn't get along well with his children*



*or do the good thing for his children. That's far more than he expected. He abused me physically, cursed, called me name, but I fought against him even though I was smaller than him. I think because of the Marine characteristics. I saw most of Marines are aggressive and have bad attitude. I only know one Marine friend who is not aggressive or has bad attitude. The first time I knew you wanted to talk to me, I don't want to tell you about this. I don't feel good about telling it. But I think you may use it as a resource for your study. I feel that, as a wife, I should not tell our business between my husband and me to anyone else. I should keep it to myself. I didn't tell my family. I don't want them to concern about my life or my marriage. The abuse began within 6 months after marriage. When I fought with my husband, I response the same way he did to me. Beat him. Curse him. Most time I was beaten.*

#### *Domestic Violence in the Thai Community*

As revealed in the following statements, over half of the study's participants had believed, been told, or witnessed domestic violence in other Thai women.

*I believe there was domestic violence among Thai community, but no one had told me about it. (Areeya)*

*In the U.S. I knew there was a woman who had been abused by her husbands. She got married several times—she was the sister of the wife I stayed before I met my husband. She got raped, beaten, and seriously injured. But now she married to her current husband, a retired soldier. Another woman I knew, they are here, her husband abused her psychologically. He had a lot of women since they got married. While she was pregnant, he had another woman. (Busaba)*

*I know there is a Thai woman who has been abused. I didn't know her personally, just know from her close friend that this woman works at Wal-Mart and had two children. Her husband doesn't have a job and have no money. They depend on her income, which is very little. Her husband beat her, her neighbor call the police. He was in jail and then she took him back. This situation goes on and on, her friend felt sorry for her but can help anything. They will help her whenever she has a problem. But it ends up the same. I think because of no job and money induced the abuse in their case. (Duangrat)*

*I heard once that there was a Thai woman who dated a White guy. She got pregnant. That guy didn't want to get married. They got married after she had 7 months pregnant. Before their marriage, this woman already owns a house. She worked as a waitress. Finally, they got*

*married and had one more children. He expelled her from her house. Filed for divorce. Sold the house and divided the money and gave to him. He was a lawyer. I didn't know her personally. (Kanda)*

*I have not heard anything directly about domestic violence. But I believe it occurs, but no one tells anyone. (Orapin)*

*I have never heard or seen in Thai Community. I am not sure if there is any. Oh! I remembered that a Thai woman here, she owned a Thai restaurant. Her husband attacked her until she had a fracture wrist. Previously, they owned the restaurant, they worked together as a waiter, waitress. They are in their thirties. Now the wife was dead, not the violence cause but she had cancer. (Patra)*

*I knew from my friend a case of Thai woman. She had been abused by her American husband. He wouldn't let her go out or connect to Thai community because he feared that she would have an option. He had her stay home. I am not close to Thai women here. Normally, I spend my time with my family.... I know that a lot of Thai women who married to GI have this kind of experience because they told each other. Most of these women came from the uneducated family or farmer background. They didn't have higher education. I think the*

*most problem is about communication. They are not fluent in English, so they can't speak clearly. They can't agree on family business/matter. It creates the problem in the family. (Tanya)*

*I saw many of them. Especially, Thai wives abuse American husbands. They're pitiful. They came here because they were military wives. After they were married and moved to here, they couldn't speak English, didn't have social life. They went to casinos. Some people went bankruptcy but her husband still love and stay with her. I knew a woman, she gambled and lost around \$100,000. She took her husband's money to gamble. Her husband is am engineer and is a very, very good person. After he retired, he got \$500,000. She gambled it all. Now they live in a mobile home, but her husband is still with her. They used to have a very big house, but they sold it to gambling. This woman has a daughter from previous marriage in Thailand, and her daughter came to stay with her and wanted to get married to American to get a green card. Her daughter is very beautiful. She finished college from Thailand. The guy wanted to marry her for real, but she wanted a mock marriage—she got a boyfriend in Thailand. This guy murdered her and killed himself. It was on the front page of Thai newspaper here. I felt her mom's life was very pitiful. (Varuni)*

Varuni was the only study participant who admitted that she abused her husband during the early years of their relationship. She described her behavior as follows:

*...I am the one who being aggressive to or abuse them...I told my husband I had even-tempered. I became angry quickly and calm down fast. After I was angry, I would apologize to him because I knew I was wrong but I couldn't control myself. [I] made a big deal from nothing... For instance, he turned the car to the left instead of to the right, I would yell at him. After a moment, I told him I was sorry, I just couldn't control myself. The first year, it was very severe situation. The first two years, he almost gave up...I abused him. I felt sorry for him. He has been long time abused. After 5 to 6 years, I realized that I abused him. I felt guilty and tried to adapt myself.... I tried not to get angry. At the same time, my husband even spoiled me, which made me even guiltier. Like I was a bad child, I tried to change myself even more. Now I don't yell at him... Now, I don't abuse him anymore. In the past—I am a small person, and he was 6 feet tall—when I got mad, I hit him with my fist... One time I fought with him, he didn't fight with me, and he was sitting and crying and my sister just happened to see it. She almost came to hit me because I made my husband cried. She blamed me that I was so stupid. My husband is a very good man. She asked what I wanted and why I treated my husband like that. I tried*

*very hard to change myself. I told him if you wanted me to change please tell me because I wanted to be your good wife. Sometimes I thought I should see a psychologist or a psychiatrist, but my husband said I didn't have to go—I was normal. He is very supportive. He loves me. He had motivated me to desire to be a better person.*

#### *Theme Four: Factors Considered to be Violence-Protective*

##### *Husband's Characteristics*

Seven of the women admired and credited their husband's personality and characteristics as assurance that domestic violence would never occur in their marriage.

The following statements illustrate their experiences:

- *I think it is because my husband loves me so much and I love him so very much and because we have a son to take care of.*  
(Duangrat)
- *As a result of growing up here, he learned about the equal rights between man and woman. As I told earlier, he helped me in household duties. If I cooked, he would wash the dishes. Washed our clothes or cleaned the house.* (Kanda)
- *My husband is a good person. He will never do that to me.*  
*Everyone in my family loves him.* (Lalana)

- *With my husband, we talked a lot. I can talk anything with him. We want to have a family. People here are straightforward, and telling the truth when compare to Thai men. I don't think I will have the violence problem with my current husband. He is educated. (Niramom)*
- *I felt very fortunate, because my husband is very understanding. If I met a man like my dad, I am pretty sure that I will have dentures. (Varuni)*

Busba believed that, because her husband had been a victim of violence before, he avoided abusive behavior. She stated, “Another reason is he was so bored with his ex-wife because she always created a problem, used bad words, and cursed him.”

Areeya said communication and her husband's willingness to understand her personal characteristics contributed to factors that protected their relationship from domestic violence:

*I believe that because we had talked of anything and everything before we got married and we understood each other so much. That's why we didn't have any problem about domestic violence. I remembered I told him what I like or didn't like, such as I was not a patient one, I couldn't wait for anything, I didn't want to do what I didn't want to*

*do, if he did that to me I would be aggressive. So he really understood me.*

#### *Wife's Characteristics*

One of the study's participants, Orapin suggested a woman could protect herself from being abused by ensuring her financial independence:

*I try to tell every Thai woman to get a job, whether or not they make a lot of money, but at least to show her husband that she can take care of herself. Nothing is permanent. If he is gone, who's going to take care of her? I saw some women around here did nothing, just played cards or bingo all day. Their husbands gave them money. I was so worried about these women. I believe if woman is independent, no one can beat or abuse her. I even encourage women to open their own account. Some listen to me, some don't.*

#### *Confidence in the Legal System*

Three of the participants demonstrated their knowledge of and confidence in the U.S. legal system as a means of protection from domestic violence:

*In the United States, there is the laws to protect women. If domestic violence occurs, the women will be protected by laws. It is just*



*different from Thailand. In Thailand, as you know, wives were abused all the time. It seems to me that we need to change our laws. (Indira)*

*They knew my problem, and they told me if I got married and then my husband abused me, I would be protected by U.S. laws. This is not Thailand. (Lalana)*

*Beating or slapping here, they can't beat or slap women here, because if woman get bruise and go to work and somebody see it, she will be told to report to the police. The men will go to jail. (Raviwan)*

#### *Theme Five: Life as a Thai Wife*

In an effort to establish rapport with the study participants, the researcher began each interview by asking the women to tell their stories about their relationship with their husbands, such as how they met and what their life was like before or after marriage. The question was intended to be open-ended in order to allow the woman to tell her story as she wished, sharing as many or as few details and feelings as she wanted to convey. As a Thai woman herself, the researcher understood that Thai women often limit themselves in expressing their thoughts and feelings to another until they reach a point where they feel comfortable talking with that person. Therefore, the open-ended question was designed to initiate a comfortable tone for the interview.

In describing their relationships, the participants' stories included accounts of the challenges they faced as immigrant Thai wives living in the United States. They had to adapt to a new environment, different language, unfamiliar culture, and being away from their family in Thailand, all of which often generated feelings of frustration and helplessness. Thus, the theme of "Life as a Thai Wife" emerged and included the subcomponents of adjusting to a new context or society, learning and accepting a cultural difference, and connecting with family in Thailand.

*Adjusting to a New Context/Society*

In describing the early stage of their marriage as a Thai wife living in the United States, the participants acknowledged the challenge of having to adapt to their new situation. As Malini stated, "The first 6 months was the adaptation period." Areeya's description echoed Malini's when she said, "The first six months is the time for my adaptation." Many of the women related feelings of frustration, helplessness, inferiority, and difficulties in communication during this period. The following statements illustrate these feelings.

*In fact, when I came here I became a housewife. I had no job. My husband had to give me money. I could not drive a car. My spoken English was not fluent. What I used to do when I was in Thailand, I could not do it here. I was so frustrated, felt like I was helpless... I thought there was a culture shock. I could not do anything, like I have no legs, no arms. (Areeya)*

*The first time when we got married, I had problems with language. When he said something, I didn't understand. I felt myself inferiority. He said one thing, I thought he meant another. I tried to adapt myself.*  
(Busaba)

*[A]fter we got married, our relationship had some problems. It was about the language. I didn't understand well about English. When he said something, I thought he meant something. I got frustrated—felt inferiority why he said that to me. In fact, his meaning was far more different than what I understood [laughs]. It took quite some time for me to adapt into the situation. Adapted gradually, I would say. I got pregnant after that. When I had my son, things had changed to be more peaceful.* (Duangrat)

*...I think I am the one who try to adapt myself into American society because I live here and work here. My husband adapt into Thai culture only in this house. I think I need to adapt because I am in American culture/society.* (Kanda)

Niramon did not have any difficulties communicating with her husband because, as she mentioned, "...after marriage, I didn't have any problem with English because I

was an English teacher. If I didn't understand something, I clarified with him what he meant." However, she and her husband did not live together at the outset of their marriage because she remained in Thailand. Additionally, she admitted she was frustrated after first moving to the United States due to not receiving any job offers:

*The first two year of our marriage we didn't live together, he stayed here and I stayed in Thailand with my daughters. He said he would like for me to come to stay with him as a couple and he believed that I could find a job here. I quitted my job and came to stay with him. My daughters came with me as well. The first time when I got here, I tried to look for a job. I didn't have any job offer. I was so frustrated.*

Lalana was another study participant who struggled with English and had no job offers:

*My English is not good enough. I looked for a job, but didn't have any job offer, because I had a problem with English. I couldn't remember vocabulary. I had a problem with speaking, but my husband tried to understand me. Sometimes, he had to translate what I said to his family. I didn't want to talk to anyone else because they wouldn't understand me.*

Half of the participants neither shared about their period of adjustment into the American society nor mentioned having problems or any frustrations in adapting. At the time of this study, these women had already lived in the United States for a number of years. Additionally, their educational background may have helped them adjust to their new environment.

#### *Learning and Accepting a Cultural Difference*

The study participants described incidents in which their husbands or others misunderstood the women's particular Thai manners, characteristics, and behaviors. The women's experiences illustrated the need for accepting and learning cultural differences. Areeya described having difficulty explaining her thoughts and feelings to her husband:

*Because at the beginning of our marriage, even though I could speak English, sometimes when my husband talked to me I did not understand. I got frustrated, so I used aggressive behavior toward my husband. I did not use my voice, just use passive-aggressive, didn't answer his question, remain silence. I believe it is because of culture difference. Thais express less in feelings. I didn't know how to express my feelings or explain my thoughts. When my husband asked, "What are you thinking?" or "How are you feeling?" I replied by speaking loudly/raising my voice, "I don't know" or "I don't want to talk right now." My husband would come to soothe me and said, "That's OK."*

In Thailand, it is considered good manners for a guest to remain busy with one task or another in the host's home. A Thai proverb states, "Yoo Baan Taan Yaa Ning Do Dai, Pan Wua Pan Kwai Hai Loog Tan Lain," which, in translation, advised, "If you stay in someone's house, you should make yourself useful by doing something." Duangrat described trying to share her Thai good manners with her husband's mother:

*After we got married, his parents became to know me more. I am a Thai woman, I can't sit and see his mother cook for us and clean after we ate. I felt so guilty. So I helped his mother cook and clean when we went to their house. She didn't want me to do that. I said I had to do because she cooked for us and had to clean for us. I felt uncomfortable to stay without helping her. Later she understood. Sometimes, when I went to their house, I helped her cleaned the house and washed the dishes. I explained to her that, in my parents' house, I would do like this as well.*

In Thai culture, one's head is considered the highest or most sacred part of the body, while the foot is regarded as the lowest or most dirty part of the body. Thus, Thai people consider it appropriate to take off the shoes when one enters the house. Some of the women in this study said that, after moving to the United States, this practice represented a big difference between them and their husbands. However, the women could not discard their custom:

*I think the most difference is when he used his feet to point at the object, which we Thai, consider it is not appropriate manner.*

*Sometimes he uses his foot to touch me, I told him, and we didn't do that in Thailand. He wore shoes inside the house. I told him that it made our house dirty. If we take off our shoes, our house will be much cleaner. He agrees on that. When we go to the Buddhist temple, he will sit on the floor and point his toe toward the monks. I tell him not to do that. It's inappropriate in Thai society. (Kanda)*

*He learned that I like to take off my shoes when we are in the house. When he had his friend come to visit, he would tell his friends that his wife didn't like to wear shoes in the house. My husband had a habit when he took off clothes, he would put everywhere in the house. Now it's much better. He knows where to put it because I put the basket and tell him to put his clothes in the basket. (Lalana)*

*Language, food, his behavior to use his foot point at an object, uses his hands to touch my head, wear shoes in the house. (Malini)*

In Thailand, dinnertime provides family members with the opportunity to gather together and share the events of the day. Raviwan's Thai parents lived with her and her

husband, and they continued to show up at the dinner table. She related how her husband disliked this custom:

*I can give you an example. When we were going to have dinner, my parents would sit right there in the dining room. My husband said why every time when he would have dinner with me, my parents always sat over there. Why didn't they sit somewhere else? He needed a private time. In Thailand, if you still remember, the dinnertime is the time that all family member get together and tell what we had done during the day. Kind of our custom. Right? My dad kept on that habit. I didn't tell him either about in here a husband needed a private time. I thought my dad should know by himself. I didn't tell my father that my husband didn't like to see him in the dining room, but I told him that my husband needed a private time with me when he had dinner.*

Thais are accustomed to being around their extended family. Family members are welcome to visit at anytime and stay as long as they want. For Tanya, this behavior at first created some tension in her marriage, although later her husband accepted it. As Tanya stated:

*We try to balance between two of us. At first, we had some conflict about culture. For instance, Thais are close to family. I had my mom*



*here. Sometimes, my mom had a long vacation and stayed with us to take care of our daughter. For Americans, normally they wouldn't have their relatives here within the house. He changed his perspective on this when he saw that my relatives [mom] didn't behave like his relatives. They stay with us and help us out, everything—housework, washed clothes, ironed clothes, cleaned dishes, cook. Same as we were in our family. We didn't stay like a guest. His relatives stayed like a guest. Later on, he understood Thai culture much more. Because I took him into Thai community, which helped each other among Thais as well as in a group that have same psychological needs.*

#### *Connecting with Family back in Thailand*

Thais are close to their families, and strong familial bonds always span three generations of family members. In the past, the extended family was the most common structure of the Thai family.

The participants in this study described their efforts to stay connected with their family members back in Thailand. For example, the structure of the Thai family was portrayed vividly in Duangrat's situation, in which she remained emotionally connected to her parents and her disabled brother. As she relates below, Duangrat thought it was her responsibility to take care of her brother and her parents:

my brother in Thailand. My brother encouraged me to try harder—don't give up. He told me to improve my English.

Unlike Lalana, Malini chose not to tell her family about her domestic violence experience. She said, "I didn't tell my family. I don't want them to concern about my life or my marriage." However, Malini did ask for her sister's advice on matters concerning her son:

*[My]y son is now 14 months but he can't speak a word. He had a baby talk. I talked and consulted my sister in Australia. She told me not to speak Thai to my son. It made him confused or slower his speaking. It would make him to become a less confidence child.*

#### *Theme Six: Ability to Perform Duties as a Woman*

When she gets married, a Thai woman's ultimate goal is to be a good wife. Her major duties are to take care of and comfort her husband. In this study, all of the participants acknowledged the concept of "a good wife," but not all of them could fulfill this task.

#### *Being a Good Wife*

Thai wives are very obedient and submissive. The primary tasks of a good wife are domestic chores such as cooking for family members, cleaning the house, washing dishes, and laundering clothes. The following statements illustrate the participants' perceptions of being a good wife:

- *Thai women always say yes, because we were socialized to be a good woman, good wife. Unlike the women here, they know how and when to say no. (Indira)*
- *I try to be a good wife and a good mother. Usually I put their needs first. Thai woman is a sweet person. I think I am that kind of person too. I am willing to please my husband and my son. (Duangrat)*
- *I married to him. I do household duties. I help him everything. I like to see my house cleaned. I love to cook for my husband. If I am really busy, my husband will help me clean the dishes... I try to be a good wife. (Busaba)*
- *[A]bout cooking, we have no problem with it. We cook Thai food 80 to 85% in our house. He can eat hot and spicy food. I feel it's my responsibility as a wife that I need to prepare and cook for my husband. (Kanda)*

Other participants provided further descriptions of being a good wife:

*My daily duties were cooking and preparing Thai food for my husband, cleaning the house, washing our clothes, kind of being a good wife. He had me packed his lunch everyday. When he was at work, he would tell anyone that his wife's food was really good taste. He had other friends tasted his food. Called me about three to four times a day from works and thanked me for preparing his lunch. I felt*

*really good because he always appreciated what I had done for him.*

*(Areeya)*

*Now I become a housewife. I don't do anything, just take care of my husband, my daughters. Cook sometimes. His family is like Thai family. They are close to each other. His father told me as well that I didn't need to work. His son can take care of me. I felt very welcome from his family..., Sometimes I get bored because I don't have anything to do. I cook Thai food for them sometimes. I got mad at my husband. He should plan to look for a job before I quit my job in Thailand. It made my husband and my daughters unhappy. Before I came here, my husband convinced me that if we moved here, my children would have a good opportunity about education. (Niramon)*

*My activities and duties each day begins after my husband goes to work. I'll read Thai online newspaper, do household work such as wash the clothes, clean the dishes, and clean the house. In the afternoon, sometimes prepare food for my husband. I am not a good housewife. I am not a good cook, have no skill on cooking. (Patra)*

*After marriage, I became a housewife. My life had changed, because I used to work very hard at the restaurant. My life is much comfortable,*

*I even more love him. I have more money, more than I worked for myself. My husband gave me everything. I love being a housewife because I don't have to do anything. Ten years later, I was getting bored with my life. Because I didn't do anything, just did household jobs—cooking, cleaning, gardening, washing clothes. (Varuni)*

*I used to cook for my husband, I don't cook anymore. Basically, we go out to lunch or dinner. I know a lot of friends here. So we just go to their restaurant. Today go to this place, the other day to that place. We go to the Thai Buddhist temple every weekend. We buy the food from there and bring it home. (Srisuda)*

Orapin expressed guilt over being unable to perform the cooking task:

*I felt guilty sometimes that I didn't take good care of him. I am not a good cook. I knew nothing about cooking. That's why I like to go to the Buddhist temple. There are some women who are good at cooking. They cook Thai foods and offer for the monks. I always bring home all those left over and eat for a week, every week.*

A few of the women, however, did not have to cook for their husband and did not feel guilty about it. For them, completing household tasks was a shared responsibility between the husband and wife, as illustrated in the following statements:

*I am married to my husband. I didn't need to cook for him. He can cook for himself. This is different from in Thailand. I remember when I was young, when my father got home we would bring the food for him at wherever he sat at. In here, husband and wife take care of each other. Help each other in house duties. Speaking of farang [foreigner] when he marries to Thai woman and she does everything for him. It makes him feel like he has a better life than his parents. On the other hand, Thai woman marries to an American man—he takes care of her, which makes her even more love her husband. When I was in Thailand I had to serve every man in my family, such as my father and my younger brothers. (Raviwan)*

*So I have no problem to tell my husband about the custom within our family. If I cook, he cleans the dishes. He takes the trash. Gardening is mine because he doesn't like bugs. I design and take care of the garden, the house, and any other thing. In financial, he is a careful person. So he takes this job. We share the responsibility. If we don't understand, we talk as we are partner because marriage is like a*

*business. We talk about our income—I am his partner both in family and in business. (Tanya)*

Unlike the participants who described their marriage as being a partnership, Tanya shared a different point of view in her story about her mother as a wife:

*My dad did nothing. I remember when I was young. We needed to prepare for him. Polished his shoes. Prepared socks and necktie. My brother wiped the car every morning. When he came down meant he could drive us out and my mom was going to be the last person to leave. She had to cook for us, prepared school stuffs for us, prepared her own stuff for her class. She was so in hurry sometimes she didn't wear lipstick, or even forgot to zip her skirt.*

#### *Being a Good Daughter*

In Thai society, the adult children are responsible for taking care of their parents and extended family members. Thai women are socialized to be a good daughter. In this study, six of the women described how they fulfilled this role:

*I am obligated to send money back to Thailand because they expect me to give, to send. If I didn't give them, I felt guilty. I got really frustrated. Last year, there was a flooding in my parents' town—my*

*parents couldn't live there any more so they decided to build a new house. They asked if we wanted to join in this house. So last year I sent \$10,000. It was my husband money. After that, they needed furniture. I felt constraint because I had to send my husband's money to my family even though my husband was very nice and allowed me to do that. He was the one who sent it. I still felt constraint/frustrated.... I feel good that I can make money myself. In case my family needs money, I will send my money to them.... I don't want to burden him [husband].*

*(Areeya)*

*When I had some money, if my sisters asked me, I sent my money to them. If my father wanted something, and he asked me, I sent money for him. If my husband thought it was necessary, he also helped me. I felt I didn't want to use his money. I didn't want him to think that I wanted only his money. (Busaba)*

*Until now, my husband understand that I have a responsibility to send money back to my parents in Thailand. It is expected in Thailand that when a daughter married to an American and stay here, she should send the money back, then they can tell others or show off that their daughter send them money. Make them proud of me. They are proud of me married to a wealthy husband. (Duangrat)*



*[W]ith my immediate family, I send money to my mom monthly even before I got married. I told my husband that it is my responsibility to take care of my parents when they get old. When we have our first child, my mom came here and helps me take care of my daughter for 10 months. So I increase the money for my mom. (Kanda)*

*When I went to Thailand, I always gave the money to my parents. I sent the money for them sometimes. We went to Thailand 3 to 4 years ago to take care of my mom for 3 to 4 months until she passed away. (Srisuda)*

In addition to offering financial support, being a good daughter was also reflected in providing physical care. Raviwan shared her story about caring for her mother, who had Alzheimer's:

*It was very hard for me to go taking care of my parents and then drove back to take care of my husband. It was too much to me. I felt fortunate that I had an opportunity to take care of her until she died 3 years ago. My father and I shared responsibility in taking care of my mom.... My mom's symptoms were getting worse. I had to spend my time with my mom even more. My husband was jealous again. I*

*explained to him that I married to him and will be with him for the rest of my life. My mom was nearly dead, and I only needed to do this. If my mom died, I would have time for her. Taking care of my mom was a duty that I had to do because it was our custom. If his mom got sick and needed to be taken care of and she lived with us, I would take care of his mom as well.*

Thai custom exhibits a pattern in which, from generation to generation, daughters always support their parents. For example, Tanya witnessed her mother and other women who tried to be good daughters:

*My mom worked and supported [money to] her brothers until they earned master or doctoral degree. I saw several cases who marry to Americans—they had problems when they needed to help their immediate family. There was a woman who was in a “money shared circle.” She told me to keep the money for her because she wanted to use this money for her father, but he couldn’t tell her husband. Her husband will be disappointed that she spent money on her own family. Because Americans didn’t like you to send money to your family, so you can’t tell your husbands. I saw many cases like this.*

*Being a Good Mother*

Five of the women expressed an awareness of their responsibility as a mother whose ultimate goal is to take care of her children:

*After my son was born, I became a full time mom and a housewife.... I had only a short period of time while my son was in a nursery, but I still have responsibility to take my son home after nursery. Basically, my time is dedicated to my son. I try to be a good wife and a good mother. Usually I put their needs first. Thai woman is a sweet person. I think I am that kind of person too. I am willing to please my husband and my son. (Duangrat)*

*I have two daughters. I taught them to blend both cultures. My daughters are articulate, very assertive, but still have some Thai woman character. They are sweet and always ask if I need anything. I am so proud of them.... I would like them to stand for themselves in this society.... I taught my daughters, too, not to let anyone to abuse her if they have a boyfriend. Actually, I am not worried about my daughters. I believe that they are smart enough and know how to protect themselves. (Indira)*

*My focus right now is on my son. I try to be a good mother. I do my best for my son. I didn't think about going back to work again. I try to raise my son. I want my son to get warm from me. (Malini)*

*Before I came here, my husband convinced me that if we moved here, my children would have a good opportunity about education.*

(Niramon)

*I gave him [ex-husband] what he wanted. I just wanted my children. Everyone said I was so dumb to give everything to my husband. They would never know those things were not important to me at all.*

(Niramon)

Tanya illustrated her efforts to be a good mother by describing advice that she shared with her daughter. She said, “I taught my daughter what abuse was. Abuses are anything that you use over the limit, or you let yourself do what you like way too much, or you work hard but don't have enough rest. That's you abuse your body.” Additionally, Tanya recognized that the way her father had raised her had hurt her greatly. She emphasized that she would not do the same to her daughter:

*Because I didn't like my dad's style, my daughter, I don't compare her to any other child. Sometimes I wanted her to do something, but she*

*didn't want to do or she didn't do. I wouldn't condemn her because it is individual preference.*

Tanya also had a strong opinion about putting family first, as reflected in her following statement:

*I have a motto that one hand carries a rubber ball and another hand carries a glass ball. The glass ball is my family. I can drop the rubber ball, but I can't drop the glass ball—my family always comes first.*

### *Summary*

The information presented in this chapter provides a comprehensive description of the six themes (or categories) that emerged from the data analysis to describe Southeast Asian immigrant women's perspectives on domestic violence. Among each of the six themes, additional components were identified. The first theme addressed the study participants' knowledge about domestic violence and their sources of information. It included the components of each woman's definition of domestic violence and her source of information. The second theme described the participants' experience of domestic violence. Embedded in this category were the following components: infidelity as a cause of domestic violence among Thai women; abuse as a parenting style; and the phrase, "Abuse is like a chain." The third theme identified the existence of domestic violence among Thai women and included the components of wife abuse and domestic violence in

the Thai community. The fourth theme, described factors that the participants considered to be violence-protective. The components of this category were the husband's characteristics, the wife's characteristics, and confidence in the legal system. The fifth theme addressed life as a Thai wife and included the components of adjusting to a new context or society, learning and accepting a cultural difference, and connecting with one's family in Thailand. The sixth theme described the ability to perform one's duties as a woman. The components for this category included being a good wife, being a good daughter, and being a good mother.

Chapter Five presents a more detailed discussion of the study. In addition, the relevance of the study's findings to previous research, the limitations of the study, the study's implications for nursing, and recommendations for further research are also addressed.

## CHAPTER FIVE

### Summary, Research Relevance, Limitations, Implications, and Conclusions

This chapter provides a discussion of the findings of this study and is divided into four main sections. The first section presents a summary of the purpose and the findings of this study. The second section focuses on the relevance of the findings to previous research. The third section addresses the limitations of this study. The fourth section describes the implications for nursing

#### A Summary of the Purpose and the Findings of the Study

The purpose of this phenomenologic research was to assess and describe the lived experience of Southeast Asian immigrant women who live in the United States, including their relationships with their partners, their knowledge of domestic violence, and the existence of domestic violence in the Asian community. The study sought to reveal more fully the meaning and essence of the experience through the eyes of the women who participated in the study.

Fourteen Thai immigrant women agreed to participate in this study. Ten of the participants did not identify themselves as having been abused by their husbands; two participants experienced domestic violence in their previous marriage with Thai men. One participant identified herself as having been abused by her husband, and another one revealed that she had abused her husband during the first 5 years of their marriage. The

women ranged in age from 28 to 67 years, with a mean age of 43 years and a median age of 50 years. The length of time they had lived in the United States ranged from 4 to 34 years. All of the women spoke Thai fluently, and 13 spoke English fluently. The interviews were conducted in Thai, according to the participants' preference.

Six themes were identified in the study. Among each of the six themes, additional components were identified. The first theme addressed the study participants' knowledge about domestic violence and their sources of information. It included the components of each woman's definition of domestic violence and her source of information. The second theme described the participants' experience of domestic violence. Embedded in this category were the following components: infidelity as a cause of domestic violence among Thai women; abuse as a parenting style; and the phrase, "Abuse is like a chain." The third theme identified the existence of domestic violence among Thai women and included the components of wife abuse and domestic violence in the Thai community. The fourth theme, described factors that the participants considered to be violence-protective. The components of this category were the husband's characteristics, the wife's characteristics, and confidence in the legal system. The fifth theme addressed life as a Thai wife and included the components of adjusting to a new context or society, learning and accepting a cultural difference, and connecting with one's family in Thailand. The sixth theme described the ability to perform one's duties as a woman. The components for this category included being a good wife, being a good daughter, and being a good mother. The similarities and differences between these themes are discussed in the following section.



### The Relevance of the Findings to Previous Research

Understanding the true essence of Southeast Asian immigrant women's perspectives on domestic violence will assist nurses to understand the unique situation of immigrant women. The major findings of the present study in the context of what is already known about domestic violence among Asian women is discussed below.

#### *Knowledge about Domestic Violence and Sources of Information*

The women defined domestic violence as an action in which the husband abuses the wife or the wife abuses the husband. Additionally, they recognized abusive actions as being physical (e.g., beating or slapping); verbal (e.g., cursing, using bad words); emotional; psychological; and sexual (e.g. forced sex). They also included assault and threatening behavior as abusive actions. The behaviors described as domestic violence are similar to the mainstream definition. The participants' knowledge about domestic violence may be because they not only had experienced or witnessed it themselves, but also had been exposed to the mainstream definition in the U.S. media. It is important to note that the participants in this study were educated and that their status in the society was quite privileged. It is possible that they could easily have had access to this kind of knowledge.

#### *The Experience of Domestic Violence*

In this study, the participants who experienced domestic violence identified the husband's infidelity as an aspect of domestic violence among Thai immigrant women. In the past, polygamy was a customary practice in Thai society, and women accepted their status in the family. They were willing to continue their role as an obedient and

submissive wife. Nowadays, monogamy and equal rights are promoted in Thai society. The status of Thai women is elevated. However, Thai men still practice polygamy even though it is no longer acceptable. This practice causes psychological abuse in Thai women. The number of Thai women married to Caucasian men is an increasing social phenomenon. The reputation of Caucasian men may be described as faithful, responsible, and financially stable. This finding is very unique in Thai women.

The study participants who experienced infidelity often treated the situation as a private family matter. In Thai culture, feelings of shame forbid women to express or consult others. In Asian-American families, several core values reflect a strong belief in the importance of the family over the individual. These values include respecting parents, the elderly, and authority; maintaining peaceful and agreeable relationships by accommodation, compromise, conformity, and other nonconfrontational means; avoiding disagreement and conflict; and saving face. Losing face is often viewed as not merely a personal shame. Consequently, preventing shame is a major social-control mechanism (Hong & Friedman, 1998).

Conceptualizations of honor and shame are locally constructed and are negotiated by Asian women in unique ways, according to the flexibility and risk women face in specific cultural issues. In contemporary Asian cultures, shame is typically equated with both female sexuality and social deviance. Fear of shame routinely acts to silence women about their experiences of violence and encourages them not to resist sexual coercion (Bennett & Anderson, 2003).

According to a Thai proverb, “Rak Wua Hai Poog Rak Loog Hai Thee.”

Translated into English, the proverb states, “If you love your cows, you have to chain them, and if you love your children, you have to flog them.” Thai parents interpret this proverb as a way to discipline their children. They may not realize or recognize this form of discipline as abusive behavior towards their children. As a result, at least two of the participants in this study experienced a poor relationship with their fathers.

Two women in the study experienced domestic violence in their early family life. They likened domestic violence to a chain that could be passed on to the next generation or ended. Of the two women who experienced domestic violence while growing up, one admitted that her own current abusive behavior was the result of how she was raised in her family.

#### *The Existence of Domestic Violence Among Thai Women*

Three women in the present study admitted they had been abused. One of these three women claimed that, at the time of the study, she was being abused by her husband. She described her husband as an aggressive man and claimed his career as a Marine formed his abusive personality. Another confessed that she abused her husband. She acknowledged that her family background played a major role in developing her abusive behavior.

The present study viewed domestic violence from a feminist perspective, in which the central concept is women’s oppression and lack of equality. This perspective could not be explained by the study’s findings.

Over half of the women in this study believed domestic violence occurred in the immigrant Thai community. Their perception was based on their own experience or on what they had been told about or had witnessed themselves. The types of behavior they witnessed were physical and emotional abuse. These immigrant women's experiences are similar to statistical evidence from previous research on domestic violence in Thailand, acknowledging that Thai women are subject to domestic violence—including physical, sexual, and mental abuse—by their husbands (Edwards et al., 1992; Hoffman et al., 1994; Stripichayakan, 1999). Additionally, other studies have found that domestic violence has become a leading issue and a major concern among the Asian American community (Huisman, 1996; Tang, 1994; Yoshioka et al., 2001). Until the present study, no data existed on the experiences of domestic violence among Thai immigrant women.

Because the women in the current study considered domestic violence a family matter, they believed wives should not share this kind of problem to others outside of the family. Furthermore, they reported they did not want to get involved. This finding corroborates previous research, in which results from a national survey revealed that Asian American women are significantly less likely to report incidents of rape and physical assault than women of other racial and ethnic backgrounds (Tjaden & Thoennes, 1998).

#### *Factors Considered to be Violence-Protective*

The majority of the participants in the present study had not experienced domestic violence in their marriage. Among the factors they attributed to their nonabusive relationships were their husbands' positive characteristics. They praised their husbands

for being helpful, understanding, educated, straightforward, able to learn from past experience, supportive of equal rights, a good person, and from a good family background. It is important to note that the majority of the participants belonged to a high social status in terms of age, education, and an annual income of above-average to high. Previous research findings show that women with an annual family income under \$10,000 are more likely to report having experienced violence by an intimate partner than women with an income of \$10,000 or more and that women aged 30 to 64 years old are less likely than women aged 19 to 29 years old to report violence by intimates (Bachman & Saltzman, 1995).

Another topic the study participants mentioned as a protective factor against domestic violence was a woman's ability to remain financially independent. One woman in the study suggested other Thai immigrant women protect themselves from being abused by getting a job, taking financial care of themselves, and remaining independent. This finding supports previous research showing that women who are economically dependent on men are subject to being abused (Dobash, E., & Dobash, R.P., 1992).

Three of the participants in the current study mentioned confidence in the U.S. legal system as a protective factor. This finding may be useful to identify and improve the resources available for Southeast Asian women experiencing abuse.

### *Life as a Thai Wife*

As Thai immigrant women in the United States, the participants in this study reported having to adapt to many new challenges, which included accepting cultural differences with their non-Thai husbands. They described their experience in the early

stage of their marriage as a time for adaptation. For one participant, the time for adaptation lasted for a period of six months. The women reported that, during their time of adjustment into a new society and with their husband, they struggled with feelings of frustration, helplessness, and inferiority, as well as difficulties in communication.

The women in this study described how, when they moved to the United States, they had to learn to accept a different set of cultural characteristics and behaviors, as displayed by their husbands. In doing so, they also had to adjust their own approach to the familiar customs and appropriate manners they had grown up with in Thailand. Some of the challenges they faced in their marriages were communicating with their husbands and expressing their feelings (i.e., having difficulties with language); learning to be a guest when visiting their in-laws, instead of, as in Thai culture, helping with household chores; and tolerating their husbands' habit of wearing shoes in the house or displaying actions that disregard Thai customs involving the sacredness of the head and unclean status of the foot.

Participants in this study also discussed the challenge of maintaining their Thai culture's strong bond among extended family members, which created additional cultural differences with their husbands. Although Thais usually avoid getting involved in topics considered as personal matters in a family, they are unfamiliar with the concept of privacy or personal boundaries. For example, in a house, no specific room is assigned to a family member (except to the father, as head of the household) and everyone in the neighborhood is welcome to visit at anytime. Thus, bonding among family members is very strong.

The women in this study reported still being close to their family in Thailand. They described situations that required them to care for their aging or sick parents—an important Thai family value that is expected of adult children. Additionally, the women often sought advice from family members or sent goods and money to help support the needs of their extended family.

Although the majority of the women in this study did not experience domestic violence in their relationship with their husbands, the cultural challenges they faced suggest issues that may require specific needs. Findings suggest the study participants encountered various constraints as immigrant women, such as the feelings of frustration and helplessness, and they needed time to adjust into the new society. Huisman (1996) examined the specific needs of Asian women who were abused and explored the various structural and cultural constraints that inhibit women from seeking help from mainstream social-service providers in the United States. The results showed that Asian women (particularly, recently arrived immigrant and refugee women) have needs that differ markedly from most battered women in the general U.S. population. The needs of the immigrant women focused on language, cultural, immigration, and legal issues. Preisser (1999) suggested that, because of cultural differences between the immigrant women and the service providers, the service providers require a culturally sound model in order to deal effectively with South Asian victims.

#### *Ability to Perform Duties as a Woman*

Upon getting married, a Thai woman's ultimate goal is to be a good wife. Her major duties are to take care of and comfort her husband. In this study, all of the

participants acknowledged the concept of “a good wife,” but not all of them could fulfill this task. The concept of being a good daughter and a good mother were also applied to the study’s participants. The ideals expressed by the women in this study are similar to those described in research conducted by Dasgupta and Warriar (1996). In the previous study, the researchers examined the ideologies and conditions that create women’s vulnerability to spousal abuse in the Asian Indian community in the United States. The study focused on the multiple factors involved in Asian Indian women’s experience of domestic violence. The results revealed that the most important factor in these women’s lives seemed to be childhood indoctrination into the ideals of being a good wife and mother, which includes sacrificing personal freedom and autonomy. Contrary to Dasgupta and Warriar’s findings, however, the majority of the women in the present study did not experience domestic violence in the relationships with their husbands. Thus, it appears the ideals of being a good wife, good mother, and good daughter do not contribute to Thai immigrant women’s vulnerability to domestic abuse. This difference in the findings may be because the participants in the Thai group were highly educated, had financial stability, and possessed the potential to adapt into the U.S. society.

#### The Limitations of this Study

Using the phenomenological approach, the current study provides a description and understanding of the perspectives of Southeast Asian immigrant women—particularly Thai immigrant women—on domestic violence. The purpose of phenomenological research is to describe experiences as they are lived and to capture lived experiences of study participants (Streubert Speziale & Carpenter, 2003).



Therefore, the limitations of this study, which was based on a select group of women, are recognized.

First, the majority of participants represented Thai immigrant women who are happy in their relationship and do not experience domestic violence in their marriage. The sampling was skewed toward the more verbal and articulate women who were willing to share their happy life. The statistics and evidence of domestic violence in this study may not represent the experience of all Thai immigrant women. However, this study is valuable as a preliminary investigation on the topic of domestic violence among Thai immigrant women.

Also, in this study, the researcher was aware of limitations in the recruitment process. The participants' demographic background may be different from average Thai immigrant women because they were more educated, articulate, and successful in their marriages. Their self-described sociomartial statuses were higher when compared to military Thai wives, as they witnessed it. The majority (8) of the participants were recruited by their social network, which represented the almost similar status in the society as well as their husbands' status and characteristics.

The women's voluntary participation in this study might indicate that this group of women was more prepared, knowledgeable, and interested in the issue of domestic violence than other Thai immigrant women. In addition, their answers reflected ideas that were more in accord with the mainstream information.

Although several participants in the study had witnessed domestic violence among Thai women in their community and were willing to contact these victims and

recruit them into this study, the researcher did not hear back from any of them. Those women might not be ready to reveal themselves as women who experience domestic violence.

Because the participants in this study are legal, permanent residents and U.S. citizens, the findings of this study may not be applicable to Thai immigrant women who live illegally in the United States or have poor language skills and have been previously abused or currently experience abuse in their marriage. It is possible that these women may face even greater challenges in acquiring effective treatment or access to health care due to their illegal status and their poor language skills.

Another limitation involving recruitment is found in the study criteria. Originally, the study criteria included immigrant Thai women who were living in the United States and were willing to share their knowledge about domestic violence. Due to recruitment difficulties, the criteria were extended to immigrant Southeast Asian women living in the United States. In fact, the participants in this study were recruited from Virginia and California. The inclusion of Southeast Asian women who did not have to personally experience domestic violence was added to the study selection criteria in the revised IRB amendment. However, all of the participants in this study were Thai.

Finally, in the original IRB, the personal interviews were tape-recorded and transcribed verbatim and, during the telephone interviews, the researcher took notes (as described in the consent form) and transcribed the interview. Later, the telephone interviews were recorded via the speaker phone and transcribed verbatim.

### The Implications for Nursing

The lack of information regarding perspectives on domestic violence in Thai immigrant women living in the United States represents a barrier to provide culturally sensitive care for these women. The results of this study highlight the perspectives of Southeast Asian immigrant women on domestic violence. Also, the results expand the knowledge of domestic violence among Thai immigrant women.

#### *The Recommendations for Nursing Practice*

The findings of this study provide valuable insight for healthcare professionals who are interested in assisting Thai immigrant women to avoid abusive relationships and providing the resources for these women. Improving nurses' sensitivity and awareness of cultural issues is essential to minimize the barriers in offering culturally sensitive care and enhancing the effectiveness of nursing interventions. Intervention efforts should focus on community- or local-level strategies involving the women and their families, social-service agencies, government sector, and community leaders. Nurses can reach out to these women through community women's organizations. Increasing the women's awareness about the availability of services and resources could be very helpful for them.

#### *The Recommendations for Nursing Education*

The findings of this study suggest that domestic violence should be an issue of concern for nursing students. For immigrant women with poor language skills, language and culture may be barriers for them to seek help when they experience abuse. Nurse educators have the responsibility to include and address the philosophical thoughts in nursing programs at the undergraduate level. By providing resources that include the

awareness of caring with cultural sensitivity, the students can begin to build their nursing practice based on a meaningful philosophy.

#### *The Recommendations for Future Research*

The findings of this study highlight the personal experience of Thai immigrant women living in the United States. By providing examples of domestic violence among these women, the study also proves the existence of domestic violence in the Thai community. Additional research that focuses on the component of the abuse experience in various levels of social status, education, age, income, employment, and husband's occupation would provide helpful insights about factors that contribute to or serve as protective measures against domestic violence among these women.

In addition, research that focuses on the abuse experience of non-English-speaking, Thai immigrant women who marry Thai immigrant men in the United States would be helpful in enhancing awareness of how these women cope with an abusive situation. This area of research can be further promoted through comparative studies utilizing other qualitative approaches such as grounded theory or ethnography. Finally, further research focusing on the abuse experiences of Thai immigrant women in other locations such as Europe, the Middle East, or Australia could provide valuable insights compared to Thai immigrant women in the United States.

#### *Conclusion*

The true essence of Southeast Asian immigrant women's perspectives on domestic violence supports what is already known from previous research about the phenomenon of domestic violence among Asians. According to the study participants'

experience and observations, infidelity of the husbands causes domestic violence among Thai women. Also, they viewed domestic violence as a chain, implying the continuation of the situation as well as the parenting style in Thai family backgrounds.

The findings of this study confirm the existence of domestic violence in the Thai community. Knowledge of domestic violence among the women in this study was congruent with the mainstream information as it is widely reported in the U.S. media. The women defined domestic violence as an action in which the husband abuses the wife or the wife abuses the husband. They identified abusive actions as being physical (e.g., beating or slapping); verbal (e.g., cursing, using bad words); emotional; psychological; and sexual (e.g. forced sex). They also included assault and threatening behavior as abusive actions. The findings also suggest violence-protective factors, including the husband's characteristics, the wife's characteristics, and a woman's confidence in the U.S legal system.

The women in this study mentioned a 6-month period of adaptation during the initial stage of their marriage. They described feelings of frustration, helplessness, and inferiority, as well as difficulties in communication during their time of adjustment into a new society. The study participants also acknowledged the concepts of being a good wife, a good daughter, and a good mother—concepts that also apply to other Asian women.

In summary, the results of this study expand the knowledge of domestic violence among Thai immigrant women living in the United States. The study's findings also provide valuable insight for healthcare professionals who are interested in assisting Thai

immigrant women to avoid abusive relationships, providing resources for these women, improving nurses' sensitivity and awareness of cultural issues, offering culturally sensitive care, and enhancing the effectiveness of nursing interventions.

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## Appendix A

### Interview Guide

Following completion of the informed consent, the participant will be asked to complete the demographic data tool.

The interview will then be initiated using the following guide:

Researcher Introduction: “Thank you for willing to participate and share your story about domestic violence in this study. I am doing this research because I would like to learn more about domestic violence from your perspective. Your story is important to me so health care providers may be able to improve care for other Thai women in this situation. I am going to turn the tape recorder on now. Remember you can stop the conversation at any time. You also indicate if you do not want to answer any questions.”

#### Questions for building rapport

1. Can you please tell me a little bit about yourself (For example, what is like for you to grow up in your family)?
2. What kind of work did you do when you were in Thailand?
3. How long have you been married?
4. How did you meet your husband?

#### Questions about perspective on domestic violence

1. In as much detail as possible, can you please tell me about the relationship of you and your husband?
2. In as much detail as possible, Can you please tell me about your knowledge on domestic violence? Or what do you think domestic violence was about?”
3. Have you experience domestic violence directly or indirectly in your life and/or your marriage? And can you please elaborate on that?
4. What do you think cause the abuse?
5. Have you known if there is domestic violence in your community? And can you please elaborate on that?”
6. What was most helpful to you at this time?
7. What would have been helpful if it had been available?
8. What do other Thai women need to know about this experience?

**Questions for conclusion**

1. Is there anything else that you would like me to know about your abuse experience?
2. Do you have any questions about this study or anything else at this time?

Thank you very much for taking the time to participate in this study with me.

## Appendix B

### **RESEARCH SUBJECT INFORMATION AND CONSENT FORM**

**TITLE:** Southeast Asian Immigrant Women's Perspectives on Domestic Violence

**VCU IRB NO.:**

This consent form may contain words that you do not understand. Please ask the nurse researcher to explain any words that you do not clearly understand. You may take home an unsigned copy of this consent form to think about or discuss with family or friends before making your decision.

#### **PURPOSE OF THE STUDY**

The purpose of this research study is to find out about the experience of Southeast Asian women, who live in the United States, related to domestic violence including their relationships with their partners, their knowledge of domestic violence, and the existence of domestic violence among Southeast Asian community. The information from this study may be helpful to health care providers to improve care for women and increase the understanding of this important health issue.

You are being asked to participate in this study because you are a Southeast woman living in the United States.

#### **DESCRIPTION OF THE STUDY AND YOUR INVOLVEMENT**

If you decide to be in this research study, you will be not asked to sign this consent form after you have had all your questions answered and understand what will happen to you in order to protect your identity..

In this study you will be asked to share your experiences in a personal or telephone interview with the researcher. The session of conversation will last approximately one to one and a half hour. During the interview you are asked to freely share your experiences related to domestic violence including your relationship with your partner, your knowledge of domestic violence, and the existence of domestic violence among your community. To be sure that the researcher understands your experience, the researcher may ask you questions to clarify the content. The personal interview will be tape recorded so we are sure to get your ideas, but no names or identified places will be recorded on the transcript of the tape. The researcher will take notes during the telephone interview.

**RISKS AND DISCOMFORTS**

Sometimes talking about these issues causes women to become upset. Several questions will be asked about situations that happened in your life and family that may be unpleasant. You do not have to talk about any subjects or answer any questions you do not want to talk about, and you may stop the interview at any time. If you become upset, the nurse researcher will give you names of support groups or agencies to contact so you can get help in dealing with these issues. Following the interview, if at any time you become upset, you should call the nurse researcher at the number listed on page 3 of this consent.

**BENEFITS**

You may not get any direct benefit from this study, but, the information we learn from people in this study may help us design better programs for the women who have the same experience as you.

**COSTS**

There are no costs for participating in this study other than the time you will spend with the researcher, which is approximately one hour to one and a half hour. The nurse researcher will visit you at the place you select where you feel comfortable to have a conversation, and will pay for your expense to take the bus or park your car.

**PAYMENT FOR PARTICIPATION**

A \$20.00 gift certificate will be given to you in appreciation for your participation.

**CONFIDENTIALITY**

We will not tell anyone the answers you shared. What we find from this study may be presented at meetings or published in papers, but your name or identifying places will not ever be used in these presentations or papers.

The conversation will be audio taped, but no names will be recorded. At the beginning of the conversation, you will be asked to use initials only so that no names are recorded. The tapes and the notes will be stored in a locked cabinet. After the information from the tapes is typed up, the tapes will be destroyed.

*You have been notified that in cases where there is apparent risk of harm to myself or another person, the researcher is legally and ethically bound to take appropriate action by immediate referral to their primary care provider.*

**VOLUNTARY PARTICIPATION AND WITHDRAWAL**

You do not have to participate in this study. If you choose to participate, you may stop at any time without any penalty. You may also choose not to answer particular questions that are asked in the study.

**QUESTIONS**

In the future, you may have questions about your participation in this study. If you have any questions, contact:

Judith A. Lewis, Professor, Ph.D., RNC, FAAN	Pataporn Saengkhiw, Doctoral Student
School of Nursing, VCU	School of Nursing, VCU
1220 E.Broad St.	1220 E.Broad St.
Richmond, VA 23298	Richmond, VA 23298
804-828-5928	804-677-0373

If you have any questions about your rights as a participant in this study, you may contact:

Office for Research Subjects Protection  
Virginia Commonwealth University  
800 East Leigh Street, Suite 111  
P.O. Box 980568  
Richmond, VA 23298  
Telephone: 804-828-0868

**WHY IS THE STUDY DOCTOR/INVESTIGATOR DOING THIS STUDY?**

The nurse researcher doing this study is a doctoral student. This research is her doctoral dissertation study required for completion of the doctorate in nursing degree.

**CONSENT**

I have been given the chance to read this consent form. I understand the information about this study. Questions that I wanted to ask about the study have been answered. My participation in the interview conveys that I am willing to participate in this study.

## Appendix C

**Resources for Domestic Violence Victim****State****Virginia****Family Violence & Sexual Assault Virginia Hotline**

Phone: 1 (800) 838 8238(v/tty)

**Asian/Pacific Islander Domestic Violence Resource Project**

works with all Asian women, including South Asian, in the DC area. They provide peer support, community education, victim advocacy and referrals for shelter, legal and counseling services. Phone: 202-464-4477

**Virginians Family Violence and Sexual Assault Hotline**

2850 Sandy Bay Road, Suite 101  
Williamsburg, VA 23185  
TOLL-FREE: 800-838-VADV  
Phone: 757-221-0990  
FAX: 757-229-1553

Charlottesville , VA  
508 Dale Ave  
Charlottesville , VA 22903-4547  
Phone: 434-979-9002  
Fax: 434-979-9003

Richmond , VA  
1010 N. Thompson St.  
Suite 202  
Richmond , VA 23230  
Phone: 804-377-0335  
Fax: 804-377-0339

Toano , VA  
102 Industrial Blvd.  
Toano , VA 23168  
Phone: 757-566-4602  
Fax: 757-566-4670

### **California**

#### **Asian Pacific American Legal Center, Los Angeles, CA**

[www.apalc.org](http://www.apalc.org), Email: [info@apalc.org](mailto:info@apalc.org)

Phone: (213) 977 7500

**Asian Women's Shelter.** (415)-751-7110 (office) (415)-751-0880 (crisis)

**Center for Pacific Asian Family (CPAF, Los Angeles).** 800-339-3940. Emergency and transitional shelter, multicultural and multilingual. Email: [CPAFsc@aol.com](mailto:CPAFsc@aol.com)

#### **Coalition to End Domestic and Sexual Violence**

PO Box 19005  
Long Beach CA 90807  
Toll-Free: 888-SCCBW-52  
Phone: 562-981-1202  
Fax: 562-981-3202  
E-mail: [sccbaw@sccbaw.org](mailto:sccbaw@sccbaw.org)

### **National**

**National Resource Center on Domestic Violence** Phone: 1-800-537-2238

**National Network to End Domestic Violence** [www.nnedv.org](http://www.nnedv.org) National Organization for Victim Assistance [www.try-nova.org/](http://www.try-nova.org/)

**National Coalition Against Domestic Violence** [www.ncadv.org](http://www.ncadv.org)



### **Vita**

Pataporn Saengkiew was born on November 30, 1964, in Uttaradit, Thailand, and is a Thai citizen. She graduated from Uttaradit Daruni High School, Uttaradit, Thailand in 1982. She received her Diploma in Nursing Science from Boromrajonani College of Nursing Buddhachianaraj, Phitsanulok, Thailand in 1986. Her nursing career began in Department of Obstetrics and Gynecological Nursing as a nurse instructor and two years later she had taught in Department of Mental Health and Psychiatric Nursing at Boromrajonani College of Nursing Uttaradit, Uttaradit. She received her Master of Nursing Science with a major in Mental Health and Psychiatric Nursing from Chiang Mai University, Thailand in 1999. In 2001, she received a full scholarship from the Royal Thai Government to further her study at Virginia Commonwealth University in Richmond, Virginia.