



POWER THROUGH PARTNERSHIPS

A CBPR TOOLKIT FOR DOMESTIC VIOLENCE RESEARCHERS



COMMUNITY BASED
PARTICIPATORY RESEARCH

CBPR Toolkit for Domestic Violence Researchers

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Bringing Community Based Participatory Research to Intimate Partner Violence Research:
A Toolkit for Emerging Researchers

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"Welcome to the Toolkit"
by Lisa Goodman, PhD, Boston College

THE TOOLKIT: AN INTRODUCTION

What Is Community Based Participatory Research (CBPR)?

In a nutshell, CBPR is an approach to research in which researchers and community members share power, resources, and decision-making at every level of the research process, working together to enhance the understanding of a given phenomenon and integrating that knowledge with action to improve the health and well-being of those most affected.

What Is the Toolkit?

The goal of this toolkit is to support emerging researchers who would like to learn more about CBPR approaches, particularly in the context of domestic violence. While much of the content is aimed at researchers, there is much here that will help advocates and other community partners understand the CBPR approach and its benefits.



Introduction

Specifically, this toolkit is designed to help emerging researchers to:

- Clarify their theoretical understanding of CBPR, both generally and in the context of domestic violence research.
- Conduct the preparatory work necessary for engaging in meaningful CBPR work.
- Deepen their knowledge of CBPR values and practices, as they relate to work with domestic violence advocates and survivors in diverse communities.
- Increase confidence in their ability to conduct CBPR by engaging with useful examples, practical resources, and lessons learned from CBPR experts.

For Whom Was the Toolkit Created?

The toolkit is for researchers across disciplines and social locations who are working in academic, policy, community, or practice-based settings. In particular, this toolkit aims to support emerging researchers as they consider whether and how to take a CBPR approach and what it might mean in the context of their professional roles and settings.

Who Are We?

We are a group of CBPR researchers who bring decades of experience doing CBPR from the perspective of different disciplines, professional settings, communities, roles, and identities. Some of us are based in universities and others are based in national organizations. All of us have worked directly in and/or with programs that serve survivors. See *Appendix A* for more about us.



Many people use the terms *domestic violence* and *intimate partner violence* interchangeably to refer to any form of violence or abuse from a partner or former partner, including psychological, physical, sexual, or economic abuse, as well as stalking.

The term *intimate partner violence* has become more commonly used in scholarship. However, the term *domestic violence* is more commonly used by the general public and in the advocacy community. We therefore use the latter term in this toolkit.





SECTION 1: OVERVIEW OF CBPR AND ITS IMPORTANCE TO THE DOMESTIC VIOLENCE FIELD

Within this first section of the toolkit, we provide foundational information about the definition and history of CBPR generally, and CBPR within domestic violence work specifically.



What Is CBPR? Definition and Background

CBPR is one type of community-engaged research, an approach to research that involves community members in a meaningful way. Community-engaged research exists on a continuum, with wide variation in the strength and intensity of the community-academic collaboration. CBPR in particular represents the fullest expression of community-engaged research, with researchers and community members sharing power, resources, and decision-making at every step of the research process, from identifying questions to interpreting and applying results, to disseminating findings (Minkler & Wallerstein, 2010; Yuan, Gaines, Jones, Rodriguez, Hamilton, & Kinnish, 2015). The goal of CBPR is to enhance understanding of a given phenomenon by collaborating with those most affected by it, and integrating the knowledge gained with action to improve the health and well-being of community members (Green et al, 1995; Israel, Schulz, Parker & Becker, 1998).

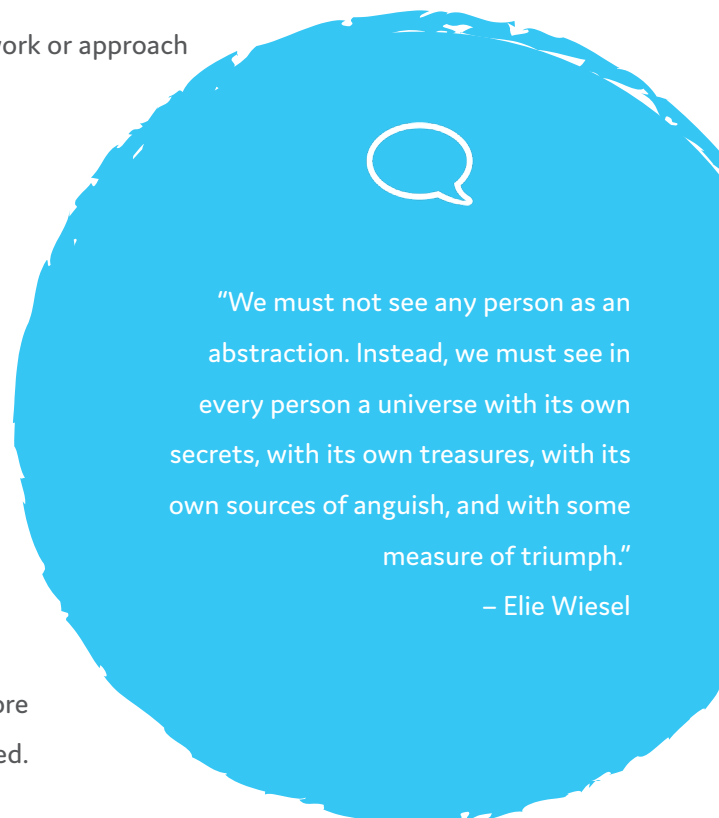
It is important to note that community-engaged research is a framework or approach for conducting research, not a methodology in and of itself.

Why CBPR?

CBPR has the potential to transform our work, such that researchers are no longer gate-keepers of knowledge production. Instead, community members and researchers in partnership co-create opportunities to name what is to be researched, how it should be researched, and what should be done with the knowledge gained. Further, CBPR has the potential to produce research findings that could not be determined through the exclusive reliance on traditional approaches. When researchers work in partnership with those most affected by the issue at hand, the knowledge gained is more relevant to those communities, and more likely to be adopted and used.

Additional benefits of CBPR partnerships are that they can:

- Help to illuminate local knowledge and perceptions



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- Bring to the table varied skills, knowledge, and expertise necessary to address complex problems
- Bolster connections between academics and communities
- Increase community partner and researcher skills, and provide opportunities for mutual capacity-building
- Strengthen rigor and credibility of research
- Strengthen the utility and value of the findings for communities, practice and policy
- Support cultural sensitivity in the interpretation and application of research findings
- Help solve otherwise intractable problems
- Limit the possibility that research findings have unintended negative consequences

The Historical Context of CBPR

CBPR has its roots in action research and participatory research, approaches that developed in the fields of social science and popular education, respectively (Ferreira & Gendron, 2011; Greenwood & Levin, 2007; Khanlou & Peter, 2005).

During the 1940s, social psychologist Kurt Lewin described action research as a means to overcoming social inequalities. He argued that in order for evidence to be relevant, researchers must engage in a process of active and participatory data gathering about problems and interventions (McKernan, 1991). He rejected the notion that in order for researchers to be objective they needed to remove themselves from the community of interest and instead sought to involve community members in the research process (Wallerstein & Duran, 2003), repositioning them as participants, not subjects or objects under investigation. This is known as the Northern Tradition.

Participatory research, known as the Southern Tradition, arose in the 1970's within Latin America, Asia, and Africa largely in response to the work of Brazilian philosopher, educator, and activist Paulo Freire (1970). Freire was a critic of authoritarian paradigms in which education was unidirectional, objective, and decontextualized, creating a "culture of silence" in which those without power simply lost the means to critically respond to the dominant culture that was forced upon them (Wallerstein & Duran, 2003). Freire's influential method of popular education centered the analysis of personal lives in relation to the structures that might control them. His goal was not only to produce or disseminate knowledge, but to engage in an emancipatory process that would result in critical consciousness (*conscientização*), the capacity to perceive social, political, and economic oppression and take action against it (Ferreira & Gendron, 2011).



Participatory action research (PAR) a term coined by Colombian sociologist Orlando Fals Borda, brought together the imperatives of “community action” and the “decolonization of social sciences” (Fals-Borda, 2013, p.157). His goal was to transform “Eurocentric academic superiority” into “authentic participation” (p.160). Specifically, PAR involved an iterative and cyclical process of research, action, and reflection with communities in service of understanding the world through trying to change it.

Freire, Fals Borda, and many other scholars and indigenous thinkers called on researchers to transform the research relationship from one in which communities were objects of study to one in which community members participated centrally in the inquiry itself (Wallerstein & Duran, 2003). In this context, research and education could be understood as relational, culturally-bound, and community-centered.

Both of these schools of thought - action research and participatory research - shared the goal of challenging the concept of the objectivity of science. Each approach used its particular lens to explore the various ways in which power differences influence the research process (Ponic, Reid & Frisby, 2010). Both approaches called for research designs that are interactive, contextualized, and humanly compelling because they involve joint participation between community members and researchers in the exploration of research issues (Lather, 1986). Both approaches also highlighted strategies to help community members to gain the necessary critical consciousness and research tools to engage in research and challenge mainstream approaches.

Variation within CBPR Approaches

CBPR is a framework for conducting research, rather than a specific methodology. It is characterized by the nature of the partnership between researchers and community partners, with the aim of full partnership and equal control. Although it is essential for any CBPR project to adhere to a core set of values or principles that support full partnership and equal control (delineated in section 4), partnerships can vary widely based on participants’ needs, goals, skills, and access to resources (D’Alonzo, 2010). Despite variation, however, there are some bright lines that distinguish CBPR from other types of research, as described in this table.



Differences Between CBPR and Other Types of Research

CBPR Is...

A process or approach

Research that is conducted in the community, in partnership with community members

High quality, rigorous research that reflects the value and goals of community partners

Guided by a set of core values that are clearly articulated

Flexible, dynamic and responsive

Conceptualized and manifested differently, depending on the strengths & needs of the collaborating partners

An approach that creates opportunities for bi-directional learning between researchers and community members

CBPR Is Not...

A specific research design or method

Any kind of research that is done in a community setting

Activist research that seeks to support a specific practice or policy by any means necessary

Value-free or “objective”

Pre-determined and rigid in its design & implementation

Always done the same way, according to a set formula

An approach that uses a uni-directional learning model that features researchers learning from communities





Nathan Q. Brewer, Ph.D. Student at Simmons College School of Social Work, describes the way that he came to CBPR through his work in domestic violence

For me, like many others who have practiced in the field of domestic violence, the motivation to do the work was rooted in my value of social justice and a feeling of responsibility to survivors. This same value and sense of responsibility have led me to seek a Ph.D., so that I can further advocate for survivors in a different way: through social justice-focused research. Although I now have a passion for research, I struggle to remain confident in my ability to speak up and ask tough questions. I think for many practitioners this is the case. We struggle to feel adequate when speaking the truths we have seen while doing clinical and domestic violence advocacy work in the community. So for me, actively moving towards the researcher role means taking up that responsibility to our clients. Those of us rooted in the direct work need to find the confidence that what we have to offer is important and necessary for the clients we serve.

I am also acutely aware of the damage that has been done and continues to be done, in the name of research. This is particularly true of researchers like myself, who identify as white men. Far too many participants have worked with white male researchers, only to feel used and thrown away when the researcher obtains the data they want. Similarly, as someone who identifies as queer, all too often I see researchers excluding queer people from their studies and theories. As a queer researcher, I feel compelled to speak up for these survivors, demanding they be considered and included. I want my work to be something substantial, that doesn't compromise my values and responsibilities to my clients. I want my work to resist the trend of making clients and clinicians feel used and thrown away. I want them to be seen as the experts they are. Although it is not a panacea, CBPR appears to fulfill these goals. Some bright lines that distinguish CBPR from other research traditions, as described in this table.

CBPR in the Domestic Violence Context

A CBPR approach to domestic violence research balances four essential questions: 1) What are the critical questions for survivors and practitioners in this community? 2) How can we best explore such questions using strategies that are clear, consistent, and replicable; that is, scientifically rigorous? 3) How can we ensure that these strategies are sensitive to the backgrounds, cultural practices, and life contexts of community stakeholders (Palinkas, He, Choy-Brown, & Hertel, 2017, Tribal Evaluation Workgroup, 2011)? 4) How can we interpret and disseminate our findings in ways that benefit survivors, practitioners, and communities?

CBPR has powerful advantages over traditional research approaches to domestic violence for all involved. The historical, cultural, economic, and political contexts in which partner violence occurs vary enormously, calling for response strategies that are rooted in deep knowledge of specific communities (Gillum 2008; Nicolaidis et al., 2013; Sullivan, Bhuyan, Senturia, Shui-Thornton, & Ciske, 2005). In one focus group study with practitioners in a Latina domestic violence organization, for example, participants noted that CBPR was their “gold standard” for rigorous research because it ensured that Latina ways of knowing were reflected throughout the research process, including in the nature, interpretation, and application of results obtained. The knowledge that their own perspectives were foundational to the focus and process of the research gave these practitioners the confidence to use the research to improve their own work with survivors (Serrata, Macias, Rosales, Hernandez, & Perilla, 2017). Ultimately, if research is not centrally relevant to the very people who can make use of it, its utility is limited at best.

A number of contextual factors are particularly relevant to CBPR in the domestic violence context. These are described next.

Privacy and Trust

Privacy and trust are especially significant considerations for CBPR in the domestic violence arena given that survivors’ safety may well depend upon maintaining their privacy and ensuring confidentiality when they seek help. Any research activities conducted with survivors, their families, and the programs they turn to for support should always forefront survivors’ confidentiality, safety, and well-being.



Accordingly, CBPR researchers should ensure that:

- Advocates, service providers, survivors and their family members are fully informed during the research consent process about all potential benefits and risks of research participation.
- Participants understand that involvement is voluntary and that they may discontinue participation at any time.
- Participants give permission to use the information collected for research. (See Appendix C for a sample consent form).
- Research and ethics procedures for maintaining confidentiality are made clear, including how data will be aggregated.
- Participants are informed about any reporting mandates that researchers must follow to ensure the safety of survivors, their family members, and others.
- Consider research ethics training for all community partners. Note that standard trainings may need to be adapted, enhanced, and supplemented so they are of interest and relevance to community members.

Trauma Experiences of Survivors and Program Staff

CBPR researchers working in the domestic violence arena should have a trauma informed lens that takes into account that survivors, their family members, and program staff may be experiencing current trauma, or consequences of past trauma (Edleson & Bible, 2001; World Health Organization, 2001; Slattery & Goodman, 2009; Sullivan Price, McParland, Hunter, & Fisher, 2016) and that these experiences can enter the work in various ways.

Accordingly, CBPR researchers should:

- Understand types of trauma specific to both individuals and the community (e.g., violent victimization, historical trauma, collective trauma, racism/bigotry).
- Be informed about how to reduce and respond to distress related to experiencing and disclosing one's own or others' trauma history
- Build relationships with appropriate local services and sources of support to be able to make referrals for research participants.
- Make referrals to support services readily available during and after contact with survivors and staff.



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- Create handouts and wallet sized cards with referral information for research participants to take with them if they are comfortable doing so following study completion.
- Prepare for managing staff turnover, which may be high due to secondary and vicarious trauma combined with the historically low wages of domestic violence and human services work.
- Be flexible and ready to change research methods and strategies in response to events that may result in or exacerbate trauma (e.g., a homicide in the local community, political event that amplifies racism, bigotry directed against community members).

Feminist and Justice Lens

Many individuals and organizations in the domestic violence field approach partner violence using a framework that emphasizes social justice, anti-oppression, and feminism, often with a particular focus on intersectionality (Blitz & Illidge, 2008; Sokoloff & Dupont, 2005).

Accordingly, CBPR researchers should:

- Be familiar with these theories and the extent to which they shape community partners' thinking.
- Attend to the ways these theories might inform the research focus and processes.
- Consider how these ideas may influence collaborating programs' perspectives on the research process. For example, some program staff may be concerned about using quantitative research designs in which participants have to fit their experience into researcher-derived categories. Others, however, may choose quantitative research with the idea that this will produce the most persuasive evidence needed to advocate for socially just policies.

Power Concerns

Coercion and control lie at the very heart of domestic violence, undergirded by broader systems of oppression such as sexism, classism, heterosexism, racism, and xenophobia (Dutton & Goodman, 2005; Gillum, 2008; Stark, 2012; Fuschel, Linares, Abugattas, Padilla, & Hartenberg, 2015). As a result, domestic violence survivors and providers are often highly attuned to power dynamics in relationships, including those with researchers.





"Contributions of CBPR to the DV field" by Cris Sullivan, PhD,
Michigan State University

Accordingly, CBPR researchers should:

- Think about and assess how interpersonal and structural forms of power may influence the project.
- Commit to openly and constructively navigating power dynamics with community partners. (See Section 4 for further discussion and examples.)

A Brief History of CBPR in the Domestic Violence Context:

CBPR is certainly not new to the field of domestic violence. In fact, some researchers have been collaborating with community members ever since domestic violence emerged as a topic of scholarly inquiry (e.g., Perilla, 1999; Schechter 2016; Sullivan & Bybee, 1999). Although the use of CBPR to explore questions related to domestic violence has been relatively consistent over the years, interest in understanding CBPR as a research approach has ebbed and flowed. Two periods in particular – the late 1990s and early 2000s and the past few years – appear to be ones of especially high

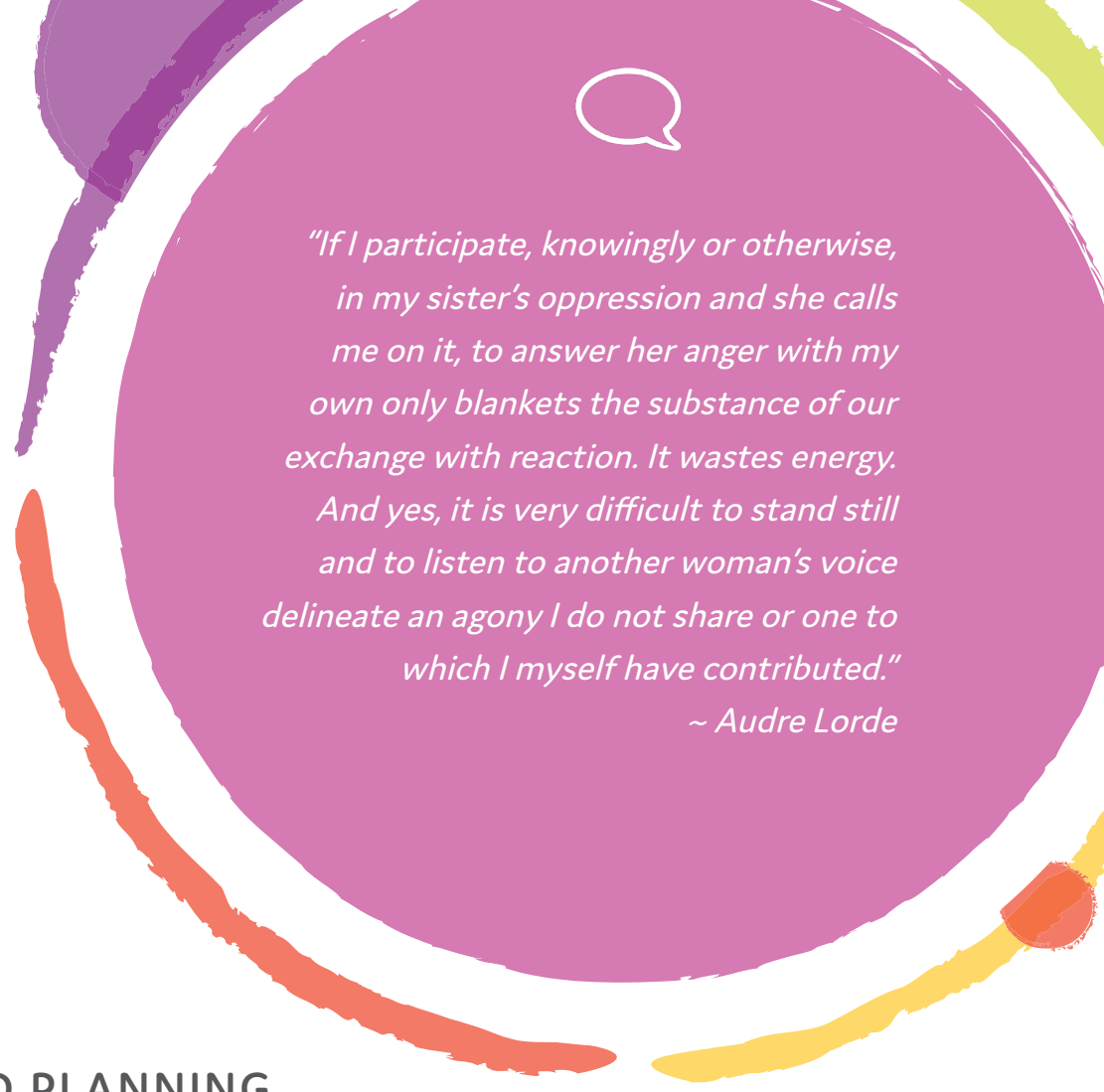
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interest and activity. For example, in 1998 the Centers for Disease Control and Prevention established The National Violence Against Women Prevention Research Center (NVAWPRC), a diverse consortium of researchers and practitioners whose task was to “identify and overcome barriers to collaborations” in the field of violence against women (NVAWPRC, 2001). In 2001, NVAWPRC conducted 14 focus groups with 130 domestic violence practitioners and four focus groups with 23 domestic violence researchers that resulted in a set of practical recommendations for improved collaboration. Concurrent with the founding of NVAWPRC and its study, domestic violence scholars began to write about the lessons they had learned conducting CBPR (e.g., Block, Engel, Naureckas, & Riordan, 1999; Edleson & Bible, 2001; Gondolf, Yllo, & Campbell, 1997; Sullivan, 2003; Williams, 2004).

In the past few years, interest in CBPR has increased on the part of federal funders. For example, in 2009, American Recovery and Reinvestment Act (ARRA) funding went to a project designed to cultivate academic-community partnerships. As part of this project, researchers conducted workshops at Johns Hopkins’ Center for Injury Research and Policy (CIRP) and the House of Ruth Maryland, a large domestic violence program serving Baltimore City, to brainstorm strategies for how to translate CBPR principles into real-world practices (Burke et al., 2013). In 2012, the national domestic violence culturally specific resource centers – e.g., Casa de Esperanza’s National Latin@ Network for Healthy Families and Communities and the Asian Pacific Institute Against Gender Based Violence – received funding from the Family Violence Prevention Services Program, U.S. Department of Health and Human Services, to build the evidence base of cultural specific strategies. This work has produced new knowledge about culturally relevant and community based research methodologies, including CBPR in cultural-specific domestic violence organizations (Serrata et al., 2017). Recently, the National Institute of Justice funded a study that investigated researcher-practitioner partnerships in the criminal justice system through a series of focus groups and individual interviews (Sullivan, Willie, & Fisher, 2013). See *Appendix E* for two examples of CBPR partnerships, one large (the Domestic Violence Program Evaluation and Research Collaborative) and one small (one researcher and one program), that informed the development of this toolkit.

The work to date on CBPR in the domestic violence context – including studies about CBPR and studies using CBPR – has advanced the field by providing both a deeper understanding of partner violence and a wealth of best practices for effective CBPR with domestic violence programs. This toolkit is very much informed by this body of scholarship, but is by no means intended to be a comprehensive review of it. Rather, this toolkit is a targeted compilation of wisdom and lessons learned that we, the authors, wished we had known when we were embarking on our own careers as CBPR researchers.





*"If I participate, knowingly or otherwise,
in my sister's oppression and she calls
me on it, to answer her anger with my
own only blankets the substance of our
exchange with reaction. It wastes energy.
And yes, it is very difficult to stand still
and to listen to another woman's voice
delineate an agony I do not share or one to
which I myself have contributed."
~ Audre Lorde*

SECTION 2: PREPARATION AND PLANNING

This section moves from describing CBPR to preparing for action. In doing so, we shift to engaging you, the reader, more directly. There are probably many reasons why you were drawn to domestic violence focused research. You may have personal experiences with violence and abuse or other forms of oppression. Or perhaps you have been inspired by mentors, practitioners, or researchers involved in the field. Possibly, your interest in domestic violence is rooted in feminism. Or maybe your interest stems from volunteering or working with survivors in other capacities. Similarly, there may be a variety of reasons why you are attracted to using CBPR approaches. Maybe you are a social person and want to find new ways to collaborate with people. Or perhaps your social justice values undergird your interest in community collaboration and you may be interested in working against oppression, and/or conducting research that directly improves community conditions.

This Section is Divided into Two Parts:

- How to engage in self-reflection necessary for conducting CBPR in the domestic violence arena
- How to learn about the community with which you'd like to collaborate.



How to Engage in Self-Reflection

Most researchers are trained in ways that conflict with the basic tenets of CBPR. For example, many are trained:

- To emphasize personal ownership and independent decision-making when it comes to the research processes ("I"), instead of emphasizing a research process developed collaboratively through careful navigation of power and mutual capacity building ("we").
- To frame research questions so as to emphasize community deficits rather than community strengths.
- To believe that good research is rooted in ideas originating from academia rather than in ideas rooted in communities.
- To believe that sound empirical evidence cannot incorporate community perspectives in its designs or methods.
- To believe that publishing in peer-reviewed journal articles is the endpoint of a research process rather than seeing the importance of disseminating research in multiple ways, especially to the people in the best positions to use the findings to inform practice and policy.

Because the tenets of traditional research approaches do not always align well with CBPR, it is essential that you have a clear vision about what brings you to CBPR, why you choose to do the work this way, and what will keep you here for the long haul.



Community-Based Program:

an organization whose policies, practices, and processes align to meet the needs of a particular community, sometimes focused a particular issue, usually defined by neighborhood or cultural or social identities.



Jenny Fauci, Ph.D. Student in Counseling Psychology at Boston College, describes her journey into CBPR

When I began my CBPR journey, I believe my heart was in the right place; however, heart is only the very beginning. I had a ton of work left to do—particularly on myself, and in regards to the work that came before me. As part of this journey, I am particularly indebted to a woman who worked at one of the first organizations I partnered with. I'll call her Lena. She began our conversation with a simple and profound question: "Why should we tell you our stories?" The organization was run by and for women who were formerly or currently involved in the criminal justice system. Most were women of color; many were low or no-income; all had at least one personal experience with the system. None of these descriptions apply to me. I—a White, socioeconomically privileged, non-system involved woman— was interested in learning more about the increasing involvement of these young women in the system from their perspectives. But why me, and then what? In our conversation, Lena told me that someone had sought out women in their community in a similar fashion and was now being interviewed as the "expert." I'm not like that, I thought. But, how would I work differently?

This question made me confront, in a deeply personal way, not only who I didn't want to be, but who I was (and ultimately, who I wanted to be). I had unknowingly assumed that having a critical analysis and an alignment of core values was enough. I came in thinking I was aware of my privileged position, the potential for exploitation, the importance of hard work and listening, the value of building relationships, and the necessity of the question I was being asked. I was well-versed in the critique about people like me.

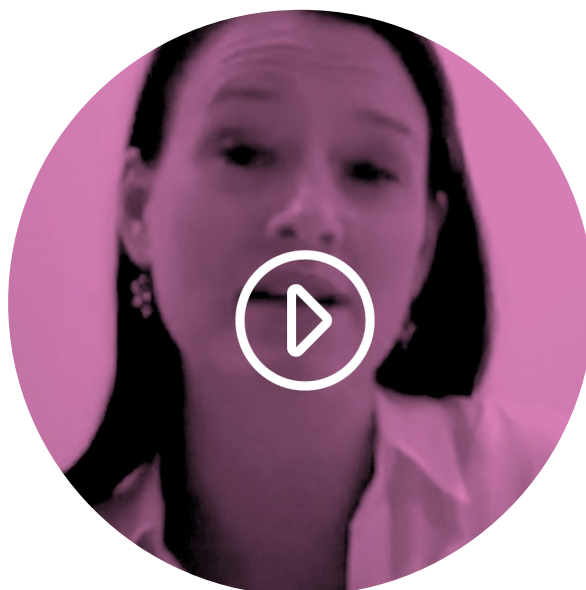
However, it wasn't until I was personally accountable to someone who was generous enough to directly confront me that I started wrestling with new questions about why and how I was doing the work—in this organization and beyond. This question led me to more questions: What do listening and learning really look like in a day-to-day, personal way? How can I be more creative in building this partnership: what are the ways I can learn and contribute? Would could I offer from the research world that is meaningful and sustainable rather than harmful? How will I let people get to know me and how will I get to know them, across all our differences? Given the risks of telling your story, the legacy of harm, and the potential to build something new together, how would it work to make sure that this research really "matters" to the people I'm working with? For me, CBPR is not the answer, but it opens up the possibility of questions that need to be asked and addressed, including Lena's.





"Benefits of conducting CBPR in an academic context" by Nkiru Nnawulezi,
PhD, University of Maryland, Baltimore County

If you do not understand yourself as an instrument in this work, you will fundamentally misunderstand your own actions and reactions, as well as those of others. Self-knowledge and reflection will help you to minimize the risk of unintentionally introducing bias into your research projects or tensions in your relationships with your community partner.



"How biases about the research process can affect your CBPR work"
by Amanda Stylianou, PhD, Safe Horizon



"Motivations for choosing a CBPR approach" by Kristie A. Thomas, PhD,
Simmons College

Pre-Work Self-Reflection Exercise

Questions to Ask Yourself

What are your personal and professional reasons for wanting to conduct CBPR?

Why These Questions Are Important

Although CBPR can be professionally rewarding, the benefits you gain may differ from those that flow from more traditional research. For instance, because CBPR involves deep, authentic collaboration with community partners, the research will be relevant to practice and the process in line with your values. The converse is that deep collaboration is labor intensive. CBPR researchers still write grants, publish, and have highly successful academic careers; but they likely have to balance these with other activities in a way that traditional researchers do not. Thus, it is worth thinking about what "productivity" means for you.

What are some of the personal reasons that led you to want to study domestic violence in general?

If one of those reasons is personal experience with trauma – whether your own, your loved one’s or your community’s – it is important that you have taken steps to process and integrate those experiences. Otherwise, you risk a host of potential problems, such as feeling overwhelmed or triggered by exposure to trauma, feeling that you have to save your participants because you so identify with their pain, or becoming burnt-out. Even if you have done work to address your own trauma, you’ll need to make sure you have supports in place to protect yourself and those with whom you work to avoid being re-traumatized.

What particular aspects of domestic violence are you interested in studying and why?

As you think about areas of interest within the field of domestic violence, consider to what extent your interests will appeal to fellow researchers, practitioners, and survivors. Some areas may overlap well and some may not. Does your interest area have very clear practice relevance? Remember even if you bring an area of interest to the collaboration, the specific research question is likely to emerge or sharpen from conversation with your community partners.

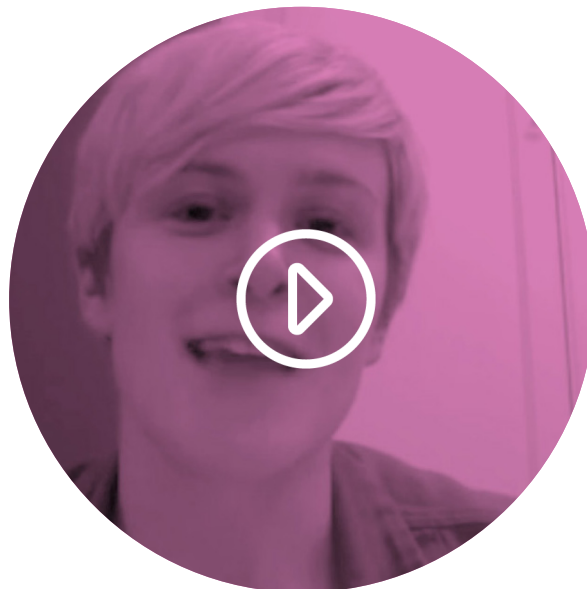
How do you think about the problem of domestic violence, particularly what causes it and what will end it?

Although your understanding of domestic violence will grow with time and experience, it is useful to begin a CBPR project having thought critically about what causes partner violence and how it can be eliminated. Community partners will have their own formulation and will want to know yours so that they can determine whether the two align. For example, many programs have developed an intersectional analysis that recognizes not only gender oppression but other forms of structural oppression as well. Given this philosophy, they may be less interested in questions

How does your personal history and social location (e.g., race, class, gender, age, sexual orientation, geography, immigration status) shape your interest in domestic violence and in CBPR?

that attempt to pin down individual-level causes. If you do not share this understanding, it may be difficult to work together to identify a research question or interpret the implications of findings.

Researchers enter a CBPR partnership with a range of identities that may or may not overlap with those of the communities with whom they are partnering. It is critical to consider how these identities continuously and inevitably shape your own and others' way of engaging in the work. Your community partners may have acute senses of their own social locations and will want to know that you have thought about yours. Be sure that you have done the work to explore your intersecting identities, including how they inform your decision to conduct CBPR, how they might facilitate or hinder relationship building with community partners, and how you can engage in honest dialogue about your social location. We discuss this more specifically throughout the toolkit.



"Exploring how your personal history and social location informs your CBPR work"
by Carrie Lippy, PhD, The National LGBTQ Institute on IPV

How will engaging in CBPR work fit within your career, including your own and your institution's metrics and expectations for success and promotion?

All researchers come into CBPR projects with their own set of needs, which may or may not make CBPR a good fit. For example, researchers in academic institutions need their projects to result in scholarly products such as journal articles and conference presentations, as these are necessary for tenure and promotion. They often need to devote time to teaching obligations and administration, as well as research, which means balancing their time carefully. Many are expected to generate some if not all of their own salaries through grant money. Prior to engaging in CBPR, consider carefully how this work may fit into your greater career trajectory. Good preparation may lead to creative strategies that will enable you to circumvent obstacles. For example, it might make sense to have several small and manageable research projects in place alongside a larger CBPR study, or to request funds to engage in CBPR as part of a faculty start up package.



"Considering whether CBPR will align with your career goals and the demands of your discipline"
by Kristie A. Thomas, PhD, Simmons College



"Preparing your academic institution for your CBPR work"
by Nkiru Nwawulezi, PhD,
University of Maryland, Baltimore County

How to Learn About the Community with Which You'd Like to Collaborate

At its core, CBPR is about partnership. Partnership, in turn, involves mutual understanding. Yet, researchers often come into a CBPR collaboration without an appreciation for the history, diversity, boundaries, tensions, power structures, or dynamics of the community (Burke et al., 2013; Muhammad et al., 2015).

At the broadest level, engaging in CBPR in the domestic violence arena requires learning about the rich and diverse histories, philosophies, and organizational strategies that shape the work of domestic violence programs. For example, some programs have been in existence for decades, having emerged during the early years of the domestic violence movement; these may be more likely to use the feminist, consensus model of decision-making of early domestic violence programs. Other are only a few years old and, thus, have very little institutional memory; these may use a more hierarchical structure.

Some programs may be rooted in a social justice orientation that highlights the intersecting forms of oppression that undergird domestic violence; others may take a more social services approach, focusing on the proximal causes of violence in the survivor's immediate situation (Wilson, Fauci & Goodman, 2015). Some domestic violence programs are



"Strategies for learning about the diverse history of the DV movement"
by Josie Serrata, PhD, National Latin@ Network for Healthy Families & Communities,
a project of Casa de Esperanza

community-based; others are hospital-based or located on military bases. Some provide shelter; others provide counseling and advocacy but no shelter. Some provide services for abusers; most do not. Some support hundreds of survivors; others serve only a handful at a time. Some programs are culturally affirming, in that their policies, practices, and processes highlight the role of culture in all aspects of the organization's functioning; others are culturally specific in that their policies, practices, and processes reflect one specific cultural/racial group's reality throughout the entire organizational structure; and still others are considered "mainstream," in that they don't prioritize work with any specific cultural group and perhaps build on mainstream culture as the basis for decision making (Casa de Esperanza, 2001). Thus, there is no monolithic "practitioner community." Each of these dimensions of a program's history, philosophy, structure, and approach influences both its willingness to collaborate with researchers and the ways it enters into a partnership.

Understanding your community partners' prior experiences with research is also critical. Many organizations have experienced negative interactions with researchers or belong to communities that have endured a legacy of researcher harms (Banks et al., 2013; Israel, Lichtenstein, Lantz, McGranaghan, Allen, & Guzman, 2001; Chavez, Duran, Baker, Avila, & Wallerstein, 2008; Wahab et al., 2014). For example, many domestic violence researchers conduct what is often called "drive-by data collection" (Horowitz, Robinson, & Seifer, 2009). That is, they seek out domestic violence organizations to gain access to survivors, but they do not incorporate practitioner expertise beyond the data collection process; many do not even share the research findings with the organizations or survivors. Practitioners in the Domestic Violence Program Evaluation and Research Collaborative, for example, report experiences such as learning they were included in a researcher's grant application only when the funding was obtained and they were expected to "produce" participants.



Culturally Affirming Program:

An organization whose policies, practices, and processes reflect a deep appreciation for the value that culture brings to staff, operations, management and leadership.



"Why Get Involved" by Ronit Barkai, Deborah Collins-Gousby, and Deborah Heibel

Practitioners have also reported seeing the results of their work published in a way that renders their own contributions invisible. For example, staff members at Casa de Esperanza, a Latina-specific organization, have become hesitant to collaborate with researchers they do not know well after working with researchers who discounted their expertise, questioned their perspectives and opinions, or made overtly racist statements in meetings. Domestic violence researchers have also harmed communities by asking only a narrow set of questions that privilege certain communities over others. For example, researchers sometimes foreground white heterosexual female participants without acknowledging this limitation, thereby creating decontextualized understandings of partner violence that ignores race, class, and sexual orientation (Richie, 2012). In general, practitioners often have a good sense of how the traditional process of knowledge production has undervalued or ignored practitioner wisdom and marginalized specific communities, and they may be wary of researchers who are unaware of this historical context.

The table below lists some factors for you to consider as you get to know your community partners, whether they are practitioners and/or survivors.

Critical Factors to Understand About the Domestic Violence Programs with which You Are Partnering

Topic	Details
Experience / history with research	<ul style="list-style-type: none">● Program's and community's prior experience and history with research, including historical harms
Sociopolitical context	<ul style="list-style-type: none">● Community, state, and federal policies within which the programs may operate● Community, state, and federal policies within which the programs may operate● Social movements that created particular programs and supports for domestic violence survivors● Impact of current sociopolitical events and mainstream culture on the community, including sexism, racism, and other forms of oppression● History of community trauma● Community and neighborhood context in which the program operates
Program background & characteristics	<ul style="list-style-type: none">● Duration of program's existence● Size & budget of program● Nature and timing of the program's funding cycle (e.g., if grant supported, at what times of the year are staff members writing grants and reports)



Program philosophy and orientation

- Location (e.g., community (rural or urban), hospital, military base)
- Services provided (e.g., shelter, counseling, immigration help, no services for abusers, safety-planning, housing support)
- Staff leadership structure (e.g., hierarchical; feminist, consensus model)
- Board leadership structure, including whether the staff report to the board
- Stability and turnover in staff
- Composition of organizational staffing (e.g., numbers of paid staff, interns and volunteers who provide services)

Some examples (which may overlap):

- Social justice orientation: highlights intersecting forms of oppression undergirding domestic violence (Wilson, Fauci, & Goodman, 2015)
- Social services approach: focuses on the proximal causes of violence in the survivor's immediate situation (Davies & Lyons, 2013)
- Culturally affirming: policies, practices, and processes reflect a deep appreciation for the value that culture brings to staff, operations, management and leadership (Casa de Esperanza, 2001)
- Culturally specific: policies, practices, and processes reflect one cultural/racial group's reality throughout the entire organizational structure (Casa de Esperanza, 2001)
- Mainstream: build on mainstream culture as the basis for decision making (Casa de Esperanza, 2001)

If your collaboration is with practitioners working across a variety of programs, your job will be more complex but no less important. You will need to learn about how these practitioners and organizations they represent understand and relate to each other. Do they share philosophies and orientations? Are there enduring differences or complex alliances across people and programs? The more you understand the lay of the land, the better you will be able to navigate the inevitable tensions that arise.





"Regional Collaboration" by Ronit Barkai, Deborah Collins-Gousby, and Deborah Heime

Finally, it is important to identify as clearly as possible the people within the program or set of programs with whom you are partnering. Are you working only with program leaders? Or are you working with program staff as well? Are you hearing from survivors through program staff, or directly? Ideally you will get as broad a representation as possible of the voices within an organization, but that will take some real thought and planning. What can you do to expand the possibilities for collaboration with as broad a representation of one or more organizations as possible? What kinds of structures do you need to put in place to ensure that happens? For example, do you need to go to them rather than asking them to come to you? How do you think about staff turnover? How can you learn which voices are systematically left out of discussions? All of these are critical considerations in determining who the community is, and how you will come to know them.

As you consider these various issues, be aware of your own privileges and biases that influence how you view the issue of domestic violence, how you interact and communicate with others, and how you might overgeneralize your own limited knowledge (Minkler, 2005). We all have our own blind spots it is important to continually work to recognize them and directly address them. Be humble and honest about what you do and do not know. Similarly, researchers, especially those from marginalized



Practice Tip

Sometimes a request for partnership will come from organizations that are physically located in cities or towns far away from the researcher. If this is the case, the researcher should consider whether there is a trusted local partner with CBPR experience who might be more appropriate, as distance can limit true relationship-building.



communities, should remain aware of what community members may assume about you based on your own identities. Since structural oppression can work in a multitude of ways, the self-reflection pre-work described in the previous section remains a key way for researchers to prepare for how they engage with communities (Muhammad et al., 2015).

In the next table, we provide some suggestions for how you can find out more about domestic violence programs and communities – beyond the standard literature review – to enhance your understanding of their history and context.

Where You Can Find Valuable Information About the Domestic Violence Programs with which You Are Partnering

Internet search	Keep in mind, however, that unlike other community organizations, domestic violence programs may minimize publically available or web-based information, both for safety- and resource-related reasons. As such, learning even basic information about local organizations often requires personal contact with staff.
Document review of organizational materials (including policy and training manuals, orientations for participants, etc.)	Think of this as equivalent to doing a literature review at the start of a traditional research project. The document review will help the researcher gain deep insight about the mission, values, and structural and cultural practices that guide the organization; and will do so without requiring a significant time commitment from practitioners. It is especially important to remember when working with marginalized communities that expecting community members to educate non-members is part of a legacy of oppression and an expectation of free labor. The onus is on you to educate yourself wherever possible so as to minimize the burden on communities.
In-person or phone meetings	Talk with leaders and administrators of relevant organizations, as well as practitioners and survivors themselves. Learn about which



Direct observation

staff members in the organization have institutional knowledge, and ask if you can talk with one of them. Be respectful of their time, and come prepared with short, clear agendas and questions. Ensure that such meetings offer staff an opportunity to ask you questions as well.

Ask staff if they would mind if you came in to observe program operations or staff meetings, participate in an activity or event, or otherwise “hang-out” without getting in the way. Be mindful of the organization’s requirements to protect survivor confidentiality and safety when making such requests.

Volunteering at a program

Programs usually welcome offers of help. Some community organizations actually require some sort of volunteer commitment from potential researchers. For example, at a family violence intervention program for Latino families in Georgia, students interested in conducting research with the organization must volunteer for six months before they can even propose a potential project. This ensures that student researchers are familiar with the organization, its values and approach, and the families it serves.





GROUNDING FOSTERING RESEARCH EQUITY

SECTION 3: CBPR VALUES AND PRACTICES IN THE DOMESTIC VIOLENCE CONTEXT

CBPR is intentionally values-driven. In this section of the toolkit, we describe the core values of CBPR and offer a set of concrete questions and ideas to help you translate the values into actions.

Note that we intend this section to serve as a departure point with some guideposts, not a formula. Indeed, talking about values with your community partners, and agreeing together on a set of guiding principles for your work, is integral to this process. *Appendix D* includes an example of a set of CBPR principles co-created between community members and researchers.



Value 1

CBPR Requires a Commitment to Building Relationships Founded on Transparency and Trust

The work of building relationships with your research partners is usually not prioritized or even considered in traditional research approaches. Yet, it is the cornerstone of CBPR and must be considered and shaped in an intentional way. As you get to know your community partners, think hard about the best way to form a working relationship with them in ways that honor their histories and experiences, engage their strengths, and center trust-building and transparency. We hope that the following questions and ideas can guide you here.



Practice Tip

It is important not to romanticize community partnerships. Expect that you will run into tensions throughout the CBPR process. Establish a list of shared values at the beginning of the partnership so that you have something to collectively fall back on when challenges and tensions arise.



"Researcher Needs" by Ronit Barkai, Deborah Collins-Gousby, and Deborah Heimerl.



What Steps Will You Take to Establish Relationships with Your Community Partners?

The work of building relationships with your research partners is usually not prioritized or even considered in traditional research approaches. Yet, it is the cornerstone of CBPR and must be considered and shaped in an intentional way. As you get to know your community partners, think hard about the best way to form a working relationship with them in ways that honor their histories and experiences, engage their strengths, and center trust-building and transparency. We hope that the following questions and ideas can guide you here. Over time, you may spark ideas in each other that will lead to a collaborative partnership. Opportunities can knock in unexpected places! For example, perhaps you are working with a program or group of survivors or practitioners on something else – maybe as part of a state task force, a neighborhood coalition, or a board – when an idea emerges that just has to be researched. Be open to the possibilities.



Practice Tip

Go through your social networks to see if you already know someone connected to the organization, community, or group that you would like to collaborate with. Facilitating connections is easier when someone who is already trusted recommends you.



"Strategies for establishing and sustaining relationships with CBPR community partners"
by Nkiru Nnawulezi, PhD,
University of Maryland, Baltimore County



Once you make an initial connection, perhaps you can offer to provide services or volunteer as part of developing your research partnership. For example, a practitioner might ask you to sit in on a meeting with a funder because the presence of someone with a title and degree would be beneficial; or you could offer to support the program with smaller evaluation efforts (e.g., descriptive analysis of already-collected data), as a precursor to a larger CBPR project.

Of course, all of this takes time and it may be tempting to delegate some of this intensive work. But the truth is that you cannot rely on research assistants for the task of relationship building. As one researcher described during an interview about CBPR “You can’t staff this out. You need to show up” (Sullivan et al., 2017, p. 13).

How Will You Establish Trust and Transparency?

Trust and transparency lie at the heart of a CBPR relationship. In order to create and sustain these essential conditions, both you and your community partners must be clear and honest about expectations and goals, including what the personal and institutional contexts you are coming from are like, the kinds of products you want to produce, and the substantive outcomes you are hoping for. For example, researchers may need to publish and community members may need data for an evaluation. These are often mutually beneficial outcomes that everyone can work on together, but if they are not discussed upfront, misunderstandings can develop quickly.



Practice Tip

One way to handle the relatively greater time commitment required by CBPR would be to have two arms of research going at once. One would be the CBPR arm and the other could be a different form of research, perhaps using a secondary data set from which you can publish consistently as the CBPR project develops and comes to fruition.



*"Transparency is critical in CBPR" by Shanti Kulkarni, PhD,
University of North Carolina at Charlotte*

Transparency also means honest discussions about how funding for the project will be obtained and distributed. How will funding decisions be made? How will all parties – researchers, community partners, and survivors/participants – be funded for their participation (Palinkas, Brown, Saldana, & Chamberlain, 2015)? Who will control the purse strings? If you are in an academic setting, will your university require “indirect” costs, or money that is taken off the total amount of the grant at the outset? Who will write or collaborate on writing the budget? Who gets to see the budget?

In any case, it is important for all involved to be transparent about available funding and how funds will be spent on various aspects of the project, including personnel (both practitioners and researchers); equipment (e.g., computers); software (e.g., data entry and analysis); compensation for participants; travel; and even printing and copying (D’Alonzo, 2010). Identifying all the ways that stakeholders have their time funded is also important. Even in an unfunded project, researchers may have a base salary that covers their time, unlike community partners. Whether community partners are getting their time covered may dictate the amount of time they are able to spend on the project. Note that it may be awkward for you to engage in this level of transparency, especially when sharing a budget may mean revealing salary differentials between yourself and your partners. It is nonetheless important to not only reveal these differences but also discuss them.



*"Discussing money and budgets with CBPR collaborators" by Cris Sullivan, PhD,
Michigan State University*

Finally, although trust and transparency are core requirements of any CBPR project, they take different levels of time and nurturing depending on the identities of the researchers and the community. For example, researchers may need to nurture these conditions with particular care when working with culturally specific communities. Program participants and staff from these communities may have faced decades of discrimination and trauma and feel deep concern about whether their ways of seeing and knowing will be prioritized, especially when the researchers are not from the same marginalized community.



*"Anticipating ways researchers can harm community collaborators" by Susan Ghanbarpour, PhD,
Asian Pacific Institute on Gender-Based Violence*

Value 2

CBPR Entails Building on Each Party's Strengths, Resources and Interests

The very foundation of CBPR's philosophy and practice is the idea that researchers must engage with community members, not as targets of research, but instead as research partners with valuable skills and knowledge to contribute (Israel, Eng, Schulz, & Parker, 2005; Minkler & Wallerstein, 2010). To that end, CBPR does not mean simply "offering" something to a community, taking something from the community, or sharing resources; instead, it means that researchers and community partners co-create knowledge of relevance to communities, building on their respective strengths and resources.



"Strengths and resources that community partners bring to CBPR" by Amanda Stylianou, PhD,
Safe Horizon

To start this process, it is critical that researchers and community partners spend time at the outset exploring the strengths, resources, and sources of power (as well as the needs and limits) that each party brings to the CBPR project, at the individual, organizational, and community levels (Minkler & Wallerstein, 2003; Banks & Armstrong, 2012; Community-Campus Partnerships for Health). The following considerations will help you think about how to leverage the skills, resources and interests that each party brings to the table.



Strengths and Interests That Community Members and Researchers May Bring to the Table

KNOWLEDGE OF ...	Community Members	Researchers
	<ul style="list-style-type: none"> ● Community history, norms, culture and past experience with research ● Survivors' strengths and needs and how community and structural factors may support or impede them ● What works to improve survivors' lives ● Community slang/jargon and ability to de-code meaning 	<ul style="list-style-type: none"> ● Existing scholarship on intimate partner violence and its intersection with other forms of violence and oppression ● How to conduct rigorous research ● Research language and ability to de-code meaning
	<ul style="list-style-type: none"> ● Trust and rapport with study participants ● Community-based dissemination outlets ● Credibility (in certain venues) ● Skills to translate activities and findings for practice audiences and policy-makers ● Material resources (e.g., meeting spaces) ● Traditions & skills that dovetail with research skills (e.g., oral narrative traditions; group facilitation skills) 	<ul style="list-style-type: none"> ● Funding sources ● Academic dissemination outlets ● Credibility (in some venues) ● Skills to translate activities and findings for academic audiences and funders ● Material and technical resources (e.g., meeting spaces; specialized software) ● Personnel (students & research assistants) ● Search engines and the literature base
INTERESTS & GOALS RELATED TO...	<ul style="list-style-type: none"> ● Building capacity & skills related to earning skills and critical analysis of research that aid negotiation of future research partnerships 	<ul style="list-style-type: none"> ● Building outreach, facilitation, and presentation skills ● Contributing to the literature generally ● Publishing to increase professional credibility
<h3>Shared by Community Members and Researchers</h3> <ul style="list-style-type: none"> ● Gaining improved understandings of the studied phenomenon ● Contributing to the representation of a specific community in the evidence base ● Acting on the knowledge learned to improve programs and policies for survivors ● Reducing experiences and impact of domestic violence ● Expanding network and connections <p><i>Note: See the Community Tool Box for a useful resource on discussing community assets and asset-mapping</i></p>		



Section 3: CBPR Values and Practices in the Domestic Violence Context

It may not always be obvious to you what resources or strengths you yourself might bring to your community partners. We have found that giving a brief presentation about your research at a staff meeting is one way to deepen relationships and give back to programs. You might choose to create a PowerPoint for the organization to use in presentations when you are not available. Indeed Domestic Violence Program Evaluation and Research Collaborative members consistently talk about how they never have time to read the latest research but really wish they could hear about it in brief and easy-to-digest formats. Additionally, providing staff trainings on specific research topics (e.g., survey development, data collection techniques, study designs) can expand their capacity to conduct future research (D'Alonzo, 2010). Once you have developed a relationship with a program and its staff, there may be other opportunities and resources you can offer the program. As examples, you may be able to write letters of support for a program's funding and grant proposals, or you may be in a position to nominate the program for an award (Garzón et al., 2013). In general, it is important to think about how you use your resources to enable practitioners to move closer to being able to access knowledge or even conduct research on their own if they so choose.

You and your community partners might also consider ways to connect each other to other people who can support your work. For example, you might be able to connect each other to other researchers, professional associations, policymakers, advocates, funders, or community leaders. Consider what audiences or stakeholders you have access to given your degree, institution, and area of expertise. As you do so, ask yourself what might help your community partners transform their organizations and the larger systems in which they work so that power and resources are more equitably distributed. For example, researchers situated in universities could share information about the project with their departmental colleagues or at meetings and conferences with other researchers, educating them on the benefits of CBPR. Researchers might also provide trainings about CBPR to other important stakeholders, such as the institutional review board (IRB) at their university.

As you think about how to give back, remember that although the research process may be intimidating to some community partners, especially when it comes to advanced statistics (something that many researchers are intimidated by as well), this is not necessarily true for all. It is useful instead to observe how community partners may already be employing research in their work.



Examples of Research Practices Embedded within DV Organizations

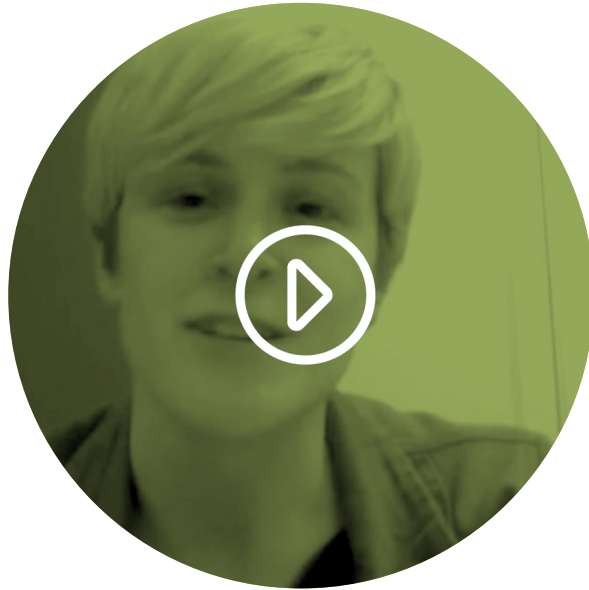
- *DOVE (Domestic Violence Ended) a domestic violence program in Massachusetts, collects strengths-based data from participants in their residential program in a creative and out-of-the-box way: On a monthly basis, this organization asks each participant to record moments when they expressed agency. Staff members collect these recordings and share them with the participant every few months to reflect back the process of expanding empowerment.*
- *Casa de Esperanza, a Latina-specific organization also engages in data collection as part of their regular operating procedure - including community needs assessments and focus groups. Researchers coming into those organizations would need to listen for practices like these even if those practices don't go by the label "research."*

Value 3

CBPR Attends to Individual and Structural Power and Works Toward Redistributing Power More Equitably

Unlike many traditional research approaches, CBPR acknowledges and addresses the ways that power and oppression shape research. The power to conduct and disseminate research creates access to numerous resources, audiences, and sources of funding. By viewing research participants as passive targets of research and by restricting community members' ability to "own the means of knowledge production," traditional research approaches can uphold oppressive systems of power (C. Burke, personal communication). This may be particularly damaging in the domestic violence context: coercion and control lie at the very heart of partner violence, often undergirded by broader systems of oppression such as sexism, classism, heterosexism, racism, and xenophobia (Fuschel et al., 2015; The NW Network, 2017). Survivors themselves and those who work with them are therefore highly attuned to power dynamics in their relationships with people and organizations. Given these dynamics, it is not surprising that potential CBPR partners are reluctant to collaborate with researchers who fail to take power into consideration in their work with communities (Coughlin, Smith, & Fernandez, 2017; Kerstetter, 2012). As you shape your research process, it will be important to commit to exploring and navigating power dynamics with your community partners as you shape the research process (Muhammad et al., 2015). The following questions and ideas may help you to think about these issues more carefully.





*"How structural oppression manifests and functions within a CBPR partnership" by Carrie Lippy, PhD,
The National LGBTQ Institute on IPV*

How Is Structural Oppression (Racism, Xenophobia, Classism, Sexism, Heterosexism, Etc.) Functioning Throughout the CBPR Project?

As described by Leticia Nieto (2010), when thinking about structural forms of oppression, the question is not "is something oppressive functioning in this moment?" but rather "how is it functioning?" (p.38). As a CBPR researcher, you cannot have the expectation that with enough effort, you will not be oppressive. Simply because of your role as an academic researcher, you carry power, privilege, and status as a producer of scientific knowledge (Muhammed et al., 2015). You may also hold power and privilege based on your class, education, race/ethnicity, or other identities. It is critical to acknowledge these dynamics and consider how they are operating in the partnership even in subtle ways such as, for example, expecting community partners to come to a university for a meeting without considering their expense or comfort; failing to translate research tools into languages that would provide more opportunity for a wider range of participants; or planning meetings on non-Christian religious holiday.



Practice Tip

It may be the case that discrimination, bias, and exclusion will arise as issues that need to be addressed at some point in the CBPR process. Be prepared. It is critical to know background literature about diversity, inclusion, cultural competency, and anti-oppression work within domestic violence fields.



How Can This Project Increase the Equitable Distribution of Resources?

Ultimately, our attention to power is designed to ensure as equitable a power dynamic as possible both during the CBPR project and beyond. As you move through the CBPR process and continue to reflect on your own social location, you will need to continually consider the resources that you can bring to the project, including, perhaps, how you can use your own privileges to change the systems in which the CBPR project is situated. How can your credibility or that of your institution be leveraged in service of the project? What resources and connections can you bring to the project or share with partners? Value 1 includes many examples of potential resources you may be able to share.

How Are You Building in Access for Marginalized Communities?

The equitable distribution of resources means ensuring the inclusion and support of marginalized communities. This means budgeting for items such as language access supports (such as interpretation and translation) and supports for people with disabilities; appropriately compensating community partners for their work, particularly when asking them to participate in activities outside of their normal workflow (such as meetings after work); and funding for transportation, meals, child care, and similar supports (D'Alonzo, 2010). The Vera Institute of Justice has developed a set of [tip sheets](#) to help with planning and implementing accessible meetings that address the needs of all people, including people with disabilities and folks who are Deaf or hard of hearing.

Value 4

CBPR Requires Equitable Decision-making and Mutual Accountability

It is important to establish as clearly as possible what roles and responsibilities each member of the collaboration will take on, how decisions will be made, and how people will be accountable to each other throughout the process.

Of course, equitable power-sharing can look different in different projects. Indeed, a variety of decision-making arrangements make sense in the CBPR context, as long as they are discussed in a transparent way to ensure that they respond to the needs and goals of each party and attend to how power is operating in the discussion. The following questions can help you think about the variety of ways to make decisions in partnerships.





*"Strategies for collaborative and transparent decision-making in CBPR" by Rebecca J. Macy, PhD,
University of North Carolina at Chapel Hill*

Who Determines the Research Topic?

A core principle of CBPR research is that research questions arise from practice-based needs rather than from the ivory tower. This principle can be manifested in a variety of ways. If you have experience working in the trenches, it is entirely possible that you have a question in mind already. If you can find stakeholders who share your interest in this question, then there is nothing wrong with making it the basis of the partnership.

In other cases, you will start off with one question and then modify it in collaboration with your partners. For example, Yoshihama and Carr (2002) were forced to make many unexpected detours in their CBPR project with Hmong women.



Practice Tip

At the initial meeting with potential community partners, ask whether they have ever been involved in a research or evaluation process before, what they appreciated about the process, and what parts of the process they would have changed. Clearly communicate how participatory approaches to research and evaluation differ from traditional approaches.



Section 3: CBPR Values and Practices in the Domestic Violence Context

Although they went into the project wanting to focus on domestic violence as it intersects with race, class, and gender, they soon learned that discussing partner violence was taboo and potentially unsafe for collaborators so they decided to expand the focus of their project. Similarly, scholar and activist Beth Richie described how she went into a CBPR project wanting to focus specifically on partner violence against African American women. Instead, her collaborators taught her that violence by an intimate partner must be examined in the context of other forms of violence and oppression. She wrote that if she had kept to her original focus, "I think it would have skewed what people were comfortable saying and would've made them focus on something that wasn't a discrete concept to them" (B. Richie, personal communication, 7/3/98, as cited in Edleson & Bible, 1999, p. 89).

In many cases, you will co-create the research question with your community partners because they are in the position to understand what is most useful for their own work and for the field (Poleshuck et al., 2016; CCPH). A consistent theme in research and conversations with domestic violence practitioners and survivors is the desire to conduct research that has action implications. As one practitioner reported, "Study things that are important. Don't tell me that domestic violence is bad, but how to stop it! Some studies have been done to death. We need to break new ground!" (Mouradian, Mechanic, & Wililams, 2001, p. 5). Of course, a range of other questions may be important to your partners. In some cases, community partners will come to you requesting that you engage with them to address a particular question; but often you will need to create the time and space to collaborate with your partners to develop a set of questions relevant to their work.



"Working together to implement measures" by by Ronit Barkai, Deborah Collins-Gousby, and Deborah HeimeI





Sriya Bhattacharyya, Ph.D. Student in Counseling Psychology at Boston College, describes why she does CBPR and where her commitment comes from.

As a doctoral student and an emerging researcher, CBPR is an orientation I truly value because it (a) shifts power outside of the often oppressive ivory tower academy into communities, (b) leans on the pre-existing expertise of groups, which in and of itself can be healing for those who have been systematically marginalized, and (c) provides a more dynamic, rich, collaborative research experience in which I have the honor of building relationships with communities and using our varying privileges and capital to further community-based causes.

My commitment to CBPR stems from an array of experiences going back to my childhood. For example, I benefitted tremendously from being involved with an all-girls feminist school for “at risk” youth. The program stressed the value of interrogating, questioning, and flipping power; as a result, I learned skills of critical analysis, leadership, and ongoing self-reflection at a young age. My mentor at the time modeled the importance of sharing power and listening to communities. She also helped me to engage in deep self-reflection work (i.e., “pre-work”), which would be essential for my later engagement in CBPR.

Finally, my commitment to a participatory approach was solidified during my work in a genocide survivor’s village in Gisenyi, Rwanda. Part of this work involved a needs assessment in which survivors in the community drew their visions of peace, unity, and wishes and then shared the images at the genocide memorial. Collaborating with this community demonstrated the importance of translating research to practice and doing so within long-standing community partnerships and guided by leaders most affected by the issues of interest. The lessons I have learned from community programs and practitioners continue to guide me in very profound ways, and I look forward to lifelong learning through CBPR



Who Designs the Methods and Interprets the Results?

In term of designing the study itself, sometimes all parties will want to make decisions collaboratively at every step of the process. Sometimes this will feel burdensome and a decision will be made to divide decision-making power across stakeholders according to expertise, interest, time, or impact of the decision at hand. For example, in the Domestic Violence Program Evaluation and Research Collaborative, the group felt that it was important to decide on the research questions and overall research design together, but chose to divide some of the decision-making power within each of those arenas, such as how and when to ask survivors if they'd like to participate in the study (practitioners), how to analyze the data obtained (researchers), and how to interpret the findings (both). What is key here is that the way decisions are made is negotiated collaboratively and that any particular decision can be revisited (Ross et al., 2010).

Who Disseminates the Results?

The discussion under Value 6 describes the many ways that CBPR findings can be disseminated so that they reach the broadest possible audience. Products might include peer reviewed publications, webinars, curricula, newsletters, policy and practice briefs, and videos. It may be that responsibility for dissemination should follow the nature of the specific product and/or that researchers and community partners disseminate the same products to the different networks to which they have access. Again, it is important to discuss these issues upfront so that this last stage of the process can proceed quickly once results are obtained.

How Will You Ensure That Discussions About Decision-making Will Be Carried Forward Throughout the Project?

Ideally, discussions about decision-making processes should be formalized through an organized, coherent, and collaboratively developed plan that is documented and shared by those involved. A Memorandum of Understanding (MOU) can be a useful tool here. At some universities, faculty may not be able to engage in a formal MOU due to organizational policies. In such cases, a formal letter of agreement may be useful instead. Such a document should clearly describe mutually agreed upon (a) contributors and roles – e.g. who will be responsible for roles as varied as sending communications, planning and attending meetings, submitting proposals to Institutional Review Boards, and recruiting participants (b) expectations and goals for the project; and (c) processes that will be used throughout,



including how meetings will be run and how disagreements or unexpected events will be navigated; and (d) how results will be shared and disseminated, described further under Value 6 (Minkler, 2004; Sullivan et al., 2017). There are many [examples of CBPR MOUs](#) available.

Value 5

CBPR is a Flexible and Creative Process That Responds to the Ongoing and Evolving Needs and Priorities of All Stakeholders

One of the compelling aspects of CBPR is that it is flexible and allows for – indeed requires - creativity, role flexibility, and innovation. Researchers’ willingness to be adaptable is critical to the success of the CBPR process.

What Kinds of Twists and Turns Might You Expect?

If you are doing CBPR with domestic violence programs, you can anticipate that certain challenges are likely. For example, primary and secondary trauma among survivors and staff in domestic violence programs may well enter the work, potentially causing burn-out and high rates of turnover (Shoultz et al. 2006; Slattery & Goodman, 2009; Sullivan et al., 2017). CBPR researchers need to work with their community partners to anticipate and manage this situation so as to ensure that the project continues without overburdening those practitioners and survivors who remain.



“When the project or intervention does not go as planned” by Rebecca J. Macy, PhD,
University of North Carolina at Chapel Hill

Major events may well divert attention from the project, some of which can be anticipated and some of which emerge in the form of crises. Survivors in programs may face individual crises related to emotional or physical safety that must be attended to immediately. For instance, in one collaboration with youth at a local middle school, there was an incident of self-cutting that caused a pause in the research process for the group. Instead of stepping aside, the researcher, who was embedded in a clinical psychology department, sought resources to bring to the middle school the young people attended. This allowed the researcher to further deepen her relationship not only with the youth involved with the project but also with the school staff (Sánchez. & Serrata, 2016). Alternatively, unexpected crises may occur that affect many or most participants in a program. For example, domestic violence programs may become temporarily and suddenly overwhelmed when the community with whom they work faces a crisis such as an immigration raid, a large-scale hate crime, a domestic violence homicide, or an instance of police brutality. You should expect that CBPR projects will be put aside in the face such pressing individual or community concerns. Then there are regular events that will likely take resources from the CBPR. For example, June is typically very busy for LGBTQ-specific domestic violence programs because it is Pride Month, and organizations often participate in a number of community events throughout the month. December is often another busy month because of holiday gift drives or other holiday celebrations. Anticipate that practitioners' research responsibilities will likely take a back seat during these times.



Practice Tip

Participatory data analysis is a great way to enhance practitioner skills and promote an organizational change process. Numerous scholars have developed participatory frameworks for data analysis (see Adams, Nnawulezi, & Vandenberg, 2015; Patton, 2008; Torres, Preskill, & Piontek, 2005).

Unexpected twists and turns can also arise in the context of developing methods that align with community partners' worldviews. Sometimes, finding common ground takes CBPR researchers into unexpected methodological territory. For example, CBPR researchers often talk about the deep creativity and sense of adventure they have experienced when they have stretched themselves beyond traditional research methodologies to consider non-written approaches such as photo-voice or digital storytelling (DiVietro, 2015; Shoultz et al., 2015; Yonas, Burke, & Miller, 2013).



How Can You Build a Realistic, Clear, and Flexible Timeline?

When developing a timeline, being realistic and collaborative are important – to plan for what is possible and to expect the unexpected. This means working together to establish deadlines but building in extra padding for those processes where a clear timeframe is hard to predict. Make sure to leave sufficient time for all parties to review and provide feedback on several iterations of the evolving frame.

As you think about your timeline, also remember that turnover both within the research team and within your partnering organization is likely and will require extra time for new training and orientation (D'Alonzo, 2010; Shoultz et al. 2006).

Value 6

The Products of the CBPR Process Belong to All Partners

At the heart of CBPR is the idea that research products should be co-owned by researchers and community partners and disseminated to both practitioner, community and scholarly audiences (Banks & Armstrong, 2012; Wilson, Kenny, & Dickinson-Smith, 2017). Indeed, the research takes on value to the extent that its results are relevant and accessible to those who are doing the work on the ground, and those who are most affected by the issue. The following questions can help you think through how this might work in your own partnership.

Do You Have a Plan for Developing and Disseminating Research Products That Are Creative, Meaningful, and Useful?

CBPR stakeholders must also consider how to best get research products and information out to people (Banks et al., 2013; Brydon-Miller, 2012; Palinkas, 2017; Israel et al., 2005). Developing a thoughtful dissemination plan is not an “extra” part of the research, but is, instead, at the very heart of the unique nature of CBPR and its capacity for transformation. Importantly, differences in opinion around the dissemination of research can cause the greatest amount of tension between researchers and community partners (Sullivan, Hunter, & Fisher 2013). Thoughtful discussion and planning can avert major blow-ups at the end of a project.





"Disseminating CBPR findings" by Rebecca J. Macy, PhD,
University of North Carolina at Chapel Hill

How Will You Handle Findings That Might Be Misinterpreted Or Harmful?

Findings may emerge that have the potential to cast a negative light on the community in which you are partnering and/or on the organization itself. When a community is already subject to racism, bigotry, or other forms of oppression, findings that are not thoughtfully framed or presented can add to the burden of oppression and be damaging to practitioners and the communities with which they work (Israel et al., 2005; Wilson et al., 2017).

Likewise, programs that are operating with limited funding may be reasonably concerned about how findings that do not show positive changes from their services may affect their reputation and funding. Factor this possibility into your collaboration and agreements from the beginning. Ideally, trust will be enhanced by transparent discussion of this issue. For example, if funders require that all results need to be shared with them, such requirements need to be made clear before the project begins and all stakeholders need to work out how they will collaborate to present negative results. The Domestic Violence Program Evaluation and Research Collaborative did just this: They agreed from the beginning that they would work together to interpret and frame all results jointly to help each other ensure that any negative findings could be properly contextualized.

In addition, non-significant and/or negative findings concerning program activities and services – while initially disappointing– can provide important feedback and opportunities for growth, development and new directions. Such findings might help advocates and service providers to understand that their programs are not working as well as they would like or in the ways that they intended. Rather than casting a negative light on the program and its services, a program’s participation in research can show that the program is willing to undergo rigorous evaluation to ensure that their services are working as well as they can for survivors, their family and the community at large. Again, researchers should work to build transparent, trusting, and respectful relationships with program staff to help ensure that non-significant and negative findings are used in ways that promote a program’s positive growth and development, rather than undermine a program’s standing with its funders and in the community.

Who is Responsible for Writing/ Authoring and Disseminating Results?

All those involved in a particular CBPR project should have the chance to co-author the products of that project. In some cases, different stakeholders will want to write different pieces for different audiences.

Even when only one party does the writing, however, shared authorship is usually appropriate since conceptualizations have been co-developed. Note that in the case of shared conceptualizations that emerged from the process, it is important for community members to continue to receive credit for their work even as researchers continue to build on it beyond the original project (D’Alonzo, 2010).



Practice Tip

For most researchers, developing publishable manuscripts is critical to career advancement. There are a number of ways to marry this imperative with CBPR values:

- Publish the CBPR project findings in peer-reviewed journals with your partners.
- Write about the process of conducting CBPR. Such research is sorely needed in the literature.
- Consider other types of related manuscripts, such as literature reviews and theoretical analyses that can be published while you are engaging in CBPR.

Collaborating with community partners on disseminating different kinds of products is beneficial to everyone! Community members get credit for their contributions, researchers are able to publish more, and the larger world benefits from the knowledge obtained through the process.



There are exceptions to the general rule of shared authorship, however: For example, in some cases, a community partner may feel that being included as an author would not be strategic because the target audience may perceive bias. Or a researcher may want to focus on peer-reviewed scholarship and choose not to collaborate on other types of reports in the interest of time. Any arrangement is possible within a CBPR approach as long as all stakeholders have a chance to discuss it in the context of careful attention to power dynamics (Atalay, 2012; Muhammad et al. 2015).

Consider also exactly who will be responsible for disseminating the products of the research and how. This will involve careful thinking about who is best positioned for what kinds of dissemination, recognizing the different strengths, social locations, skills, and networks of various stakeholders. It will also involve careful analysis of power to prevent researchers from being the only ones to present at or disseminate to resource-rich settings or audiences (e.g., professional conferences). Be creative as you consider all the potential avenues for dissemination.

What Sorts of Products Will Be Most Useful and Influential?

The products of CBPR are intended to be innovative, original, digestible, and geared towards change and sustainability (Minkler & Wallerstein, 2003).

Although peer-reviewed publications may be critical products for researchers, if CBPR is to “belong” to multiple stakeholders, including the community, then the results must be presented, shared, and owned in multiple ways. Indeed, one survey of domestic violence service providers found that they were most likely to obtain information from newsletters, and least likely from peer-reviewed journals (Murray & Welch, 2008). In general, provide brief and straightforward documentation of findings in a way that clearly communicates the real-world relevance of the research in non-technical language and provide clear recommendations (Sullivan et al., 2017). Multiple audiences should be considered, including community members, fellow researchers, policy makers, city council members, advocates, survivors, external funders, and administrators (Sullivan, Hunter, & Fisher, 2013). Also, be sure to consider how



Practice Tip

Potential avenues for dissemination of CBPR project findings include webinars, curricula, fact sheets, infographics, posters, guides, webinars, newsletter entries, measures or assessment tools, policy and practice briefs, toolkits, short videos, and white papers.



the products of the research can become a part of the knowledge base of the community partners themselves in a way that is sustainable and useful (Burke et al., 2013).

How to Address Dissemination Obstacles You Might Face within Your Own Institutions.

Beyond the complexities that arise between CBPR partners related to dissemination of products, pressures must sometimes be confronted beyond the partnership itself. Some universities expect researchers to be sole owners of the data and results from projects, including theoretical knowledge production. This may mean working with academic institutions to help them understand the centrality to the CBPR process of co-ownership (Bloom et al., 2009). Researchers may need to work with their IRBs or departments to advocate for communities and challenge existing policies or practices (Bloom, et al., 2009). Some researchers do this through extensive relationship building with members of their IRBs or even joining the IRB to provide more opportunities for education. Researchers may also need to educate colleagues about CBPR so as to cultivate allies who can support this orientation. Researchers can try presenting at department brown bags or other informal meeting venues. Newer faculty might benefit from partnering with more established faculty in this process. See Appendix F for an example of an infographic that summarizes results of a scholarly paper in a more accessible way.



"Achieving success in the academy as a CBPR researcher" by Shanti Kulkarni, PhD,
University of North Carolina at Charlotte

Concluding Thoughts

It is no small feat to work through to the end of this toolkit. In many ways it is a journey of learning and self discovery: you've read about the history and values of CBPR in the DV context, looked inward to prepare yourself to conduct CBPR, absorbed a wealth of tips for how to execute CBPR, and – if you're accessing the toolkit through the website – heard directly from a variety of CBPR practitioners and researchers. We truly hope that you feel more confident in your desire and ability to engage in CBPR with the DV community. Please remember that this resource is yours to return to whenever you need to revisit a concept, remember a tip, or be reminded of why you chose CBPR in the first place.



Authors of the Toolkit

We are a group of CBPR researchers who bring decades of experience doing CBPR from the perspective of difference disciplines, settings, communities, roles, and identities. Some of us are based in universities and others are based in national organizations. All of us have worked directly in and/or with programs that serve survivors.



Dr. Lisa A. Goodman

is a clinical-community psychologist and professor in the Department of Counseling and Applied Developmental Psychology at Boston College. She has spent the last 25 years conducting community-based research that illuminates the experience of socially and economically marginalized survivors and illustrates the potential of innovative program models to support them. Dr. Goodman has served as an evaluator, board member, and advisor to numerous local and national domestic violence and social justice organizations; and she is the co-founder of the Domestic Violence Program Evaluation and Research Collaborative, a collective of domestic violence programs and researchers who partner to create knowledge that improves survivors' lives and deepens advocates work.



Dr. Kristie A. Thomas

is an Associate Professor at Simmons College School of Social Work. She has over 15 years of experience as an educator, researcher, and social work practitioner in the field of intimate partner violence. She is committed to conducting community-based research that tends to the real-world issues facing people affected by intimate partner violence – particularly those who are economically and socially marginalized. This commitment stems from her own personal history of intergenerational trauma and her social work practice experiences, including as a case manager in domestic violence shelters, a community organizer on issues of affordable housing, and a research consultant for the National Clearinghouse for the Defense of Battered Women. Dr. Thomas is a founding member of the Domestic Violence Program Evaluation and Research Collaborative.



Dr. Josephine V. Serrata

is a clinical community psychologist and director of research and evaluation at the National Latin@ Network for Healthy Families & Communities, a project of Casa de Esperanza. Her research and evaluation work are embedded in practices that are culturally affirming and community driven. Her research includes studying the intersections of domestic violence with issues of oppression, privilege and strength in Latin@ families and communities. Dr. Serrata's evaluation experiences have included evaluating community based prevention and engagement efforts, and working hand in hand with community based organizations to build their evaluation capacities. Her clinical work focuses on trauma informed, culturally relevant approaches, including infusing healing informed strategies into her Youth Participatory Action Research work.



Dr. Carrie Lippy

is a community-based evaluator who focuses on evaluating culturally specific domestic violence programs. Dr. Lippy has partnered extensively with organizations in immigrant, refugee, and LGBTQ communities to collaboratively design and implement culturally responsive evaluations. She strives to use innovative, community-based approaches like CBPR to disrupt the status quo and promote social justice. Carrie Dr. Lippy currently serves as the Research Coordinator the National LGBTW Institute on IPV and is excited about conducting, supporting, and disseminating some super queer, community-based research.



Dr. Nkiru Nnawulezi

is a community-based researcher and evaluator in the domestic violence field. She is currently appointed as an assistant professor in Community Psychology at the University of Maryland, Baltimore County. She works collaboratively with domestic violence organizations to help them create the organizational conditions needed to promote survivor empowerment. As a Black feminist, Dr. Nnawulezi values social justice, intersectionality, and individual and community empowerment. CBPR aligns with her personal values and offers practical ways to support survivors, community practitioners, activists, and organizers who seek to create a violence-free world.



Dr. Susan Ghanbarpour

is the research and evaluation lead for the Asian Pacific Institute on Gender-Based Violence. In this role, she provides training, technical assistance and capacity-building resources to advocates serving Asian and Pacific Islander survivors of gender-based violence. She works to strengthen advocates' capacity to evaluate their programs, engage in community-based participatory research, and incorporate evidence-based and trauma-informed practices. Her expertise in program evaluation and qualitative research serves to inform local and national projects. Dr. Ghanbarpour's work is grounded in collaborating with community members to surface, support and center the knowledge and strengths residing in culturally-specific and marginalized communities.



Dr. Rebecca Macy

is the L. Richardson Preyer Distinguished Chair for Strengthening Families at the UNC at Chapel Hill School of Social Work where she teaches courses in mental health, trauma and violence, social work practice and statistics. She has 15 years' experience conducting community-based studies that focus on intimate partner violence, sexual violence and human trafficking. She has dedicated her research efforts to violence prevention and to improving services for violence survivors. To find the most effective and feasible strategies, she has conducted investigations in various community settings in collaboration with survivors, service providers, and policymakers. She has received funding for her research from foundations, federal agencies and state government. Dr. Macy has published more than 70 peer-reviewed articles, book chapters, and invited commentaries on these topics, and given more than 100 peer-reviewed and invited research presentations at national and international venues. The rigor of her research and its benefit to practice has been recognized with awards from both the Office of the University of North Carolina-CH Provost and the Orange County Rape Crisis Center.



Dr. Cris Sullivan

is the Director of the Research Consortium on Gender-based Violence and Professor of Ecological-Community Psychology at Michigan State University, and the Senior Research Advisor to the National Resource Center on Domestic Violence. She has been an advocate and researcher in the movement to end gender-based violence since 1982. Her areas of expertise include developing and rigorously evaluating community interventions for intimate partner violence survivors and their children, and evaluating victim services. In addition to consulting for local, state, federal and international organizations and initiatives, she also conducts workshops on effectively advocating in the community for survivors and their children; understanding

the effects of partner violence on survivors and children over time; improving system responses to the problem of gender-based violence; and evaluating victim service agencies.



Dr. Megan H. Bair-Merritt

is a faculty member at Boston Medical Center, New England's largest safety-net hospital. She is a researcher, practicing pediatrician and educator, who has spent her career thinking about the impact of intimate partner violence on child health and about primary care-based interventions to promote resilience and address psychosocial adversity. Dr. Bair-Merritt has partnered (and continues to partner) with Futures Without Violence to work with researchers and practitioners to co-create materials for advocates working with children. Dr. Bair-Merritt has recently completed a mid-career Fellowship through the WT Grant Foundation in which she immersed herself into the daily work of Futures Without Violence and national Defending Childhood Initiative sites. Dr. Bair-Merritt applied for this fellowship with the desire to improve her ability to conduct high-quality research that is used by practitioners and policymakers to reduce children's exposure to violence and, ultimately, to improve youth outcomes; and, she realized that the traditional research paradigm was ineffective in ultimately achieving this goal.

Glossary of Terms

Domestic violence and intimate partner violence	Many people use these terms interchangeably to refer to any form of violence or abuse from a partner or former partner, including psychological, physical, sexual, or economic abuse, as well as stalking. The term intimate partner violence has become more commonly used in scholarship. However, the term domestic violence is more commonly used by the general public and in the advocacy community.
Program	An agency or organization whose purpose is to prevent domestic violence or respond to the needs of survivors.
Practitioner	An individual who works at a domestic violence program, whether as a paid employee or volunteer.
Community	A formal or informal set of boundaries that can define a geographic location, shared set of social identities or demographics, common roles, or shared interests, beliefs, or practices.
Community-based program	An organization whose policies, practices, and processes align to meet the needs of a particular community, usually defined by neighborhood or cultural or social identities.
Community members	Can include any or all of the following: Survivors; children and other family or extended family members of survivors; domestic violence practitioners and domestic violence advocates; policy makers; people living in the community who may not be survivors, or have any formal relationship to domestic violence services or policy, but have an interest/stake in the issue and/or are key to changing norms.



Culturally affirming program

An organization whose policies, practices, and processes reflect a deep appreciation for the value that culture brings to staff, operations, management and leadership.

Culturally specific program

An organization whose policies, practices, and processes reflect one cultural/racial group's reality throughout the entire organizational structure' often referred to as "by and for" agencies because most staff are purposely from the same cultural/racial group as most participants.

Mainstream program

An organization led predominately by leaders of the majority culture that often builds on mainstream cultural values as the basis for decision-making.



CONSENT TO PARTICIPATE IN RESEARCH FORM

What's the purpose of your study? What will happen during your study? Will my information be kept private? This guide will help you organize and request participation.

Created by: Asian Pacific Institute on Gender-Based Violence (Dr. Susan Ghanbarpour, 2016)
Funded by: Blue Shield Against Violence, Blue Shield of California Foundation.

a part of



COMMUNITY BASED
PARTICIPATORY RESEARCH

Consent to Participate in Research Services for XYZ Survivors of Intimate Partner Violence Focus Group Discussion

Introduction

You are invited to participate in a research study with Researcher's Name at Name of Program or Organization. To participate in this study, you need to give your informed consent. Informed consent means you understand what this study is about, the potential risks of participating, and your rights and protections. This document gives information that is important for this understanding. Please take as much time as you need to decide if you want to participate. You do not have to participate, and you can stop participating at any time with no consequences to you. You can ask questions at any time.

What is the Purpose of This Study?

The purpose of this study is to learn more about services for XYZ victims of intimate partner violence. You were invited to participate because xxx. We would like to hear your thoughts about xxx.

Explain why these participants were chosen. For example: "You were invited to participate because you identify as a Queer or Trans Latina that has been in contact with our organization within the past year."

Title of your research

Purpose of your study, using clear and simple language.

For example: "We would like to hear your thoughts about what services in the community you found helpful, what other services you would like or need, and barriers to reaching out for these services."



What Will Happen During This Study?

If you decide to participate in this study, you will be part of an in-person focus group discussion with up to fifteen others. The focus group will take about two hours. The conversation will be recorded, and then typed up. We will tell you when the recording starts and stops. We will not ask for any information that may identify you. We ask that you do not give any identifying information about yourself or others, either.

Do I Have to Participate in This Study?

No. Being in this study is completely voluntary. It is your choice whether to attend the focus group, and you can refuse to participate. You can also skip questions, or stop participating at any time. Whatever you decide, there will not be any negative consequences for you. You will still be able to receive the same services from Name of Organization. You will still receive full compensation for participating, even if you skip questions or stop participating.

What Are the Potential Risks Or Discomforts If I Participate?

Since this is a group discussion, there is a chance that what you say may become public. We will try to reduce the risk of this happening. The group facilitator will ask all focus group participants to not share what they hear in the group with anyone outside the group. Still, we cannot control what other participants may do. So it is possible that they could talk about what you say in group to others.

The group facilitator will ask everyone in the group to maintain a respectful tone. However, it is possible that disagreements may occur. In rare

Say whether it will be audio recorded, videotaped, transcribed, etc.

It is very important to include this sentence, if your focus group participants are people who are or have been receiving services from your program.

It's important to have a counseling referral ready for any participant who needs it, and ideally on-site counseling or support, if possible.



cases, the facilitator may stop the discussion and/or ask anyone acting disrespectfully to leave. The facilitator will also try to ensure that everyone's voice is heard, and so may call on you if you have not spoken for a while. Even though we wish to hear from everyone, you may always refuse to answer any question at any time. You may also stop participating at any time, with no consequences to you.

You may feel upset or uncomfortable during the focus group. If that happens, the group facilitator will talk with you. S/he can also refer you to someone who may be able to help you, at no cost to you.

What Are the Potential Benefits if I Participate?

Being in this study may not help you directly. But the information we learn from the focus group may help us xxx.

How Will My Information Be Kept Private?

We will keep your records private to the extent permitted by law. Any information that is obtained in this study and that can be identified with you will remain confidential and will only be disclosed with your permission or as required by law. For example, under the law, we must report to the state suspected cases of child abuse, or if you tell us you are planning to cause serious harm to yourself or others.

As mentioned above, when a person is part of a group, what they say may become public. We will try to reduce the risk of this happening as described above in the "potential risks" section.

Example: "The information we learn from the focus group may help us understand better what programs and services Queer / Trans Latinas would like. It may also help us understand what we should do with this information."

Include this if any of the researchers is a mandated reporter.



We will not ask for your name or other information that might identify you. We ask that you do not give any identifying information about yourself or others, either. When the recording of the focus group is typed up, we will make sure that there is no identifying information about you or anyone else in the notes and/or transcript. The computer in which the focus group information is kept will be protected so that only people who have permission will be able to see that information. The recorded files and anything else with identifying information will be destroyed no later than one year after today's date.

Xxx, who are members of our research team, will have access to the information from the focus group. We may also share this information with the Asian Pacific Institute on Gender-Based Violence and/or their consultants, who are partners on this research study; and/or with other programs that work with survivors of abuse or violence.

The information from all the people in the group will be put together when we present the results or write about them. These results will not have any information that could identify participants.

Will I Be Paid for Participating in This Study?

Will My Costs Be Covered?

You will receive xxx for being in this research study. In addition, we will reimburse you for xyz.

You could ask participants to give themselves a made-up name at the beginning of the focus group, for example, and write it on a tent card in front of them.

Put the names of the research team members who will have access to the focus group data.

You can have a conversation with participants about what kinds of results or analysis they want shared publicly, versus other ways of sharing it or not.

Describe what the participant will receive for participating, e.g., value of gift card, etc. Describe what else you will provide or reimburse for, e.g., child care, transportation stipend, etc



Whom Can I Contact About This Study?

If you have any questions, concerns or complaints about this study, please contact XXXX at XXXXX.

How Do I Give My Consent to Participate in This Study?

If you understand and agree with everything stated above, please check the box below. We will also give you a copy of this consent form.

Are You Willing to Volunteer for This Study and Be Recorded?

YES ☐ NO ☐

Designate 1 or 2 contact people at your organization or program. Include contact name(s), and at least one mode of contact (for example, phone number, email, or both).

Signature of Facilitator / Person Obtaining Consent

Date





CO-CREATED CBPR PROJECT PRINCIPLES AND AGREEMENTS

**A set of CBPR Principles co-created by community members
and researchers to guide research project.**

Created by: Asian Pacific Institute on Gender-Based Violence & Consultants (Susan Ghanbarpour, Mimi Kim, Ada Palotai and Orchid Pusey) and the Survivor-Centered Advocacy Project Collaborative (Aracelia Aguilar, Harmit Cheema, Irene Girgis, Amber Hodson, Tara Holcomb, Mallika Kaur, Lesli Irene LeGras, Carolina Morales, Kao “Tang” Ying Moua, Nuri Nusrat, Riffat J. Rahman, Alvina Rosales, Wendy Schlater, Hyejin Shim and Liz Suk).

a part of



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Community-Based Participatory Research (CBPR) Principles and Agreements Survivor-Centered Advocacy Project

Framework

The Survivor-Centered Advocacy project, and the principles intended to guide its research projects, are grounded in a strengths-based approach, borrow from decolonizing methodologies, and start with our “everyday knowledge and authority.” We have also incorporated learnings from the Community Based Participatory Research (CBPR) approach into our work.*

The below Principles & Agreements reflect this foundation, as well as the discussion we had together at the Opening Convening in June 2016. They are rooted in the historical context of oppression, our collective lived experiences which include over 30 years in the anti-violence movement, and the context of our work, which ranges from grassroots advocates and organizations working in culturally-specific communities, to a national resource center focused on gender-based violence in Asian and Pacific Islander communities.

Principles and Agreements

1. **Transparency** in all stages of a project, including who is involved and why; the intent and purpose of a project; how resources are shared and allocated; and the apparent and hidden potential benefits and harms of a project. Information sharing at every stage and at every level of the project is critical in maintaining this value over the project’s lifetime.
2. **Collaboration and decision-making.** The concerns, needs and expectations of participants and community members – their voices – are represented at every opportunity; with “opportunity” defined by participants/ community members themselves. Decision-making around all aspects of the project is a collaborative process by which participants/ community members can have control over the overall impact of the project. This includes collaboration around decisions related to research design and implementation; resource sharing; generation of products; analysis of data; dissemination of results; and follow up actions.



3. **Balancing of mutual accountability** of researchers to participants, of participants to researchers, of participants to community, etc. Clearly delineating the responsibilities and expectations of all parties involved.
4. **Community/participants as experts.** Resist the dominant culture habit of defining “expertise” in narrow ways that have historically precluded or minimized communities’ lived experience, which is often the most valuable resource. As such, community members’/participants’ knowledge and time should be recognized in the form of compensation that makes sense for or is of value to the particular participant/community, ideally with their involvement in choosing the form of compensation. Resist either/or thinking, which often classifies either survivors OR researchers/academics as “experts.” We all bring different expertise in different areas to any given table at any given time.
5. **Center those most impacted.** Those most impacted by the research includes those individuals and communities who are research participants, as well as those who are most impacted by the issue being studied in the research project. Their interests, needs, knowledge, access to resources, power over their lives and well-being are paramount to the research process and outcomes. Research activities should be done in a participant’s or community’s primary language, and should be accessible to community members, particularly those who are traditionally marginalized or excluded.
6. **Center practices that are trauma-informed/trauma-mitigating.** Be flexible and able to adapt to participants’ potential trauma responses. Be ready to change or drop any research tools or questions that appear to be causing harm. Communicate clearly that there is an “escape valve” that allows participants to opt-out at any time, with no loss of compensation or any other repercussions. Build in support options for those who may be triggered.
7. **Center anti-oppression principles and frameworks,** even when they butt up against individual survivor’s/ participant’s/community member’s values or belief systems.



8. **Participants/ community members own their own data.** Raw data should be owned by the community/ participants that generated that data. That means that participants/community members have the right to access their own data if needed (while maintaining confidentiality procedures that are necessary to not do any harm); can revoke use of their data; and are part of the decision-making process about where that data is presented and how it gets used. Participants' data is protected by confidentiality procedures and secure storage. The people collecting the data are often those closest to the community, so they should also have the option of being involved in the analysis of the data. Data should be aggregated in a way that protects individuals' identities, but not so aggregated that the heterogeneity of a particular community gets lost.
9. **Build in self-reflection and consciousness-raising practices to examine our own dominant culture/ oppressive habits.** A commitment to self-reflection will allow the necessary time and space for researchers to understand and recognize when and how they may be interpreting information and assigning meaning through the lens of their own beliefs and life experiences, rather than reflecting the meaning and values of those participating in the research.





EXAMPLES OF CBPR PARTNERSHIPS

Two case studies that demonstrate successful
collaboration within the CBPR field.

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The Domestic Violence Program Evaluation and Research Collaborative: A Regional Collaboration

The Domestic Violence Program Evaluation and Research Collaborative (DVPERC) was established in 2011 in an effort to remedy the gap between research and practice in the field of domestic violence. Our goals were to develop an ongoing and regional collaboration between researchers and local domestic violence organizations that would produce rigorous and relevant research and then apply it to practice in a cycle of research, application, and then new research.

Although the DVPERC began with two researchers (Lisa Goodman and Kristie Thomas) and three community organizations REACH Beyond Domestic Violence, The Second Step, and Transition House) interested in program evaluation, many domestic violence organizations in the area heard about the work and asked to join. Eventually, DVPERC expanded to include researchers from numerous local universities and practitioners (frontline advocates, organizational leaders, and policy-makers) from 22 domestic violence organizations including residential, community, and hospital-based programs. Since 2011 the group has continued to meet regularly, typically every two months.

Since 2011, DVPERC members have developed a number of rigorously evaluated and contextually relevant measures for domestic violence programs, all of which are available in English and Spanish and have been accepted for publication in peer-reviewed journals (e.g., Goodman, Bennett-Cattaneo, Thomas, Woulfe, Chong, & Smyth, 2015; Goodman, Thomas, Bennett Cattaneo, Heimel, Woulfe, & Chong, 2016; Goodman, Sullivan, Serrata, Perilla, Wilson & Fauci, 2016). Group members also have published several additional studies that have emerged from the DVPERC, including one on how survivors think about the trade-offs of seeking safety (Thomas, Goodman, & Putkins, 2015) and one on how the advocate-survivor alliance contributes to survivor wellbeing (Goodman, Fauci, Sullivan, DiGiovanni, & Wilson, 2016).

The group also produced several guides to support programs in using the measures, including guides for using the MOVERS (Measure of Victim Empowerment Related to Safety) and for using the TIPS (Trauma Informed Practice Scales), both of which are available on the website for The Domestic violence Evidence Project, National Resource Center on Domestic violence. (<http://www.dvevidenceproject.org/evaluation-tools/#evaluation-manuals>). The group is also in the process of developing a phone app for survivor-mothers in need of practical tips and tools for supporting children struggling with trauma.

Overall, the DVPERC model demonstrates how an ongoing, regional academic–community partnership can produce powerful and useful knowledge that neither academics nor practitioners could have developed alone.



<p>Researcher collaborators</p>	<p>Lisa A. Goodman (Boston College)</p> <p>Kristie A. Thomas (Simmons College)</p> <p>Megan Bair-Merritt (Boston Medical Center)</p> <p>Maya Ragavan (Boston Medical Center)</p> <p>Fred Berman (American Institutes for Research)</p> <p>Jessica Shaw (Boston College)</p> <p>Anjali Fulambarker (Simmons College)</p>
<p>Community organization collaborators</p>	<p>Boston College</p> <p>Boston Medical Center</p> <p>Casa Myrna Vasquez</p> <p>DOVE</p> <p>Elizabeth Stone House</p> <p>Family and Community Resources, Inc.</p> <p>Family Justice Center//Boston Public Health Commission</p> <p>Fenway Health Violence Recovery Program</p> <p>Full Frame Initiative</p> <p>Futures Without Violence</p> <p>Jane Doe, Inc.</p> <p>Jeanne Geiger Crisis Center</p> <p>Journey to Safety, the domestic abuse program of Jewish Family & Children's Service</p> <p>New Hope</p> <p>Passageway at Brigham and Women's Hospital</p> <p>Prudence Crandall Center</p> <p>REACH Beyond Domestic Violence</p> <p>Renewal House</p> <p>Safe Futures</p> <p>Simmons College</p> <p>The Second Step</p> <p>Transition House</p>

District Alliance for Safe Housing: A Collaboration with a Single Program

In 2013, domestic violence practitioners from the District Alliance for Safe Housing (DASH) in Washington, D.C. partnered with researchers (Nkiru Nnawulezi and Cris M. Sullivan) from Michigan State University to collaboratively evaluate DASH's community-based crisis housing program. DASH practitioners (Peg Hacskeylo and Suzanne Marcus) were interested in understanding whether the organization's policies, processes, and practices were operating as originally intended, and whether their services promoted safety and empowerment for survivors. DASH has not been evaluated since they inception in 2006.

Evaluators chose a participatory approach for the evaluation design to accommodate the unique organizational context. DASH had program theory called the DASH model, an approach to organizational practice that required service providers to be "responsive, consistent, empathetic, mutually cooperative and respectful, while also providing tools to promote personal power and support survivors' right to be self-governing" (Nnawulezi, Sullivan, & Hacskeylo, 2015). It contained seven principles. This model led DASH to adopt inclusive entry policies (low-barrier) and program service models that centered survivors' choice and autonomy (voluntary services). DASH also created an upside-down management structure and internal technical assistance team to ensure a continual focus on building advocate capacity. Given how deeply embedded these cultural and structural factors were to the primary function of DASH, they had to be considered for evaluation approach, design and implementation.

As researchers, we completed a series of collaborative meetings with all DASH staff. In the initial meetings, staff discussed how participatory they wanted to the evaluation process to be, and helped to establish evaluation questions. These meetings greatly benefited the evaluation design, and increased staff investment in the study. We planned to interview both staff and survivors to explore program effectiveness. Staff interviews helped us to understand the cultural and structural components that impacted their practices with survivors. From these interviews, we learned that the DASH model served as the basis for all service provision performed by advocates. However, there were not any validated practice measures that fully reflected the complexities of DASH model.

Rather than select a measure that did not fit, we engaged staff in a participatory survey development process. In the first step of this process, we coded responses from the staff interview data and created a preliminary list of practices associated with each component of the DASH model. In a joint meeting, we used a series of consensus



building activities to refine the list and develop a final set of items that would represent each of the DASH model principles. The final product was a multidimensional scale called 'DASH Model Practices.' This participatory process enhanced validity of the findings because the measure accurately reflected employees' practices; it also deepened investment in the results. Thereby increasing the desire that staff would engage in an organizational change process informed by the evaluation findings.

The research team interviewed 80% of the survivors in the housing program, but only had a sample of 33 (small samples are typical of single study research studies with domestic violence programs). In order to gain reliable psychometrics, we selected a statistical approach that would account for the small sample size and non-normally distributed data: Bayesian confirmatory factor analysis (Song & Lee, 2012). We presented the study results to the practitioners in a three-hour meeting. We led them in a participatory data analysis and interpretation process called Expectations to Change (E2C), a set of facilitated exercises where participants set expectations for the evaluation data, review and interpret the results, and create an action plan based on these findings. Adams, Nnawulezi, & Vandenberg, 2015 provide a detailed description of this process.

There were many shifts at DASH as a result of the evaluation findings. The most notable was changing the organizational structure from a technical assistance team to a transformative coaching model. This ensured that DASH was continuously prioritizing advocate capacity building. The entire team also collaboratively presented the evaluation results at the World Conference for Women's Shelters in The Hague, Netherlands. Two manuscripts are currently in preparation for submission to academic journals. The evaluation concluded in 2014, but DASH continues to collaborate with us to gather evidence about program effectiveness, build evaluation capacity, and engage in data-driven organizational change. (For examples of publications emerging from DASH, see Adams, Nnawulezi, Vandenberg, 2015 and Nnawulezi, Sullivan, & Hacskeylo, 2015).



SAMPLE SCHOLARLY ARTICLE SUMMARY

A short summary of a study, potentially useful for practitioners who do not have time to read an article in a journal.

Lisa A. Goodman, Jennifer E. Fauci, Cris M. Sullivan, Craig D. DiGiovanni, & Joshua M. Wilson*.

a part of



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Domestic Violence Survivors' Empowerment and Mental Health: Exploring the Role of the Alliance with Advocates



Background: What Was This Study Based on?

1

Relationships matter in therapy...

- The “alliance”—that is, the quality of the relationship—has been used as a way to describe and measure therapeutic relationships, for example, between a client and therapist.
- Higher alliance ratings from the client have been associated with better treatment outcomes: improved depression & PTSD.
- The “alliance” doesn’t necessarily solve problems in its own, but it sets the foundation for healing.

...is this true for the advocacy relationships in DV programs?

2

The advocacy alliance is considered key in DV programs...

- Strong, mutual relationships between survivors and advocates are foundational to DV services and supports.
- They underlie frameworks such as survivor-centered and trauma-informed approaches.
- Yet, we have little evidence about how the quality of the survivor-advocate relationship shapes survivors' wellbeing.
- Such knowledge is especially critical to improve supports for women of color and poor women, who have experienced racial, cultural, and social barriers to strong, safe relationships in DV programs.

...so how does the advocacy alliance work in DV programs?

3

Empowerment might be a part the story...

- The quality of the advocacy relationship may be critical to restoring a survivor's sense of power.
- Restoring one's sense of power in the domain of safety, in turn, may contribute to improved mental health.

...could a sense of empowerment around safety represent the link between the advocacy alliance and improved mental health?

4

In partnership with DV programs also interested in this topic, we set out to test two questions:

- Is the advocacy alliance linked to empowerment among DV survivors?
- Is empowerment linked to lower depression and PTSD symptoms?

...in other words:



Methods: What Did We Do?

How?

This study grew out of a larger community-driven research project developed with the Domestic Violence Program Evaluation and Research Collaborative (DVPERC). DVPERC is a collaboration between researchers and DV programs from across the northeast, committed to bridging DV practice and research through community-engaged research.

Procedures:

- Eight DVPERC programs participated in this study
- Program staff posted flyers and announced the study in Spanish and English
- Interested participants sent completed surveys (which took approx. 30 minutes) directly to the researchers using self-addressed, stamped envelopes
- All participants received \$20 TARGET gift card

Who?

Final sample of 370 woman-identified survivors.

- Mean age=36.4 yrs.; 87.7% heterosexual.
- 39.1% White, 24.4% Black 23.8% Latina, 7.8% Multiracial, 1.9% Asian; 74.9% born in U.S.
- 38.8% reported they attended at least some college or graduated college; 51.6% were unemployed
- 46.4% had participated in their program

What?

In addition to demographic characteristics, we measured the following, as reported by survivors:

- Alliance with advocate
- Empowerment
- PTSD and depressive symptoms

...Then we used a structural equation model to test how these were related to one another.

Findings and Interpretations: What Did We Learn?

1. Stronger alliance was related to greater empowerment; greater empowerment was related to improved PTSD and depression.
2. Race, poverty, & time mattered...

Survivors of color, except Latina women, had significantly lower alliance than White women; survivors with more financial strain reported lower levels of alliance; alliance was higher for those who'd been in the program longer.

Takeaways: What Does This Really Mean and Why Does it Matter?

Practice

- Findings offer a theory of change for domestic violence programs: A strong advocacy relationship is foundational for improving survivors' sense of empowerment in the domain of safety; and empowerment is critical to emotional wellbeing
- The study provides a potential model to "measure" and reflect on the quality of practice.
- Results underscore the critical need to address issues of social access and cultural competency to build strong advocacy relationships.

Research

- Preliminary evidence shows the ways in which the advocacy alliance is critical to empowerment and healing, but this study should be replicated using a longitudinal design.
- Study demonstrates research opportunities afforded when researchers and practitioners develop long-term CBPR collaborations.

Looking for a Short Summary?

Over the last 4 decades, domestic violence (DV) programs—both residential and nonresidential— have sprung up in communities across the country with the aim of helping survivors become safe. These programs place strong emphasis on the relationship between the advocate and survivor as critical to becoming safer and healing from the trauma of abuse. Yet little research has demonstrated the extent to which specific aspects of the advocate-survivor alliance are related to specific indicators of survivor well-being, nor shown what factors might mediate or help explain that relationship. This study explored in a sample of help-seeking survivors (N= 370) whether the strength of the alliance between survivors and their advocates is related to lower symptoms of depression and posttraumatic stress disorder (PTSD) and whether this association is at least partially explained by survivors' sense of empowerment in the domain of safety. The structural equation model we tested also controlled for variables that might influence these relationships, including race/ethnicity, financial strain, and length of stay in the program. As expected, stronger



alliance was associated with reduced symptoms of both depression and PTSD, through the mechanism of empowerment in the domain safety. Survivors of color, except Latina women, had significantly lower alliance than White women; survivors with more financial strain reported lower levels of alliance; alliance was higher for those who'd been in the program longer. These findings provide direction to programs seeking to establish a theory of change and a guide for measuring and reflecting on the quality of advocacy practice. It also underscores the need to address social access and cultural humility in order to build stronger advocacy relationships

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