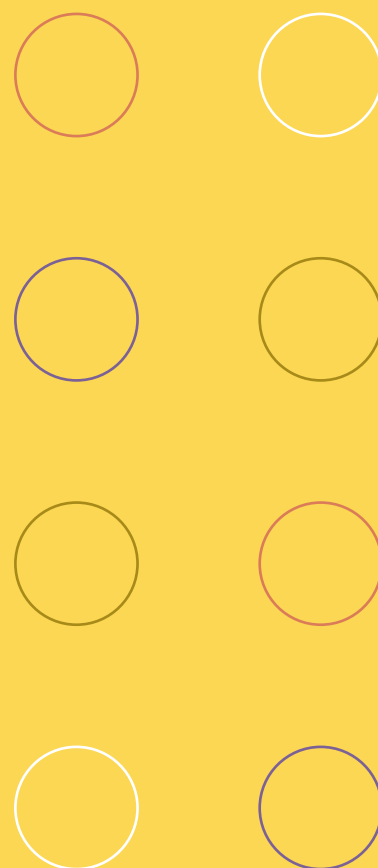


GENDER-BASED VIOLENCE IN TRINIDAD AND TOBAGO

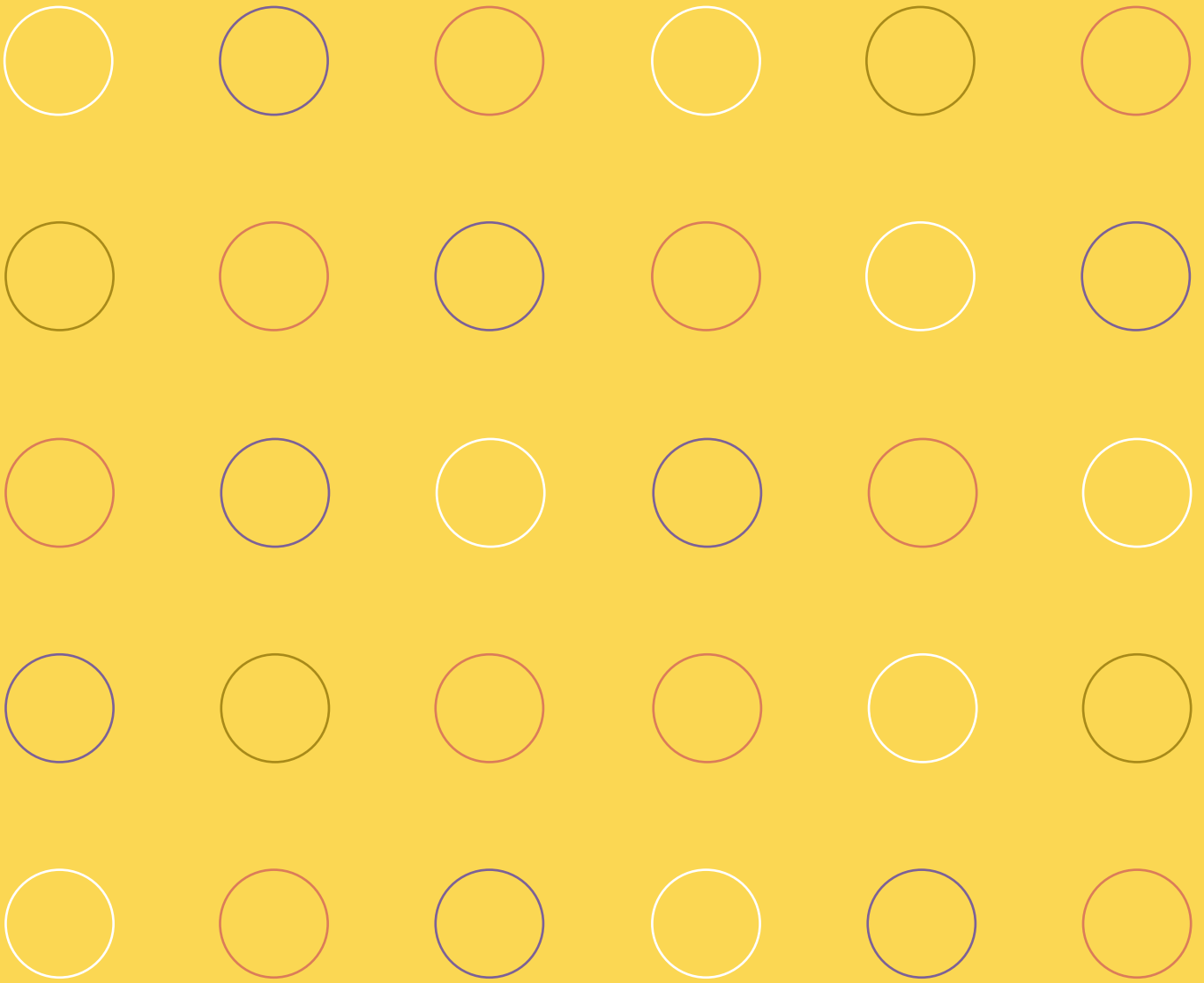


A QUALITATIVE STUDY



Government of the Republic of Trinidad and Tobago
Office of the Prime Minister (Gender and Child Affairs)





UN Women is the UN organisation dedicated to gender equality and the empowerment of women. A global champion for women and girls, UN Women was established to accelerate progress on meeting their needs worldwide. UN Women supports UN Member States as they set global standards for achieving gender equality, and works with governments and civil society to design laws, policies, programmes and services needed to implement these standards. It stands behind women's equal participation in all aspects of life, focusing on five priority areas: increasing women's leadership and participation; ending violence against women; engaging women in all aspects of peace and security processes; enhancing women's economic empowerment; and making gender equality central to national development planning and budgeting. UN Women also coordinates and promotes the UN system's work in advancing gender equality.

The views expressed in this publication are those of the author(s) and do not necessarily represent the views of UN Women, the United Nations or any of its affiliated organisations.

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GENDER-BASED VIOLENCE IN TRINIDAD AND TOBAGO



A QUALITATIVE STUDY



Government of the Republic of Trinidad and Tobago
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LIST OF ACRONYMS

BPfA Beijing Platform for Action

CARICOM Caribbean Community and Common Market

CEDAW Convention on the Elimination of all Forms of Discrimination against Women

GBV Gender-based violence

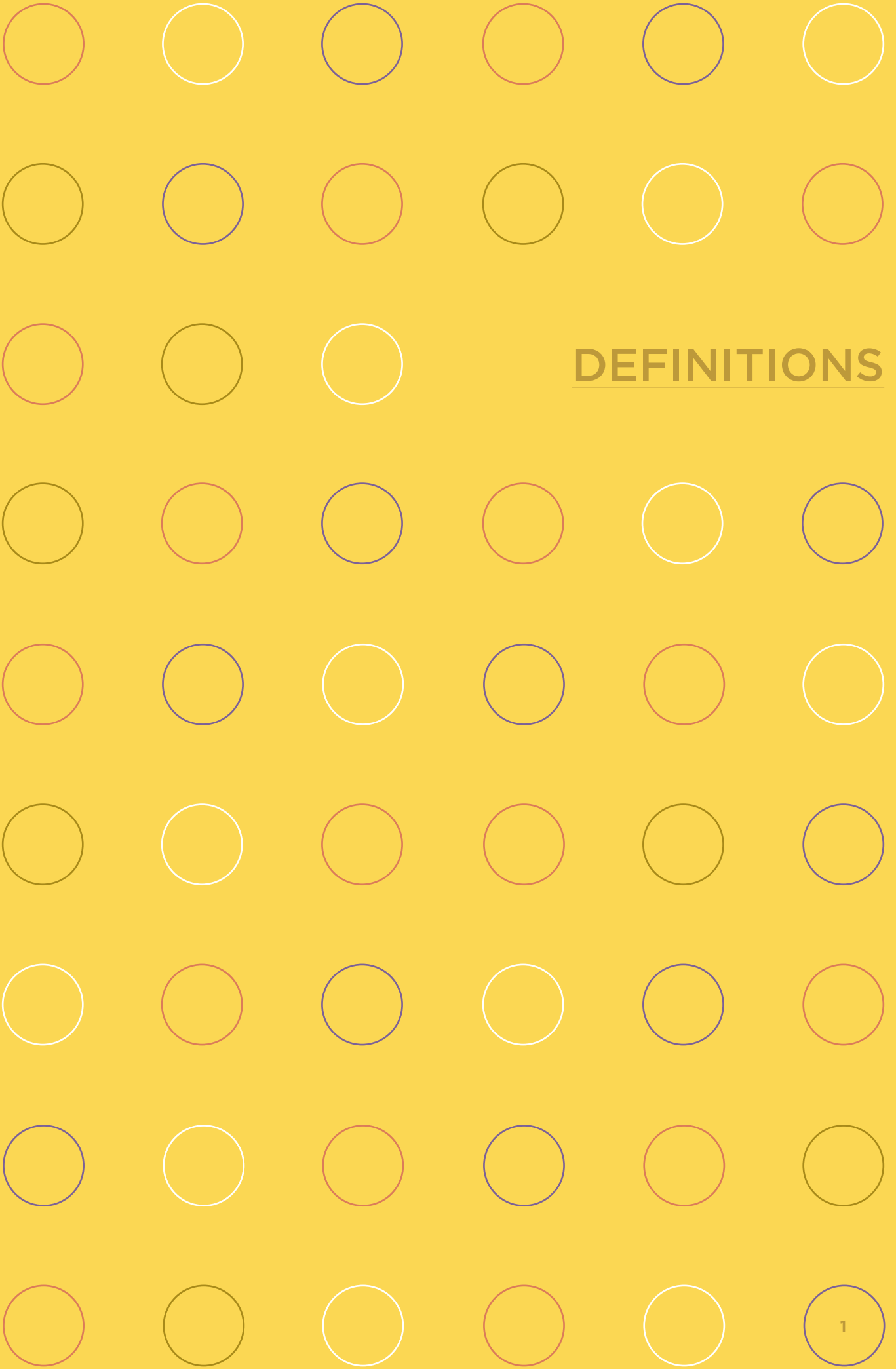
IDB Inter-American Development Bank

IPV Intimate partner violence

UN United Nations

VAW Violence against women

WHO World Health Organization



DEFINITIONS

Key terms and Concepts as used in this Report

Domestic violence, intimate partner violence and wife abuse are used interchangeably to refer to the range of sexually, psychologically, and physically coercive acts used against adult and adolescent women by current or former male intimate partners.

Gender refers to the social attributes and opportunities associated with being female and male, the relationships among women and men and girls and boys, and the relations among women and the relationships among men, based on these attributes.

Gender-Based Violence (GBV): Acts of physical, mental or social abuse (including sexual violence) that is attempted or threatened, with some type of force (such as violence, threats, coercion, manipulation, deception, cultural expectations, weapons or economic circumstances) and is directed against a person because of his or her gender roles and expectations in a society or culture. A person facing gender-based violence has no choice to refuse or pursue other options without severe social, physical, or psychological consequences. Forms of GBV include sexual violence, sexual abuse, sexual harassment, sexual exploitation, early marriage or forced marriage, gender discrimination, denial (such as education, food, freedom) and female genital mutilation¹.

Perpetrator refers to a person who commits acts of physical, sexual, emotional or economic gender-based violence.

Survivor refers to a woman who has experienced at least one form of intimate partner violence. It is sometimes used interchangeably with 'victim'.

Violence against women (VAW), a subcategory of GBV, refers to any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.

¹ Virtual Knowledge Centre to End Violence Against Women and Girls – Glossary of Terms from Programming Essentials and Monitoring and Evaluation Sections, <http://www.endvawnow.org/en/articles/347-glossary-of-terms-from-programming-essentials-and-monitoring-and-evaluation-sections.html>

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EXECUTIVE SUMMARY

Gender-based Violence (GBV) is a prevalent issue that occurs across all settings and groups around the world. GBV is an umbrella term to describe violence directed against a person because of his or her gender and expectations of his or her role in a society or culture. Violence against women is one form of GBV. In 2012, an estimated 47 per cent of female homicide victims were killed by their intimate partners or family members (compared to less than 6 per cent of male homicide victims).² According to a 2013 global review of available data, 35 per cent of women worldwide have experienced either physical and/or sexual intimate partner violence (IPV) or non-partner sexual violence.³ For the Caribbean in general, GBV is one of the most widespread forms of violence, directly impacting citizen security and the stability and health of families and communities.

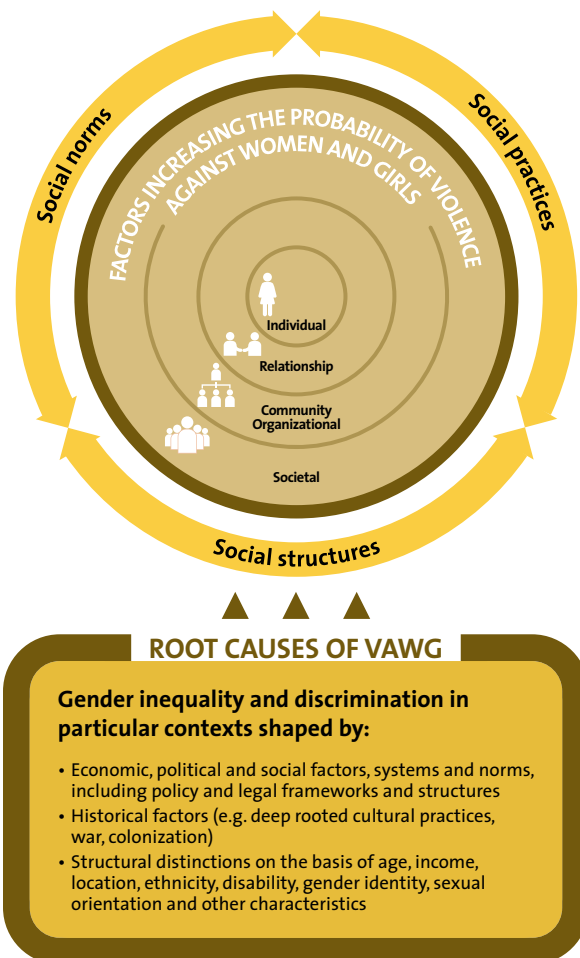
The small island developing state of Trinidad and Tobago is a densely populated, 5,131 square kilometre twin-island Caribbean country located off the northern coast of South America. In Vision 2030, the Government of the Republic of Trinidad and Tobago outlined its development priorities and strategies to address its unique development challenges. Citizen security, a key development priority outlined in Vision 2030, is being threatened by increasing levels of crime and violence, particularly the number of reported cases of GBV, sexual offences, IPV and child sexual abuse.

While the quality of administrative data on violence against women has vastly improved over the past few decades, data has never been available on the prevalence of violence against women in Trinidad and Tobago. After reviewing various models of assessing the prevalence of gender-based violence, the United Nations Entity for Gender Equality and the Empowerment of Women (UN Women), CARICOM statistical experts and the CARICOM Council of Ministers of Human and Social Development agreed to adopt the CARICOM Model on National Prevalence Surveys on Gender-based Violence. The CARICOM Model is based on the original World Health Organization (WHO) global model designed to assess the prevalence of violence against women.

The model specifically focuses on violence⁴ against women because crime statistics do not usually

capture the forms in which it typically manifests; GBV data reflects the violence that occurs in intimate partnerships and the home in general. The model promotes a quantitative and qualitative approach to assessing the prevalence of violence against women. The Inter-American Development Bank (IDB) managed the implementation of the quantitative survey. UN Women managed the implementation of the qualitative study, which complements the quantitative perspective on IPV and its impact on women's health. The qualitative study draws on interview and focus group data collected between February and September 2017. The study population included survivors, perpetrators, service providers, state agents, university students, police, magistrates,

FIGURE 1
Understanding Violence against Women⁴



2 United Nations Office on Drugs and Crime. Global study on homicide 2013: trends, contexts, data. UNODC, 2013. Page 14. Available at: https://www.unodc.org/documents/gsh/pdfs/2014_GLOBAL_HOMICIDE_BOOK_web.pdf

3 WHO, Global and Regional Estimates of Violence against Women. Available at: <http://apps.who.int/iris/handle/10665/85239>

4 http://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2015/prevention_framework_unwomen_nov2015.Pdf?La=en&vs=5223,p.23

religious leaders, women's rights activists, women's professional associations and men's groups. A total of 122 persons provided the main data used in this study through 38 interviews and 14 focus groups.

The qualitative study focused on the nature, patterns, contributing factors and consequences of violence against women in Trinidad and Tobago. The specific concerns investigated during the qualitative component of the study were: the impact of beliefs about womanhood and manhood on IPV; the gendered impacts of increasing economic insecurity on women, men and their relationships; the roles that ideals of romantic love play in women's and men's understanding of and response to violence in relationships; and the perception of the availability and efficacy of state and civil society services for persons who experience IPV.

The study is grounded in the ecological model⁵ of violence, which proposes that "violence is a result of factors operating at four levels: individual, relationship, community and societal."⁶ The model promotes the understanding that violence against women (VAW) is multifaceted in nature and rarely the result of one single factor.

The qualitative study's findings support the quantitative survey results that one-third of women experience IPV in their lifetime. The study highlights that the IPV that Trinidadian and Tobagonian women face varies in severity and includes moderate and severe acts, emotional abuse, controlling behaviours, threats, stalking and sexual and physical violence. Beliefs about womanhood and manhood and love and family, reinforced by messages from religion and the media, were observed to have had a significant influence on what people believe about how women and men should interact. These beliefs contributed to the basis for women's vulnerability in situations of familial violence and IPV, and were often the source of motivation for men's violent behaviour towards women. Men's substance abuse also increased the probability of being a perpetrator and their partner's risk of IPV. This study also suggests that women's,

men's and familial economic precarity is also an extremely significant risk factor for IPV.

A significant finding from the study reflects that children who witnessed IPV had a higher probability of entering violent relationships. Reflecting the UN framework to prevent VAW, the study found that the risk factors associated with IPV in Trinidad and Tobago include:⁷

1. At the individual level, the man had witnessed IPV in the home, experienced abuse as a child, had an absent or rejecting father or frequently uses alcohol;
2. At the individual level, the woman witnessed IPV as a child, experienced abuse as a child or had a low educational attainment;
3. At the level of the family and relationship, the man controls wealth and decision-making within the family and marital conflict is frequent;
4. At the community level, women were isolated with reduced mobility and lack of social support;
5. At the community level, men's peer groups condone and legitimize IPV; and
6. At the societal level, gender roles are rigidly defined and enforced and the concept of masculinity is linked to toughness, male honour or dominance.

The study also found that violence was normalized and that when the prevailing culture tolerates physical punishment of women and children, accepts violence as a means to settle interpersonal disputes or perpetuates the notion that men "own" women, it creates an environment that fosters violence.

Data collection explored the implications of economic insecurity, unemployment and economic dependence and conflicts over work and money. The findings suggest that economic insecurity and dependence are key factors that lead to IPV and need to be taken into account in periods of economic downturn. These findings highlight how contemporary socioeconomic policymaking should take account of the relationships between these and IPV when reducing state expenditures on jobs and social services.

The study found that help-seeking behaviours vary widely and have uneven success. This could be due to a range of reasons, including norms that discourage

5 United Nations Framework to Underpin Action to Prevent Violence against Women. Available at: http://www.unwomen.org/media/headquarters/attachments/sections/library/publications/2015/prevention_framework_unwomen_nov2015.pdf?la=en&vs=5223

6 http://apps.who.int/iris/bitstream/10665/77432/1/WHO_RHR_12_36_eng.pdf?ua=1

7 Ibid. p.25.

women from seeking help, norms that downplay the duty of family and bystanders to intervene in the abuse and failures by perpetrators and survivors to identify abusive behaviours (particularly when they are less severe). Other reported reasons include women's fear of seeking help, an inability to seek help without incurring further threats, stalking and physical violence, economic dependence, loss of confidence, insufficient knowledge about services available and the lack of appropriate services. Many women spoke of feeling they have nowhere to turn to be safe on islands where perpetrators could easily find them and where they have experienced multiple intervention failures in relation to social services, the police and the justice system.

Nonetheless, women continue to turn to these interventions for help, and these intervention services must take up a range of recommendations made over several reports and studies in order to improve the extent to which they can empower women to constructively end violent relationships and live in safety rather than in fear. This report ends by citing a range of reports that have made relevant recommendations and speak to this study's findings, highlighting the commitment to implementation that is required at this stage.

The study's main recommendations to address the challenges of violence against women in Trinidad and Tobago are:

- Approve and fully cost the National Strategic Plan on Gender-based and Sexual Violence in Trinidad and Tobago 2016-2020 (GBV NSAP);
- Establish a monitoring committee for the implementation of the GBV NSAP to ensure that VAW is linked to broader issues of citizen security;
- Ensure that comprehensive approaches are used to implement GBV NSAP programmes;
- Develop and implement standard operating protocols for essential services;
- Conduct concerted advocacy and communication campaigns on healthy relationships and sustainable conflict resolution techniques;
- Establish a working group with representatives from the judiciary, police, prisons and social services to develop a monitoring and referral system to ensure protection orders are enforced; and

- Re-institute the Partnership for Peace Batters Intervention Programme.

Although this study's quantitative component and other VAW studies in the Caribbean led to insightful and reflective results, there were some limitations. One limitation was the difficulty interviewing both survivors and perpetrators across class groups. This was mitigated through the use of focus groups to counter a class bias towards low-income women and men; professional women and middle-class religious men participated in these groups. The study was also limited by the absence of persons living with disabilities, young people between fifteen and nineteen years old and persons in non-heterosexual relationships. Research should be conducted on gender-based violence experienced by and among persons with disabilities, girls under eighteen years old and within same-sex relationships. Additional research on men's experiences as survivors and perpetrators would be useful, though it should not detract from the necessary and sufficient focus on addressing and ending the effects of IPV on women's health and lives and that of their families.



VIOLENCE AGAINST WOMEN

Gender-based Violence (GBV) is a prevalent issue that occurs across all settings and groups around the world. In 2012, an estimated 47 per cent of female homicide victims were killed by their intimate partners or family members (compared to less than 6 per cent of male homicide victims).⁸ According to a 2013 global review of available data, 35 per cent of women worldwide have experienced either physical and/or sexual IPV or non-partner sexual violence.⁹

For the Caribbean in general, GBV is one of the most widespread forms of violence, directly impacting citizen security, including the stability and health of families and communities. The most prevalent form of GBV is violence against women, which results from the structures and relationships of power, domination and privilege between women and men. VAW has serious consequences.¹⁰ The UN Framework identifies some of these consequences as injury to physical, mental and sexual and reproductive health; social and economic consequences; and negative effects on children, including school dropouts, poor school performance and depression. These consequences are often amplified in situations of IPV, because the place of violence — the home — is supposed to be a space of safety.

VAW deprives women of their ability to enjoy fundamental freedoms and represents a substantial obstacle to equality between women and men.¹¹ Since the 1990s, GBV and VAW have been prevalent in the international dialogue, leading to organizations coming together to voice their concerns and offer responses. Recognizing this, eliminating of all forms of VAW is now part of the 2030 Agenda for Sustainable Development.¹² There are several international frameworks that capture Member State's obligation to respond to GBV, including:

- The UN General Assembly's Declaration on the Elimination of Violence against Women, adopted in 1993, places the issue of violence, in all of its forms, squarely on the international human rights agenda. It expressly includes violence in both the public and private spheres.
- The Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) was adopted by the UN General Assembly in 1979 and ratified by Trinidad and Tobago in 1989. The CEDAW Committee recommended that state parties ensure that laws against family violence and abuse, rape, sexual assault and other GBV give adequate protection to all women and respect their integrity and dignity and take all legal and other measures that are necessary to provide effective protection of women against GBV, including effective legal measures, penal sanctions, civil remedies and compensatory provisions to protect women against all kinds of violence.¹³
- The Beijing Platform for Action (BPfA), adopted in 1995 at the Fourth World Conference on Women in Beijing, calls on governments to adopt, implement and review legislation to ensure its effectiveness in eliminating VAW.
- The Inter-American Convention on the Prevention, Punishment and Eradication of Violence against Women (aka Belém do Pará) was signed and ratified in 1996 and focuses on women's right to be free from violence.
- The 1994 Cairo Programme of Action, adopted at the International Conference on Population and Development and its subsequent Montevideo Consensus on Population and Development, addresses issues of gender inequality and women's empowerment.
- The Convention on the Rights of the Child¹⁴ was signed in 1990 and ratified in 1991. By ratifying, the Government of the Republic of Trinidad and Tobago pledged to "undertake all appropriate legislative, administrative and other measures for the implementation of the rights recognized in the present Convention" (Article 4 of the Convention on the Rights of the Child).

8 United Nations Office on Drugs and Crime. Global study on homicide 2013: trends, contexts, data. UNODC, 2013. Page 14. Available at: https://www.unodc.org/documents/gsh/pdfs/2014_GLOBAL_HOMICIDE_BOOK_web.pdf

9 WHO, Global and Regional Estimates of Violence against Women: <http://apps.who.int/iris/handle/10665/85239>

10 United Nations Framework to underpin action to prevent violence against women – http://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2015/prevention_framework_unwomen_nov2015.pdf?la=en&vs=5223.

11 The Council of Europe Campaign to Combat Violence against Women, including Domestic Violence https://www.coe.int/t/dg2/equality/domesticviolencecampaign/Source/FS_VAWCampaign_en.pdf

12 http://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2015/prevention_framework_unwomen_nov2015.pdf?la=en&vs=5223

13 <http://www.un.org/womenwatch/daw/cedaw/text/econvention.htm>

14 <http://caribbean.unwomen.org/en/caribbean-gender-portal/caribbean-gbv-law-portal/gbv-and-state-accountability>

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VIOLENCE AGAINST WOMEN IN TRINIDAD AND TOBAGO

Trinidad and Tobago is a densely populated, 5,131 square kilometre twin-island Caribbean country located off the northern coast of South America. It became a Republic in 1976 after obtaining independence from Britain in 1962. The country's approximate population is 1.4 million people.¹⁵ The majority of the population identify with one of two ethnic groups (Africans and East Indians), with less than 1.3 per cent identifying as of European, Chinese or Indigenous heritage.

Gender-based violence, particularly, IPV and incest, is an ongoing challenge in Trinidad and Tobago. The number of reported cases of sexual offences and domestic violence has been constantly increasing in the last few years.¹⁶ Data from the Crime and Problem Analysis Branch of the Trinidad and Tobago Police Service revealed that there were approximately 19,078 reports relating to domestic violence incidents between 2000 and 2013. Approximately 75 per cent of these reports were related to female individuals. During the same period, there were 131 domestic violence related deaths, of which 56 per cent were female.¹⁷

15 Central Statistical Office mid-year population estimates for 2016. Available at: <http://cso.gov.tt/data/?productID=32-Mid-Year-Estimates-of-Population-by-Age-Group>

16 According to a report by the Caribbean Development Foundation, a non-governmental organization; see <http://www.guardian.co.tt/lifestyle/2015-05-25/stop-violence-against-women>

17 Crime and Problem Analysis Branch of the Trinidad and Tobago Service.

Population Services International Caribbean surveyed 723 women between the ages of 18 and 49 in three counties (137 in Caroni, 432 in St. George and 154 in Victoria) from December 2014 to January 2015. The survey measured experiences of IPV and social norms, attitudes and perceptions associated with IPV. The study also used an ecological framework to analyse factors associated with IPV victimization. The findings showed that 138 respondents experienced some form of physical violence, 90 experienced sexual violence and 186 experienced emotional abuse from their most recent or current partner (see Figure 2). Overall, 143 women indicated that they had experienced one or more forms of IPV.

The first round of the National Crime and Victimization Survey, conducted in 2007, measures crime victimization rates and community perceptions on social attitudes and cultural norms around safety in 19 communities.¹⁸ The second round of the Crime and Victimization Survey was conducted in 2015, measuring crime victimization and perceptions and attitudes about crime and violence, safety and social behaviour nationwide and in communities under the Citizen Security Programme.

The Citizen Security Programme falls under the Ministry of National Security and is co-funded by the

18 Available from: <http://cso.gov.tt/media/publications-documents>

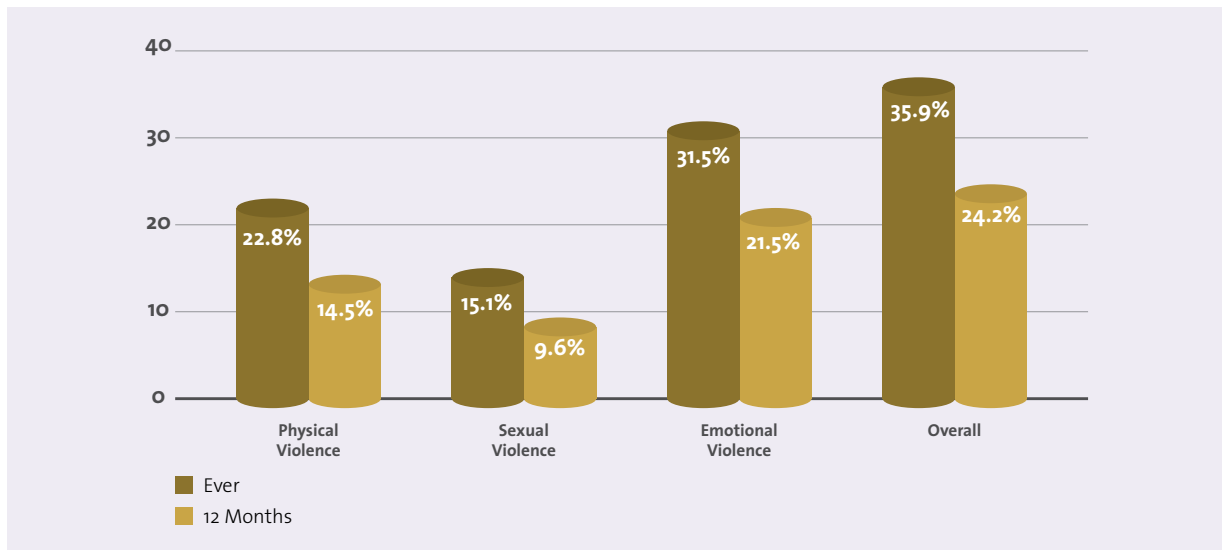
TABLE 1
Number of Cases Related to Domestic Violence from 2007 to 2013

Offences	2007	2008	2009	2010	2011	2012	2013	Total
Murder/homicides	18	37	23	33	21	13	27	172
Sexual abuse	42	67	64	31	41	74	14	333
Wounding	34	61	38	176	69	53	46	477
Assault by beating	545	859	568	560	1140	1042	821	5535
Malicious damage	18	24	26	18	29	33	22	170
Threats	437	422	405	244	650	787	493	3438
Verbal abuse	3	0	0	97	34	81	44	259
Emotional/psychological abuse	0	0	0	52	5	36	45	138
Financial abuse	0	0	0	0	0	0	0	0
Child abuse and abandonment	2	3	5	10	4	5	12	41
Breach of protection order	72	83	127	159	180	177	108	906
Offensive phone calls	0	0	0	17	2	31	1	51
Total	1171	1556	1256	1397	2175	2332	1633	11520

Source: Crime and Problem Analysis Branch of the Trinidad and Tobago Service

FIGURE 2

Prevalence of Physical, Sexual and Emotional forms of IPV Experienced by Women in the Counties of Caroni, St. George and Victoria.



Source: <http://psicaribbean.com/v2/wp-content/uploads/2015/03/PSI-C-Gender-Norms-and-IPV-TT-Face-to-Face-2015.pdf>

I DB. In 2007, the Citizen Security Programme operated in 22 communities (19 in Trinidad and three in Tobago), which were selected during project design based on their high levels of serious crime. In 2014, ten additional communities in East Port of Spain, which were perceived as “at high risk of violent crime” were included in the Programme.

In the 2015 Crime and Victimization Survey, domestic violence rates were recorded in three dimensions: physical, sexual and emotional. From 2007 to 2015, there was a decrease in domestic violence in Citizen Security Programme communities (from 68.3 per cent to 46.9 per cent). The survey found that in 2015, 47.7 per cent of respondents reported recent experiences of domestic violence with an intimate partner. Rates in the initial 19 Trinidad communities were similar to national rates.

In contrast, in the three initial Tobago communities, fewer respondents experienced domestic violence both overall (36.1 per cent) and across all dimensions. In East Port of Spain communities, more than half of the residents had experienced at least one form of domestic violence (51.6 per cent), but fewer had experienced physical violence (10.4 per cent) than across the national sample.

Though women can also be perpetrators, they are usually at a higher risk for experiencing IPV. In a study conducted for the I DB, Sutton and Alvarez noted that women are more likely than men to be killed by an intimate partner.

19 <https://publications.iadb.org/bitstream/handle/11319/8262/Restoring-Paradise-in-the-Caribbean-Combating-Violence-With-Numbers.PDF?sequence=1&isAllowed=y>

FIGURE 3

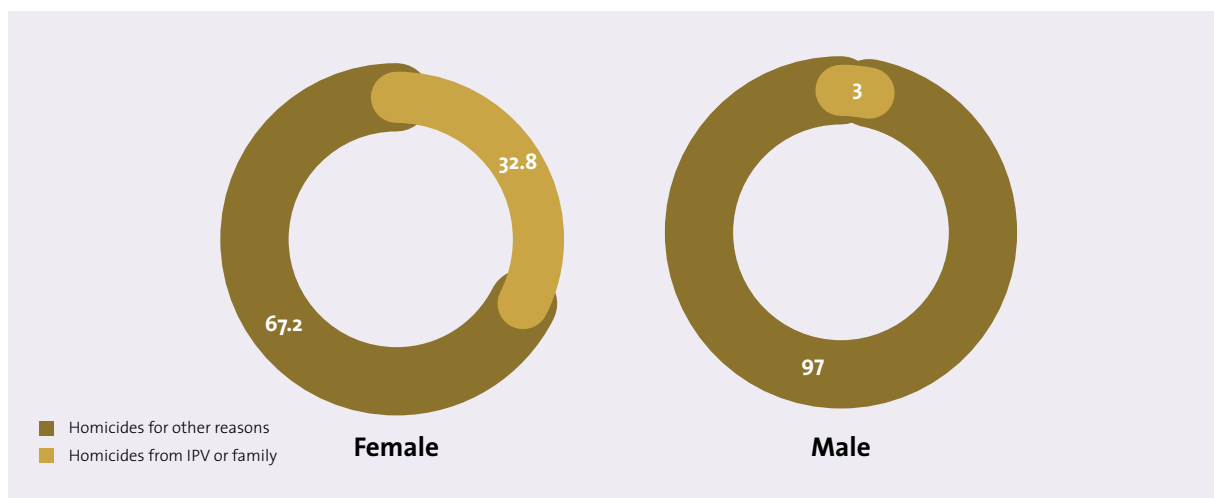
Types of Domestic Violence Experienced in the Last 12 Months

	CVS 2007	CVS 2015			
	Trinidad (Original 19)	Trinidad (Original 19)	Tobago (Original 3)	Trinidad (East Port of Spain 10)	National
Emotional Violence	67.7%	46.9%	36.1%	51.6%	47.5%
Physical Violence	7.7%	14.6%	3.2%	10.4%	11.7%
Sexual Violence	0.2%	0.5%	0.0%	0.3%	0.0%
Domestic violence (Overall)	68.3%	46.9%	36.1%	51.6%	47.7%

Source: <http://csp.govtt/Portals/o/Documents/Evaluation>

FIGURE 4

Percentages of Female and Male Victims of Homicides by Intimate Partners or Family Members for the period 2006 to 2011



Source: <https://publications.iadb.org/bitstream/handle/11319/8262/Restoring-Paradise-in-the-Caribbean-Combating-Violence-With-Numbers.PDF?sequence=1&isAllowed=y>

The Government of the Republic of Trinidad and Tobago, in recognition of its obligations to protect citizens from all forms of violence, including acts of violence against women and girls, has enacted several pieces of legislation. For example, “the Constitution of Trinidad and Tobago recognizes and guarantees the protection of fundamental rights and freedoms for all citizens, including the right to life, liberty, security of the person and property, equality before the law, respect for private and family life and the right of equality of treatment by public authorities.”²⁰

There are several laws that address GBV in Trinidad and Tobago. **The Domestic Violence Act**²¹ (passed in 1991, revised in 1999 and amended in 2006) serves as the governing law on domestic violence. The Act defines domestic violence as any type of physical, emotional, financial or sexual abuse. “The 1999 Domestic Violence Act is not meant as an alternative to the criminal process, but to expand the range of remedies available to survivors of domestic violence. These are intended to form part of a National Domestic Violence Register

to be maintained by the Commissioner of Police and mandated by the Act. According to available information, this registry is not yet operational.”²²

When women’s groups began discussing domestic violence in the late 1970s, it occurred in tandem with other forms of violence against women being addressed, including sexual violence. **The Sexual Offences Act** (passed in 1986 and amended in 1994 and 2000) considers protection for children and persons with mental disorders.²³

There have been several state interventions to combat GBV, including:

- State agencies have been established, such as the Office of the Prime Minister, Gender and Child Affairs Division;²⁴ the Ministry of National Security; and The Children’s Authority. These regulatory agencies act as protective agents, facilitators and implementers of GBV programmes and policies.
- In 2016, the Office of the Prime Minister, Gender and Child Affairs Division launched the Central Registry on Domestic Violence, which is an information system that collects data on survivors and perpetrators of domestic violence.

20 See UNDP report *Legal Aid for Women Victims of Gender Violence in the Caribbean*, p. 124. http://www.tt.undp.org/content/dam/trinidad_tobago/docs/DemocraticGovernance/Publications/Legal%20Aid%20and%20Gender%20Violence%20Study.%20UNDP%20RBLAC.%20JAN.%202014.pdf

21 See the Domestic Violence Act of Trinidad and Tobago. Available at: http://rgd.legalaffairs.gov.tt/laws2/alphabetical_list/lawspdfs/45.56.pdf

22 *Legal Aid for Women Victims of Gender Violence in the Caribbean*, p. 124.

23 See the Sexual Offences Act of Trinidad and Tobago http://rgd.legalaffairs.gov.tt/laws2/alphabetical_list/lawspdfs/11.28.pdf

24 <http://www.opm-gca.gov.tt>

- The 2009 National Policy on Gender and Development (revised in 2012; 2015 revisions have been submitted for review by a cabinet subcommittee), was developed primarily to provide a framework to include gender perspectives in all government activities and programmes.²⁵
- Counselling and psychosocial services are provided, mainly through the National Domestic Hotline²⁶ and the Rape Crisis Society of Trinidad and Tobago.²⁷
- Safe Homes and emergency shelters for women and children survivors of domestic abuse have been set up, including the Halfway House, Madinah House, the Hope Shelter and the Shelter.
- In the police service, the Victim and Witness Support Unit²⁸ was formed to help bridge the gaps between the police, survivors and witnesses. Support includes services such as information about legal aid and the justice system and referrals to other support agencies.
- Legal Aid is provided at no cost to victims and survivors by the Government of Trinidad and Tobago.

25 National Gender Policy for Trinidad and Tobago https://oig.cepal.org/sites/default/files/trinidad_y_tobago_2009_genero_y_desarrollo.pdf

26 (868) 800-SAVE

27 <https://www.bordeglobal.org/rapecrisis/index.php>

28 <http://ttps.gov.tt/Safety-Tips/Victim-Support>

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OBJECTIVES AND RESEARCH QUESTIONS

The IDB-conducted quantitative study, based on the UN Women-supported CARICOM Model on National Prevalence Surveys on Gender-based Violence, primarily provided information on women's experiences of violence in Trinidad and Tobago. In contrast, this qualitative study aims to understand the nature, consequences and patterns of violent situations and to explore and understand the contexts in which violence against women occurs. The results of this qualitative study should contribute to a better understanding of how and why VAW manifests in Trinidad and Tobago; this knowledge can be used to inform targeted interventions.

The specific concerns investigated in this qualitative component were:

1. The impact of beliefs about womanhood and manhood on IPV;
2. The gendered impacts of increasing economic insecurity on women and men and their relationships;
3. The roles of ideals of romantic love in women's and men's understanding of and response to violence in relationships; and
4. The perception of the availability and efficacy of state and civil society services for persons who experience IPV.

These areas were chosen to explore how the region's increasing economic precarity may be shaping the prevalence of violence against women; to highlight the contradictions regarding how the processes of interventions and services for survivors may both empower and fail women; to interrogate the influence of popular notions of love and family as they shape women's vulnerabilities to, as well as men's perpetration of, repeated IPV and intra-familial violence; and the contradictions of pervasive masculinist power despite a popular myth of male marginalization in the Caribbean.

In its formative process, the study sharpened the focus of its inquiry. A review of the literature, local policy debates, media reporting and organizing work on gender-based violence in Trinidad and Tobago against the prevalence survey's areas of focus, guided the identification of three questions of high relevance for local knowledge and action needs, to which the qualitative research sought to contribute:

- How do ideologies of gender and family and cultural narratives about love and intimacy factor in the ways that women and men experience, explain and respond to IPV?
- How does increasing economic precarity shape the prevalence of violence against women?
- How do state and civil society interventions that prevent, punish or ameliorate violence serve to empower, fail or increase the vulnerability of women?

The relevance of these focus areas was validated by UN Women and in focus groups and interviews with nine expert key informants engaged in intervention, advocacy and research on gender-based violence in Trinidad and Tobago and Grenada, including leaders of the quantitative survey local research team.

The study is grounded in an ecological model²⁹ to help understand the multifaceted nature of violence. Recognizing that there are multiple factors that cause VAW, the ecological model "proposes that violence is a result of factors operating at four levels: individual, relationship, community and societal."³⁰

Drawing on the UN framework to prevent VAW, the study found that the risk factors associated with IPV include:

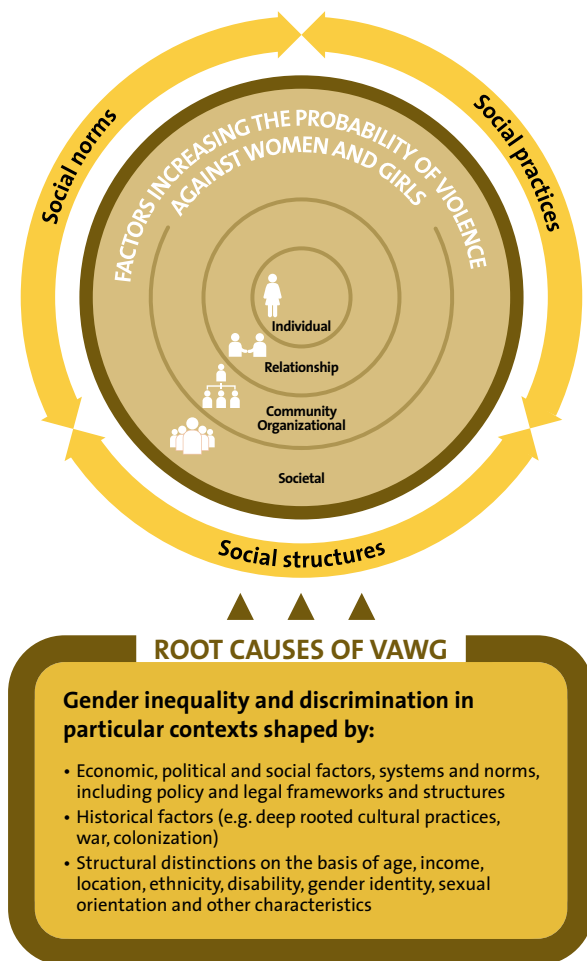
1. At the individual level, the man had witnessed IPV in the home, experienced abuse as a child, had an absent or rejecting father or frequently uses alcohol.
2. At the individual level, the woman witnessed IPV as a child, experienced abuse as a child, and had a low educational attainment.
3. At the level of the family and relationship, the man controls wealth and decision-making within the family and marital conflict is frequent.
4. At the community level, women were isolated with reduced mobility and lack of social support.
5. At the community level, men's peer groups condone and legitimize IPV.

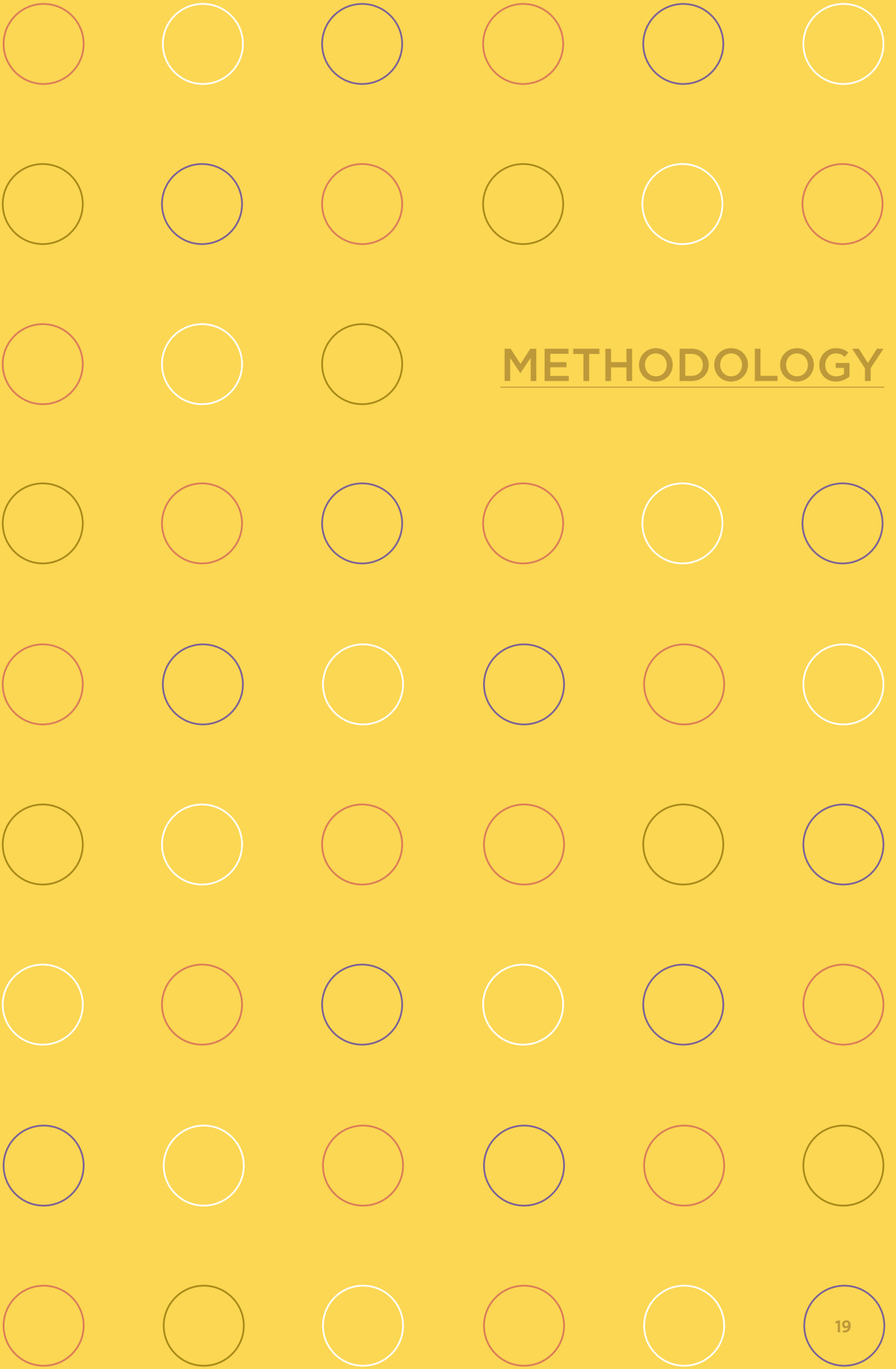
²⁹ United Nations Framework to underpin action to prevent violence against women – http://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2015/prevention_framework_unwomen_nov2015.pdf?la=en&vs=5223

³⁰ http://apps.who.int/iris/bitstream/10665/77432/1/WHO_RHR_12.36_eng.pdf?ua=1

6. At the societal level, gender roles are rigidly defined and enforced and the concept of masculinity is linked to toughness, male honour or dominance. The study also found that violence was normalized and that when the prevailing culture tolerates physical punishment of women and children, accepts violence as a means to settle interpersonal disputes or perpetuates the notion that men “own” women, it creates an environment that fosters violence.

FIGURE 5
Understanding Violence against Women





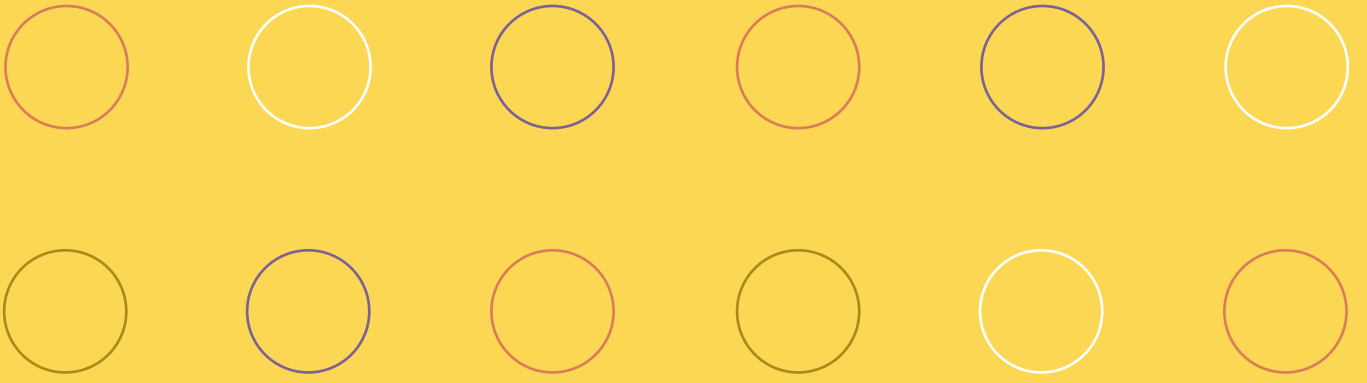
METHODOLOGY

Methods

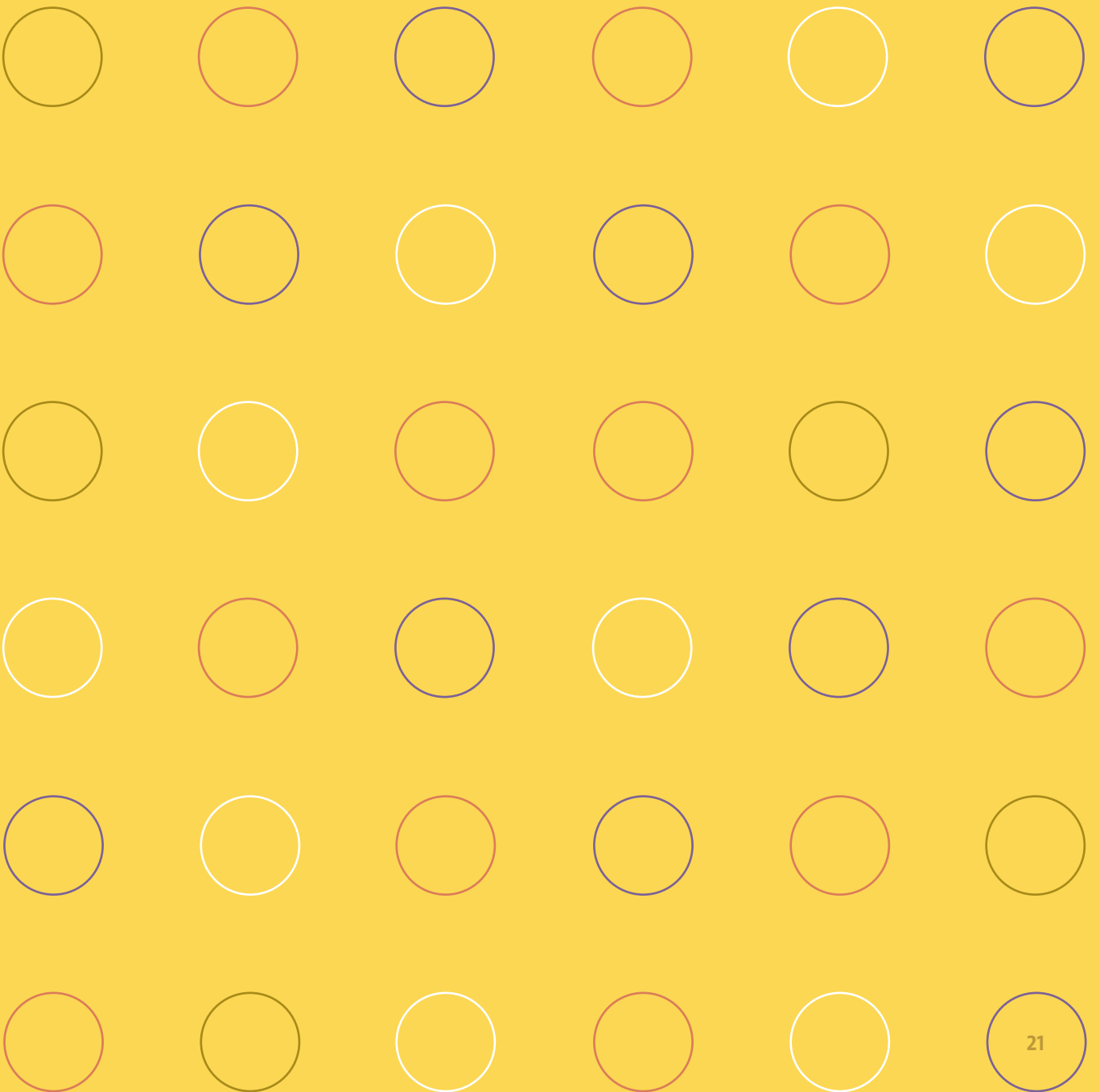
The study used a qualitative approach to collect and analyse data. This approach allows for the exploration of details about experiences, emotions, preferences, opinions, motivations and gender dynamics. Complementary to the quantitative study, it will explain how and why particular factors interact. Two qualitative methods were used in this study: interviews and focus groups. See Annex A for additional information on survey methodology.

Study Limitations

One limitation was the difficulty interviewing both survivors and perpetrators across class groups. This was mitigated through the use of focus groups to counter a class bias towards low-income women and men; professional women and middle-class religious men participated in these groups. The study was also limited by the absence of persons living with disabilities, young people between fifteen and nineteen years old and persons in non-heterosexual relationships. Research should be conducted on gender-based violence experienced by and among persons with disabilities, girls under eighteen years old and within same-sex relationships. Additional research on men's experiences as survivors and perpetrators would be useful, though it should not detract from the necessary and sufficient focus on addressing and ending the effects of IPV on women's health and lives and that of their families.



CAUSES FOR AND RISK FACTORS OF INTIMATE PARTNER VIOLENCE



Different types of violence coexist, highlighting the complexity of women's experience. Key informants outlined the range of forms of violence that women experience, including physical abuse, verbal abuse, emotional abuse, financial abuse and cyberstalking. They considered IPV, gender-based violence and domestic violence "a category of sex discrimination."

This section reviews the forms and prevalence of violence that characterize IPV. These forms are acts of physical violence, sexual violence, emotional (psychological) abuse and controlling behaviours. The ecological model proposes that violence is a result of factors operating at individual, relationship, community and societal levels. These categories are used below to highlight some of the factors reported by informants as relevant to IPV in Trinidad and Tobago.

Individual factors

Some of the most consistent factors associated with men's increased likelihood of committing IPV are young age, low levels of education, witnessing or experiencing violence as a child, harmful use of drugs and alcohol and acceptance of violence as a strategy for control. For women, increased risk to IPV is associated with low levels of education, witnessing violence between parents and experiencing violence, sexual abuse or acceptance of violence as a child.

The study did not examine other factors, such as personality disorders in men or their past history of abusing partners. With regard to levels of education, the majority of survivors who were interviewed had attained a secondary level of schooling.

The sample of male perpetrators was too small and only included low-income men; it is not possible to generalize education as a factor. There were significant challenges accessing men with higher than secondary levels of schooling. As the methodology details, the study relied on referrals from service providers for survivors who could be interviewed. The majority of women who self-selected to be interviewed were older, rather than young women in relationships.

History of family violence and child sexual abuse: implications for recognizing IPV

Survivors described family histories of violence, trauma and insecurity in their partner's and their

own lives, and used this as part of an explanation for men "who are broken" and become violent. This is significant because it shows how survivor perceptions of men's experiences of childhood trauma become a source of vulnerability for women. To some extent, women's familiarity with male partners' stories of witnessing or experiencing violence as children leads to a longer period of empathy and forgiveness.

As one survivor related,

"I know he said that...when they were brought to Trinidad they had to be moving from place to place because both mother and father had left them and the aunt had given them to different people at different times, he spoke about one family he was living with and the guys used to beat them a lot, the father in the house used to beat them a lot...yeah but that's about what I know just from what he told me. I gather that he didn't have a very happy childhood he had to be moving from place to place he thinks that he is very bright and I think so as well and...he had to leave school, he wasn't sent home and he thought he would have made better of himself" (Afro-Trinidadian, 57 years old, tertiary school educated).

Similarly, an Adventist from rural Trinidad explained,

"Yes I heard so they say the father which is his father or stepfather used to beat he real bad and all kind of thing so some of the family tell me so he grow with this violent thing that why in the beginning he didn't treated my children so as he start to get his two he start to abuse the boy and the two boys yea he grow up in a violent home so he just role model" (Afro-Trinidadian, 50 years old, secondary school educated).

Women described partners who were left by both parents and raised by extended family members or "different people at different times," who were beaten as children or saw their mothers being beaten, and who may have had to leave school early preventing them from meeting aspirations.

Survivors highlighted economic insecurity in childhood as a factor in their own stories of familial violence and trauma; this combines with the effects of IPV on children who have "horrific memories of childhood." This point is borne out later in survivors' stories of the impacts of IPV on their own children.

Family insecurity, neglect and emotional instability in childhood repeatedly occur as factors linked to women's later vulnerability. Survivors remember growing up with mothers who were hospitalized with broken bones from beatings, who had to be hid from their fathers who were trying to kill them and who would be repeatedly debased. What is clear is that for survivors and perpetrators, IPV is accompanied by other forms of violence, from family violence experienced as a child to child sexual abuse and later non-partner sexual violence. These factors highlight women's vulnerability and the normalization of violence in their lives.

There are continuities between childhood and adult experiences of violence for both survivors and perpetrators, highlighting the potential for IPV to become generational. The impact on children watching their mothers experience violence seems to be a significant factor in women and men experiencing and perpetrating IPV themselves. The normalization of violence in family life may be a factor preventing women from recognizing when IPV begins in their own lives because of its familiarity. As one survivor explained:

"You feel like you are not good enough. I still feel that way because of the way how they made you feel, like yuh nothing. You always feel so. So, when somebody tell you, you are a queen, you are nice, you'd want to hear anything else, because all the time you are hearing that you are stupid and you are dotish" (Indo-Trinidadian, 42 years old, primary school educated).

Another survivor related:

"Sometimes, I could not even tell what had triggered it and [my father] would start to yell at my mother, telling her that she's stupid, she's completely worthless and that she's cheating on him, and my mother would give as good as she got, she would call him every word in the book, and then eventually he would hit her or try to hit her. I remember as young as four I would go in front of my mother and defend her, there was a time when he jumped on her and pulled her hair, jumped on her in the bed and started beating her, I was crying out, and so I jumped on him, I was beating him up with my fist and I had my dolly and I was beating him up, and I was like, 'leave mommy alone', and I bit him so

hard that I broke a tooth and I saw blood. He would take an axe and break up the furniture in the house, he would break plates, he would throw food...Every Saturday morning when he had to go out to the market, he would get up and start cursing about how worthless we are, how we are holding him down, how we are just leeches on him, when I started to blossom into puberty I would become a whore, when I wanted to go out for extra-curricular activities like geography or the environmental science club or go hiking or something like that, he would see that I was just using that as an excuse to go and look for a man. Everything eventually ended up with him threatening chopping up my mother and putting her in a sheet and dumping her in the river and then killing us, the kids. One of his favourite threats was that he will chop her up and dump her in the river, and chop us up too and leave us all to die, the final night he was actually going to do it because he had put poison in our water tank, he had hid a cutlass in the bushes, because my mother had gone out and when she came back, he pretended that he wanted to talk to her and tried to lead her down to the river to do what he had to do, he had everything" (Indo-Trinidadian, 29 years old, tertiary school educated).

In addition to familial violence, survivors also experienced child sexual abuse by uncles, brothers, cousins, stepfathers, stepbrothers and older men who groomed them into relationships as teenagers. This left them depressed, suicidal and silent from fear of not being believed and in generational contexts, for future sexual abuse of their own children. Rarely did families react to or report the sexual abuse of which they were aware, leaving survivors feeling alone, unloved and unhappy as children and precipitating their greater vulnerability to mistaking domination for protection or love.

Men in focus groups and interviews also spoke about learning violence from the households they grew up in because "that is what I was surrounded with." One man said:

"Yeah, I've seen women get beaten to a pulp. I see a woman get licks and throw over the banister as a child growing up. Lift up and throw over, like she's garbage" (Douglu-Trinidadian, no age recorded, fisherman).

Another man, a perpetrator, described:

“From small growing up, I always see my father, beating my mother. And if he tell she, bring ah cup of water, she have to bring it. And if he tell she, do so and whatever, and she ain’t do it, she going and get licks. I always grow to know that whatever I tell a woman she have to do. I is the boss; you can’t be boss over me” (Afro-Trinidadian, 37 years old, driver).

Men also talk about how the extent of male violence they have seen has led them to want to either avoid relationships or wonder if their own relationships might end up like that. They describe possible changes to power relations between women and men. As one put it:

“Because now with all women’s rights and stuff being taught, we don’t really think about women in that way again. So now it kind of phasing out, but the reality is that it still there” (university student focus group).

Highlighting the correlation between violence and men at younger age, one man related:

“Is how I was young, and didn’t know life then, nah, and grow up under seeing them thing. I find I was the boss. So, if I tell you anything, and you back-answer me, or don’t answer me, for example, I used to get real vex and I coming to lash. Me ain’t coming to tell you, “Well, why you ain’t answer me?” I coming to hit you one time. I coming to lash you one time. I getting up, wherever I is, and I coming and I lashing you. Yeah, that’s how I was” (Afro-Trinidadian, 37 years old, driver).

Harmful use of alcohol and drugs

Men’s substance abuse emerged as one of the main contexts for IPV. Families have long histories of substance abuse that shape women’s vulnerabilities to violence as adults. As one survivor articulated:

“My sister was in an abusive relationship, because her husband was a drunkard too so I used to watch him drinking rum and want to beat she up so it come like a normal thing because your father drinking, your sister husband drinking, everybody drinking” (Afro-Trinidadian, 50 years old, secondary school educated).

Substance abuse is also cited as a factor turning men from being non-violent to violent. As one survivor pointed out:

“We plant, we make cook, we lime, and he used to study come and look for me, be nice, anything I wanted he buying, but he never show no signs of violence and is after we marry, in between, in between, he will start to quarrel. When he started to get heavy on the drugs, he started to well beat me” (Mixed-race Trinidadian, 44 years old, secondary school educated).

Men’s substance abuse has implications for women’s economic insecurity. A survivor related:

“He was a fisherman and I never know he used to take drugs. I in the house with three babies right through and he gone fishing and then after, when he come home sometime next to nothing, just fish he bringing home and gone look for a piece of yam. So, I saying, you ain’t work for nothing. He saying he ain’t work for nothing and that time people telling me he hold the fish and he taking drugs, which I didn’t know. I had no money to buy no pampers, he make me buy one set of diaper cloth and then we couldn’t buy milk so I had to breastfeed three of them so I look at that as abusive, no stove with no gas and three babies. Because he drink alcohol and he come home, he always picking on the children, the two small one that’s my two, is not he own, he say they interfere with his tool kit and scatter he tools and he drink rum and take a broomstick and real beat me” (Afro-Trinidadian, 50 years old, secondary school educated).

Summary

Individual factors related to a childhood history of witnessing or experiencing IPV between parents or close family members, childhood sexual abuse and, for men, harmful substance abuse are related to all forms of IPV: physical, sexual and emotional violence and controlling behaviours. Related issues of economic stress and male dominance are discussed further below. In terms of consequences, mothers experiencing violence are particularly challenged to provide healthy parenting for their children. In addition, the trauma of home life may mean that in order to escape their home situation survivors “never

check the background of the person, they just go and just friend with them [start a relationship] just to come out the house.” In these stories, experiences of early instability, violence and lack of care or love elevate the risk of IPV, staying with violent partners or becoming violent as a man. This situation repeats itself in survivors’ own lives, taking a toll on children, their school work and their emotions.

As a survivor said:

“The children started to grow up and he would verbally abuse the children, ‘you fool’, ‘you stupid’, ‘you dotish [stupid]’, ‘you is an ass’, he abused them like that. He would throw in my face that I have no education, ‘you are a dunce’, ‘you are stupid’. He started to get aggressive, a night he pulled a knife for me. He started to quarrel, he was getting aggressive because we used to have no sex, and he pulled a knife on us, coming at me and I tried to get the keys to open the door, and he is saying to the children, don’t open the door and he is coming to me with the knife” (Mixed-race Trinidadian, 49 years old, primary and vocational school educated).

This situation can eventually lead to even more extreme forms of violence, such as murder. In one situation, a stepfather, who abused a survivor and her sons by beating them, making them sleep in the dog kennels and starving them, was eventually killed by one of the sons after an argument. What stands out is that IPV directly affects children, potentially creating a pattern for both perpetrators and survivors.

Relationship Factors

Relationship factors are associated with the risks of the victimization of women and perpetration by men. These factors include conflict and dissatisfaction in relationships, male dominance in the family, economic stress and women’s higher level of education.

Conflict and dissatisfaction in relationships

The following example illustrates how relationship conflict or dissatisfaction plays a role in creating a greater risk of physical violence. As one survivor described:

“He was saying I was trying to control him by, you know, telling him to stay at home, but it

was not like that, I asking him to just stay until the children fell asleep. Of course, I accused him of infidelity and he denied it down and that night I was kind of like persistent, at least stay with us, let the children fall asleep because every night you going out, they going to bed without seeing you, so he insisted that he was going out with his friends. It was not about me really and we were in the garage and he was playing, you know, ‘Girl, don’t get no harass, I coming home just now’, and I said, ‘Listen, do not touch me because I am angry’. I said, ‘Do not touch me’ and he continue touching me, you know, I coming home just now, don’t worry, I gonna hang out a bit and he touch me again and I push his hand. The next I knew is that I was on the floor in the garage and so I got up, you know, spaced out and dazed. When I got up, I put my hand to my mouth and I realize my mouth was wet so I walked at the...(indecipherable) of the house only to see my neighbour standing there and my neighbour what is wrong with you, what this is, why are you allowing this, but at this time, I didn’t even know what was going on with my face. When I went inside, I looked in the mirror and I fell down because it was like a horror story, my lip was stuck between my teeth right and I was bleeding, bleeding. By this time, he had already left so when I bat his hand, he hit me, you know, and knock me out and I was there crying, crying, crying, and not sure what to do” (Afro-Trinidadian, 43 years old, tertiary school educated).

This extensive quote highlights the intersection of a number of relationship dissatisfaction issues, including accusations of infidelity, women’s unequal responsibility for child care and physical violence when men’s autonomy, decisions and lack of accountability are challenged by women.

In interviews and focus groups, men cite relationship conflicts as reasons for violence. Relationship conflicts include nagging, quarrelling, cussing, mashing up things in the house, public embarrassment and both women and men’s other partnerships. The account below highlights the pressures on women to forgive as a basis for avoiding abuse as opposed to men’s responsibility to manage conflict resolution without physical violence:

“I think what annoys a man the most is women always brings up stuff from the past. And that

guy, although it was a year or three years ago, he immediately goes back into that emotional state at that point in time. And that could trigger aggression, because you took him back right to the time when he was totally pissed off. You bring that up again? So, it's like the woman is constantly dragging her partner through this emotional state where he is angry. And if she forgives him, she would not be bringing these things up, which would cause future aggression" (Pentecostal men's focus group).

Another example outlines the significance that some perpetrators place on a hierarchy of disrespect, with being cheated on as the highest form of disrespect. One man described:

"When me hear the part when me hear she horn me, da's the part when me get ignorant. Dats the part when me say me really going and kill this girl, and go and sit down back in prison. I coulda take the part where she cussing me in public, she mashing up the house, she embarrassing me in front of people, she embarrassing me in front of she family or she embarrassing me in front of my family and them kinda thing. Me coulda take all that with she. Me coulda take the part where she galavanting. I coulda take all that. But you see the horn part" (Afro-Trinidadian, 28 years old, unemployed welder).

Men's multiple partnerships are often a source of conflict in relationships and can be a potential trigger for violence, particularly when it creates the possibility for women to demand accountability from their partners. Repeatedly, survivors cited violence occurring because they pressured men to stay home with them and the children, accused them of infidelity or got angry about their partners' openness about having other sexual relationships.

One survivor explained:

"The abuse became physical after the affair because before it was more verbal, emotional, financial, mental, but it wasn't physical as yet until after the affair, almost like he felt like he was a man and needed to prove something" (African-mixed race Trinidadian, 35 years old, secondary school educated).

This survivor continued:

"I would be sleeping and he won't care, he would just take what he want and then roll over and go to sleep and many nights I would cry because, even when I was pregnant with my children, he would do it or even when I just had the baby. I remember my doctor asking if I was married to a monster because my first time I was nine months, I was already pregnant with my second son. So, yeah, she was like what kind of person are you married to, so that was abuse, but with respect to actual battering, that was not until late down in the marriage when he started to cheat and then it became physical" (African-mixed race Trinidadian, 35 years old, secondary school educated).

This story highlights how women experience multiple forms of violence, including sexual violence and rape within marriage, even when in late-term pregnancy. It also shows the specific vulnerabilities of mothers and pregnant women.

Both men's violence and multiple partnerships occur in contexts where women are paying the bills. This survivor continued:

"I had stop paying for the car and when he found out he call and he was like, 'so how was the car supposed to be paid for?' I said the person you have driving up and down in it can help you pay, I am no longer paying for something that I don't benefit from, the children don't even get a ride to school anymore because he's going with the girl all over the place and she two little boys. So, I stop paying for the car and that's when he started back to go counselling and he used to ask, so you giving me any money this month to help me pay?" (African-mixed race Trinidadian, 35 years old, secondary school educated).

In another instance, one man described:

"She quarrelling how I with other women.... And take up my phone and watching through it and thing. And I did get vex, and I pick up a 2x4 [a piece of wood], and hit she it across she back, and lift she up, and slam she down, nah. And she was pregnant with my daughter at that time—the second child, yeah. And I thought: You know maybe I overdo it this time? Like, you know, like this time, like I feel like I would have get lock up. Because the way how I see she on the ground, you know, like she can't move—and

plus too, she pregnant, yuh understand? And about six months, going in seven months she was pregnant, eh, yeah” (Afro-Trinidadian, 37 years old, driver).

Pregnancy, birth and motherhood put women in a more difficult situation, particularly in situations where women want to escape an abusive relationship. As another survivor described, “there was nothing I could’ve done, nowhere I could’ve gone when I found out that I was pregnant.” Many families refuse to house women after warning them against their partners, exacerbating their limited options. “I told you that and you didn’t listen, so now you have to stand it,” said one mother to a survivor. Women will also stay in relationships for the children. As the survivor continued:

“He used to beat me in front the children and, when he beat me, they used to start to bawl and he used to start to beat them too, so we went through a lot of hard times. Although I was working, I didn’t have no freedom, but I decide to take it because of my children. I stay and sacrifice because of my children. I study those things and my heart does really hurt me to know the pressure my children go through and we still going through it because he cause my big son today to be drinking, so my children go through real torment and real torture.” (Indo-Trinidadian, 67 years old, primary school educated).

Male dominance in the family

Male dominance in the family is a key factor creating a risk of violence. The following discussion highlights how male dominance is associated with sexual violence and controlling behaviours such as accusation, isolation, threats and stalking, and their intersections with emotional and physical violence. Of particular note is the extent to which men contested, didn’t understand or didn’t consider emotional violence to be sufficiently significant for action. As one man who was part of a focus group described:

“When I was growing up, that was an issue in my house, not physical violence, but definitely verbal abuse and emotional abuse. And, to this day, I not only sure that anything could have

been done about that in the legal point of view. Because what you gonna say: ‘My husband cussing me?’” (Tobago youth focus group).

Sexual violence is also associated with IPV because experiences of sex are both informed by gender ideologies and sex as a site for exercise of power and control.³¹ Survivors describe experiencing “the whole circle” of violence and “being forced to do things you do not want to do,” including “rape at nights to have sex” and physical violence for refusing. Refusing sex may be a reaction to violence and love turning “ugly” or be a reaction to male infidelity, because women “get licks when I don’t want to stay and take it.”

It is important to note that sexual violence may also be directed at children. Survivors discussed having to protect children from being interfered with. “He didn’t want her out of his sight at all, he wanted the child for himself” said one survivor, who kept her children with her all the time and who herself experienced a sexual relationship she described as “terrible” and “torture.”

Sexual violence often continues after women have tried to end relationships. As one survivor described:

“I was at one of the places I was renting and he would have come in the middle of the night making noise, my landlady was right there and I did not want to involve her because as soon as they hear of domestic things, I’m going to have to find somewhere else to go and rent, and I was comfortable because the rent was not too bad. I let him in and ask, what is it you want? It was interrogation and a whole set of nonsense and question about children, in the middle of the night, so eventually, it would lead to him physically abusing me, pulling me down, and then raping me, because he wanted to have sex and I am not doing that with you because we are not together, and you do not own me. These men feel you are their property, so you cannot have any man or any relationship, but I must control you still or whatever. I was raped, after he would have left, I really cry, and cry and cry. Well, I did go to the court and I got a temporary restraining order and after that expired, that was it, but it did not really make a difference because after that I was pregnant for him with that episode. So, that was the result of me being sexually

³¹ Marital rape is against the law in Trinidad and Tobago under specific circumstances (2000 Sexual Offences Amendment Act).

abused, assaulted by him” (African-Trinidadian, 43 years old, tertiary school educated).

This experience reveals how perpetrators can affect women’s ability to leave and move on by stalking them, thereby creating challenges for them to rent spaces from landlords who do not want “trouble.” This is further explored when discussing stalking and how it can promote victim’s homelessness. As another survivor related:

“I had done, but he did not want to done, so when he want sex and I don’t want none because I done with you, he would just rip off my clothes and do whatever, so is years, I had just given up, and just lie down and cry all night, and say Lord how much of this again you want me to take, how long, you know, it was not easy, you ever feel like you could blind? I felt like I was blind, like literally blind, like I can’t see, like my eyes open, but it’s closed and I can’t see, like the Lord just blind me” (Indo-Trinidadian, 42 years old, primary school educated).

Indeed, perpetrators and some men in focus groups agreed that being denied sex was a factor explaining — and even justifying — violence. This belief ties in to a number of ideas, such as men’s greater biological need for sex, men’s right to sex (especially as a reward for how they treat women), and women’s responsibilities to men in relationships. As one man said:

“To my knowledge, sex is in a relationship when you are married, it is something that needs to be met. It have no want. And that is something you have to get—especially men. So sometimes not getting that could cause a frustration, leading to lash the woman or beat the woman. And it could cause a bit of anxiety in the relationship. A lack of sex can lead to violence. Or the lack of it. In a relationship, sex is considered to be a building block of the relationship itself. I have a partner who is a acting corporal in the Police Service. Was his wife birthday. The man bless she up from morning, carry she out, lunch everything. Carried her fancy restaurant in the evening. They went party, liming, everything. Treat she real nice. When he say he going and eat ah food, watch she turn she back on him and sleep. And my boy done tempted already, he all 300 degrees, you understand. He went

and hold down he wife; and he on suspension now from work” (Men’s rights organization focus group).

Male dominance in the family was key in these situations. Controlling behaviours such as isolation tactics, accusations, threats and stalking also highlight the relationship between male dominance in the family and multiple, intersecting forms of violence. Accusation by partners is common, repetitive and used to precipitate threatening, hitting, slapping, cursing and choking. It is ironic because accusations by partners often occurred in the context of their own multiple partnerships. Accusation was also a technique for isolating women, preventing them from talking with anyone, such as other males, family and friends and from leaving the house except to go to work or to the grocery.

In these situations, men also behave in ways that suggest constant insecurity and paranoia about women’s infidelity; they are jealous of any relationships that women have. This means that women are less likely to have close relations in whom they can confide. They are not allowed leisure time with others for fear of others telling them to resist or leave. It also reinforces men’s admonishment to keep their business private.

Alcohol and drug abuse are relevant here; a common theme in survivor’s stories is that men would be nicer, more caring and more cooperative when they are not intoxicated. As survivor said:

“He don’t want me to have no communication with nobody, is either accusation, I with this man, that man, and as I work he taking my money to go and get he drugs” (Mixed-race Trinidadian, 44 years old, secondary school educated).

Such violence wasn’t only related to drug use however, but was part of broader controlling behaviour:

“I wasn’t to talk to anybody around because he used to get vex, he start to accuse me of being with he stepfather and he brother and how I bringing man inside the house. I gone in the shop, he start to accuse me, and he hit me, he hit me on my back and it peel off my skin, I couldn’t keep on clothes for about three or four days. It had a time he did hit me and I died and they brought me back to life. He got scared and wet me back and I didn’t even know nothing, I didn’t know nothing until must be the next day”

(Mixed-race Trinidadian, 44 years old, secondary school educated).

Women respond in various ways, such as abiding by their isolation and staying indoors, refraining from seeing family or spending leisure time with co-workers. Notwithstanding these restrictions, men often follow women to their workplaces to harass them and their bosses and employees, or abuse them until they stop working or close down their independent businesses. This stalking leads to some perpetrators losing their jobs; many respond by requiring women to find them jobs in the women's workplaces. In one case:

"He would go to work and when he did, he would leave the job and come by me and he would get fired, so then wherever I worked I'd have to get a job for him there" (Indo-Tobagonian, 41 years old, secondary school educated).

In addition to accusation, isolation is a controlling behaviour common to survivor stories. Women are prevented from using the family car, having time for themselves, visiting neighbours or furthering their education. "If I need to get something, both of us would probably go together or I have to go quickly and come back" and "I had to be home like I in prison right through" and "you are going in the grocery, buy everything one time because it have no going out again" were common representations of this form of IPV. One perpetrator said, "if I spit on the ground there and you ain't reach back and it dry, me and you fall out, don't let that spit dry and you ain't reach back yet" (i.e. if the "spit dries" (symbolically speaking), then she hasn't returned quickly and she will be late in his view). Another prevented his partner from going to classes:

"He would make sure he was not home when I needed to get to class so that I couldn't go to class. Or if I would go to class, I would be in class and he would calling me and say he leaving the home now, he is leaving the house now and I would have to leave class and get home because he is leaving the children alone and they were really small at the time. They were about four, five and seven, so that was difficult for me" (African-mixed race Trinidadian, 35 years old, secondary school educated).

In an incident of physical violence, this survivor had to sit for her exams with her arm in a sling because of swelling and muscle and soft tissue damage from having her arms wrung behind her back.

At first, women may think that isolation strategies are an expression of their partners being in love or concerned, but they then realize that "he would do whatever he wants, go wherever he wants to go, and then when it comes to me, I should report to him." When they begin to recognize it as control, and possibly negotiate and resist, many perpetrators would beat them before they visit their families. When the women return, the perpetrators would insist that the women not see other people without them.

A common act of isolation was to undermine women's relationships, particularly with female friends. As IPV becomes more severe, women have fewer people to turn to because some families are embarrassed and even scared to help. As one survivor related:

"Um, well, being a victim at the time, when the entire situation happened, my family were very embarrassed and all my friends were afraid for their life. They said, listen, they don't want this mad man come by my house and kill me and my family, we have to stay away from this woman, so it was just the kids and I. We were there alone" (Indo-Tobagonian, 41 years old, secondary school educated).

In addition to exacerbating women's depression and suicidal thoughts, isolation greatly increases the difficulty of leaving violent relationships. Men go to significant lengths to threaten women, stalk them, make them fear leaving and make them vulnerable to homelessness. In one instance, "because of him constantly coming there and that kind of thing all hours, the landlady said we need to find somewhere else to go." This is also reflected in the case above even when the woman, rather than cause a scene and get evicted, let her former partner inside her apartment and was raped.

The following extended description of violence highlights the implications for women's working lives, their family's knowledge of violence and for responsive interventions. Threats and fear pervade these episodes; men use them as a technique for power and control:

"You want to tell me when I should come home, that I cannot do the government work as I see fit to do it, that I working with too much men. You cannot stay after work so late, if you are supposed to finish work at a certain time you are supposed to be home — it was real control.

He would grab me, hold my face, my mouth and say don't say nothing and I am sharing an apartment with my mother and them. So, this is my room here and their room is further up and thing and nobody could hear anything. He would come over and visit and sleep over and corner me in the bedroom, and just keep intimidation and threats and, of course, I am embarrassed and I do not want people to know, so I figure if I pacify it. Then when my mother realized what was going on, she would never confront him, but she would confront me. I don't want him here.

He sent for me with the vehicle and I went and he took me and carried me quite up in the mountain behind his family house in the dark and real beat me up, and put a gun to my head and threaten me, and beat me with the gun butt. But, he had this procedure that he will hit in places that not visible. Besides the time he cuff me in my face and I got a black eye, other than that he would hit you in places that not visible, so I used to get a lot on my chest, my stomach, that kind of thing. I cry and cry and he will wait till I finish and get myself together, and then send me back with the car and then drop me back. When I told him I do not want anything to have to do with you, of course he made calls and send threats, and say that I am sending a vehicle for you, get in the vehicle and come down the road, if you do not get in that vehicle, something to your family and them, your mother and them is going to happen" (African-Trinidadian, 43 years old, tertiary school educated).

Threats are not generally well reported or understood in terms of how they represent IPV. Their implications are complex and debilitating for women. They also intersect with the implications of sexual, physical and financial violence, highlighting their seriousness in the perpetuation of violence.

Threats and stalking have been proven to go hand in hand. Stalking, which often becomes worse after a relationship has ended, includes threats to kill women and their children and then commit suicide and threats to family and friends. Women respond by reporting threats to the police, applying for restraining orders, leaving for places where they think they cannot be found, applying to their workplaces for transfers or leaving their jobs, entering safe houses or getting

men out of the home and then being followed by co-workers or others until inside and locked in safely. Using this as a strategy, one survivor related, "after a time, I recognize that it's like I'm living in prison." Another survivor reported that her husband would:

"Park the car and sleep in it outside the gate so when I have to come to work, I have to wait till he move from there because when I walking he could do me something, cause he say he threaten, he say I will blind you and you won't be able to see, so I can't take no chance" (Indo-Trinidadian, 67 years old, primary school educated).

The story below exemplifies how stalking affects women's ability to travel about freely, to be safe when they reach home and to function their best at work:

"He say come in the car I go drop you home. I said no. I said I will travel, so he park the car and stand there and he telling all the drivers, don't pick me up, so I say, driver I paying my effing money and you won't pick me up, so the driver decide to pick me up, but he reach home before me and he take up a cutlass when he reach and was waiting by the door and if you notice a mark on my face here when I smile, the cutlass had a pointy tip, and he thing it and stick me right here and when he start to see blood, he drop the cutlass and bring a towel, he didn't realize it would of stick me so fast, but I had to go for stitches and so I didn't tell them this happen, I was still frighten and scared next day. I went to work with that cut on my face. I shame to tell them I get licks" (Indo-Trinidadian, 67 years old, primary school educated).

These examples demonstrate how threats and stalking connect to the use of accusation and isolation and highlight how significant these expressions of male dominance are as factors perpetuating IPV.

Men acknowledge the need to transform boy's and men's gender socialization. As one outlined:

"The biggest obstacle for men is that men were taught not to be emotional, not to talk, not to express themselves. So, a lot of men are misguided by following trends from other persons that they may see, that may deem as being macho. So they just think this is what a man supposed to do, because I saw this guy doing that. But, guess what, all those guys were doing the wrong thing, but they have no

right examples, so they just follow that pattern which leads to the same end...for men we need to show more emotion, really talk about how things affect us before it reaches the boiling point of aggression where things explode. So, more counselling groups even teaching men values and skills from a young age from even secondary school—primary school—because a lot of men haven't grown up with their parents; they follow the gangsters and other people that are trending socially. I think we need to bring a lot of males into some sort of session where we could teach them these values” (Pentecostal men’s focus group).

Economic stress

The significance of economic stress on relationships was a main theme of the study, particularly given the precarity of the Trinidad and Tobago economy. Economic stress, a key factor that increases risk of IPV, can include economic insecurity and economic or financial abuse. Employment or unemployment of one of the partners is another risk factor for violence. Women’s employment can also be considered a threat to gender norms. Among other areas of women’s lives, male partners’ controlling behaviours seek to limit women’s economic autonomy.

When the man is the main breadwinner, women experience challenges in affording the basic items that they need, such as toiletries and menstrual pads for themselves and food for them and their children. One survivor related standing in the road to look out for her child’s father to bring money. Being on maternity leave meant she wasn’t getting enough money, so she would mix flour and sugar for her son to eat. Such a case highlights the implications of violence and economic insecurity for children’s nutrition, well-being and academic achievement. Another survivor relied on teachers to feed her children when there was nothing in the house to eat, noting that both hunger and unmet emotional needs resulted in them “acting out.” Some women eventually go to the court for maintenance, but find it difficult because men work intermittently, leaving them to use their salaries to pay all the bills, thus becoming unable to sustain themselves. As one said:

“My salary used to pay all the bills and everything. I had to rent and I couldn’t pay all

the bills, I couldn’t maintain the children, I had to go to court [to] file for maintenance” (African-mixed race Trinidadian, 35 years old, secondary school educated).

Another related:

“When I get the book list, he will not help me with books at all. I would have to take the book list to a store and they would give me the figure and I would take it into the credit union and that was how I was able to keep my children in school. He was never the type of person who would provide for the children and he would just lay back there, and I would be the one year after year going to the credit union to buy books for the children, he was not this person who was willing go over and work at all you know, not at all” (Mixed-race Trinidadian, 49 years old, primary and vocational school educated).

Thus, key informants expected that the economic downturn would make it harder to make ends meet. One summarized:

“I think women will become poorer; they will be hardest hit in terms of job losses. Then you find that the social safety net may contract, their access to education may contract” (Domestic violence policy advocate).

In addition to referring to an inability to make ends meet, economic insecurity also refers to an inability to exercise decision-making over work and money. Thus, conflicts over work and money exemplify forms of economic insecurity and expressions of IPV. Repeatedly, women struggle to establish an ability to earn their own money and control the money they earn. Survivors told similar stories, for example:

“While I working, he want my money, telling me how to spend it, what to buy, what not to buy, all these kind of thing” (Mixed-race Trinidadian, 44 years old, secondary school educated).

Some men expressed insecurity and feelings of being emasculated because their partner made more than them and used it as a tool for control. One survivor related:

“At a point in time, I was making more money than him so I don’t think he wanted me to elevate any higher and he said I used to make him feel like less of a man and I used to talk

down to him, at least that's how he used to feel, and then there were times he got paid and I didn't know and his boss would be like, but I paid him and he worked overtime, so he got x and x amount of money, and no money came into the home" (African-mixed race Trinidadian, 35 years old, secondary school educated).

Men will also approach women's workplaces as a site of control, stalking them or undermining their independence and relations with colleagues and bosses. In general, constant accusation and abuse is a response to women working, particularly in conditions of men's joblessness or insecure labour arrangements. Arguments and abuse will ensue before women go to work, follow them to their workplaces or prevent them from getting to work. As one survivor explained:

"Every time I going to work, he hitting me same day, he telling the taxi don't stop for me, don't take her up" (Indo-Trinidadian, 67 years old, primary school educated).

The following story graphically conveys the threat that IPV poses to women's livelihood and survival and highlights that employers need training to deal with employees and their situations resulting from IPV:

"When I started working, I moved from working in an environment with males and females to an environment with mainly males and he was really upset by that. I started training and, every morning, I would get a curse out, so I'm going down to my training crying. He would come to pick me up on evenings, the officers will be there, and when I get into his van, he would be like, 'so who is that man you talking to and how come he decide to talk to you', and I say, 'we weren't talking anything and I waiting for you to pick me up'. I went to the bathroom to take a shower and this man choked me, he was just choking me, and I was like, what is wrong, what have I done, I didn't do anything to be choked, nobody does anything to deserve being choked by somebody else and he was trying to choke the life out of me. What made me finally decide that enough is enough was when this man went to my Sergeant and told him that I threaten to shoot him. Then I recognize that he is getting my job involve so he really doesn't care. So, my Sergeant, who was male, never asked any questions, he came, he wrote up in my pocket diary that I'm not to be issued a firearm to leave the compound, the only time I should be issued a

firearm is if I'm on the compound, if I'm leaving the compound to go and patrol I should hand it in and I found it was very unfair, right, because he never asked what it's going on, nothing. I tried to keep working for as long as I could but it became these abuse episodes, and then for me to go to work, how to go to work and face the ridicule, because I have to go to work with a black eye, it was like I had to choose and I decided to stop going to work" (African-Trinidadian, 43 years old, tertiary school educated).

Survivor responses demonstrated that while IPV influences women's economic independence, women's economic independence can also influence IPV. This is because IPV can inform negotiations over the control of money and women's ability to challenge beliefs over who should make and/or control money in a relationship. Women's economic independence can initially create a backlash from men, as they may feel their role is threatened.

Additionally, although a key informant concluded, "a lot of these victims, they don't have a skill, which is one of the reasons why they keep staying in that relationship, because they not marketable," it is clear that even when women can find and keep jobs, male partner violence can still threaten their livelihoods.

Summary

Relationship factors contribute significantly to how IPV is experienced. The nexus of forms of violence emphasize the dysfunctional ways of dealing with conflict in relationships, notions of male dominance and how economic stress can contribute to IPV. Women are not simply passive survivors; the consequences for women and their responses show that the strategies they adopt negotiate extreme fear and actual and potential harm. Despite this, controlling behaviours have implications for women's sexual and economic autonomy, and are contextualized by the pervasiveness of gender-inequitable norms discussed below.

Community and Societal Factors

Community and societal factors include gender-inequitable norms, particularly those that inform the beliefs that connect manhood to dominance and aggression and indirectly promote low social and economic status for women in notions of submission

and taking their 'rightful place'. In addition to issues of economic stress explored above, gendered beliefs and norms were the second significant factor focused on in the study.

The study focused on exploring the ideological and material relations of gender (Barriteau 2003), specifically because of the pervasiveness of the myth of male marginalization over the past three decades and its impacts on how GBV, and particularly IPV, is discussed and addressed (Rowley 2004; Robinson 2003; Hosein and Parpart 2016). Public discourse, particularly men's rights movements (Hosein 2017), increasingly emphasize that men experience violence from women in equal numbers and severity as women experience from men, that men are now survivors to more powerful women (and state agencies biased towards women), and that men are marginalized in resources dedicated to GBV prevention, thus requiring greater parity with resources put towards violence against women on the basis that women benefited from them enough or too much already.

Yet, the violence data provided by the Crime and Problem Analysis Branch of the Trinidad and Tobago Police Service suggested otherwise, and specifically pointed to the resilience of masculinist or patriarchal gender ideologies (Reddock 2004) and male privilege and domination in intimate partnerships. It also points to the significance of the backlash to women's empowerment. As one key informant noted, "I heard one man say in our church that, "all yuh woman asking for equal rights, okay, take equal rights, you want to be saying things, take licks." These provide the ideological context for women's experience of male violence and control and highlight how misleading the influential myth of male marginalization is as a basis for national policy, programmes and protocols. The backlash to women who are not playing their rightful role appears again in another man's explanation:

"Plenty woman's biggest issue in life is that they don't know what they role and function in a relationship is. A woman need to understand that you are woman and I am a man. Certain things that I do may not be appropriate for you to do. And some women, you know, because they have a thing about equal agenda, and they think they should be even, on a level playing field as us" (Dougla-Trinidadian, no age recorded, fisherman).

Related to these, ideals of romantic love, family and marriage shape women's decisions to enter and stay in violent relationships. Survivors described the stigma of remaining unmarried into their thirties, expectations that children should have the same father and a "fairy tale of getting older, getting married, having a family, living happily ever after." This is especially compelling for women who grew up amidst difficult family relations, who entered in relationships as teenagers or who wanted to "make the perfect home, be the perfect wife, be the perfect mother and have the perfect husband." The pressures of such ideals are also associated with the respect due to fathers, even those who are violent. One survivor admitted:

"I will always have a certain level of, I don't even know if to call respect, because that might sound strange considering that this man send people to kill me, but I always make the children understand that at the end of the day is one father you have and you need to respect him regardless of how you feel about him, whether he is acting like one or not" (African-mixed race Trinidadian, 35 years old, secondary school educated).

In individual interviews, the word 'submissive' itself was repeated by survivors across ethnicities. As one described:

"We were taught to be submissive, and that Indian wives must be submissive, and you know she must be at home cooking and cleaning, looking after the children. You know because we are taught that, in church, you are taught as a woman to be submissive, and then you would wonder how could you be more submissive when your husband is beating you" (Indo-Tobagonian, 41 years old, secondary school educated).

Under interventions by religious organizations, patriarchal gender ideologies result in minimizing violence, whether in terms of men's actions or pressures on women to stay married or even to not report violence to the police. As a key informant who works with men highlighted:

"You know, those churches really give powerful messages about women's submission, but across all faiths, in fact, fundamentalism is about that. I think now there's a lot more awareness about domestic violence but there is still a strong tendency in popular culture to minimize and

just not understand how it is connected to gender and equality. I also observed in practice that men have minimized what they have done so they would use the word, 'little'; like I give she a little hit, a little kick, it was always something small" (NGO leader).

Another survivor reported:

"I didn't want to be divorced because I grow up believing that was sin and there was something in there about wanting my son to have both parents and that kept me in the relationship for a long time, so those two things, for my son's happiness and because of religion" (Afro-Tobagonian, 57 years old, tertiary school educated).

Overwhelmingly, interviewees and focus group participants emphasized that "the rules for men are different than those for women," with women expected "to be in a submissive position where they should obey what the men say" but not as they do. As a key informant explained:

"Society has been teaching men that they are the head of the house and that they are the strong partner and that they shouldn't be weak so they put up this front, that they have to be controlling, and if you not a controlling person and not handling your woman the right way, you is not really a man, so I think that men are afraid to be embarrassed, they afraid as people would say you controlled by your woman" (Indo-Tobagonian, 41 years old, secondary school educated).

An extremely significant idea in terms of patriarchal rules for women is that women must not have friends, particularly male friends. These rules then shape the extent to which both accusation and isolation become significant factors in their experience of IPV and is shown in the data on controlling behaviours.

In terms of responsibility for childcare, women are considered to be primarily responsible for "cooking, washing and taking care of the house." Violence is then used as a tool for men to insist on these roles or to refuse childcare. Based on facilitating support groups, one service provider detailed a story "with a man who came home drunk in the middle of the night and this woman has to wake up to cook for him and his drunk friends and he feels humiliated because she is not getting up so he beats her," and another story where "the woman had a newborn baby and she is

sleeping, and the baby is crying, and he isn't going to pick up the baby, he is trying to wake her up and he beat her, because 'what kind of woman cannot get up and hear your baby crying'."

As another survivor summarized:

"You bring in the money, yes, but when you reach from work, 'go and cook', 8 o'clock in the night, you want me to go and cook, and if you don't go and cook, he beating you, hitting you, you have to go and cook and see about this child. I only earning \$300 for the week, and have to buy Pampers, have to buy milk, most of the times I could not have a full milk for my son... and then he would hit me because he is hungry" (Indo-Trinidadian, 42 years old, primary school educated).

This unequal responsibility for childcare occurs whether or not women are the primary income earners, and highlights a recurring theme of their vulnerability when men are not earning money and are also not having their expectations met. What is significant is that this is especially an expectation placed on mothers. As one survivor pointed out:

"I feel like men expect women, well, mothers, to do more in a relationship. He put the full responsibility of watching the children on me so he always used to say, 'the children, the children,' and I can't do this because of the children" (Mixed-race Trinidadian, 32 years old, secondary school educated).

A second admitted:

"I wish I could finish my bachelor degree, but my husband say look after your children nah. I say alright" (Mixed-race Trinidadian, 44 years old, secondary school educated).

This reiterates the role of motherhood as a factor affecting women's ability to leave violent relationships, particularly if women cannot immediately make ends meet after having a baby, if they leave paid employment to look after their children or if they stay in order to enable their children to survive.

Finally, motherhood and responsibility for childcare creates a risk of isolation, even preventing women from accessing antenatal care. As one survivor described:

"I got up the morning and I started to get ready for clinic and he was like, 'where you going'."

and I'm like, 'well, I'm going to clinic.' He said, 'and who is watching the baby?' I said, 'you will have to' and he simply said, 'if you walk out the door, know what you doing' and that was intimidation right there cause I was afraid, cause I don't know what he gonna do if I walk out the door and I come back and he kill my child or I come back and all my things out in the road or some kind of thing so I had to go on and beg his sister to watch the baby. Now he stayed home all day, eh. I don't know if it is he just didn't want to watch the child or he didn't want me to go, I don't know" (African-mixed race Trinidadian, 35 years old, secondary school educated).

Gender ideologies have shaped women and men's understanding of power, thus normalizing toxic masculinity as an expression of manhood. Men have to be able to show that they are "handling" their women rather than being controlled by women, or "yuh is not really a man" and "she is playing man," so that even men who are not controlling are afraid to be embarrassed or seen like a "soft man." This ideal also includes having multiple partners, a factor later discussed in terms of men's infidelity as creating a risk of IPV for women.

Regarding men's joblessness, lower qualifications or lower wages than women, key informants suggested that this creates a situation where men feel threatened and where physical power becomes a means of "subduing and letting her know who is really boss in this house because I can control what she does, I can say 'okay you give me your money at the end of the month and I manage it.'" In this case, physical power combines with sexual power to demand sex and "you cannot tell me no, I have the right and I can do it whenever I want to do it."

This perception by key informants is borne out in the survivor interviews where men's lower earnings are combined with control over women's money in addition to physical and sexual violence. It highlights that ending IPV requires directly confronting gender ideologies, not just opportunities for women's economic participation in the labour force. Women are vulnerable if less well-educated than their partners (which may be used to insult or degrade them), and are also vulnerable if they are better-educated and earning more.

A man who works with perpetrators pointed out that:

"All of these things have really deep-seated notions of masculinity for them, in 16-week programme, it takes 10 or 11 sessions for the man really to understand why they are the way they are, it takes a long time for all of their fences to actually break down."

This section on gender ideologies also illustrates how IPV is significantly affected by notions of love and marriage, beliefs regarding femininity and masculinity and male privilege. Ideals of love, marriage and family mean that women may hide violence from friends and family as they feel ashamed or a failure in terms of "how society would look at me" or, as a survivor explained:

"I grew up hearing the person you have children for is the person you suppose marry and you suppose to stay and work things out and society would look at you as a slut if you go with somebody else" (Afro-Trinidadian, 43 years old, tertiary school educated).

Some women make excuses or pretend to be the "happiest couple in town." This suggests that, far from gender ideologies now emphasizing women's dominance over men, patriarchal ideals are highly resistant and powerful. As one key informant described:

"They are being beaten every day, but it's a situation where they're completely psychologically dominated on the basis of the ideologies" (Domestic violence policy advocate).

This report further illustrates this in its discussions of the reasons that women stay in violent relationships and interventions by religious organizations. In addition to gender-inequitable norms, men also describe community violence as an explanatory factor for IPV. To survive in communities with "a lot of dreams but no jobs and no income and no nothing" means not showing weakness, which translates to a resort to violence in moments of relationship conflict and family stress, even when men know that violence is wrong. It is significant that men are able to articulate that violence is a technique for controlling women even when they believe that it is wrong. As one man described:

"You does know what you doing is wrong, but you still do it, and I know, well like I overdo it now, like she might have to go in the hospital and if she tell them, the police them will come

for me. I always say that I woulda stop hitting she, nah, but like for strange reason I could not do it. Because it have a part to play with she. You see it have some women they does do certain things to get you vex, and they know when you get vex what you going and do, right. But it still wrong for the man to do it" (Afro-Trinidadian, 37 years old, driver).

Summary

This section explored community and societal factors with a focus on gender-inequitable norms. The significance of norms to forms of violence means that focus should also be on interventions beyond service provision to ones that engage in behaviour-change communication in order to achieve social change, promote acceptance of women's and girl's empowerment and to engage men and boys to promote non-violence and gender equality. Addressing the impacts of gender ideologies is key to addressing IPV.

A decorative background consisting of a 6x6 grid of circles. Each circle has a thin outline in a different color: red, white, blue, green, or yellow. The circles are arranged in a regular pattern across the entire page.

INTIMATE PARTNER VIOLENCE: CONSEQUENCES AND WOMEN'S RESPONSES

IPV has implications for women's physical and mental health, even after violence has ended; IPV leaves scars. For some survivors, these are physical scars, such as a permanent mark from stitches to a lip after it was split. Others will have had unwanted pregnancies, multiple miscarriages from stress, quarrels, infidelity or beatings. Women may turn to substance abuse or become suicidal or may need counselling, antidepressants and options for escape. Discussions above highlighted physical injury and poor self-esteem for women and their children, often extending to poor school performance. The consequences of IPV are exacerbated by the fact that many women feel they have nowhere to turn, even when they become suicidal. As one survivor described:

"Doh matter how much I do, the child quiet, he would still hit. He started drinking, he would drink in and out. He would drink and stop. I started drinking. I think it used to help me forget. We would all drink together and he would beat me really bad, so I would have numerous miscarriages. One day I tried to kill myself and went to the hospital and I remember the doctor saying, 'Why you would do that, yuh know that's stupid, why don't you just get out?' But I couldn't just get out. I started to explain to the doctor what has been happening and how I felt, how I feel and how I have no support. I would leave and go by my family and try to get help, but they would always say go back. And he said, 'You stupid, you shouldn't take that', and I realize he wasn't saying anything to help me move past that and he was telling me how stupid I was. I just sat and said nothing to that and I came out of the hospital and I went back because I had nowhere to go and the abuse just continued" (Indo-Tobagonian, 41 years old, secondary school educated).

Before examining how interventions both empower and fail women who try to end the abuse they experience, this section details how and why women respond to violent partnerships in the ways they do. Women may stay in violent relationships because of "fear of retaliation, lack of alternative means of economic support, concern for their children, lack of support from family and friends and love and the hope that the partner will change" (WHO 3). All of these considerations appear in women's qualitative experience of IPV in Trinidad and Tobago. However, one important insight from the interviews is women's realization that it takes a while to identify their

experiences as forms of violence in their relationships. As one explained:

"I does tell people this about abuse and people don't want to know, it does not start ugly, it becomes ugly and then when you recognize what is going on and you try to leave, that is when it becomes worse" (African-Trinidadian, 43 years old, tertiary school educated).

Having learned to live with violent contexts is also significant to not recognizing the signs. One survivor described:

"He didn't start off with physical abuse. I didn't understand as I keep reiterating, I never understood, I never knew what abuse was, I thought abuse was just physical, so he would always curse me if he come home late and I ask him where were you, he would curse me out and you know say stuff, he would always try to control me if, let us say, I finish work at four and I get home at five thirty or so, that time I work close to home so there will always be an argument 'why you come home so late you know', if so I want to go to the mall with my friends, my co-workers without telling him beforehand, problems, he would curse out, he would get on...when every time I started classes, I would start off going good and then after a week or so he would do everything in his power to ensure that I stop classes and then I remember he used to curse me out a lot and say you so uneducated, you don't even have a degree, but the thing with him is that that after the abuse, after the verbal abuse and the emotional abuse and all that, and most times after the physical, he would buy stuff, you know he would come he would apologize, he so sorry he didn't mean to. I was there hoping one day he will change, which never happened" (Afro-Trinidadian, 43 years old, tertiary school educated).

Another concurred:

"You do not understand the cycle of abuse, you don't understand that it does have a tension-building period, you don't understand that gifts and thing would have come. I get licks with baseball bat, my face was blue, purple, all kind of colour, and this man coming with Vaseline and ointment and all kind of thing and nursing all the bruises that he just put there, all the things that

he just do, he come now to nurse me back to good health and so you don't understand the cycle, the psychologies that is involved. If you don't walk in the shoes, you really, really, really don't know" (African-Trinidadian, 43 years old, tertiary school educated).

This suggests that key to women's ability to negotiate and leave violent relationships and to address their consequences is a clear understanding of what constitutes violence in its overlapping and complex forms and its fraught connections with masculine dominance, love and forgiveness.

Fighting Back and Leaving Violent Partners

Some women fight back or begin to fight back. This may take the form of trying to prevent perpetrators from hurting them, quarrelling, pushing back and cursing and even hitting back when they decide they are ready to stand up to abuse, even if they describe themselves as emotional, soft and fearful. As one survivor said, "I quarrel back, cursing, but to initiate violence or fight like that, no." This story highlights how risky standing up for oneself is, and how it compromises women's status as the aggrieved party:

"I wasn't perfect when he hit, I would try to hit him back, when I realize he would hit me and kill me, I fight back for myself and when he say things to me I'd say it back to him. Yuh know they would always blame me for it because I shouldn't say anything and I shouldn't hit back so they would blame me. Before we go to church, he used to beat me and when we used to go to church, I don't know why, I used to not raise my hand and worship, so when we would go back home he would beat me again" (Indo-Tobagonian, 41 years old, secondary school educated).

They begin to dream of killing their abusers. As another survivor related:

"I will kill you too because I feel that is what I have to do to get through to him because if you want to beat me, I am going to sit down and let him beat me?" (Indo-Trinidadian, 42 years old, primary school educated).

However, although fighting back sometimes works, it can also exacerbate violence. As another story exemplifies:

"He used to take all the money from me. I give it to him then start to, you know, get some sense, then I start to retaliate. One day, he hit me and, in my mind, I say this is the last day this will happen. I pull an ice pick for him. I didn't stab him or anything. I push the ice pick here, I didn't want to stab him, but I get real licks, real licks and, from that day, he stop lashing me" (Indo-Trinidadian, 67 years old, primary school educated).

The reasons and contexts within which women fight or do not fight back are complex, and sometimes related to men's work roles. As one survivor highlighted:

"He is a soldier you know, what I am doing trying to fight back?" (Afro-Trinidadian, 42 years old, secondary school educated).

They may also be prepared to repeatedly forgive when men say they will get better.

Women's stories of leaving are as important as their explanations for staying. A sense of depression, worthlessness and dependency prevents them from finally leaving, even if they try several times. Men's apologies and a sense that they will change also keep women forgiving men and in violent relationships. Additionally, family members to whom women confide in often send them back, leaving them with nowhere to turn. Nonetheless, women may start hiding and saving some of their pay if they are working. Children grow up, and some begin to encourage their mothers to leave. This latter point was more significant than expected.

Retribution by adult children also seems to provoke leaving. As one survivor explained:

"So he got out a bottle of water from the car and I washed my face, but I realized when I was washing my face my nose was shifting. So when we reach home, I asked my daughter to help me to tie my ribs, to take a band and started banding it. Because when I breathe its paining, I knew right there and then when my son said he would shoot him, I knew right there and then that I had to leave" (Indo-Tobagonian, 41 years old, secondary school educated).

In another situation, a son killed his stepfather because of his stepfather's violence, resulting in exacerbated family trauma. When they become adults, children, and especially sons, often stand up to perpetrators, hide their mothers or pressure them to leave. Watching their children resist or dream of retribution, even at the

risk of jail, seems to prompt women to draw on their networks and resources to get a place to stay when they escape, to visit a lawyer and initiate divorce, and to get counselling for their children.

Many women who have difficulty leaving violent relationships are concerned about ending intergenerational violence in their children's own relationships because they recognize the significance of their own experiences of intergenerational familial violence as a source of vulnerability. One survivor explained:

"I say your father was abusive to me, I don't want you be abusive to your wife, if you hit her again, I'm going to go to the police. You my son, but I'm going to go to the police because you take that girl and bring her and now she is my own daughter, now I count her as my own daughter and I say if you only do that again, I am going to carry you to the police station, I say she is a Christian and my son is a Christian so I want you to go to your pastor and get counselling" (Indo-Trinidadian, 67 years old, primary school educated).

As discussed in the sections on threats and stalking, men become or continue to be violent when women want to leave the relationship, even when men's infidelity is involved. Men leave threatening phone messages and threaten to kill women. Indeed, women's leaving may not end the violence they experience and may even provoke it. As one survivor emphasized:

"In the relationship, the abuse only came when I broke up, the abuse was like threatening to kill. 'If I cannot have you then nobody can have you'" (Afro-Trinidadian, 42 years old, secondary school educated).

In this story, a survivor describes her attempt to escape and the severity of violence she encountered:

"He threw a bucket of kerosene on me, and he proceeded to hold me and grab me to light me afire. He bounced me with the car so I couldn't move and then he dragged me over and he had this bottle of Lannette [poison], and he opened it and throw a cap and started choking me, and started throwing it down my throat, and then he throw another bucket of kerosene on me. When he threw the poison down on my chest, I started gagging and spitting and I ran away from the car. And on the main road, people just

started stopping and looking, people just literally stop their vehicles and was out of their cars just looking, and I was fighting with him, because he threw the second bucket of kerosene on me and was trying to light me afire so I was holding on to his hands because if I held on to his hands the match is not striking, but I fought and fought and started screaming for help and no one was helping. I was stopping people, but nobody was stopping. Then eventually having the poison down my throat, the kerosene and fight and so long running, I just give up and then a man realized that what I was saying was true. He reverse his vehicle, grab me and throw me in the van and took me down to the police station. My husband did tell me when we were fighting, that if it is I had got away, he would go to the children school and give them poison to drink, and he will burn the house down" (Indo-Tobagonian, 41 years old, secondary school educated).

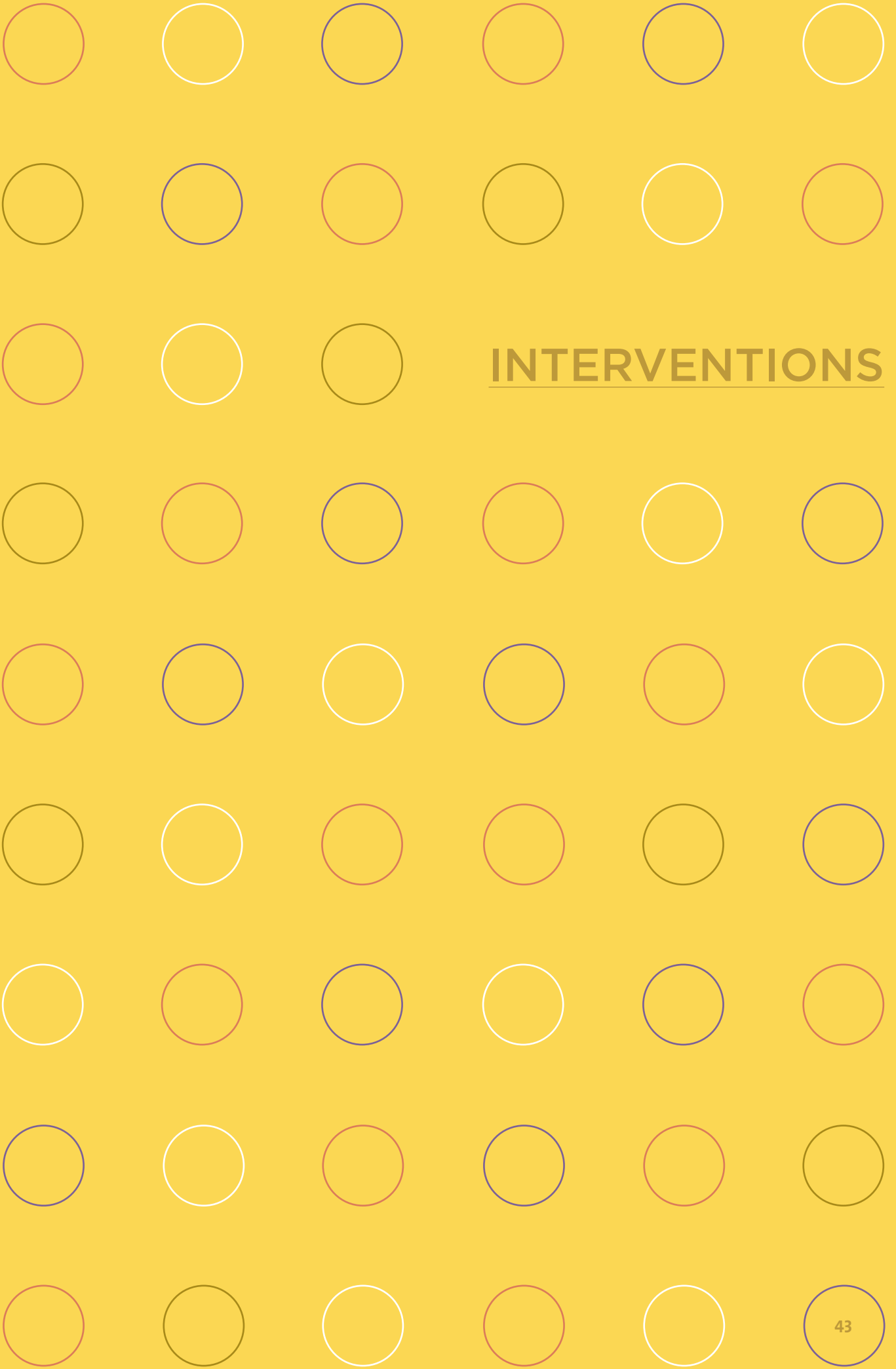
Like so many others, the story above details how difficult it is to seek and get help. Women literally risk their own and their children's lives to escape, explaining why it takes many so long to leave. Also, many women are too ashamed to tell people or afraid of the repercussions of speaking out, particularly in their workplaces. Others are unaware of support services; when survivors with severe harm go to doctors, they don't necessarily get information on services there either. It doesn't help that doctors do not practice clear and consistent protocols in order to identify and address IPV. This means that unless women disclose, the instances of IPV remain unidentified. Police stations and hospitals are not considered friendly environments for women to disclose violence, and even where counselling services are available, follow-through is insufficient.

In addition to submission, fear and harm, inadequate services help to explain under-reporting. One survivor described the kind of help that is sought, emphasizing:

"If you have a protection order, somebody should be in contact with me, know that I am alright. If it is that I have to go to court I have to know that somebody supporting me by attending with me as well, it has to be real support, not just systems there that supposed to be supportive but they're really not. From the time when a victim reaches that safe house, remember, everything that they are hearing has been negative and you start to believe that, that is what you think of yourself,

that is why your self-worth is diminished and so you need somebody who is going to speak only positive things to get rid of all the negative you feed on, because just as how you start to believe all of that over a period of time, remember you lose your identity and that whole thing, so you see that kind of support” (African-Trinidadian, 43 years old, tertiary school educated).

The following section provides insight into different kinds of interventions, highlighting how intervention failures are part of the explanation for the continued prevalence of IPV and its impacts on women. The final section briefly looks at life after violence and women’s aspirations for themselves as they redefine their relationship ideals, economic prospects and sense of self.



INTERVENTIONS

There are many kinds of interventions, including civil and criminal legal frameworks, media and advocacy campaigns for awareness-raising and behaviour change, strong coalitions of government and civil society, gender mainstreaming state strategies, life skill and school-based programmes, early intervention services, counselling programmes for perpetrators, shelters and other kinds of support for comprehensive service responses to survivors and their children. Intervention failures partly explain the continued prevalence of IPV and its impacts on women. This section primarily focuses on interventions by shelters and service providers, police and courts, health services, and religious community members, friends, family and co-workers. In essence, it focuses on the resources and networks available to women negotiating, resisting and escaping IPV.

Interventions by Shelters and Service Providers

Shelters and service providers are considered places to ease frustration, have people to talk to and become comfortable, sometimes along with children. One survivor explained:

“Where I am, well, so far they are nice. I talk to the matron and they give me good advice, they giving me self-worth to appreciate yourself, appreciate your values and I think that is what most women do not appreciate because the men break you down, the morality of yourself, you think you don't worth anything and nobody will miss you when you gone” (Mixed-race Trinidadian, 44 years old, secondary school educated).

However, children of a certain age (especially boys) are not allowed at shelters, which can be a reason for women not staying. Additionally, places like Tobago are not considered to be well-serviced with shelters and counsellors. After an allocated time of three months, women may also have nowhere else to go and no income options, particularly if their partners were the main income earners.

Service providers express frustration with authorities who dismiss the severity of violence. Tending to focus on getting women to a point where they feel safe, service providers emphasize healing and recognizing that lifetime experiences of familial or sexual violence may have disempowered women. Providers often use

storytelling and sharing that is not focused on domestic violence, but rather on “whatever is hurting.” Providers’ time is also taken up with “begging and networking” in the effort to help survivors. They are challenged by issues related to follow-up. As one survivor commented, when “they never even keep coming back and checking on us, everything start back again.”

Survivors may also have difficulty accessing counselling because of isolation strategies. As one said:

“Rape Crisis and those people who have a hotline, they could probably counsel you or talk to you, but I'm not going to get to go there. How I'm going to explain going there? It come like I am a prisoner in my own home. I have to have a reason if it is not that he is sending me out and sending a car to carry me somewhere. I used to get accused of the people he is sending to pick me up to go to the grocery and drop the children to school” (African-Trinidadian, 43 years old, tertiary school educated).

Generally, survivors seem unaware of the existence of services, or if they are aware, they do not know how to access them. As one put it:

“I never really heard much about support systems and stuff, honestly speaking, never” (Afro-Trinidadian, 37 years old, driver).

People also do not seem to know about counselling services for both partners “so that he won't remain the same while she is getting the help.” As another described:

“A lot of people don't know there are places, they don't know the different things that are available to you. When I went and I found out, I got the food card and I got access to all the other grants that I could have gotten. A lot of people don't know about those things so they believe there isn't any help. When I started to speak to the people at National Family Services, they were the ones who actually enlighten me to a lot of the different grants that I could apply for and they helped me apply for it, so it made it easier to go through them” (State ministry professional).

One survivor's story highlights the value of counselling. She explained:

“I found out about the Rape Crisis Society, where they started giving counselling course

and I started going for it in Trinidad. I did the basic, I did the advance, I started going up online and doing online courses and I just started educating myself, so in the times when I didn't have anybody around, this is what I started doing to keep my mind off it so while I'm learning the counselling, learning how to counsel, I was getting counsel from myself through what I was being taught. I started to realize, I was no longer afraid, I was no longer hateful, I no longer wanted to take my life. I started feeling calm, and I started loving myself all over again, so that really helped me that stage, that counselling course really helped me" (Indo-Tobagonian, 41 years old, secondary school educated).

In the experience of some service providers:

"Even though you may be experiencing violence in the home, you do not qualify for public assistance for yourself or children unless you take them out before the court and you have to have police reports, evidence of the police report, it has to go up to a board and they have to discuss that and, in the meantime, you are at risk. In the meantime the children are starving" (Head of government support services agency).

Social service agencies provide meals, counselling, skills training, grants, help securing employment and housing, transportation and sometimes continued visits to help women transition from violent relationships and to help them cope. While there is a range of services, more outreach and confidential counselling through community-based drop-in centres are needed. Service providers also suggest that:

"More can be done or should be done at the shelters to assist the victims, to empower them, to give them the skills in order to cope when they go back outside because that's another major issue when they go back. Nine out of ten times they go back to the same situation and it's just like a cycle" (Hotline manager).

Survivors themselves do not always feel well looked after in the shelters. As one explained:

"Most of the time it is people volunteering to just do something because they feel they doing something good. It is a good cause, but they

come with their own biases and own problems and their own everything, so they not treating people humanly. I see children being abused because it may have orphans there and the adults are beating up children and, most of the time, the matron lock up in the office or in her room or whatever and it is just like, survive, do what they say is the rules, it have different days you have to assist with cooking the food for everybody or whatever, and that is it" (African-Trinidadian, 43 years old, tertiary school educated).

Service providers also call for adequate training and constant re-training for police officers and for national sensitization on VAW. As one key informant highlighted:

"If, for instance, we go on television and we have a conversation around domestic violence, and have a hotline, there are calls, constant calls" (Violence survivor programme service provider).

Survivors also experienced non-partner violence from employers or from situations where they were raped at parties, going to or from work or at home by burglars. In a story which speaks to multiple vulnerabilities, from domestic violence to burglary and rape, one survivor described herself after a break-in, highlighting the difficulties of surviving several kinds of trauma while maintaining responsibility for family, even after escaping IPV:

"I did everything for myself after, we went counselling through National Family Services and I continued to go after that because I had gone to counselling previously in Families in Action when I had post-partum depression with my daughter. I was able to reconnect with them 'cause they had a file on me already so I did counselling at Families in Action against domestic violence. I did counselling as well in National Family Services. I even took my sons. I did counselling in Victim and Witness Support Unit as well and my sons and my daughter did counselling in Rape Crisis after the break in. I got raped so I had to do counselling there. I do counselling all over the place, but to say anybody was there holding my hand, no. After the break in, a week after my mother was, like, 'Ah well, life has to go back to normal.' So, I picked up my children cause I stayed by her for that

week, I picked up my children and I went back home and I slept on the same bed everything happen on and I lived for the first month. I have blank spots where I can't remember anything" (African-mixed race Trinidadian, 35 years old, secondary school educated).

Interventions by Police

Interventions by police may be helpful or unsatisfactory. For example, one survivor said:

"I went to the police station at one time and the police officer is the one who said to apply for a restraining order, but when you apply for the restraining order, apply for custody and maintenance one time because in most cases when you apply for a restraining order they react, right, so they may want to take away the children, not that they really want the children, but just to spite you they would want to do it so based on his advice, I just went ahead and do it" (Afro-Trinidadian, 43 years old, tertiary school educated).

Police also follow up on threats and come to speak to men, but women remain afraid that after the police leave there may be acts of revenge for applying for the protection order or for making the report. Interestingly, a number of women suggested that they had hoped the police would suggest counselling, but they didn't.

As one woman said:

"They just asked me what I wanted to do, so I told them that I did not want him to find out really, just do something to put in place in case anything happened, but they did not really do anything to see if I needed any help or otherwise or any counselling. I was expecting them to be a little bit more, but they were just normal and that was it, there was no sort of conversation, nothing like that" (Mixed-race Trinidadian, 32 years old, secondary school educated).

As well, sometimes police are also both survivors and perpetrators. Police can also get engaged in supporting friends and family who are perpetrators by warning them that their wives are trying to make a case against them. One survivor detailed:

"All the places I would have turned to looking for assistance, it was not really forthcoming;

he had a lot of contacts and links and friends, including police and detectives who you would think supposed to be doing one thing, but then they are doing something else and they the same people I would have to run to and tell them. You don't know, there had a time I could have gone to CID and before I even left he would have known I was there. I have no trust in the system" (African-Trinidadian, 43 years old, tertiary school educated).

Police response can be very good, as police will contact shelters, direct women to a Justice of the Peace and accompany women to their homes to get their things to take with them. They can also be seen as "supportive, calm, compassionate and sensitive" as well as "non-judgemental" in how they assist women. However, survivors spoke about difficulties in terms of enforcing protection and maintenance orders. One woman complained:

"I had to beg the police to go and serve him and give them a picture of him and all kind of rubbish till eventually he got serve" (African-mixed race Trinidadian, 35 years old, secondary school educated).

A number of women spoke about not feeling "more or less safe going to the police." Police may ask or say:

"So what have you done, how have you contributed, you must have done something to cause this, you sure it wasn't your mouth, you know women, your mouth always get you into trouble, so I think it's an issue because they never really take you seriously and it is sad because if a woman reach to the point where she goes for help, she would expect that she would get help and not be judged" (Afro-Trinidadian, 43 years old, tertiary school educated).

It seems that police also get exasperated when women complain and then return to the relationship. Sometimes, said one survivor:

"Three, four, several reports and you running up and down, then you make back up and, eventually, one day, the police go hear you dead and say, "Oh God, you know this woman make several report plenty time and we wasn't really taking she on" (Afro-Trinidadian, 50 years old, secondary school educated).

Another related:

“One time he had me chained to the bed, I call them, they come, the police woman, he lied and say he didn't have me chained to bed, I showed them and they left me there and they left. They didn't say, well, we'll carry you somewhere where you could be safe, they left me in the home, they left me in the house with the man so when they left I could have died” (Mixed-race Trinidadian, 44 years old, secondary school educated).

From a slightly different perspective, service providers felt that the police need better training on the Domestic Violence Act because “they don't really know much about it.” Relatedly, some key informants agreed that:

“The biggest problem has been the fact they have the option of running a criminal investigation alongside civil domestic violence procedure and they don't. If someone is beaten up, charge him with assault and then run that track together with the protection order because the problem with the protection order is it is just a piece of paper” (Family Court official).

The risk of that piece of paper is that women are also afraid that protection orders can exacerbate their vulnerability to violence by provoking men's anger.

Finally, survivors tended to prefer to call the station, rather than to go to it. As one described:

“He turn and tell me, ‘you playing you like police station’, but I didn't used to really go much, more call them and they used to come sometime if they right in the area so once they in the area and I call and they ain't staying long to reach. I used to call them and they come when I called them” (Afro-Trinidadian, 50 years old, secondary school educated).

Women's mixed experiences with the police and the potential for victim blame was cited as one of the reasons why many women do not report abuse or rape by partners.

Men's experiences with police also speak to a process that doesn't seem to be able to help end a cycle of violence. One man related:

“When she did gone with the fella, boy, I come home, and me and she fall out and thing. And I beat she up. She gone and she take out a restraining order for me. When she take out the restraining order and they bring the paper, the

evening when she come home, I beat she up. And they come and they lock me up. I get 16 months; I do that. They say the least that does really be is two years, nah boy; but how we come and have a youth together, they give me 16 months. I come and I do out that. As I come out, I maybe stay about three months out here, and I get lock up again” (Indian-Chinese mixed Trinidadian, 31 years old, PH taxi driver).

Highlighting the extent and intractability of the violence, another described:

“Sometimes she calling the police for me. Every day, the police locking me up. Every day, the police putting me in Marabella station. In the evening, they let me go. Sometimes they keep me for two, three days. Sometimes they call in she, and they leave me and she to talk. When they leave me and she, all in the station me and she fighting. And the police does say look lock him up...So it was violent and me didn't like it, honest to God” (Afro-Trinidadian, 28 years old, unemployed welder).

Interventions with Courts

It is clear that restraining orders do not necessarily work because men can still harass, threaten and stalk women, even kill them when there is a restraining order. Nonetheless, women still turn to them as a form of protection, particularly when abuse gets “really, really bad.” One survivor explained:

“Well, the thing about it is, I got my restraining order and I fled and I came to Tobago where I was safe because I didn't trust being in Trinidad, fearing all the stuff, you know. Women may have taken out restraining orders and the man kill them and that kind of thing so because I fled, I felt comfort. I felt safe with my family being around because I never thought he would come over here and try to come by my parents to do me something, so I felt safe that way” (Afro-Trinidadian, 43 years old, tertiary school educated).

A key informant suggested that:

“Court has become heavily oversubscribed and the workload that court was initially designed to shoulder has increased exponentially without an increase in staffing. The initial cadre of

trained judges and staff have long since left and, in my view, there has been a difficulty with attracting persons who have the right training, inclination and philosophy to man that court, so that the philosophy that one would expect to inform a Family Court isn't there" (Domestic violence policy advocate).

Survivors and service providers noted that judges may advise women to go back home if their husbands appear repentant. Women have to turn to lawyers, increasing the constraints on women across classes using the courts. As a survivor pointed out:

"I lost the case because that first time the judge ask me to come back home, which I didn't want, but my husband say, 'yeah, yeah, he want me to come home', he say how nice life will be. I was in the shelter already and I didn't get any lawyer yet, but the second time, I get a lawyer so I won the case so I got the children custody and a restraining order for one year" (Afro-Trinidadian, 28 years old, unemployed welder).

In contrast, key informants also observed:

"Men never disputed that they perpetrated violence against women, their wives or their partners. Domestic violence is not 'I did not do it', it's 'I did it, but....' or 'I did not do it that much' or 'but I had good cause' are good examples of male entitlement, and the socialization really was very strong between both women and men as a backdrop to understanding violence against women" (NGO leader).

Courts have supported survivors by making men move out of the house. However, for others, even repeated protection orders didn't help. One survivor described:

"I thought it would help, but it didn't. The protection order just is for him just to keep away from me but he wasn't keeping away and he wasn't stopping the things he was doing, it was getting more and more and more" (Indo-Trinidadian, 67 years old, primary school educated).

For others, delays in court processes due to factors such as absent magistrates, police or forensic report issues or women's need to retain lawyers were seen as sources of impoverishment and disappointment; work days might need to be missed and money needed to

support their household would have to go towards a lawyer. In the words of one survivor:

"The court system is designed to frustrate women, and I would go to court and go to court. Half of the time, I don't even know what going on, I have to ask people, 'You could explain to me what going on?' People say, 'Well, it off because the police ain't come, what I go tell yuh, come back again.' And you just sit down there, sometimes you just sit down there until 12 o'clock, until the magistrate decide to call just to tell you, 'Well, okay, the officer not here, summons for the officer, come back so and so.' And, well you go back again, same thing. Some people would just not go, but I want justice, so I am going" (Indo-Tobagonian, 41 years old, secondary school educated).

Connected to this, police and probation officers may encourage women to resolve their conflicts with violent partners or to encourage their children to still build their relationships with their fathers. In these situations, courts become a point of last resort for women seeking to keep perpetrators away. The Family Court is a particularly important site for effectively protecting women from continued violence.

Interventions by Health Services Providers

When women go to health centres or the Accident and Emergency section of hospitals to address injuries, medical staff will record their information, provide medication, complete the tests needed to accompany a police statement and assign them to a ward if necessary. However, they do not recommend or connect survivors to psychiatric services as part of their protocol. Counselling may be accessed or recommended when they are on the ward.

Interventions by Others: Religious Communities, Family, Friends and Co-workers

Religious leaders and communities do not stand out as sources of support for women who wish to or need to leave violent relationships. One woman related:

"Going to church, the pastor encouraged me to go back and, you know, you married, you already married, and you Christian" (Afro-Tobagonian, 57 years old, tertiary school educated).

Religious family members may believe that divorce is wrong and that women should make marriages work. Religious communities may even support the perpetrators, believing that women's improper behaviour caused the violence. In one case, a survivor was not allowed to see her family; when her boss called to ask if they (employer and employee) could go for a drink, though her partner gave her permission, he later beat her, leaving bruises. In pastoral counselling, she was told:

"I'm wrong for going and having a drink, I shouldn't have do that, I am a Christian woman, I shouldn't do those things, the pastor said I look for that" (Indo-Tobagonian, 41 years old, secondary school educated).

A common complaint among survivors was that when they went to pastoral counselling, they would be blamed for everything or the violence would be trivialized, leaving women without hope. As the survivor continued:

"We started getting counselling from different pastors and same thing they would say, 'Yuh know, this is your husband, yuh know a wife should be submissive, yuh know your husband would hit, but that is your husband, anyhow yuh take it, at the end of the day that is your husband' and that's all it boils down to at the end of it" (Indo-Tobagonian, 41 years old, secondary school educated).

Another detailed:

"I went to my pastor and my pastor would have advised me about these men and they get on so when you go and make reports and do all this, and you get police involved, it will cause them to get more violent, so leave it alone. I went to the station still and I made a report and let them know I was attacked, that kind of thing, but I did not press any charges when it comes to rape. I did not want to go through that. I just said that he physically attacked me, I did not want to go through that, so I did not say that far, but I needed the report, I saw that in making the report, it will give me enough to go to the magistrate and probably explain that he constantly harassing me, threatening me, probably get a protection order or something like that" (African-Trinidadian, 43 years old, tertiary school educated).

However, religious leaders can play key roles (when they are willing). For example, one woman described:

"He did not drive straight home like he would normally do, he drove to a beach in Tobago and he started beating me, cuffing me, cuffing me, cuffing me and broke my nose and the only person he really listened to is the pastor, so I called the pastor" (Indo-Tobagonian, 41 years old, secondary school educated).

Women get inconsistent responses when they turn to religious leaders, religious community members, family or friends. For example, families may tell women that "they can pack their things and come home now" or repeatedly send them back to their partners. Women would hide with their children by family until they went back to their partners. Sisters and brothers are particularly important sources of support.

What is interesting is how infrequently families, even supportive ones, turn to service provision or intervention. Families support women while becoming frustrated with them and their abusive partners if the relationships continue. In such cases, both families and survivors are trying to manage without adequate guidance or protocols, which strains relations and adds to survivors' shame, embarrassment and vulnerability.

Family are usually the first persons that women turn to for support. Women also run to their friends, though sometimes that also puts their friends at risk. One survivor related:

"All my friends were afraid for their life. They said listen, they don't want this mad man come by my house and kill me and my family, we have to stay away from this woman, so I had no friends and no family, so it was just the kids and I, we were there alone. It was the hardest and bleakest time of my life, we had no body to turn to, no body to talk to" (Indo-Tobagonian, 41 years old, secondary school educated).

This is extremely common and severely affects women's ability to speak out about the violence they are experiencing. In another instance, a woman who was being beaten was afraid her partner would begin to threaten and even harm her family, for which she would feel responsible and be blamed. She told them

of a terrible beating, but later, out of deep fear, she recanted by telling them she made up the story.

Both women and men still consider IPV to be “man-woman business,” particularly when abuse is repeatedly forgiven. As one man asserted:

“A woman’s defence is her mouth, a man’s defence or method of exerting control is his physicality. So, yes, it is wrong to see anybody getting hurt. But I have been in situations with relatives who were victims or were involved in abusive relationships, and I could have lost my life parting fight and all this bacchanal. And then, the next day you see them hug up, like everything normal. So according to my grandparents, stay out married people business. So, whatever they are doing, they are adults. They are in control of their actions. I might step in trying to save somebody, and might end up getting stab or something. Yes, I don’t agree with it. But it’s very risky and flaky, because you swear to God, after that woman get that licks she done with that man, and then next day you seeing them together. So, if that working out for them, until somebody dies, fine, I wouldn’t really intervene” (African-mixed race Trinidadian, 35 years old, secondary school educated).

For others, workplaces are important spaces for breaking silences about IPV. One survivor indicated “at my workplace I used to tell my friends because if I wasn’t talking I might have been dead all now.” Another survived by talking to co-workers, because “I had to get it out because it was stressing my life out so I had to talk, it’s a shameful thing, but I couldn’t take it” (Indo-Trinidadian, 67 years old, primary school educated).

Her co-workers would protect her by denying she was at work when her abuser came to look for her there. However, as one survivor described:

“I think the first thing is mental support, but family members may be seeing the situation, but they are not really reporting, they are not really understanding it. It takes people who are really experienced, who are educated in the field to present support for victims. I’m talking about follow through. I am talking about if you have a protection order, somebody in contact with me knowing that I am alright. If it is that I have to go to court, I know that somebody is supporting me by attending with me as well. The

systems there are supposed to be supportive.” (African-Trinidadian, 43 years old, tertiary school educated).

Summary

There are a range of successful IPV interventions, for example counselling programmes and shelters run by the state or by NGOs, as well as support for the provision of food, housing and jobs for women attempting to leave violent partnerships. However, in many cases, interventions were either inadequate in terms of not providing fast, frequent, consistent, long enough or holistic enough support, or they reproduced ideologies of male dominance in the family that are one of the relationship factors explaining IPV. Many women spoke of “having nowhere to turn but God for help.”

Survivors and service providers also discussed the limitations of the protection order system, which can be very effective in providing a fast and accessible way to get legal protection from a violent partner. However, protection order violations may lead to court processes that are interminable and beset by delays and the need for a lawyer, and that carry substantial psychological and economic costs. Even when perpetrators are imprisoned for violating a protection order, women continue to live in fear of the day he is released and returns to threaten or stalk them.

Police responses were also inconsistent, sometimes providing women with a sense of safety and protection and other times leaving them with a sense of neglect, blame and trivialization. Police become extremely frustrated by women who repeatedly return to violent relationships and, eventually, tell women, “you go take your licks and then we pick up your body after.” Police also need to be consistently willing to charge perpetrators, rather than advise women to seek protection orders, so that the state can begin criminal processes earlier.

Women do not consider admittance to hospitals as a first point of access for support to leave relationships. Medical protocols in relation to IPV need to be improved and consistently applied. Even when women manage to leave relationships, the harm they experience has long-lasting effects on them and their children, highlighting the importance of community-level programmes that are both preventative and restorative.

A decorative background consisting of a 10x6 grid of circles. Each circle is outlined in a different color, including shades of red, blue, green, and white. The circles are arranged in a regular pattern across the page.

LIFE AFTER VIOLENCE: CONCLUSIONS AND RECOMMENDATIONS

Survivors articulate clear ideas on what non-violent and empowering relationships look like. They describe them as “loving, safe and comfortable, where a woman can be herself without fear or criticism;” “positive, something that helps you elevate yourself to reach further in life;” “playful, happy, where you could express yourself openly, if you have to have disagreements you can do so with respect and understanding and, even if you don’t agree, it does not mean that I would not be there for you;” and “not like TV shows, but it should have communication, trust and honesty.”

Common aspirations are for equal rights, freedom and success at the responsibilities of both motherhood and employment. Women leave abusive relationships and start careers, pursue degrees and support their children’s pursuit of degrees, save their earnings, buy land and build a house and have their own vehicle, and even start their own NGOs. Ultimately, they want to consider that they have accomplished something, developed new skills and confidence and imagine they can do better than before.

For women, a key point of intervention should be focused on the idea that “some women really do not know their value or they actually do believe that he will outgrow the violence or that it’s not that he doesn’t love me, he just dealing with some stuff.”

Service providers and survivors recognize the prevalence of the belief that only physical violence is abuse and agree on the need for public education to help women and men identify all forms of IPV, understand the cycle of violence and value the importance of leaving abusive relationships early. Education towards recognizing, preventing and addressing abuse is a consistent recommendation. Many also suggest school programmes to educate girls about violence and to emphasize that it can start even in new relationships of a few weeks or months if a partner does not want you to leave. As one survivor stated:

“I guess education is the key and having people in authority who are more compassionate towards the situation, understanding that some women are not even allowed to go to class to educate themselves” (African-mixed race Trinidadian, 35 years old, secondary school educated).

Men agree that education is necessary, as one outlined:

“When you look at the court system and the police service, in most cases, you find a lot of

repeat offenders. These same persons doing the same thing over and over. A guy does something, you put him in prison for a few months, he comes out, then she might go back with him or somehow they get back together, and then the whole cycle is repeated again. So, it doesn’t really help per se. It may protect a woman in that particular instance from further harm, or maybe even losing her life, but even after that intervention, somehow she might still find herself with this guy — and it may be a worst-case scenario where she now loses her life. Because, she wasn’t educated about how to deal with the situation like this. So even more important than the legal system, we need that sort of education and counselling to get people minds out of the situation that they in. Cause you could take somebody physically out of harm and somehow they gonna find themselves back there. So, the police is just probably playing cat and mouse with these people, until something really bad happen” (Pentcostal men’s focus group).

Both examples highlight the pervasive perspective that the onus remains on women to leave relationships and to be responsible for their safety rather than on men to not do harm.

For complex reasons, many women end up going back to relationships and homes that are violent, even though interventions of various kinds can help with employment, housing, family counselling and welfare. Many women do not understand or know about the services available. They are also so traumatized that they have difficulty strategizing because of a “sense of being no more than a hunted animal.” Women also experience victim-blame, from family to the police, which prevents them from reporting abuse for months, years or at all. This, along with embarrassment and shame, is among the reasons why many do not seek counselling. Anonymous counselling services, mental health clinics, community-level programmes and support groups for women’s empowerment are repeatedly recommended as ways to help women understand when they are being abused, to celebrate themselves, and to realize that they are worthy of living and can contribute to society.

Survivors and service providers both describe resource gaps. NGOs are resource-strapped and do not have

funds to remind women that they have appointments for counselling or even for court dates, for example. The recession has resulted in reduced donations so that many are struggling to finance staff, training and programmes. They also ask for more counselling spaces and funding for full-time counsellors because the social workers from Family Services are too overloaded to effectively respond to all clients' needs. One survivor described going to one state-supported service provider, where a counsellor interrupted her session to counsel someone else who called on the phone; the survivor felt that any trust in confidentiality was broken. Service providers reflected on how difficult it is to tell clients that they cannot deal with them when they come or call, but only by appointment. In another case, a survivor described:

"In terms of receiving counselling, when we started going to court, the magistrate said for us to go meet a probation officer, that's somewhere up town, when you there, they not there, they never there in the office, you would wait for them and, remember I am a single mother of two, so I can't lose my job sitting down in an office waiting for somebody and so it never happen" (Indo-Tobagonian, 41 years old, secondary school educated).

Shelters in particular cite a need for child psychologists as children wake up screaming in the night and throw tantrums in the day when they remember the violence they have witnessed or experienced. Shelters also do not have the capacity to deal with mentally ill or suicidal clients, so these women have greater difficulty accessing shelters and support.

State resources are also too limited to adequately address IPV. Additionally, though gender focal points are established throughout the ministries, greater coordination is necessary. One survivor indicated:

"Each department helped with different things and what was needed is something to connect all those things cause I found all those things on my own" (African-mixed race Trinidadian, 35 years old, secondary school educated).

Both service providers and survivors recommend more preventative services to help families resolve problems and conflicts without abuse. Common recommendations included the need for far more counselling programmes for men, such as the Office of the Prime Minister's (Gender and Child Affairs)

Masculine Excellence programme, and for male perpetrators such as the Hope Programme. Overall, inadequate financing for safe spaces, shelters, counselling and material and housing support for survivors and programmes for men were key to failures in reducing or addressing IPV.

Men themselves describe programmes as accessible, but point to a stigma in accessing them. They have concerns about confidentiality because men are taught that "you don't go and ask for help because that is a sign of weakness."

One young man described:

"I am like a hard shell. To get soft for me is— that is impossible. Because of my pride, I won't go to seek services. If I were in a situation, I don't see myself opening up to somebody. I see myself just holding it inside and keeping it there for however long. Sometimes I would explode, yes, but not to people; I explode privately. I just don't trust people" (University youth focus group).

Reflecting on the violence they experienced, survivors described that the trauma will be with them "until the day I die" even if they do not let it take over their lives. Service providers agree.

"It's very hard for them to actually reach this space. This space in this room becomes safe for them, but to get to this space creates a lot of anxiety, fear, the amount of threats that come out of that, we always start from scratch. It's like always you're helping them through the coping as opposed to them learning how to manage what's happening with them, they always coping because there is a level of fear that's always around where is the violence. Sometimes clients come and you don't see them for a long time and they come back two, three months down the line and they in the same place you saw them the first time" (Violence survivor programme service provider).

Lawyers and service providers were critical of police who respond to assaults on women by telling the women to pursue civil measures and use the protection order system rather than charging perpetrators using the criminal charge, leaving women "to face their death." Also, when police refuse to take reports or deal with women in a just manner, there are no penalties, leaving women without an effective remedy. One lawyer stated:

“A powerless woman who is already beaten and bleeding simply does not have the resources to access a police complaints authority mechanism. That’s not an effective remedy for women.”

Service providers also agreed on the need for continuing the education of women. As one concluded:

“They get licks and they know they beaten, but do they really understand that domestic violence is a cycle and they are responsible for helping themselves, getting the information and saying, okay, am I prepared to stay in this, am I prepared to move on and, if they prepared to move on, definitely we must have the resources there to assist them” (Domestic violence policy advocate).

Survivors themselves create opportunities for interventions through enrolling in domestic violence workshops run by their religious communities and taking their children with them so that they can develop enough awareness to avoid repeating the cycle of violence. Survivors often start their own groups and NGOs to help women, provide sources of support and confidential spaces for women to “sit, talk, encourage one another, have hope in a second chance, and look for solutions.”

The complexity, multiplicity and severity of forms of IPV stand out in survivor stories. Also significant is how often women and men do not identify IPV when it begins in the form of controlling behaviours. They then find themselves caught in cycles of abuse, fear, harm and forgiveness, or in contexts where they are unable to or not allowed to escape because of economic dependence, potential homelessness, responsibility for children and lack of adequate familial or state support or due to stalking, intimidation and threats to their own lives, their families, their children and even friends and co-workers.

Abusive childhood homes are cause factors for IPV, as they normalize the forms of love and relationships including toxic ones, with which women and men become familiar. It is very clear that experiences of early instability, violence, sexual abuse and lack of care or love create risk of IPV, staying with violent partners or becoming violent as a man. This situation repeats itself in survivors’ own lives affecting children, their school work and their emotions, and potentially creating a pattern for both perpetrators and survivors. This stood out not only in survivor and perpetrator interviews, but

also with key informants working in the field of gender-based violence.

Relationship factors, such as male dominance, economic stress, men’s multiple partners and substance abuse exacerbate women’s vulnerability and victimhood. IPV enacts, affirms and actualizes men’s dominance over women as a contemporary reality, regardless of women’s level of education, their ability to work and earn and income, and their many forms of resistance and agency. Where men had multiple partners, this made women’s ability to make their partners accountable to them for their behaviour even more precarious. This reality occurred even while partners’ controlling behaviours sought to isolate women from other men, for example, in their workplace or neighbourhood or even within families. Familial substance abuse as children and, later, partners’ substance abuse also stood out in survivor stories as a risk factor.

Finally, the sexual violence or rape that accompanies IPV needs greater attention as it is an under-discussed factor in popular understanding of domestic violence.

One of the main focuses of the study was economic insecurity. In the Trinidad and Tobago context, this was important because economic insecurity is likely to increase; it was important to document how either or both women’s and men’s economic dependence affects decision-making and conflict resolution in economically insecure households or ones where one partner is earning more than the other. Interestingly, even when survivors were the breadwinners, they were not exercising control over their earnings. Where they were not primary breadwinners, it was clear that they had great difficulty negotiating safety as well as sufficient access to money for themselves and their children. Fiscal and social mitigation policies must consider the connections between economic insecurity, poverty and IPV — or risk exacerbating it.

Disturbingly, ideologies of male dominance are highly resilient, despite decades of the popularization of the male marginalization thesis in the region. Tolerance for IPV against women in the Caribbean has already been noted as a causative factor (Sutton and Alvarez, 2016). Reproduced through gender socialization, gender-inequitable norms are pervasive, powerful and lie at the heart of women’s vulnerability. This stood out in focus groups with Christian, Muslim and Hindu men, with men’s rights advocates and in interviews with survivors and perpetrators. These norms are mobilized by men

who think that women should be subordinate as a form of respect for men, by women who hold idyllic notions of romantic love and wifely duty and by religious leaders and communities who repeatedly advise and pressure women to stay in violent relationships.

State and NGO service provision and the justice system stand out as the only sites where women can encounter explicitly egalitarian ideals of gender relations and family life, but the majority of women who experience violence do not necessarily access these, and when they do they are not sufficient. Deploying a broad and frontal challenge to still-powerful ideals of male headship and dominance is absolutely necessary and overdue.

Repeatedly, women speak of feeling alone and having nowhere to turn despite a range of available and successful interventions by both the state and NGOs. Women remain at risk even when they leave violent relationships, and there are hardly provisions for their immediate and sustained protection. In many cases, interventions were either inadequate in terms of not providing fast, frequent, consistent, long enough or holistic enough support. The protection order system is far from effective enough, though women continue to see restraining orders as both a point of empowerment and failure for women. Currently, when women report IPV, they are advised by police to seek a protection order, rather than the police charging the perpetrator for a crime under the Domestic Violence Act (2000).

Police responses were inconsistent, sometimes providing women with a sense of safety and protection, and other times leaving them with a sense of neglect, blame and trivialization. Police did not always follow up on reports of domestic violence, particularly when made by phone or when it is out of their jurisdiction. There is also no Victim and Witness Support Unit in Tobago. Regular training of police to implement victim/survivor-centred guidelines to responding to IPV and the establishment of a specialized unit for GBV cases is recommended.

Far greater coordination is needed between magistrates and the court system, prisons and social services, such that survivors are notified and protected when perpetrators breach protection orders, are able to secure bail after an arrest or are released after imprisonment.

Medical protocols regarding IPV are inconsistently known and applied. Overall, the qualitative data should trigger solutions that take these cases seriously on the basis of what specific services would have made

the difference in survivors' lives along the course of their experience, also enabling perpetrators to access support for changing their behaviour. Health services for women remain a particularly important point of contact for assisting survivors to understand and end violence in their lives.

Four key themes were central to data collection: gender ideologies, ideals of love and family, economic insecurity, and the extent to which interventions both empower and fail women. All remain strong causative factors, with a history of family violence and an inability to negotiate dominance and dependence in relationships as factors that create additional risk. Women told stories of being prevented from improving their autonomy through pursuing further education, being pressured out of jobs, staying for the sake of their children's safety and living with continual threats to their bodies and lives. These findings support a 2012 study by the Pan American Health Organization and the Centers for Disease Control and Prevention on violence against women in twelve Latin American and Caribbean countries.

During the fifth session of the Ninth Parliament, the Joint Select Committee on Human Rights, Diversity, the Environment and Sustainable Development met with representatives of the Trinidad and Tobago Police Service and the Ministry of Gender Youth and Child Development to examine the programmes and services that provide support to survivors of domestic violence.

In June 2015, the Joint Select Committee presented its Report³² on its findings to the Parliament. The Report, recognizing the work of state agencies as invaluable, noted:

1. There were insufficient human resources to support the Victim and Witness Support Unit of the Trinidad and Tobago Police Service and the Domestic Violence Unit of the Ministry of Gender Youth and Child Development;
2. There was difficulty in obtaining shelter placement in the night and for families with boys over the age of nine;
3. Additional support is needed for a seamless approach for survivors and to provide a 24/7 sanctuary option for survivors of violence;

³² Available at: <http://www.ttparliament.org/reports/p10-s5-J-20150610-HDES-r1.pdf>

4. There was the need for adequate training of staff to facilitate their appropriate intervention in extremely delicate and sensitive cases; and
5. There were insufficient financial resources to adequately meet the demand for increased support programmes and services of the Trinidad and Tobago Police Service and the Domestic Violence Unit.

To address the problem cited above, the Joint Select Committee made several recommendations, including:

1. Allocation of funding and human resources towards the Domestic Violence Unit should become a priority in the upcoming fiscal year in order that the Unit achieve its mandate and effectively oversee the Central Registry on domestic violence;
2. The Ministry of Gender Youth and Child Development should include in its strategic plan provisions for transitional housing for survivors. Focus should be placed on the Southern Division, given the number of domestic violence cases reported;
3. The creation of a coordinating body in the form of a Committee towards the creation of a domestic violence policy and to provide continuity and consistency in the execution of the policy;
4. More funding on research with a specific focus on tracking survivors of domestic violence to determine the impact on their lives;
5. Provision of additional resources to domestic violence shelters towards the provision of a 24/7 service and the creation of new 24/7 sanctuaries for domestic violence survivors;
6. Development of programmes for survivors of domestic violence to assist their reintroduction to society; and
7. Coordination with other government ministries and state agencies to allow for early referral and access to financial and social services, training and counselling for survivors and their families.

There are many other possible recommendations. Many have already been outlined in the National Strategic Plan on Gender-based and Sexual Violence in Trinidad and Tobago 2016-2020, which is not publicly available and has not been approved or resourced.

Recommendations from earlier reports and studies are listed below.

An earlier study of 800 women by Population Services International Caribbean (2015) recommended that:

1. Younger women be taught networking skills, which could help in their isolation when family members do not provide safety or shelter and their isolation exacerbates their risk of IPV;
2. Positive parenting programmes, which address conflict resolution, anger management and communication skills, should be implemented to end generational cycles of abuse in the lives of both perpetrators and survivors;
3. National and community-based campaigns that challenge the normalization of violence and under-reporting should be undertaken, particularly among youth and children;
4. Information about available services, including hotlines, should be widely promoted because many women and potential networks of support do not know where to begin to seek help; and
5. Standardized operational guidelines for addressing IPV should be developed for employers, teachers, police and medical professionals, with monitoring and evaluation mechanisms that enable improvements to services in response to client needs.

The Equal Opportunity Commission³³ has made the following series of recommendations³⁴ for changes to the Domestic Violence Act (2000):

1. Remove the perpetrator from the home not the victim (Amend Sec. 23(1) and 23(A) of the Domestic Violence Act Chap 45:56 (the DV Act));
2. Police must respond to all complaints (see Sec. 21 of the DV Act);
3. Amend definition of cohabitant to include same-sex relationships (Sec. 3);
4. Police must charge for assaults and other crimes committed in domestic situations (Sec. 25(1)), and for breaches of Protection Order (see Sec. 20);
5. No bail for persons charged with breaches of Protection Order (Sec. 27(1));

33 <http://www.equalopportunity.gov.tt>

34 https://sta.uwi.edu/media/documents/2017/IGDS_EOC_PublicForum24Nov2017_UPDATED_11212017.pdf

6. Provide network of support to persons who have a protection order – observers must have a duty to report (new section);
7. Create intervention for perpetrators threatening to kill (new section);
8. Create inter agency protocols between police, magistrates, prosecutors, social workers and shelters (new section);
9. Create mandatory programmes for survivors and perpetrators (see Sec. 6(1) (c) (VIII)); and
10. Resuscitate an electronic Police Domestic Violence Register (Sec. 21(2))

Additional recommendations regarding amendments to the DV Act and its implementation are:

11. Use the form provided by the Domestic Violence Act to record reports of domestic violence. This thorough form is not used consistently by police and legally needs to be a part of meeting the requirements of a National Domestic Violence Register, with mechanisms to ensure better compliance; and
12. Eliminate the twelve-month requirement to be able to secure a protection order. These must be able to be triggered by one act of violence regardless of how long the parties have been in a relationship. This is particularly important for young women, who have a higher risk of violence, and may be in shorter-term relationships.

A Participatory Baseline Review of Legislative, Policy and Programmatic Action and Multisectoral Responses to Address GBV in Trinidad and Tobago (2015, 89-92) recommended:

1. Prosecutorial responses should be informed by the guidelines already outlined so as to facilitate a more survivor-sensitive approach to the prosecution of GBV cases. The guidelines should be applied at all stages of the prosecution process, including pretrial interventions;
2. Delays in the conduct of trials may not only increase the risk to the survivor of retaliation, but can also deter the survivor from proceeding with prosecution. Acknowledgement of these realities advances the call for law and policy actions which will provide for timely and expeditious legal proceedings and encourage fast-tracking of cases of gender-based violence;

3. The discretion to withdraw a case for want of evidence is a powerful prosecutorial tool that should be informed by clearly defined guidelines. Written guidelines should be established to clearly define the circumstances that may warrant the withdrawal of cases and the steps that ought to be followed in those circumstances;
4. Social services across the board are insufficiently resourced and in desperate need of strengthening. Capacity-building of the social service sector is a necessary first step in bolstering the much-needed support that survivors require. Allocation of resources to the state agencies and NGO entities that provide critical services and programmes for survivors of GBV needs to be seriously reviewed and attributed more significance;
5. Referrals to counselling and other psychosocial services should occur as soon as possible after the traumatic incident so as to facilitate the necessary trust between the counsellor and the survivor. Last minute referrals, just before commencement of the court process, compromise the readiness of the survivor for the legal proceedings; and
6. Legal aid is a critical component of a victim's access to, and understanding of, the legal system and the remedies to which they are entitled. Legal representation has proven to increase the likelihood of a positive outcome for the survivor in the legal process. Enhanced access to legal aid for survivors of GBV is urgently needed and should be granted almost as of right, given the context of the violence and the state's commitment to ending GBV.

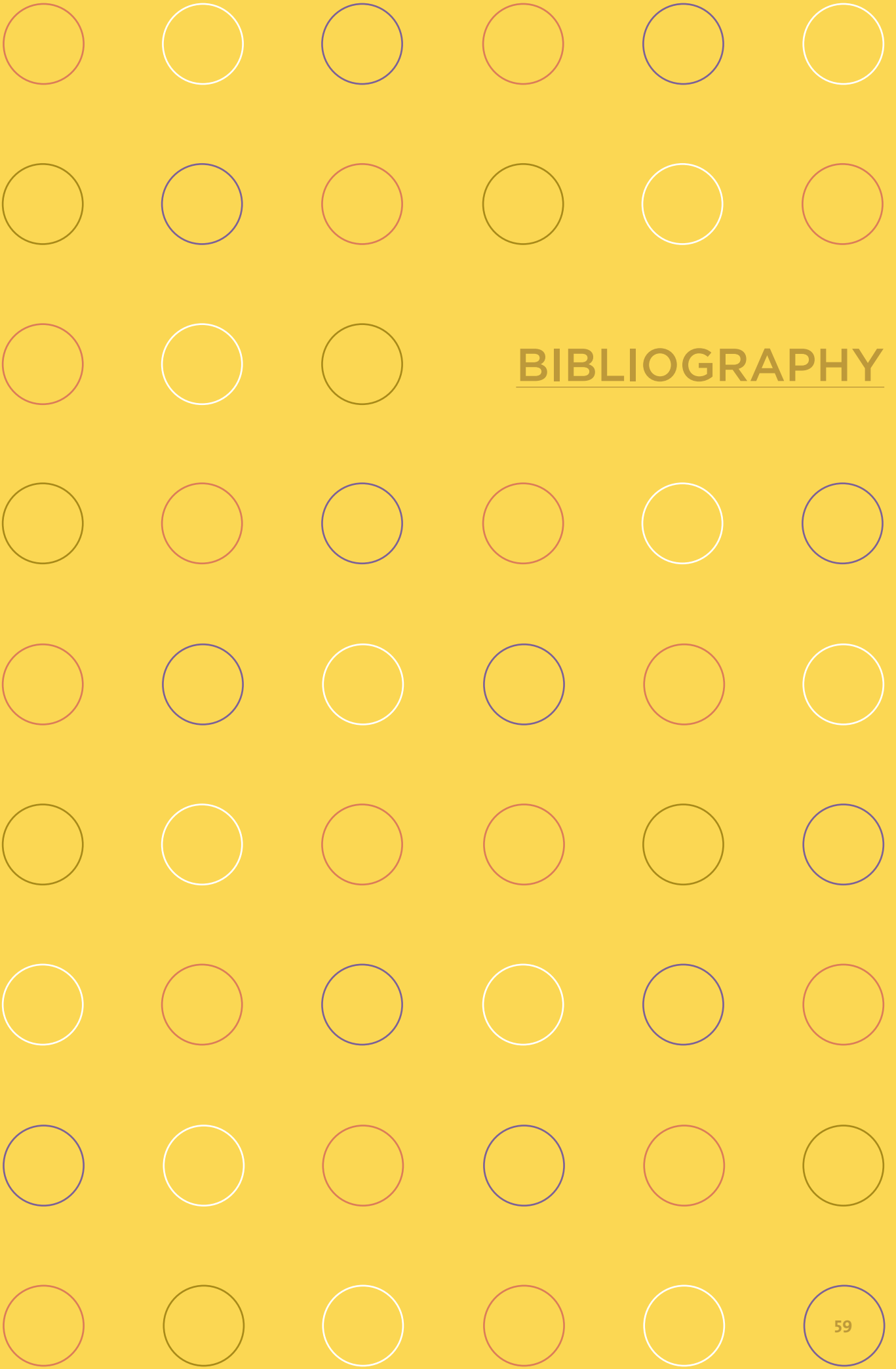
Recommendations for Counselling Programmes for Men: The "Partnership for Peace" Programme or an alternative should be recommended in Trinidad and Tobago so that male participants understand that violence is a choice; that they are responsible and accountable for their behaviours; learn skills for addressing conflict and stress; examine the origins of their violent behaviour and seek to change; and understand the costs of their violence to themselves, their partners and society. Among other points, a review of the programme in Grenada (Amuleru-Marshall 2013, 102-103) recommended:

1. Greater focus on skills development, relapse prevention, and strategies for anger management and conflict resolution;

2. Facilitate development of a personal development plan that can be shared in the court process as an indicator of progress;
3. Consider a programme to specifically address substance abuse; and
4. Develop programmes for long term follow-up and for involving partners in a parallel programme where appropriate.

Taking into consideration the challenges highlighted and previous recommendations identified and outlined above, this study recommends the following:

1. The approval and full costing of the National Strategic Plan on Gender-based and Sexual Violence in Trinidad and Tobago 2016-2020 (GBV NSAP);
2. Establish a monitoring committee for the implementation of the GBV NSAP in order to ensure that VAW is linked to broader issues of citizen security and to ensure that NSAP programmes are comprehensively implemented;
3. Develop and implement standard operating protocols for essential services;
4. Ensure concerted advocacy and communications efforts on healthy relationships and sustainable conflict resolution techniques;
5. Establish a working group with representatives from the judiciary, police, prisons and social services to develop a monitoring and referral system to ensure protection orders are enforced; and
6. Re-institute the Partnership for Peace Batters Intervention Programme.



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ANNEX A: METHODOLOGY

Methods

The study used a qualitative approach to collect and analyse the data. This approach allows for the exploration of details about experiences, emotions, preferences and opinions, motivations and gender dynamics. As a complementary to the quantitative study, it will explain how particular factors interact and why. Two qualitative methods were used in this study: interviews and focus groups.

Instruments

The study used interviews and focus groups³⁵ to collect data on experiences, feelings, beliefs and opinions from perpetrators and survivors of IPV; from key stakeholders responsible for policy, advocacy, prevention, intervention and adjudication related to IPV; and from specific demographic populations and economic participation and, finally, experience of childhood sexuality.

³⁵ See Annex B for the interview and focus group study-specific guides, and recruitment letters for survivor, perpetrator and other key stakeholder interviews.

Study Population and Characteristics

The study population included survivors, perpetrators, service providers, state agents, university students, police, magistrates, religious leaders, women's rights activists, women's professional associations and men's groups.

122 persons provided the main data through thirty-eight interviews and 14 focus groups over the period of February to September 2017.³⁶

Fifteen interviews were conducted with women who are survivors of IPV. These women represented a national convenience sample of English-speakers who were referred anonymously. They were invited to participate by officials from four organizations in northwest, southeast and southwest Trinidad and western Tobago that provide them with services or advocacy. Table A1 shows the demographic data for both survivor and perpetrator interviewees.

³⁶ See tables below.

TABLE A1
Interviews Conducted with Survivors of IPV

SURVIVOR INTERVIEWS							
Seq	Date	Age	Ethnic Self-Identification	Religious Self-Identification	Education	Residence	Interview Site
sio1	16 March	44	Mixed	Christian	Secondary	San Fernando	CADV San Fernando
sio2	22 March	49	Asian migrant	Muslim	N/A	Gran Couva	CADV San Fernando
sio3	27 March	57	African	Pentecostal	Tertiary	Bon Accord	Establishment selected by interviewee
sio4	27 March	43	African	Pentecostal	Tertiary	Lowlands	Establishment selected by interviewee
sio5	27 March	41	East Indian	Christian	Secondary	Scarborough	Establishment selected by interviewee
sio6	29 March	42	Indian	Independent Baptist	Primary	Moruga	CADV San Fernando
sio7	29 March	32	Mixed	Catholic	Secondary	Princes Town	CADV San Fernando
sio8	30 March	42	African	African Spirituality	Secondary	Maraval	CAISO House Port of Spain
sio9	6 April	43	African	Christian	Tertiary	Chaguanas	CAISO House Port of Spain
sio	24 April	67	Indian	Christian (grew up Muslim)	Primary	St. Helena	UWI St. Augustine

Seq	Date	Age	Ethnic Self-Identification	Religious Self-Identification	Education	Residence	Interview Site
si11	2 May	35	African mixed	Nazarene	Secondary	Diego Martin	CAISO House Port of Spain
si12	8 May	49	Mixed	Christian	Primary Vocational	St. Helena	UWI St. Augustine
si13	10 May	29	East Indian/Mixed	Hindu	Tertiary	California	Company Pt. Lisas
si14	20 May	50	African	Adventist	Secondary	Guayaguayare	Mayaro-Guayaguayare Community School
si15	20 May	42	African	Pentecostal	Secondary	Mayaro	Mayaro-Guayaguayare Community School

Nineteen key informants who are responsible for IPV-related policymaking, advocacy, prevention and interventions were interviewed. Table A2 shows the key informant interviews with the roles they occupied.

TABLE A2
Key Informants Interview

INTERVIEWS WITH KEY INFORMANTS				
Seq	Date	Role	Participants	Site
ki01-02	18 March	violence survivor programme clinician-administrators	2 W	UWI St. Augustine
ki03	20 March	leading domestic violence policy advocate and state human rights commissioner	1 W	Law office Port of Spain
ki04	10 April	clinician and leading male anti-violence programmer	1 M	Clinical office Port of Spain
ki05	11 April	rural women's network coordinator	1 W	UWI St. Augustine
ki06	18 April	manager, state-supported national abuse/domestic violence referral service	1 W	UWI St. Augustine
ki07	18 April	hotline manager	1 W	UWI St. Augustine
ki02	24 April	clinician, violence survivor counselling service	1 W	NGO office San Fernando
ki08	2 May	CBO placing women in shelters	1 W	NGO office Port of Spain
ki09	9 May	policy reform advocate (NGO leader, lawyer, UN official)	1 W	UWI St. Augustine
ki10	10 May	domestic violence survivors' advocacy organization	1 W	NGO office Chaguanas
ki11	10 May	domestic violence shelter manager	1 W	UWI St. Augustine
ki12	17 May	family court judge	1 W	Family Court Port of Spain
ki13	18 May	nurse, urban teaching hospital	1 W	Health facility San Fernando
ki14	18 May	doctor, urban teaching hospital	1 W	Health facility San Fernando
ki15	25 May	school system psychosocial support professional	1 W	Government office, Port of Spain
ki16	27 May	government gender affairs unit professional	1 W	Government office, Port of Spain
ki19	8 June	head, government family support services unit	1 W	Government office, Tunapuna
KEY: Ki – Key informant W – Women M – Men				

Four interviews were conducted with men who acknowledged being past perpetrators of violence against women who were their intimate partners.

These men were referred by a single community organization. Table A3 summarizes the demographic description for the perpetrator interviews.

TABLE A3
Demographics – Male Perpetrators

MALE PERPETRATOR INTERVIEWS							
Seq	Date	Age	Ethnic Self-Identification	Religious Self-Identification	Employment	Residence	Interview Site
pio1	9 August	31	Indian-Chinese mix	Hindu	PH driver	Marabella	Toco Foundation Marabella
pio2	9 August	28	African	Seventh Day Adventist	Unemployed welder (recent releasee)	Marabella	Toco Foundation Marabella
pio3	9 August	N/A	Douglá	Pentecostal	Fisherman	Marabella	Toco Foundation Marabella
pio4	11 August	37	African	seeking Islam	Driver	San Juan	UWI St. Augustine

KEY:
pi – perpetrator interview

A total of 84 persons participated in focus groups. They came from a range of backgrounds, including the judicial system, professional associations, political parties, tertiary education students, cultural

groups and community groups. Table A4 describes characteristics for the participants for the focus groups. For confidentiality purposes, participant's names are not disclosed.

TABLE A4
Focus Group Dataset

FOCUS GROUP DATASET				
Seq	Date	Focus/Participant Roles	Participants	Site
fgo1	22 February	Methodology and recruitment (GBV research manager, managers of shelter/non-shelter-based intervention programmes, ethno-religious women's voluntary organization leader)	4 W	UWI St. Augustine
fgo2	13 May	Single Fathers Association of Trinidad and Tobago	7 M	Flaming Word Ministry, Chaguanas
fgo3	13 June	Pentecostal men's ministry	3 M	Warriors Assembly
fgo4	13 June	Female judicial officers	8 W	Caribbean Court of Justice, Port of Spain
fgo5	23 June	Female executives	9 W	Powerful Ladies of Trinidad and Tobago office Port of Spain
fgo6	30 June	Campus youth	2 M, 3 W	UWI St. Augustine
fgo7	1 July	Youth performance company	4 M, 3 W	2 Cents Movement office, Trincity

Seq	Date	Focus/Participant Roles	Participants	Site
fg08	17 July	Youth	2 M, 3 W	Citizen Security Programme, Tobago
fg09	14 August	Women executives	5 W	UWI St. Augustine
fg10	28 August	Political party female office holders	9 W	Constituency office Couva
fg11	29 August	Family Court officers (intake, field, policy, social work)	1 M, 5 W	Family Court Port of Spain
fg12	30 August	Women active in political party	5 W	UWI St. Augustine
fg13	12 September	Hindu male temple leaders	5 M	Personal residence Barackpore
fg14	20 September	Muslim men of faith	6 M	Marabella

Fieldwork

Formative process

The research process included formative and reflective steps to strengthen its relevance, feasibility and acceptability. Semi-structured interviews and focus groups were conducted with local IPV intervention and advocacy leaders and with leaders in past and current UN Women-guided research and interventions on GBV in order to validate the localized focus proposed for the qualitative research, to assess recruitment feasibility for IPV survivors and perpetrators and to guide ethical protocols, interviewing techniques and instrumentation. Participants in these interviews enrolled in recruiting women survivors of IPV, providing facilities for their interviews and identifying key stakeholders to interview.

Prior to field interviewing, the research team completed training with a leading regional GBV field researcher, focused on interviewing skills and techniques, confidentiality, security protection and attentiveness with subjects. The training process developed initial drafts of interview guides, which were reviewed in the formative sessions above.

Pilot testing

Pilot testing was conducted with GBV researchers, intervention leaders and advocates (including entities responsible for the prevalence study and past UN Women interventions) that guided and tested research focus and strategy, recruitment feasibility for survivors, interviewing techniques and instrumentation. Participants in those activities enrolled in providing interview facilities and recruiting survivors.

Interviews

Interviews with survivors³⁷ and perpetrators³⁸ were face-to-face, were semi-structured, with questions flexibly sequenced, and were all conducted by the same interviewer, who was of the same sex. Interviewers were selected for empathy and non-judgementalism. Direct interviewing was used for all topics, including childhood sexuality, which ended question sets. Survivors and perpetrators were each given a TT\$500 cash honorarium on completion of the interview. None of them declined or cut short interviews. Key informant³⁹ interviews were face-to-face, highly structured and conducted by different interviewers. Interviews took place in private rooms in a range of settings. One (with expert stakeholders) took place by Skype. Half of the interviews with survivors were held at venues where IPV counselling or support is delivered.

Fifteen semi-structured in-depth interviews were conducted with women survivors of IPV. These women were convened by four organizations in northwest, southeast and southwest Trinidad and western Tobago that provide services or advocacy.

Twenty-three key informant interviews were conducted with key stakeholders who are involved in IPV-related policymaking; advocacy; prevention; intervention; adjudication and men who acknowledged being a past perpetrator of violence against women who were their intimate partners. These were referred by a single community organization.

37 Referred to as “si” in the study analysis.

38 Referred to as “pi” in the study analysis.

39 Referred to as “ki” in the study analysis.

Focus Groups

Focus groups were driven by customized question sets. Similar questions were used for each of the four clusters of groups above. Groups ranged in size from two (in the case of some key stakeholder groups) to nine persons. Single-sex groups were conducted by an interviewer of the same sex. However, youth focus groups, which were all mixed-sex, were conducted by the same male interviewer. Stakeholder groups involved one or more interviewer. Of the 64 participants in demographic focus groups, 39 per cent were men.

Sixteen focus groups were conducted:

- Four with key stakeholders, one of these with officers of the Family Court and another with IPV intervention leaders in the Eastern Caribbean;
- Five with women, three organized by professional associations and two by political parties;
- Four with men, one organized by a men's rights group and the others with Hindu, Muslim and Pentecostal Christian men of faith; and
- Three with mixed-sex groups of young people (47 per cent of them men), recruited through a tertiary institution and a cultural organization in Trinidad and a social programme in Tobago with which they are affiliated.

The average stakeholder interview lasted half an hour, with two ranging over an hour. Most survivor interviews ranged from one to two hours; perpetrator interviews averaged three-quarters of an hour. Focus groups typically lasted an hour and a quarter, with the initial, formative one running over three hours.

Data Analysis

Except in two cases (one where the interviewee declined and the other where equipment was not available), interviews were recorded for accuracy, then transcribed for textual analysis.

Thematic analysis of interview data was undertaken using Atlas TI software. Themes and sub-themes were generated collectively by the research leader and interview team prior to the start of data coding in response to the three key research questions and to patterns and meanings that emerged during the interview process. Additional sub-themes were added as interviewers coded their interviews. Themes

included ideological and economic contexts for IPV, gender ideologies, economic insecurity, experiences of violence and interventions with shelters, police, religion and social services. The ecological model was used to present the thematic data using four levels: individual, relationship, community and society.

Ethical Considerations

This study used recommendations from the World Health Organization⁴⁰ report 'Putting Women's Safety First: Ethical and Safety Recommendations for Research on Domestic Violence against Women', as a best practice global tool to ensure that the ethical and safety issues were met. Confidentiality, trauma and safety were key concerns in the study design. The perpetrators and survivors were almost all anonymous to their interviewers, and able to withhold their names throughout their participation.

Following interviewer ethical disclosure to participants, through written forms, reviewed orally, consent to be interviewed was obtained from participants orally, on the interview recording.⁴¹ At the end of each interview and focus group, recordings were kept safely with limited access. The interviewees were reassured that digital recordings of their voices would be deleted following transcription to text. Focus group participants were instructed to withhold names and were assigned a pseudonym. Stakeholders' names are not used in data presentation and would be referred to either key informant or stakeholders; reference is made only to participants' functional roles in relation to IPV. No central record exists of participants' names.

A gender-sensitive, trauma-informed clinical practice was kept on retainer to provide crisis counselling within 24 hours at the study's referral for survivors, perpetrators or interviewers if interview material was triggering. It was also engaged to conduct a group debrief with the research team. Additionally, providers who recruited half of the survivors committed to providing pre- and post-counselling as needed.

⁴⁰ World Health Organization. 2001. 'Putting Women's Safety First: Ethical and Safety Recommendations for Research on Domestic Violence against Women'. Geneva.

⁴¹ See Annex B for consent form used in the study.

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ANNEX B:
STUDY'S INTERVIEW AND
FOCUS GROUPS GUIDES

IPV Survivors

- **Recruitment**
- **Ethical Consent**
- **Interview Guide**

Recruitment

10 March 2017

Good day,

We're seeking your help in better understanding the lives of women like you!

Help us better understand women's lives and relationships with men, so we can improve policies and resources for dealing with conflict in relationships.

Our "Qualitative Study on Women and Relationships," funded by UN Women, is a Trinidad and Tobago research project for which Dr. Gabrielle Hosein is responsible. The study is being guided by [Referrer] and other groups who work with women who've experienced violence. It is being supported by the Institute for Gender and Development Studies at The University of the West Indies, St. Augustine campus.

We want to talk to different kinds of women who have been in relationships with men who have hurt them or who have threatened to do so. We want to know what women think about the violence they've experienced and how they feel about their relationships.

We want to understand the role economic issues play in interpersonal conflict. And we want to get better insights into how local interventions to address or prevent domestic violence are working or not working.

Our interview will last between an hour and an hour and a half. It will be conducted by a sensitive female researcher and will take place in private at a location and time you agree to. We will not keep a record of your name. The interview will be recorded so we capture what you say accurately. Only the researchers will have access to the recording. When we share any analysis, we will talk about patterns, not personal details.

Some questions we ask will be about difficult memories and experiences. If you feel uncomfortable, you can change your mind. [Referrer] will support you if you experience distress.

We will offer you an honorarium for your time when you complete the interview. [Referrer] will contact you later if you wish, to invite you to a forum where we share the patterns we have heard and what people have told us is needed.

Please let [Referrer] know if you are interested in participating. We will answer any questions you have before we begin.

Sincerely,

[Study Lead Contact]

Ethical Consent

Thank you for agreeing to be interviewed. We want to be sure that you understand the purpose of the study and your role before you decide if you want to be in it. Please ask me to explain any words or information you may not fully understand. You can keep this copy of this document if you would like.

Why we would like to talk to you

We are interested in your help in better understanding women's lives, the relationships between men and women, and how to improve resources in Trinidad and Tobago for dealing with conflict in relationships. Our interview will ask questions that allow us better insight into the life experiences, views and needs of women who have been in relationships in which their male partner threatened to hurt them or did. We see you as someone whose recommendations we want to listen to.

Who is responsible for the study?

This is a research project being done in Trinidad and Tobago, for which Dr. Gabrielle Hosein is primarily responsible. It is paid for by a contract with UN Women. UN Women and other bodies are supporting a number of related research projects taking place in the Caribbean and internationally to better understand women's lives and experiences of violence. Our Trinidad and Tobago study is being guided and supported by several groups who work with women who've experienced conflict, and by the University of the West Indies Institute for Gender and Development Studies at St. Augustine.

Privacy

The purpose of our interview today is so that we can make decision-makers aware of the kinds of experiences people like you have had, and so that we can compare your experiences carefully with those of others. Your name and contact information will not be written, recorded or attached on anything you share with us today. They will not be shared with the research team. Only the researchers will have access to what you share in today's interview. When we present findings we will focus on patterns and not individual life details, and no names will be used. If you would like to, the provider who referred you can contact you again when the study is completed and invite you to attend an event where we can share what we found with a group of persons who assisted us in the study.

Discomfort

During the interview, I will ask you questions about various aspects of your life experience. Some of the questions may touch on difficult memories and experiences and sensitive subjects. If at any moment you feel like you want to stop the interview or skip a question, please let me know. You do not have to respond to any question, and you can stop the interview at any time if you decide you no longer wish to participate. If you would like to speak to a counsellor or someone else, the provider who referred you has agreed to assist you. I can also connect you with a counsellor.

Recording, Honorarium and Consent

I would like your permission to record the interview so that we get everything you say accurately. I will transcribe the recording and destroy it. Try not to use real names on the recording. Our interview should last between an hour and an hour and a half. When we complete the interview, I will offer you an honorarium in appreciation of your participation, and I will ask you to confirm on the recording that you received it. When I begin recording I will ask you to state that you understand the information I have just given you, and that you consent to the interview. If there is anything that you don't understand, please ask me now.

If you have any concerns or questions related to the study after I leave you, you can use the contact information below:

Name of Study: Qualitative Study on Women and Relationships
Sponsor: United Nations Entity for Gender Equality and the Empowerment of Women
Principal Investigator: [Study Lead Contact]
Local contact: [Contact]

Interview Guide

I. DEMOGRAPHIC DATA

1. Age
2. City/town/village of residence (“Where do you live”)
3. Ethnic/race self-identification (Open-ended question)
4. Religion
5. Schooling
6. Current work/employment
7. Current relationship status
8. Children: number, ages, fathers

II. SELF-IMAGE

9. Tell me about yourself. (“What kind of person would you describe yourself as?”)
10. As a woman, what are some of the things that are important to you?
11. What do you think the relationship between a man and a woman should be?
12. What sort of rules and expectations does society have for women and men?
How do you feel about that? How do these rules affect your life?

III. ECONOMIC AUTONOMY

13. Do you work? What type of work do you do?
14. Can you tell me about the history of your working life? Has your experience with working changed over time?
15. Have you experienced any changes in your economic condition, or the economic situation in your household, in the not too distant past? How; and how did things in your life change as a result?
16. What is your vision for yourself in terms of money and work? Have you achieved any of those goals; why (not)?
What have been the challenges?

IV. CHILDHOOD AND FAMILY VIOLENCE

17. When you look back on your childhood, what was it like in the family or home you lived in?
18. How were conflicts settled?
19. Tell me about the relationships among the adults (include experiences of quarrels, substance use, violence)? Between adults and children (include experiences of discipline, fairness, violence, CSA)? Among the children (experiences of bullying, incest)?
20. What was the community you lived in like (poverty? how close-knit? crime? violence?)?

V. IPV

21. Tell me about the relationship^{42*} during which you sought help most recently.
22. Tell me about your feelings for your partner*? Did they change over time?
23. Why/how did you get into the relationship?
24. What kind of a person would you describe your partner* as? Tell me about his feelings for you?
25. What type of relationship were you in (marriage/co-habiting/visiting/other)?
26. Ask demographic questions 1-8 for partner (If relationship was visiting, ask residence (2) at the time of the relationship. Ask employment (6) at time of relationship. Ask women any children were with (8).)
27. Childhood and childhood violence experiences of partner* (§V questions)
28. Please take a few minutes to look at this chart. It describes a range of things, in addition to physical violence, that women can experience in relationships. Please share with me your history of physical violence or any of these kinds of experiences with partners. As a shorthand, I'm going to call anything on this chart "violence."
29. Can we talk about the most recent time violence occurred with your last partner*? (triggers, actions, responses? • elicit justifications, blame/excuses, meanings • explore any links raised between violence and gender • explore intervention sought)
30. Were there other experiences of violence? If so, can we talk a bit about the first time (same probes as 29)?
31. Were there any other experiences that were worse than those two? Could we talk, finally, on this topic, about the worst experience you had (same probes as 27)?
32. How did things work in the relationship with regard to money and spending?
33. Tell me about your closest relationships, and how they were affected by your partner. Did any of them share advice or thoughts with you about your relationship?
34. (If applicable) Can you tell me why you stayed/returned after the experience you described; and how did you manage to remain in the relationship?
35. (If applicable) Can you share what made you decide to leave your partner*?
36. What did it mean for you to be in a relationship?
37. Were you ever violent or aggressive towards your partner (explore unequal vulnerability to injury)?

VI. REPORTING AND INTERVENTIONS

38. Did you ever report your partners' abuse or violence to authorities like the police or the courts? What was the result? (probe whether reporting had an impact on her safety/sense of safety)
39. What do you think about the kinds of help available to people experiencing conflict in relationships?
40. When you needed help, what help were you aware existed, and how did you become aware of it?
41. Were there reasons that you did not use help you were aware of? What help have you used or tried to, and why? Did it make the difference you imagined it would?
42. How do you imagine help ought to look like?

42 *Refers to "most recent male partner because of whom she sought intervention."

VII. CSA

43. I have one last question I hope you will be willing to answer. As a child or teenager, was any adult ever sexual with you?

VIII. WRAP-UP

44. How did you feel about our interview?
45. Do you have anything else you would like to share, or recommendations you would like to make?

IX. Thanks, payment, recording of receipt

IPV Perpetrators

- **Recruitment**
- **Ethical Consent**
- **Interview Guide**

Recruitment

Good day!

Help us better understand the lives of men like you!

Message or call: [Interviewer]

We are seeking your help in better understanding men's lives and relationships with women, so we can improve policies and resources that prevent and address conflict in relationships.

Our study, funded by UN Women, is a Trinidad and Tobago research project for which Dr. Gabrielle Hosein is responsible. The study is being guided and assisted by various bodies that work with men and women who've experienced or inflicted violence in relationships. It is being supported by the Institute for Gender and Development Studies at The University of the West Indies, St. Augustine campus.

We want to talk to different kinds of men who have been in relationships with women, and have hurt them or threatened to do so. We want to know what men think about the violence that occurred, and how men understand their relationships, women and their lives.

We want to know the role economic issues play in interpersonal conflict. And we want to gain better insight into how local interventions to respond to or prevent domestic violence are working or not working for men.

Our interview will last around an hour and a half. It will be conducted by a sensitive male researcher and will take place in private at a location and time you agree to. We will offer you an honorarium for your participation when you complete the interview.

We will not ask for or keep any record of your real name. The interview will be recorded so we capture what you say accurately. The recording will be destroyed after we do, and only the researchers will have access to it before then. When we share any study analysis, we will talk about patterns, not personal details.

Some questions we ask will be about difficult memories and experiences. If you feel uncomfortable, you can change your mind. A professional is on call as a free crisis counsellor if you need us to refer you because of something that comes up in the interview.

[Referrer] can contact you later, if you wish, to invite you to a forum where we will share the patterns we have heard and the things people have told us are needed.

Please message or phone [Interviewer] **or** if you are interested in participating in our research, or if you have more questions. Or give [referrer] your consent for us to contact you directly. We do not need your name.

Thank you for considering participating.

Sincerely,

[Study Lead Contact]

Qualitative Study on Women and Relationships

Ethical Consent

Thank you for agreeing to be interviewed. We want to be sure that you understand the purpose of the study and your role before you decide if you want to be in it. Please ask me to explain any words or information you may not fully understand. You can keep this copy of this document.

Why we would like to talk to you

We are interested in your help in better understanding men's lives, the relationships between women and men, and how to improve resources in Trinidad and Tobago for dealing with conflict in relationships. Our interview will ask questions that allow us better insight into the life experiences, views and needs of men who have been in relationships in which they threatened to hurt their female partner or did. We see you as someone whose recommendations we want to listen to.

Who is responsible for the study?

This is a research project being done in Trinidad and Tobago, for which Dr. Gabrielle Hosein is primarily responsible. It is paid for by a contract with UN Women. UN Women and other bodies are supporting a number of related research projects taking place in the Caribbean and internationally to better understand people's lives and experiences with IPV. Our Trinidad and Tobago study is being guided and supported by several groups who work with men and women who've experienced conflict, and by the University of the West Indies Institute for Gender and Development Studies at St. Augustine.

Privacy

The purpose of our interview today is so that we can make decision-makers aware of the kinds of experiences people like you have had, and so that we can compare your experiences carefully with those of others. Your name and contact information will not be written, recorded or attached on anything you share with us today. They will not be shared with the research team. Only the researchers will have access to what you share in today's interview. When we present findings, we will focus on patterns and not individual life details, and no names will be used. If you would like to, the group or person who referred you can contact you again when the study is completed and invite you to attend an event where we can share what we found with a mixed group of persons who assisted us in the study.

Discomfort

During the interview, I will ask you questions about various aspects of your life experience. Some of the questions may touch on difficult memories and experiences and sensitive subjects. If you wish to speak with a counsellor as a result, I will refer you to an experienced professional who can provide you crisis counselling free of charge. I can call to connect you, and share their contact

information. If at any moment you feel like you want to stop the interview or skip a question, please let me know. You do not have to respond to any question, and you can stop the interview at any time if you decide you no longer wish to participate.

Recording, Honorarium and Consent

I would like your permission to record the interview so that we get everything you say accurately. I will transcribe the recording and destroy it. Try not to use real names on the recording. Our interview should last around an hour and a half. When we complete the interview, I will offer you an honorarium in appreciation of your participation, and I will ask you to confirm on the recording that you received it. When I begin recording I will ask you to state whether you understand the information I have just given you, and if you consent to the interview. If there is anything that you don't understand, please ask me now.

If you have any concerns or questions related to the study after I leave you, you can use the contact information below:

Name of Study: Qualitative Study on Women and Relationships
Sponsor: United Nations Entity for Gender Equality and the Empowerment of Women
Principal Investigator: [Study Lead Contact]
Local contact: [Contact] womenandrelationshipstudy@gmail.com

Interview Guide

I. RESEARCHER INTRODUCTION/ETHICAL CONSENT

II. DEMOGRAPHIC DATA

46. Age
47. City/town/village of residence (“Where do you live”)
48. Ethnic/race self-identification (Open-ended question)
49. Religion
50. Schooling
51. Current work/employment
52. Current relationship status
53. Children: number, ages, mothers

III. SELF-REFERENCES

54. Tell me about yourself.
55. What is life like for you?

IV. ECONOMIC PARTICIPATION

56. Do you work? What type of work?
57. Tell me about your experiences with work and money over time?
58. How have changes in these affected your life, your relationships, or your household?

V. GENDER and RELATIONSHIPS

59. What are your ideas or characteristics of a good man?
 - How many of those things do you currently live up to?
 - Do you think women have similar ideas about what a good man is?
60. What are your ideas or characteristics of a good woman?
61. Where do these ideas (about good men and good women) come from?
62. How often, in your experience, do women live up to these; and what happens when they don't?
63. Tell me about your most recent relationship⁴³ where there was violence: What kind of a person would you describe your partner* as?
64. Why/how did you get into the relationship?
65. Tell me about your feelings for her*? Did they change over time?
66. Tell me about her* feelings for you?
67. What does being in a relationship mean for you?

68. Tell me your thoughts and feelings about aggression and anger in intimate relationships.

- When men are angry in relationships, what do they do?
- When you get angry, what do *you* do?

69. What expectations should men and women have of each other in loving relationships?

70. When people do wrong or hurtful things in relationships, is forgiveness always one of those expectations? Why?

- What has to happen for a man to be forgiven?

VI. STORYING VIOLENCE

Tell me a bit more about your relationship⁴³ during which there was violence most recently.

71. What type of relationship were you in (marriage/co-habiting/visiting/other)?

72. Ask demographic questions 1-8 for partner (If relationship was visiting, ask residence (2) at the time of the relationship. Ask employment (6) at time of relationship. Ask men her children are with (8).)

73. People have different understandings of violence. What is violence and what isn't violence for you?

74. Can we talk about the most recent time violence occurred with your last partner*?

- triggers, actions, responses?
- elicit justifications, blame/excuses, meanings
- explore any links raised between violence and gender
- explore intervention sought

75. Were there other experiences of violence? If so, can we talk a bit about the first time.

76. Were there any other experiences that were worse than those two? Could we talk about the worst experience you had?

77. *Duluth wheel*: Do you do any of these in relationships? Does your partner?

78. Did anyone close to you or your partner share advice or thoughts with you about your relationship?

79. (If applicable) Can you tell me why both of you continued the relationship after the experience(s) you described? How did you feel?

80. Did you take any measures to prevent violence reoccurring?

81. (If applicable) Can you share what made the relationship end?

- How did you feel about the relationship ending?
- How did you behave towards her?
- Did you do any of the things on the wheel?

82. Was your partner ever violent or aggressive towards you? Tell me about it, and how you responded.

43 Most recent female partner who sought intervention, in the case of Court or programme referrals; or, otherwise, the most recent female partner with whom the subject admits violence occurred

83. In your experience and your opinion, what causes men to be violent against women?

- What about stress? Say how.
- Do issues of money and work play a role?
- Does sex?
- Are men always responsible for being violent to women? Explain.

84. Can you love a woman and be violent? Tell me more.

- Is it wrong to be violent to her?

85. How do you feel about your past experiences of violence towards a partner?

86. How likely do you think you are to be violent again? Why?

VII. INTERVENTION AND JUSTICE

87. What has your experience been with authorities and social services regarding violence in your relationships?

- What were the results?

88. What do you think about the kinds of support and services available to people experiencing conflict in relationships?

- When you or your partner were violent, were *you* personally aware of any of these, and if so, how did you become aware of them? Have you become aware of any since?
- What help have you used or tried to, and why? Did it make the difference you imagined it would?
- Were there reasons that you did not use avenues you were aware of?

89. How do you feel about the current laws and police responses intended to protect people from violence in relationships or punish those who commit it?

- Do you have specific thoughts about the “order of protection”?
- Have you ever breached an order? Tell me about it.

90. How would you change the laws? What are the right measures for protection and punishment?

91. What are the kinds of services and policies that are needed by men to deal with conflict in relationships?

VIII. CHILDHOOD

92. When you look back on your childhood, what was it like in the family or home you lived in?

93. What was the community you lived in like (poverty? how close-knit? crime? violence?)?

94. Do you remember feeling safe, happy and good about yourself? Why not?

- Do you remember any fears, anxieties or difficulties?
- Did you ever experience helplessness; can you share how?

95. How were conflicts settled in your home?

96. Tell me about the relationships

- among the adults (include experiences of quarrels, substance use, violence)?
- between adults and children (include experiences of discipline, fairness, violence, CSA)?
- among the children (experiences of bullying, incest)?

97. I have one last question I hope you will be willing to answer. As a child or teenager, was any adult ever sexual with you?

IX. WRAP-UP

98. How did you feel about our interview?

99. Do you have anything else you would like to share, or recommendations you would like to make?

X. Thanks, payment, recording of receipt

Other Key Stakeholders

- **Recruitment**
- **Interview Guide**

Recruitment

10 March 2017

Dear Colleague:

The United Nations Entity for Gender Equality and the Empowerment of Women is currently supporting a research study, along with a small Trinidad and Tobago research team, which I am leading. The study is one of a number of related research projects taking place in the Caribbean and internationally to better understand and prevent violence.

We want to develop a richer understanding of how people make sense of violence in intimate relationships, how the economy plays a role in interpersonal conflict, notions of manhood and womanhood, and how interventions to address or prevent domestic violence are functioning. Our goal is to improve the quality of policies and resources in Trinidad and Tobago for dealing with conflict and violence.

We are interested in talking to you because we believe that you can offer insights into one or more of these areas. We want to use these insights to guide our recommendations. Your name will not be used in the research. However, we are interested in how your professional or community role shapes what you share with us.

[Interviewer], a member of the research team, would like to ask you a series of questions that last a little over an hour that allow us to deepen our insight into these matters. She will ask your permission to record the interview so that we get everything you say accurately, and she will ask you to confirm that you understand the purpose of the study and have consented to the recorded interview. We will transcribe the recording and destroy it.

Thank you for your time and willingness to share your insights. If you have any concerns or questions related to the study, please reach me at [Study Lead Contact].

I. ROLES AND INTERVENTION PROCESS

Please take a few minutes to look at this chart, which describes a range of things that, in addition to physical violence, women can experience in relationships, and which are grouped under the framework of “domestic violence.”

1. What is your/your unit’s role in responding to cases and threats of violence against women and girls?
2. What is your training, and how long have you been doing this work? Have you received any training related to gender-based violence?
3. What resources support your work? What further resources do you feel you/your unit need(s)?
4. Can you lead me through the process of the service you provide?
5. Do you think the intervention(s) you offer meet(s) women’s needs; and how? How can it/they be improved?
6. Is domestic violence legislation adequate?
7. What do you think are the intervention or interventions that are ideally needed in Trinidad and Tobago/the location in which you work (need, resources, effectiveness/weakness, recommendations)?

II. GBV FACTORS

8. What do think are the factors underlying violence against women and girls in Trinidad and Tobago?
9. Do you think economic issues or the recent state of the economy are having any impact; and how so?
10. How do you think that ideas about gender, masculinity and womanhood play out in such violence? How do they shape your response?

III. ADDITIONAL PROBES

Focus Groups

- **Facilitator Guidelines**
- **Sample questions**
- **Family Court Consent**

Focus group facilitation guidelines

Distribute the study letter to group participants. Summarise its contents for participants, making sure to cover:

- **study goal** – to understand how people **make sense** of violence in intimate relationships, the role of the **economy**, notions of **man/womanhood**, and how **interventions** are functioning
- focus group is a series of questions we would like each person to respond to in an orderly fashion (starting with a different person each time); session should last **go minutes or less**
- own **thoughts and opinions** are “right answers”; **not** asking for revelation of **personal experiences of violence**; goal is not for participants to agree, but to listen to all perspectives
- each person’s **participation is voluntary** and can be ended at any time, or any question skipped
- group will be **recorded** for research accuracy; recording destroyed after transcription
- **won’t use names** in the study/group, but want to know what kinds of people participated
- request participants to agree **not to share what others** have said outside the focus group
- some questions may be difficult; a **referral to counselling** is available if requested
- **study contact** is on handout for any questions
- need **oral consent** on tape at start of recording before beginning

Ask each participant to select one of the creature images, and to give it/themselves a name, which is how they will be referred to on the tape

Ask each to write on an index card you collect their:

- age
- relationship status
- parental status
- racial/ethnic self-identification
- religion

Record the group using two recorders. You can place them at different places in the room, but you should encourage participants to speak singly, and so they are audible to both devices. After turning on the recorders, ask all participants if they understand the goals of the study, and consent to participate and to the ground rules.

To refer someone who needs it to free crisis counselling, provide them the name, phone number and e-mail [Contact]. Offer to place a call on their behalf; allow them to leave callback information and a message. Advise them to cite the study, that their call is anticipated, and that they will be contacted within one day. Alert us immediately.

No more than one working day after the end of the interview, write an email to the study lead and coordinator, providing observations about context, concerns, conduct and anything else notable about the group (this is *not* a summary of participants' contributions). Upload *both* sound files directly to the study Google Drive for the transcribers. You can have [Transcriber] do so directly from the recorder at the office. Erase the files from the recorders once you verify that they are playing in the cloud. Do **not** copy the sound files to any other media or transfer them to the study by e-mail.

Youth

Are relationships between men and women your age, and how people understand and behave in them, different from relationships between members of older generations? How so?

- Do you think women in your generation have a greater ability than previous generations to negotiate their roles and their safety in relationships?
- Domestic violence seems to be on the rise. Are there ways in which young people are more vulnerable to violence in relationships than people were before?
- Are some sub-groups of young people at greater risk than others? Why?

Where did you learn the lessons you have about how to handle conflict in your relationships?

When you hear the terms “domestic violence” and “intimate partner violence”, what is the range of things you think of?

What causes men to be violent against women?

- Are stressful events one cause? Say how.
- Do issues of money and work play a role?
- Does sex?
- Do ideas about what a man, a woman or a partner is supposed to do?

When people love each other, does that affect how they respond after violence happens in a relationship? How so?

How do other young people in your social network respond to violence, or the threat of it, in their relationships?

- Do they use services? Which ones?
- Are any of these on campus?
- How do they use the law?
- Do they disclose their situation to peers or family members, or seek support from them?
- What, if anything, prevents them from using particular strategies?

Are you aware of young people who have used available interventions and services for IPV? Can you assess how those choices addressed their needs?

How do you feel about the current law and criminal justice responses intended to protect people from violence in relationships or punish those who commit it?

What do you think will decrease a woman’s likelihood of being attacked or hurt by a partner?

What resources and responses to IPV are you aware of on campus, and what do you think of them?

- What would you like to see?

Is there anything more that you would like to share before we close?

Men 1

What does it mean to be a man?

- What are some of your thoughts and expectations about men, relationships and family?

What are your thoughts and feelings about violence in relationships?

- People have different understandings of violence. What does violence look like in your experience?

What causes men to be violent against women?

- Are stressful events one cause? Say how.
- Do issues of money and work play a role?
- Does sex?

I'd like to hear your thoughts about two kinds of feelings in intimate relationships. First, tell us about aggression or anger.

- Now tell me about love and forgiveness.

What do you feel about the current laws and police responses intended to protect people from violence in relationships or punish those who commit it?

- How would you change the laws? What are the right measures for protection and punishment?
- Do you have specific thoughts about the "order of protection"?

What are the kinds of services that are needed by men to deal with conflict in relationships?

Is there anything more that you would like to share before we close?

Men 2

What does it mean to be a man?

Do you all agree with each other on the rules about relationships between men and women?

- Allow discussion; then probe:
- Should a man provide satisfaction for his partner every time she desires it?
- Can a husband rape his wife?
- Are there physical behaviours, kinds of control or hard talk that are allowed between men and women?
- Do women agree with you? How (not)?
- What does your faith tell you about violence against women?

What causes men to be violent against women?

- What about stress? Say how.
- Do issues of money and work play a role?
- Does sex?

How would you respond if you believed someone in your network was being violent towards his partner?

- What would you advise the woman to do?

Share some of your thoughts about aggression or anger in intimate relationships.

Now tell me about love and forgiveness.

What do you feel about the use of courts and police to protect people from violence in relationships or punish those who commit it?

- Do you have specific thoughts about the “order of protection”? What do you understand about it, and how do you feel about it?

What kinds of services and support are needed by men to deal with conflict in relationships?

Is there anything more that you would like to share before we close?

Women 1

1. What do you know or believe about the prevalence and the nature of IPV experienced by well-educated and professional women?
 - Are some sub-groups of women at greater risk? Why?
2. How do these women respond to such violence, or the threat of it? What strategies do they use?
 - Do they use available services? Which ones?
 - How do they use the law?
 - What, if anything, prevents women from using particular strategies?
3. Does her professional status or education make it less likely that a woman would experience violence in a relationship? Why (not)?
4. Does her status make it easier to negotiate conflict and violence with a partner?
5. Are there pressures on professional women to hide violence or to not seek interventions due to their reputation or that of their partner? How so?
6. What changes over the course of her life and professional development can alter the likelihood a woman will experience violence with a partner? (e.g. from being a student to a lawyer to a judicial officer?)
 - Are there changes simply with age?
 - Are there some things that cut across age?
7. How do education and professional development shape how women negotiate gender roles?
8. Is IPV an issue that the Association of Women Judges has ever seen as important to address among the membership?
9. Based on your experience in the courts, are there any insights you'd like to share in relationship to four themes we think may be important to how we understand and address IPV:
 - how available interventions empower or fail women (or men)
 - economic insecurity
 - love
 - ideas about gender and men and women's roles
10. How can you see the court system improving in its response to IPV?
11. Is there anything else that you would like to share before we close?

Women 2

We are primarily interested in learning more, through this group, about your perspectives and insights as professional and prominent women. Towards the end of the session, I will also ask you to share thoughts and recommendations based on your experience with the law.

1. What do you know or believe about the prevalence and the nature of IPV experienced by well-educated and professional women?
 - Are some sub-groups of women at greater risk? Why?
2. How do these women respond to such violence, or the threat of it? What strategies do they use?
 - Do they use available services? Which ones?
 - How do they use the law?
 - What, if anything, prevents women from using particular strategies?
3. Does her professional status or education make it less likely that a woman would experience violence in a relationship? Why (not)?
4. Does her status make it easier to negotiate conflict and violence with a partner?
5. Are there pressures on professional women to hide violence or to not seek interventions due to their reputation or that of their partner? How so?
6. What changes over the course of her life and professional development can alter the likelihood a woman will experience violence with a partner? (e.g. from being a student to an aspiring professional to an experienced worker?)
 - Are there changes simply with age?
 - Are there some things that cut across age?
7. How do education and professional development shape how women negotiate gender roles?
8. Is IPV an issue that PLOTT has ever seen as important to address among the membership?
9. Are there any other insights as a professional that you'd like to share in relationship to four themes we think may be important to how we understand and address IPV:
 - how available interventions empower or fail women (especially professional women)
 - economic insecurity in Trinidad and Tobago
 - love
 - ideas about gender and men's and women's roles
10. Is there anything else that you would like to share before we close?

Family Court

17 July 2017

Dear Family Court Stakeholders:

The United Nations Entity for Gender Equality and the Empowerment of Women is currently supporting a research study, along with a small Trinidad and Tobago research team, which I am leading. The study is one of a number of related research projects taking place in the Caribbean and internationally to better understand and prevent violence.

We want to develop a richer understanding of how people make sense of violence in intimate relationships, how the economy plays a role in interpersonal conflict, how do notions of manhood and womanhood, and how interventions to address or prevent domestic violence are functioning. Our goal is to improve the quality of policies and resources in Trinidad and Tobago for dealing with conflict and violence in relationships.

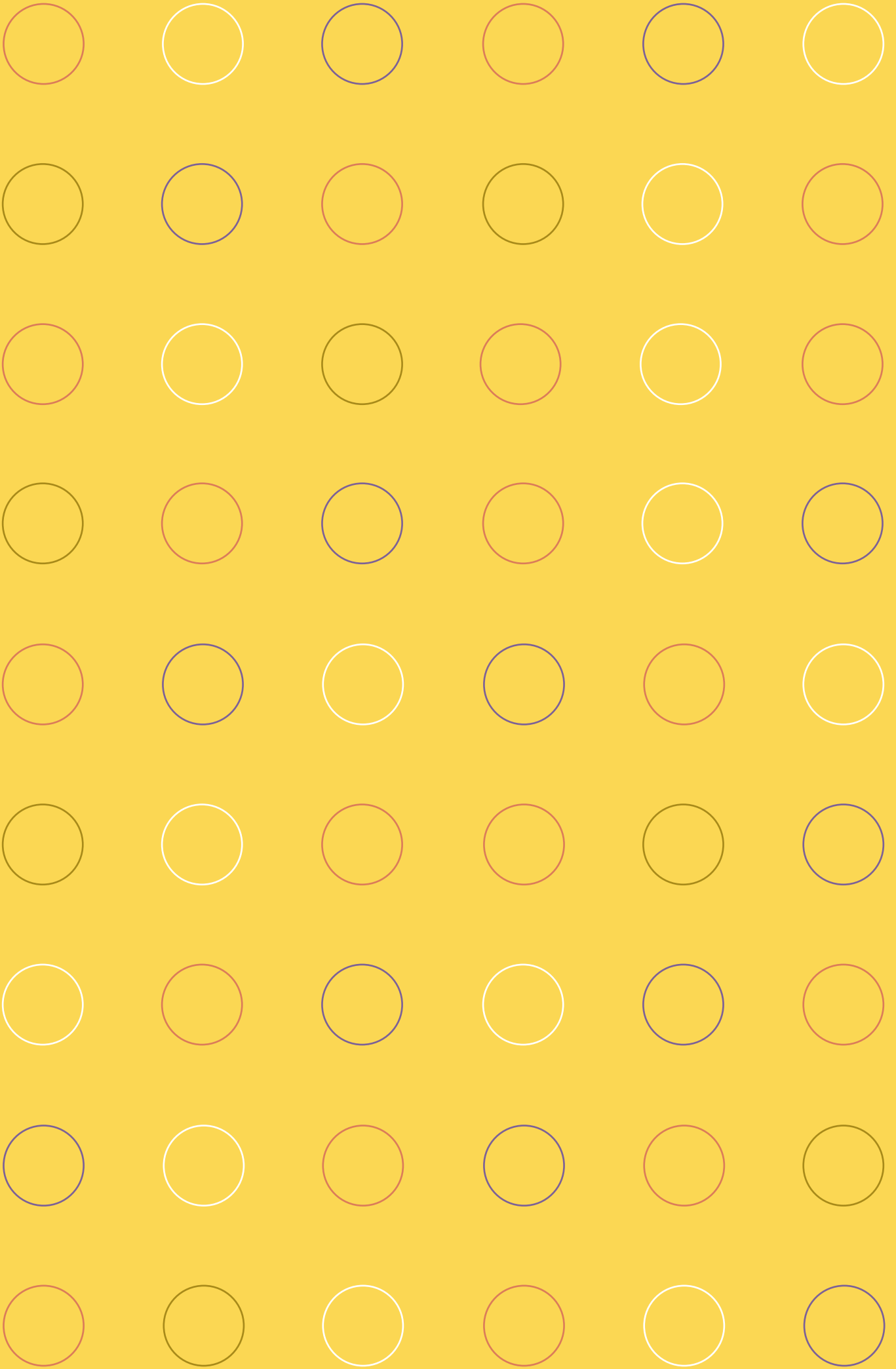
We are interested in talking with you as a group, because we believe that you can offer insights from your professional experience into one or more of these areas that can allow us to deepen and broaden our understanding of them, and guide the recommendations the study makes. A member of our research team would like to ask your group a short series of questions. We are interested in your thoughts and opinions, whatever they are, on those questions. No answer is incorrect.

The session should last between one hour and one hour and a half. No names will be used in the research. However, we do ask your permission to record the interview so that we get everything you say accurately; after we transcribe the recording, we will destroy it. We will ask you to confirm on the recording that you understand the purpose of the study, and that you consent to the recorded interview. Alternatively, we can capture your consent and responses through writing and note-taking; the duration of the group will be somewhat longer. We also ask your collaboration in capturing some key demographic characteristics of the group's participants.

Please do not use personal names during the interview. Further, to ensure that people speak freely, we ask that you agree to not share outside of the group what any other participants say.

It is possible that one of our questions may touch on difficult or sensitive subjects. You do not have to respond to any question, and can decide not to participate further at any time if you do not feel to. If any participant feels the need to speak to a crisis counsellor because of something that has come up in the group, the interviewer is able to refer you confidentially to an experienced professional free of charge.

Thank you for your time and willingness to share your insights. If you have any concerns or questions related to the study, please reach me by phone at [Study Lead Contact], or e-mail the study at WomenAndRelationshipsStudy@gmail.com.





Government of the Republic of Trinidad and Tobago
Office of the Prime Minister (Gender and Child Affairs)

