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Breaking Their Silence on Intimate Partner Violence: Discussions with Cape Verdean Women

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Abstract

Family/intimate partner violence is a serious social problem, with women and children victimized at profoundly higher rates than adult males. Although the domestic violence community has worked tirelessly to develop programs to reach culturally diverse women, Cape Verdean women continue to be underserved and misunderstood. The Cape Verdean Women's Project was a qualitative study with women who shared their experiences with intimate partner violence. A feminist theoretical framework offers a foundation for examining the Cape Verdean women's experiences with intimate partner violence and for developing recommendations for working with the community to develop intervention and prevention strategies. This article presents research findings that include: Cape Verdean women's perceptions of intimate partner violence, their strength and resilience, code of silence, and culture and violence. The article concludes with recommendations for social change.

Keywords: Cape Verdean women, intimate partner violence, cultural competency, community engagement

Introduction

Although the scholarly literature addressing intimate partner violence (IPV) among Cape Verdean women is limited, there has been an increase in public awareness and a growing social movement around the issue among college students, grassroots organizations, and women themselves, both in the United States and in Cape Verde. Internet discussions, nongovernment organizations (NGOs) in Cape Verde, and the domestic violence community in the United States have all contributed to this public awareness. Yet, Cape Verdean women continue to experience a number of barriers to

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services. For example, mainstream service providers' traditional data collection and outreach methods often overlook Cape Verdean women, leaving them socially invisible and culturally misunderstood. Additionally, the long history of oppression in Cape Verde and the United States trickles down to a code of silence among women and a lack of trust of outsiders on most family issues, particularly IPV. This article presents findings from the Cape Verdean Women's Project (CVWP) a qualitative study with fifty Cape Verdean women in Massachusetts. The study focused on many aspects of Cape Verdean women's lives, but IPV emerged as a major theme. The study also revealed that Cape Verdean women have complex lives - despite being strong and independent, they nonetheless follow patriarchal cultural norms. The intention of this study is not to generalize all Cape Verdean women, but to provide some insight into their experiences and add to the ongoing dialogue. Finally, the overarching goal of this study was to give Cape Verdean women a voice about their experiences with IPV and develop effective culturally relevant outreach protocols.

Cape Verdeans' Journey to the United States

Developing culturally relevant approaches to working with Cape Verdean women living in the United States begins with understanding the community's culture and journey to the United States. Cape Verde is a nation of ten islands² off the coast of West Africa that was colonized by Portugal in the 1400s (Appiah and Gates, 1999; Lobban, 1995; Lobban & Saucier, 2007). Culturally, Cape Verdeans are influenced by the Portuguese and many West African cultures. While Portuguese is the official language of Cape Verde, Cape Verdeans speak Creole (i.e., a mixture of Portuguese and African dialects) at home. Creole is not only the language Cape Verdeans speak at home, but it is also a means of resistance against Portuguese colonial power. As Lima (2012) noted "the term Creole embodies the Cape Verdean identity and defines Cape Verdean people" (p. 9) and is an essential cultural feature to understanding the community itself (Thomas, Sanchez, & Maniche, 2010; Thomas, 2014).

² The Cape Verdean islands located off West Africa are divided into two regions – Barlavento/Windward Islands that include: [Santo Antão](#), [São Vicente](#), [Santa Luzia](#), [São Nicolau](#), [Sal](#), and [Boa Vista](#). Ilhas Do Sotavent or the Leeward Islands consist of: [Maio](#), [Santiago](#), [Fogo](#), and [Brava](#). All but Santa Luzia are inhabited.

Cape Verdeans' migration history is significant to understanding their culture. Harsh colonial rule and socioeconomic and cultural oppression motivated Cape Verdeans to emigrate from Cape Verde to a variety of places around the world, but Southeast New England holds the largest population (Appiah & Gates, 1999; Carling, 2003; Lobban, 1995; Lobban & Saucier, 2007). Their migration history to the United States is best known in three major phases: (1) whaling era, (2) post-colonial era, and (3) post 9/11 era. Through all three phases, the shores of Massachusetts and Rhode Island have been Cape Verdeans' gateway to the United States where they sought economic opportunities. The whaling era represents Cape Verdeans' early migration period during the middle 1800s when men traveled on Portuguese whaling vessels. Later, women would follow the men and they were considered some of the earliest laborers in Southeastern New England, working in the blueberry fields, cranberry bogs, and factories, and in homes as housekeepers. Early twentieth-century immigration policies stalled the migration of many groups of color into the United States, including Cape Verdeans (López, 1996; Sánchez, 1998). The post-colonial era represents the time period after Cape Verde's independence from Portugal in 1975, which sparked a new U.S. immigration phase. Since the events of 9/11, stricter guidelines and procedures regarding visas have made migration to the United States more difficult for most groups, including Cape Verdeans, whose migration to the United States continues, but with greater challenges (Thomas, 2014).

These migration phases have resulted in two Cape Verdean communities in the United States sharing one culture but each having unique social and political histories that influence their acculturation experiences in the United States, their relationship to Cape Verde, their racial and ethnic identity, and the languages they speak (Thomas, et al., 2010; Thomas, 2014). For example, the first wave of Cape Verdeans entered the United States under Portuguese colonial rule and were identified as Portuguese. Those who have entered the United States under a free Cape Verde see themselves not so much as Portuguese, but as Cape Verdean. Nonetheless, both groups continue to struggle with the U.S. binary racial classification of black and white (Thomas, 2014; Halter, 1998; Lima, 2012; Sánchez-Gibau, 2005a, 2005b). Cape Verdeans' physical features are diverse and they do not see themselves in terms of skin color or race, which in the United States is a major determinant of group membership, social mobility, success, and discrimination (Thomas, 2014;

DeAndrade, 1997; Lima, 2012). However, Cape Verdeans of the past and present “experience the harsh reality of racialization in American society when they try to fit into a system where race is a prominent factor in identity development and socioeconomic success” (Thomas, 2014, p. 192).

Throughout the study cultural and racial identity was an important theme for understanding IPV. Participants expressed their frustration with being forced into a racially based system they did not understand. As one participant noted, “We are always challenged to be a race. When I say I am black, they say no, you’re not; look at your hair, it is straight, look at your mother, she is too light. But why can’t I be Cape Verdean and black? Who says I have to choose?” This participant’s comment highlights a long struggle between the Cape Verdean community and mainstream America. Although mainstream social service agencies are beginning to understand the importance of collecting ethnicity data along with traditional racial categories, Cape Verdeans continue to be culturally misunderstood and are often misidentified and/or lumped in with other groups, leading to them being underserved (Thomas et al., 2010; Thomas, 2014). Thus, not only must service providers and law enforcement working in the area of domestic violence understand language differences among more recent Cape Verdeans who may have limited English abilities, but they must also understand how all Cape Verdeans may identify themselves or be identified by others.

The family is an important feature in the Cape Verdean community that extends the geographical borders of Cape Verde to the United States (Thomas, 2014; Akesson, Carling, & Drotbohm, 2012; Challinor, 2015). Although Cape Verdeans’ migration history has separated families at times, many families remain connected despite great distances (Thomas, 2014; Challinor, 2015). Unlike the American nuclear family concept, the Cape Verdean family is characterized in more broad terms and includes not only blood relatives, but also extended members (i.e., grandparents, godparents, aunts/uncles, and non-blood relatives). For the most part Cape Verdean women are disproportionately responsible for the well-being of the family, but as many participants in the study suggested, “she does so with pride.”

In more recent times, women in both Cape Verde and the United States have advanced socially, politically, and educationally, yet gender norms still fall along strict

traditional patriarchal values. Cape Verdean women have always been revered in the community, but they tend to defer to male authority. Traditional gender roles and protecting the family play critical roles in Cape Verdean women's silence about the violence they experience (Thomas, 2014; Carter & Aulette, 2009; Challinor, 2015).

Defining Intimate Partner Violence

The domestic violence community is a vast field and includes a wide range of knowledge, disciplines, organizations, advocacy groups, definitions, and theories. Family/intimate partner violence (IPV) is a complex social phenomenon that is difficult to explain and comprehend. It also has been recognized globally not only as an issue of personal behavior, but as a social, health, criminal, and economic problem. This section provides a brief theoretical explanation of IPV by defining terms and reviewing the feminist analytical framework.

While the terms family violence, domestic abuse, and domestic violence are often used interchangeably with intimate partner violence, today intimate partner violence (IPV) is the term that is widely accepted in the United States and internationally because it is most inclusive regarding relationships between individuals (Barnett, Miller-Perrin, & Perrin, 2011; Breiding, Basile, Smith, Black, & Mahendra, 2015; Wallace, 2005). Terms describing those abused are just as diverse – from battered women, abused women, and victims to survivors. The term survivor is preferred over victim because survivor reflects a social justice paradigm that gives women (and men) who have been abused a level of control and empowerment. During the study, participants used the terms domestic violence and intimate partner violence (IPV) as well as survivor.

There is no one definition to describe IPV. However, the U.S. Centers for Disease Control and Prevention (CDC)³ definition is broadly used and describes IPV as: “physical violence, sexual violence, stalking and psychological aggression (including coercive tactics) by a current or former intimate partner (i.e., spouse, boyfriend/girlfriend, dating partner, or ongoing sexual partner)” (2015, p. 11). Levesque's (2011) definition is also

³ Intimate Partner Violence Surveillance: Uniform Definitions and Recommended Data Elements, National Center for Injury Prevention and Control, Division of Violence Prevention at the Center for Disease Control – see references for authors.

used and describes family violence as “acts of omission or commission resulting in physical abuse, sexual abuse, emotional abuse, neglect, or other forms of maltreatment that hamper individuals’ healthy development” (as cited in Barnett et al., 2011, p. 23).

Part of the challenge and complexity in defining IPV is the perception of the family. The family has been thought to be a safe place where parents love each other and their children (Barnett, et al., 2011; Gelles, 1997; Wallace, 2005). However, sociologists were some of the first scholars to unveil the notion of this idealized family as a place where one is loved and feels safe, supported, and cherished; they are quite clear that it is also a place of considerable violence. Indeed, Gelles (1997) suggests that “people are more likely to be killed, physically assaulted, hit, beat up, slapped or spanked in their own homes by other family members than anywhere else, or by anyone else” (p. 1). Truman & Morgan (2014) reported that family violence was responsible for 21% of all reported crimes and 15% resulted from an intimate partner with another 4% from an immediate family member and 2% from other relatives. Twenty-three percent of children under 13 years old who died by violence were murdered by a family member (p. 1). In addition, the CDC’s (2016) data on child abuse – physical, sexual and psychological – noted 3.4 million referrals regarding children being abused or neglected, with an estimate of 1,640 who died as a result of such abuse and neglect (a rate of 2.2 per 100,000 children). Children who died experienced child maltreatment mostly at the hands of a family member. Sexual assaults in the United States and worldwide are most difficult to calculate because many are never reported. Intimate partner violence is not exclusive to couples who live together or are married; it also starts with young dating teens. The literature shows that teen couples experience similar levels of violence, stalking, and sexual assault by their partners as do adult dating couples (Barnett et al., 2011). Finally, currently the National Coalition Against Domestic Violence estimates that every 9 seconds in the United States a woman is assaulted or beaten by her partner.

Theories regarding IPV are also highly diverse – extending across a wide spectrum of disciplines from interpersonal behavior to social structural explanations as to why violence exists among families. The social/cultural acceptance theory offers some explanation for society’s tolerance of intimate partner violence. The social/cultural acceptance of IPV theory suggests that violence is culturally embedded in society. Society accepts and even encourages certain types of violence among family members (Barnett, et

al., 2011; Gelles, 1997). In fact, spanking children continues to be an acceptable method of discipline among many and is even expected by some in order to teach children how to behave; hence the saying, “spare the rod spoil the child.” For example, Kelly (2011) points out how, historically, beating of women by men was legally, culturally, and socially acceptable behavior. She notes the old saying, “women, like walnut trees, should be beaten every day” (Kelly, 2011; p. 31). Early in the United States the Rule of Thumb Law, a folkloric law, suggested “a man could beat his wife with a stick, as long as it was no wider than his thumb,” which essentially sanctioned wife beating (Barnett, et al., 2011). It was not until the mid-1970s that marital rape become illegal. Another example is the debate surrounding the correlation between the violence in pop culture (e.g., movies, video games, and music) and family violence or IPV. While there is no conclusive evidence to indicate that watching or playing violent video programs leads to violence, many theorists note that, at the very least, society becomes desensitized and less empathetic to victims of violence (Barnett et al., 2011; Gelles, 1997). It is these types of attitudes that have created barriers to the kind of social change that would allow women and children to be safe.

A Feminist Approach to Intimate Partner Violence

The feminist theoretical framework provides an important foundation for understanding Cape Verdean women’s experience with intimate partner violence. The feminist perspective falls along the lines of a structural/cultural explanation of violence against women, but also blends theory and social activism in addressing IPV. Early feminists and the feminist movement were at the forefront of changing society’s perceptions about IPV, suggesting violence against women is rooted in a patriarchal culture – “In patriarchal culture, men hold greater power and privilege in the social hierarchy than do women” (Barnett, et al., 2011, p. 47). This approach broadens the idea of IPV from being defined as a private matter between couples to being a societal issue and demonstrates how traditional patriarchal and hierarchical structures sanctioned men’s use of violence to maintain power and control over women (Barnett, et al., 2011; Bograd, 1990; Childress, 2013; Kelly, 2011). Women were and are culturally and politically socialized to be subordinate to male superiority and dominance. As a result, women are often left

relatively powerless, putting them at risk of being controlled and experiencing violence by men with little recourse.

The early feminist perspective has been criticized for its viewpoint that sexism is a universal experience shared by all women (Cho, Crenshaw, & McCall, 2013; Carbado, Crenshaw, Mays, & Tomlinson, 2013; Patil, 2013). This early feminist perspective mostly reflected Western white middle-class women and did not consider oppressive conditions that women of color experience. The “third-wave feminism was born to include marginalized people both genders and different races, classes, and sexual orientations” (George & Stith, 2014, p.182). Crenshaw (1991) notes the concept of intersectionality, which suggests women of color experience interlocking systems of oppression, domination, and racism unlike white women or poor white women. Sokoloff and Dupont (2005) also note, “we exist in a social context created by the intersections of systems of power (e.g., race, class, gender, and sexual orientation) and oppression (e.g., prejudice, class stratification, gender inequality, and heterosexist bias)” (p. 44). Thus, in order to provide effective intervention/prevention strategies we must consider how women of color experience IPV and at the same time other structural forms of oppression and dominance (Carbado et al., 2013; Crenshaw, 1991; Kelly, 2011; Sokoloff, 2008). Unlike white women, racism and other structural forms of oppression simultaneously affect both men and women of color (Cho, et al., 2013; Kelly, 2011; Parker & Hefner, 2013). For example, historically, the realities of police brutality and racism are contributing factors as to why many women of color underreport IPV and stay in abusive relationships (Bent-Goodley, 2001; Bent-Goodley, 2004; Pitt, 2008).

Transnational feminism is another feature of third-wave feminism that is valuable to examine Cape Verdean women’s experiences with violence in Cape Verde and the United States. Concerned with women across cultures and borders throughout the international and global community, transnational feminism considers how power in terms of imperialism, colonialism, as well as economic and political powers has exploited and shaped women’s lives (Mohanty, 2013; Patil, 2013; Shaw & Lee, 2012). At the same time, transnational feminism recognizes women’s differences while building international alliances and networks that promote women’s equality and safety worldwide. Transnational feminism and its activism work towards political and legal rights for women

to combat violence in the home and those violent acts used as weapons during war. Transnational feminism is grounded in the principles outlined in the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), which was adopted by the United Nations General Assembly in 1979 and ratified by Cape Verde in 1980. CEDAW is considered an international bill of rights law that protects the human rights of women. CEDAW strives for the elimination of: discrimination against women, stereotyping women as inferior, trafficking women and prostitution, and violence towards women. In addition to CEDAW, the Protocol to the African Charter on Human and People's Rights on the Rights of Women in Africa (Maputo Protocol) was also implemented in Cape Verde. The website Africa4 Women's Rights (2015) reports⁴ that a series of legislation reforms brought Cape Verdean laws into compliance with international obligations. For example, the Criminal Code adopted in 2004 increased sentences for perpetrators of sexual violence, other provisions criminalized domestic violence, and the promulgation of Decree n 62/2005 established legal centers to promote access to justice. Also, the adoption of the National Gender Equality and Equity Plan (2005-2009) and the National Action Plan (2009-2011) aimed at raising awareness about women's rights and fighting gender violence.

In addition, Carter and Aulette's (2009) qualitative research in Cape Verde suggested that women are taking action against IPV in two ways: (1) a private approach and (2) a public and collective approach. In the private approach, women typically use subtle ways to avoid violence, but also to protect and empower themselves. The collective and public approach includes outreach through NGOs, social networks, clubs, and local actions to fight violence and sexual assault against women and children. Cape Verdean women have politically organized groups such as the Association in Support of Women's Self Promotion in Development and the Cape Verdean Women's Organization, which work towards ending violence. The Women's Jurists Association in Cape Verde offers free services on issues of violence, abuse, and discrimination. They have engaged in public and private dialogues about women's rights and how to promote a violence-free society. Another example is the 2012 march against domestic violence in Cape Verde organized by

⁴ See Africa for Women's Rights, Ratify & Respect, <http://www.africa4womensrights.org/en>.

the president and founder of Battered Women of Cape Verde Islands.⁵ The march was sparked by a domestic violence case that resulted in a young mother's death by her estranged husband. The march in itself was significant as it raised awareness about IPV to the public and showed support to all women.

The United States is among a small number of countries that unfortunately have not ratified CEDAW; however, the United States did pass the Violence Against Women Act of 1994 (VAWA) and its subsequent reauthorizations. The Violence Against Women Act was led by a grassroots campaign and is considered a landmark piece of legislation designed to end violence against women (Wallace, 2005). The impact of VAWA has been significant for women who experience violence by creating new and mandatory punishments for offenders and broadening services to help survivors. It has coordinated services between federal and state agencies and communities, and developed more outreach to underserved communities – including the Cape Verdean community in Massachusetts. It created 24-hour hotlines, developed more training for law enforcement, and created better response procedures for health care providers, all of which offer more protection to survivors. The Violence Against Women Act has raised public awareness nationwide of the complex issues and the dangers that women face from IPV. Intimate partner violence is no longer hidden behind closed doors and is recognized as creating socioeconomic, health, and political problems with far reaching consequences for those in immediate danger and for society in general.

Although the statistics on IPV among Cape Verdeans are scarce, there is a history of violence and sexual abuse against women and children that continues today in Cape Verde and the United States. Discrimination against Cape Verdean women and IPV persist largely due to traditional patriarchal roles for both women and men that are deeply rooted within the family and society. Such traditional attitudes often create barriers to implementing the laws that would protect women. While there is now more activism and public awareness, women are still reluctant to come forward when they experience violence and are even less likely to support those who do speak out. These issues are not exclusive to women in Cape Verde; they also reach those in the United States. As one participant

⁵ March was organized by the founder and President of the Battered Women of Cape Verde Islands, www.bwcvi.org.

suggested, “it seems hopeless because where do you go and who will help you? Women suffer in Cape Verde and when you come here (U.S.) it seems the same.”

The Cape Verdean Women’s Project

The Cape Verdean Women’s Project (CVWP) is a qualitative research study with focus groups and individual interviews to gain information about Cape Verdean women’s life experiences in the United States. The CVWP draws on a feminist framework to examine women’s perceptions, experiences, and practices surrounding IPV. Cape Verdean women provided an opportunity for conversations on the intersections of gender, race, and intimate partner violence.

Research Procedures

The CVWP used a convenience sampling procedure to recruit participants for a total of 50 women from Southeastern Massachusetts⁶ (Creswell, 2009; Hammersley, 1990). Participants represented four generations of Cape Verdean women and a full spectrum of life experiences, with the youngest being 18 years old and oldest 82. Participants had a wide range of educational backgrounds from high school, GED, and some college to doctoral degrees. Participants were married, divorced, single, and never married. Half of the women had children, both male and female, and two had grandchildren. Also, the four generations of participants represented various acculturation and immigration phases, with half of the women’s families migrating to the United States during the whaling era. All other participants entered the United States more recently, since the 1970s, and have maintained strong ties to families in Cape Verde. All the women were fluent in English and more than half spoke Creole and Portuguese as well. Many of the women could converse in Spanish and French. Strict interview guidelines were followed with informed consent procedures (Berg, 1989; Creswell, 2009; Krueger & Casey, 2015; Morgan & Krueger, 1993), and the study was reviewed and approved by the Simmons College institutional review board (IRB). Women who did not want to participate in a focus

⁶ I would like to extend a special thank you to all the women who participated in this study. They shared their time and stories. Most of all, they displayed an unwavering courage, passion, and vision for the future that is free of violence for all Cape Verdeans.

group were interviewed separately. Three focus groups were conducted with 7-11 participants each, and all other participants were interviewed individually. All interviews and focus groups were conducted in areas comfortable for the women with the principal investigator and research assistants. Interviews and focus groups were audiotape recorded and all recordings were independently transcribed by research assistants. Research field notes were recorded during all meetings with participants. Research field notes and transcriptions were analyzed independently by the principal investigator and research assistants. Together the research assistants⁷ and the principal investigator reviewed the data to ensure its accuracy and reliability as well as to address research bias (Creswell 2009; Krueger & Casey, 2015; Morgan & Krueger, 1993). In addition, the principal investigator consulted with scholars and community advocates familiar with IPV in the Cape Verdean community to ensure data reliability and reduce research bias. Finally, a literature review of scholarly articles and websites provided an understanding of the complexity of IPV.

The goal of the Cape Verdean Women's Project was to learn about the lives of Cape Verdean women in the United States and did not exclusively focus on IPV, which presented some limitations. While family violence/IPV emerged as a major and reoccurring theme, only half of the women spoke about their own personal experiences with IPV. However, all of the participants highlighted many issues regarding women and IPV – again illustrating its importance. There was some discussion about men who are abused, but the consensus among participants was that men are abused at a much lower rate than women, which corresponds with the literature (Barnett, et al., 2011). In spite of the study's limitations, it offered an opportunity for Cape Verdean women's voices to be heard. Sharing women's life experiences and narratives is a critical element in feminist theoretical framework leading to social change. Future research will focus exclusively on IPV by recruiting survivors, service providers, and law enforcement, which Berg (1989) calls the lines of sight, providing multiple sides of the data to enhance reliability.

Research Findings

Throughout the study, IPV emerged as a major and reoccurring theme. All the participants were generous and passionate about sharing their experiences and knowledge

⁷ A special thank you to the research assistants who took this journey with me.

about abuse and recommendations for social change. The findings included: (1) the perception of violence among families, (2) culture and violence, (3) code of silence, (4) Cape Verdean women's strength and resilience, and (5) recommendations for the Cape Verdean community and service providers.

The Perception of Intimate Partner Violence

Participants in the study did not have a clear definition of IPV or what some call family violence; yet the sentiment was clearly understood by all. As one participant suggested: "every Cape Verdean woman knows what her boyfriend/husband does to a woman, we all know, he hurts her. We don't have to say out loud, and sometimes we can't say it, but we know." It is not unusual for people not to have a clear or concise definition for IPV. In fact, the perception of IPV by participants continued to evolve with each group and interview. Yet, there was a consistent thread that IPV was very much tied to patriarchy, male control, womanizing on the behalf of men, Portuguese colonialism, and women's suffering. The general consensus among participants was that Cape Verdean women suffer. They suffer from the hardship in Cape Verde and being in the United States. Cape Verdean women are responsible for everything in the home from rearing children to taking care of grandparents, those who are sick, and the men. "Men do not help and if they do women are lucky." Participants reported that some men do help in the home, but basically it is a woman's role to care for the family and she does so with pride. Participants suggested that taking care of family is oppressive and overwhelming, but it is a woman's pride and privilege. Cape Verdean women's suffering was a common theme associated with the amount of work in the home and men's womanizing along with the violence they experienced. One participant noted "how do we Cape Verdean women suffer, let me count the ways, there are too many."

When the question was posed to participants to be more specific in describing their experiences with violence, their responses included "you know, all kinds, every kind" "we are beaten and raped," and "it happens when you are a young girl, a woman, and to boys, but you hear less about boys." Their general consensus in describing violence is not surprising because it is challenging to articulate publicly one's experience with violence, and it is especially so when the norm is to be silent.

Culture and Violence

Throughout the study participants overwhelmingly suggested that violence and sexual assault on women and children are part of the culture. “It’s our culture” and “it is a part of our culture” were phrases repeated by study participants. Also, violence and sexual assault have no boundaries; they occur both in Cape Verde and the United States. As one participant noted, “I sent my daughter to the U.S. so she would be safe, and she was not, the abuse is here.” Another participant who came to the United States as a teenager reported how surprised she was to have men she admired, loved, and cared for be inappropriate to her. Although she did not report any abuse herself, she knew of many women who were abused both sexually and physically. Also, participants noted that they felt violence was part of the culture because it was so prevalent and they did not know how to stop it. Many participants pointed out there was and is a lack of protection by the government and police in Cape Verde. Most participants believed that Cape Verde’s history with colonialism and the oppressive conditions contributed to the problem. They recounted stories of the strict code of conduct imposed by Portuguese rulers that has had long-term effects on the culture, family, and dynamics between women and men. Participants suggested there was a combination of fear that the police in both Cape Verde and the United States would not help when needed when it goes against the culture to complain; thus, women must take care of themselves in their own way.

Participants also discussed the impact of violence on children. Many suggested that today the increase in youth violence was related to violence in the home. Youth violence was perceived as an American phenomenon that did not occur in Cape Verde until many teens were deported back to the islands. However, participants believe that IPV has a negative impact on the family in general.

Those close to families in Cape Verde suggested that there was more understanding regarding IPV due to NGOs, social workers, and others. As one participant suggested, activism in Cape Verde has raised awareness and “more women, especially young women, are talking about equality, education, violence, and all sorts of things. Mothers and grandmothers are telling them not to accept violence. If a man does not respect you, then

he may hurt you, then don't stay with him." In general, participants noted how there were more laws against IPV, but the police do not take it seriously.

Code of Silence

Study participants suggested there was a strict code of silence about most things. As participants noted "we Cape Verdeans are private people." The strict code of silence about IPV, rape, and other forms of abuse was understood as a byproduct of colonial rule, deep religious beliefs and cultural practices that are centered in patriarchy, where men dominate and women should follow men no matter what happens. In fact, many women suggested that participating in this study was risky for them because it broke the code. The code of silence was perceived as being a part of the culture and breaking the code went against the culture. In general participants shared a range of experiences that included a combination of shame, embarrassment, and hopelessness, all of which contributed to the code of silence. Many participants noted that being open about IPV brought shame to the family and exposed the person to further abuse. Others suggested the code of silence was imposed on all by all – women and men alike. Many participants suggested that women themselves maintained the code of silence. They suggested that women, if they talked about violence, did so to someone they could trust and not be judged by, and the conversation was held in private. Issues related to IPV were never discussed publicly with outsiders, meaning anyone outside the family, because "we are proud people and don't want that to change." Many participants suggested more women might want to talk about violence, but other women and family members would not approve. When exploring how disapproval was expressed participants gave no direct or clear answer. Many of the participants, particularly those whose families entered the United States since the 1970s, suggested there are no borders, "my family in Cape Verde and in the U.S. would know," and for many women, the embarrassment is too much. Other participants suggested in many ways, "you just know that your family would talk about you and what did you do wrong to make your husband hurt you." Another participant suggested, "when I complained to other women I was shushed. I didn't know they kept this awful secret." As one participant suggested "abuse exists and everybody knows about it, do nothing, say nothing, no reporting, you just deal with it and stay with it." Participants suggested keeping the secret hurts all women.

Many participants discussed that the Cape Verdean community knows IPV exists, but women and the community in general suffer in silence. As one participant noted “You see a woman hard and tough you know why, she’s been hurt and keeps the secret, but it can’t stay hidden, it can’t stay in her, it comes out somehow. It comes out in how you see the world, view others, and then you get tough and sometimes mean.” She also added, “be kind to women like this and do not judge them because you don’t know what they have been through.”

Cape Verdean Women’s Strength and Resilience

The theme of strength and resilience was noted in the study and in the literature. A Cape Verdean woman’s strength is one of her virtues. Cape Verdean women have endured a range of hardships that include socioeconomic struggles, Portuguese colonialism, long separation from family members, and because they work very hard both in and outside of the home. Women accept their hardship with honor and pride, but many participants suggest “it takes a toll on her.” Participants overwhelmingly noted that it is Cape Verdean women’s strength that maintains the family during hardships, including IPV. It is this strength that Cape Verdean women use to teach their children not to accept violence. Many of the participants discussed the strength they saw in other women from grandmothers, godmothers, and aunts to family friends. The admiration for women’s strength and resilience extended across the various generations of women in the study, from the youngest to the elders. Older participants discussed how they taught both their daughters and sons to be strong, women not to accept violence, and to be respectful and respected.

Strength and resilience are a part of Cape Verdean women’s identity. A “Good Cape Verdean Woman” was a phrase repeated throughout the study. Participants defined “A Good Cape Verdean Woman” as a strong woman who takes care of her family, has a clean house, and endures hardships whatever they may be. Younger participants suggested, “today’s generation of women are as strong as their mothers and grandmothers, but she is also educated where many in the past did not have the opportunity to go to school. Today, ‘A Good Cape Verdean Woman’ is described as strong and has a master’s degree or she is a doctor and her strength can make change for the future, and still has a clean house.” This sentiment was shared by many younger participants who hoped to work toward social

change and empowerment for women. Also, older participants shared similar outlooks and suggested it was now up to the younger women and men to make change. They expressed support, but also indicated it was difficult to challenge the status quo regarding IPV. As one participant indicated, “we may be older and maybe there is no threat to us, but we women have the strength and we must stand together.”

Discussion

The goal of the Cape Verdean Women’s Project was to learn about Cape Verdean women’s lives in the United States. Intimate partner violence emerged as a major and important theme for exploration. The study findings echo much of the literature on IPV among communities of color (Cho, et al., 2013; Crenshaw, 1991; Fuschel, Murphy, Dufresene, 2012; Gonzalez-Guarda, Vermeesch, Florom-Smith, McCabe, & Peragallo, 2013; Sokoloff, 2008). Like many communities of color, Cape Verdean women have a sense of cultural loyalty, value privacy, believe that violence is embedded in the culture, and are guarded about outsiders, especially those who do not understand the culture.

A growing body of literature explores how and what role culture plays in family violence. The literature suggests that the domestic violence community needs to learn how IPV is defined from the culturally diverse communities themselves and not impose standards or generalizations that all women experience IPV in similar ways (Fuschel et. al, 2012; Grossman & Lundy, 2007; Gulizar & Tabassum, 2013; Parker & Hefner, 2013; Sokoloff, 2008). Study participants struggled with defining IPV; they also suggested it was embedded in the culture, and therefore resistant to change. However, neither culture nor religion is responsible for or causes intimate partner violence for Cape Verdeans or any other cultural group. In fact, participants’ comments that IPV “is part of our culture” are not suggesting that the Cape Verdean culture is inherently violent, but rather are highlighting the cultural acceptance of violence theory previously discussed. The cultural acceptance theory elucidates how cultural elements in any society may support and even promote violence against women. For example, patriarchal beliefs that established rigid definitions for masculinity and femininity, history of colonialism, oppression and violence, womanizing by men, long family separations, lack of job opportunities, and family history of violence are all cultural elements that make families prone to violence. Also, it is a myth

that only women in low socioeconomic strata experience violence, when in fact IPV has no class boundaries. It is not unusual for participants and society in general to struggle with concepts and putting words to the acts of violence they experience. Nor is it unusual to believe that it exists only in one's own culture, especially when the norm is to be silent. The social norm to be silent leads to isolation and very often a sense of hopelessness.

Unlike other communities of color, Cape Verdean women experience social invisibility, which contributes to being protective of their community; and in turn reinforces isolation, a risk factor for intimate partner violence (Thomas, et al., 2010; Thomas, 2014). Part of the challenge for Cape Verdean women living in the United States is they are socially invisible, or sometimes labeled as a subgroup in the United States. Not only does this subgroup social status leave Cape Verdean women invisible and unknown, but it further marginalizes them as outsiders from what is believed to be the mainstream communities of color and white American society. As a result, Cape Verdean women's needs are unknown and unmet by those who could help them. Thus, outsider social status and uncertainty reinforce the Cape Verdean women's code of silence and privacy, and ultimately threaten their safety.

In addition to their outsider social status, Cape Verdean women who speak out about IPV potentially experience negative scrutiny by other women, family members, and the community in general. These issues are exacerbated for Cape Verdean women new to the United States, those who are undocumented, and those with limited education and English language who fear deportation and separation from children. Unlike white women, Cape Verdean women living in the United States who experience violence face unique social circumstances that combine discrimination, oppression, and social invisibility with a sense of loyalty to their culture and partner, a fear of rejection from other family members, and a level of distrust of law enforcement and other intervention/prevention resources.

While cultural competency training has become a best-practice protocol to ensure quality social services, the strategy often results in a one-size-fits-all approach to culturally diverse communities. The problem begins with how culture is defined. Culture has been defined in many ways and there is no single definition; however, it is generally accepted that "culture is learned, shared, and transmitted from one generation to the next and it can be seen in a group's values, norms, practices, systems of meaning, ways of life, and other

regularities” (Kreuter, Lukwago, Bucholtz, Clark, & Sanders-Thompson, as cited in Kline & Huff, 2008, p. 4). Warrior (2008) suggested the problem “is this understanding of culture that has over the past led to the production of the packaged picture of culture based on group characteristics that exclusively focused on the dimensions of race or ethnicity” (p. 540). Another problem is the assumption that culture is somehow uniform and stable, with fixed traditions that are passed down intact from one generation to another, reduced recognition of the diversity within each group, and little understanding of how cultures change over time. Intersectionality and a transnational feminist framework move away from this fixed or static notion of culturally diverse communities. Researchers working in these frameworks understand that all groups’ cultural dynamics are fluid, forever changing, and influenced by many factors, including migrations, political changes, identities and generational differences, and power structures (Thomas, 2014; Kalunta-Crumpton, 2015; Sokoloff, 2008; Warrior, 2005; Warrior, 2008). Cultural competency protocols must take into account the Cape Verdean community’s historical journey with Portuguese colonialism that impacts their identity development and their migration to and struggle with racial classifications in the United States where they are socially invisible, which again impacts their identity and is a part of their oppression and discrimination in the United States. It is also an example of how culture is fluid and how it influences not only one’s worldview, but how the world views oneself. Understanding the group’s cultural complexities explains how we all may or may not subscribe to our cultural values and our culture can be liberating and supportive, as well as at the same time be restricting.

Recommendations

Intimate partner violence is recognized as a multifaceted social problem that requires collaboration among a number of resources, programs, and models all aimed at reducing violence and helping survivors live safely. The CDC proposes the social-ecological model⁸ to prevent violence. The social-ecological model considers intimate partner violence not as an interpersonal relationship problem, but as a broader social

⁸ The Social-Ecological Framework was first introduced by Urie Bronfenbrenner, a psychologist in child development. Bronfenbrenner suggested that human development was connected to the interactions between a social environment of systems – microsystem, mesosystem, exosystem, macrosystem, and chronosystem.

problem reflecting systems of oppression, discrimination, and control, all factors that impact families' risk for violence (Perilla, Serrata, Weinberg, & Lippy, 2012; López-Fuentes & Calvete, 2015; Nichols, 2013). "The assumption is that individuals and environments are inseparably intertwined" (Arnold, Lu, & Armstrong, 2012, p. 11). The social-ecological model includes four levels: (1) individual, (2) relationship, (3) community, and (4) societal. The individual level identifies factors that put families at risk for violence – a history of family violence, immigration status, age, education, income, and substance abuse. The second level examines relationship behaviors that may have risk factors prone to violence – social circles, family members, and partners. The community level explores conditions of the workplace, neighborhoods, schools, and the broader scope of social and systematic oppression and discrimination that contribute to family violence. The development of appropriate and effective prevention strategies must be centered within the community itself and not isolated to a few families who have sought out help. The societal level considers broad social factors such as health, economic, educational, and social policies, as well as historical factors of conditions of discrimination and inequality. Understanding societal conditions is important to developing larger structural policies as well as assisting families in crisis (Arnold et al., 2012; Breiding, et al., 2015; Parker & Hefner, 2013; Perilla et al., 2012).

In addition, participants suggested that service providers need to learn about the Cape Verdean community and their history in order to be able to provide effective intervention/prevention strategies. Working at the community's grassroots, educating the community, developing a Cape Verdean women's network, and cultural competency training are important concepts that should be a part of any intervention/prevention plans, including the social-ecological model.

- **Working at the Grassroots** – includes a number of groups such as social clubs, community groups, church groups, and veteran organizations, which have historically filled the gap between mainstream social service systems and the Cape Verdean community in the United States. They provide an array of services from college scholarships, information on immigration, and economic development to housing. Non-government organizations (NGOs) in Cape Verde also offer services that have empowered women and helped them to become economically

independent. Whether in the United States or Cape Verde, working at the grassroots level builds important collaborative relationships within the Cape Verdean community that can break down barriers, open a dialogue about IPV, and educate providers and community members, which leads to families being safer. Working at the grassroots level with both women and men provides an opportunity to change the dynamics that support violence.

- **Education** – is fundamental to future social change and involves service providers and community members. It builds relationships between the community and service delivery systems. It educates the community about risk factors and behaviors related to IPV. Education programs about IPV should be in various forms and start with children in school-based programs, but go all the way to community-based conversations with both women and men.
- **The Cape Verdean Women’s Network** – would provide a place where women share their experiences, provides support and resources, and is a non-judgmental safe space. For women who report abuse and would become alienated from other family members and the community, the network becomes a place to rebuild and create new relationships.
- **Developing Culturally Relevant Approaches** – is a central feature for all intervention/prevention programs. Cultural competency has become a standard throughout the health and human service industry. While there are many definitions and models, the core principles focus on: linguistically appropriate services, ongoing professional development for service providers, and hiring staff who reflect the communities being served (Thomas, 2014; Jackson, 2002; Office of Minority Health, 2014). The local domestic violence websites and Mass.gov all list the Cape Verdean community as a group they serve both culturally and linguistically. However, cultural competency involves more than being linguistically appropriate, particularly with regards to IPV. For example, cultural competency models have not addressed the inherent power imbalances between service providers and their clients that are embedded in Western white America’s competitive culture. Tervalon and Murray-Garcia (1998) introduced the concept of *cultural humility* that encourages providers to “engage in self-reflection and self-

critique as lifelong learners and reflective practitioners” (p. 96). The cultural humility model is counter intuitive to service providers’ training that often values education and knowledge that encourages service providers to become experts in their fields. This training also reinforces inherent power differentials between service provider and client, which reinforce oppression, especially with women who experience IPV and have lost much of their own power. Also, the “golden rule is that those who participate in cultural competency training gain knowledge; however, there are no experts in this process” (Thomas, 2014, p. 203).

Conclusion

The goal of the Cape Verdean Women’s Project was to explore Cape Verdean women’s life experiences in the United States. Study results reveal the ongoing challenges and hardships with intimate partner violence that Cape Verdean women face. Many themes surrounding IPV were not exclusive to Cape Verdean women and echoed those that other women of color experience, as reported in the literature. However, Cape Verdean women’s social invisibility in the United States adds another layer of marginalization from American society that contributes to a lack of understanding about their history, culture, and commitment to family, all of which are important variables for developing intervention/prevention strategies. All the participants’ suggestions for ending IPV began with respect and noted it must be extended to both women and men. It also means acknowledging and building upon the work that exists in the Cape Verdean community in both the United States and Cape Verde. Cape Verdean women’s strength and resilience was perceived as the foundation upon which to foster social change. Service providers must recognize that theories, training protocols, outreach models, and programs often overlap with each other, and that integrating them properly will require flexibility, coordination, and time to build trust with families and the community in general.

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