Balancing Power Through Community Building: Setting the Research Agenda on Violence Against Women

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This article presents a feminist model for collaboration by researchers, practitioners, and survivors of domestic violence and sexual assault that focuses on balancing power and building community. Thirty-eight university researchers, survivors, and practitioners met to define and prioritize a research agenda on domestic violence and sexual assault, plan for continued collaboration, and evaluate the community-building process. This article presents data from focus groups, written evaluations, and researcher-participant observations that indicated the research topics that the participants ranked as the most important or useful to them and outlines the participants' concerns about and suggestions for ongoing collaboration.

Keywords: *collaboration; domestic violence; research; sexual assault*

Collaboration among researchers, survivors, and practitioners is increasingly considered a critical aspect of relevant and informed research on domestic violence and sexual assault. At the same time, collaboration serves an important empowerment function for survivors and practitioners who participate in research projects by lessening the imbalance of power that often exists in the research process (Gondolf, Yllo, & Campbell, 1997; Harper & Salina, 2000; Lundy, Massat, Smith, & Bhasin, 1996; Rotheram-Borus, Rebchook, Kelly, Adams, & Neumann, 2000). Collaborative research has numerous other benefits, but it is not without challenges. These

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challenges can be addressed if preconditions for the collaboration are flexible and equitable (Campbell, Dienemann, Kub, Wurmser, & Loy, 1999; Gondolf et al., 1997; Hamberger & Ambuel, 2000; Lundy et al., 1996). This article describes the initial collaboration and community building around research on domestic violence and sexual assault in Austin, Texas, and the issues that the participants addressed in this process.

COLLABORATION AND COMMUNITY BUILDING

Collaboration among researchers, survivors, and practitioners combines the expertise and resources of all the partners to achieve shared goals (Bickel & Hattrup, 1995; Lundy et al., 1996). This process can lessen the isolation that plagues all parties and can connect the research to a larger process of social change (Edleson & Bible, 2001). Furthermore, such collaboration enhances both the research design and the research process (Gondolf et al., 1997; Harper & Salina, 2000; Reed & Collins, 1994) and leads to the more effective use of research findings (Bickel & Hattrup, 1995; Harper & Salina, 2000). Participating in research can help agencies to meet the "pressures of accountability" (Lundy et al., 1996, p. 171) by demonstrating effectiveness (Reed & Collins, 1994). Collaboration also increases an agency's capacity through identifying resources, obtaining technical assistance, gaining access to resources that may otherwise be inaccessible, and increasing the knowledge of agency staff (Bickel & Hattrup, 1995; Lundy et al., 1996; Reed & Collins, 1994). Finally, participation in research empowers survivors and practitioners by giving them the opportunity to participate in the interpretation of findings (Edleson & Bible, 2001).

However, research is not without costs to agencies, and collaboration itself comes with costs to both researchers and practitioners in time, energy, and other resources (Bickel & Hattrup, 1995; National Violence Against Women Prevention Research Center, 2001). Practitioners who work in the field of domestic violence and sexual assault are often overwhelmed by the crisis nature of the field and may view research as an added burden that is of dubious value (Edleson & Bible, 2001; Riger, 1999). Moreover, when financial resources are stretched, organizations may consider the costs of research to be frivolous (Lundy et al., 1996; Rotheram-Borus et al., 2000).

Differences in the professional identities of researchers and practitioners may also be a source of tension (Hamberger & Ambuel, 2000). Researchers and practitioners may differ in their theoretical perspectives (Reed & Collins, 1994); agendas regarding goals, priorities, and time lines (National Violence Against Women Prevention Research Center, 2001; Reed & Collins, 1994; Rotheram-Borus et al., 2000); research and community needs (Reed & Collins, 1994); the perceived costs and benefits of participating in research (Bickel & Hattrup, 1995); and values (Lundy et al., 1996). What is more, these groups may differ on the tenets on which trust is built. Practitioners may

focus more on the relationship as the basis of trust, whereas researchers may focus on the reliability of the data collection process (Rotheram-Borus et al., 2000). Consequently, practitioners may avoid participating in research because they may fear that findings that criticize services or blame victims may jeopardize the welfare of clients or their agencies' funding (Edleson & Bible, 2001; Riger, 1999). Conversely, researchers may experience frustration with practitioners because of practitioners' reluctance to give credence to findings that challenge practice wisdom (National Violence Against Women Prevention Research Center, 2001).

Power imbalances exist in the research process partly because of the lack of reciprocity among researchers, survivors, and practitioners (Harper & Salina, 2000). In addition, the detached and external position from the field that researchers typically maintain (Gondolf et al., 1997) and the fact that researchers tend to be better paid than practitioners (Rotheram-Borus et al., 2000) and to have access to more current information than is typically accessible to survivors and practitioners (Lundy et al., 1996) also intensify the imbalance of power among these groups. Many of these tensions can be mitigated. When all partners have a voice in the research process and benefit from the research findings through agreed-on research agendas and shared goals, the power differential is lessened (Hamberger & Ambuel, 2000). In addition, reciprocity develops when researchers learn about an agency's activities, all partners discuss their expectations and philosophical issues up front, and information flows easily among researchers, survivors, and practitioners (Bickel and Hattrup, 1995; Edleson & Bible, 2001; Hamberger & Ambuel, 2000; Harper & Salina, 2000; National Violence Against Women Prevention Research Center, 2001).

CONTEXT FOR COLLABORATION

The collaboration and community building described in this article were largely products of the interdisciplinary Institute on Domestic Violence and Sexual Assault at the School of Social Work, University of Texas at Austin. The institute brings together faculty and graduate students with research interests in domestic violence and sexual assault from social work, law, nursing, psychology, women's studies, business, and other disciplines. Its mission is to advance knowledge about and meaningful practice with survivors of domestic violence and sexual assault by forming partnerships with survivors and community practitioners. A feminist, community-building, and power-sharing framework guides the institute's work.

Austin is particularly well suited for this collaborative model. The university has numerous faculty members of various disciplines who conduct research on domestic violence and sexual assault as well as a federally funded campus program that provides services to survivors. The direct-practice community has several agencies that provide extensive services to

victims and survivors of domestic violence and sexual assault, including specialized services to migrant farmworkers, immigrants, traumatized children, people with disabilities, male victims, and gay, lesbian, bisexual, and transgendered people. Austin is also home to a statewide coalition for domestic violence, the national domestic violence hotline, the statewide association representing sexual assault programs and advocates, and a national training center on domestic violence and sexual assault. In addition, the city has counselors in law enforcement and the county and district attorneys' offices who are trained to serve survivors of domestic violence and sexual assault. Also, several statewide foundations are committed to supporting research projects and direct services to survivors.

Some Austin agencies have a long history of collaboration among researchers, practitioners, and survivors (Edleson & Bible, 2001; Gondolf & Fisher, 1988). Even so, little ongoing collaboration existed between the direct-practice and research communities. However, a critical mass of research and practitioner interest existed in formalizing and strengthening collaboration on issues related to domestic violence and sexual assault. Therefore, a major goal of this research project was to build on the existing strengths and bring them to a new level. A number of methods for achieving this goal were discussed. Faculty in social work and law initiated this effort and, under the direction of an advisory committee of university faculty and staff, agency administrators and practitioners, and survivors, decided that 2 half-day research agenda-setting meetings would provide this opportunity.

METHOD

This study used qualitative data collection methods, including participant observation, focus groups, and written evaluations by participants, during two half-day meetings to determine the research priorities and evaluate the community-building process. The research design had multiple, evolving phases. As with much of qualitative inquiry, each phase built on the previous phase as data were analyzed, decisions were made, and plans were implemented. The Institutional Review Board at the University of Texas at Austin reviewed and approved this project.

Research Questions

The agenda-setting meetings addressed three broad research questions: (a) What research questions do researchers, survivors, and practitioners who are involved in domestic violence and sexual assault define as important in advancing knowledge and practice in these areas? (b) How do these research questions rank in importance? (c) What suggestions do members of this community have for developing and improving collaborative, community-building efforts?

Participants

Of the 38 participants who attended one or both of the agenda-setting meetings, 32 were women and 6 were men. The participants included 15 practitioners who were working or volunteering in agencies that serve survivors of domestic violence or sexual assault, 8 practitioners who were working in law enforcement or criminal justice agencies, and 1 practitioner who was working in a medical facility. In addition, 12 researchers, staff, and students in social work, law, and counseling and mental health services participated. Although many of these participants identified themselves as survivors, 2 participants identified themselves solely as survivors.

First Agenda-Setting Meeting

The agenda-setting meetings were scheduled in November 2002 and were held in the meeting room of the local shelter. The first meeting began with an introduction to the institute and the goals of the agenda-setting meetings. We, the principal investigators (Bell and Busch), acknowledged the historical power imbalance among the parties, particularly regarding the development of research and the desire to establish norms of shared, equal power. We described the research aspect of the meeting, and obtained written consent to participate.

Focus groups. After introductions, the participants were randomly assigned to focus groups of 5 to 8 people. Random assignment was based on three subgroups: researcher, survivor, and practitioner. Each focus group consisted of approximately an equal number of each of the three subgroups. A group facilitator led the discussion, and the groups were charged with answering three questions: (a) What are the gaps in our knowledge about sexual assault? (b) What are the gaps in our knowledge about intimate partner abuse? and (c) What information do funders want? A graduate student assistant recorded the groups' answers on flip-chart paper, and the sessions were audiotaped. After an hour of discussion, the focus groups reported to the entire group.

After this meeting, data from the focus groups were analyzed using procedures to be described later. Data were organized into nine discrete categories: systems, service providers, perpetrators, survivors-victims, children-youths, intervention-treatment, larger systems, definition of the problem, and interaction among the variables for the questions on both domestic violence and sexual assault.

Facilitators' evaluations. At the end of the first session, the facilitators were asked to complete written evaluations about the work that occurred in their focus groups. In the evaluations, they were asked to describe six areas: (a) the focus group process, (b) general themes that emerged, (c) discussions of

challenging topics, (d) concerns or misconceptions among the members about the meaning of research collaboration, (e) dissenting opinions, and (f) what the participants wanted most from the day. The facilitators' responses were also organized into categories and themes.

Second Agenda-Setting Meeting

The second meeting built on the findings of the first meeting and focused on two activities: ranking the research questions in order of importance and interest and discussing the process of continued collaboration and community building.

Ranking the research questions. We opened the second meeting by reviewing our work from the first meeting and asking the participants to clarify research questions that were unclear and to suggest changes to the nine categories that resulted from the data analyses procedures. We also obtained informed consent from new participants. After changes and clarification, we asked the participants to rank the research questions by considering those that they considered were the most useful and the most interesting to them. The participants were given 20 adhesive dots, 10 orange ones signifying the "most useful" questions and 10 green ones signifying the "most interesting" questions for ranking each issue related to domestic violence and sexual assault.

Focus groups. After the ranking exercise, the participants again broke into focus groups and discussed four questions with the help of the facilitators from the first session: (a) What information would you like to receive on a regular basis? (b) How would you like to receive the information? (c) Are there ways that you would like to be involved in research efforts? and (d) Are there ways that research efforts could assist you in your work? Again, a graduate student assistant recorded the participants' answers to these questions. The large group reconvened after approximately 1 hour, and after a discussion of the results from the focus groups, we thanked the participants for their time, collected the materials from the facilitators, and asked the participants to complete an evaluation of the 2-day meetings.

Qualitative Data Analyses

This research project involved multiple stages of data collection and analyses. Findings continuously emerged throughout the two stages of the research project. This process resulted in five types of data: two lists of ranked research questions, transcripts from the large gatherings on both days, notes from the focus groups, evaluations from the focus-group facilitators, and a small number of participant evaluations from 8 of the 38

participants. The findings presented here reflect the overall analyses of each of these various data collection points.

As we mentioned earlier, the initial data collection resulted in 95 questions generated during the first focus groups. We collapsed these questions into discrete categories. At the second meeting, the list of research questions and discrete categories were presented to the group for correction and clarification. Each participant ranked the questions, and later we determined overall research priorities through those rankings. Transcripts from the large-group discussions during the two agenda-setting meetings, notes from the focus groups, and evaluations from both the facilitators and the participants were evaluated using content-analysis procedures that involved identifying, coding, and categorizing the patterns of data by blending deductive and inductive processes (Patton, 1990; Strauss & Corbin, 1998), examining both manifest and latent content (Berg, 1995). The second step in the content analysis involved grouping, sorting, and resorting the data into broad categories that are discussed in the next section.

FINDINGS

Two sets of findings are discussed: outcome and process findings. The outcome findings refer to the actual research questions that the participants ranked as part of the research agenda. Process findings refer to themes that the participants generated in their small group discussions, in the larger group, and in evaluations by facilitators and participants about how they wanted to proceed with collaborative efforts and the potential conflicts they identified.

Outcome Findings

The participants generated a list of 95 research questions that they wanted to address as part of the research agenda and then ranked these items according to those they deemed "most useful" and "most interesting." The top-five-ranked questions for both sexual assault and domestic violence are listed in Table 1. Each research question that is listed received 10 or more votes.

The participants' interests covered a range of possible research questions, including individual characteristics of victims and perpetrators, the impact of various services and interventions, and societal influences on these problems. The question that they deemed most useful for both sexual assault and domestic violence concerned cultural diversity and how race, class, and ethnicity may affect victims' access to services. This question reflects a predominant concern about providing services to traditionally "underserved" groups in both the domestic violence and sexual assault fields (Riger et al., 2002).

TABLE 1: Ranked Research Questions

Sexual Assault

Most Useful

1. What is the impact of class, underserved populations, cultural diversity, and ethnicity on intervention? How does race influence access to services?
2. What is effective treatment?
3. How do ethnicity and cultural diversity affect services?
4. What are the attitudes of law enforcement officers about sexual assault?
5. How does gender influence symptoms of trauma in children and youths?

Most Interesting

1. What are resiliency factors?
2. How does gender influence symptoms of trauma in children and youths?
3. What is the impact of class, underserved populations, cultural diversity, and ethnicity on intervention? How does race influence access to services?
4. What school prevention programs work well (college campuses included)?
5. What is the impact of violence and sex in the media?

Domestic/Intimate Partner Violence

Most Useful

1. What is the influence/impact of class, race, ethnicity, and cultural diversity (underserved populations) on intervention?
2. What treatment options for batterers work?
3. How do we reach underserved populations?
4. How do we determine if mothers and fathers are protecting or not protecting their children?
5. What is the impact of early, pretrial monitoring/accountability on perpetrators?

Most Interesting

1. How does law enforcement work with immigrant families?
2. How does the history of the perpetrator (violent home/environment) affect perpetration?
3. What are the characteristics of women who do not get into violent relationships?
4. How does gender affect the symptoms of trauma in children and youths?
5. Does safety planning work? Is it effective?

Process Findings

During the focus group sessions, the participants began to articulate their purpose for collaboration as well as to raise issues to be addressed for collaborations to flourish.

Purpose of collaboration. Most participants were enthusiastic about the possibility of collaboration. Four of the 8 participants who completed evaluations said they were "somewhat hopeful" that the 2 agenda-setting meetings would be helpful in their work. When asked, in the second focus group, "Are there ways that research efforts could assist you in your work?" 12 responded that such efforts would increase their knowledge and support

what they already knew, particularly in the areas of outreach and community education, court proceedings, grant writing, training of new staff, and program evaluation.

On the basis of the facilitators' evaluations, most participants welcomed the opportunity to network with others in the field, provide input, and discuss research needs and questions as they related to the "real world" and gain access to research that had already been conducted. As one participant noted:

> I think it would be really helpful for this institute to gather the research on some of these issues and make it more accessible to those working in the field because there may, in fact, be a lot of research on these issues, but people practicing don't know about it and don't have time to dig it out.

One focus group outlined the pros and cons of continued partnership. The list of pros included gaining input from a broader range of people, including survivors; the potential utility of research for practice; and help with funding. The cons focused primarily on practitioners' lack of time for research.

The facilitators generally reported that there was little dissent in the focus groups and that most people participated. There were also few misconceptions or concerns about collaboration. The participants' evaluations supported this finding. We consider that the goal of this project, to begin to redistribute power among those involved in research, was reached, at least for these 2-day meetings. It appeared from the discussions in the small groups and the other data that were collected that the practitioners and survivors were engaged and empowered during this collaborative process.

Questions About Collaboration

Although there was a general consensus that collaboration was a desired outcome of these meetings, the large group discussions were not conflict-free. Several issues emerged that illuminated potential challenges in the collaborative process. These issues included who determines the research agenda, how to prevent the misuse of research and victim blaming, how to use language that does not offend the collaborators, and how to influence funders' perceptions of important research questions.

Who determines the research agenda? Although we made every effort to enlist a diverse group of practitioners, researchers, and survivors, the importance of including all stakeholders, particularly survivors, was stressed repeatedly. Several individuals and agencies were noted as absent from the meetings. A participant in the second large group meeting stressed the importance of the perspectives that these players could bring. As this participant stated,

> As researchers, there's been a bias from the beginning of this project that I think you need to correct for, and it can potentially carry through today and all the way through the project. And that is there were no men on the planning committee at all. . . . And with the exception of a few of these research topics, they're all from the perspective of victimization. And they all assume that the victim is the female. And there's not any expression about why do our little boys grow up to be perpetrators, and what can we do to save them? There's no male perspective here at all.

What ensued was a discussion of the political implications of using the term *violence against women* as opposed to a more gender-neutral term. Although men had participated in these meetings, this comment made clear that who participate in the development of research and how their voices are incorporated into the process are key and can be controversial. As this discussion indicated, these meetings fell short of completely leveling the playing field among researchers, practitioners, and survivors.

How can we prevent the misuse of research and victim blaming? A practitioner expressed concern about how research can be misused if it is not crafted carefully and interpreted judiciously:

> We were talking [in the focus group] about the lack of information on gay/lesbian partners. We talked about determining—when you're trying to determine who is the victim and who is the perpetrator. And in a whole bunch of different types of relationships, there seems to be . . . sort of a classic model within domestic violence of power and control and the cycle of violence and the idea of the primary aggressor. And we talked about maybe a need for research where it doesn't quite fit that model, like where there's bilateral violence going on, research on male victims. And we talked about a fear that when you do some research like that, a lot of times you worry about it getting misused. And that doesn't mean that you don't want to do the research. But it does mean that you want to be really clear about it.

Even in these meetings, the participants struggled with how to frame questions that would not blame victims. One suggested research question concerned identifying the characteristics of women who were not victimized. Another participant argued that such a question assumed that a woman could predict partner violence and that it blamed the woman for not preventing the abuse. A third participant suggested that the real question was not whether a woman could predict violence but how she would respond once it had begun. For example, were there early cues that some women might attend to and attempt to change the relationship or get out of it? The participant with the original objection stated that the second question was different from the first and less likely to blame the victim. There was some tension in the group as the wording of this question was negotiated. One facilitator pointed out that although such discussions may be

painful, they are useful in helping participants see the importance of how questions are framed and how challenging research collaboration can be at times.

How can we use language so that we do not offend collaborators? Another issue raised had to do with language. As one participant stated:

> Some of the problems between researchers and practitioners are this use of language. And we began that conversation about the word *practitioner* and what that means to people who work in the field versus people who don't work in the field but may be doing research or other kinds of things. So language is going to be a big piece of designing research. If you're going to involve all people who are providing direct services, we're going to have to figure out some common language.

The issue of how to address the parties involved illustrates how carefully and respectfully words must be chosen in developing collaboration.

How can we influence funders' perceptions of important research problems? The question discussed in the first focus group about information that funders require from agencies provoked frustration, as exemplified by the following comment:

> Numbers seem to be very important when you're doing research and when you're presenting things to funders. And we talked about how that doesn't always work for not only minority agencies, but also a lot of times it depends on what numbers you're collecting. A lot of times it seems to be, "How many people were served? What's the percentage of recidivism?" And we know that . . . domestic violence alone is a really tough number to report on. And it doesn't always accurately reflect the kind of services that are being given and how effective they are. And so we talked about . . . how we can define our research, how we can present numbers that may be more reflective of the kind of work that's being done.

Several other participants commented that funders needed to be educated about the kind of research that would give a complete and accurate picture of the services provided and the importance of input from both professionals and survivors on funding priorities.

In summary, the participants in the 2-day, agenda-setting meetings were able to identify important research questions and confirm the importance of collaboration among researchers, practitioners, and survivors. Although optimistic about the possibilities, they were realistic about potential challenges and listed a number of ways to foster continued work with this group of university staff, agency personnel, and survivors. In the end, the participants shared power by openly negotiating their individual research agendas in a collaborative process.

DISCUSSION

In this article, we have presented a model for balancing power among researchers, practitioners, and survivors of domestic violence and sexual assault. We also presented data on research topics that the participants ranked as most important to them as well as their concerns and suggestions about the process of ongoing evaluation. Many of the concerns that were expressed mirror those suggested by previous work in this area. Such collaboration has the potential to foster research that supports best-practices models in programs that prevent and respond to violence against women. It also has the potential to streamline the research process for researchers by fostering an investment in research by the practitioners who will be at the front lines of data collection. As such, collaboration has the potential to reflect the empowerment model that is at the heart of work with victims of domestic and sexual violence. Moreover, balancing power through collaboration is an appropriate model for social workers, whether the social workers are researchers, direct-service practitioners, or administrators. Feminist social work practice and research models are well documented in the literature and seem particularly fitting when concepts of power, powerlessness, and violence against women converge.

Two limitations of this process should be noted. Because we had not actually begun any research at the time of the agenda-setting meetings, the participants' comments reflected their opinions about collaboration in the abstract. It is possible, indeed likely, that when actual collaborations begin, the participants will have more critical comments about the process. Another limitation is that research priorities were also developed in the abstract. Available expertise and funding may limit our ability to research the identified, prioritized questions, as one participant addressed in her evaluation:

> I don't like the "dot" exercise (participants used colored dots to rank research questions). I don't think the dots are really helpful in determining our research priorities. It seems to me like the reality is that funding and the interest of researchers who have time to devote to this effort will be more of a factor than our dots.

Although the reality of funding and researchers' interest were discussed explicitly in the meetings, it is possible that practitioners may feel discounted if, as time goes by, these priority topics are not addressed. Clearly, additional discussions are needed to develop these questions into viable funded research projects.

Although the research project is in its infancy, we are energized by and hopeful about the fruitful collaboration that this agenda-setting initiative has spawned. We offer our experience as a potential model for others who

are interested in developing collaborative projects among researchers, practitioners, and survivors who work in the areas of domestic violence and sexual assault.

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