

Victim Advocates' Perceptions of Legal Work

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Abstract

Past scholarship has weighed the risks and rewards of legal remedies for victims of domestic violence and sexual assault. Missing from this debate, however, is an analysis of the social incentives for victim advocates to offer legal options to their clients. Preliminary findings show that victim advocates perceive that outsiders respect legal work more than their care work with clients (listening, caring, and empathizing). This study offers three explanations for this phenomenon: (1) the devaluation of women's care work in general, (2) the confidentiality constraints on communicating the value of their care work, and (3) popular assumptions that care work requires professional credentials in order to be legitimate.

Keywords

care work, legal work, victim advocates

Agencies that assist victims of domestic violence (DV) and sexual assault (SA) often help their clients navigate legal options to improve their situation. This can include helping clients exercise civil options (such as protective orders and custody arrangements), criminal options (such as arrest and prosecution), or both. However, past scholarship on DV and SA has shown that legal solutions can have negative unintended consequences (Bennett Cattaneo & Goodman, 2010; Campbell, 1998; Davies, Lyon, & Monti-Catania, 1998; Iovanni & Miller, 2001; Koss, Bachar, Hopkins, & Carlson, 2004; Maier, 2008; Miller, 2003) that can result in costly and inflexible legal arrangements (Buzawa & Buzawa, 1996, 2003; Pence & Shepard, 1999) and place decision-making authority in the hands of prosecutors, magistrates, and judges (Cramer, 2005). Although legal solutions offer victims a powerful and often effective tool over their abusers (Ptacek, 1999; Russell & Light, 2006), many victim advocates are trained to anticipate the potential negative consequences of

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legal strategies before offering them to their clients (Pence, 2001). Although the research noted above has effectively weighed the costs and benefits of legal strategies in regards to clients' outcomes, little work has been done on the social incentives that weigh on victim advocates as they consider which options to offer their clients. Compared to the less tangible ways of helping their clients (listening, caring, and empathizing), offering paralegal advice can become an attractive option for victim advocates to show themselves and others that their services are skillful and effective.

In this article, I will analyze how victim advocates negotiate the social rewards and penalties associated with two different types of services they offer their clients: care work and legal work. First, the victim advocates in this study were trained to engage their clients on a personal and emotional level (care work); this entails listening to them, learning their particular histories of abuse, empathizing with them, and designing "safety plans" (Davies et al., 1998) clients could initiate on their own. Next, if necessary, the victim advocates were trained to explain and offer their clients a number of civil and criminal legal options (legal work). Preliminary findings suggest that although victim advocates understood the risks associated with legal remedies and found care work very satisfying and meaningful, they interpreted legal work as possessing greater social currency with outsiders.

In the discussion, I analyze three aspects of victim advocacy that make legal work so appealing. First and foremost, victim advocates operate in a wider culture that devalues women's care work. Second, confidentiality constraints and the stigma associated with DV and SA inhibit victim advocates' ability to communicate their care work abilities to people outside of their line of work. Third, victim advocates often lack the professional credentials (such as a Master's degree in Social Work and/or Counseling) needed to signify their care work as technical and skillful to outsiders.

Typically, the costs and benefits of legal remedies related to DV and SA are analyzed from the clients' perspective (Are they helpful? If so, how so? If not, why not?). The findings of this study, based on qualitative methods (participant observation and in-depth interviews), can help guide future research on this topic from a different angle: the social incentives that may pull victim advocates toward legal work and away from care work. Understanding the sociological underpinnings of victim advocacy may help scholars of violence against women design future research protocols to measure how and why some services are offered *independent* of the risks and rewards they present to clients.

Methods and Setting

The data in this article are part of a larger ethnographic project concerning staff at an agency that assists victims of domestic violence and sexual assault. I first trained as a volunteer at a nearby agency for 35 hours (during nights and weekends) over a period of 4 weeks—in addition to two half-day "shadow" shifts. After training, I answered the crisis hotline and met with walk-in clients once a week for 3 months.

Through the contacts I established during my volunteer work, I secured an invitation to meet with staff members at a similar, though much larger, agency. I requested permission

to study them while they interacted with each other and clients. In exchange, I offered to help out at the agency wherever I could and fully share the results of my research at the completion of my project. They granted me nearly unlimited access and allowed me to take part in client sessions, observe staff meetings, and ask questions of staff as they worked. I also participated in a number of tasks: Over a period of 14 months at the agency, I answered phones, made photocopies, ran errands, and, on a few occasions, I accompanied clients to court to seek approval of their protective orders from a judge.

Stopping Abuse in Family Environments (SAFE)—a pseudonym, like all names in this article—is an agency that assists victims of DV and SA. At the time, June 2005 to August 2006, the agency had an annual budget of nearly US\$1 million (with 80% from municipal, state, and federal grants, and 20% from private donations) and served a local population of about 60,000 people within a 700 square-mile area. Highly regarded by neighboring social service organizations, SAFE won a regional award for outstanding service the year this study was conducted.

SAFE offered a variety of services to victims and their families, in addition to a batterers' intervention program (Pence & Paymar, 1993). The agency employed between 25 and 30 people who helped clients via a crisis hotline, court advocacy, counseling, support groups, and an emergency shelter. Off-site services included community awareness projects and a youth education program. Staff members were grouped into two categories: those who worked directly with clients (victim advocates, counselors) and those who provided administrative support (fundraising, payroll, volunteer coordination, and program management). The data for this article come primarily from six victim advocates.

The victim advocates at SAFE were not volunteers. They earned an annual salary. However, because they did not have professional degrees, they made less money in the SAFE office (US\$25,000-US\$28,000 per year) than the agency's counselors (US\$35,000-US\$37,000 per year) or codirectors (about US\$45,000 a year) who possessed Master's degrees in either Social Work or Counseling. The victim advocates' "in-house" training consisted of 30 to 40 hours of informational sessions, workshops, and role-playing activities as well as 2 weeks of "shadowing" more experienced staff members around the office. The victim advocates also attended regional conferences (one or two a year) that offered instruction in both care work and legal work. More important, they were trained to attend to the emotional needs of their clients *before* helping them navigate legal remedies. In practice, their job entailed processing nearly 2,000 "walk-in" clients, 40 different "hotline" callers, 850 "court contacts," and 200 domestic violence protective orders per year.

I visited SAFE (and their satellite offices) an average of once a week for 14 months. As a participant and observer, I was present in the main office or shelter about 7 hours per visit. I also accompanied the victim advocates as they worked with clients in court on 12 different occasions (court sessions usually lasted 3-4 hours). The victim advocates introduced me to clients as someone who was researching the agency and shadowing them in the office. I took notes throughout the day (which I expanded and typed immediately afterwards). I also conducted 14 interviews, averaging 75 to 90 minutes each, using a semistructured interview guide (Lofland, Snow, Anderson, & Lofland, 2006). I digitally recorded and transcribed each interview.

All questions and the focus on my observations during fieldwork were guided by an inductive, grounded theory approach (Charmaz, 2006). I was constantly “looking and listening . . . participating and asking” (Lofland et al., 2006, p. 18) in order to identify themes as they emerged. Operating from a symbolic interactionist perspective (Blumer, 1969; Mead, 1934), I looked for ways that staff interpreted and shaped the meaning of their services; specifically, I examined their awareness of popular beliefs that care work is supposedly less skillful or technical than legal work. Symbolic interactionism is a useful theoretical framework for studying victim advocacy because it does not rely on a strictly rational, utilitarian model of human behavior. Victim advocates interpret, negotiate, and act upon legal remedies in a variety of ways, not all of which are dependent on pure cost-benefit analyses—the symbolic value associated with particular kinds of work matters, too.

By not relying on standardized questions, I had more flexibility to search for how victim advocates negotiated the meaning of their work. Participant observation and in-depth interviews allowed me to capture this dynamic process in ways that fixed survey questions could not. Quantitative researchers may find the preliminary findings presented here useful in designing their own standardized survey instruments.

Care Work Versus Legal work

For the purposes of this analysis, I classify the work of the victim advocates at SAFE into two domains: care work and legal work. These categories are theoretical constructions I have designed to offer a clearer view of the social incentives and disincentives associated with different aspects of their job. I define care work at SAFE as listening patiently to clients, giving them control over the conversation, and empathizing with them when appropriate. Conversely, legal work entailed informing clients about how to exercise their legal options, both criminal (such as arrest and prosecution) and civil (such as protective orders and custody arrangements). In practice, the victim advocates rapidly shifted back and forth between care work and legal work. Yet, by distinguishing—conceptually—between their different types of services, I can show how and why legal work was assumed to possess greater symbolic importance with outsiders to the agency.

One case in particular highlights the back-and-forth nature of care work and legal work. In court one day, the judge called Cathleen, a victim advocate, up to the bench to help a woman whose application for a protective order was riddled with errors. In a span of 5 minutes, Cathleen calmed her client (care work), translated confusing legal terminology (legal work), and soothed a cranky baby (care work). Cathleen described her consultation with the client in an interview:

[The client] was in crisis and had her baby there who was crying because it was hungry and tired. And she said, “I’ve been through this before . . . I don’t need help” . . . And I said, “I know you’re in crisis. And I can tell that things are very stressful right now.” But I explained my role as an advocate, and I said, “I really think it would be best to rewrite the order. I can help you with that, we can get you a free attorney who can represent you in the case, and that way you’ll have an order that

can actually be enforced by law enforcement if he violates it. It's accurate." . . . So we re-did it and at the end she was really grateful. . . . I felt really good about that.

Cathleen derived satisfaction from both her care work and her legal work with this client. She believed she would not have been able to help the client without attending to her emotional needs first:

Well, as she was filling it out, I was walking her through it, and her baby was just crawling everywhere, and crying, and hungry, and cranky, and tired. And I said, "Do you want me to hold her?" And she said, "Yes." So I held her and I was able to snap [my fingers] and do little silly things and keep the baby entertained while I was still guiding her through the paper work . . . you could tell that she was relieved to have someone there helping her. And at the end she said something like, "I'm so glad that I ran into you."

Cathleen saw value in both her services. From her perspective, offering legal advice was a form of caring. Yet, Cathleen also admitted that those unfamiliar with victim advocacy would not find her ability to soothe a crying baby as impressive as her ability to edit and revise a legal document.

Outside the office, the victim advocates believed that their paralegal skills were respected more than their emotional skills. For example, when Meg, a victim advocate, described her job to her brother, his response was mixed. Although he valued her knowledge of civil and criminal law, she explained that he dismissed any skills that came from the "heart" or "being emotional":

I think he finally realized that I really did work in the criminal justice system doing this stuff and I really did sit in court and watch all these cases; I really did attend legislative hearings and know a little bit about the law. But I still think that [he believes] my knowledge comes from my experience and my heart . . . that it's just me being emotional. And I think a lot of advocates get that.

Unlike her brother, Meg believed that emotions played an important part in her job. In general, agencies that assist victims of DV and SA encourage and reward employees' care work with clients (Martin, 2005). Yet the positive value of care work inside the office also competes with relatively negative associations that exist outside of the office.

How did the victim advocates come to understand the relative social value of their emotional skills versus their legal skills? Symbolic interactionists contend that different types of work possess no inherent or fixed meaning (Blumer, 1969). Instead, victim advocates negotiate competing perspectives (insiders' and outsiders') and make sense of their services during their interactions with clients, coworkers, and others. In the following section, I will show how the "local culture" (Gubrium & Holstein, 1997) in which the victim advocates operated placed a high value on their care work and rewarded their skepticism of the criminal justice system. Yet, in the discussion, I will show how the structural context in

which DV and SA agencies operate can undermine these beliefs, thus increasing the relative symbolic value of legal work.

The Attraction of Care Work

The local culture of victim advocacy placed a high value on care work. Local culture can be understood as the “set of more or less regularized ways of assigning meaning and responding to things that is collectively derived and available for application within proximate circumstances” (Gubrium & Holstein, 1997, p. 172). As a result, the victim advocates understood the SAFE office as a nurturing space where “emotion-focused” coping skills (Folkman & Lazarus, 1980, p. 219) were respected and rewarded.

Inside the SAFE office, work that entailed “intuition” and “just listening” was interpreted as requiring experience and quick thinking. Heather, a victim advocate, was highly respected in the office for her ability to draw out reticent clients and establish longstanding working relationships with them. She explained that offering her clients a caring and supportive environment was crucial to a successful consultation:

Someone comes in and they are just feeling so overwhelmed and so bad about themselves and their life and things that are going on. And we sit and talk, and they talk. And before they leave, they’ll want a hug or they’ll say, “You know, you really understand.”

Heather’s stated goal was to listen and empathize if needed. She believed this was a valuable and important service. After a different care work session, Heather described how overjoyed she felt: “I want to cry, I’m very emotional . . . those are the pats on the back that keep you going, this is what you work for . . . this is what it’s all about.” Heather believed that “connecting” with clients helped her develop productive working relationships that kept clients safer, longer. Her coworkers agreed: They often sought her advice on how to establish similar emotional bonds with their own clients.

The local culture of SAFE also offered the victim advocates a number of rhetorical strategies to express their concerns regarding legal work. They feared that legal remedies might ultimately “disempower” their clients by depriving them of the ability to “choose between alternative ways of resolving the matter” (Barton, 2003, p. 27; see also Pence, 2001). They also complained that the criminal justice system penalized clients who did not fit the stereotypical mold of passive and compliant victims (Campbell, 1998). During staff meetings and client sessions, the victim advocates often criticized legal solutions as individualistic strategies (Iovanni & Miller, 2001) that may lead to serious unintended consequences (Bennett Cattaneo & Goodman, 2010; Buzawa & Buzawa, 1996, 2003; Campbell, 1998; Davies et al., 1998; Iovanni & Miller, 2001; Koss et al., 2004; Maier, 2008; Miller, 2003; Pence & Shepard, 1999; Ptacek, 1999). In the world of victim advocacy, even successful verdicts can be framed as “exacting a price”:

[Victims] may be dismayed to learn that the record of their police report is public, they are expected to testify about graphic details of sexual assault in open court, and

even rape shield laws fail to guarantee that they will be protected from questions about their social and sexual history when these issues are ruled relevant to determining consent. (Koss et al., 2004, p. 1441)

As a result, the local culture of the SAFE office offered the victim advocates a rhetoric of legal skepticism that framed legal remedies as powerful—yet problematic—solutions to their clients' problems.

At SAFE, this caution in regards to legal remedies was communicated from the codirector in charge of direct service, Kelly, down to the victim advocates in the form of training, supervision, and protocol documents. Kelly repeatedly warned the victim advocates in private sessions not to “push” legal remedies too early during initial consultations with clients:

I try to train the advocates not to just assume that [legal options are] the best option or the first option they think of. Because until they hear the woman's story and her situation and think about what has she tried before . . . they're not going to know whether a protective order is their best option, or not a good option. . . . So it's just critically important that advocates take the time to spend with that woman and hear her story and understand her situation.

Having experienced the temptation to gravitate toward legal remedies earlier in her career, Kelly trained the victim advocates to take a “wait and see” approach:

I go to great pains, very verbose introduction about, “Don't run get the [protective order] forms when the woman walks in! Sit down with her and let her tell her story. Listen to her. And be sure you have a range of options to offer her.”

The victim advocates understood these risks. Heather characterized one client's protective order, for example, as an exercise in futility: “It is not going to help, he's crazy. He got out of jail the other day, spinning wheels in front of her house and cussing her out.” Even sheriff's deputies, whose job it was to serve protective orders to abusers and arrest them if they violated their terms, doubted their effectiveness as a long-term solution. As one deputy who often worked with SAFE said, “When it boils down to it, a [protective order] is still a piece of paper, and some day it is going to expire.”

The local culture of SAFE contained a set of interpretive resources and vocabularies for staff members to understand care work as helpful, satisfying, and meaningful. Yet, despite the positive symbolic value associated with care work inside the office, the victim advocates also knew that outsiders did not share their views. In the wider culture, the victim advocates knew that legal work was seen as more skillful and technical—in short, more valuable.

The Attraction of Legal Work

DV and SA are first and foremost crimes. As a result, offering legal solutions is a reasonable response to victims' concerns. DV and SA agencies nationwide have worked hard to

develop ("Duluth" style) coordinated community responses to help victims in the legal, medical, and educational domains (Pence & Paymar, 1993). The treatment of victims, though not perfect, has improved greatly as a result of these hard-fought victories in public policy. Legislation, such as the Violence Against Women Act (VAWA), has enabled local agencies to hire and train victim advocates who focus primarily on legal issues surrounding DV and SA (Davies et al., 1998, p. 183). However, the sociological dimensions of victim advocacy suggest that legal work may also be appealing to victim advocates for reasons beyond pure utility for their clients.

By helping clients navigate confusing legal procedures, the victim advocates could cite the cognitive, adversarial, and technical duties of their job. As Jesse put it, legal work was appealing because "at least it makes you feel like you are doing something." Although the victim advocates worried openly about the effectiveness and unintended consequences of legal remedies, they still believed this approach was one of the few ways to offer their clients a service that anyone could understand and respect. Whereas outsiders to DV and SA agencies may not understand the value behind a "sit and talk" approach, talking about "restraining orders" and "pressing charges" garnered more respect.

When I asked the victim advocates about what they saw as the biggest difference between attending to clients' emotional needs and helping them with legal tasks, their refrain was that legal solutions offered clients "immediate" and "concrete" results. Although it may be difficult to calculate how much an hour's worth of "talk" helped a client, victim advocates could measure victories in court by months of imprisonment, years of probation, sessions of "batterer's intervention" classes required, or distance (in feet) that abusers must stay away from their clients.

Despite the potential risks involved with legal remedies, courtroom victories were easier to identify and celebrate than their care work with clients. When Jesse, a victim advocate, brought back good news from court, everyone in the office surrounded her in the kitchen to hear her report. In the middle of the crowded room, Jesse said, "It went so well. She got full custody, he has to help her pay the mortgage on her house, and he has to keep the kids on his insurance as long as is possible under the law." Cathleen responded by giving Jesse a "high five." Such visible displays of celebration were rare at SAFE and almost never occurred after successful "talk" sessions with clients. Afterwards, Kelly, Jesse's supervisor, invited her up to her office to recount the good news. Although the case also involved a substantial amount of care work, the judge's decision was easier to cite as "concrete" evidence that Jesse had helped her client in a way that anyone could understand.

Legal work offered the victim advocates a public arena where they could display their expertise. In court, the victim advocates were granted nearly full access to the adjacent rooms and hallways. They often escorted clients through the back door to the hallway where the judge's chambers were located. This private entrance, unlocked by a secret passcode given to the victim advocates, allowed them to enter conference rooms in order to conduct private meetings with lawyers and assistant district attorneys. When court was in session, the clerks made copies of protective orders for them. Between sessions, the victim advocates often accompanied the assistant district attorney into the judge's chambers to discuss cases.

In court, the victim advocates sat near the lawyers, dressed like lawyers, and were often mistaken for lawyers. One day in court, I observed a defense lawyer silently hold up a yellow legal pad with the words: “Are you a DA?” for Lisa, a victim advocate, to see. A few months later, a defense lawyer approached Lisa in court, whispering that his client was willing “to do what he needs to do” in order to avoid jail time. Although Lisa declined to “deal” on her client’s behalf in this instance, victim advocates occasionally used their mistaken identity to their advantage. On another occasion, an abuser accepted, without question, Meg’s explanation that he would have to attend a “batterers’ intervention program, although the terms of this deal had not been settled by his lawyer. When I asked Meg whether she was surprised when he consented to her terms without argument, Meg explained, “He perceived me as an extension of the court system.” She did not disabuse him of this notion.

The victim advocates knew that their legal skills were valuable. After a client told Cathleen she came to SAFE because she could not afford to pay a lawyer to help her file a protective order, Cathleen privately complained to Heather and Jesse in the victim advocates’ office: “Isn’t it messed up that we aren’t lawyers, and we do [protective orders for free], and [lawyers] can charge \$1,500 for it?” As part of their legal duties, the victim advocates faxed legal paperwork to lawyers’ offices, forwarded criminal case files, collected arrest reports, and, in some cases, even photographed clients’ physical injuries. Because they did this legal work on a daily basis, the SAFE victim advocates often knew more of the intricacies of laws pertaining to DV and SA than their clients’ lawyers. In some cases, lawyers asked SAFE victim advocates for advice in court. On one occasion, a client’s lawyer approached Cathleen to inquire whether a particular plea agreement would interfere with her client’s ability to seek a protective order in the future. Cathleen provided the answer on the spot (it would not). On another occasion, a judge asked an assistant district attorney about what type of preexisting legal arrangement a client had with her abuser. Unsure of the answer, he turned to Meg, seated behind him. She stood and told the judge: “There is a [voluntary] consent agreement, not a [protective order].” Questions in court often required immediate, precise, and technical answers, talents not typically associated with care work.

Discussion

Whenever I asked the victim advocates about the attractiveness of legal work, their responses were highly consistent: Legal work offered them “tangible,” “concrete,” and “immediate” evidence that they were helping clients. In the initial stages of my fieldwork, I was content with these answers. However, after months of hearing the same terms come up again and again, I developed a new research question: “Under what structural conditions do ‘concrete’ services—like legal work—become so attractive to victim advocates?”

Below, I will outline three factors that impeded the victim advocates’ ability to derive satisfaction and external praise for their care work with clients. These include the devaluation of women’s care work in general, constraints on communicating their care work

abilities with outsiders, and the role that professional credentials play when claiming care work expertise.

Devaluation of Women's Care Work

Caring for others typically reaps few material rewards at work. In general, sociologists have found that nurturing others is a “devalued and marginalized” skill (Putnam & Mumby, 1993, pp. 39-40; England, Herbert, Kilbourne, Reid, & Megdal, 1994; Kilbourne, Farkas, Beron, Weir, & England, 1994). This applies to both men and women in the workplace. However, women suffer doubly from this phenomenon. First, they are more often funneled into occupations characterized by care work because of the perception that “this undefined, unacknowledged activity [is] central to women’s identity” (DeVault, 1991, pp. 3-4). Second, they receive less compensation in these jobs because of essentialist assumptions that they are “innately” suited to attend to the emotional needs of others. Thus, their supposedly “natural” skills can be dismissed as unskilled labor (Aronson & Neysmith, 1996; Davies, 1995; Mumby & Putnam, 1992; Putnam & Mumby, 1993). As a result, victim advocates, like all women care workers, are caught in a classic “double bind” (Frye, 1983): Their entry into jobs perceived as cognitive and technical is limited by perceptions that they are better suited to care for others, yet when they do care for others they receive fewer rewards on the basis that this work comes “naturally” to them.

Similar patterns regarding women and care work have been well documented in other occupations. Not only are women expected to manage the emotions of others at work (Hochschild, 1983), they receive little credit for this work even when they do it well. In the law firms studied by Pierce (1995) and Lively (2000), office managers expected the female paralegals, because they were women, to devote much of their time engaging in “nurturance and deference to the lawyers for whom they work” (Pierce, 1995, p. 31), yet their abilities received little attention compared to the exploits of the male trial attorneys. In the research engineering firm studied by Fletcher (1999), female staff were surprised to find that their efforts to nurture and sustain coworkers “disappear[ed] from the definition of ‘real’ work because it [was] constructed as occurring naturally, motivated more by affection and emotionality than by intention and rationality” (Fletcher, 1999, p. 28). Time and again, women’s care work is treated as “invisible work” (Daniels, 1987) that yields little external praise. This trend has consequences for women inside and outside the workplace: “The low market value of care keeps the status of women who do it—and, ultimately, all women—low” (Hochschild, 2002, p. 29).

At SAFE, the local culture inside the office framed care work as important and invaluable, yet these interpretations competed with those of the wider culture. As a result, the victim advocates saw legal work as an easier means to convince others that their job was important, meaningful, and skillful.

Confidentiality Constraints and Stigma of Victim Advocacy

It was hard for the victim advocates at SAFE to show themselves, and others, that their care work was legitimate and serious because of the constraints on how much, and with

whom, they could talk about their jobs. Much of the work at SAFE was conducted in private. Beyond visitors, everyone at SAFE (including myself) signed a confidentiality form. The victim advocates stored all client information in a password-protected database. They never used their last names when answering the phones and often declined to identify themselves at all if they suspected the caller had an ulterior motive (such as an abuser seeking information about a client). Before meeting with victim advocates, clients often waited in a private room downstairs with the door closed. In court, victim advocates consoled their clients in empty hallways or unused conference rooms. When meeting clients the first time, the victim advocates often finished their introduction, as Meg did, with “everything you tell me is confidential.”

Beyond SAFE’s confidentiality policy, the victim advocates also found it difficult to talk about or even acknowledge their work outside the office for fear of how others might react. DV and SA are disturbing topics. They call attention to men’s violence against women and atrocities that many people do not want to acknowledge or discuss. Organizations such as SAFE exist in part because those not directly affected by such violence want to keep it that way, preferring that others do the emotional “dirty work” (Hughes, 1984, pp. 343-345) of attending to the needs of victims. Rebecca, on staff at the shelter, described the difficult reaction she received from a store clerk when she was running an errand on her lunch break:

I said, “I work in a DV shelter.” And he was like, “Oh, man, oh, man, that’s horrible, that’s just horrible. You know I have a wife and I would never, ever . . .” like I’m accusing [him]. I definitely get that feeling sometimes. . . . And sometimes people are like, “That’s really hard, I couldn’t do that.” I get that a lot. I feel like it changes the mood sometimes when I say [where I work]. People get more somber.

Rebecca found that there was little middle ground on the topics of DV or SA; people did not want to talk about it, or they wanted to talk about it at length (requiring her to explain the dynamics of DV and SA all over again to a new audience). Even when surrounded by a sympathetic audience, she found that she did not want to talk about her work in generic terms: “We start talking about domestic violence at dinner, and it becomes this big conversation. And I certainly have plenty to say, but sometimes I just don’t want to bring it up or talk about it.” Compared to the emotional dynamics of abuse and assault, plea bargains and judges were easier for the victim advocates to talk about—and garnered more respect—with outsiders.

Lack of Professional Credentials

Unlike the counselors at SAFE, the victim advocates did not possess professional degrees (such as a Master’s degree in Social Work and/or Counseling). The victim advocates did undergo 30 to 40 hours of “in-house” training as well as a few weeks of “shadowing” more experienced staff members around the office. In addition, they attended regional conferences (one or two a year) that offered instruction on both care work and legal work. However, despite their training, the victim advocates were careful not to claim that their care work

skills were on par with those of professional counselors. Cathleen, for example, complained that she sometimes had to “wing it” when engaging in care work. Her strategy was to be a good listener and follow the client’s lead—tactics she considered helpful but not professional counseling techniques. When Lisa transferred from being a victim advocate to being a family counselor, she described her discomfort at lacking the necessary credentials:

But I was going only on intuition and some of the books that I had read, but that is not the same thing as having a Master’s degree in Counseling. . . . I just didn’t feel like it was appropriate for me to be doing therapy. I was basically doing child therapy, that’s not right. And that didn’t feel ethical to me, and I didn’t like it. I didn’t feel like I was qualified.

As a victim advocate, Lisa was confident in her care work skills. Yet this confidence did not transfer to her new position. She suspected that “intuition” was not enough to be a professional counselor and was careful not to appear as if she was practicing without a license.

From a symbolic interactionist perspective, distancing themselves from those with professional degrees ironically served to increase the social value of those credentials and devalue “in-house” training or practical experience. Rebecca’s position in the shelter, for example, entailed the duties of a victim advocate but was formally titled “family counselor” for bureaucratic reasons. Yet she avoided that label: “I don’t know how to do play therapy with two-year-olds . . . [people] ask where I got my MA, and I would say [laughing] I don’t have a Master’s, I have a Bachelor’s in English.” Meg also worried that a licensed practitioner might someday question Rebecca’s lack of credentials: “I’m worried that some MSW [Master’s of Social Work] will say, ‘she’s a what?’” Soon afterwards, Meg joked that she was proud of not having a professional degree: “I’ve got three letters after my last name, KMA: kiss my ass.” In response, the rest of the victim advocates in the office erupted in laughter. Meg’s defiance was a way to establish solidarity with other noncredentialed staff, yet the group’s laughter also signaled their awareness that outsiders placed a greater value on the counselors’ professional status. Aware that they did not possess the professional credentials necessary to convince outsiders that their care work was skillful and technical—like that of a trained counselor with a Master’s degree—legal work became an attractive option to show that their job entailed “a monopoly of some esoteric and difficult body of knowledge” (Becker, 1970, p. 94) and thus entitled them to paraprofessional status.

Conclusion

Summary of Findings

The victim advocates in this study belonged to a local culture that embraced and rewarded care work with clients (listening, caring, and empathizing). However, they also believed that those unfamiliar with DV and SA victim advocacy interpreted legal work as more

skillful and technical. In addition, the victim advocates more often characterized their legal work as providing more “concrete,” “tangible,” and “immediate” evidence that their services were helping their clients in clear and measurable ways. A sociological analysis of their occupation suggests three possible explanations for these phenomena. One, victim advocates operate in a wider culture that devalues women’s care work (England et al., 1994; Kilbourne et al., 1994; Putnam & Mumby, 1993). Two, the confidentiality policies of victim advocacy, combined with the stigma associated with victimhood, impede their ability to communicate their care work successes with outsiders. And three, their lack of credentials (such as Master’s degrees in Social Work and/or Counseling) make it harder for victim advocates to frame their care work as specialized and professional.

Limitations

The findings of this study are preliminary, and thus, limited in a number of ways. First, despite the length of time spent with the victim advocates (once a week for 14 months), the sample size for this study is small ($n = 6$). These results should not be generalized to *all* victim advocates. Some agencies require professional credentials of all their staff and others do not divide their advocacy and counseling divisions in the same way that SAFE does. Also, the data do not support the conclusion that the victim advocates were engaging in legal work *more* than was advisable or appropriate. Instead, these preliminary findings show that their decisions (i.e., which services to offer clients) could potentially be shaped by the symbolic value they associate with care work versus legal work. However, just because victim advocates suspect outsiders respect legal work more than care work does not necessarily ensure that they will suggest legal remedies to their clients earlier and more often. Whether or not perceptions of legal work shape victim advocates’ behavior (i.e., the frequency they offer particular services, such as protective orders) is an empirical question better answered by surveying diverse groups of victim advocates over time.

Implications for Research and Practice

Considerable research has weighed the costs and benefits of using legal remedies to help victims of DV and SA (Bennett Cattaneo & Goodman, 2010; Campbell, 1998; Davies et al., 1998; Iovanni & Miller, 2001; Koss et al., 2004; Maier, 2008; Miller, 2003). On one hand, legal measures carry the weight of powerful institutions to protect victims and penalize abusers. On the other hand, these solutions can sometimes cause more harm than good. Missing from this debate, however, is the perspective of victim advocates and the symbolic value they associate with legal work. The meanings they associate with particular services can serve as an important variable. The preliminary findings presented in this study may help future researchers of violence against women design survey instruments that measure how victim advocates’ decisions to offer particular services are influenced by factors independent of their risks and rewards for clients.

This type of research is not entirely new to studies of DV and SA. Whether or not “no drop” policies improve victim safety, for example, is another important question for

scholars of violence against women. However, an analysis of the incentive structure for prosecutors—the ones who enforce “no drop” policies—is often missing from the debate. Ford (2003) filled this void when he found that such policies serve the interests of prosecutors by offering them a coercive tool over victims. Thus, to better understand the risks and rewards of policies relating to victims of DV and SA, we should also focus our attention on the underlying occupational conditions of the people who administer them.

Victim advocates do not work in a social vacuum; they want to help their clients, but they also want to show themselves and others that their work requires skill and expertise. They work long hours under stressful conditions in exchange for relatively few material rewards. The findings of the study do not suggest that they sought out legal work for reasons of selfishness or vanity. Rather, they wanted to help their clients while also being recognized for their hard work under difficult circumstances. Considering the options available to them, working in and around courtrooms was a readily available strategy to accomplish this. In short, victim advocates want to show that their work matters, and legal work helps them do that in some ways that care work cannot. Opportunities for victim advocates to receive external recognition for their work are few and far between. Their job is defined by privacy and stigma, and when they can talk about their work, they have difficulty finding audiences who understand what it is they do and why. In addition, their lack of professional credentials makes it more difficult to convince others that their work requires more than “women’s intuition.” In court, however, they hold a prominent and visible position through which they can display their skills and wield influence with powerful associates.

These findings can also help us understand workplace behavior in other social service agencies. Female care workers in jobs with few opportunities for external recognition may also gravitate toward offering services that allow them to display skills coded as *skillful* and *technical*. For example, helping clients navigate legal and bureaucratic systems outside the office may offer more rewards than adhering to a “sit and talk” approach behind closed doors. Yet this strategy has consequences. No matter how well women care workers frame their services as cognitive and rational, their care work will still be devalued because of its association with femininity (Johnson, 2005; Lorber, 1994) and essentialist notions that their ability to care comes “naturally.”

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Bio

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