



# THE WEITZMAN CENTER

A PATH TO GUIDANCE AND HEALING

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A *CARE KIT* FOR VICTIMS  
OF UPSCALE VIOLENCE

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**The Weitzman Center's** logo reflects half of the labyrinth in Chartres Cathedral. Dating back to 1200 A. D., it is the largest and most well preserved from medieval France. For centuries pilgrims have walked it, sometimes on their knees, seeking spiritual renewal.

Labyrinths are found in and transcend all sacred cultures of the world because they are grounded in consciousness. Walking a labyrinth is often a mysterious experience. It can change you overall, seeding new directions, providing intuitive glimpses that signal some transformation is occurring. This field of awareness often leads to an insight, a new feeling, and a willingness to move forward in life.

The Chartres labyrinth was chosen by our Center because it so clearly represents the quest for inner strength, and courage to emerge from unspeakable abuse.

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## ABOUT THE WEITZMAN CENTER

It is often assumed that wealth, career success or educational accomplishments will shield a woman from domestic abuse. Nothing could be further from the truth.

In 1992, psychotherapist Susan Weitzman, Ph.D., began researching domestic violence in upscale marriages and found an unexpectedly large number of victims who were trapped by circumstances that are generally envied. She worked with and interviewed hundreds of women and eventually wrote the groundbreaking book, *Not to People Like Us: Hidden Abuse in Upscale Marriages*.

The outpouring of response to her work encouraged Dr. Weitzman to explore the feasibility of establishing a center specifically for this population. In November, 2001, **The Weitzman Center** was incorporated as a 501(c)(3) not-for-profit organization.

### Domestic Abuse Has No Boundaries

The course of upscale abuse differs from other socioeconomic groups, having profound implications for understanding the true nature of violent behavior in these families. Lives are threatened and families are torn apart, but the abuse remains well hidden. People keep quiet as shame takes root. Abusers wield significant power, having the resources to engage in long and frivolous legal battles. It is not unusual for sole custody of the children to end up in their abuser's hands. Medical, law enforcement, social service providers and the legal system often do not think of these abused women as victims.

### A Path to Guidance and Healing

Until Dr. Weitzman started her research, upscale violence was largely ignored. These victims have been trapped by their own silence and by the myth that domestic abuse does not happen to people who have so much going for them. The need for a place like **The Weitzman Center**—the first organization of its kind—became obvious.

National outreach programs, such as this *Care Kit*, along with presentations, lectures, and workshops, are how **The Weitzman Center** serves abused victims locally while offering education, training and connections nationally.

### About the Author and Founder



Susan Weitzman, Ph.D., L.C.S.W., is a psycho-therapist, educator, researcher and national lecturer. She teaches at the University of Chicago's Graham School for Continuing Studies and Loyola University's School of Social Work in Chicago. She was on the clinical staff of the Department of Outpatient Adult Psychiatry at the University of Chicago for 12 years. Dr. Weitzman specializes in and lectures on the topics of attachment and separation, and addictive and abusive relationships. Her decade of research has resulted in her groundbreaking work, *Not to People Like Us: Hidden Abuse in Upscale Marriages* (Basic Books, 2000). National media coverage led to a documentary movie, now in development.

Dr. Weitzman lectures and conducts workshops nationally and runs intensive weekend retreats for women recovering from upscale abusive relationships. She is the recipient of numerous rewards for her work including Illinois Social Worker of the Year (2002).

## There Is Much to Be Done

Until **The Weitzman Center** was incorporated in November 2001, no other organization was working solely to inform helping professionals and the public about upscale violence. We are here to offer hope and assistance and change the face of what we, as a culture, think of as domestic abuse. Violence against women is not limited and defined by economic or educational boundaries. It can, and does, happen to “people like us.”

## WELCOME

By whatever means you have come upon this package of information, we are glad that you did! This *Care Kit* explains upscale violence, the work of our organization, and resources available to those seeking help.

**The Weitzman Center** (TWC) is comprised of individuals who are dedicated to increasing awareness about the hidden abuse in upper educated, upper income marriages and families—people who, from outward appearances, seem to have “everything going for them.” Yet, the hidden abuse that takes place behind these closed doors often leads to physical injuries and emotional scars—even death.

The astounding lack of understanding and acknowledgment of this phenomenon among helping professionals results—too often—in women being inadvertently re-victimized by the very systems and professionals that ought to be in place to help the abused. Everyday across the nation, women are losing custody of their children, as they do not have the resources to fight frivolous lawsuits. More often, they are becoming impoverished and overwhelmingly depressed in their efforts to fight injustice and abuse by partners who exploit them further through the legal system. Isolation, a by-product of this lack of awareness by professionals, leads to more hopelessness, fear, and further depression.

## OUR MISSION

**The Weitzman Center** offers support, information and referrals to victims of domestic violence in upscale families, and provides resources and education for the helping professionals who work with them.

### A Message from Dr. Weitzman

*We commend all the professionals who have taken, and continue to take, an active role in thwarting this often silent but widespread and sometimes deadly problem. To those of you just beginning to learn about domestic violence in upscale families, remember that you may be the future source of hope for countless individuals. And to the courageous survivors as well as those in the earliest stages of seeking a path to healing, our heartfelt encouragement and support go out to you.*

*Warmest wishes,*

*Dr. Susan Weitzman*

*and*

*The Weitzman Center Board of Directors*

## PERSPECTIVES OF A SURVIVOR

By Anonymous

If you are reading **The Weitzman Center Care Kit** and identifying with the life conditions and symptoms of upscale abuse, you may be considering how a life without abuse would feel.

Six years ago I began a journey to free myself from an abusive marriage of twenty-six years. I immediately felt relief upon leaving, knowing nights of peaceful sleep and days without constant criticism and fear of physical attacks. Legal battles and heartache lay ahead but despite postponements and setbacks, I've never regretted taking that first step.

I did not have the support of some family members including my parents. But I had five dear sisters and their husbands who helped me move, gave me hope and listened to the frequent “ups and downs” of my experience over the first few years. My professional life included holding a position as a vice-president of a 500-bed hospital, yet I could not provide a healthy environment in my home to live and raise my children.

Now, with the help of friends and professionals in the healthcare, legal and religious fields, I look at life as a gift, opportunity as an option and peace and freedom as a right. Reacquainting myself with old hobbies and developing new interests – music, cooking, theatre and cross-country skiing – has brought me many hours of joy. Being able to concentrate at a job that I love and feeling that I can grow again as a professional without constant mental distraction is a relief.

Creating a new, tender and loving environment to welcome my children and new grandchild has been the biggest challenge. Our efforts to redefine ourselves have brought us acceptance of the truth, resolution of regret and the beginning of peace and happiness. After years of guarding against any thought of a relationship, I met someone who respects my individuality and understands my past. For the past three years we have experienced laughter, enjoyment and love without threat, pain or anger.

My past continues to rear its ugly head in the form of letters from attorneys threatening me economically and by attempts to control me through manipulation of my children. I have built a network of supporters who keep these activities at bay, dramatically reducing their frequency. **The Weitzman Center** has assisted me in defining my old reality, formulating my new identity and encouraging my new definition of life. The process of getting out can be complicated and frightening but the rewards are beyond measure.

## **EXCERPTS: LETTER FROM A READER OF *Not to People Like Us: Hidden Abuse in Upscale Marriages***

*Dr. Weitzman receives hundreds of letters and emails a month from women who have read her book and felt like it echoed their own life story. Here are excerpts from one such letter.*

Dear Dr. Weitzman:

Thank you for your book. Upscale Marital Abuse is a horrid nightmare that few understand or can see. *PLEASE read this draft — it is my heart.*

To all women of upscale marriages who have been emotionally and financially abused, I write to you because with great sadness we know that physical abuse is easier to see. I want you to know two things:

- 1) It often takes someone to NAME what you are experiencing because it is too awful to comprehend.
- 2) It is not a situation of co-creation, the therapy term for couples who are creating their connection of interaction. No, our situation is power imbalance. It is abuse. There is no us—only him and him.

It took my rabbi to name what hell I was experiencing. I went to him to “explain” away my pain. I expected him to say give my ex more time, he just lost both his parents (in 3 months). Instead I heard him say, “Sounds like emotional and financial abuse.” That sealed the truth for me. I knew he was exactly right. In that very instance he said those words, I began to cry with pain and relief...

...(The) experience (of) emotional abuse...is too horrible to name yourself. That is key here. It is too horrible to name because you can't believe the words you are hearing. You believe there is love in your marriage. You even hear the words. We were viewed as the match made in heaven—a real love story. But this is not the picture you have of being loved. This is not how love should feel, is it? Or is it just a hard time?

It does not fit anything you recognize. When you are abused, it is too horrible for your brain to comprehend, which makes it impossible to recognize by yourself. I believe this is critical for women like us. Society in general—therapists—try so hard to make these issues of joint effort/creation. Actually therapists often make the situation worse and empower the husband.

It is not joint effort. It is power imbalance, and it is seldom recognized, at least in my experience. It is control by a majority of one, HIM, and it hurts and it is very, very confusing and it especially makes no sense and is illogical. I believe those are warning signs, if there are any.

This is why we need educated people who understand what it looks like to reach out and name our horror and rescue us. Thank you so much for you book and the work you are doing.

-Name Withheld by Request

## WHAT IS UPSCALE VIOLENCE?

If you fit most of these parameters, you may be suffering from upscale abuse:

- You and or your spouse /partner have a Bachelor's degree or above.
- You live in what is considered to be an upper middle class or upscale neighborhood.
- You have a combined household income greater than \$100 K per annum.
- You view yourself or may be viewed as middle or upper middle or upper class.
- You have experienced multiple emotional/physical abuses within your relationship.

In addition, you have probably:

- Never been involved in or exposed to relationship abuse or violence before, either in your family of origin or in your prior dating life.
- Tried to stem such problems in your marriage to no avail—although you thought you could, as you have been so successful in various other arenas in your personal and professional life.
- Believed that no one you know seems to be experiencing such problems.
- Tried to cover it up, make excuses, and keep it to yourself out of shame and embarrassment.

If you have four or more of the following symptoms, we urge you to seek assistance:

- Have emotional/physical abuse of an ongoing nature in your domestic relationship.
- Feel this doesn't/shouldn't happen to people like you or your peers.
- Fear for your future or the well-being of your children.
- Engage in court involvement of long-range duration with no end in sight, draining your resources.
- Are involved in "uncalled for" custody battles.
- Feel isolated and alone, like there is nowhere to turn.
- Feel at a loss to find professionals who truly understand the nature of what you're going through.
- Feel helpless as you can't stop the abusive situation through your own means.

## GETTING HELP

You may be hesitant or ashamed about seeking professional help, but what is happening to you is potentially devastating to your health, family, work, and your expectations about your own life. There is no need to suffer unnecessary pain or jeopardize your well-being.

***There is a way out of upscale violence. The sooner you act, the better.***

This *Care Kit* should be a helpful start. Our goal is to offer you support and knowledge to help you seek assistance and feel safer and better emotionally and physically.

***YOU ARE NOT ALONE.***

***We are happy you contacted us.***

*Please note: The Weitzman Center serves as a referral source but in no way does it benefit from any referrals made as a result of this guide. Reading and using this Care Kit is in no way meant to be a substitute for getting help specific to you and your situation, nor should it be seen as a course of treatment.*

## QUESTIONS CONCERNING UPSCALE VIOLENCE

(Excerpted from *Not to People Like Us: Hidden Abuse in Upscale Marriages*, Basic Books, 2000.)

### **What exactly is upscale violence?**

Upscale violence is a term that was coined to describe domestic emotional and/or physical abuse among victims who are of middle or upper economic classes, with advanced educational achievements. Typically, upscale violence is found in families that seem to have everything going for them, such as opportunity, wealth, material comforts, etc. One of the unique aspects of upscale violence is the fact that the upscale abused woman, as well as the community and society in which she lives, buys into the myth that domestic abuse is more prevalent in the lower classes, and that it doesn't happen to "people like us." This contributes to shame, embarrassment, and a veil of silence, keeping the woman isolated and trapped in her "golden prison."

As well, the upscale batterer usually is charming, well received in his community, successful at work, and a picture perfect mate who proffers an enviable lifestyle, adding to the disbelief with which the abused woman is met when she starts to talk about what is happening at home. Her judgment and assessment are questioned. She is seen as spoiled and demanding. Others do not realize that the upscale batterer has opportunity and status, not only to keep him above the law, but allowing him to make good on any of his threats, which often include further fiduciary and custody abuses.

### **How is it different and similar to domestic abuse?**

It is similar in that there are power and control issues behind the abuse. Isolation is a factor in keeping the woman trapped. It is different in that the woman is inadvertently revictimized by the very professionals and systems that are supposedly in place to help her. Her plight is too often disbelieved or minimized. She becomes marginalized in her own circles. At the same time, she feels like an outsider in the shelters and agencies set up to help battered women.

## **How can I break the silence with friends, family members, co-workers?**

Begin by realizing that it is your silence that keeps you trapped. Find significant others who tend to be sympathetic and understanding and plan some time to talk. If you feel judged or disbelieved, you do not need to continue your talk. You may be surprised. The person you are confiding in may have noticed problems all along but didn't know how to approach you about them. Some people actually give their family members or attorneys copies of *Not to People Like Us* as a way of broaching a conversation and increasing their awareness of such a phenomenon.

## **Who should I contact if I fear for my life?**

Contact your local domestic violence agency, your local police, and/or **1-800-799-SAFE (1-800-799-7233)**. If you or your loved ones are in any immediate danger, leave home immediately. It is useful to have a pre-plan and a pre-packed kit which includes changes of clothes, copies of important documents like birth certificates, bank account records, passports, extra money, needed medicine and supplies. That way, should you have to make a speedy retreat, all of what you and your children will need immediately is ready for your departure to safety. If you have talked with a friend, you may even wish to have a pre-arrangement for providing you with a safe house, where your abuser cannot locate you.

## **How can I deal with the embarrassment and shame I am feeling?**

First, you must recognize that safety is more important than any shame or embarrassment you may be experiencing. This is especially true if you have children who will no doubt be affected by witnessing their mother being emotionally and/or physically abused, even if they are not the target of your partner's aggression. Second, shame and embarrassment reflect the myth that what you are experiencing is not something that should be happening to a woman who is smart, educated, well-off financially, etc. You feel shame and embarrassment because you are made to feel odd, different, a failure in your marriage. Because most victims of upscale domestic abuse do not discuss their experiences, this contributes to your feeling of being alone and different.

If you are someone who is used to succeeding in your ventures, and someone who has never been exposed to domestic abuse, you may harbor the belief that you should be able to fix what is wrong. But it is that assumption that is wrong, and only adds to your feeling of inability to succeed in your marriage. You must come to accept that domestic violence only gets worse once it starts. It is criminal and demoralizing, a power imbalance made to weaken you. There is little you can do to improve your situation if your husband does not acknowledge his actions and have the motivation to change.

“Coming out” about what is happening among and with professionals and others who understand the idiosyncratic and insidious aspects of upscale abuse will make you feel less ashamed and embarrassed by the situation you are in. And remember, you are in a situation caused by your partner's actions. You are not the situation or the cause of it. As your self-blame diminishes, so will your feelings of shame and embarrassment.

## **How can I fight upscale abuse in court?**

Over the past two decades or so, legal developments in most states have substantially improved protections for abuse victims. In Illinois, for example, the Domestic Violence Act is a very detailed enactment, interplaying with both criminal and civil law. In litigated situations involving upscale abuse, it is extremely important to develop a coordinated plan, especially since many cases involve the “conjoining” of otherwise independent processes (for example, an action under the Illinois Domestic Violence Act and an action to dissolve the parties' marriage). Alternatives that may be appropriate in a particular case should be carefully explored with experienced counsel.

## Are there “legal tools” to combat harassing litigation?

In most jurisdictions, there is a variety of so-called “legal tools” that might be utilized to combat harassing litigation. In Illinois, for example, these “tools” include Supreme Court rules permitting sanctions for “false pleadings,” as well as various statutory bases for the shifting of legal fees for acts that needlessly increase the cost of litigation. Specific application in a particular case of some of these “tools” would need to be explored by experienced counsel.

## GUIDELINES FOR GETTING HELP

The following guidelines are meant to help you find the right professionals for you.

## GUIDELINES FOR SELECTING A THERAPIST OR COUNSELOR

By Joseph A. Walsh, Ph.D., L.C.S.W., and Susan Weitzman, Ph.D., L.C.S.W.

### Types of Mental Health Professionals

Because there is a variety of professional clinicians who are qualified to provide mental health care, you may find it confusing when it comes to selecting the right one for you. Therapists operate in one of four different disciplines. The following is a brief description of the differences, their credentials and qualifications.

**Psychiatrists:** A psychiatrist is a medical doctor/physician, who has completed advanced residency training in the field of psychiatry. The residency usually involves a minimum of four years of training and supervised work with adults, families and children. There is optional advanced training in the field (called a fellowship) and a voluntary national certification program, which confers the title “board certified” to the physician. This reflects a level of competency beyond what is minimally expected. You might want to ask if the psychiatrist you might see is “board certified.” Psychiatrists are able to prescribe medication, generally the only ones in this group of therapists who can. They also can provide psychotherapy.

**Psychologists:** A psychologist is a clinician who has obtained a Master’s or Doctoral degree and is licensed in his or her state. This training involves several years beyond Bachelor’s level, an extensive training component, and often, the writing of a thesis (for the Master’s level) or a dissertation (for the Doctoral level) on a specific area of expertise. The clinician can be a clinical psychologist (Ph.D.) or may be a Doctorate of Psychology (Psy.D.) – the degree given by a professional school of psychology. Psychologists also may offer formal psychological testing. They can provide psychotherapy services. In some states, psychologists may be licensed at a Master’s degree level, so you may wish to inquire about their educational background. Psychologists typically do not prescribe medication.

**Social Workers:** Social worker who prepare at the Master’s or Doctoral level of education complete a 2-year or 4-year supervised clinical practicum. Those who successfully complete the voluntary board certification process are either L.C.S.W. (Licensed Clinical Social Worker) or C.S.W. (Clinical Social Worker). They can provide psychotherapy services and are often familiar with a wide range of available social services. Some social workers who have trained at the Bachelor’s Degree level (L.S.W. or Licensed Social Worker) are also able to offer case management services. Social Workers can help with medication management but do not prescribe medication.

**Marriage and Family Therapists and Licensed Clinical Professional Counselors:** These professionals are trained in the areas of marriage and family and in some states are licensed as an L.M.F.T. or L.C.P.C. They often have training at the Master’s Degree level although some have Doctoral training. All have had supervised clinical training. They can offer psychotherapy service, but do not prescribe medication.

## Should You Require Medication as Well as Counseling

Because of the different types of training and services provided, you may need to have two clinicians at one time—one to provide counseling and one to prescribe medication. Medication, if needed, may also be provided through your primary care physician.

## Selecting a Mental Health Care Clinician

To help you select a competent therapist who is a “good fit” for you, it is highly recommended that you have a face-to-face interview, or a brief telephone consultation. (A word of mouth referral may be good, but you still need to decide for yourself—not everyone works well with everyone!) Ask questions. Not all therapists will want to do this by phone, so it would be worth the investment of your time and resources to at least have one meeting. Go by your sense of “goodness of fit” and trust your intuition. Feel free to change your mind and seek another counselor if you are not satisfied. Some points to be aware of:

**Licensure:** The clinician should be licensed by the state in which she or he practices.

**Domestic Abuse Training/Knowledge:** The therapist should have some specific experience or training in dealing with domestic abuse. The clinician should have some understanding of the type of abuse you are experiencing, and understand that abuse happens to people of all educational and social backgrounds. If she or he tries too quickly to say that you are simply experiencing “communication problems” in your marriage or seems disbelieving that your husband could be an abuser, this is not the therapist for you! You may wish to ask specifically what type of experience the therapist has had with *upscale abuse*, or if she or he is familiar with that concept. You may even wish to ask if the therapist has read or heard of the book *Not to People Like Us: Hidden Abuse in Upscale Marriages*.

**Convenience/Availability:** Location, convenience, and availability that fits with your schedule are important. However, if you find a therapist who is knowledgeable and with whom you “click” you might wish to travel or change your schedule in order to work with him or her. Bear in mind that if it is a hardship to get to the office, you are less likely to go as often as you may need to go.

**Compatibility:** There should be a feeling of compatibility, of connection between you and your therapist. You should feel safe and have a sense that the therapist is really trying to understand you and your unique situation.

**Trustworthiness:** You should have a sense that your well-being is the therapist’s primary objective, with no competing allegiances to others involved.

**Referral:** It can be very helpful if you get a personal referral from a trusted resource rather than just finding the therapist “cold.”

**Responsiveness and Emergency Care:** This is key. The therapist should demonstrate an ability to get back to you in a timely fashion. Clinicians should also make clear what is available and how you can reach them if there is an emergency between office visits.

**Fees and Insurance:** Be sure to discuss fees and insurance coverage immediately. Find out who is responsible for filing claims and what the therapist’s charges will be if you should need more sessions than your insurance provides.

Your mental health and safety as well as the mental health and safety of your children are at stake here, so be clear about employing the right person to help you on your journey to well-being. It is important to feel comfortable and to have a sense of hope that this person can offer you the help and guidance so important at this time.

Following is a list of potential questions to ask a therapist or counselor with whom you are considering working.

## QUESTIONS FOR A POTENTIAL THERAPIST OR COUNSELOR

By Hedvah Campeas-Cohen, M.S.W., L.C.S.W. and Susan Weitzman, Ph.D., L.C.S.W.

### Preliminary Questions (by Phone or in First Session):

- Are you a psychiatrist, psychologist, social worker, marriage and family counselor, or licensed clinical professional counselor?
- What are your hours? Do you have more than one location?
- Are you currently accepting new clients?
- Have you worked with women who have been abused before?
- What are your fees? Do you accept insurance? (Tell the therapist what insurance you have to see if he or she is on your provider panel.)
- Are you available for emergency contact if necessary? Is there a charge for such contact?

### Questions for Early Sessions:

- Do you have any training and experience in the area of domestic abuse?
- Have you worked with people like me, from an upscale background, who are experiencing domestic abuse? Have you ever read *Not to People Like Us*, or are familiar with **The Weitzman Center** or Dr. Weitzman's work on upscale abuse? Are you aware of the unique aspects of upscale violence, as well as how it is similar to other types of domestic abuse? Most importantly, would you be willing to read or learn more about this? (Someone could be a great clinician but it is their willingness to learn about aspects specific to your case that make the difference.)
- Are you comfortable working, if needed, with my attorney? With my physician? With my child's school? (Choose questions appropriate to your circumstances.) If there are questions of potential conflicts of interest (i.e. your husband/partner is a powerful or influential person and might have some connection to your therapist or therapist's practice), give your husband/partner's name and ask if there is any conflict of interest.
- Are you comfortable working with me individually if I am also in some form of support group or working with a domestic violence agency simultaneously?
- Perhaps you aren't sure if what you are experiencing in your relationship is abuse – your husband is “controlling” or “has a temper.” Tell your story to the therapist. Are you comfortable with the way the therapist handles your doubts and concerns?

**Questions to Ask Yourself After the First Session:**

- Did I feel comfortable with this person?
- Did I feel that he or she really understood my situation?
- Did the therapist really “get” how trapped and helpless I feel within my supposedly great lifestyle?
- Did the therapist listen attentively to me?
- Did I feel that the therapist was knowledgeable about domestic abuse and its many consequences?
- Did the therapist judge me or accept where I am now?
- Did she or he accept my desire to stay with or leave my husband/partner, or my ambivalence about it?
- Did she or he seem knowledgeable about the particular concerns of upscale abuse?
- Did the therapist’s responses make sense?
- Are provisions for emergency care adequate?
- Did the therapist seem knowledgeable about resources in the community for people in my situation?
- Are the logistics convenient (location, fees)?
- Does this person give me a feeling of hope, make me feel supported? Do I believe this person can help me?

## GUIDELINES FOR SELECTING A PHYSICIAN

By Xavier Pombar, D.O., and Susan Weitzman, Ph.D., L.C.S.W.

### Types of Physicians

There is a variety of physicians with whom you may work over the course of your life. The ones most likely to be able to identify and help with referrals for domestic abuse are often from the following groups:

**Family Practice Physicians:** A family practice physician is trained to deal with all aspects of health for you and your entire family.

**Internists:** An internal medicine physician (internist) is trained to deal with all aspects of health for adult patients.

**Ob-Gyn Physicians—Obstetricians and Gynecologists:** An Ob-Gyn physician works only with women and is able to treat a range of gynecological issues relating to wellness as well as disease. Many are trained to treat all aspects of pregnancy and delivery.

**Pediatricians:** A pediatric physician is trained to deal with health issues in children up to 18 years of age.

### Selecting a Physician

To help you select a competent physician who is a “good fit” for you, it is highly recommended that you meet with him or her before you decide on employment as your ongoing individual or family care health provider. Ask questions. (A word of mouth referral may be good, but you still need to decide for yourself—not everyone works well with everyone!) This professional will be working with you for a long time and be responsible for your and your family’s well-being. It is worth the investment of your time and resources to have a few appointments before deciding. Go by your sense of “goodness of fit” and trust your intuition. Feel free to change your mind and seek another provider if you are not satisfied. Some points to be aware of:

**Licensure:** The physician should be licensed by the state in which she or he is practicing. There is optional advanced training in the field called a fellowship and a voluntary national certification program, which confers the title “board certified” to the physician. This reflects a level of competency beyond what is minimally expected.

**Perceptiveness:** The physician should ask questions related to domestic abuse or have these questions as part of the initial evaluation and/or patient questionnaire.

**Attentiveness:** The physician should listen to you without interrupting. You should not feel like there is a rush to get to the next patient, even if it is an extremely busy practice. You should feel as if each patient is given the time required. In addition, the physician should ask questions and show concern.

**Non-judgmental Attitude:** The physician does not blame you for your actions or whatever is going on in your life. Specifically related to domestic abuse, the physician does not blame YOU for staying in the relationship, and demonstrates an understanding that you may not be ready to leave.

**Knowledge:** The physician is aware of resources that are available to assist you when you are ready to ask for help. There may even be literature or referral cards available in the waiting room or in the patient rest rooms.

**Referral:** It can be very helpful if you get a personal referral from a trusted resource, rather than just finding the physician “cold.”

**Responsiveness and Emergency Care:** This is key. The physician should demonstrate an ability to get back to you in a timely fashion. Physicians should also make clear what is available to you and how you can reach him or her if there is an emergency between office visits.

**Fees and Insurance:** Be sure to discuss fees and insurance coverage immediately. Find out who is responsible for filing claims.

Again, your health and safety as well as the health and safety of your children are at stake here, so be clear on who you are employing to help you on your journey to well-being. It is important to feel comfortable with the professional and have a sense of hope that this person can offer you the help and guidance so important throughout your work together.

## QUESTIONS FOR A POTENTIAL PHYSICIAN

By Patricia M. Prentice, MBA, R.N.

- Does the doctor regularly ask about domestic violence as part of the initial visit and annual check-ups? How does she or he document the response in the medical record?
- What experience has the doctor had in treating victims of domestic violence?
- To what resources does she or he refer victims? How are referrals coordinated and documented?
- Is the doctor licensed or board certified? In what specialty?
- Am I listened to without being interrupted? Does the doctor ask questions that make me comfortable in giving more in-depth information about the abuse?
- Does the doctor understand and communicate the fact that abuse consists of more than physical assaults? Are aspects of emotional, financial and environmental abuse explored?
- Am I comfortable and trusting with the doctor? Do I feel that my confidentiality will be held?
- How will documentation affect my insurance coverage? Are fees and insurance coverage explained well by the staff? Are there special circumstances that the doctor is willing to explore (e.g., cash payment, private finance plan, insurance plans, etc.)?
- Do I feel that I am fully respected, that his or her understanding of domestic violence includes the fact that I am not to blame and that I cannot change the abuser?
- If there is an emergency, how can I get in touch with the doctor? If she or he is unavailable, is there back-up coverage that will provide care in the same manner?
- Do I have any personal knowledge of the doctor? References from friends or family? Will the doctor provide me with references while maintaining patient confidentiality?

## **GUIDELINES FOR SELECTING AN ATTORNEY AND RELATED ISSUES FOR CASES INVOLVING DOMESTIC ABUSE**

By David H. Hopkins, J.D.; Sarane C. Siewerth, J.D.; Susan Lorraine Kennedy, R.N., M.A., J.D.; and Jessica Bank Interlandi, J.D.

### **The Definition of Domestic Abuse**

Domestic abuse means physical abuse, harassment, exploitation, and intimidation of a dependent, interference with personal liberty or willful deprivation of an individual, either male or female.

### **The Contexts in Which Domestic Abuse Can Occur**

The context in which domestic abuse occurs may bear on the type of attorney you will need to represent you. Domestic abuse occurs in many different contexts, for example, in dating and engagement relationships, domestic partner relationships (both heterosexual and homosexual), parent-child or other family relationships, in spousal relationships and between the elderly. It can also occur between people who occupy the same house, or between a disabled person and his or her caretaker. Many states have domestic violence acts that define the contexts in which domestic abuse can occur, which you can consult if you are unsure if someone is a victim of domestic abuse.

### **Types of Attorneys Who May be Able to Assist You in a Case Involving Domestic Abuse**

There are several types of attorneys who may be helpful to you in a domestic abuse situation. Because a domestic violence action may be brought in either civil or criminal court, it is important to understand the difference when you are contemplating retaining an attorney to represent you. Civil attorneys in particular often specialize in specific areas. The type of attorney you eventually retain will depend largely on the circumstances of your case. The following are types of attorneys who may be helpful to you in a case that involves domestic abuse:

**Domestic Relations Attorney (Civil Law):** An attorney who specializes in cases involving the private rights of parties in matters such as divorce, legal separation, child custody, paternity, domestic partnerships, as well as issues that arise after two parties are divorced.

**Elder Law Attorney (Civil Law):** An attorney who specializes in cases involving issues that affect disabled or older individuals (the elderly), including abuse, guardianship, estate planning, retirement benefits, social security issues, age discrimination and healthcare.

**State's Attorney (Criminal Law). (In some states, District Attorneys):** An attorney working for the State who prosecutes cases involving offenses against the public (both criminal and civil) in a particular district. In domestic violence situations, the State's Attorney is ordinarily involved only if a criminal offense is being prosecuted.

The above list is not exhaustive, and there may be other types of attorneys who could be helpful to you in your case. If you need assistance in determining which type of attorney might be appropriate for your case, you can call your state or local bar association. In addition, after you consult with an attorney on an initial basis, you and the attorney should be able to determine if his or her specialty is a good fit for the circumstances of your case.

## **Interviewing Attorneys**

You should interview an attorney before you retain him or her to represent you. Many attorneys charge a fee for an initial interview, and some attorneys will require that you interview with them in person, as opposed to over the telephone. An interview is a two-way street; it is an opportunity for you to ask questions of the attorney, and for the attorney to ask questions of you. You should be ready to present the facts of your case to any attorney you interview, and you should prepare a list of questions and issues for discussion in advance of your initial meeting.

If you anticipate that there will be issues in your case in addition to domestic abuse, you should discuss these with the attorney at an initial meeting. It is common to interview a number of attorneys before selecting the one with whom you feel most comfortable and who can best represent you given the specific circumstances of your case. Many law firms use a “team approach” wherein both a partner (or more senior lawyer) will supervise an associate or several associates (or less senior lawyers) in the handling of a case. During an initial interview with an attorney, you should ask if the firm uses a “team approach.” You should expect that your case would be handled by several lawyers in any firm that utilizes this approach.

## **Confidentiality Rules**

There are rules that govern the communications you have with your attorney. The rules provide that your attorney ordinarily cannot disclose the substance of your communications to the attorney to other people without your permission. An attorney’s obligation to maintain confidentiality regarding his or her communications with a client or prospective client is often referred to as “the attorney-client privilege.” This privilege applies even with respect to communications during an initial interview with an attorney. Apart from the attorney-client privilege, there may be other confidentiality issues that need to be explored with your attorney.

## **Engagement Agreement**

Once you and an attorney have decided that he or she will be representing you, your attorney usually will request that you sign an engagement agreement. This document is intended to memorialize the rights and responsibilities of the client and the attorney. An engagement agreement should include a provision regarding the scope and term (length) of your representation, the rates of all attorneys working on the case, the client’s responsibilities regarding payment of fees, and provisions regarding the client’s ultimate decision-making authority as to certain issues.

## **Availability**

No attorney can be expected to be available 24 hours a day, and there will be times when your attorney is unavailable to speak with you. However, as a general matter, an attorney or his representative should attempt to reach you within a reasonable period of time after you contact him or her -- even sooner in an emergency.

## QUESTIONS FOR A POTENTIAL ATTORNEY FOR CASES INVOLVING DOMESTIC ABUSE

By David H. Hopkins, J.D.; Sarane C. Siewerth, J.D.; Susan Lorraine Kennedy, R.N., M.A., J.D.; and Jessica Bank Interlandi, J.D.

It is impossible to create an exhaustive list of questions to ask prospective attorneys in cases involving domestic abuse, and many questions depend largely on the circumstances of your case. Be sure to make a list of all of the factual circumstances and probable issues of your case that you believe are important before you interview attorneys. This list will be helpful to you and any attorney you interview. The questions that follow constitute a broad sample of questions you should consider asking when you are interviewing attorneys.

- What is your area of specialty? Do you have others? If so, what are they?
- How many cases have you handled that involve domestic abuse?
- Do you have experience dealing with domestic abuse issues in both criminal and civil court?
- Will you be the only attorney working on my case or will you be working with other attorneys in your firm?
- What do you see as being the major issues in my case?
- How would you propose to handle them?
- What role do I have as your client in the handling of my case?
- Will I receive copies of all written correspondence and court documents filed in my case?
- What will your retainer be? What is your hourly rate?
- Do you use a written engagement agreement?
- Given what I have told you about my case, do you think it is one you would be able to handle, in light of your experience and the resources of your firm?
- If you cannot take my case, can you recommend another attorney who may be able to represent me? Why would you recommend this person?

## FROM ONE PROFESSIONAL TO OTHER PROFESSIONALS

By Richard Goldwasser, Ph.D., L.C.P.C.

Whether you are the head of an automobile parts department, a hotel manager, or a physician with several doctors, nurses, secretaries and lab technicians, and especially if you are a lawyer, police officer, member of the clergy, or medical /mental health professional, it is almost certain that at some point in your career you will be instrumental in helping an abused woman get—or not get—help.

As a psychologist, I embarrassingly admit that before meeting Dr. Weitzman, I had gone almost 20 years without routinely asking all of my female patients if they were ever the victims of physical abuse! When I did begin making the question part of my intake protocol, I was surprised by the number of women who acknowledged such abuse, although often with great hesitation. It became quite clear to me, however, how important it is for any professional to take an active role in assisting the embarrassed, often helpless woman to extricate herself from her abusive situation.

The first thing one can do, and probably the most important thing, is to be an open and available resource for the abused upscale woman. Should you notice any indicators of emotional or physical abuse, gently offer a kind voice and a ready ear. And should she opt to talk with you about this secret she is carrying, reinforce her confidence in you by letting her know the following: (1) that you believe her; (2) that you are not judging her; (3) that you do not believe that she is the cause of her husband's behavior, and in fact, nothing justifies his actions; (4) that it is not her responsibility nor would she be able to fix the problem single-handedly; and finally, (5) that you know that such abuse can happen to anybody, and no one should be embarrassed to “come out” about it and try to get some help. This is especially helpful for the woman who is shamed by the situation she finds herself in, believing that such abuse should not and could not be happening to someone of her social, economic, and/or educational status.

Remember, contrary to what one might think, the woman who seems to “have it all” may have very little access to helpful resources if she is being abused by an upscale batterer. Most women who are in abusive upscale relationships receive little support or encouragement to leave – in part due to their reluctance to tell anyone, and in part because they know that on the surface, their lifestyle appears quite enviable and they will not get much sympathy from others. Your sensitivity to this may offer her the initial, if not the only, support she gets.

In addition to the fear of being shamed and ostracized in her community and among family and friends, she fears her husband's retaliation and the consequences of her “coming out” for her children and their lifestyle. Unfortunately, I have heard and seen too many cases, including those covered by the media, where the woman was without support and left vulnerable to her husband's powerful and combative actions. This does not have to be the case, especially if the woman gets the kind of help she needs to leave the upscale abusive relationship in good time.

Your insight is essential. If you see a woman with bruises, a broken arm, etc., don't assume the injury is due to a mishap (e.g. "Did you break your arm skiing?"). Rather, inquire as to how the injury occurred (e.g. "I feel terrible you have such a bruise on your face. I really don't want to be nosy, but if you would like to share how this happened, I would be open to listening and being of some help.") Even if she declines, it can be useful to continue to show concern and interest in a non-intrusive way. Continuing to demonstrate such interest will, hopefully, give the battered woman another opportunity to share her plight with you. Should your intuition that something amiss is going on is incorrect (or she denies any abuse), at least the woman knows that you are a source of caring and concern. If the woman appears irritated, you can simply apologize and say "There are too many woman out there who don't get the support when they need it and I just didn't want to be someone who didn't care. I'm sorry if I offended you."

Hopefully, this brief piece will amplify and bring to a higher level of awareness how important and even critical your role can be in helping women gain enough confidence to leave an abusive relationship. The first year I included abuse as an area I broached during my intake, seven women acknowledged that such had taken place. I am sorry I didn't begin asking the question earlier. You can begin as early as today.

## LETTER TO LAWYERS

From Kara M. Bellew, J.D.

In “*Not to People Like Us: Hidden Abuse in Upscale Marriages*,” Dr. Weitzman unleashes the hidden horror of domestic violence in affluent communities. As Dr. Weitzman explains, when upscale women are abused, their affluence shapes their experience in significant ways, and in many instances, makes it more difficult for them to manage or escape from the abuse. My own interviews with lawyers, social workers, and survivors confirmed Dr. Weitzman’s observations.

Many attorneys mistakenly associate domestic violence with “poor” women, thereby perpetuating the pernicious misperception that affluent women are not victims of domestic violence. Like other service providers, lawyers who fail to identify, validate, and respond to a batterer’s exercise of power and control throughout legal proceedings are not only re-victimizing an affluent client, but actively jeopardize her<sup>1</sup> safety and emotional well-being. In order for lawyers to recognize abusive tactics, they must be educated about domestic violence.

Not only is it important for lawyers to be educated on the fundamentals underscoring a domestic violence relationship, but they must also be conversant with and acutely aware of the various forms of abuse that manifest throughout legal proceedings. The ability to recognize the financial, emotional, physical, and sexual abuse of a client is critical to a lawyer’s competent representation. Interestingly, lawyers contend with another form of abuse uniquely reserved for the legal arena: litigation abuse. Litigation abuse generally refers to a batterer’s constant use of the court system to harass, embarrass, and both emotionally and financially deplete his partner. Most often, this abuse has nothing to do with actually furthering the case for the benefit of the parties, but rather everything to do with prolonging the pain and humiliation of the vulnerable partner.

With education, lawyers can re-shape their own misperceptions about domestic violence and develop effective advocacy skills to protect and preserve the rights of their clients. The following advice is not comprehensive, but rather, provides an overview of the ways in which lawyers can effectively advocate for victims of domestic violence. Lawyers should focus on the following key areas when working with a client: (1) screening; (2) minimizing risk and maximizing safety during proceedings; and (3) protecting the client’s interests, while continuing to minimize risk and maximize long-term safety. This requires an understanding that on-going power and control may well be the batterer’s goal throughout the proceedings. Efforts to thwart his control and protect the client’s financial interests, in addition to her relationship with her children (if she has any), are critical during this time.

The first step entails screening all clients for domestic violence. This requires that lawyers begin each interview with the presumption that each and every client, regardless of their income, could be a victim of domestic violence. Furthermore, lawyers must appreciate that clients will often not disclose an abusive history during this time. However, this screening sends clients a clear message that the lawyer is prepared to undertake the

complex issues that may be disclosed down the road. At this time, a lawyer must also strongly consider whether or not s/he is proficient enough in domestic violence advocacy to zealously and competently take on the case. Regardless of the outcome, lawyers must conduct safety planning with the client before she leaves the office. Safety planning, the act of working with a client to create a comprehensive plan to maximize safety while at home, work, and in court, is a fundamental building block of domestic violence advocacy. Lawyers who fail to engage their clients in safety planning at every stage of the litigation are creating significant risks for their clients.

Second, once a client is able to speak freely and comfortably about the abuse, a lawyer must understand what kinds of abuse have transpired in the relationship and strategize accordingly. This is especially important in divorce cases, as a batterer may assert his power and control during the proceedings in effort to intimidate his partner. Often times, lawyers suggest that couples going through a divorce attempt to mediate the conflict and seek a swift resolution in lieu of protracted litigation. However, mediation assumes that the parties have equal bargaining power. In domestic violence situations, the parties cannot negotiate as equals, as the dynamics of power and control completely undermine and negate the parties' equal footing. Furthermore, mediation often requires that the parties spend time alone together mediating the conflict. This further jeopardizes the safety and well-being of a battered client who may be physically hurt or intimidated during this time.

The third step involves consideration of the client's long-term safety and that of her children. In particular, lawyers must remain cognizant of the fact that financial arrangements that emerge from a divorce settlement or are imposed by a court sometimes offer potent means for an abusive partner to continue to manipulate or harass his former spouse. However, it is the provisions for access to children that pose the most acute risks to both the children themselves and their non-abusive parent. In order to ensure the physical safety of the parties, and to provide some measure of stability in the post-divorce period, lawyers must propose custody provisions to the court that will provide for both the safety of the children and the vulnerable parent. These include, but are not limited to: mandating supervised visitation; asking for injunctions against threatening conduct; and prohibiting the abusive parent from asking the children about the activities of the other parent.

Although the foregoing summary is merely a first step toward building effective domestic violence advocacy skills, it emphasizes the important role of education in representing victims of domestic violence. This is particularly true when advocating on behalf of affluent women. As Dr. Weitzman cogently illustrates in "*Not to People Like Us*," economically privileged women are a uniquely marginalized population of domestic violence survivors. As a result, many of them do not seek help until the violence has escalated so much that they believe their safety and that of their children is at great risk. This is typically when they seek the advice of a lawyer. As this is traditionally when a woman is the most vulnerable and the most at risk, lawyers must be educated on how to respond. Effective response and advocacy can ultimately help break the cycle of violence, while encouraging other women to come forward and end their silent suffering.

<sup>1</sup> It is recognized that men can be the victims of domestic violence, however, for the sake of convenience references to victims in this letter refer to "females."

## PEOPLE MAGAZINE, JULY 2, 2001

"Painfully Privileged," by Barbara Sandler.

in her own words •

# Painfully Privileged

Dr. Susan Weitzman finds that spousal abuse cuts across all economic lines

*Hard at work on her Ph.D. in clinical social work at Chicago's Loyola University in the 1990s, Susan Weitzman considered herself a gifted diagnostician—until one patient made her wonder. Weitzman had been counseling a woman she calls Julia, the well-off, highly educated wife of a prominent sociologist. Months into therapy that was concentrating on depression and marital communication, Julia suddenly confessed that she was a battered woman. "I was horrified that I'd never bothered to ask this particular patient if domestic abuse was going on in her life," says Weitzman. who has her*

*own practice in downtown Chicago. "The bias was in me—and the culture as a whole—that domestic violence doesn't happen to middle- and upper-middle-class women."*

*To help end that stereotype, Weitzman, who has treated hundreds of battered women, has written Not to People Like Us, which documents some of those cases. The author spoke with correspondent Barbara Sandler about what she calls "upscale violence."*

#### **What is upscale violence?**

It's abuse that occurs against women, many of whom are successful in their own right, hold at least a bachelor's degree and live in households in which the combined income is \$100,000 or more.

#### **Is it widespread?**

There's a need for more research, but if my practice and research reflect anything, it's that upscale abuse is out there in huge numbers. In my practice, more than 60 percent of the women I see have suffered or are now suffering upscale spousal abuse.

***How do these women differ from their poorer counterparts?***

They've never been exposed to abuse, so they're left bewildered. They think the husband—whom they idealize because they're impressed by his charisma and socioeconomic standing—just has a bad temper. And there are reputations at stake, both hers and his. Besides, everyone tells her what a great life she has, so she thinks the problem is with her. These women are used to being successful—they're achievers—so when there's a problem, they redouble their efforts to fix it.

***What are the major characteristics of the upscale abuser?***

In lower-income abusive situations, the causes are often unemployment, alcohol and drugs. With upscale abuse, the men tend to have a sense of entitlement and believe they are above the law. When their insatiable and outrageous demands aren't met, rage erupts.

***Does the upscale abuse victim report her husband to the police?***

Rarely. There's a belief that contacting the police is something only the lower classes do.

***What happens when they do?***

Oftentimes, the women are not believed. Many of these men are pil-

lars of society, admired and loved. They have the power and leverage to make good on their threats of loss of custody, income and lifestyle—they create legal dream teams and wage endless and frivolous lawsuits.

***Is the case of Miami Mayor Joe Carollo, who in July stands trial for allegedly throwing a cardboard tea canister at his wife, Maria, an example of abuse or just an ugly fight?***

I'm not saying being aggressive constitutes abuse, but to throw an object at another person crosses the line. Obviously, because it was a cardboard object, the impact on her body was less, but if the violence becomes a pattern, it constitutes abuse.

***If a woman has the financial means, why doesn't she just leave?***

Because her self-esteem is being eroded. Even women with Ph.D.'s, M.D.'s and their own money often negate the power of what they can do on their own. They're embarrassed to go to a shelter because they feel they have so much more by comparison and won't fit in.

***Is there one thing that ultimately gives them the courage to walk away?***

It can be many things—extreme threats to the woman's well-being; a violent incident that requires medical attention; if the children are in any way threatened. The upscale wife will usually get out before the children are abused.

***So what do you tell these women?***

I explain that staying in an abusive marriage has grave costs—all of a woman's material possessions could never make up for the danger and degradation. There are women who lived in mansions and now live in one-bedroom apartments, but they got their lives back. Living without fear more than makes up for [loss of] a glamorous life. ●

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Please feel free to contact **The Weitzman Center** for referrals that may be helpful in your search for appropriate professionals.

**312.444.1777**

or contact us via our website

**[www.theweitzmancenter.org](http://www.theweitzmancenter.org)**

We will attempt to get back to you within a 48-hour period. However, if you are in a potentially dangerous situation, contact your local domestic violence agency, hospital emergency room, police, and/or **1-800-799-SAFE (1-800-799-7233)**.

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