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Why is the Protective Order Project Still in Business; Or, If the Family Justice Clinic has been at it so Long, Why Hasn’t Anything Changed? Domestic Violence as a Continuing Societal Concern

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WHY IS THE PROTECTIVE ORDER PROJECT STILL IN BUSINESS; OR, IF THE FAMILY JUSTICE CLINIC HAS BEEN AT IT SO LONG, WHY HASN’T ANYTHING CHANGED? DOMESTIC VIOLENCE AS A CONTINUING SOCIETAL CONCERN

CHRISTINE M. SCARTZ* AND CHELSEA REESE**

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I. INTRODUCTION

After I graduated from the University of Georgia School of Law in 1994, with the mentorship of the late, influential and irreplaceable Professor Milner S. Ball, I used Georgia’s new Family Violence Act¹ to develop the Protective Order Project as a subset of the work done in Professor Ball’s Public Interest Practicum. In 1995, with the Law School as my sponsoring organization, I received a National Association of Public Interest Law² Equal Justice Fellowship to develop the Project as a self-supporting legal clinic. Together with law students, I embarked on a two-year journey to provide free, quality representation to indigent victims of domestic violence in their Athens-Clarke County and Oconee County protective order cases.

Over the next two years at the Project (affectionately, if somewhat unfortunately, known as POP), the students and I spoke to hundreds of prospective clients. The prospective clients told us about frightening physical violence and desperate financial situations. We were hearing descriptions of acts of domestic violence³ for the first time, and many of our clients were telling their stories in public for the first time. Armed with Georgia’s Family Violence Act and buoyed by a growing national awareness of the issue,⁴ we worked hard for our clients, thinking we would see significant strides made towards decreasing domestic violence in our community. I believed that if more and more victims came forward and used protective orders to ensure their safety and

³ The terms “domestic violence,” “family violence,” “intimate partner violence,” and “domestic abuse” have been used interchangeably throughout this article and should be read as having the same definition.
stability, the community would evolve into a place where domestic violence decreased because it was brought into the light and addressed effectively.

Although the work was not yet done, when my fellowship ended in late 1997, I left the POP to pursue other professional and personal avenues. The POP continued as part of Professor Alexander Scherr’s developing civil clinics program. Eighteen years later, the Family Violence Clinic, as POP had come to be called, needed a new director. I came back to the law school and the Athens-Clarke County community to work with Professor Scherr and the students. I was excited to discover how the work of the Clinic had changed, to learn what great strides had been made in domestic violence legal practice, and to see how working with law students had evolved since the late 1990s.

Things had indeed changed. As a forty-something clinical assistant professor I was faced with laptop screens between me and my students’ faces in the classroom, competing with students’ text messages for the students’ attention, and instant fact-checking of all my statements. As a domestic violence attorney, I was faced with new rules for the admission of social media evidence, text messages being the primary tool to threaten someone, and the emergence of stalking and cyberstalking as elements in nearly every client’s story. The Clinic office had undergone a massive technology upgrade—the POP copy machine didn’t have a “sort” function and now the Clinic had laptops and mobile printers so we could meet clients anywhere. Whereas POP students used to have to fax copies of protective orders to each law enforcement agency serving the places from which our clients might have to call for help, the Clerk of Court’s office was now required by law to send all protective orders to the Georgia Protective Order Registry to give instant, state-wide accessibility to court orders.5

In addition to changes in law students and Clinic logistics, the state and local communities changed how they addressed domestic violence. By the time I returned to the law school, law enforcement officers received regular training on responding to domestic violence

5 O.C.G.A. § 19-13-53(b) states: “The clerk of the issuing court shall electronically transmit a copy of the protective order or modification thereof to the registry as expeditiously as possible but no later than by the end of the next business day after the order is filed with the clerk of court.”
incidents, both as part of the Peace Officer Standards Training to maintain their certification\(^6\) and as part of local opportunities for continued education.\(^7\) Beginning in 2015, Protective Order forms were developed by the Council of Superior Court Judges,\(^8\) required to be uniform state-wide, and available at all superior court clerk’s offices\(^9\) as well as online.

Of all of the changes, I was most surprised to learn that the Clinic is still so desperately needed by our community. Not only did my idea that the POP would put itself out of business prove to be stunningly naïve, but the number of clients served by what is now called the Family Justice Clinic has increased over time. In each of the past three years, the Clinic has received over 300 distinct prospective client inquiries,\(^10\) meaning that since I returned to the Clinic in July 2015 until the present, over 1000 people\(^11\) have sought services and advice on domestic violence-related legal issues. Why, I am led to wonder, hasn’t anything changed?

On any given day, the Family Justice Clinic receives from one to five phone calls from new prospective clients. On the other end of the phone, we encounter any number of domestic violence-related issues. The caller may be a woman who has finally called the police after years of abuse. She may not know exactly why she is calling, only that the police handed her the Clinic’s card before they left with her husband in handcuffs. The caller might also be a father who is worried about the abuse his son is suffering at the hands of his ex-wife’s new partner. The caller may be a grandmother who is reaching out to find help for her teenage granddaughter who visits her home with poorly concealed bruises.

While the voices and stories we hear on the phone vary, all callers have one thing in common: they are experiencing some of the roughest moments of their lives. In their moment of crisis, they have


\(^7\) For example, the Athens-Clarke County Police Department hosts an annual domestic violence mock trial exercise in conjunction with the Athens-Clarke County Solicitor General’s Office.

\(^8\) O.C.G.A. § 19-13-53(a).

\(^9\) O.C.G.A. § 19-13-3(d).

\(^10\) Records of the Family Justice Clinic, 2016-2018 (on file with author).

\(^11\) Id.
reached out to us for help. Our goal is the same for all callers — to provide some sort of assistance, suggest some answers to their questions, or point them in the direction of additional information and resources.

The overall mission of Family Justice Clinic has recently expanded to providing quality, no-cost representation to low-income clients with family law issues related to family violence.\textsuperscript{12} A narrower objective, and the primary emphasis of our work, is to provide legal representation and advocacy to victims of domestic violence who are seeking protective orders for immediate protection from their abusers. This works toward the broader goal of aiding victims in taking the first steps of permanently leaving their unhealthy relationships and beginning the process of healing. Domestic violence comes in many forms, as does its effects, and domestic violence remains prevalent and ever-present in our society. A desire to address this concern is woven in the fabric of all of the Clinic’s work.

This essay proceeds in three parts. It begins by exploring the definition of domestic violence and its relationship to protective orders under Georgia law, as well as examining demographic data. Next, it explores the effects of domestic violence. It then moves to focus on the central question of why domestic violence is still so prevalent in our culture today. The essay concludes by reinforcing the necessity of the Family Justice Clinic and programs like it.

II. LEGAL VS. POPULAR DEFINITIONS OF DOMESTIC VIOLENCE AND PROTECTIVE ORDERS

A major difference between the law students currently in the Clinic and those with whom I began the work with many years ago is that current law students have grown up in an era where domestic violence has always been a crime, and October has always been Domestic Violence Awareness Month.\textsuperscript{13} The students come into

\textsuperscript{12} See Kellyn Amodeo, \textit{UGA Family Justice Clinic Helps Domestic Violence Victims} (June 5, 2018), https://news.uga.edu/family-justice-clinic/ (noting that the Family Justice Clinic provides legal support to low-income domestic violence victims in Athens-Clarke and Oconee counties for no cost).

\textsuperscript{13} See \textit{DVAM History, Nat’l Resource Ctr. on Domestic Violence}, https://nrcdv.org/dvam/DVAM-history (last visited Apr. 12, 2019) (noting that the first Domestic Violence Awareness Month was in October 1987).
the Clinic with what could be called a popular culture definition of domestic violence—one that has been shaped primarily by what they have read and seen in the media. The first thing they must learn is how the law defines domestic violence.

Domestic violence is “a pattern of behavior used by one partner to maintain power and control over the other partner in an intimate relationship.”14 More specifically, domestic violence is the “willful intimidation, physical assault, battery, sexual assault, or other abusive behavior as part of a systematic pattern of power and control perpetrated by one intimate partner against another.”15 This phenomenon, also referred to as intimate partner violence, is very broad in nature. Despite a popular perception that it is limited to physical violence, intimate partner violence can include emotional, verbal, or economic threats and coercion as well. In many situations, it also includes sexual violence.

Importantly, the legal definition of domestic violence varies from that of the popular culture definition. Under Georgia law, specific circumstances are required for a domestic violence victim to obtain a protective order against an abuser.16 The Georgia Family Violence Act outlines the parameters, and the requisite criminal acts are enumerated in the Code section.17 These acts committed by an abuser against a victim include any felony or enumerated misdemeanors, such as battery, simple battery, simple assault, unlawful restraint, criminal trespass, or criminal damage to property.18 The Act also outlines the relationship that must exist between the victim and the abuser in order for the victim to qualify for a family violence protective order. In Georgia, a familial relationship exists between persons who are living or who have formerly lived in the same household, parents of the same children, past or present spouses, parents and children, stepparents and stepchildren, foster parents and foster children, or siblings.19

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17 Id.
18 Id.
19 Id.
Also included in the broad, popular definition of domestic abuse are acts of stalking.\textsuperscript{20} Stalking and physical violence are often closely intertwined in the lives of victims of domestic abuse. Many victims are stalked by their partners after leaving the relationship or may be stalked while still in the relationship leading up to a more serious violent event. In 2017 in Georgia, 76\% of female intimate partner homicide victims experienced at least one episode of stalking in the year prior to their deaths.\textsuperscript{21}

Similar to the physical aspect of domestic violence, there is also considerable variation between the popular definition of stalking and the legal definition. Under Georgia law, “a person commits the offense of stalking when he or she follows, places under surveillance, or contacts another person at or about a place or places occupied by that person without the consent of the other person for the purpose of harassing and intimidating the other person.”\textsuperscript{22}

The term “harassing and intimidating” means “a knowing and willful course of conduct directed at a specific person which causes emotional distress by placing such person in reasonable fear for such person’s safety or the safety of a member of his or her immediate family, by establishing a pattern of harassing and intimidating behavior, and which serves no legitimate purpose.”\textsuperscript{23} While it may be straightforward for a victim to know when he or she is being stalked, under Georgia law, it is complicated to prove even under the preponderance standard in a protective order case.\textsuperscript{24}

A victim of stalking is able obtain a protective order under Georgia law just as a victim of family violence.\textsuperscript{25} However, the stalking protective order requirements, differs from those of a family violence protective order. First, physical contact or violence is not required to obtain a stalking protective order. Rather, only a pattern of behavior that fits the definition of stalking is required. Next,

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\textsuperscript{20} Id.
\textsuperscript{21} GEORGIA COMM’N ON FAMILY VIOLENCE & GEORGIA COALITION AGAINST DOMESTIC VIOLENCE, GEORGIA DOMESTIC VIOLENCE: FATALITY REVIEW PROJECT 1 (2017) (hereinafter GEORGIA COMM’N).
\textsuperscript{22} O.C.G.A. §16-5-90(a)(1).
\textsuperscript{23} Id.
\textsuperscript{24} O.C.G.A § 19-13-3(3).
\textsuperscript{25} O.C.G.A. § 16-5-94.
there is no requirement of a familial relationship. Additionally, a typical stalking order simply forbids the respondent from contacting or being around the petitioner. The expanded remedies available under the domestic violence protective order statute are not authorized by the stalking protective order statute. Thus, issues of child support, child custody, or other related matters that may be of concern to a victim who is in a family relationship with her stalker will not be addressed in stalking protective orders.

III. MECHANISMS OF DOMESTIC VIOLENCE

One of the most pressing questions that everyone, including Clinic students, has regarding domestic violence is why? Why do people harm those with whom they have the most intimate relationships? While there is no single, clear reason, we can come close by describing how — the clear patterns present in the process and mechanisms of intimate partner violence.

One time-tested method of understanding the mechanisms of intimate partner violence is the Power and Control Wheel. First developed in 1984 by Domestic Abuse Intervention Programs (DAIP) in Duluth, Minnesota, the Power and Control Wheel has been used for decades as a way to describe battering for victims, offenders, practitioners in the criminal justice system and the general public. The outer layer, or “rim”, of the wheel holds physical and sexual violence, while power and control lie in the center. The “spokes” of the wheel include several methods abusers use along with the physical violence to gain power and control. These methods of intimidation and manipulation take many forms.

26 Intuitively this makes sense. Physically violent crimes such as battery exist between strangers, but it is the intimate or familial relationship between the victim and the perpetrator of domestic violence which gives domestic violence crimes their special characteristics. The crime of stalking, however, is characteristically the same whether the target and the perpetrator know each other or are total strangers.

27 Since stalking is one of the enumerated misdemeanors under Georgia law that makes a victim eligible for a family violence protective order, the Clinic always advises victims of stalking who have a qualifying relationship with their stalkers to file for a family violence protective order to take advantage of the expanded remedies available there. See O.C.G.A. § 19-13-4(a)(1).


For example, an abuser may threaten to commit suicide if the victim leaves the relationship. While such a threat may reflect the genuine feelings of the abuser, it is emotionally taxing on the victim and likely to cause the victim to remain in the relationship despite it not being in his or her best interest. An abuser may also isolate the victim from his or her family and control his or her every move. The abuser may threaten to take the children away, or threaten to make a report to the Department of Family and Children Services. The abuser may control all the financial resources and deny access to them as punishment. The abuser may be engaging in constant verbal degradation.

Another long-standing way used to explain the mechanics of intimate partner violence is to divide the timeline of an abusive relationship into three stages that together create “The Cycle of Domestic Violence.”\(^ {30} \) In the first phase, the tension between the victim and abuser begins to build.\(^ {31} \) During this stage, the violence in the abuser’s reactions to minor occurrences begins to escalate. In the second, shorter stage, the tension culminates in an explosive manner.\(^ {32} \) The most severe physical abuse usually takes place during this stage. In the third and final phase, known at the “honeymoon phase,” the violence deescalates, and the abuser often becomes very apologetic.\(^ {33} \) However, this calm phase may not last long. Nearly anything or nothing at all can shift the abuser out of this relative calm. Soon after the peaceful period, the tension begins to build again, and the cycle begins anew.

The Cycle of Domestic Violence and the Power and Control Wheel combined create a fairly accurate picture of the general, underlying mechanics of domestic violence. The stages of the cycle coincide with the amount of control the abuser feels they have at any given point in time.\(^ {34} \) When an abuser feels they are losing power over the victim, they may shift from the forgiveness stage to the tension building stage.\(^ {35} \) As that power continues to decrease in the abuser’s

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\(^ {31} \) Id.

\(^ {32} \) Id.

\(^ {33} \) Id.

\(^ {34} \) See id. (noting that in abusive domestic relationships “men tend to use violence to gain or keep control over their partners”).

\(^ {35} \) See id (describing the “honeymoon phase” and the “tension-building phase”).
eyes, they shift even further into the explosive stage.\textsuperscript{36} After a violent attack, often an abuser feels they are back in control because the victim’s fear is at its height.\textsuperscript{37} From here, they shift into the forgiveness phase, where they are less violent because they feel safe and in control.\textsuperscript{38}

\textbf{IV. DEMOGRAPHICS/STATISTICS}

Again, law students come into the Clinic knowing basic information about domestic violence. They know it affects thousands of men and women across the nation. They know that according to recent studies, one in four women experience intimate partner violence at some point in their lives.\textsuperscript{39} They know that the number is slightly lower for men—one in nine men are subject to intimate partner violence\textsuperscript{40}—but that men are victims of domestic violence, too. The students are not surprised to learn that on a typical day, domestic violence hotlines nationwide receive over 21,000 calls.\textsuperscript{41} They understand that sadly, but also significantly, these are only the incidents that are reported and that the actual number of affected persons is likely much higher. The students intuitively know that intimate partner violence is just as prevalent locally, in the state of Georgia, and most are unsurprised to learn that Georgia ranks ninth in the nation for the rate at which women are killed by men.\textsuperscript{42}

What Clinic students often have to learn, however, is that domestic violence does not discriminate based on age, race, or socio-economic level although some groups are affected at a higher rate. For example, the majority of domestic violence victims are married.\textsuperscript{43} Additionally, women between the ages of 18 and 24 are

\textsuperscript{36} Id.
\textsuperscript{37} Id.
\textsuperscript{38} Id.
\textsuperscript{39} \textsc{The Nat’l Domestic Violence Hotline}, https://www.thehotline.org/resources/statistics/ (“1 in 4 women (24.3%) and 1 in 7 men (13.8%) aged 18 and older in the United States have been the victim of severe physical violence by an intimate partner in their lifetime.”).
\textsuperscript{40} Id.
\textsuperscript{41} \textit{Domestic Violence in Georgia}, \textsc{Nat’l Coalition Against Domestic Violence}, http://www.speakcdn.com/assets/2497/georgia.pdf (last visited Apr. 12, 2019).
\textsuperscript{42} Id.
\textsuperscript{43} \textsc{Georgia Comm’n}, \textit{supra} note 21, at 27.
more likely to suffer from abuse. Certain cultural groups are also more affected. African American females experience intimate partner violence at a rate 35% higher than that of white females. Higher rates are also found among for Asian and Latina women.

V. Effects of Domestic Violence on Victims And Families

The effects of intimate partner violence cannot be overstated. One significant effect on victims is the idea of learned helplessness. This is a feeling of powerlessness, often accompanied or triggered by low self-esteem. These feelings are the result of repeated abuse. The helplessness can also stem from unsuccessful attempts to leave the relationship.

While domestic violence affects all demographics, the effects on minority and low-income women are distinct. There are higher levels of poverty among these women. In many cases, women in this group also have lower levels of education. These factors contribute to the amount of power an abuser has over the victim. This control may be expressed through economic control, degrading emotional abuse, or other manipulative tactics.

Domestic violence also has profound effects on children. Millions of children are exposed to domestic violence each year.

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44 Supra, note 39 (“Females aged 18 to 24 . . . experienced the highest rates of intimate partner violence.”)
46 See id. (noting that 81.1% of Asian and Pacific Islander women reported experiencing at least one form of intimate partner violence in the past year).
48 Id.
49 Id.
50 Jamilia K. Stockman, et. Al., Intimate Partner Violence and its Health Impact on Disproportionality Affected Populations, Including Minorities and Impoverished Groups, 24 J. WOMEN'S HEALTH 62, 62–63 (noting that ethnic minority women are disproportionately affected by intimate partner violence and are more likely to live in poverty).
51 Id.
52 See Gonzales & Corbin, supra note 47, at 409, n.13 (noting that a method of control used by abusers is “economic abuse”).
53 Id.
54 See id. at 406 (“[E]xposure to [domestic violence] can cause significant physical, mental, and emotional harm with long-term effects that can last well into adulthood.”).
Children are malleable and impressionable, and exposure to violence and manipulation can have very damaging effects. Children who are exposed to violence in the home may exhibit aggressive behavior or suffer from post-traumatic stress disorder. Other common trauma-induced symptoms include depression, low self-esteem, and aggression. These effects are both immediate and long-term. These children are much more likely to have behavior issues in school and elsewhere. Many eventually find themselves in the juvenile justice system. This may be due to a lack of parental support and supervision or due to behaviors learned from their environment. Children in violent households may suffer not only from the emotional and psychological effects of witnessing abuse, but they may also be the victim of abuse themselves. Many women who are being abused misplace their anger and unprocessed emotions on their children via physical discipline. Suffering abuse produces the same devastating effects as witnessing it, often at an even higher level.

VI. THE CONTINUING PREVALENCE OF DOMESTIC VIOLENCE

In the midst of domestic violence and its devastating effects, there are also numerous resources to help the victims. There are hotlines, shelters, community centers, and legal aid clinics. In the state of Georgia alone, there are over sixty domestic violence organizations. However, despite the plethora of resources, intimate partner violence remains widespread. Several factors contribute to this seemingly constant cycle of abuse.

55 Id.
56 See id. at 413-414 (“The psychological impact . . . can manifest itself as post-traumatic stress disorder (PTSD) or other psychiatric disorders . . . .”).
57 See id. at 413.
58 Id.
59 See id. (“They are . . . likely to . . . exhibit aggressive and regressive behavior in school, and behave delinquently as teenagers.”).
60 See id. at 424 (“[C]hildren exposed to domestic violence are more likely to . . . enter the juvenile justice system for violent and nonviolent crimes.”)
61 See id. at 415-16 (“[B]attered [women] are significantly more likely than non-abused mothers to neglect or abuse their own children.”).
First, domestic violence has profound effects on children. This harm may manifest in several forms. For some children, it may create a pattern of learned aggression that follows them into adulthood. For others, it may leave unprocessed trauma. Many victims of childhood trauma turn to substance abuse as a coping mechanism as they enter adulthood. The presence of substance abuse makes abusive partners even more dangerous. Any combination of these factors is especially dangerous. The ultimate result of this childhood trauma caused by domestic violence is a generational cycle of domestic abuse. Children who witness or experience domestic violence are more likely to become victims or perpetrators of domestic violence.

This may explain why domestic violence is still so prevalent. Even when we are able to assist a victim in ending an abusive relationship, there is no way to know whether the children were removed from the environment before the trauma was solidified. With this in mind, one of the most important goals of domestic violence advocacy is to reach victims as early in the abusive relationship as possible. The sooner a parent is out of the abusive relationship, the less trauma a child is likely to encounter. However, because some level of trauma is inevitable, continued attention to trauma symptoms a child exhibits afterwards is also essential. Proper treatment of the symptoms is also necessary to combat the generational cycle of abuse.

Another reason domestic violence remains prevalent is because of the ways it affects women of color. Though women of color are affected at higher rates, they are much less likely to seek help. A

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63 See supra notes 4-49 and accompanying text.
64 See Gonzales & Corbin, supra note 47, at 418–19 (“Children who have seen their mothers get abused are at a high risk for alcohol and drug use. . . .”).
65 See Lisa Lightman & Francine Byrne, Courts Responding to Domestic Violence: Addressing the Co-occurrence of Domestic Violence and Substance Abuse: Lessons From Problem-Solving Courts, 6 J. CTR. FOR FAMS., CHILD., & CTS. 53, 54 (2005) (“Alcohol and drug use has been associated with greater severity of injuries and increased lethality rates when present in conjunction with domestic violence.”).
66 See Gonzales & Corbin, supra note 47, at 412 (noting children’s adaptations “last the child a lifetime and assist in continuing the cycle”).
67 See supra note 45 at 2 (“African American females experience intimate partner violence at a rate 35% higher than that of white females, and about 2.5 times the rate of women of other races. However, they are less likely than white women to use social services, battered women’s programs, or go to the hospital because of domestic violence.”).
combination of factors contribute to this phenomenon. Women of color are subject to higher levels of poverty, for several historical and systemic reasons beyond the scope of this piece. This increases their financial dependency on the abuser while simultaneously decreasing knowledge of and access to resources and assistance.

There are also cultural factors that result in women of color being less likely to seek assistance. These include strong family structures to support family members, patriarchal ideals, strong religious beliefs, strong loyalty to family and to the race as a whole, societal expectations to be “strong”, distrust of law enforcement, skepticism that intervention services are not culturally or linguistically competent, and more recently, fear of deportation, among many other factors. Each of these factors contributes to the persistence of domestic violence. Efforts to promote awareness among these populations as well as culturally sensitive approaches are necessary to address this disparity.

VII. THE ESSENTIAL ROLE OF THE FAMILY JUSTICE CLINIC

The Family Justice Clinic plays an essential role in addressing the ongoing prevalence of domestic violence as our work addresses all of the issues discussed above. The Clinic serves victims of color, low-income victims, and victims with children.

Our setting in Athens-Clarke County positions us to address vulnerable populations. Athens-Clarke County is 52.5% female. It is 27.5% African American. 37.8% of Athens-Clarke County residents live below the poverty line. The median income per household is $33,060. Over the past five years, well over half of the Clinic’s clients have been women of color. Virtually 100% of its clients are no- or very low-income. By serving this community, the Clinic is serving women who have both cultural and economic barriers to seeking assistance. Our work helps to dissolve this

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68 See id. at 1.
69 Id.
70 See id. at 1-6.
72 Id.
73 Id.
74 Id.
economic barrier by providing our services free of charge. This is one of the key advantages to a student-run clinic. The Clinic also strives to dissolve cultural barriers by offering Spanish speaking advocates and culturally aware and diverse advocates. This is an additional benefit to a student-led clinic. The students inevitably come from diverse backgrounds and provide unique perspectives. Another benefit to a legal education clinic is the relationship with other clinics at the law school. One example at the University of Georgia is the Community Health Law Partnership Clinic (HeLP) Clinic. The HeLP Clinic aids clients with immigration issues, dissolving another barrier that may stand between a victim and her safety.  

Furthermore, approximately 57% of the misdemeanor domestic violence criminal cases in Athens-Clarke County in 2017 were designated “fast track”, meaning that the defendant’s pending case was not his or her first domestic violence arrest. As a result of the close working relationship between the Solicitor General’s Office, which prosecutes misdemeanors, and the Clinic, the Clinic often serves victims who have been plagued by abuse for extended periods of time. This is particularly true when we consider unreported incidents. Many of our clients reveal to us that they have suffered countless attacks that they declined to report or were prevented by their abuser from reporting. The services the Clinic provides are the first step in breaking the cycle of abuse.

The majority of the Clinic’s female clients are mothers. These are perhaps the most vulnerable clients because their children are at risk of perpetuating the generational cycle of domestic abuse. While there are many services available to domestic violence victims, protective orders are unique in that they provide a layer of protection to the children as well. The abuser is often barred from the children’s schools and in some cases is not allowed to have any contact with them. While it is impossible to undo the trauma a child may already have faced, our work does help minimize future trauma.


76 Conversation with Athens-Clarke Cty. Solicitor General’s Office Victim Witness Advocate Program Director Amelia Addison-Rushton (Sept. 13, 2018) (notes on file with authors).

by removing the child from the environment. This is crucial to breaking the generational cycle, especially because the majority of the Clinic’s clients’ children are under the age of ten. It is crucial that they are being removed for this environment at a young age. Hopefully, this will make them less likely to become perpetrators of abuse.

Importantly, our services go beyond protective orders. The Family Justice Clinic is the current iteration of what was known first as the Protective Order Project and then the Family Violence Clinic. Over the years, as its mission expanded, the name of the Clinic was adjusted to reflect this. Currently, the Clinic’s work has expanded to encompass more than just protective orders; it now provides services to victims of domestic violence in related family law issues, including divorce, legitimation, and juvenile court custody cases. In a way, this expansion also addresses the deeper roots of unhealthy families. A family’s issues are often much deeper than the violence that is litigated in protective order cases.78 Helping the families through other domestic relations issues is the next step in helping the family reach stability. For example, if an unmarried young male is being abused by his child’s mother, it is crucial that he gets help not only obtaining protective order, but also legitimating the child. Through this process, the father can gain custody of the child and place the child in a healthier environment. The Clinic also often helps victims of domestic violence divorce their abusive husbands. This addresses a barrier that keeps many victims from leaving the abusive relationship.

Intimate partner violence is a troubling, but prevalent issue. Despite the growing awareness and resources available to victims, there are lasting effects and barriers that keep the issue at the forefront of society. The Family Justice Clinic is actively combatting the issues that keep domestic violence alive. The Clinic, and programs like it, are essential to making progress towards the goal of deceasing domestic violence.

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