



Survivor-Centered Advocacy in Culturally Specific Communities

A Community-Based Participatory Research Project

Full Report with Appendices

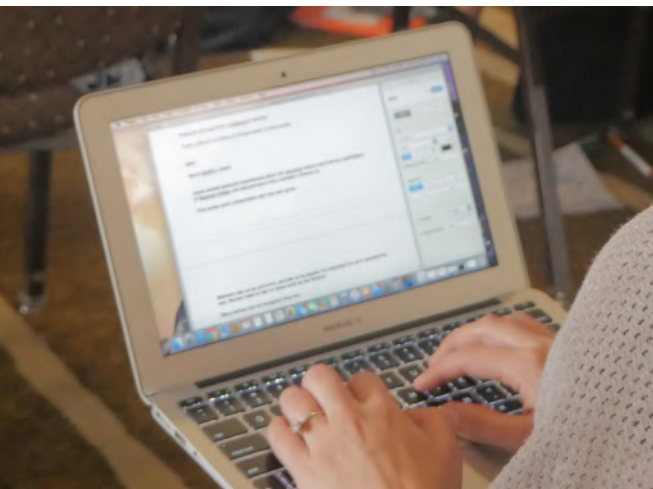
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We thank Cristy Chung and Nancy Wan, former staff of the Asian Pacific Institute on Gender-Based Violence, who first dreamed of this survivor-centered advocacy project and whose vision inspired all of us who continued to make it come to life.

We are deeply grateful to our Field Research Teams who chose to take on the challenge of making research their own.

Most of all, we express our deepest gratitude to the many survivors represented in the research projects featured in this report. We know that this includes many of us who also worked as Project Staff, on the Design Team, and as Field Researchers.

Field Research Teams

Avellaka is a program of the La Jolla Band of Luiseño Indians dedicated to educating and organizing for social change, and upholding the La Jolla Tribe's authority as a sovereign Indian nation to protect its women citizens and create the laws, policies, protocols, and advocacy services to address violence against Native women. Their project, Rainbow of Truth, was led by Wendy Schlater and studied the experiences of Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ)/2Spirit¹ people from tribal communities in San Diego County.

DeafHope is a grassroots organization in the San Francisco Bay Area providing accessible support and empowerment to Deaf women who are survivors of domestic and sexual violence. Their project, Safety and Support for Deaf Survivors of Violence, was led by Aracelia Aguilar, Amber Hodson and Tara Holcomb, and studied the experiences of Deaf, Deaf-Blind, Hard of Hearing, and Deaf/Disabled people (Deaf) who have experienced domestic violence.

Korean American Coalition to End Domestic Abuse (KACEDA)/QYUL (Queer and Trans Koreans Yearning for Unity and Liberation) is a queer and trans workgroup within KACEDA, organizing to bring more attention to the lives, experiences and struggles of lesbian, gay, bisexual, transgender and queer (LGBTQ) Korean survivors of violence. Their project, With You: Queer and Trans Koreans Surviving Violence, was led by Hyejin Shim, and studied Koreans who identify as LGBTQ and their experiences of domestic violence.



¹ Among Indigenous North American culture, 2Spirit refers to individuals whose spirits are a blending of male and female spirit. 2Spirit is essentially a third gender recognized in many Indigenous cultures. For more information, see twospiritjournal.com

Mujeres Unidas y Activas (MUA) is an intergenerational grassroots organization in the San Francisco Bay Area led by and for Latinx² immigrant women members, offering a national model for Latinx immigrant empowerment and organizing. Their project, *The Impact of Offering Several Ways of Healing, Caring For, and Empowering the Membership*, was led by Maria Carrillo, Juana Flores, and Maria Jimenez, and studied their members' experiences of their programs.

Sikh Family Center is a grassroots community-based organization that helps create healthy, violence-free, more equitable communities by bridging gaps in access to public resources and social services, and providing education and direct support to community members using an empowerment approach that attends to cultural tradition, immigration experiences, and language access. Their project, *Strengthening our Roots: Listening and Learning from Survivors and Supporters*, was led by Harmit Cheema and Mallika Kaur, and studied interventions to family violence in the Sikh community, many of which exist outside of formal systems, and ways to support those interventions and make them stronger.

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² Latinx is a term that signals an important recognition of non-binary gender identifications. As Rigoberto Márquez explains, "'Latinx' can be defined as a political identity that centers the lived experiences of queer, non-binary, gender non-conforming/creative and/or trans* individuals. The 'x' pushes us to think critically about the different ways race, gender, sexuality and geographic location can impact how we and others understand Latina, Latino or Latinx identities and experiences" (2018).

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Executive Summary

An Exploratory Project

The *Defining and Testing a Survivor-Centered Framework in the Domestic Violence Field* project (“SCA Project”) was first envisioned through dialogues emerging from *Gathering Strength*,³ one of the Asian Pacific Institute on Gender-Based Violence’s (API-GBV) Blue Shield Against Violence (BSAV)-funded projects. It was conceived of as a way to reach much deeper into the questions: **What does survivor-centered advocacy mean?** More specifically, *what does it look like in our diverse culturally-specific communities?*⁴ And, *how are we attending to the uniqueness of individuals within the specific context of our diverse communities – or how are we not?*

The SCA Project was ultimately funded by BSAV and was envisioned as a bold and fast-paced year of work where the traditionally marginalized survivors, practitioners, and organizers would be centered, and through which we would investigate and learn together about what survivor-centered advocacy meant and looked like in these communities. Specifically, the SCA Project used a co-learning approach to generate, collect and share knowledge about how culturally-specific practitioners and communities conceptualize and practice survivor-centered advocacy, in order to meet the needs and surface the strengths of survivors of domestic violence (DV) from marginalized communities.

The CBPR Approach

The SCA Project was structured as a two-tiered, or “nested”, research design. The first tier focused on building knowledge, while the second tier focused on building capacity.



³ *Gathering Strength: Investing in the Leadership of Asian Pacific Islander Immigrant and Refugee Communities* is a project of API-GBV that has been funded by BSAV since 2012. It is dedicated to building the capacity of those most impacted to be leaders in ending domestic violence in their communities and lead in California’s anti-domestic violence field.

⁴ The Violence Against Women Reauthorization Act of 2013 defines “culturally specific” as “primarily directed toward racial and ethnic minority groups (as defined in section 1707(g) of the Public Health Service Act (42 U.S.C. 300u-6(g))” (42 U.S.C. 13,925(a)(6)).

Community-based participatory research (CBPR) was intentionally chosen as our approach because of its description as “inquiry with the participation of those affected by an issue for the purpose of education and action for effecting change” (Green, George, Daniel, et al., 1995, p. 4). However, rather than focus on just participation, the SCA Project *centered* marginalized communities in its collaboration. That is, community partners had broad latitude to define their own research questions, choose their methodologies and participants, request the technical assistance and resources they needed, and focus their reporting and dissemination strategies in the way that best reflected and supported their own communities.

Research Justice

The Design Team was also guided by an intention to **disrupt structural inequities** in typical mainstream research processes, which can cause harm to marginalized communities. These structural inequities encompass all aspects of the research process, from who is doing the research and which communities are included in it, to the process by which it is done, to who has access to the research products.

To resist conditions of inequity, the Design Team wished to use a framework that is perhaps best described as “**research justice**.” As defined by DataCenter, research justice is a strategic framework that aims to address and transform structural inequities in research by centering community voices and leadership as a pathway to meaningful and long-term social change (Assil et al. 2015).

Language Justice

Project Staff were also committed to their initial vision to create a multilingual space and prioritized **language access** from the Project’s planning phases and into its first convening. However, it became increasingly evident that the unconscious ways in which the language privilege of Project Staff and Design Team (all of whom are English speaking) would interfere with implementation. We came to understand **language access** in the same way we understood the notion of *inclusion*, both of which beg the question, “**is that good enough?**”

Beyond language access, **language justice**⁵ aims for *equity*, which includes de-centering English in favor of centering the perspectives and experiences of limited or non-English speakers,



⁵ We are grateful to and acknowledge the contribution of Trilce Santana, who is a Spanish-English interpreter and translator that worked with us extensively throughout the project, who first introduced us to this term and concept of “language justice.”

including members of the Deaf⁶ community, and those whose primary language is English but who may use non-standard forms of English including those with alternate pronunciation, vocabulary, and cadence. Language justice works to level power dynamics that result in language inequities, by including in its analysis the observation that the very selection and meaning of words in most public contexts are structured from the perspective of the dominant culture (Antena, 2013).

Bridging Community Research Capacity

It was important to us to structure the CBPR Liaisons' capacity-building activities in such a way as to spark "acts of cognition"⁷ and support adult learning styles. With this in mind, the Liaison Team devised a set of resources and trainings, coupled with individualized technical assistance, to equip and orient Field Researchers to their new role as research leads.

From the beginning, we envisioned the research capacity-building aspect of this Project as a platform for **bi-directional learning**. In one direction the CBPR Liaisons, who had received formal training in research methods and execution through their doctoral programs or other means, possessed valuable knowledge about the research process that they could share with the Field Research Teams. This sharing of information took the form of trainings on, for example, research ethics, various research methodologies, presenting findings, etc. It also formed the foundation for the individualized technical assistance sessions between CBPR Liaisons and Field Research Teams.

In the other direction, Field Researchers brought a tremendous number of research skills to the table, even though these skills are rarely acknowledged by mainstream researchers, or recognized as such by community partners themselves. We alternately termed this collection of attributes "cultural rigor", "community intellect" or "cultural intelligence," (henceforth referred to as **cultural intelligence**). What they contributed strengthened the collection, analysis, and interpretation of data, as well as dissemination of findings, which culminated in extraordinarily robust research projects.



⁶ While we use the term Deaf throughout this report, the term also more broadly includes Deaf, Deaf-Blind, Hard of Hearing, and Deaf/Disabled people.

⁷ Our capacity-building approach was influenced, in part, by the Paulo Freire, author of *Pedagogy of the Oppressed*, where he asserts, "Liberating education consists in acts of cognition, not transfers of information" (72). As opposed to a pedagogical approach that Freire refers to as "banking," in which "the students are the depositories and the teacher is the depositor" (p. 53), this Project fostered conditions for Field Researchers to take ownership of their learning by engaging in meaningful dialogue, and contributing knowledge as much as they are receiving knowledge.

Survivor-Centered Advocacy

The term “Survivor-Centered Advocacy” is far from new. In fact, it is a familiar, grassroots term used among **domestic violence and sexual assault victim advocates** (henceforth referred to as “practitioners”) to emphasize that our work is based upon what each survivor determines that they want and need. For survivors of violence – whose experiences of violence so often undermine a sense of control over body, mind and spirit; self-determination; and ability to identify and access choices regarding multiple aspects of life – centering the survivor is not only a pragmatic approach to advocacy, it is also deeply political.

This overall Project and each of the five Field Research projects not only redefine who we think survivors are, they also contribute to our understanding of the complex nature of survivor-centered advocacy from a margin to center perspective.

Conclusion

This report makes recommendations for: (1) those wishing to do a CBPR project that holds historically marginalized communities at the center; and/or (2) those attempting to align or deepen their practices according to what works for survivors from historically marginalized communities.

Lessons learned on using research justice as a strategic framework include:

- Recognizing and discussing the histories of exploitation, extraction and stigmatization around research in marginalized communities;
- Using an appropriate research framework such as CBPR, and demonstrating a commitment to centering the experiences of the communities affected;
- Making a commitment to community practitioners that the data collected by them belong to them alone;
- Integrating a language justice framework, especially when collaborating with marginalized non-English speaking people;
- Practicing humility, self-reflection, and active relationship-building throughout the project;
- Demonstrating a substantial degree of flexibility, understanding, and responsiveness to contextual issues connected to colonization, sociopolitical oppression, trauma, and related factors; and
- Recognizing that community researchers bring important “cultural intelligence” to the research process, a collection of attributes that encompass both their lived experiences as members of marginalized culturally-specific communities, and as practitioners working with domestic violence survivors.

Lessons learned on the research process and capacity building include:

- Anticipating that research projects will require an unexpectedly high investment of time, energy and resources by both CBPR Liaisons and Field Researchers;
- Pairing CBPR with qualitative research methods for conveying rich meaning and for surfacing community wisdom, as well as for preserving the integrity of survivors' voices and narratives; and
- Creating an intentional platform for bi-directional learning between the CBPR Liaisons and the Field Researchers, with a liberatory education approach.

Themes that emerged from Field Research projects on survivor-centered advocacy in marginalized culturally-specific communities include:

- Moving from service-centered advocacy to survivor-centered advocacy;
- Moving at each survivor's pace;
- Addressing the whole family/community;
- Recognizing historical and ongoing trauma as a surmountable barrier to help and healing;
- Understanding how mainstream pathways to safety can present dangers: The perils of 911;
- Recognizing armor as a strength;
- Seeing friends and family are sources of both support and pain; and
- Recognizing our interconnectedness as advocates/survivors as a strength.

Though CBPR is not new, it is practiced in different ways. The SCA Project utilized CBPR as a starting point from which to develop the design in order to push our work beyond "inclusion" or "engagement," but instead, to actively dismantle the traditional notion of "expert," by centering the community in every part of the design and implementation process. The ways in which this Project lifted up the expertise of community members and supported them as lead researchers were not only liberated, it was liberatory.

It should be noted that nothing in this report is intended to identify or provide a "model in a box" – that is, neither a "model" that can be replicated, nor a set of "standards" or prerequisites that a group or organization can "meet" or "check off" in order to consider themselves survivor-centered. By its very nature, survivor-centered advocacy is always changing, always adapting, and therefore, cannot be contained in a "model." Rather, please consider our recommendations contained in this report as principles or guideposts, around which programs and services could be designed. In order to be considered survivor-centered, programs and services that get designed must also have baked into the way they fundamentally operate, survivor voice and

leadership, as well as a continuous way to reassess their function and whether or not they are meeting the current needs of survivors in the community.

Finally, not everyone can do truly liberatory or survivor-centered work – whether someone from a culturally-specific community or someone working in the mainstream. This work requires individuals, groups and organizations with particular constitutions and cultures: of humility, flexibility, creativity, experimentation, humor, and much more. For those organizations and individuals in possession of this constitution, becoming (more) liberated and survivor-centered to the extent that is illuminated in this report means that all of us will need to do things differently, and make tough choices. It means that resources will need to be allocated differently, and that programs and services that are not working, do not feel relevant, or that survivors do not really want will have to evolve. Despite these challenges, we are guided by the belief that centering those most impacted in everything we do ultimately benefits and transforms us all.

Introduction



Critical and liberating dialogue, which presupposes action, must be carried on with the oppressed at whatever the stage of their struggle for liberation.

The content of that dialogue can and should vary in accordance with historical conditions and the level at which the oppressed perceive reality.

Paulo Freire, *Pedagogy of the Oppressed*

Survivor-Centered Advocacy

The term “Survivor-Centered Advocacy” is far from new. In fact, it is a familiar, grassroots term used among domestic violence and sexual assault victim advocates (henceforth referred to as “practitioners”⁸) to emphasize that our work should be based upon what each survivor determines that they want and need. For survivors of violence – whose experiences of violence so often undermine a sense of control over body, mind and spirit; self-determination; and ability to identify and access choices regarding multiple aspects of life – centering the survivor is not only a pragmatic approach to advocacy, it is also deeply political.

The definition of survivor-centered advocacy suggests that this approach is based upon differences and uniqueness in survivor identities, experiences, emotional needs and social, political and economic context. However, advocacy has also moved towards western values of individualism and autonomy as well as remedies based upon individualized direct services, case management and reliance upon law enforcement. Despite values of self-determination and attention to context, domestic violence advocacy often looks quite uniform across agencies. A



⁸ Community partners identified themselves and their roles in a variety of ways, including: practitioners, advocates, organizers, and survivors of violence (not currently in crisis). They also identified their fields as (anti) domestic violence, gender-based violence, intimate partner violence, or simply anti-violence; as well as intersecting fields such as restorative justice, community development, and reproductive justice. Although we acknowledge and honor each of these identities, for the sake of brevity in this report, we generally use the term “[anti-] **domestic violence practitioners.**”

new emphasis on “**trauma-informed**” practice in relationship to domestic violence and sexual assault has reinvigorated discussion about the meaning and practice of survivor-centered advocacy; it also called attention to gaps in fundamental definitions of this familiar but poorly understood term.

An Exploratory Project

The *Defining and Testing a Survivor-Centered Framework in the Domestic Violence Field* Project (referred to in this report as the “Survivor-Centered Advocacy Project,” “SCA Project,” or “Project”) was first envisioned through dialogues emerging from *Gathering Strength*,⁹ one of the Asian Pacific Institute on Gender-Based Violence’s (API-GBV) other Blue Shield Against Violence-funded projects. It was conceived of as a way to reach much deeper into the questions: **What does survivor-centered advocacy mean?** More specifically, *what does it look like in our diverse culturally-specific communities?*¹⁰ And, *how are we attending to the uniqueness of individuals within the specific context of our diverse communities – or how are we not?*

In 2015, former API-GBV staff, Cristy Chung and Nancy Wan, undertook preliminary research to see what culturally-specific knowledge we have about survivor-centered advocacy. In reviewing the literature, they found that while survivor-centered advocacy has long been a familiar, grassroots concept and practice, (1) very little academic knowledge exists regarding cultural specificity; (2) there is little comprehensive documentation about what survivor-centered advocacy looks like and who is practicing it; and (3) further exploration with key informants in Asian and Pacific Islander communities revealed an “intuitive” sense of what culturally-specific survivor-centered advocacy is – but with little or no supporting documentation.

In response to the gap in understanding, this Project was proposed to Blue Shield Against Violence (BSAV), an initiative of Blue Shield of California Foundation (BSCF). The SCA Project was ultimately funded by BSAV and was envisioned as a bold and fast-paced year of work where the traditionally marginalized survivors, practitioners, and organizers would be centered, and through which we would investigate and learn together about what survivor-centered advocacy meant and looked like in these communities.



⁹ *Gathering Strength: Investing in the Leadership of Asian Pacific Islander Immigrant and Refugee Communities* is a project of API-GBV that has been funded by BSCF since 2012. It is dedicated to building the capacity of those most impacted to be leaders in ending domestic violence in their communities and lead in California’s anti-domestic violence field.

¹⁰ The Violence Against Women Reauthorization Act of 2013 defines “culturally specific” as “primarily directed toward racial and ethnic minority groups (as defined in section 1707(g) of the Public Health Service Act (42 U.S.C. 300u-6(g))” (42 U.S.C. 13,925(a)(6)).

Staffing transitions at API-GBV at the end of 2015 and beginning of 2016 prompted two other staff members, Susan Ghanbarpour and Ada Palotai, to take on the SCA Project and the enlistment of consultants to form a Design Team to assist with project design, project evaluation, and participant recruitment. While API-GBV's work specifically centered on the experiences of diasporic API communities, staff saw the unique opportunity the SCA Project presented, and designed it intentionally to also include members across different racially and ethnically diverse and diasporic communities. The Design Team assisted with recruitment of a diverse and multi-lingual group of participant Thought Partners and helped us arrive at the decision to have the survivors, practitioners, and organizers who wished to conduct research projects be a subset of the Thought Partner group.

Honoring the Stories Shared

In our fifteen-month journey through this Project, we came to ask ourselves how we can meaningfully convey the experiences of violence and survival – stories yet untold, perhaps shared with a best friend, known only among neighbors from one's own village, whispered or signed in languages unheard. In our Project, stories are told in Punjabi, Spanish, Korean, Konglish (Korean/English), American Sign Language – in languages that at times lost their vitality and nuance as they were translated into spoken and written English, an often poor and inaccurate way to document rich and complex meaning. However, API-GBV and our collaborative partners are proud to share these stories in the pages of this report, to contribute the results of our Project to public knowledge regarding survivor-centered advocacy.

We hope that our efforts make survivor-centered advocacy a reality for those who have been excluded from its reach. We also endeavor to make the reality of survivor-centered advocacy in our culturally-specific communities central to a domestic violence field that still marginalizes our experiences and perspectives.



Shake-up is going to come from a report like this. Sometimes the reality is that line staff know so much about the community – and that knowledge is dismissed. Most of the field is still white. We in this room are all serving marginalized communities

Participant

SURVIVOR CENTERED ADVOCACY & Gathering Strength

BUILDING CAPACITY, PROMOTE AGENCY



Drawn By: Claudia Lopez | On The Right Mind 2017

The Survivor-Centered Advocacy Project

The Survivor-Centered Advocacy (SCA) Project was a multi-site community-based participatory research (CBPR) project seeking knowledge about the meaning and practice of culturally-specific survivor-centered advocacy (SCA). Specifically, the SCA Project used a co-learning approach to generate, collect and share knowledge about how culturally-specific practitioners and communities conceptualize and practice survivor-centered advocacy, in order to meet the needs and surface the strengths of survivors of domestic violence (DV) from marginalized communities.

The Goals

The SCA Project had three main goals related to co-generating knowledge about survivor-centered advocacy in marginalized communities, and building participants' research capacity.

Table 1: Goals of the Survivor-Centered Advocacy Project

1. Share and build knowledge about culturally-specific survivor-centered advocacy from the perspective of marginalized communities.

- Who are survivors?
- What is survivor-centered advocacy?
- What does survivor-centered advocacy look like now?
- How could survivor-centered advocacy be more responsive to what survivors want/need?
- How could we answer these questions for survivors from different communities, who may have multiple/intersecting identities?

2. Expand the capacity of marginalized communities to conduct community-based participatory research in the domestic violence field.

- How do marginalized communities think about and approach research?

- What principles of community-based participatory research can researchers, practitioners and community members co-develop and apply to create positive collaborations?
- What strengths and assets do culturally-specific practitioners and survivors bring to the research process?
- What resources, trainings and technical assistance can positively contribute to building the research capacity of practitioners in/from marginalized communities?

3. Generate data to advocate for survivor-centered advocacy that lifts up and supports marginalized communities.

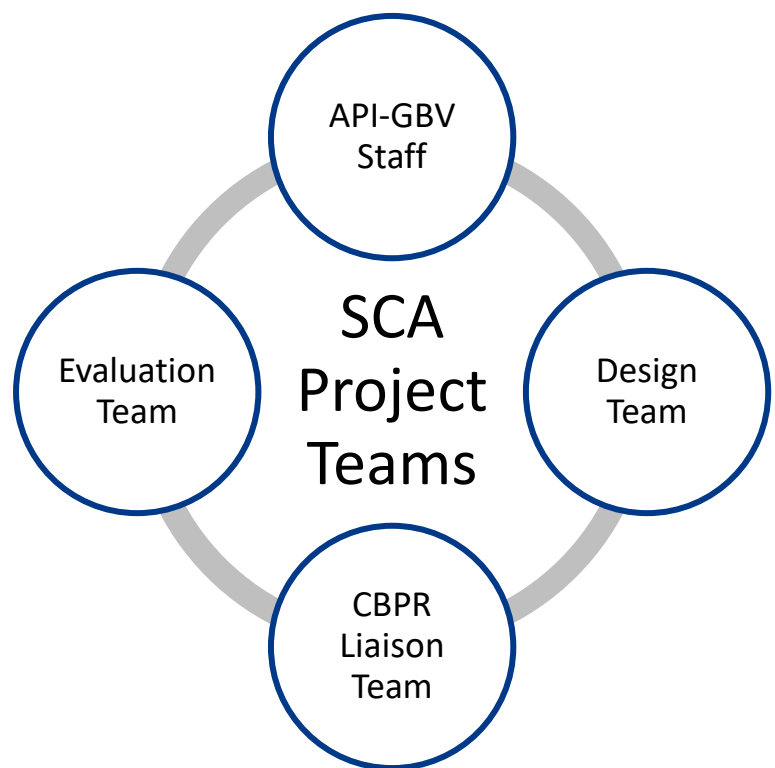
How could the outcomes of this project:

- Help re-frame how survivor-centered advocacy is defined and practiced, both in culturally-specific and mainstream settings?
- Guide sustained research capacity building and research in, with and by marginalized communities?
- Guide sustained future funding to support these activities?

The Design

The SCA Project was structured as a two-tiered, or “nested”, research design, with each tier adhering to CBPR Principles and Agreements that were developed collaboratively by all Project Participants (see [Appendix A](#)). The first tier focused on building knowledge, while the second tier focused on building capacity. In the **first tier**, eighteen culturally-specific practitioners called Thought Partners shared and co-generated knowledge around SCA strategies and practices used in their communities (see more about Thought Partners in the following section on Project Participants). The Project’s Design Team used a range of qualitative methodologies to elicit and record this data, such as pile sorts, free-listing, and facilitated group discussions. This information was compiled, and in some cases, an initial analysis was applied by the Design Team. This material was then shared back with participants

Figure 1: SCA Project Teams



via compilations of notes, word clouds and a data gallery walk, so that the group could collectively engage in a sense-making session that culminated in an iterative level of member-checking, information sharing and higher-level synthesis and analysis.

CHALLENGE

Because Project Staff and Field Research Teams were often from different communities - and despite our culturally-responsive approach - there were quite a few times when our community partners needed to call us in over our missteps and to learn more about their communities' history, context, and language justice-related issues.

The goal of the **second tier** was to build the capacity of a subset of the Thought Partners, called **Field Researchers**, to design, plan and execute a research project related to survivor-centered advocacy. The five **Field Research Teams (FRTs)** used a variety of quantitative and qualitative methodologies to conduct their research, including storytelling, in-depth interviews, focus groups, and surveys. The Design Team supported the research capacity-building of FRTs in a number of ways, including developing and offering a series of intensive skill building trainings; providing personalized technical assistance both in-person and virtually; creating

templates for a research budget, timelines, consent forms and related resources; reimbursing the teams' research-related expenses; and surfacing and naming research skills that Field Researchers already possessed, but may not have thought of as such.

In addition to the CBPR Principles and Agreements that were co-created by all participants, the Project also explicitly incorporated research justice, language justice, and trauma-informed principles into its design (described in more detail in later sections). The four phases of the SCA Project are detailed in **APPENDIX B**.

The Participants

The Project Participants comprised two main groups: staff from API-GBV and their consultants; and community partners. The full list of **Project Participants** is included as **Appendix C**.

API-GBV Project Teams

API-GBV staff and consultants were configured into various teams that planned and executed activities based on their roles and competencies, many of which overlapped (See **Figure 1**). More details about these roles are included in **Table 2**.

Table 2: SCA Project Team Roles

Project Team	Description of Role
Project Co-Leads	<ul style="list-style-type: none"> Overall project leadership, management, research design & evaluation oversight Primary liaison with funder
Project Support Staff	<ul style="list-style-type: none"> Project management & administrative support
Design Team	<ul style="list-style-type: none"> Collaborated on overall design of project & evaluation activities
CBPR Liaison Team	<ul style="list-style-type: none"> Each was primary liaison for 1-2 Field Research Teams Customized technical assistance to each team via in-person & virtual sessions Designed & delivered research capacity-building trainings
Evaluation Team	<ul style="list-style-type: none"> Developed & analyzed evaluation components

Community Partners

Community partners were a diverse group of domestic violence practitioners from marginalized culturally-specific communities, many with intersecting identities. They included practitioners from African-American, Sikh, Korean, Native, Latinx, Deaf¹¹ and Hard of Hearing, Arab, Hmong, South Asian, and Lesbian, Gay, Bisexual, Transgender, Queer (LGBTQ)/Gender Non-Conforming (GNC)/2Spirit¹² communities, many with intersecting identities; as well as practitioners from fields that intersect with domestic violence, such as restorative justice, community development, and reproductive justice. Our criteria for selecting community partners are included in **Table 3**. The rationale for constructing the group in this way is that we intentionally centered identities and experiences that have been historically marginalized, in order to learn more about common threads and variations in their experiences, as well as co-construct a research project that operated from a decolonizing and anti-oppressive framework

CHALLENGE

Because Project Staff were predominately from the API community, we struggled to make the connections we wanted with other culturally-specific communities during participant recruitment.

■ ■ ■ ■ ■

¹¹ While we use the term Deaf throughout this report, the term also more broadly includes Deaf, Deaf-Blind, Hard of Hearing, and Deaf/Disabled people.

¹² Among Indigenous North American culture, 2Spirit refers to individuals whose spirits are a blending of male and female spirit. 2Spirit is essentially a third gender recognized in many Indigenous cultures. For more information, see twospiritjournal.com.

Community partners were further arranged into two groups, **Thought Partners** and **Field Researchers**, where Field Researchers were a self-selected subset of Thought Partners (see **Figure 2**). The roles and selection criteria for Thought Partners and Field Researchers are illustrated in **Table 3**.

Thought Partners were the full group of community partners described above, who contributed their expertise, wisdom and understanding of survivor-centered advocacy in their own culturally-specific community settings to co-generate the data and findings of the SCA Project.

Field Researchers were a self-selected subset of Thought Partners who also developed, led and implemented a CBPR project related to survivor-centered advocacy.

Figure 2: SCA Community Partners

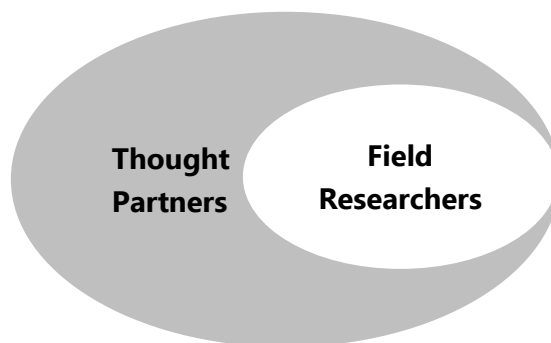


Table 3: SCA Community Partner Roles and Criteria

Community Partner	Description of Role	Criteria for Selection
Thought Partners	<ul style="list-style-type: none"> ▪ Inform the overall project goals & design ▪ Ensure relevance of the project to diverse communities ▪ Co-create CBPR Principles and Agreements to guide the conduct of research at every level of the project ▪ Co-generate knowledge around the meaning and practice of SCA in marginalized communities ▪ Consider involvement as research sites and Field Researchers ▪ Help recruit other potential research sites and Field Researchers ▪ Provide ongoing input on “sense-making,” documentation, dissemination and other outcomes throughout the duration of the Project 	<ul style="list-style-type: none"> ▪ From marginalized culturally-specific communities ▪ Diverse and intersectional backgrounds & identities including race, ethnicity, sexual orientation, language, ability, immigration status, religion, etc. ▪ Extensive experience (formal and informal) in domestic violence or related field in culturally-specific communities ▪ Community engagement and/or organizing experience and orientation ▪ Deep understanding of their community context beyond direct service provision ▪ Ties to a culturally-specific community

	<ul style="list-style-type: none"> ▪ Inform future steps ▪ Participate in project evaluation activities when possible 	<ul style="list-style-type: none"> ▪ Willingness to incorporate an intersectional lens and work across identity-based boundaries
Field Researchers	<p>Same as above, with additional features including:</p> <ul style="list-style-type: none"> ▪ Develop and execute a research proposal ▪ Align their research with CBPR Principles & Agreements ▪ Participate in skills-building trainings and technical assistance activities as needed ▪ Attend to human subjects protections and ethical research guidelines ▪ Share findings with their own participants, organization and/or community ▪ Communicate selected learnings about process and/or research findings with other project participants, project staff, funder, and external audiences, including the information contained in this public report (knowledge shared was determined by each Field Research site, with consideration of potential for misinterpretation, community stigmatization, etc.) 	<p>Same as above, with additional criteria that their research proposal reflected:</p> <ul style="list-style-type: none"> ▪ Access to or relationships with survivors who could participate in their research project ▪ A feasible research plan within budget & timeframe ▪ A team that was adequate for execution of the project ▪ A willingness to work with their CBPR Liaison to build research capacity as needed ▪ No ethical challenges or unacceptable risks to human subjects (balancing risk with benefit)

Field Researchers developed and submitted a research proposal (with training and support from SCA Project Staff) related to survivor-centered advocacy in their own culturally-specific communities. Research proposals were reviewed by the Design Team, with consideration of the criteria described in **Table 3**. Five groups submitted proposals, and all were selected to move forward as Field Research Teams.

Field Research Teams (FRTs) were supported by Project Staff throughout the Project, particularly by their individually-assigned **CBPR Liaisons**. CBPR Liaisons were API-GBV staff or consultants who were formally trained in research methods; were experienced in a range of research methodologies with particular expertise in qualitative methods; practiced culturally-

responsive¹³ research; and were familiar with the CBPR approach. CBPR Liaisons were matched with at least one FRT each via a process that balanced criteria such as possessing a skillset that complemented the proposed field research; rapport with the FRT; level of prior research experience of the FRT; and geographical location.

CBPR Liaisons worked very intensively one-on-one with their FRTs to help build their capacity to engage in CBPR via group trainings and individualized technical assistance; provided supplemental resources as needed; and helped surface and highlight the research skills that FRTs already possessed even if not recognized as such.

With the support of their CBPR Liaisons, Field Researchers designed and implemented their own research projects from start to finish, which included:

- Developing and submitting a research proposal, which included:
 - Identifying research questions and accompanying methodology/ies;
 - Defining their community setting and sample;
 - Ascertaining support and skill-building needed from CBPR Liaisons;
 - Creating a budget, timeline and implementation plan;
 - Completing a feasibility checklist; and
 - Assessing their organization's and individual FRT members' prior research experience (also used for evaluation baseline data).
- Attending to human subjects protections, including creating and implementing a consent form.
- Collecting and analyzing data from the field.
- Presenting their findings.

CHALLENGE

We greatly underestimated the budget each Field Research Team would need to adequately implement the project

Each of the five FRTs recruited research participants from their culturally-specific communities, whose characteristics depended on the research goals. They included community members who identified as survivors of DV or related forms of violence (either previously known to the Field Researchers or not); staff or board from the Field Researchers' community-based organization; and/or community allies or experts who are knowledgeable about the conditions of violence in specific cultural and community contexts. To preserve confidentiality, these research participants remain unnamed and anonymized. However, it is their voices, experiences and stories that

■ ■ ■ ■ ■

¹³ According to Dettlaff, Fong, & O'Grady, "Culturally responsive practice involves using the cultural knowledge and experiences of diverse clients to inform the ways in which social work practitioners engage, assess, and intervene with them." (2016, p. 15).

ground this report and inform our understanding of survivors' needs, goals and strengths, which are the focus of survivor-centered advocacy. For details about the **Field Research projects**, see [Appendix D](#).

Evaluation

Evaluation Plan

The SCA Project included an evaluation plan that assessed key project activities and outcomes. A selection of **evaluation tools** is included in [Appendix E](#). A more in-depth description of evaluation tools and results is included as [Appendix F](#). All tools were produced in English and Spanish.

CHALLENGE

We wish we would have had more time to think through our evaluation plan and tools – we ended up creating some we never used

Other Evaluation Components

The Project was also interested in collecting evaluation data regarding satisfaction with the convening and trainings offered by Project Staff. The evaluations contained questions regarding satisfaction with facilitation, logistics, materials, communication and language access with regard to overall project coordination, convenings, trainings (in-person and webinar) and technical assistance through Research Liaisons.

Outcomes

Throughout the SCA Project, engaging communities in research is as much about the process of inquiry as it is about the outcomes. This Project aimed to fuel a growing movement led by a community of practitioners from the margins of the domestic violence field to organize around the transformative potential of being "survivor-centered" communities, practitioners, programs, funding structures, and systems.

The SCA Project's intended outcomes expanded as the project design evolved, to include a mix of original and new outcomes as described in the following lists. We measured progress towards some of the outcomes using components of our evaluation plan, such as:

1. **Increased knowledge** about approaches to advocacy that center on survivors as whole persons; as well as knowledge about the CBPR approach and research methods in general.
2. **Increased research** capacity-related skills for those participating in Field Research, including increased recognition of research-related skills that community partners already possess.

Appendix F describes the results of our evaluation activities in detail, and how they relate to the Project's goals and outcomes.

However, some outcomes rely on what happens after the project ends, particularly with regard to the impact of disseminating information about the project widely, such as:

- 1) **Changes in behavior** by both project partners and external stakeholders. By disseminating information about our novel CBPR approach and findings, we hope this project will inspire both its participants and the field to implement and sustain new ways of practicing SCA as well as engaging in liberated research models.
- 2) **Improved practices** in the field, such that our project's findings may influence DV programs to create more opportunities to incorporate survivors' input and experiences into program planning, decision-making, evaluation, protocols, and leadership structures and inspire them to invest in alternatives that support whole communities and support communities to be whole.
- 3) **Enhanced advocacy.** As a result of sharing our findings, practitioners will have a deeper analysis of what needs to change in the field, and what is needed to change it. The Field Research Teams' findings in particular provide evidence to support policies and programs that more holistically improve survivor and community safety and well-being.

Organization of This Report

Following the tiered structure of the SCA Project, this report is organized into sections which correspond to the Project Goals. **Section III** focuses on the research and **Section IV** focuses capacity-building process (corresponding to Goal 2), while **Section V** presents the knowledge that was co-created by project participants (corresponding to Goal 1) about survivor-centered advocacy in marginalized communities. Goal 3, which focuses on how the findings from this Project could be translated into policy and practice, is addressed in **Section VI** on Lessons Learned.

Creating a Vision of Research Justice

Research Justice as a Framework

The CBPR Approach

CBPR was intentionally chosen as our approach because of its description as “inquiry with the participation of those affected by an issue for the purpose of education and action for effecting change” (Green, George, Daniel, et al., 1995, p. 4). However, rather than focus on just participation, the SCA Project *centered* marginalized communities in our collaboration. That is, community partners had broad latitude to define their own research questions, choose their methodologies and participants, request the technical assistance and resources they needed, and focus their reporting and dissemination strategies in the way that best reflected and supported their own communities. The only requirements were that Field Research Teams’ research projects needed to relate to some aspect of survivor-centered advocacy (defined broadly), reflect the CBPR Principles and Agreements, and incorporate human subjects’ protections and ethical research practices.

Research Justice as a Strategic Framework

The SCA Project utilized *research justice* as a strategic framework, guiding a process that sought to transform structural inequities in the typical mainstream research process, while undertaking a systematic investigation of the meaning and practice of survivor-centered advocacy in marginalized communities.

From the beginning, the Design Team was guided by an intention to disrupt structural inequities in typical mainstream research processes, which can cause harm to marginalized communities. These structural inequities encompass all aspects of the

CHALLENGE

We had not anticipated the depth of the histories of exploitation and oppression that participants associated with mainstream research. It was important to expand the project goals to include discussion of this topic and explicitly link it with development of the CBPR Principles.

research process, from who is doing the research and which communities are included in it, to the process by which it is done, to who has access to the research products. For example, many communities of color and other marginalized groups are generally underrepresented among the total population of researchers, and there is evidence that researchers of color receive disproportionately less research funding than their white peers with similar levels of achievement and experience (Ginther et al. 2011; Hayden 2015). Similarly, many marginalized groups are underrepresented in research studies, yet this seldom prevents such studies' findings from becoming canonized as evidence-based practices (Serrata et al. 2017; Sheikh 2006). In addition, as Assil and colleagues (2015) point out, communities often have limited or no access to research products from academic and government institutions due to language limitations, cost, and privatization of information (there is little open access to the literature base, which mostly lies behind paywalls and is in English); they have experienced stigma due to negative portrayals of their community in research, often stemming from ill-informed or biased assumptions; and community sources of knowledge have been discounted as “anecdotal” or “biased” compared to mainstream academic or institutional sources of knowledge.

To resist these conditions of inequity, the Design Team wished to use a framework that is perhaps best described as “**research justice**.” As defined by DataCenter, *research justice* is a strategic framework that aims to address and transform structural inequities in research by centering community voices and leadership as a pathway to meaningful and long-term social change (Assil et al. 2015). Assil and colleagues (2015) suggest that in a research justice framework, research driven by community priorities confronts institutional barriers to information, offers communities opportunities to challenge and retool power structures in research processes, and creates community-generated solutions in public policy and decision-making arenas. A research justice framework also acknowledges and gives equal power and legitimacy to different sources of knowledge, weaving together mainstream or institutional knowledge with cultural and spiritual knowledge, as well as experiential (“lived experience”) knowledge (Assil et al. 2015).

Given the historically colonizing nature of research to which marginalized communities were subjected, it was important to explore community partners’ feelings and associations around the research enterprise, in order to understand where folks were starting from, what may be barriers to their participation in research, and how we could co-create a research structure that mitigated potential harms and supported a collaborative, just, and joyful approach to research (Minkler, 2005, p. ii3).

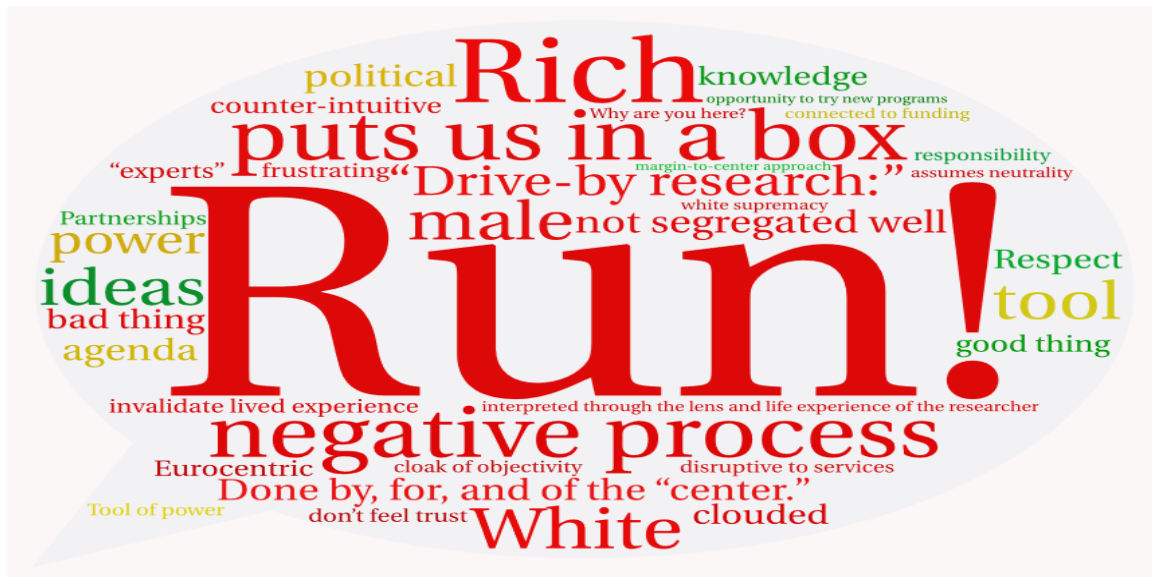
Naming the Colonizing Legacy of Research

We began by engaging in a free-listing activity, which opened up the question of research more generally by asking: “**What comes up for you when you hear the word ‘research’?**”

Although we were prepared to hear about negative connotations and experiences of research, we were surprised by the strength and consistency of the responses, across the many different communities and identities present. The responses were immediate, emotional and overwhelmingly negative. Many were informed by participants’ lived experience with research and researchers, with a repeating theme of academic researchers who came into communities to take information and leave without giving back, described as “drive-by research.”

We generated a word cloud of the responses, depicted in **Figure 4**, and coded it according to overall tenor of the response: green for mainly positive; yellow for neutral; and red for negative responses. As you can see, the responses were overwhelmingly (though not exclusively) negative.

Figure 3: Pre-Project Word Cloud of Free-List Response to “What comes up for you when you hear the word research?”



Envisioning Research Justice in the SCA Project

To counterbalance the strong negative response to the idea of research, we began our collective journey with a vision of what could be *positive* about research. Questions such as, “*what would the research process look like if we were creating it? How would researchers approach communities? Who would researchers be?*” served as starting points for what we might create as an alternative to the standard mainstream research process.

What resulted from this rich discussion was **the CBPR Principles and Agreements**, to which we agreed to apply throughout both tiers of the Project: our research with our community partners, as well as Field Research Teams’ research with survivors and others in their own communities. The full Principles are included as **Appendix A**, but an abbreviated version is shown in **Table 6**.

Table 6: Abbreviated Version of CBPR Principles and Agreements

CBPR Principles and Agreements	
1	Transparency in all stages of a project
2	Collaboration and decision-making
3	Balancing of mutual accountability of researchers to participants, of participants to researchers, of participants to community, etc
4	Community/participants as experts
5	Center those most impacted
6	Center practices that are trauma-informed/trauma-mitigating
7	Center anti-oppression principles and frameworks
8	Participants/community members own their own data
9	Build in self-reflection and consciousness-raising practices to examine our own dominant culture habits (Winn, 2010)

Grounding Research in the Community

his Project was based on the belief that *those most impacted by domestic violence* – those who most identified with survivors of domestic violence, those who live in and understand the conditions of the community – its assets and its vulnerabilities – and those steeped in the community’s historical legacy, cultural specificity and nuances of language – would be precisely who should be engaged in knowledge production. This is what the Project names as “**cultural context**,” knowing and understanding the deep nuances of culture including language, history, and shared common understandings of how race, gender, sexuality, class, religion, age, national origin, ability or disability, education, rural/urban identity, political viewpoint¹⁴ and the intersections define one’s life position and role. Cultures, of course, are flexible, shift, and can differ significantly depending upon one’s race, gender, class etc. – even within one “cultural” background.

Thus, a crucial finding was that, in order for a research process to successfully create and support research for and by culturally-specific communities, it requires both an appropriate research framework such as CBPR, and a commitment to centering the experiences of the communities affected.

But these are not the only pre-conditions for a successful community-led research project that is grounded in the research justice approach. We also needed to incorporate **language justice**, and take into account **community historical and contextual factors**, in order for our collaborative research together to thrive. These factors are addressed in the following sections.



¹⁴ This list of factors defining cultural context is adapted from Warrior (2007).

Shifting from Language Access to Language Justice

Language Justice as a Practice beyond Interpretation and Translation

In the domestic violence field, even among culturally-specific organizations, practitioners and communities, **language access** is most commonly defined as “allowing limited English proficient (LEP) individuals access to a wide range of services” (Judicial Council of California, 2015). It is critical in multilingual environments in the United States (where the dominant language is English) to insure that non-English speakers are able to participate fully in all aspects of human life, more generally, and in the context of this Project, in activities related to research, specifically.

Project Staff were committed to their initial vision to create a multilingual space and prioritized **language access** from the project’s planning phases and into its first convening. We intentionally recruited practitioners from many different culturally-specific communities, including those with high percentages of members with limited English proficiency. However, as early as the first convening, it became increasingly evident that the unconscious ways in which the **language privilege** of English-speaking Project Staff and Design Team would interfere with implementation. This meant we had a lot to learn about our own privilege, and that we had to exercise that newfound awareness to rethink the project design, how that design would be implemented, and the resources that would be required to implement the revised design properly.

Language privilege is a term we understand as being one of the tactics abusers use to manipulate and control their victims. Abusers with language privilege use their language skills to deny information or access to resources, to confuse survivors of their options for safety and legal recourse, or hamper a justice system process (Shah, 2014). We rarely think of these issues of privilege within a helping context – services, programs, shelters, etc. But when we do, we often will find that the settings that are intended to facilitate healing for survivors employ many of the same tactics used by abusers to erode victims’ self-worth and keep them trapped.

We came to understand **language access** in the same way we understood the notion of *inclusion*, both of which beg the question, “**is that good enough?**” If we go beyond simple inclusion and instead apply an equity lens, our understanding shifts from one of language access to one of **language justice**.¹⁵ Language access may suffice in classroom settings, or in other types of one-directional or didactic teaching/training environments, but for the interactive,



¹⁵ We are grateful to and acknowledge the contribution of Trilce Santana, who is a Spanish-English interpreter and translator that worked with us extensively throughout the project, who first introduced us to this term and concept of “language justice.”

participatory and bi-directional learning setting that we sought to create, language access was far too one-dimensional.

Language justice goes beyond expanding language accessibility in that it also aims for equity, which includes de-centering English in favor of centering the perspectives and experiences of limited or non-English speakers, including members of the Deaf community, and those whose primary language is English but who may use non-standard forms of English including those with alternate pronunciation, vocabulary, and cadence. Language justice works to level power dynamics that result in language inequities, by including in its analysis the observation that the very selection and meaning of words in most public contexts are structured from the perspective of the dominant culture (Antena, 2013). Even if everyone is communicating in English, language is structured in a way that speakers from the dominant culture are heard while those from marginalized communities are not; messages that fit the interests of dominant cultures are upheld as legitimate and are printed, published, broadcast and repeated while those from marginalized communities are not.

Language justice includes acknowledgement that those from marginalized non-English speaking groups face the experiences of language injustice every day. This includes lack of access to ordinarily available resources such as social services, education, medical treatment, mental health treatment, and response from police and other first responders. Access to domestic violence-related resources for non-English speakers is even more challenging. Accordingly, language justice has an explicit focus on social justice, since so many non-English speakers are among the most marginalized, especially those from communities of color and immigrant and refugee communities.

In practice, we found that language justice requires not only commitment and resources, but also imagination, deep respect for culturally-specific wisdom, careful scheduling, creative use of technology, and more resources.

Tensions between Research and Language Justice

As an organization representing Asian and Pacific Islander communities, API-GBV has long integrated non-English speaking participants and communities in practice, policy and research, particularly from Asian immigrant and refugee communities. However, this Project presented new and different dimensions of interpretation and translation that pushed the organization's learning edge. While Project Staff and Research Liaisons had significant experience with interpretation and translation, they were primarily Asian American and Middle Eastern, whereas the Project intentionally expanded its reach to the Native American/Indian community, Latinx community and Deaf community. Unfortunately, the Project could not match Field Research



We use the word “power” rather than responsibility because non-native people do not understand the meaning of responsibility

Avellaka Team

Teams with a Research Liaison who is from their community and spoke their language. Specialized education on and resources for the specific needs of interpretation and translation for each community was often necessary.

For Mujeres Unidas y Activas, the match of monolingual Spanish-speaking Field Researchers with a monolingual English-speaking Research Liaison required additional training and support. Transcripts from the storytelling and focus group sessions, which were conducted in Spanish, were professionally transcribed into Spanish. However, these Spanish transcripts were also translated into English in order for the Research Liaison to offer the most appropriate hands-on support, especially with qualitative data analysis. Working with multiple interpreters and translators throughout the Project also required supports to ensure accurate and consistent interpretation and translation of the Project’s specialized vocabulary, research terminology, and abstract concepts. For an example of one such support, see [Appendix H](#), an English – Spanish Glossary of Research Terms.



We encountered language challenges in ASL. ASL is a visual and spatial language. There’s no written form of the language. So how do we show this? Sometimes we see a transcription with “voice quivering.” But we don’t have something like this.

Participant

The DeafHope project included Deaf16 Field Researchers who were then matched with a Research Liaison who was relatively unfamiliar with the Deaf community and did not know ASL. DeafHope conducted a qualitative research project that videotaped interviews with Deaf survivors of domestic violence. ASL is a gestural/visual language that can be interpreted or translated using, for example, verbal and written English. However, the full meaning of ASL as a three-dimensional, non-linear language is weakened or distorted through the process of interpretation/translation into a linear, sound/print-based language.

Research Liaisons for DeafHope suggested the translation of videotaped interviews into written transcripts for what they believed to be easier coding of transcripts and support by non-Deaf, non-ASL literate Research Liaisons. DeafHope educated Research Liaisons on the uniqueness of ASL and spent considerable effort to explain and repeat their message as well as share educational materials (Temple & Young, 2004). Through this process, Research Liaisons came to understand this gap in understanding and sensitivity not simply as a lack of education and awareness on their part, but as an example of the ways in which *audism* – the systematic discrimination against Deaf people, operates. As with racism, homophobia and other forms of



¹⁶ One of the three Field Researchers at DeafHope is fluent in American Sign Language (ASL) but is not Deaf.

oppression, audism operates even among well-meaning practitioners – and, in this case, among practitioners with more extensive knowledge of language access in non-Deaf immigrant settings.

These examples demonstrate how conventional modes of research design, data collection and data analysis presented new challenges, as Research Liaisons often relied upon interpreters; training materials needed to be translated; data and dissemination of findings were often translated; and, in the case of American Sign Language (ASL), data in the form of videos could not easily be replaced by written transcript. See [Appendix G](#) for additional details about the pragmatics of language justice. Even with modifications of CBPR, Project Staff and Research Liaisons and Field Researchers found how basic conventions of research raised challenges when working through the lens of language justice and the realities of marginalized culturally-specific communities.

Community Contextual Factors: Historical and Emerging Issues

Each Field Research project was impacted in different ways by common issues. The issues discussed in this section must be taken into consideration when attempting to design and implement research projects in culturally-specific and historically marginalized communities.

Mainstream research often leaves little room for flexibility or adjustments, and instead preference fidelity to implementation and rigid timelines, and can also rely on the unnamed privileges of predominantly white communities, such as research that generally reflects and centers them. In contrast, marginalized culturally-specific communities confront a range of historical and emerging contextual issues that require flexibility, understanding, and responsiveness to changing conditions on the part of those funding and leading the research. Failing to allow for the needed time and flexibility to respond when these issues arise can negatively impact the research project itself, and most importantly, can do harm to already-marginalized communities.

The historical and emerging contextual factors identified by participants in this Project included [1] Historical and Ongoing Trauma, [2] Violence in the Context of Colonization, and the [3] Shifting Political Landscape.

Historical and Ongoing Trauma



The cultural response is a like a metal brand. It burns.

Deaf Black domestic violence survivor interviewed by DeafHope on her experience with a Deaf White Advocate



We had a funeral every weekend from August to November; the impact affected the process, and we honored that space.

Field Research Team, describing the context for reduced focus group numbers

The Design Team was acutely aware of how important it would be for the Project to attend to community and individual histories of trauma. Researchers have noted that working with communities on issues related to IPV 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” (Goodman, et al., 2017).

Historical trauma is understood to be the “long-term impact of colonization, cultural suppression, and historical oppression” particularly related to the experience of Native American people in the United States (Kirmayer, Gone & Moses, 2014, p. 300). Likewise, other communities that have suffered under colonial violence such as immigrant groups escaping histories of colonial occupation, war and genocide may also suffer from historical trauma.

Other historically oppressed groups, such as Deaf communities who have been subject to extermination in the name of eugenics, have also suffered ongoing trauma from the legacy of violence, as illustrated in the following passage:



The cultural and community threat [to Deaf communities] is not a new experience. Deaf individuals have historically experienced negative effects from the medical community's efforts to correct deafness, particularly the practice of eugenics and sterilization of Deaf individuals in the late nineteenth century and the early twentieth centuries (e.g., Nazi Germany). Even today, there are government bills in Europe and Australia that interpret deafness as a defective condition, amenable to genetic screening, elimination, or correction.

(McKee et al., 2012, p.325)

While historical trauma has been used by health and mental health practitioners and policymakers to explain health disparities, community members have also seen how historical trauma can affect all aspects of human life. Project participants did not necessarily use the term “historical trauma,” but they described the impact of long histories of violence, and the relationship between the destructive forces of violence and the continuation of interpersonal harm in the form of domestic and sexual violence. For oppressed communities, cultural erasure, ongoing discrimination, chronic poverty, homelessness, abusive policing, the violence of immigration control and the pervasiveness of interpersonal and community violence

characterize everyday conditions that multiply the traumatic impacts of historical violence. These themes emerge repeatedly in Project findings.

Violence in the Context of Colonization

For many marginalized communities, there are deep wounds stemming from historical legacies of colonization, slavery, cultural suppression, and other forms of historical oppression, as well as from displacement due to war, genocide, and colonial occupation (Kirmayer et al. 2014, p. 300; McKee et al. 2012).



We are recovering war zones. Both people who decide to live the red road way of life and those lost in addiction are just trying to survive the impact of colonization and disruption.¹⁷

Wendy Schlater, Field Researcher and Program Director of Avellaka

Latinx communities rising from the genocidal violence of Spaniard and other European colonizers; The La Jolla Band of Luiseño Indians surviving from three waves of colonization starting with the Spaniards, Mexican Government, and U.S. cultural and bodily extermination; Sikh Americans with an Anglo-colonial legacy who today are targets of xenophobic and Islamophobic (as some mistake them for Muslims) violence; and Korean Americans with a legacy of Japanese colonial occupation followed by U.S. military occupation – all represent communities not only experiencing current marginalization but also long oppressive histories of militarized colonial violence.

Western service delivery and law enforcement models of violence intervention fail to acknowledge histories of colonization that impact Native American/Indian communities and communities of color, and can also reproduce techniques and methods of colonial violence. Perceptions of “research” as a colonizing tool and the inability of mainstream services to recognize the context of colonization reverberated throughout the research.

Shifting Political Landscape

Further compounding these historical wounds was the increased targeting and vulnerability experienced by members of marginalized communities in the evolving socio-political climate.



¹⁷ According to Hilary Weaver, “The path to wellness in indigenous communities is often referred to as the Red Road; a journey and way to well-being that First Nations people must travel in order to be truly well and healthy human beings” (2002).



I have never done a research project before where right in the middle, the political landscape changes so dramatically. This is a researcher's worst nightmare. You don't know if afterwards people might change the way they were thinking.

Project Staff



When we first did our group, it was before the election. When we did the second group, the emotional situation the women were in was very different.

Field Research Team Manager

All of us on the SCA Project had a negative response to the drastic shift in political context following the November 2016 election. The political shift presents a threat to already vulnerable survivors of domestic violence and to the programs and practitioners supporting them. While the underlying conditions that contribute to violence – poverty, discrimination, immigration status, guns, racism, homophobia, transphobia, misogyny, ableism – are not new, the landscape continues to shift on a daily basis in ways that are impossible to predict, heightening the levels of fear and vulnerability survivors from these communities are experiencing, and impacting the ways in which survivors respond to violence and practitioners support them.

As one participant said during Convening 2:



In research, the tendency is to make the researchers as invisible as possible. But it's not just that it affected the participants; it also affected us as researchers. We are in our communities – [the election] impacted us/me and my productivity and focus, my capacity for trauma work.

Taking Community Context into Account

Research is not objective, despite the conventions that continue to dominate the world of research. Historically, academic research has framed objectivity as an essential component for findings to be considered credible. However, over time critiques of this stance have emerged, arguing that objectivity is impossible to possess so long as researchers are human, and recommending self-reflection and transparency around researcher identity and experience as only a mitigating practice. This Project may push such critiques even further, challenging us to think about objectivity not only as an impossibility, but as counter to credibility within the context of research with, by, for and about culturally-specific communities. Thus, it is critical that we take into account the researcher's historical identity and experience, and also how that identity and experience continues to shift in real time.

OBSERVATIONS

TRAUMA

LOSS EXPERIENCED IN THE COMMUNITY

HEAVINESS OF TRANSCRIBING RESEARCH - TRIGGERS

POLITICAL ENVIRONMENT

LANDSCAPE CHANGE



NOT FEELING SUPPORTED

SURVIVORS ACROSS ALL RESEARCHED COMMUNITIES

OPPORTUNITY TO BE HEARD

LANGUAGE COMPLEXITIES

BIAS
OWN CULTURAL

Drawn by: Claudia Lopez | On the Right Mind 2017

Expanding Research Capacity in Marginalized Communities



For apart from inquiry, apart from the praxis, individuals cannot be truly human.

Knowledge emerges only through invention and re-invention, through the restless, impatient, continuing, hopeful inquiry human beings pursue in the world, with the world, and with each other.

Paulo Freire, Pedagogy of the Oppressed

The Role of CBPR Liaisons

CBPR Liaisons were API-GBV staff or consultants familiar with the CBPR approach, who had expertise in both domestic violence and research (research design, data collection, analysis, documentation and reporting), particularly in qualitative methods. They also had extensive experience practicing culturally-responsive research in marginalized culturally-specific settings. Each CBPR Liaison was matched with at least one **Field Research Team** via a process that balanced criteria such as possessing a skillset that complemented the proposed field research; rapport with the FRT; level of prior research experience of the Field Researchers; and geographical location.

The CBPR Liaisons provided trainings via the training modules (described further in [Appendix J](#)) and offered flexible one-on-one support to their paired Field Research Team. This one-on-one support was highly customized via in-person and virtual communications, with interpretation and translation provided as needed, at no cost to the FRT. CBPR Liaisons had many sessions with their FRTs. In addition, the **Project Co-Leads** visited two FRTs in-person to build relationships, learn more about Field Researchers' communities, and address our own missteps around miscommunication and cultural responsiveness.

CHALLENGE

We underestimated how labor-intensive individualized capacity building would be; our approach was so novel many training materials had to be developed from scratch

The SCA Project began with full knowledge that a CBPR approach requires more time, relationship-building, collaboration, negotiation, and skill-building and exchange compared to typical mainstream research. It even exceeded the typical CBPR approach because our goal was not merely to create a participatory process, but to *center* our community partners in all aspects of the work: from the choice of research questions, to the proposed implementation plan, to the analysis and presentation of findings.

For example, we made a commitment to the Field Research Teams that **they owned their data**. It was up to them to decide what findings – if any – they would communicate back to the group and/or make public. We did this as part of the CBPR Principles, and because marginalized communities have long histories of research being used against them to stigmatize, exploit, or further marginalize them. This feature was unusual for a research process and was only possible because the funder understood and respected what was at stake. Without it, the Field Researchers may not have chosen to participate.

Furthermore, our approach and context were so unique that we had to create many of the research skill-building materials ourselves, most of which have been compiled into the Field Research Workbook (which will be distributed separately from this report), or incorporated into training modules. These materials needed to reflect both culturally-specific and domestic violence contexts. For example, our training on research ethics framed the consent process in terms that were analogous to consent in the sexual assault/ healthy relationships context, as well as centered the research experiences of marginalized culturally-specific communities. (For a sample consent form from the SCA Project, see [Appendix I](#).) The materials needed to “de-code” research jargon for a non-academic audience, while upholding a high standard of research process and practice. In our step-by-step guide to qualitative thematic analysis, for example, we included the research jargon along with plain-language steps, so that Field Researchers could feel comfortable encountering and using the jargon. Since research on domestic violence, especially in marginalized culturally-specific communities, is often harshly critiqued by hostile audiences, it was essential to establish a high degree of competence and credibility for the Field Research projects.

The CBPR Liaisons played a variety of other roles, described in the following sections.

Valuing Community-Based Knowledge: Bi-Directional Learning and Cultural Intelligence

From the beginning, we envisioned the research capacity-building aspect of this Project as a platform for **bi-directional learning**. In one direction the CBPR Liaisons, who had received

formal training in research methods and execution through their doctoral programs or other means, possessed valuable knowledge about the research process that they could share with the Field Research Teams. This sharing of information took the form of trainings on, for example, research ethics, various research methodologies, presenting findings, etc. It also formed the foundation for the individualized technical assistance sessions between CBPR Liaisons and FRTs.

In the other direction, Field Researchers brought a tremendous number of research skills to the table, even though these skills are rarely acknowledged by mainstream researchers, or recognized as such by community partners themselves. We alternately termed this collection of attributes “cultural rigor”, “community intellect” or “cultural intelligence,” (henceforth referred to as **cultural intelligence**). These attributes emerged from their embeddedness within the community; emotional intelligence and empathy; deep knowledge of the community’s trauma history and sociocultural norms; and shared lived experiences with their research participants, among others. Cultural intelligence can include characteristics native to the community or to the community researcher, as well, such as oral or narrative traditions.

We found that cultural intelligence was a hallmark of each of the Field Researchers, encompassing a range of traits and skills evidenced in:

- Intuitive understanding of which research questions are most meaningful and relevant to their community: both the right questions to ask, as well as how to ask them
- Using research staff and approaches that lead to authentic trust of and rapport with research participants Fluency in the primary language spoken by the community, including jargon and slang
- Deep knowledge of cultural context, signifiers, history, and beliefs specific to that community
- Strong recruitment strategies using novel methods (e.g., social media-based snowball sampling)
- Skills inherent to their practitioner role that are transferable to research (e.g., group facilitation skills)
- Rich interpretation and analysis of data
- Novel dissemination strategies and access to the communities that most need it

The sum of the culturally-specific knowledge and experiences of the Field Researchers in the context of their whole lives as members of marginalized culturally-specific communities – and in their experience as practitioners and organizers working with domestic violence survivors, whether or not affiliated to a domestic violence organization – culminated in extraordinarily robust research projects. That is, the Field Researchers possessed innate skills and knowledge that strengthened their ability to collect, interpret and analyze data.

As one of the CBPR Liaisons observed:



Participants likely trusted these research projects more – not just because we share identity characteristics with them, but because we are coming from community organizations dedicated to serving our communities. They know that the application of data they share will be more than what they would expect from a graduate thesis.

CBPR Liaison

As discussed above, although Field Researchers often employed these skills as a routine matter of curiosity and inquiry in their work and their engagement in the community, they often did not recognize these skills as related to research. This is unsurprising, given the increasing emphasis on the “professionalization” and academic-centric nature of the mainstream research enterprise. Therefore, the CBPR Liaisons tried to surface and uplift these traits wherever possible, and to take a position of humility and self-reflection to observe and learn about these skills from the Field Researchers directly. Indeed, it was precisely due to the high degree of cultural intelligence evinced by Field Researchers that they were able to gain valuable and innovative findings about communities who are rarely, if ever, represented in the research literature. This concept of cultural intelligence became central to our work.

Bridging Community Research Capacity

It was important to us to structure the CBPR Liaisons’ capacity-building activities in such a way as to spark “acts of cognition”¹⁸ and support adult learning styles. With this in mind, the Liaison Team devised a set of resources and trainings, coupled with individualized technical assistance, to equip and orient Field Researchers to their new role as research leads. A description of the training modules we developed, and information about the effect of these training modules on building the research capacity of Field Researchers can be found in [Appendix J](#).



Liberating education consists in acts of cognition, not transferals of information

Paulo Freire,
Pedagogy of the Oppressed



¹⁸ Our capacity-building approach was influenced, in part, by the Paulo Freire, author of *Pedagogy of the Oppressed*, where he asserts, “Liberating education consists in acts of cognition, not transferals of information” (72). As opposed to a pedagogical approach that Freire refers to as “banking,” in which “the students are the depositories and the teacher is the depositor” (p. 53), this Project fostered conditions for participants to take ownership of their learning by engaging in meaningful dialogue, and contributing knowledge as much as they are receiving knowledge.

Research Justice: A 9 Month Journey

Over the 9-month journey of the SCA Project, Thought Partners and Field Researchers experienced and witnessed a transformation of the research process, from one driven by mainly white academics who are generally far removed from the realities and lived experiences of marginalized communities, to one driven by community-based practitioners from culturally-specific communities. This experience was accompanied by a corresponding shift in how community partners came to view the research process, once they were leading it and applying the CBPR Principles they had co-created. The shift can be visualized in the word cloud of the responses to the post-project question, depicted in **Figure 5**, and again lightly color-coded: green for positive; yellow for neutral; and red for negative responses. As you can see, the responses were overwhelmingly (though not exclusively) positive.

Figure 4: Post-Project Word Cloud of Free-List Response to “What comes up for you when you hear the word research?”



Moving from Practitioners to Practitioner-Researchers

Recognizing the Power of Research

By the end of data collection and well into data analysis, Field Researchers were pleased to report the power of research.

For some, the sheer learning of research skills and witnessing their results were exciting. In particular, “seeing” the data through the lens of research, and not just interpreting it through the lens of a practitioner, led to new and exciting insights into the survivors they work with every day.



We haven't dealt with domestic violence in LGBTQ communities before. It was refreshing to hear a lot of support from the community. And we got to deal with it in a preventative way, before we were in crisis. It gave me confidence that I'm on the right path in this work. As I was going through the process with my Research Liaison about the memoing and the coding and getting the themes, I saw how valuable it was to get out the voices of the community. Now I appreciate research!

Participant



I had never seen transcripts before this project. Nothing escaped or was forgotten. This was so important because in the focus group, we recalled that we had heard something. But when we read through the transcript, reviewing what they had discussed, it was actually very different. That really made an impact. It's so important for us to notice that what we think we hear and what is actually spoken can be quite different.

Field Research Team member

Field Researchers reported visibly seeing the change in participants as their relationship shifted from a supporting role as a practitioner, to being a co-producer of knowledge as a researcher. The participant was no longer just a help-seeker. Their experience was valuable to the public at large and was adding knowledge to the field.



I'm excited to share the results with my community. It was already exciting. It was exciting to have the survivors be really passionate – and not just sharing for personal safety goals and healing but for “data collection.” This was different for them in subtle ways, for everyone. One was very clear. I've been working with her for years and hear the same story over and over again. Since then, she hasn't had to tell me the story again. Now she has “new” stories. She's talking about a new love interest.

Participant

Producing Research that is Meaningful to the Community

The Field Researchers' close ties to the experiences of culturally-specific communities meant that research questions, data and modes of dissemination were also meaningful to the communities from which the research emerged. Commitments to the co-created CBPR Principles and

Agreements supported Field Researcher desires and intentions to return the research to the community – in accessible language and formats.



I had a real disconnect with research, “drive-by research.” I had personal resistance. So it was nice to hear about the process, how we could be more engaged and leverage it for good.

Participant

For example, DeafHope generated a report that was video recorded in their primary language, American Sign Language (ASL), without needing to go through the distortions of interpretation and translation. Sikh Family Center wrote up their findings in Punjabi for their community members.



All of us felt very hopeful and humbled that community can share experiences with us. There’s buy-in. I felt personally very touched that people were willing to share their stories with us. This is the first time Deaf people have been able to do this. We’re going to share back our information with the community and share it as a tool to support them.

Participant

The Meaning and Practice of Survivor-Centered Advocacy

Who Are Survivors?

Because the design of this Project intentionally included members across different racially and ethnically diverse and diasporic communities, Project Staff felt strongly that, before we could begin answering our primary research question, “What is Survivor-Centered Advocacy?”, we needed to come to a shared understanding of **who we were talking about when we say “survivor.”** The Thought Partner group also consisted of members who work in different disciplines. Thus, the ways in which members of the Thought Partner group came into contact with survivors in their respective contexts varied. The descriptions that emerged cumulatively point to the simultaneous and interlocking systems of oppression that complicate dominant notions of ‘survivors’:

- People without language access
- People who are criminalized
- Documented and undocumented immigrants and refugees
- LGBTQ people
- People living with disabilities
- “Hard to work with” survivors
- People struggling with mental health challenges and/or addiction

See [Appendix K](#) for photos and more details.

Current Trends: Redefining Survivor-Centered Advocacy

In recent years, the dominance of *service*-centered advocacy has come to the fore, giving rise to abstinence-based eligibility and mandatory participation models of service, similar to those often associated with homeless service programs. The rise of “trauma-informed advocacy,” and the advances of Housing First policies, however, offer critiques of these models and have drawn attention to more flexible, mobile services such as *promotora* models (National Center on Domestic Violence, Trauma & Mental Health, n.d.; National Network to End Domestic Violence, n.d.; East Los Angeles Women’s Center, n.d.). Recent explorations of restorative justice and transformative justice alternative intervention approaches have all contributed to the question of how far we have moved from survivor-centered advocacy and how survivors often ask for options, such as staying in abusive relationships, that do not fit into the menu of choices offered by domestic violence resources (Ptacek 2009). They also point to new directions in services and intervention approaches that could redefine the nature of survivor-centered services.

CHALLENGE

Because participants were so immersed in their work, it was difficult for them to articulate how their work is distinctively different from the mainstream

Many of these recent trends have resulted in practice and policy changes within mainstream DV organizations. A Google search on “survivor-centered advocacy” reveals a snapshot of current trends regarding what constitutes survivor-centered advocacy:

- Survivors set their own goals
- Not just about individuals but about systems, organizational policies, culture, budget, etc.
- Strengths based, not only needs based
- Trauma-informed
- Voluntary services
- Minimal rules
- Mobile, accessible sites for support
- Children see empowerment of non-violent parent
- Children see non-violent parent help them process violence
- Beyond inclusion – addresses structural oppression

What is Missing: Bringing a Margins to Center Approach to Survivor-Centered Advocacy

While this snapshot of changes addresses the growing professionalization and rules-based direction of domestic violence services, it scratches the surface regarding Kimberlé Crenshaw’s

Survivor-Centered Advocacy: Emerging Themes

Moving from Service-Centered Advocacy to Survivor-Centered Advocacy

The professionalization of victim services and the increasing reliance on service delivery and crime control as opposed to social movements has elevated “service centered advocacy” above that of survivor-centered advocacy (Davies, Lyon, & Monti-Cantania, 1998). So much of what happens in the first 24-72 hours of a survivor’s experience receiving help from someone in an organizational setting is about completing an intake process – filling out forms, signing consents, reviewing rules and restrictions. Survivor-centered advocacy means returning to a way of being and doing that centers the person in front of you, not the organization’s priorities, similar to the way a survivor might experience asking for help from a supportive friend or family member, without forms and clipboards and keys. Furthermore, survivor-centered advocacy means making our physical spaces in our organizations more like the welcoming homes that a survivor might walk into to be comforted:



There’s a beautiful [practice] about interactions when survivors first come to you. They come into the office but they’re not sitting behind a desk. It’s like a living room. They’re offered some tea. It comes down to being with that person in the way that people would be with each other in the community – in terms of the values of the community.

Participant

Moving at Each Survivor’s Pace



One conclusion that Field Researchers drew from their research was the centrality of the notion that healing is an individualized process, and that each survivor moves at his/her own pace. Further, this process and pace is impacted in different ways, not just by changes in a particular survivor’s internal emotional, mental and spiritual ecosystem, but also by circumstances and conditions in a survivor’s surrounding family and community, and the healing process must adapt to these unanticipated changes of pace. It is also important to note that this process and pace can be different from person to person, even if they share a common culture, geography and language.

Moving at each survivor’s pace and respecting the individualized healing process requires the practitioner to have the ability to listen deeply and know when to get out of the way. Practitioners come with their own cultural identity and lived experience that colors the ways in which help is offered and resources are shared. Practitioners must be doing their own work on self-awareness, and must listen for cues from survivors around when they might be taking up too much space or gatekeeping resources.



When we center the survivor, we have to adapt our work. We can't fulfill every need that comes up. But she will shed light on where she wants to go. The art of balancing all of the pieces needed for her safety and her family's safety without me being in the way as the advocate was a place of learning. As advocates, we bring a lot of baggage, too.

Participant

For at least one Field Researcher, this research helped to answer questions that she had about why her own experience of consciousness and liberation from a domestic violence situation seemed so different from that of others. The findings confirmed the legitimacy of her program’s decision to not only integrate mental health services within their agency but also to offer a variety of healing modalities.



I would ask myself, “why are there women that can get a lot of help – like me – and I felt strong, but for others, it doesn't work that way. People continue for years and even when they go to professional therapy, they are still that way.” And now I see that it's not the same way for people. Now we have art, talking, meditation. Now there are many other things that our program can offer and it can help each of them in their different ways.

Participant

Ultimately, the need to have a flexible approach to advocacy that allowed for survivors to move forward at their own pace and supported them with a variety of intervention approaches that could meet different needs at different times seemed central to survivor-centered advocacy.



We were going at the pace and time of each woman. And I think that's important to us. Some of us learn quickly. Sometimes it's harder for others. Some of us are in between and sometimes we go back for each one of them. This was different because we're not pushing them. We're going as she needs time to progress.

Participant



It seems like survivor-centered advocacy is a lot more listening to the community and less lecturing the community – less of sharing your “expertise” and more listening to what their reality is.

Participant



Using a “Whole Person” Approach

Another theme from Field Research projects was the need to address the “whole person.” This reaffirms the insights of the 1998 work by Jill Davies, Eleanor Lyon and Diana Monti-Catania, describing an approach that may take into account needs beyond physical safety, legal services and separation from abusive partners that tend to be the prioritized services for mainstream programs. Surviving violence is one of many parts of an individual’s experience.

Kimberlé Crenshaw’s formulation of intersectionality in 1991 emphasized how the definition of “woman” in woman centeredness usually refers to white middle-class women, erasing African American and other women of color from the definition of and understanding of violence against women. Recognition of the fluidity of both gender identity and sexual orientation and the inaccuracy and oppressiveness of a rigid male-female binary has demanded a shift from assumptions that survivors are women, perpetrators are men and that intimate relationships are heterosexual – in addition to assumptions regarding race and class (Kanuha, 1990).



When the majority of women come to MUA, one thing that they mention is that we don’t identify as an organization that works with domestic violence only because then women wouldn’t come. The women come because they are depressed, they’re feeling alone; they need a job; they’re looking for mental health services; they’re having problems with their children. Once they’re there – part of the culture is that violence is so institutionalized, so acceptable and moralized that it’s an effort for us to understand the roots of that violence and to liberate ourselves.

Participant

For marginalized culturally-specific communities, using a “whole person” approach means that the survivor can bring her/his “whole self” to the table, not just the survivor piece of that self, which may mean expanding the service reach beyond domestic violence, to other issues that survivors may identify as more important or less shameful to identify.



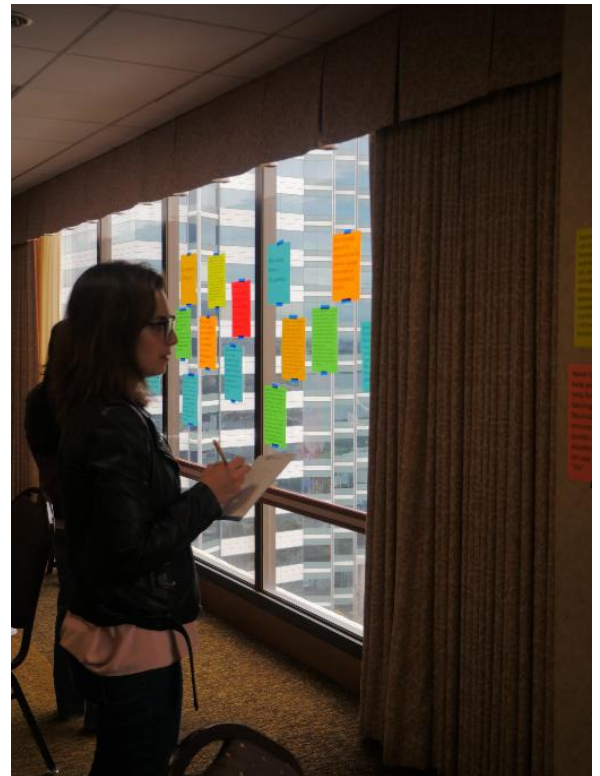
If you understand all of the roots of DV, then you begin to liberate and your change will be more permanent because you'll be able to have more healthy relationships. Traditional services only give you what you need in a moment – but you don't understand why you continue to have those problems. It takes longer, but it's more effective.

Participant

Addressing the Whole Family/Community

This research also recognizes that for many from marginalized culturally-specific groups, the “whole person” is often not an individual identity, but one bound up in interconnected relationship to family, friends and/or community, including those members of those groups who are actively involved in causing the survivor harm.

With “mainstream” definitions of domestic violence being limited primarily, or sometimes solely, to interpersonal violence, and the unit addressed in interventions being the individual woman or man, survivors and abusers from historically marginalized communities are excluded from those definitions and interventions (Kim, 2010). Violence in these communities is often experienced in the context of, at the hands of, or at great risk to extended family or community members, thus, family and community need to be a critical component in definitions of and interventions for domestic violence. Further, mainstream service providers and systems have been set up to serve two distinct and separate groups of people – those who have been harmed and those who have caused harm – distinctions which are not always clear or easy to determine.



When they go to receive mental health services, the most interesting thing for me is how they started seeing the benefits for the entire family to receive services – that they were helping their children to disrupt the cycle of violence. That was very important. And for me this is very important.



We had a vague idea that this was happening but the women expressed it. More than anything, they celebrated it. They said that they felt that through the storytelling, they were able to see how they were healing – what their process was. But when they got in touch with their part of being mothers, they could understand why the children were acting that way. “I need to be a new mother and understand that my child is acting this way because they were abused and that is what they learned.” They were able to listen and hear – “I’m angry. I’m scared.” And they were able to have them act out without saying, “shut up,” and realized that this was a cycle of violence being manifested in the children.

Participant

In fact, the survivor’s perception may be that her/his well-being is directly linked to that of the person who is harming her/him. The question arises as to whether this is a sign of denial or ignorance of domestic violence in the relationship – the typical response from mainstream service providers – or whether caring for an abusive partner is valid and could even be interpreted as a sign of health. While there is no definitive answer to this question, and the answer may vary from one survivor to the next, one thing is clear – survivor-centered advocacy in marginalized culturally-specific communities requires shifts away from narrow identifications as survivors of domestic violence to broader definitions of survivors in their multiple roles. It may mean that survivor-centeredness also brings in other people into one’s definition of self. While this is often considered dysfunctional or a sign of incomplete and inadequate notions of self in a western viewpoint, this can be a positive characteristic from other cultural perspectives.



One of the things that I saw was “how does the movement work with people doing harm, where they are not only abusers.” How do we work with their trauma? Many organizations across the field refuse to work with abusers. How do we do that, considering community context, so that if they go back to the home, we know that it’s safer for them.

Participant

“

It's been an honor to use the natural place of responsibility I have in my community to be able to address these issues, these issues that hold our community back from really thriving and living to their full potential. I'm humbled being able to run our tribal program with the flexibility and responsiveness we have – to be able to serve our people. For me survivor-centered advocacy is more of a western concept. When a woman or man comes in as a survivor, we see their whole family. We don't just see that man or woman. We don't just see the domestic violence or sexual assault that brought them into our doors. It gives us a humble outlook on how we serve survivors. We don't just put a woman in the center and make that choice for her. We do take her direction, but a lot of women will say, "all he needs is a job" – or "he needs counseling, too." We try to fill those needs. We know that for Indian women, they will leave nine times before leaving for good. So being able to serve her whole family is important each time.

Participant

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The best thing that we can do is to go back to our tribal systems and have a simple message of, "How are we good relatives to each other?" This is how we governed ourselves pre-colonization.

Field Research Team member

Recognizing Historical and Ongoing Trauma as a Surmountable Barrier to Help and Healing

While all five field research projects identified domestic violence and other forms of violence as prevalent in their communities, this was not seen as an inherently cultural characteristic. Conditions of colonization, chronic poverty, discrimination, aggressive targeting by police and immigration control were among the factors contributing to increased vulnerability to violence. They are also conditions that make help-seeking dangerous.

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One of the things we learned in the process of research is the part about – that in the path that we had established to respond to immigrant women who are victims of DV or sexual assault, we have to add the emergency things that come up in terms of life – everything that an immigrant needs, we have to be. We end up being the scapegoat for everything – no work, no place to live, all the things we get blamed for as immigrants. So it's important to remember that when you're serving marginalized communities, they have a lot of needs. And a lot of times, the time or the situations of emergency or crisis make it that DV is not the priority for right now.

Participant

Understanding How Mainstream Pathways to Safety Can Present Dangers: The Perils of 911

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For right now, many of [the survivors] are not even denouncing DV because of the police. There is not a good relationship with the police. We can't forget this. So if a lot of services are with those we don't trust, that's not going to help people get closer to the services. And our priority is going to be to silence the abuse, to not get reported.

Participant

Many of the field research projects found the police response to be almost uniformly detrimental to the safety and well-being of survivors. Research projects that focused on the experiences and needs of marginalized culturally-specific survivors such as the studies by KACEDA/QYUL and DeafHope only found negative experiences with the police.

“

[It's important to] affirm fears and threats of violence from conventional resources, for example, the police – and to support and focus on alternative options.

Participant

Recognizing Armor as a Strength

“

Survivors tend to be high-functioning especially if the abuser denigrates them when they're emotional. So we need to create spaces where they can share what's going on. People also face repression in home countries. This can make peoples' survival strategies look like a calm collected mask. This can be misread as meaning that this person doesn't need help.

Participant



Survivors of violence from culturally-specific communities have multiple vulnerabilities, having been historically targeted in many ways. These survivors find ways to matriculate through the world and go about their daily lives in spite of the hardship they have endured, and for many survivors from these communities, that might mean living with a permanent defensive wall. This wall of toughness acts as a protective shield from vulnerability, making some survivors appear to be resistant to help or acknowledging emotions such as fear or grief that make them even more vulnerable. This might also

prevent others from reaching out to provide support, because it appears that these individuals neither need nor want said support. Survivor-centered advocacy needs to recognize resistance as a common survival strategy and provide ways of support and healing that can safely allow for walls to lower, if and when the time is right.

Friends and Family are Sources of Both Support and Pain

Several of the Field Research projects found that survivors may find friends as the most likely and most helpful sources of support. For the Korean LGBTQ survivors responding to the KACEDA/QYUL survey, 31% of survivors of intimate partner violence went to friends for support. Of those, over 80% reported having a positive experience. The interviews of DeafHope also revealed that friends provided familiarity and were flexible in meeting the many needs of survivors such as childcare and information regarding resources.



What we found is that they go to friends and family and that becomes good sources of support. So if in our organization, we can mimic that – since we have the data that friends and family are more positive sources of support – then why don't we as organizations mimic the way that we give support – not be a staff person or a professional. That kind of action doesn't seem to be supported by the funder's perspective. They don't see that as valued. They want to support professionals and offices.

Participant

Responses from family members can be more mixed or negative. This was true for Korean LGBTQ survivors who preferred going to friends and who often witnessed or experienced family violence in their childhood homes. Family acceptance of them as queer or trans was also mixed,

with siblings more likely to provide positive support than parents. The Sikh Family Center reported that positive support by families was often blocked by shame when it came to domestic violence. Survivors had the experience of being turned away by family, having to face abuse alone.

Recognizing our Interconnectedness as Practitioners/Survivors as a Strength

Thought Partners and Field Researchers represented the communities that they were serving. They understood deeply the conditions of survivors in their organizations/communities and often identified as survivors themselves. This interconnectedness – whether from the same or similar identities and experiences of survivors or from a long-term commitment to and long-woven knowledge of these experiences – served as a mutual strength, for survivors and for practitioners/researchers.



“When you heal, I heal” [referring to MUA’s approach to their mental health programs]. That’s what’s missing. We have to acknowledge our joint journey to healing – as diverse and separate communities.

Participant

Lessons Learned

This report makes recommendations for: (1) those wishing to do a CBPR project that holds historically marginalized communities at the center; and/or (2) those attempting to align or deepen their practices according to what works for survivors from historically marginalized communities.

The following sections are organized according to **lessons learned** in the course of executing this Project, with accompanying **recommendations** indicated by a check mark (✓).

Lessons Learned: Research Justice

Marginalized culturally-specific communities share a historical and contemporary experience of research as a colonizing practice – mining and extracting of data – which has left communities feeling depleted, alienated and distrustful of mainstream research. Culturally-specific communities are typically research subjects rather than those leading the research, if they are included at all. Thus, the SCA Project intentionally used *research justice* as a strategic framework to transform structural inequities in the mainstream research by centering marginalized culturally-specific communities' priorities, needs, strengths, and skills.

- It was critical to recognize and discuss the histories of exploitation, extraction and stigmatization around research in marginalized communities; as well as to tie this discussion to the foundational principles and agreements that governed the SCA Project's research processes.
 - ✓ Build in ample time to address communities' histories and associations with research.
 - ✓ Project processes should center and reflect community voices and values.
- This Project was predicated on the idea that those who are embedded in the community, share identities, languages and lived experiences with survivors, and have deep knowledge of the community's history and cultural context, are also those who should be setting research priorities and producing knowledge. We found that in order to successfully support research for and by culturally-specific communities, it required both an appropriate research framework such as CBPR, and a commitment to centering the experiences of the communities affected.

- ✓ Those most affected by and knowledgeable about the area of study, should also lead and drive the research priorities and process, and production of knowledge.
- A key reason that community practitioners felt comfortable participating as research partners was because the Project made a commitment that the data collected was theirs alone. They decided what findings (if any) would be shared back with the group and/or made public.¹⁹
 - ✓ Funders/project sponsors should explicitly state that data belongs to the community from which it is generated, and can only be used or cited with the community's express permission.
- Integrating a language justice framework is key to upholding research justice, especially when collaborating with marginalized non-English speaking people who are often excluded from research processes.
 - ✓ Center the perspectives, experiences, and language accessibility needs of marginalized non-English speaking people, including limited or non-English speakers, members of the Deaf community, and those whose primary language is English but may use non-standard forms such as alternate pronunciation, vocabulary, and cadence.
 - ✓ Plan and budget appropriately for language accessibility, including mitigating for issues of language privilege, and expanding overall timelines to accommodate translation and interpretation.
 - ✓ Prioritize equitable communication practices and parity in distribution of resources.
 - ✓ Language access costs should be borne by the funder/project sponsor, rather than the non-English speaking communities.
- Project Staff needed to practice humility, self-reflection, and active relationship-building throughout the Project. We made many missteps and were grateful to our community partners who called us in²⁰ to learn more about their communities' history, context, and language justice-related issues (Trần, 2016).
 - ✓ External research partners must build in time for trust- and relationship-building; creating open lines of communication; addressing power imbalances; and engaging in self-reflection to ensure they are not reproducing harmful dominant culture habits.



¹⁹ This commitment is analogous to how our field understands the confidentiality and privilege accorded to survivors' identities and information.

²⁰ The term "calling in" comes from activist Ngọc Loan Trần: "I picture "calling in" as... a practice of loving each other enough to allow each other to make mistakes, a practice of loving ourselves enough to know that what we're trying to do here is a radical unlearning of everything we have been configured to believe is normal."

- Marginalized culturally-specific communities frequently confront a range of contextual issues connected to colonization, sociopolitical oppression, trauma, and related factors. This requires project partners as well as funders/project sponsors to demonstrate a substantial degree of flexibility, understanding, and responsiveness.
 - ✓ Incorporate trauma-informed research practices throughout the process.
 - ✓ Check in with community partners about the impact of changing conditions on the ground, and how they might alter the research design without losing its intent.
 - ✓ Prioritize research objectives and flexible timelines, rather than rigid fidelity to initial plans.

- Community researchers bring important “cultural intelligence” to the research process, a collection of attributes that encompass both their lived experiences as members of marginalized culturally-specific communities, and as practitioners working with domestic violence survivors. They contributed intrinsic skills and knowledge that strengthened the collection, analysis, and interpretation of data, as well as dissemination of findings, which culminated in extraordinarily robust research projects.
 - ✓ Investing in research capacity-building for community partners, coupled with surfacing and strengthening their intrinsic knowledge and skills, can facilitate healing from histories of colonizing research practices, lead to the development of groundbreaking research processes, and greatly improve the quality of results yielded.

Lessons Learned: the Research Process & Capacity Building

One of the SCA Project’s goals was to build the capacity of a group of community partners, called **Field Researchers**, to design, plan, and execute a research project. Most of the Field Researchers did not have prior research training or experience, so each team was paired with one Project Staff member, called a **CBPR Liaison**, who provided intensive one-on-one technical assistance. CBPR Liaisons also developed and delivered training modules for the whole group.

- Even for a CBPR approach, this Project required an unexpectedly high investment of time, energy and resources by both CBPR Liaisons and Field Researchers to execute each of the five research projects within a short nine-month timeframe.
 - ✓ Build in an ample timeline and budget for intensive capacity-building efforts that meet community partners where they are, and can flex around unexpected challenges.
 - ✓ Allocate sufficient funding for community partners’ participation, including staff time, meaningful and appropriate remuneration for their research participants (to cover child care, transportation, etc.), equipment, and language access-related

costs. **Appendix L** details additional considerations for “mainstream” organizations on budgeting for the culturally-specific work.

- ✓ Not all communities, nor all community members place value on the same things. Learn what is useful and meaningful to a particular community or group of community members, and build incentives from there.
 - ✓ Anticipate that there will be few extant resources to draw on because this approach is relatively novel. Almost all of the capacity-building materials utilized throughout the SCA Project were created from scratch.
 - ✓ Skills-building trainings need to be digestible, interactive, connected to practice, iterative and incremental, language-accessible, and delivered according to community partners’ preferred learning styles. This may mean in-person meetings for partners who are unfamiliar or uncomfortable with technology such as webinars, for example.
 - ✓ Trainings require ongoing support or technical assistance from culturally-responsive external research partners who understand (or will learn) the community partners’ cultural context.
- Pairing CBPR with qualitative research methods is often critical for conveying rich meaning and for surfacing community wisdom, as well as for preserving the integrity of survivors’ voices and narratives. Both are also often inextricably tied to skills and knowledge intrinsic to many culturally-specific communities. A CBPR approach in which community partners are also the lead researchers produces valuable knowledge, builds leadership and enhances relationships, and positions culturally-specific communities to leverage shifts in policy and access to resources.
 - ✓ External research partners should be skilled in CBPR or similar approaches, and qualitative methodologies.
 - The capacity-building process was an intentional platform for bi-directional learning between the CBPR Liaisons and the Field Researchers, taking a liberatory education approach. The knowledge and skills that each partner brought to the table – whether acquired via formal education, practice, or lived experience – were regarded as valuable resources to be shared on equal footing.
 - ✓ Use learning approaches that seek to spark cognition, not transfer information.
 - ✓ Orient external research partners towards deconstructing their notions of “professionalization” (including jargon) and the academia-centric nature of mainstream research, so they can present and train on research concepts clearly, and connect them with meaningful applications.
 - ✓ External research partners need to translate research concepts and jargon into language that is accessible to community partners and survivors, but also confer that specialized knowledge to the community so that they can have confidence in the credibility and validity of their work.

Lessons Learned: Survivor-Centered Advocacy

Bringing Margin to Center: Moving Beyond Trauma-Informed Survivor-Centered Advocacy

Survivor-centered advocacy is an old concept that is receiving renewed interest within the mainstream domestic violence field. The Project's findings about survivor-centered advocacy both strengthened conventional notions and offered new considerations within the context of marginalized culturally-specific communities. It also added new knowledge relevant to all communities.

- Moving from *service*-centered advocacy to survivor-centered advocacy. Survivor-centered advocacy must strengthen forms of support that are immediate, responsive, flexible and based in love, and, when possible, embody them. Embodying positive friendships and family systems and creating healthy organizational spaces can also mean replacing intake processes with “kitchen table” types of interactions, and replacing offices with spaces that “feel like” and “look like” the healthy community spaces we all want to build.
 - ✓ Program/project design and implementation must involve participants at every possible opportunity. Expand your thinking about where these opportunities exist – chances are you can create more, and the fact that you are the one creating those opportunities means you are in a position of privilege.
- Moving at each survivor's pace. Each survivor's experience is different; each survivor's journey is different. Survivor-centered advocacy requires listening, understanding, and moving out of the way.
 - ✓ Center people by centering relationships and relationship-building.
 - ✓ Be prepared for your level of self-awareness to be tested. No matter how culturally responsive you think you are, even if you are from the community, there is always more to learn.
- Using a “whole person” approach. Survivor-centered advocacy in marginalized culturally-specific communities infuse the notion of “whole person” with the experiences of intersectional identities – those impacted by colonization, war, migration, chronic poverty, racism, language inaccessibility, religious discrimination, immigration control, police brutality and other forms of oppression and conditions that shape each person's experiences and needs.
 - ✓ Center a racial justice and equity lens. Gender-based violence work cannot be done in a culturally responsive way without this lens framing all of the work that we do.

- Addressing the whole family/community. Culturally-specific notions of survivor-centered advocacy, or even the survivor, cannot just be rooted in the individual – without relationship, family or community. It acknowledges that even abusive relationships cannot be reduced to the element of violence. Many survivors from culturally-specific communities value and want to stay connected to their extended families and community, even those who may have committed harm.
- Recognizing historical and ongoing trauma as a surmountable barrier to help and healing. The experiences of colonization, war, migration, chronic poverty, racism, language inaccessibility, religious discrimination, immigration control, police brutality and other conditions that shape the experiences and needs of the whole person can also shape resistance to vulnerability and resistance to help-seeking among survivors of domestic violence.
- Understanding how mainstream pathways to safety can present dangers: The perils of 911. Given the pervasive experiences of violence and oppression in the lives of marginalized culturally-specific people, the remedies offered by mainstream domestic violence resources can be dangerous. Survivor-centered advocacy requires that alternative spaces, methods and approaches that acknowledge these experiences be built, supported and sustained.
 - ✓ Alternatives to mainstream and/or systems-based responses to domestic violence must be built, supported, centered and sustained.
- Recognizing armor as a strength. Survivor-centered advocacy recognizes that resistance is a common survival strategy.
 - ✓ Survivor-centered advocacy should provide support and healing that can safely allow for walls to lower, if and when the time is right.
- Seeing friends and family are sources of both support and pain. Survivor-centered advocacy must have a more nuanced understanding of how relationships with friends, family and communities are complicated and layered, and can be sources of both trauma and healing.
- Recognizing our interconnectedness as advocates/survivors as a strength. Rather than discouraging personal connection between advocate and survivors, survivor-centered advocacy in marginalized culturally-specific communities values these connections – survivors and practitioners often come from the same community, share culture and histories, speak common languages and might be friends or family – thus, relationships that are solely “professional” are not only unrealistic and unsustainable, but also undesirable.

Conclusion

Though CBPR is not new, it is practiced in different ways. The SCA Project utilized **CBPR** as a starting point from which to develop the design in order to push our work beyond “inclusion” or “engagement,” but instead, to actively dismantle the traditional notion of “expert,” by centering the community in every part of the design and implementation process. The ways in which this Project lifted up the expertise of community members and supported them as lead researchers were not only liberated, it was liberatory.

It should be noted that nothing in this report is intended to identify or provide a “model in a box” – that is, neither a “model” that can be replicated, nor a set of “standards” or prerequisites that a group or organization can “meet” or “check off” in order to consider themselves survivor-centered. By its very nature, survivor-centered advocacy is always changing, always adapting, and therefore, cannot be contained in a “model.” Rather, please consider our recommendations contained in this report as principles or guideposts, around which programs and services could be designed. In order to be considered survivor-centered, programs and services that get designed must also have baked into the way they fundamentally operate, survivor voice and leadership, as well as a continuous way to reassess their function and whether or not they are meeting the current needs of survivors in the community.

Finally, not everyone can do truly liberatory or survivor-centered work – whether someone from a culturally-specific community or someone working in the mainstream. This work requires individuals, groups and organizations with particular constitutions and cultures: of humility, flexibility, creativity, experimentation, humor, and much more. For those organizations and individuals in possession of this constitution, becoming (more) liberated and survivor-centered to the extent that is illuminated in this report means that all of us will need to do things differently, and make tough choices. It means that resources will need to be allocated differently, and that programs and services that are not working, do not feel relevant, or that survivors do not really want will have to evolve. Despite these challenges, we are guided by the belief that centering those most impacted in everything we do ultimately benefits and transforms us all.

“

Dominator culture has tried to keep us all afraid, to make us choose safety instead of diversity. Moving through that fear, finding out what connects us, reveling in our differences; this is the process that brings us closer, that gives us a world of shared values, of meaningful community.

bell hooks



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Community-Based Participatory Research (CBPR) Principles and Agreements

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 and Agreements reflect this foundation, as well as the discussion we had together at Convening 1 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.

* **Community-Based Participatory Research (CBPR)** is described as *“inquiry with the participation of those affected by an issue for the purpose of education and action for effecting change.”*

Green LW, George MA, Daniel M, et al. Study of Participatory Research in Health Promotion: Review and Recommendations for the Development of Participatory Research in Health Promotion in Canada. Vancouver, British Columbia: Royal Society of Canada; 1995:4.

The Project was conceived of in four phases, as a “transformative journey of co-learning to build greater shared understanding across the domestic violence field of the meaning and means of practicing “survivor-centered advocacy” via community-driven participatory action research.” Using the framework of “research justice,” the Project integrated participatory co-creation at all phases of the project design.

SCA Project Phases, Activities, and Outputs

Project Phase, (Timeline) & Overview	Activities	Outputs
Pre-Project Phase (7/15 – 9/15)	<ul style="list-style-type: none"> ▪ Literature Review²¹ ▪ Key Informant Interviews 	<ul style="list-style-type: none"> ▪ Preliminary Report ▪ Project Proposal
Phase 1: Design (2/16 – 7/16) <i>Project planning & design; recruitment and convening of Thought Partners</i>	<ul style="list-style-type: none"> ▪ Design Team & Evaluation Team assembled ▪ Convening 1 held in Berkeley, CA (6/8-6/10/16) (English, Spanish, ASL) ▪ Training 1: <i>Introduction to Community-Based Participatory Research (CBPR)</i> ▪ Facilitated group process for brainstorming research projects 	<ul style="list-style-type: none"> ▪ Finalized project design ▪ Completed data collection on “Who are Survivors?” and “What is our relationship to research?” (pre/baseline) ▪ Preliminary data collection on “What is SCA?” ▪ Draft <i>CBPR Principles & Agreements</i> ▪ Potential Field Researchers complete preliminary research plan ▪ Evaluation plan created ▪ Convening 1 evaluation completed



²¹ The literature review and Field Research Workbook will be made publicly available as separate documents at a later date.

Project Phase, (Timeline) & Overview	Activities	Outputs
<p>Phase 2: Research (8/16 – 3/17)</p> <p><i>Field Research teams submit proposals and implement research projects</i></p>	<ul style="list-style-type: none"> ▪ Training 2 (9/7/16): <i>Storytelling and Interviews</i> (In-Person; English & Spanish) ▪ Trainings 3 & 4 (9/14/16): <i>Research Ethics and Focus Groups</i> (Webinars; English, English captioning & Spanish subtitling) ▪ Training 5 (2/27/17): <i>Presenting Research Findings</i> (Webinar; English, Spanish, ASL, and English/Spanish captioning & subtitling) ▪ Potential Field Researchers submit research proposal ▪ CBPR Liaisons work with Field Research teams 	<ul style="list-style-type: none"> ▪ Final <i>CBPR Principles & Agreements</i> adopted (Appendix A) ▪ Five Field Research teams selected ▪ Field Research teams refine and implement research plan, including data collection and analysis ▪ Production of English-Spanish <i>Field Research Workbook</i> with resources for capacity building ▪ Completion of English-Spanish Glossary of Research Terms (Appendix H) ▪ Field Research teams identify preliminary findings and draft Convening 2 presentation ▪ Training evaluation components completed ▪ Field Research capacity-building evaluation components completed (pre)
<p>Phase 3: Sense-Making (3/17)</p> <p><i>Participants share findings, engage in collective analysis & discuss next steps</i></p>	<ul style="list-style-type: none"> ▪ Convening 2 held in Emeryville, CA (3/19-3/20/17) (English, Spanish, ASL) 	<ul style="list-style-type: none"> ▪ Field Research team presentations on research process & preliminary findings ▪ Completed data collection on “What is our relationship to research?” (post) and “What is SCA?” (final) ▪ Collective analysis and sense-making of all data collected on “What is SCA?” ▪ Discussion about next steps ▪ Convening 2 evaluation completed ▪ Field Researcher capacity-building evaluation components completed (post)

Project Phase, (Timeline) & Overview	Activities	Outputs
<p>Phase 4: Synthesis (3/17-6/17)</p> <p><i>SCA Project findings are reviewed by all participants and synthesized into a final report</i></p>	<ul style="list-style-type: none"> ▪ Synthesis of project activities, evaluation components, and contributions to the field ▪ Collaboration with community partners on drafting the final report 	<ul style="list-style-type: none"> ▪ SCA Team Post-Project evaluation component completed ▪ Evaluation report created (Appendix F) ▪ Final report submitted to BSAV ▪ Dissemination of final report to all Thought Partners and selected external stakeholders

List of Project Participants

	Name	Affiliation
1	Aracelia Aguilar	DeafHope
2	Maria Carrillo	Mujeres Unidas y Activas
3	Harmit Cheema	Sikh Family Center
4	Juana Flores	Mujeres Unidas y Activas
5	Susan Ghanbarpour	Asian Pacific Institute on Gender-Based Violence
6	Irene Girgis	Asian Women’s Shelter
7	Amber Hodson	DeafHope
8	Tara Holcomb	DeafHope
9	Maria Jimenez	Mujeres Unidas y Activas
10	Mallika Kaur	Sikh Family Center
11	Mimi Kim	Creative Interventions
12	Lesli Irene LeGras	Coalition for Responsible Community Development
13	Beckie Masaki	Asian Pacific Institute on Gender-Based Violence
14	Carolina Morales	No affiliation
15	Kao “Tang” Ying Moua	Center for the Pacific Asian Family
16	Nuri Nusrat	Impact Justice
17	Ada Palotai	Asian Pacific Institute on Gender-Based Violence
18	Orchid Pusey	Asian Women’s Shelter
19	Riffat J. Rahman	South Asian Network
20	Alvina Rosales	Children’s Hospital Los Angeles
21	Wendy Schlater	Avellaka Program, La Jolla Band of Luiseno Indians
22	Hyejin Shim	Asian Women’s Shelter & KACEDA
23	Liz Suk	Core Align

Field Research Project Descriptions and Summaries

Map of Field Research Teams in California



The five Field Research teams were widely diverse in terms of community represented, primary language, research questions, research method, number and type of research participants, and experience level of Field Researchers.

Four of the five projects were situated in the San Francisco Bay Area, but two of those projects recruited participants from outside of the Bay Area. One of the projects was in San Diego County.

Table 1: Overview of Five Field Research Projects

Field Research Project Team and Location	Avellaka La Jolla Reservation in San Diego	DeafHope Oakland	KACEDA/QYUL Oakland	Mujeres Unidas y Activas (MUA) San Francisco & Oakland	Sikh Family Center Bay Area
Primary Community of Team	La Jolla Band of Luiseño Indians	Deaf and Hard of Hearing	Korean American	Latinx	Sikh American
Scope of Research	La Jolla Reservation & surrounding tribes	Bay Area	National	Bay Area	Bay Area

Field Research Project Team and Location	Avellaka La Jolla Reservation in San Diego	DeafHope Oakland	KACEDA/QYUL Oakland	Mujeres Unidas y Activas (MUA) San Francisco & Oakland	Sikh Family Center Bay Area
Research Method	Focus Group	Interviews (in-person and video phone)	Surveys (online); focus group	Storytelling circle & focus group	Focus groups & interviews (in-person)
Prior Research Experience of Field Researchers	None	None to very limited	Very limited	None	Moderate
Primary Participant Characteristics	LGBTQ/2Spirit from La Jolla Band or surrounding tribes	Deaf survivors of DV	LGBTQ Korean American	Latina survivors of DV – at least 1 year at MUA, used mental health services	Sikh women survivors of DV, and/or community members who support DV survivors (through SFC or not)
Number of Participants	4	8	155	8	19

Figure 2: Photo of Participants at Convening 2





Avellaka Research Project of the La Jolla Band of Luiseño Indians *Rainbow of Truth*

Field Researcher: Wendy Schlater, Program Director of Avellaka
Research Liaison: Alvina Rosales

Rainbow of Truth is a community-based participatory research (CBPR) project uplifting the experiences of LGBTQ/2Spirit people who are part of the La Jolla band of Luiseño Indians in San Diego County.

Background

Avellaka is a domestic violence program which works closely with the La Jolla Native Women’s Advisory Committee (NWAC). The mission, which resonates with survivor centeredness, is to educate and organize for social change upholding the Tribe’s authority as a sovereign Indian nation to protect its women citizens and create the laws, policies, protocols and services



addressing violence against Native women crimes on the Reservation.

San Diego County has the highest number of federally recognized tribes. For La Jolla people, Violence Against Women Act (VAWA) protections have been recently written into the Tribal law or code. But protections for Native LGBTQ/2Spirit people have not. In fact, out of 567 federally recognized tribes, only 11 recognized Native LGBTQ/2Spirit marriages in their Tribal codes.

Historical and Cultural Factors.

Traditionally, in Native American culture, Native LGBTQ/2Spirit people were recognized and respected. Indigenous legends share examples of holding safe space, honor and respect within indigenous societies, clans, and Moieties. Within cultural traditions, it was understood and often embraced that those with varying sexual orientations and/or gender expressions occupied a social and spiritual position somewhere in between “male and female.” Communities were not preoccupied with binary views of gender. European explorers and missionaries brought with them stigmatizing and condemning views from European culture, imposing them on Native American communities.

Research Purpose

Given traditional acceptance and respect for all life and for Native LGBTQ/2Spirit life, in particular, this research aims to reclaim safety and security for Native LGBTQ/2Spirit people by raising awareness, intervention, prevention and the importance of understanding the incredible effects of colonization that has disrupted our cultural customs and traditions that as Native people, respects all life. Violence is not traditional.

Research Questions.

- (1) What was your experience coming out?
- (2) How did you feel safe coming out?
- (3) What would have made your coming out a more positive and safe experience?

Methods

Focus group. 4 participants.

Research Justice

Very little research on Native American/Indian people in the U.S. is carried out by Native America/Indian people. Due to a long history of colonial research practices, Avellaka considers an important part of their research is to make sure that all collaborators outside of tribal communities are introduced and informed of their history and their uniqueness as a culture and a people.



Project Staff and Research Liaison were all invited to take part in an event, Return to the Ocean, held in Oceanside, CA as an introduction to the La Jolla people as well as an opportunity for the La Jolla people to get familiar and build trust with their new collaborative partners.

Participants

Avellaka recruited 12 Native LGBTQ/2Spirit people to participate in the focus group. The initial recruits were enthusiastic. However, due to multiple factors including a series of deaths in the community spanning from August to November 2016, the final number of participants reduced

to 4 individuals from 3 related tribal groups, two participants who identify as gay men, one who identifies as a woman and one participant who identifies as gender non-conforming.

Table 1: Focus Group Demographics (n=4)

	n	%
Gender		
Female	1	25
Male	2	50
Gender non-conforming	1	25
Sexual Orientation		
Native LGBTQ/2Spirit	4	100
Heterosexual	0	0
Relationship to Reservation		
Left to come out	4	100
Returned	4	100

Analysis

The focus group was recorded and professionally transcribed. The Research Liaison, Alvina Rosales, shared technical assistance on conducting focus groups and analyzing focus group results. Using thematic analysis, both Field Researcher and Research Liaison reviewed the transcripts. These researchers used qualitative research analysis methods including consideration of their own personal experience in relationship to the research; memoing to record thoughts, feelings and reflections; comparison of their interpretations; and, finally, reaching saturation, that is, analyzing results until they were satisfied that any further analysis would not yield additional information.

Themes/Findings.

Staying on the reservation felt unsafe.

"You pretty much have to move away to be yourself."

This quote from Green²² captured the conditions that each respondent faced as they made their choice to move away from the reservation. All left the reservation.

■ ■ ■ ■ ■

²² To keep confidentiality, focus group participants decided to choose colors as pseudonyms.

Leaving the reservation to “come out” is not safe either.

“I moved as far away as possible from San Diego to do the Gay thing. I was in New York because I had a feeling [coming out in the tribe] it was not going to be good, I went through that white coming out process. There was no ‘Indian way’ to come out.”

As Red states, participants shared that they felt no choice but to follow the “white” pathway to coming out. To them, the “white way of coming out” included “unwanted sexual experiences, drugs, circuit parties, isolation, depression and suicide attempts.”

Finding Two Spirit communities was a pathway to safety.

Despite the need to move away, all participants found their way back to Two Spirit communities at least in urban settings as they got older and found a way to return to their people.

Returning to the reservation and making a contribution.

All participants voiced a desire to return to the reservation and “come home.” They were ready to make a positive contribution and reconnect with cultural traditions regarding Native LGBTQ/Two Spirit people. They all took advantage of the educational system as a buffer and a way to balance their lives. They had all also returned to a positive leadership position including Tribal Leader, Gaming Commissioner, educator and small business owner. They all viewed their participation in Rainbow of Truth as an example of ways that they could give back to the community and made plans to continue meeting beyond the scope of this research project.

Limitations and Responses

Despite the small size of the focus group, the participants felt that it was a solid and positive step towards further solidarity and community activism. Understanding the lack of research on LGBTQ/Two Spirit people, in general, and in tribal communities of San Diego County, in particular, led to a desire to continue building upon the group’s research success.

Possible Next Steps

Wendy Schlater of Avellaka connected with Hyejin Shim, Field Researcher from the KACEDA/QYUL project, in order to get a copy of the survey they developed for the Korean American LGBTQ community. Next steps may include a search for additional funding for a national survey for Native LGBTQ/Two Spirit people.

Rainbow of truth

RESEARCH STUDY

Background

AVELIYAKA PROGRAM for SOCIAL JUSTICE

- ESTABLISHED IN 2005
- SOVEREIGNTY & FOUNDATION



2% INDIGENOUS PEOPLE IN N.A. 2050

- DECLINE of POPULATIONS
- GENOCIDE
 - DISEASE
 - NATIVE LIFE DISRUPTION



NO PROTECTION FOR NATIVE LGBT-2SPIRIT PEOPLE
NEED FOR TRIBAL SPECIFIC PROGRAMS/SUPPORT

RAISE AWARENESS OF EFFECTS OF COLONIZATION FOR PREVENTION & INTERVENTION

EXERCISE TRIBAL JURISDICTION

GOVERN BY OUR LEGENDS RECONNECT w/ THEM

OUR RESEARCH findings



"MOVE AWAY TO BE YOURSELF"

NO "INDIAN WAY" TO COME OUT

FELT UNSAFE AT RESERVATION

- CHRISTIAN VIEWS IMPOSED
- CONTINUED SEXUAL VICTIMIZATION

DO THE STATUS QVO

- TO HAVE CHILDREN
- BE PROTECTED
- HAVE MEN ON THE SIDE

WANT TO HELP PEOPLE IN THE RESERVATION

VALUABLE MEMBERS THAT CAN HELP OTHERS COME OUT

ALL LIFE WAS SAFE PRE COLONIZATION

LIFE- UNSAFE POST COLONIZATION

RECONNECTING CULTURAL REVITALIZATION

WORK WILL CONTINUE COMMUNITY HAS ORGANIZED & WILL CONTINUE

Drawn By: Claudia Lopez | On The Right Mind 2017



DeafHope

Safety and Support for Deaf Survivors of Violence

Field Researchers: Aracelia Aguilar, Amber Hodson and Tara Holcomb, Empowerment Directors

Research Liaison: Mimi Kim and Susan Ghanbarpour

Safety and Support for Deaf Survivors of Violence is a community-based participatory research project (CBPR) documenting the experiences of Deaf survivors of domestic and sexual violence who have sought support from formal and informal resources.

Background

DeafHope's mission is to end domestic and sexual violence in Deaf communities through empowerment, education and services. Because American Sign Language (ASL) is a gestural/visual language, much of the information related to the experiences of Deaf people and to this project, more specifically, are available in ASL. Please refer to YouTube links for more detailed information in ASL.

See DeafHope Mission at <https://www.youtube.com/watch?v=sXk9milUZWo>

See DeafHope Philosophy at <https://www.youtube.com/watch?v=6z3I-rBYdoU>

Historical and Cultural Factors

Deaf survivors experience domestic and sexual violence at rates significantly higher than non-Deaf populations in the U.S. However, little is known about their experience of violence nor of their use of support services. **Safety and Support for Deaf Survivors of Violence** is one of the few studies of Deaf survivors of gender-based violence and may be the only study conducted by Deaf researchers.

Research Purpose

The purpose of this community-based participatory research is to gain knowledge about Deaf survivor experiences of violence from the perspective of Deaf researchers.

Research Questions

- (1) Where/Who do Deaf, Deaf-Blind, Hard of Hearing, and Deaf/Disabled survivors of domestic and sexual violence go to for support?
- (2) How do Deaf, Deaf-Blind, Hard of Hearing, and Deaf/Disabled survivors of domestic and sexual violence measure their sense of safety and success after seeking support? What's working, what's not?

- (3) How often do Deaf, Deaf-Blind, Hard of Hearing, and Deaf/Disabled survivors of domestic and sexual violence seek support from service providers, especially those from "traditional" mainstream nonprofit organizations, including DeafHope? If they do seek support from nonprofit service providers, what are their experiences like?
- (4) If Deaf, Deaf-Blind, Hard of Hearing, and Deaf/Disabled survivors of domestic and sexual violence don't seek support from nonprofit service providers, where do they go and what are their experiences like?

Methods

In-person interviews and video phone interviews.

Research Justice

The state of research by and for the Deaf community is almost non-existent. There is currently very little research on Deaf survivors of domestic and sexual violence. There is very little research of any kind actually conducted by Deaf researchers. Because American Sign Language (ASL) is a gestural/verbal language and not sound/print-based, data was collected visually in ASL via in-person interviews and videotaping. Furthermore, data analysis was carried out through thematic coding of videotaped interviews that were not translated into written English. Collaborative research partners as well as public audiences for research results must understand and respect the specific language conditions for Deaf participants and researchers. This means that research conventions for data collection, analysis and reporting that rely upon verbal or written English can be oppressive. A language justice framework must take into account the primacy of American Sign Language (ASL).

Participants

Interviews were conducted with a total of 8 survivors of domestic and sexual violence.

Table 1: Interviewee Demographics (n=8)

	n	%
Identified as		
Deaf	6	75.0
Blind-Deaf	2	25.0
Gender		
Female	7	87.5
Male	1	12.5
Sexual orientation		
LGBTQ	3	37.5
Heterosexual	5	62.5
Race		
Black	3	37.5
Latinx	1	12.5
White	4	50.0

Analysis

All interviews were either in-person and video-taped or were video phone calls. All were conducted in American Sign Language (ASL). The three Field Researchers, Aracelia Aguilar, Amber Hodson and Tara Holcomb, reviewed each of the videos multiple times. After receiving a training in qualitative analysis and thematic coding from Research Liaisons, the Field Researchers coded the videotaped interviews, using a written coding template for establishing codes and linking them to time stamps on the videotapes. Review and comparison by three researchers also improved inter-rater reliability.

Themes/Findings

See this link for summary of the project and findings in ASL and English voice-over.

https://youtu.be/FAhv_qsoz14

Survivors identified an average of 7 separate experiences of seeking support and safety.

Positive experiences of support tended to be provided by friends.

Although support from friends was not uniformly positive, the type of positive support that friends offered were “unconditional support,” “no judgment,” and valued resources such as childcare and information about services.

Support by Deaf domestic violence agencies.

Participants shared that they had also used formal support services within the Deaf community. While Deaf Unity, Deaf Overcoming Violence through Empowerment, Abused Deaf Women’s Advocacy Services, Deaf Survivor Advocates for Empowerment and DeafHope represent Deaf specific services available nationally, the participants did not specifically share which resource they used.

Experience of mainstream domestic violence agencies.

It felt like they were talking from a script. She was not talking from her heart. It was patronizing.

- Research participant recalling response from mainstream program

For one Black survivor, the response from a white mainstream advocate amounted to abuse:

The cultural response was like a metal brand that burns, you feel it.

Support from mainstream domestic violence services was mixed. The quotes above revealed the sense of disconnect and, in some cases, violation that Deaf survivors participating in the study experienced. Based upon the research, DeafHope summarized that “communication barriers, patronizing attitudes and cultural ignorance” were pervasive.

Police response was almost completely negative.

In all cases, the police did not provide ASL interpretation but instead relied on ineffective and harmful communication methods that included using family members or the hearing abuser to interpret. Participants reported feeling judged and patronized. One participants said that the police told her,

Are you sure you want him out? You will let him back. Women always let them come back.

- Research participant recalling response from the police

Limitations

Since ASL is not a written language, each person reviewing the data interpreted the participant's tone, body language and non-manual markers. This limitation was mitigated by the availability of three comparative perspectives and time spent reaching agreement regarding interpretations and accompanying codes. In addition, the Field Researchers were, in some cases, familiar with a participant. As an advocate, they may have received more detailed information and perhaps different information than conveyed in the interview. As Field Researchers, they had to filter out the additional knowledge in order to base their analysis more narrowly on the evidence provided through the data collection process.

Possible Next Steps

DeafHope will produce American Sign Language (ASL) video report of the research findings specifically for the Deaf community. This research serves as a pilot for further public research that will expand the scope of outreach and services. DeafHope will incorporate findings into trainings and consultation, including work as a national technical assistance provider for OVW.





**Korean American Coalition to End Domestic Abuse (KACEDA)
QYUL: Queer and Trans Workgroup**
*Survey on Family and Intimate Partner Violence in the Queer
and Transgender Korean American Community*

Field Researchers: Hyejin Shim, Coordinator of Queer and Trans Services at Asian Women’s Shelter and member of Korean American Coalition to End Domestic Abuse (KACEDA)

Research Liaison: Orchid Pusey

Queer and Transgender Korean American Survey on Family and Intimate Partner Violence in Our Community is a community-based participatory research (CBPR) project surveying LGBTQ identified Korean Americans nationally to ask about their experience of many forms of violence including family and intimate partner violence.

Background

KACEDA is a volunteer-based organization started in 1997 in the San Francisco Bay Area to address domestic violence in the Korean American community. QYUL²³ is the Queer and Trans workgroup within KACEDA that launched the survey project.



²³ QYUL is an acronym for Queer and Trans Koreans Yearning for Unity and Liberation; it is also a homonym for the Korean word for tangerine – hence, the logo. See <http://www.kaceda.org/our-work/qyul-queertrans-workgroup/> for more information.

Historical and Cultural Factors

Korean American survivors first started domestic violence services in the U.S. as early as 1979 in Takoma, Washington. Since then, a number of Korean American anti-violence organizations started in Chicago, New York, Los Angeles and the Bay Area, with the organizations in Chicago and KACEDA with ties to pro-democracy movements in Korea and social justice movements in the U.S. Sexism, homophobia and transphobia remain anchors within much of Korean and Korean American society with homophobic attitudes and activism aggressively promoted by sectors of the Korean and Korean American communities, particularly those rooted in conservative Christian institutions. QYUL developed as a Queer and Trans workgroup within KACEDA is organizing to bring more specific attention to the lives, experiences and struggles of LGBTQ Korean survivors of violence.

Research Purpose

For LGBTQ Koreans in the U.S., the effects of family violence, intimate partner violence and sexual violence are deeply interconnected with those of homophobia, transphobia and racism. However, while the traumatic impacts of these intersections are deeply felt within the community, there is no available data for better understanding the needs of LGBTQ Korean survivors of violence.

Research Questions

- (1) What forms of violence are queer and transgender Koreans experiencing (directly or as secondary victims)?
- (2) What types of resources are queer and transgender Koreans utilizing when violence happens? What are those experiences like?
- (3) What types of resources do queer and transgender Korean, particularly survivors want (but do not have) addressing violence?

Methods

Survey (online, Survey Monkey) quantitative and qualitative (short answer); focus group.

Research Justice/Cultural Rigor

This is the first research study of any kind with Korean or Korean American LGBTQ community members around the issue of family and intimate partner violence. The distribution of the research study served both as recruitment for participants/respondents and also as a social media campaign to highlight both the visibility of LGBTQ people within the Korean American community and the importance of the issue of violence in their lives. Because the Field

Researcher and KACEDA/QYUL members are members of the LGBTQ Korean American community, they were able to ask questions that were both relevant to the community and were worded in a way that would be culturally appropriate. They were also familiar with LGBTQ networks and were able to quickly create a thorough dissemination strategy. Finally, the Field Researcher and KACEDA/QYUL members were known and trusted or were familiar enough to key community members to legitimize the research effort as one that was initiated by and important to the community. Within one week of initiation, over 100 people responded to the survey. By the time of Convening 2, 155 people had responded.

Participants

Survey respondents self-identified as LGBTQ Korean Americans.

Table 1: Survey Respondent Demographics (n=155)

	n	%		n	%
Gender identity (n=147)			Generation (n=134)		
Transgender woman	3	2.22	1 st	5	3.73
Transgender man	11	8.15	1.5	40	29.85
Gender queer/non-binary	39	28.89	2 nd	70	52.24
Cisgender woman	73	54.07	3 rd or more	6	4.48
Cisgender man	11	7.41	Adoptee	13	9.70
Other	10	7.41	Age (n = 135)		
Sexual orientation (n=213)			18-24	40	29.62
Gay	24	17.78	25-30	42	31.11
Lesbian	27	20	31-40	40	29.62
Bisexual	35	25.93	41-50	11	8.14
Queer	90	66.67	50-62	2	1.48
Asexual	9	6.67			
Pansexual	20	14.81			
Other	8	5.93			

Focus group respondents self-identified as LGBTQ Korean Americans and consisted largely of KACEDA/QYUL members. KACEDA/QYUL members are community representatives as well as organizers of the research project. However, research data has not been collected from this group of organizers. The focus group was seen as a good opportunity to gather information from KACEDA/QYUL members and to use this as the initial step for a follow-up series of focus groups to triangulate with the survey data.

Analysis

The survey was both quantitative and qualitative. Quantitative data was analyzed using excel. Qualitative data was compiled and thematically coded. Focus group results were recorded and professionally transcribed. The transcriptions were thematically coded by the Field Researcher and the Research Liaison.

Findings

Depression, Anxiety and Suicidality

Korean American LGBTQ survey respondents have experienced very high levels of depression, anxiety and suicidal thoughts and actions:

- 67% have experienced depression in the past 1 year
- 73% have experienced anxiety in the past 1 year
- 37% have had serious suicidal urges in the past 1 year
- 23% have attempted suicide

Family Violence, Domestic Violence and Sexual Violence

Respondents have experienced significant levels of family, domestic, and sexual violence:

- Approximately 60% know another queer/trans Korean who is a survivor of sexual or domestic violence

Respondents witnessed abuse between family members as a child (85% emotional abuse; 88% verbal abuse; 73% physical abuse), and also themselves experienced abuse as children:

- 71% report at least one incident of physical abuse
- 25% report at least one incident of sexual violence

It's incredibly important to tell our community what abuse looks like. Growing up, I was told that so many of the problematic things in my family were just "Korean parenting." That's just not true.

- Survey respondent

Coming Out and Violence

Korean American LGBTQ community members face violence or the threat of violence for "coming out" as queer or trans. Survey respondents had a relatively low rate of "coming out":

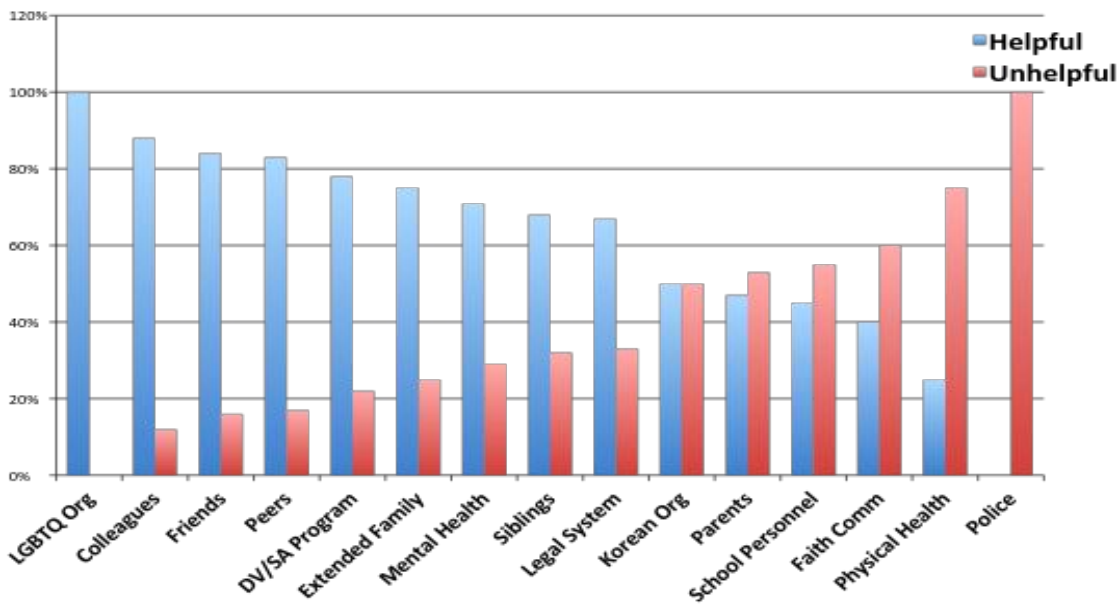
- Only 13% are out as queer or trans to supportive parents

- 40% of queer respondents and 54% of trans respondents are not out to their parents
- 67% have experienced violence in coming out as queer
- 70% of trans respondents have experienced violence in coming out as trans

Help Seeking

Of all the survey respondents who are Korean American LGBTQ survivors of intimate partner violence, only 50% sought any support. Of those who sought support, most confided in friends (31%), in contrast to family members (siblings 9%; parents 7%). The most popular formal service they accessed was mental health providers (27%), whereas very few sought out support from either domestic violence/ sexual assault programs (4%) or LGBTQ programs (3%).

Of those IPV survivors who sought support, the following resources were helpful or unhelpful. LGBTQ resources were helpful to everyone who sought assistance from them. The police were unhelpful to everyone who sought assistance from them.



I am afraid of sharing personal details with fellow queer/trans Koreans because I worry about word getting out, judgments, and misinformation since we are a small-medium sized group where a lot of us know each other on various levels. It's probably my own trust issues, but I wonder if there's an easy way to ask for confidentiality and have folks really be accountable to that?

- Survey respondent

Community Needs

Over 90% of Korean LGBTQ survey respondents requested:

- Information on what abuse looks like
- Information on how to support someone who's being abused
- Information about healthy relationships
- Mental health resources

Focus Group results mirrored and deepened survey information

The focus group responses were similar to the responses for overall survey respondents and who they would go to for help-seeking.

Focus group respondents said that survivor-centered advocacy for Korean LGBTQ communities:

... involves community trust around domestic violence and sexual assault, Korean and LGBTQ issues

... is holistic and takes into account cultural, familial and intergenerational norms around violence

... names violence without pathologizing and condemning anyone involved

... addresses and gently names harmful dynamics without using terms like "domestic violence" unless the survivor names it first

... moves at the pace of the survivor without retaliating at them for not leaving

... understands that involving police or families of origin are not even considered options for queer and trans Korean survivors

Limitations and Responses

The Queer and Transgender Korean American Survey on Family and Intimate Partner Violence in Our Community gathered 155 responses, a remarkably high number given the presumed small total population in the U.S. and the limited resources available to this field research project. However, it is a convenience sample and is relatively small in number for statistical analysis. The focus group also relied upon the research organizers as participants, an unconventional research practice but one which made sense given the close match between survey respondents and the organizers of the research project. The focus group data was used to triangulate the survey data and offer more qualitative context to survey results. It was also a first step towards the plan for more focus groups, the results of which will increase diverse representation.

Possible Next Steps

KACEDA/QYUL plans to use this first set of responses to the survey and this first focus group to be the foundation for further research. Results from the survey will be further analyzed using chi-squared tests where feasible. KACEDA/QYUL plans to publish a research report for advocacy with practitioners, policymakers, funders and the communities represented in the research. For us, one of the most important messages to Korean LGBTQ communities came from one of our survey respondents:

We exist. You are not alone.



Drawn by: Claudia Lopez | On The Right Mind 2017



Mujeres Unidas y Activas (MUA)

The Impact of Offering Various Ways of Healing, Caring for and Empowering the Membership

Field Researchers: Juana Flores, Co-Director; Maria Jimenez, Support Services Program Director; and Maria Carrillo, East Bay Domestic Violence Program Coordinator

Research Liaison: Susan Ghanbarpour

The Impact of Offering Various Ways of Healing, Caring for and Empowering the Membership is a community-based participatory research project exploring the impact of integrating mental health services into a Latina domestic violence program.

Background

Mujeres Unidas y Activas (MUA) was founded in 1989 by two Latina immigrants, Maria Olea and Clara Luz Navarro, who were hired as interviewers by a research team at San Francisco State University to help them learn about the conditions faced by women in their community. After documenting Latina immigrants' challenges and strengths, they transformed their learnings into action by forming MUA with a small group of participants from the study. Thus, MUA was born out of research that was translated into action by the research participants, themselves. MUA is a grassroots organization of Latina immigrant women whose identity is reflected in its language, organizational culture, politics, and values. MUA has a double mission of promoting personal transformation, and building community power for social and economic justice.

More information about MUA can be found in English at <http://mujeresunidas.net/> and in Spanish at <http://mujeresunidas.net/es/>.

Historical and Cultural Factors

MUA's members are predominantly recently-arrived immigrant women from Mexico and Central and South America, whose first language is Spanish. 80% have dependent children aged thirteen and under, and their families often have mixed migratory status. The majority are low-income with limited access to resources. Many of MUA's members have fled violent or traumatic situations in their home countries, experienced difficult conditions during migration, and faced discrimination, oppression, and anti-immigrant policies in the US. At least 90% of MUA's members have experienced gender-based violence, whether in their own families in the form of sexual violence, child abuse, and incest; witnessing intergenerational patterns of domestic violence; or in their intimate relationships and communities. Yet many of MUA's members put up barriers against acknowledging or revealing these histories of gendered violence, despite suffering from their traumatic effects.



Research Purpose

The intent of this research is to learn about the impact of MUA’s mental health programs on the healing and empowerment of survivors of violence who have been members of MUA for at least a year.

Research Questions

For members who have taken part in MUA’s mental health programs:

- (1) What has changed for the members this year, and on what different levels have these changes occurred?
 - a. Personal; interpersonal; with family/children; community; political consciousness / activism
- (2) Why did these changes take place? What factors influenced these changes?
 - a. What role did MUA's services and programs have in these changes?
 - b. Which external factors played a role?
- (3) What were the paths? What were the obstacles or barriers faced by the members in meeting their goals while they sought the path they wanted?
 - a. What could MUA have done to help eliminate or reduce some of these barriers?
 - b. What is needed, beyond what MUA can do, to eliminate or reduce these barriers?

Methods

One story circle with 8 participants and one follow-up focus group with 6 of the same participants. The story circle guide had more open-ended questions and prompts, compared to

the semi-structured focus group guide, which used questions that were developed based on both the research questions and a preliminary analysis of the story circle data.

Research Justice

While MUA staff have been participants in research studies before, this is the first time they've led a research study and been in the researcher role. This is also one of the rare qualitative studies that they've been involved in, since usually they work with quantitative methods like their annual membership survey. The storytelling and focus group methods were particularly appealing to MUA because, in contrast to closed survey-type questions, these methods allow more depth. One MUA Field Researcher said,

"I wanted to show what was not measurable – it has a lot more weight than what's measurable. Numbers don't reflect the result I wanted. I wanted a substantial thing...For a woman who's changed her life, feels reborn, changed. She feels now she can help other people change their lives, heal from traumas. She feels safe. That piece was lost in the numbers. It's about dignity, going from a number to a whole person."

Because this is the first time MUA has done research, they were worried and a little embarrassed that they didn't have a clear idea what the project was going to look like at the beginning. Having a one-on-one Research Liaison and language access via interpreters and translated materials – as well as a lot of patience – was critical. But they became fascinated by the research process and how it differs from the other ways they engage with their members. For example, MUA's team has talked about how the transcripts are a tool they can come back to again and again, as information to help them strengthen their programs, or to give staff a sense of how their programs support their members. One MUA Field Researcher said, "Every time I look at [the transcripts], I learn more."

Participants

The participants were all Latina women, the overwhelming majority of whom identify as survivors of domestic violence. They have all been members of MUA for at least one year, and participated in MUA's mental health programs. They share many of the same characteristics described in the **Historical and Cultural Factors** section.

Analysis

The story circle and focus group were both audio recorded and professionally transcribed in Spanish (primary language of participants and Field Researchers). The transcripts were also

translated into English for review by the Research Liaison (a monolingual English speaker). The Research Liaison trained the Field Researchers to conduct qualitative analysis using thematic coding of the transcripts to code for themes and subthemes, and then engaging in an added level of synthesis and interpretation.

Themes/Findings

Moving past denial and recognizing one's true life

Another strong theme was about how participants might show up at MUA saying that their home life was normal or that they were ok. But after participating in the mental health programs, they realized they were in denial about the violence they experienced, and needed healing. This theme is exemplified by quotes from participants such as "I discovered things inside me that I thought were fine but in fact my life, my soul and my heart were damaged" and "It has helped me cast off these fetters and the message of thinking that it's normal."

"When I heal, you heal"

Several participants' statements support MUA's program model and approach to their dual mission, which is that members often need to undergo their own healing process before they're ready to participate in activities or political activism to help others:

I felt destroyed and torn to pieces. I would ask myself why people harm me. But now I've arrived here thanks to the therapy, counseling and trainings. They have helped me, as people say, to "take the bull by the horns and don't fall down," and to think that you can support other women, to pick up those people who have been destroyed and be able to lift them up.

This was related to the idea of turning difficult situations into opportunities to survive and grow:

I am standing up every morning and saying I have to stand up because I have a person that I'm going to support today. There is a person that I'm going to give what I experienced. There is a person that is expecting me.

Barriers to revealing and healing from abuse

This theme encompassed multiple subthemes, such as silence, judgment, and putting the welfare or comfort of others before her own. A related theme was the importance of maintaining confidentiality. One participant remarked on how she felt comfortable at MUA because she knew she wouldn't be judged or gossiped about: "No one will talk about me. No one will judge me. No one is going to point at me in the street because of what I said here." Another described needing support "to break the silence of keeping quiet, because this is a

silence that does a lot of harm; it has a very negative effect.” Some spoke of their role in the family: “I have found myself. I would give my daughters and my family love but I would not receive anything.” Many of these subthemes relate to the specific cultural context, for example, how women are expected to put their own needs last, after their family’s; or how the community tends to react to disclosing abuse.

Benefits of mental health programs for children

An unexpected theme was about how the positive impact of the mental health programs women participated in rippled out to their children. MUA’s programs include discussions about “discipline with love” - not acting out of anger with their children, but learning how to talk to them. Several members talked about how their children notice a change in their behavior. For example, one member spoke about a child who told her teacher, “I see you’re really sad – you should go to my grandmother’s group at MUA, she comes out of there really happy!”

Limitations and Responses

MUA was not able to fully complete their analysis of the focus group data in time for this report. This was largely due to the impact of the 2016 election, and the subsequent rapid, destabilizing changes in immigration and enforcement policies and practices. MUA has needed to re-prioritize their time and resources to respond to the enormous negative consequences of these events on their community. Another issue came up related to MUA’s strategic planning process. As part of that process, there was a change in the programs, which some of the members did not like. So some members said, “if you’re doing research in order to take away the mental health programs, we don’t want to participate!” The MUA team needed to clarify to them that this research was for a different purpose and the programs weren’t going away. Once they did that, their members had the clarity and trust to participate in the research.

Possible Next Steps

MUA is planning to share these findings with other staff to consider how to use this information to improve their programs. They would like to present them to the Board as part of their strategic planning process. They would also like to share these findings back with their members, allies, funders, and others in the field.

RESEARCH STUDY MUJERES UNIDAS Y ACTIVAS

MENTAL HEALTH WORK BASED ON OUR EXPERIENCES AS SURVIVORS

- MORE THAN 10 yrs.

NOT RECOGNIZING THAT THEY ARE EXPERIENCING VIOLENCE



AS EXAMPLES AS EQUALS SURVIVORS

GROUP GATHERINGS SOUL CLINICS



HEALING WORKSHOPS YOGA & SOMATIC CLASSES



90% HAS EXPERIENCED VIOLENCE

- IMMIGRANTS (3yrs) MAJORITY MEXICAN
- MOTHERS (0-13yrs) 3-5 KIDS
- MIXED IMMIGRANT STATUS
- LOW INCOME / WORKING WOMEN



DRAWN BY: CLAUDIA LOPEZ | ON THE RIGHT MIND



Sikh Family Center (SFC)

Strengthening Our Roots

Listening and Learning from Survivors and Supporters

Field Researchers: Mallika Kaur, Sikh Family Center Co-Founder and Board Chair; Harmit Cheema, Community Advocate (first part-time staff members) of Sikh Family Center

Research Liaison: Mimi Kim

Strengthening our Roots: Listening and Learning from Survivors and Supporters is a community-based participatory research project (CBPR) that excavates the feminist culture-change work being undertaken by Sikh Family Center (SFC) through focus groups and one-on-one storytelling.

Background

Sikh Family Center (SFC) is a grassroots community-based initiative to provide social services through an evidence-based and empowerment-oriented approach. SFC is based upon three principles: Principle 1: Resisting Gender and Cultural Essentialism; Principle 2: Learning from Our Community; and Principle 3: Community-wide Services and Empowerment. SFC was started in 2009 and partners with broad network of volunteers, faith-based institutions, nonprofit and government agencies within and outside the Sikh community, and across the U.S. This SCA research project builds upon the foundation of research that already characterizes the important evidence-based and empowerment-oriented focus of SFC.

Historical and Cultural Factors

The development of SFC since 2009, illustrates the propagation of a culture that neither apologizes for difference nor allows itself to be employed as an excuse for any form of oppression. While Sikhs' unique identities—turbans, long hair, beards—have become targets of discrimination and even hate since 9/11, Sikhs have created powerful civil rights organizations across North America. However, as the community remains focused on post 9/11 issues, intra-community problems and concerns often proliferate in shadows. There are few dedicated social services avenues and while there are many gurdwaras (Sikh congregation centers), there are few organized attempts to focus on promoting health and safety within the Sikh home and community while being cognizant of the cultural and linguistic context. SFC's aim is to continue developing culturally sensitive resources as well as to help build trust for mainstream local institutions where help is available.

Research Purpose

The focus groups and storytelling interviews aim to deepen knowledge generated by the Needs Assessment Survey of the Sikh American Community through qualitative data collection and analysis of Sikh community members.

Research Questions

- (1) What kinds of community-based interventions on family violence are attempted in the Sikh community currently?
- (2) How can such interventions be strengthened to the benefit of survivors and their families (especially since most of the survivors Sikh Family Center works with express an interest in alternate resolutions to intervention by police, courts with public proceedings, mainstream shelters, etc.)?

Methods

Focus groups (2); 3 individual storytelling sessions/interviews (45 minutes – 1 hour each). The groups and interviews were conducted bilingually, in English and Punjabi.

Research Justice/Cultural Rigor

SFC's initiation and development has been closely tied to community-based participatory research (CBPR). SFC strives to respond to documented needs, and practices using an evidence-based methodology. Recognizing how most national, regional, or statewide statistics do not disaggregate the Asian Pacific Islander data and thus do not provide data specific to the Sikh American community, SFC has continued to conduct its own needs assessment surveys for the past few years. SFC remains committed to the ethical use of statistics collected, including reading and utilizing them in context, and with an eye to providing future services. Research participants are considered as "co-creators" of the research and are told that an introduction to their research participation.

Participants

All participants identified as Sikh women. They included survivors of gender-based violence and/or community members who work formally or informally with survivors of violence. Focus groups and storytelling sessions/interviews were held in the Bay Area with respondents from across the Bay Area.

Analysis

Focus groups were held by a facilitator and note taker. They were not recorded. The data was recorded by hand by the note taker. The storytelling sessions/interviews were recorded and transcribed. The data from the notes and transcripts were compiled and reviewed by the two Field Researchers, one of whom has experience with quantitative and qualitative data analysis and provided guidance for qualitative analysis and thematic coding.

Themes/Findings

Theme 1: Family violence is at once hypervisible and invisible

Participants recognized that family/domestic violence, although viewed very differently in every community, does not discriminate against who becomes victim to it:

But then it happens to you and you realize that it doesn't even matter. You are vulnerable when you are in a situation that is toxic. It can happen to anybody.

[It is] a black cloud that rains upon each woman because it's culturally acceptable.

In the Sikh American community family/domestic violence comes in every shape, but is often overlooked as the norm, to the detriment of the person being harmed (victim) and the person doing the harm (abuser).

Theme 2: "Image" in the community determines many unhealthy responses

Sikh community survivors of domestic violence recalled the power of image and shame in their experiences of abuse.

I think the only shameful thing was that I actually hid it and I actually felt the shame and I shouldn't have. I should have been able to come out and say this is happening to me and that I need help. Or I need some sort of support, but I was so ashamed I couldn't do it. And I think that's the biggest problem. Our community has way too much shame, way too many labels.

For the victim-survivor, maintaining her social image, while feeling shame, often takes precedence over making safe choices. On the other hand, for community members, offering assistance or support may be hindered by the mere thought of what repercussions they may face by doing so.

Theme 3: Gurdwara (Sikh faith center) may not be able or willing to offer support

The first gurdwara in the U.S. was established in 1912 in Stockton, California. It served the then fledgling Sikh immigrant community in the Central Valley. Today, gurdwaras have multiplied throughout the state and country, but participants noted that when it comes to meeting specific social needs of the community and women, the gurdwaras may lack empathy, often lack resources, and have largely gained a reputation as being places of gossip, indulgent dining, and petty politics.

No support from gurdwaras. Whenever brought up – the tone will be to deny it, not recognize it, talk about it as a personal matter and should only be dealt with as a family issue. Not trained in supporting this area. They may show concern, but not actual action and no resources or guidance. Although there is other tabling and pamphlets distributed, there isn't any focus to have discussion about women's safety, etc.

Survivors of domestic violence recalled the refusal of the gurdwara to offer help.

When I went to gurdwara I ended up asking the bhai sahib (who sang kirtan there) 'If someone needs to stay, are you able to help if someone needs to stay the night?' He said that it was difficult. I pressed, 'Even if it was very serious, is there any way?' He was like, 'We don't allow anyone to stay more than one night, and it's for men only and not for women.' He didn't even ask me if I'm safe or something. Or what is the concern or do you need it for yourself or do you need it for somebody else? No. It's just indifference.

Theme 4: Individual interventions are often insufficient or unreliable

No one says anything. That is just how things are supposed to be.

Participants noted that counseling is generally considered as a taboo since couples are supposed to be “perfect” and counseling assumes that they are having problems.

Unfortunately, family response was also unsupportive.

And unfortunate as it is, even the parents, even the parents, and I'm not blaming them, but it's easy to give up that responsibility because they're older, they don't know how to deal with it, they don't want the social stigma. Whatever their reasons I think even parents have failed their children, big time.

One participant found support from friends who looked for help and found it:

My parents were not here right, so it was like they couldn't help or whatever and then I didn't have anybody here so I told one of my friends. My friend then did the google search and everything and she told me about [a South Asian domestic violence agency]. And that's where I got help.

Theme 5: We must pave the way forward together collectively as a community

Participants made several suggestions for the way forward in addressing family/domestic violence. They recognized the need for change at various levels and the participation of various stakeholders. Increasing awareness seemed to be a first step.

First of all, there needs to be an awareness. Second of all, most importantly, there needs to be an acceptance that this happens, it can happen anywhere. It happens in other communities as well.

Participants noted the importance of teaching the next generation that domestic violence is not acceptable.

We need to focus on girls who are growing up because we want them to know, but then we also want to focus on boys who are growing up because they should know how to treat a woman right. Like how does it become ok in somebody's mind that it is ok to hit the other person? Either which way, maybe it's a girl hitting a guy right or a guy hitting a girl – how does it become ok? I think somewhere the fabric of our community needs to change... you know this whole macho thing that oh you know 'We have a boy in our house' etcetera.

The gurdwara, though shown to be a non-supportive resource for survivors of domestic violence, was also seen as an important site for future social change work. Participants later learnt and discussed cases where gurdwaras had worked closely with SFC, forwarding victim-survivor's safety, and going the extra mile. Suggestions for future possible points of entry were shared:

Information should be presented or even passively shared as resources in the area. This is the first step of recognition. The gurdwara committees should serve as referral points so that it can at least become a referral (bullying, DV cases, etc.) Have 2-3 women on-site for talking (resources for: legal help, employment, food stamps, babysitters, etc.).

At a bare minimum let's just start educating the people who are working there. The least that a bhai sahib [caretakers, workers] at the gurdwara can say is, 'If you need help, these are the places or these are the women's agencies, why don't you talk to them?' We can accept that at that stage maybe a women can't talk to that bhai sahib but they can ask 'Do you need something? Are you upset or something?' At least a little bit of concern doesn't hurt you, right?

Finally, SFC was recognized as an important resource for the Sikh American community. SFC could provide trainings for the community. It was also an alternative community space to the gurdwara.

I feel like sometimes people maybe not want to come to a gurdwara or something, but if you have like a festival with food people come and having like having a segment dedicated to this. Even like a singles mixer event, but sort of attachment with some sort of opening talk. And yeah sure is it a damper, yeah probably, but it's also necessary. You know it's like you give a medicine with a spoon full of sugar.

Limitations and Responses

Although these focus groups were used to triangulate data already collected in SFC's prior survey research, the Field Researchers found that the focus group attendance was relatively low²⁴. In response, the Field Researchers added the storytelling session/interviews as an additional research method, allowing them to both collect data from participants who were unable to attend the focus group and to collect more in-depth information possible through a one-on-one storytelling/interview method.

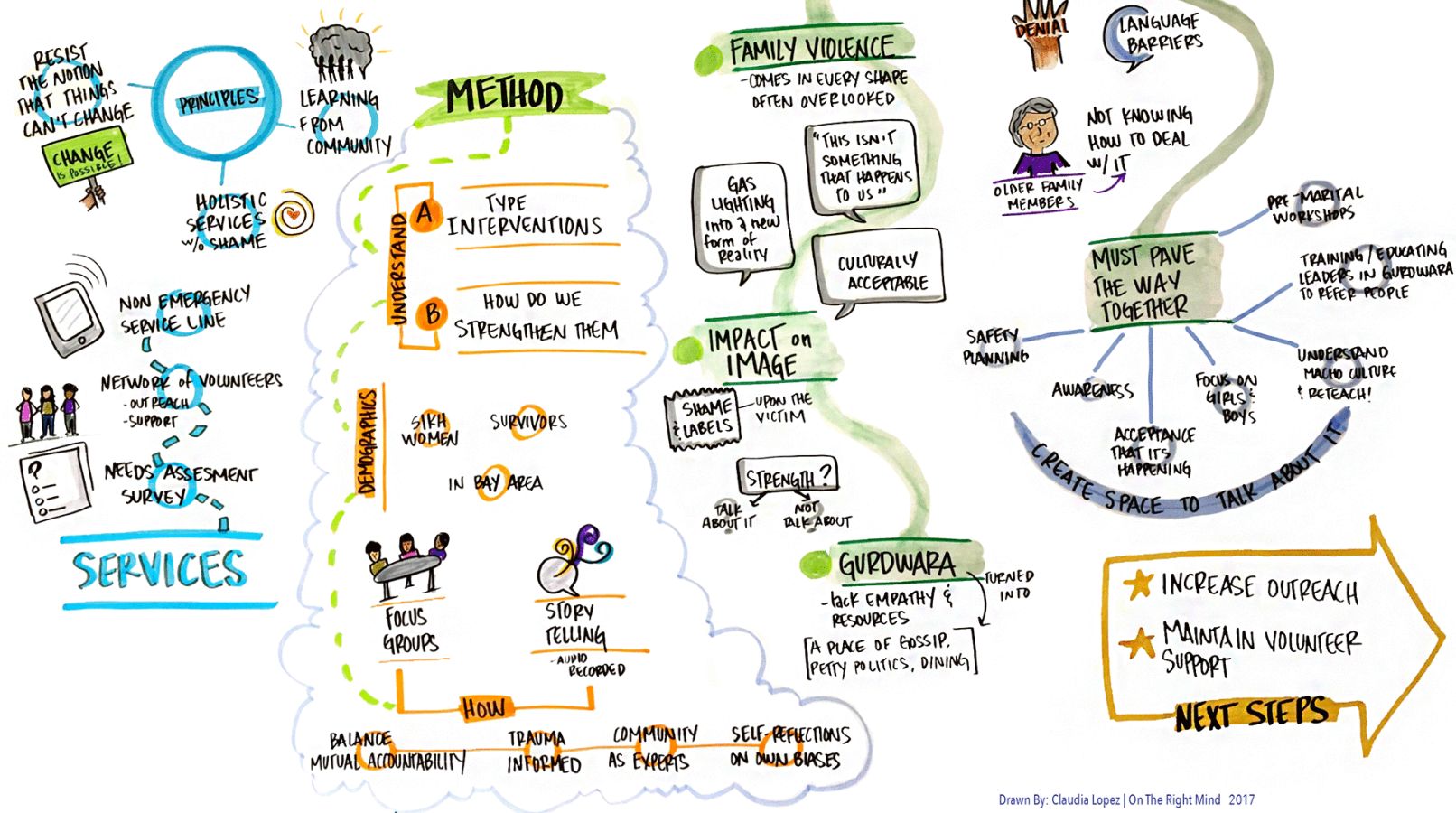
Possible Next Steps

SFC has plans to continue their strong tradition of community-based participatory research (CBPR). During the time of this research project, one of the Field Researchers, Harmit Cheema, was hired as SFC's first paid (part-time) staff. This increase in SFC resources will allow for the survivor-centered advocacy informed by the research. They will also use these report findings, translated into Punjabi, to increase education and awareness on the issue of domestic violence and leverage this for greater community participation and support.

■ ■ ■ ■ ■

²⁴ The first focus group received five participants; the second focus group received three participants.

RESEARCH STUDY BY: SFC SIKH FAMILY CENTER



Drawn By: Claudia Lopez | On The Right Mind 2017

E1. SCA Post-Training Evaluation Form (10/6/16)**Section A**

1. Are you part of a Field Research team (working on a research project)?
 Yes No

2. Did you attend the in-person training on storytelling with Mimi Kim on September 7, 2016?
 Yes No If yes, please answer the questions in Section B.

3. Did you attend the webinar on research ethics and consent forms with Susan Ghanbarpour and Nuri Nusrat on September 14, 2016?
 Yes No If yes, please answer the questions in Section C.

4. Did you attend the webinar on focus groups with Mimi Kim on September 14, 2016?
 Yes No If yes, please answer the questions in Section D.

Section B

Please tell us what you think about the training on storytelling with Mimi Kim. Your responses are anonymous, and will help us plan future trainings.

5. Please comment on how much you agree or disagree with the following statements. Select only one answer for each statement

As a result of attending the training on story telling...	Strongly Disagree	Disagree	Agree	Strongly Agree
a. I know more about how to use storytelling as a research method.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I feel more comfortable that I could run a storytelling session	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. I will be able to use what I learned in my Field Research Project (please skip if n/a).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. I will be able to use what I learned in future research projects.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. I feel more confident that a research project could be developed in a way that benefits my organization or community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Please rate your overall experience with the training on storytelling. Select only one answer for each statement

As a result of attending the training on story telling...	Strongly Disagree	Disagree	Agree	Strongly Agree
a. I understood the goals of the training.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. The material was shared at a pace that I could follow.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. The material was well organized.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The presenter seemed knowledgeable on the topic.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. The presenter was responsive to participant questions and feedback.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. I had enough opportunities to express myself during the training.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

As a result of attending the training on story telling...	Strongly Disagree	Disagree	Agree	Strongly Agree
g. The material was made available to me in my preferred language.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. It was clear how to I could get access to the content later whenever I may use it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section C

Please tell us what you think about the training on research ethnics and the consent process with Susan Ghanbarpour and Nuri Nusrat. Your responses are anonymous, and will help us plan future trainings

7. Please comment on how much you agree or disagree with the following statements. Select only one answer for each statement

As a result of attending the training on research ethics and the consent process...	Strongly Disagree	Disagree	Agree	Strongly Agree
a. I know more about how to apply the consent process in a research project.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I feel more comfortable that I could apply ethical practices in a research project.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. I will be able to use what I learned in my Field Research project (please skip if n/a).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. I will be able to use what I learned in future research projects.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. I feel more confident that a research project could be developed in a way that benefits my organization or community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Please rate your overall experience with the training on research ethics and the consent process. Select only one answer for each statement

Overall training experience	Strongly Disagree	Disagree	Agree	Strongly Agree
a. I understood the goals of the training.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. The material was shared at a pace that I could follow.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Overall training experience	Strongly Disagree	Disagree	Agree	Strongly Agree
c. The material was well organized.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The presenter seemed knowledgeable on the topic.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. The presenter was responsive to participant questions and feedback.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. I had enough opportunities to express myself during the training.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. The material was made available to me in my preferred language.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. It was clear how I could get access to the content later whenever I may use it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section D

Please tell us what you think about the training on focus groups with Mimi Kim. Your responses are anonymous, and will help us plan future trainings

9. Please comment on how much you agree or disagree with the following statements. Select only one answer for each statement

As a result of attending the training on focus groups...	Strongly Disagree	Disagree	Agree	Strongly Agree
a. I know more about how to use focus groups as a research method.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I feel more comfortable that I could run a focus group session.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. I will be able to use what I learned in my Field Research project (please skip if n/a).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. I will be able to use what I learned in future research projects.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. I feel more confident that a research project could be developed in a way that benefits my organization or community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Please rate your overall experience with the training on focus groups. Select only one answer for each statement

Overall training experience	Strongly Disagree	Disagree	Agree	Strongly Agree
a. I understood the goals of the training.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. The material was shared at a pace that I could follow.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. The material was well organized.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The presenter seemed knowledgeable on the topic.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. The presenter was responsive to participant questions and feedback.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. I had enough opportunities to express myself during the training.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. The material was made available to me in my preferred language.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. It was clear how I could get access to the content later whenever I may use it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section E

Open Response Questions

For this next set of questions, please tell us more about your answers above, or if you have any other thoughts about the training(s). We would particularly appreciate constructive feedback to help us plan future trainings!

11. What did you like about the training(s)? What was meaningful for you?
12. What would have made the training(s) better for you?
13. Do you have any comments on the interpretation or translation that was provided (including captioning or subtitling)? Or any other comments that could help us improve language access for future trainings?
14. Is there anything else you would like us to know?

E2. SCA Post-Training Evaluation Form (2/27/17)

Did you attend the webinar on Presenting Research Findings with Susan Ghanbarpour and Mimi Kim on February 27, 2017?

- Yes – ask the questions No – skip to the end of the survey

Please tell us what you think about the training on Presenting Research Findings. Your responses are anonymous

1. Please comment on how much you agree or disagree with the following statements. Select only one answer for each statement

As a result of attending the training on Presenting Research Findings...	Strongly Disagree	Disagree	Agree	Strongly Agree
a. I know more about how to organize and present research findings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I feel more comfortable that I could create a presentation to present my project, methods, and findings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. I will be able to use what I learned in this webinar in my Field Research project.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. I will be able to use what I learned in this webinar in any future research projects I am a part of.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. I feel more confident that I could develop research project presentations that could benefit my organization or community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Please rate your overall experience with the training on Presenting Research Findings. Select only one answer for each statement

Overall training experience	Strongly Disagree	Disagree	Agree	Strongly Agree
a. I understood the goals of the training.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. The material was shared at a pace that I could follow.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. The material was well organized.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The presenter seemed knowledgeable on the topic.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Overall training experience	Strongly Disagree	Disagree	Agree	Strongly Agree
e. The presenter was responsive to participant questions and feedback.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. I had enough opportunities to express myself during the training.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. The material was made available to me in my preferred language.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. It was clear how I could get access to the content later whenever I may use it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Open Response Questions

Please tell us more in your own words! You will help us understand what to keep and/or improve for future trainings

- 3. What did you like about the training(s)? What was meaningful for you?

- 4. What would have made the training(s) better for you?

- 5. What was helpful, unhelpful, or missing from the webinar content on the Final Report to Blue Shield?

- 6. Do you have any comments on the interpretation or translation that was provided (including captioning or subtitling)? Or any other comments that could help us improve language access for future trainings?

- 7. Is there anything else you would like us to know?

E3. SCA Evaluation Form for Convening 2 (3/20/17)

1. I/my organization was a field research site in this project.

Yes No

2. Please rate your overall convening experience. Select one answer for each statement

Overall convening experience	Strongly Disagree	Disagree	Agree	Strongly Agree
a. I understood the purpose of the convening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. The overall content of the convening was useful and relevant.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. The facilitator(s) were responsive to participant questions and feedback.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. I had enough opportunities to express myself during the convening.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. The convening was well organized.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Additional comments (Optional):				

3. Please rate the key elements of the convening. Select one answer for each statement, or select NA if it is not applicable (for example, if you were not present for that part of the convening).

Overall convening experience	Strongly Disagree	Disagree	Agree	Strongly Agree	N/A
Day 1					
a. Overview of Survivor-Centered Advocacy Project	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Story Circle Exercise on SCA/GS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Learning about the Gathering Strength Project	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Peer presentations from all research sites	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Getting feedback from other project participants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Fishbowl Exercise on research site experiences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Overall convening experience	Strongly Disagree	Disagree	Agree	Strongly Agree	N/A
Day 2					
g. Sense-Making activity on what collective research says about survivor-centered advocacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Research in marginalized communities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Blue Shield Report segment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Dissemination conversation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Additional comments (Optional):					

4. Please comment on how much you agree or disagree with the following statements. Select one answer for each statement

As a result of attending Convening 2 of the SCA Project...	Strongly Disagree	Disagree	Agree	Strongly Agree
a. I broadened my thinking about what survivor-centered advocacy can look like.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I got to connect with others in a way that strengthened or expanded my network.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. I enhanced my understanding of how to share research findings with a broader audience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. I deepened my understanding of the importance of community-based participatory research.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. I broadened my thinking about what survivor-centered advocacy can look like.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Additional comments (Optional):				

5. What did you like about the convening? What was meaningful for you?

6. What would have made the convening better for you?

7. If we could do this project again for other participants in the future, what suggestions would you have for the project's convenings? (You will have another opportunity after this to talk about your ideas for improving the project).

8. Is there anything else you would like us to know?

E4. Post-Project Survey for Field Research Team Members (3/20/17)

Thank you for being part of a Field Research Team in this project! We want to learn how this project has affected your capacity to do community-based participatory research. Please fill out the entire Post Project Survey below: They are the same questions that you filled out in your Pre Project Survey. Please mark how strongly you agree or disagree with the listed statements today, as this project draws to a close.

	Strongly Disagree	Disagree	Agree	Strongly Agree
1. I see myself as a researcher.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I can describe what CBPR (Community-Based Participatory Research) is.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I can describe why CBPR is important.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I can describe at least 2 CBPR principles.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I can lead research projects for and with my organization and/or community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I know how to formulate a research question.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. I know how to design a research plan.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. I can describe at least one CBPR research method.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. I can design data collection tools that are appropriate to one or more CBPR research methods.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. I know how to set baseline measures in a research project.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. I have skills to measure or analyze change quantitatively.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. I have skills to measure or analyze change qualitatively.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. I can describe what survivor-centered advocacy should look like.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. I feel confident that I and/or my organization can provide survivor-centered advocacy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. My organization/group feels well positioned to apply for and receive funding to do our own research projects.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. My organization/group has the skills and knowledge to design and lead its own research projects on topics that are important to us.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1. What do you think about research now, as compared to what you thought before the onset of this project?
2. How was your experience with your field research liaison (Susan, Mimi, Orchid, or Alvina)? Please be specific on what was positive and what were limitations.
3. What was the most important research skill you learned from participating in this Project?
4. What was the most important thing you learned from working with your research team?
5. What is the most important benefit you see to your organization or group as a result of this project?
6. What is one key insight you learned about survivor-centered advocacy as a result of this project (that you did not know before)?
7. Looking back, what skills did you already have before this project that you were able to apply to this research?
8. Looking back, how did your knowledge or life experience you already had before this project inform or impact this research (e.g., community knowledge, personal life experience)?
9. Each project faced unique challenges. What was one of yours and what is important for others to know about how to address it?
10. Having gone through this project as a Field Research Team member, how do you think community-based participatory research can help raise the voices of marginalized survivors of violence?
11. What community-based participatory research knowledge or skills do you or your organization or group want more of in the future?
12. If we were able to do this project again in the future, what improvements would you suggest?

Evaluation Summary

As a result of the Survivor-Centered Advocacy in Culturally-Specific Communities project, all culturally-specific field research sites completed their own independent community-based participatory research projects.

Overall, the project revealed what is possible when we recognize that organizations or groups that serve and are comprised of marginalized culturally-specific communities can simultaneously have very high access to their communities' experiences; very high access to data that is missing from mainstream research on key social issues; and very low access to formal research and evaluation resources and education. If provided hands-on education and support, these organizations or community groups with limited access to formal research and evaluation resources can accelerate their knowledge quickly, and complete community-based participatory research projects, contributing crucial data to the field.

The composition and community-centering position of the field research sites played an important role in their research capacity building and project implementation. In particular their contextual fit within the communities researched contributed to high survey response rates and rich findings of the project. This contextual fit is summed up in the following points.

1. The field researchers were from the communities researched;
2. The groups or organizations that the field researchers represented were already known and trusted in the communities researched;
3. The CBPR principles developed collaboratively by the field researchers and thought partners addressed negative associations communities hold with regard to 'drive-by' research that is led by researchers with no trusting history or relationship with research communities' experiences and needs.

Research Liaisons' contextual fit with research sites also contributed to the success of each research project. Research Liaisons were assigned to individual field research sites based on logistical ease and research liaison capacity. (Those teams that started with a lower baseline of education and experience doing formal research tended to need higher intensity support and education over the course of their research project; they also demonstrated the largest growth from their baseline by the close of the project). In their overall project evaluations, 100% of field

researcher respondents stated that working with an assigned research liaison was a positive and beneficial experience. Reflections by field researchers and research liaisons also revealed a shared observation that research liaisons were successful in part because they had more formal research experience, but also because they had a pre-existing philosophical commitment to community capacity-building and the value of community-based participatory research, and had ongoing connections to community-based work. This contextual fit contributed to the success of the working relationship between research liaisons and field researchers, and to the resulting success of each research project.

Finally, technical assistance activities contributed to the overall success of the project. Because research liaisons were active participants in technical assistance design and implementation, the workbook of research resources and templates as well as topic-specific webinars for field researchers were closely aligned with the needs and questions of field research sites.

Key Tools and Findings

Key evaluation methods and findings are synthesized below. Evaluation tools can be found in **Appendix E**.

Goal 1: Build culturally-specific knowledge on two key questions (who are survivors, and what is survivor-centered advocacy).

Activities contributing to Goal 1 engaged research team members and thought partners in pre-convening surveys and in-person participatory research processes at each of two convenings. These convenings guided participants through both data sharing and sense-making on the two key questions of Goal 1.

Knowledge generated from these processes was rich, but evaluation focused simply on participants' experiences of the facilitated research activities. It was collected in post-convening evaluation forms.

- Over 75% of participants 'strongly agreed' that they had broadened their thinking about what survivor-centered advocacy can look like. (All other participants agreed. 'Strongly agreed' was the highest level of agreement on the scale. No responders disagreed or strongly disagreed.

Participants not only generated culturally-specific data on the questions 'who are survivors' and 'what is survivor-centered advocacy,' they also deepened and expanded their thinking through engaging with other culturally-specific participants.

- Over 80% of participants strongly agreed that the convenings strengthened their work and their networks. Again, all remaining participants agreed.
- 100% of participants strongly agreed that they had enough opportunities to express themselves during the convenings.

‘This process helped me think about how our SCA [survivor-centered advocacy] can improve.’

[What was meaningful was] ‘diverse group of participants seeing different issues but also similar issues came up, e.g. police not helpful to some communities.’

Goal 2: Expand research capacity

The majority of our evaluation efforts centered on Goal 2—expanding research capacity in the selected field research teams. Activities under Goal 2 included in-person support through a research liaison, as well as capacity-building through webinars and a research workbook containing sample research tools and educational materials to assist participants in all aspects of their community-based participatory research projects.

At the close of the project, 94.12% of participants strongly agreed (highest level on scale) that they had deepened their understanding of the importance of community-based participatory research.

A closer look at the evaluative data reveals an important story about how to raise the capacity of community-based researchers who face some of the same challenges and barriers faced by their constituencies, and who are simultaneously well situated for, yet typically side-lined from contributing important research to the domestic violence field.

Review of Research Teams and Capacity-Building Activities

Five field research teams participated in the project and successfully completed community-based participatory research projects of their own design and implementation: **Avellaka**, **DeafHope**, **Korean American Coalition to End Domestic Abuse (KACEDA)**, **Mujeres Unidas y Activas (MUA)**, and **Sikh Family Center (SFC)**. All five teams were culturally-specific groups or organizations (in their own view as well as the view of their primary constituencies) that were simultaneously composed of and dedicated to working with particular marginalized communities.

Field research teams participated in numerous capacity-building components of the project, including:

1. In-person gatherings (2)
2. Direct work with Research Liaisons

3. Webinar trainings (4)
4. Research Workbook

All print elements of capacity building needed to be translated into Spanish, all online elements transcribed into English and Spanish, and all in-person elements interpreted into American Sign Language and Spanish. Evaluative data was collected for all four components, and growth in capacity was measured using a pre and post-test on select research capacities.

All elements proved useful to field researcher capacity-building.

Webinars

For example, as a result of the webinar on using storytelling as a research method, 100% of responders said they knew more about how to use storytelling as a research method, that they felt able to use what they'd learned in their field research project, and that they would be able to use what they'd learned in future research projects.

As a result of the webinar on research ethics and consent practices, 100% of participants agreed that they knew more about how to apply the consent process in a research project, that they felt more comfortable that they could apply ethical practices in a research project, that they could use what they'd learned in their field research project, and that they would be able to use what they'd learned in future research projects.

As a result of the webinar on presenting research findings, 100% of participants know more about how to organize and present research findings, felt more comfortable that they could create a presentation to present their projects, methods and findings, and felt able to use what they'd learned in their field research projects, and in future research projects.

A key theme from the webinar evaluations (expressed by 100% of respondents representing all five sites) was the value field researchers placed on learning from each other's projects and experiences.

Convenings

This value was reflected again in the convening evaluations, in which 88.24% of respondents found the peer presentations from all research sites 'extremely useful,' the highest point on the scale. 76.92% of respondents found a fishbowl exercise on research site experiences also 'extremely useful.'

[What was meaningful for me was...] enjoyed the presentations and the peer learning experiences.

- Field researcher at Convening 2

[What was meaningful for me was...] *seeing other findings from other presenters! What was meaningful was to see our survivors' stories being heard. Rare opportunity.*

- Field researcher at Convening 2

The in-person convenings, in particular the closing convening, contributed to participant satisfaction and learning in the project, and contributed directly to the three central goals of the project overall.

	Strongly Disagree	Disagree	Agree	Strongly Agree	Total
I broadened my thinking about what survivor-centered advocacy can look like.	0.00%	0.00%	23.53%	76.47%	17
I got to connect with others in a way that strengthened or expanded my network.	0.00%	0.00%	17.65%	82.35%	17
I enhanced my understanding of how to share research findings with a broader audience.	0.00%	0.00%	18.75%	75.00%	17
I deepened my understanding of the importance of community-based participatory research.	0.00%	0.00%	5.88%	94.12%	17

I love the energy of the community, support and inclusion that is created at the convening.

- Field researcher at Convening 2

These are very exciting developments. The research work, its development/strategies, and findings are so significant in information and the capacity to impact future directions for this work. Finally!

- Field researcher at Convening 2

The SCA research will clearly add richness to the field of practice of VAWAG, survivors and community-specific responses for real change.

- Field researcher at Convening 2

The commitment to language justice was really appreciated...it's rare and makes a huge difference.

- Field researcher at Convening 2

Field Research Workbook

While there was no evaluation tool specific to evaluating the efficacy of the research workbook, what project staff learned from direct experience was that all field researchers used templates provided in the workbook, including the templates for creating key research questions, a research plan and budget, and consent forms specific to research activities.

One recommendation from both within the project staff and from field researchers was to provide the research workbook earlier for future cohorts of similar projects.

I would suggest to have the workbook before starting on the research. I think that would have help us see the bigger picture.

- Field researcher

Pre-Test

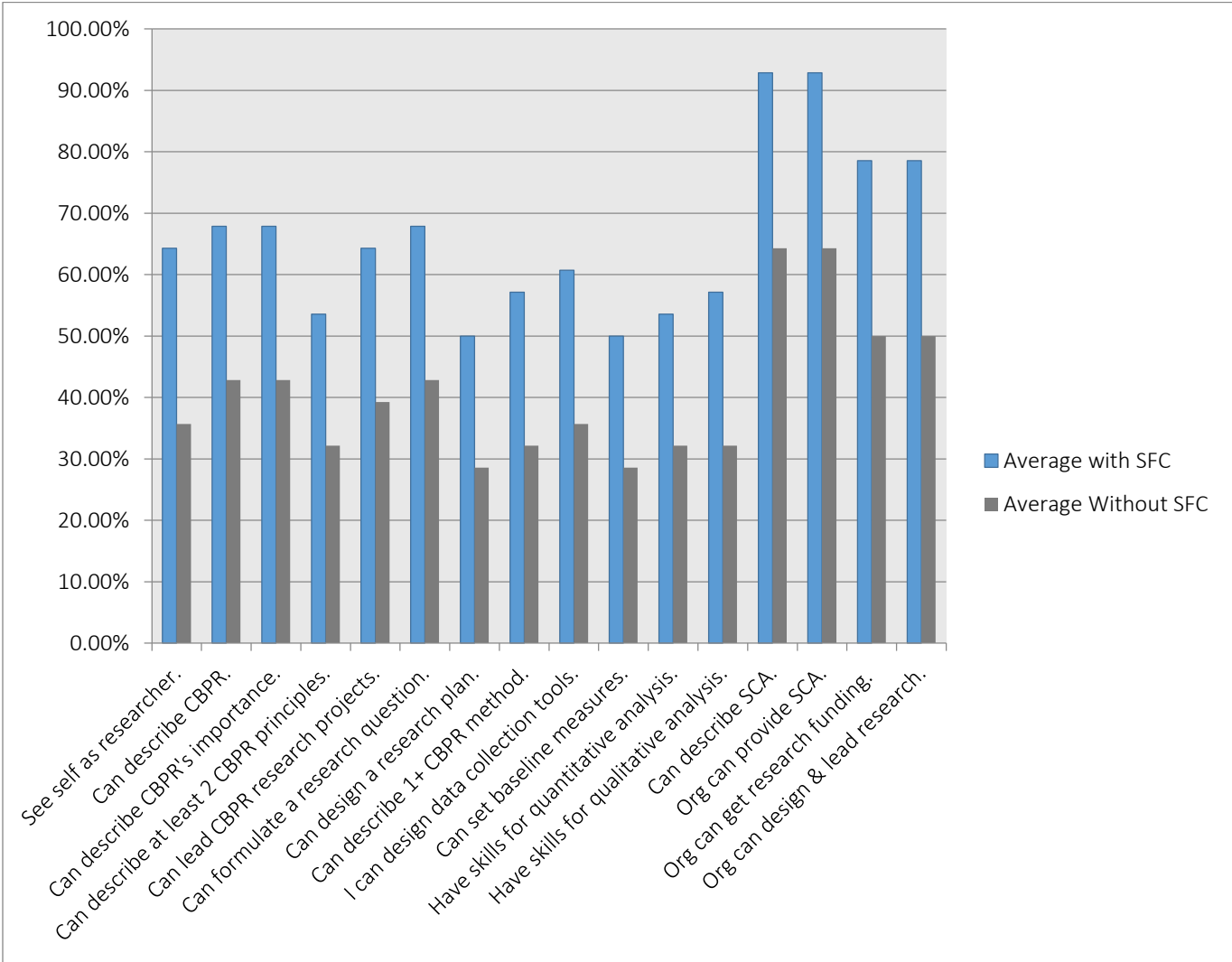
Pre and post-tests asked participants to rate on a four-point scale their agreement with sixteen statements corresponding to sixteen elements of research capacity pertinent to the overall project. The scale ranged from 1 (strongly disagree) to 4 (strongly agree). The sixteen elements of research capacity are listed below.

1. I see myself as a researcher.
2. I can describe what community-based participatory research (CBPR) is.
3. I can describe why CBPR is important.
4. I can describe at least two CBPR principles.
5. I can lead research projects for and with my organization and/or community.
6. I know how to formulate a research question.
7. I know how to design a research plan.
8. I can describe at least one CBPR research method.
9. I can design data collection tools that are appropriate to one or more CBPR research method(s).
10. I know how to set baseline measures in a research project.
11. I have skills to measure or analyze change quantitatively.
12. I have skills to measure or analyze change qualitatively.
13. I can describe what survivor-centered advocacy should look like.
14. I feel confident that I and/or my organization can provide survivor-centered advocacy.
15. My organization/group feels well positioned to apply for and receive funding to do our own research projects.
16. My organization/group has the skills and knowledge to design and lead its own research projects on topics that are important to us.

While all of the communities represented by the five research sites faced systemic barriers to accessing English-language literature, resources, and formal education on research, the five

sites did not start out with equal levels of research background and expertise. Of the five research teams, the research team from Sikh Family Center (SFC) joined the project with significantly more research experience than the others. Both pre-test responders from SFC strongly agreed that they already self-identified as researchers. No other field site had even a single responder who strongly agreed that they saw themselves as a researcher. In this way SFC is an outlier in the evaluation data on capacity building.

Responses to pre-test questions from all field researchers are included in the table below. The columns are in groups of two. The first column represents the average response for that topic across all responders. The second column represents the average response for that topic across all responders *except* those from Sikh Family Center (SFC). Average responses are calculated as percentages of the total possible confidence level in research capacity.



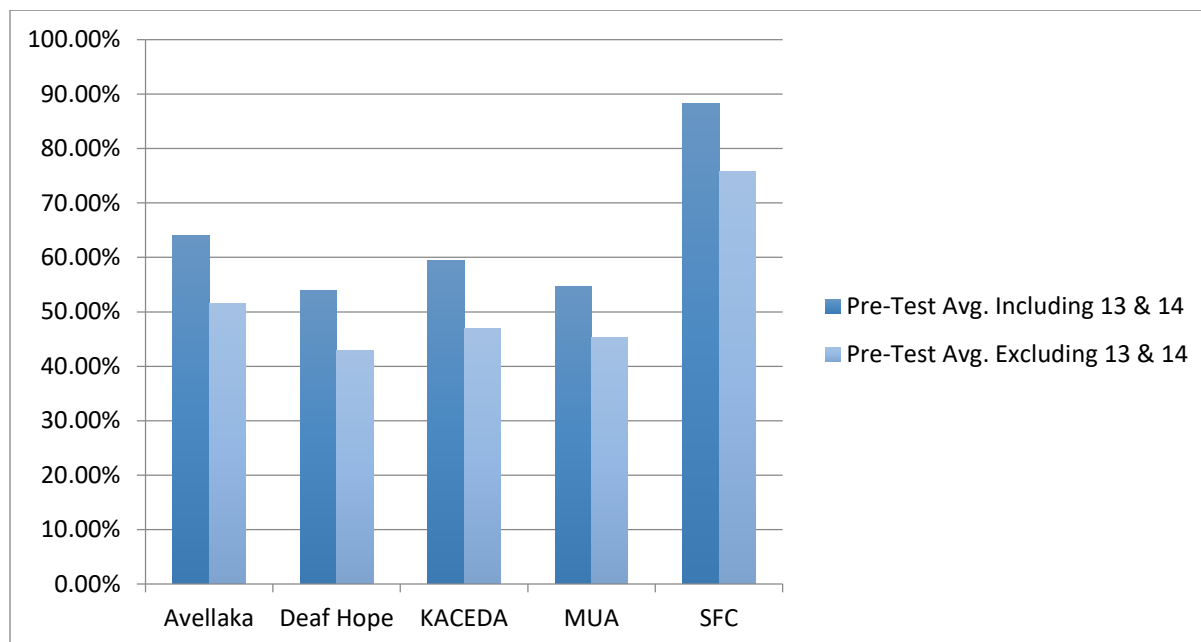
Two questions stand out as anomalous from the others: The questions reflecting the highest baseline across participants were questions 13 and 14. These questions notably do not focus on

research capacity; they focus on participant confidence in describing survivor-centered advocacy and implementing it with survivors of violence. These are the only two questions out of sixteen that received only '3-agree' and '4-strongly agree' ratings across all pre-test responses. All questions pertaining to research capacity reflected ranges of responses that included '1-strongly disagree' and '2-disagree' responses.

When we include these two questions in our calculations, the range of baseline capacity across field researchers is 50% to 97% with an average of 66%. When we remove them, however, the range changes significantly to 38% to 84% with an average of 54%.

In conclusion, when we isolate research capacity baselines (by removing questions 13 and 14) and isolate the core group of participants who did not already identify as researchers (by removing SFC responses), we get a **confidence baseline range of 43% to 52%**.

The table below shows pre-test data by site. In it we can see the difference between the baseline for SFC and the baseline for the other field sites, as well as the difference between average baseline capacity when including only questions about research capacity (and removing questions related to understanding and implementing survivor-centered advocacy).



The pre-test data corresponded with TA resource-allocations that resulted in individual research project successes. Through regular research liaison team meetings, we observed the progression of research projects as they correlated with capacity-building baselines. SFC needed the least side-by-side support to design and implement their research plan, and to analyze and present their research findings. Other organizations that faced both language barriers to English and more cultural barriers to formal research education, started with lower baselines and needed more side-by-side support from their research liaison. With that support,

those sites were able to design, implement, analyze, and present research activities and contribute findings to the field that are otherwise wholly absent. In other words, rather than allocate hours of research liaison support and other forms of capacity-building resources equally across all sites, the findings of this project recommend that resources be allocated according to the particular baseline needs of participating community-based research teams, and that those baselines be understood to reflect some of the social, political and economic barriers faced by that community.

Post-Test

The chart below shows the average percentage of growth from the baseline for the five research sites, across each of the sixteen elements at the close of the project.

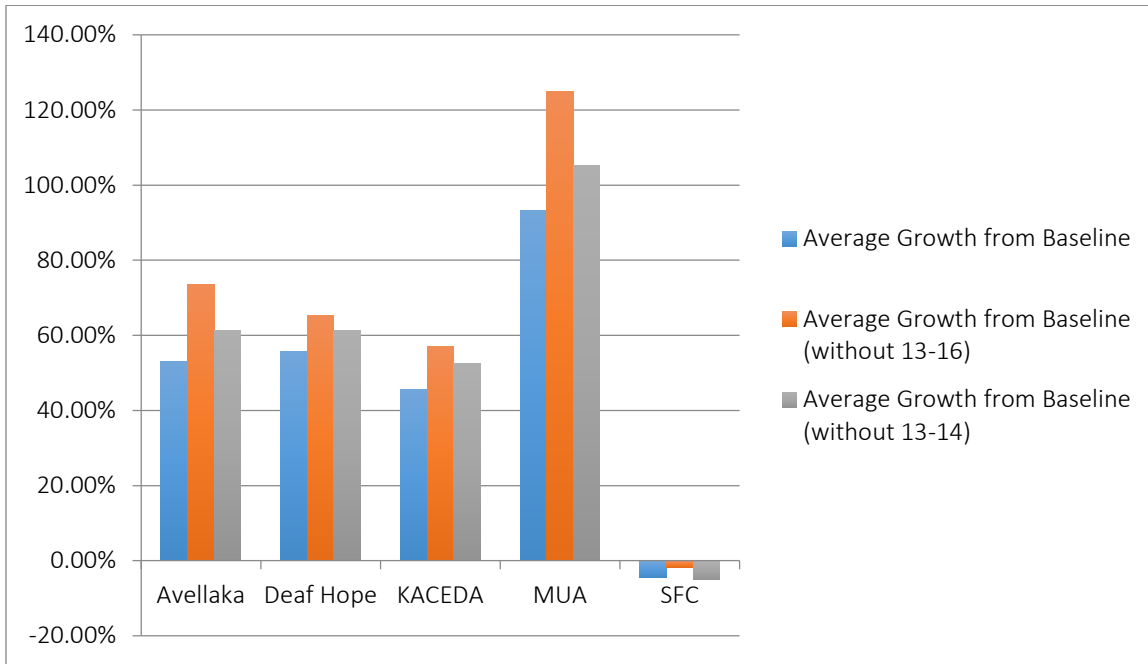
There are three columns per field research site. The left-most column represents the average growth when all sixteen questions are included in the calculation. The middle column represents the average growth when the last four questions are omitted from the data. The right-most column represents the average growth from baseline research capacity if only questions 13 and 14 are omitted.

Why three separate calculations per site? The right-most column that represents the average when excluding questions 13 and 14 is included for the same reason as described the pre-test analysis above: Questions 13 and 14 are not actually about research capacity-building, but about survivor-centered advocacy. The middle column represents the calculation with the additional omission of responses to questions 15 and 16. This is included because of a noticeable trend in the qualitative responses from field researchers. Responders across all sites commented that as a result of being field researchers in this project, they learned how much capacity CBPR actually requires, and so rated their readiness to do CBPR in questions 15 and 16 low as a result. They felt that they did not in fact have the capacity right now in terms of *staff time*, not in terms of *research skills*. This result differs from what project staff were seeking through those two questions. The omission of them therefore reveals only the twelve questions that were most clearly directly correlated with research capacity-building.

From that center column reflecting growth from the baseline in true research capacity-building, we see a range of -1.74% to 125%.

Here it is important to highlight again that Sikh Family Center (SFC) is a clear outlier in the data: It is the only site in which both field researchers identified as researchers before the onset of the project, and submitted nearly all 'strongly agree' pre-test responses about their confidence to perform the sixteen evaluated elements. Relatedly, SFC is the only participant CBPR research project showing a decrease in capacity over the course of the project.

If we remove SFC from the post-test data, we see a range in growth from 56.94% (KACEDA) to 125% (MUA), and an overall average growth from baseline research capacity of 80.21% across the four research sites.



In terms of specific research skills, capacity increased by over 85% for the following:

1. Describing why community-based participatory research (CBPR) is important
2. Describing at least two community-based participatory research (CBPR) principles.
3. Describing at least one CBPR method
4. Designing a research plan
5. Setting baseline measures in a research project
6. Doing qualitative data analysis

Goal 3: Create advocacy-related data

The goal to create advocacy-related data was met, as detailed in the majority of this report, through individual site work by field researchers with research liaison support, and in the final presentation of findings from each site. Evaluation of the process to create this data was gathered through research liaison field notes, researcher notes, research liaison progress meeting minutes, and post-project evaluation forms for all Field Research Team members and Project Staff.

1. Themes related to successful integration of marginalized culturally-specific communities (and data on their community experiences) into strategic conversations in the field of domestic violence—in particular, survivor-centered advocacy.

- a. Research can be responsible and helpful to communities, and accessible for researchers and participants.
 - b. Within an organization or group, the lack of formal evaluation systems of research initiatives in an organization or group does not equate to the lack of an evaluative culture or practice of programmatic reflection.
 - c. Increased isolation from mainstream research and evaluation corresponded to increased need for site-specific capacity-building support (e.g. DeafHope serving deaf communities, MUA serving Spanish speaking immigrant communities, and Avellaka serving tribal communities faced more barriers to communication and inclusion in English language formal education on research than the field researchers from SCA and KACEDA).
 - d. Community trauma (e.g. election-related, community deaths) affects participant groups and field researchers. Every trauma that a community must survive impacts the research plan and timeline that engages that community.
 - e. Organizations and established community groups are well positioned to raise the voices of survivors for audiences that are both internal and external to their immediate communities. Having documentation of survivor experiences from survivors themselves is crucial.
 - f. CBPR provides survivors a chance to design and participate in the process of telling their own experiences in holistic and qualitative ways, and gives community audiences the chance to face what is going on for members of their communities.
2. Themes related to specific components of this project.
- a. Research liaisons are essential, especially when supportive, responsive, and invested in CBPR and in bringing marginalized communities to the center of research strategies.
 - b. Pre-existing community presence and expertise played an important role in field researchers' confidence and efficacy.

[Other skills I brought with me that became useful are...] *Personal life experience... The years of doing this work. I am an immigrant woman from the base.*

- MUA field researcher (translated from Spanish)

[Other skills I brought with me that became useful are...] 1) *insight into possible challenges and strengths (related to community knowledge and personal life experiences).* 2) *community relationships and trust made the project possible.*

- KACEDA field researcher

- c. Field researcher skills development was highest in areas of leading focus groups and interviews, doing qualitative data analysis, and presenting findings.

The most important skill was analyzing and breaking down all data to develop themes that were representative of participants' viewpoints/experiences.

- Field researcher

[I] became better at documenting. Avoiding leading questions while interviewing.

- Field researcher

- d. Field researchers reflected community-specific realizations as well as research-related skills development as their most important learnings from the project.

*The **whole** process! Everything was new for me.*

- Field researcher

I feel more complete and more prepared to continue strengthening my role as a leader in the immigrant community. I think that now myself and the organization feel more secure at handling research and evaluation.

- Field researcher

- e. Field researchers saw deep and diverse value in CBPR

*When it's done **BY** those communities/members it can be an agent for change on all levels, an opportunity for larger stage for marginalized perspectives.*

- Field researcher

[CBPR experience can] help empower survivors who can design and/or participate directly

- Field researcher

Yes, I think that in the experience of working with immigrant communities and facing very difficult moments, the participatory research is very important ...[it can help] highlight the important things and the contributions that immigrants make to this country and women's leadership.

- Field researcher

[A meaningful thing I learned is] *That it be the same community or survivor that lead this process.*

- Field researcher

- f. Field researchers saw great value the ability to collect, analyze, and disseminate data on survivor experiences from their communities.

It's nice to see what I've been seeing into hard writing. Now, we have something to explain to our community.

- Field researcher

[Now we have] Data we can share with our communities. Data we can trust (know where it comes from, what was done)

- Field researcher

It allows voices to be heard and recognized in a way other than a # in a report/quant. data. Voices become real and a life for those who think they don't exist/happen in our communities.

- Field researcher

- g. Research liaison progress meetings were important to project coordination and development overall.
 - h. Teaching field researchers about the meaning and use of research-specific terminology is an important aspect of expanding their capacity to engage (and be listened to) in more research settings.
3. Themes related to challenges and recommendations for future projects: Participants had suggestions for building strengths in almost every area of the project including fund development for research capacity, more convening opportunities, more time for research capacity-building as field researchers, as well as more learning about specific research methods and research design.
- a. The resource constraints of this project could not have supported more field research sites. It was necessary to have some sites that would need less support to implement their research plans. In a larger project in the future, a tighter selection process for field sites would be required.
 - b. Budgeting for language justice is essential to integrating linguistically marginalized communities.
 - c. Implementing language justice to provide access to LEP communities not just as recipients of services but as partners in field development requires skill, humility, and practice.

- d. Field research sites need more time and/or more staffing to implement their research plans. Internally, capacity related to staff time was a challenge. The sense of unreadiness from field research sites to take on independent research projects at the close of this project came from the awareness of the staff capacity required to complete research projects.
- e. Research liaisons could benefit from an initial gathering to create the Research Workbook before the launch of individual site projects and to get more specific and coordinated with regard to research methods to share with field researchers.
- f. Funding advocacy is needed to support CBPR work within groups or organizations serving marginalized populations.
- g. Field researchers are very interested in further learning on how to build the research capacity of themselves, of other community members and/or research participants, and how to keep research efforts going.

Conclusion

The Survivor-Centered Advocacy in Marginalized Culturally-Specific Communities project met all three of its primary goals using processes that raised the capacity of those working with marginalized survivors of domestic violence to contribute critical data to the field. The project also resulted in tremendous growth for the cohort of field researchers in their attitudes and capacities with regard to doing community-based participatory research.

By the end of the project:

- 100% of participants could explain what CBPR was, why it was important, explain a CBPR research method, and design a corresponding research plan.
- 76.67% of participants felt they could lead research projects for and with their organization and/or community.

One field researcher who started out with a negative view of research and a sense that her community would reject researchers closed her post project evaluation with a statement on this dramatic change.

I see a lot [of benefits I've gotten from the project] but it's important to see the results and to go step by step through the whole process while at the same time developing new skills and remembering that our communities feel proud to have their own community researchers.

- Field researcher.

Evaluation	Measuring What?	Type of Instrument	Type of Measures	Timing of Measurement	Who is Being Evaluated?
Pre-Survey Post-Survey	Research knowledge, skills, confidence, capacity Post-survey adds questions about Field Liaison experience	(Pre) On-line (Survey Monkey) (Post) Paper	Likert scale; short answer	Pre- is at time of proposal submission Post- is at end of Convening 2	Field Researchers
Convening 1	Knowledge gained from convening; quality of facilitation, logistics, language access, materials	On-line (Survey Monkey)	Likert scale; short answer	Week following Convening 1	Thought Partners
Convening 2	Knowledge gained from convening; quality of facilitation, logistics, language access, materials	Paper	Likert scale; short answer	At end of Convening 2	Thought Partners; Field Researchers
Webinar 1: Storytelling & Interviews	Knowledge gained from training; quality of training, logistics, language access, materials	On-line (Survey Monkey)	Likert scale; short answer	Week following Webinar 1	Field Researchers
Webinar 2: Research Ethics	Knowledge gained from training; quality of training, logistics, language access, materials	On-line (Survey Monkey)	Likert scale; short answer	Week following Webinar 2/3	Field Researchers
Webinar 3: Focus Groups	Knowledge gained from training; quality of training, logistics, language access, materials	On-line (Survey Monkey)	Likert scale; short answer	Week following Webinar 2/3	Field Researchers
Webinar 4: Presenting Research	Knowledge gained from training; quality of training, logistics, language access, materials	On-line (Survey Monkey)	Likert scale; short answer	Day of Webinar 4	Field Researchers

Evaluation	Measuring What?	Type of Instrument	Type of Measures	Timing of Measurement	Who is Being Evaluated?
Post-Evaluation of Entire Project	Language access experience; perceived experience of Field Researchers	Paper	Qualitative short answer	At end of Convening 2	Interpreters
Research Liaison Field Notes	Experience of Research Liaison of TA encounter; perceived experience of Field Researcher	Electronic questionnaire	Short answer template	Post Convening 2	Research Liaisons
Post-Evaluation of Entire Project	Lessons learned	Electronic questionnaire	Qualitative short answer	Post Convening 2	Project Staff and Research Liaisons

The Pragmatics of Language Justice

Inter-group or collective communication at in-person trainings, webinars and convenings often required trilingual interpretation and translation in English, Spanish and ASL. For trilingual webinars, PowerPoints were presented on a single but divided screen in English and Spanish. An interpreter sat with Spanish-language Field Researchers at their site in order to interpret in Spanish and also interpret in English when Spanish speakers wished to communicate. For Deaf Field Researchers, the webinar also included simultaneous captioning so that they could follow the training dialogue and the use of the chat function so that they could communicate with questions and comments.

Tri-Lingual Webinar (English, Spanish & ASL)

Critical Components:

- Webinar screen divided into English PPT side-by-side with Spanish PPT
- Accompanying materials available in English and Spanish
- On-screen captioning at bottom of screen in English for Deaf participants
- On-screen simultaneous subtitling at bottom of screen in Spanish
- Spanish/English Interpreter at site of Spanish speakers
- ASL Interpreter at site of Deaf participants
- Chat available for all – but necessary for Deaf participants to ask questions and give comments
- Chat – monitored in English by Project Staff and in Spanish by a second Spanish/English interpreter

At the individual field research sites, Field Researchers also grappled with language issues within non-English speaking communities where data collection, data analysis and reporting might be done both in English and in a non-English language. For example, surveys written by the Korean American Coalition to End Domestic Abuse (KACEDA) were in Korean and English. Research findings from the Sikh Family Center were translated into Punjabi for their community audience. For the research of DeafHope, the presentation of preliminary findings at Convening 2 relied upon simple headings written in English (and translated into Spanish) on PowerPoint slides. However, findings were shared in ASL in front of the audience and interpreted by ASL interpreters into verbal English which was then interpreted into Spanish.

The above examples illustrate the ways in which the Project dealt with the issue of interpretation/translation and, more generally, came to understand these as issues of language justice. Project Staff and Research Liaisons also realized that despite their experience in language access in Asian immigrant settings and, in the case of one of the Research Liaisons, in Latinx settings, this experience was helpful but not necessarily sufficient. Nor was experience in language access or readiness to learn a substitute for researchers being culturally informed and language proficient members of the community being researched.

English – Spanish Glossary of Research Terms

English	Spanish
advocates / domestic violence advocates	Defensores de los derechos de la comunidad, defensores de la comunidad en el ámbito de prevención de violencia doméstica
capacity-building / build the capacity of	Desarrollo o formación de capacidades
CBPR Liaison	Enlace de CBPR
CBPR Principles	Principios de CBPR
co-create knowledge	Crear conocimiento en conjunto
co-learning	Aprendizaje en conjunto
Codes / code book / coding data	Códigos / libro de códigos / codificación de datos
Community-based participatory research (CBPR)	Investigación Participativa Basada en la Comunidad (CBPR, por sus siglas en inglés)
consent form	Formulario de consentimiento
convening	Convenio
Convening / Closing Convening / Opening Convening	Convenio / Convenio Final / Convenio Inicial
Data	Datos
Data analysis / qualitative analysis / quantitative analysis	Análisis de datos / análisis cualitativo / análisis cuantitativo
Data collection	Recolección de datos
Disseminating / dissemination of research	Difusión / Difusión de la investigación
Field Researchers / Field Research team	Investigadores(as) de Campo/ Equipo de Investigadores de Campo
Findings	Hallazgos o resultados de la investigación
Focus group / focus groups	Grupo de enfoque / grupos de enfoque
Focus group guide	Guía para el grupo de enfoque
In-depth interviews	Entrevistas en profundidad
Intersectionality	interseccionalidad
Interview guide	Guía para las entrevistas
Liberated research	Investigación liberada
marginalized communities	Comunidades marginalizadas

English	Spanish
multiple/intersecting identities	múltiples identidades/identidades que se superponen
Project timeline	Cronología del proyecto
Quantitative research	Investigación Cuantitativa
Research findings	Hallazgos o resultados de la investigación
Research liaison	Enlace de investigación
Research methods	Métodos de investigación
Research participants	Participantes en la investigación
Research presentation	Presentación sobre la investigación
Research questions	Preguntas de investigación
Sense-Making Convening	Convenio para Descifrar los hallazgos
story circle	Círculo de Relatos
storytelling	Relato
survey / survey questions	Encuesta/ preguntas de encuesta
Survivor-Centered Advocacy project	Proyecto de Defensa Centrada en la Sobreviviente
survivors / survivors of violence	Sobrevivientes/sobrevivientes de violencia
Sustainability [as in: sustainability of a project]	Sostenibilidad [como en: la sostenibilidad de un proyecto]
Technical Assistance	Asistencia Técnica
Themes / subthemes / thematic analysis	Temas / subtemas / análisis temático
Thought Partners	Colaboradores de Ideas
timeline	Cronología/línea de tiempo
Trauma / trauma-informed / trigger / triggering	trauma / informado por el trauma / detonador / algo que detona
workbook	Cuaderno de trabajo

Consent to Participate in Research
Services for [XYZ Survivors of Intimate Partner Violence]²⁵
[Focus Group Discussion]²⁶

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]²⁷. You were invited to participate because [xxx]²⁸. We would like to hear your thoughts about [xxx].²⁹



²⁵ Title of your research project

²⁶ Name the method you are using, such as focus group, interviews, story circle, etc. *Your consent form will be different for different methods, because the potential risks and protections vary by method. This consent form has been written for focus groups, but you can work with your CBPR Liaisons to create a version for the method you're using.

²⁷ Purpose of your study, using clear and simple language.

²⁸ 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."

²⁹ 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 recorded³⁰, and then typed³¹ 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 Organization³². 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 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 you³³.

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³⁰ Say whether it will be audio recorded, videotaped, etc.

³¹ Or if you're not recording, say that you'll take notes.

³² 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.

³³ It's important to have a counseling referral ready for any participant who needs it, and ideally on-site counseling or support, if possible.

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]³⁴.

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 others³⁵.

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.

We will not ask for your name or other information that might identify you³⁶. 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]³⁷, 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 participants³⁸.



³⁴ 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.”

³⁵ Include this if any of the researchers is a mandatory reporter.

³⁶ 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.

³⁷ Put the names of the research team members who will have access to the focus group data.

³⁸ 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.

Will I be paid for participating in this study? Will my costs be covered?

You will receive [xxx]³⁹ for being in this research study. In addition, we will reimburse you for [xyz]⁴⁰.

Whom can I contact about this study?

If you have any questions, concerns or complaints about this study, please contact [XXXX] at [XXXXX]⁴¹.

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

Signature of Facilitator / Person Obtaining Consent

Date



³⁹ Describe what the participant will receive for participating, e.g., value of gift card, etc.

⁴⁰ Describe what else you will provide or reimburse for, e.g., child care, transportation stipend, etc.

⁴¹ 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).

SCA Project Training Modules

Activity	Type of Training	Training Methods	Outputs & Outcomes	Participants
Convening 1: Learning about CBPR	In person group convening (trilingual)	<ul style="list-style-type: none"> ▪ Lecture ▪ Small & large group facilitation 	<ul style="list-style-type: none"> ▪ Reactions to Research word cloud ▪ Desired CBPR vision ▪ CBPR Principles and Agreements 	Thought Partners
Training 1: Conducting story circles & Interviews	In person workshop (English/Spanish) + ASL video	<ul style="list-style-type: none"> ▪ Lecture with PowerPoint ▪ Facilitated workshop time 	<ul style="list-style-type: none"> ▪ Storytelling & interviews curriculum ▪ Increased storytelling & interview research skills for Field Researchers 	Interested Field Researchers
Training 2: Ethical considerations in research	Webinar (trilingual)	<ul style="list-style-type: none"> ▪ Webinar lecture using PPT and Q&A (Q&A via audio and chat) 	<ul style="list-style-type: none"> ▪ Research Ethics curriculum ▪ Increased Field Researcher capacity for considering critical aspects of research ethics ▪ Consent forms 	All Field Researchers (required training)
Training 3: Conducting Focus Groups	Webinar (trilingual)	<ul style="list-style-type: none"> ▪ Webinar lecture using PPT and Q&A (Q&A via audio and chat) 	<ul style="list-style-type: none"> ▪ Focus group curriculum ▪ Capacity for Field Researchers to carry out focus group research 	Interested Field Researchers

Activity	Type of Training	Training Methods	Outputs & Outcomes	Participants
Training 4: Presenting Research Findings	Webinar (trilingual)	<ul style="list-style-type: none"> ▪ Webinar lecture using PPT and Q&A (Q&A via audio and chat) ▪ Practice presentations by all Field Researchers 	<ul style="list-style-type: none"> ▪ Draft presentations for Convening 2 ▪ Preparation and guidance for presenting at Convening 2 	All Field Researchers
Field Research Workbook	Dissemination of Workbook	<ul style="list-style-type: none"> ▪ Accessible workbook customized to Project and Field Researchers 	<ul style="list-style-type: none"> ▪ Written curriculum (English and Spanish) for research planning & implementation ▪ Increased Field Researcher capacity for planning & implementing research 	All Thought Partners and Field Researchers
Ongoing Technical Assistance	In-language virtual or in person communication with Field Researchers	<ul style="list-style-type: none"> ▪ Flexible depending upon needs of Field Researchers and field research project 	<ul style="list-style-type: none"> ▪ Site-specific support on research design and implementation, data collection, documentation, analysis and reporting 	All Field Researchers by site
Convening 2: Presenting findings & sense-making	In person group convening (trilingual)	<ul style="list-style-type: none"> ▪ Lecture ▪ Small & large group facilitation ▪ Gallery visualization and discussion 	<ul style="list-style-type: none"> ▪ Final presentations ▪ Sense-making data ▪ Synthesis of findings ▪ Graphic illustration of convening 	Field Researchers, Thought Partners, Gathering Strength & BSAV funders



Out of a rich, complex array of specific post-it responses, we agreed on the following functional group names that are not intended to oversimplify experiences or overlook intersectional realities. Group names were easier to arrive at when considering who those people might turn to for support, and why (e.g. people who are convicted of crimes not wanting to access traditional mainstream shelter, or LGBTQ people not wanting to access faith-based or mainstream straight programs, or youth wanting to go to other youth or youth program workers, not advocates who work only with adults). The groups identified are listed below with transcriptions of each post-it in how participants described “survivors”.

Interpersonal Violence

Survivors of domestic violence, people who have experienced direct violence, survivors of emotional and mental abuse reached out, broken cycle of violence, survivors of violence in any type of relationship, people struggling through crisis, physical abuse survivors, mental abuse survivors, individuals who have witnessed or vicariously experienced violence, abused/assaulted with physical, emotional, sexual, financial and psychological abuse, survivors of crime, physical trauma survivor, mental trauma survivor, survivors of sexual assault/abuse, survivors of DV/SV/SA/SH/ST/HT, emotional trauma survivor, emotional abuse survivor

People without language access

LEP people, Deaf persons who are not proficient in English, people denied their native language, LEP victims of domestic violence, people who don't speak English

People who are criminalized



People in immigration detention, survivors being criminalized/prosecuted, currently incarcerated survivors, incarcerated survivors, those convicted of a crime, children and incarcerated survivors, minors in immigration detention centers, people who have been criminalized/ incarcerated/ detained/ deported, folks harmed by the state and institutions, formerly incarcerated survivors, people incarcerated, people incarcerated for protection themselves or their children from DV/SA/CM/ST/HT, people charged or convicted of crime, people convicted of crimes, incarcerated youth, youth on probation, women with ankle monitor because of immigration

People who are targets of racism and/or colonialism

People with multiply marginalized identities, underprivileged community members – generations of trauma still striving for tomorrow, those experiencing institutionalized oppression, residents of South L.A., women of color, marginalized people – ignored and dismissed, people of color, black people, indigenous folks, folks of color, indigenous people, sovereign indigenous women/LGBTQ people

Mostly women and girls

Women, people overwhelmingly women of all ages, mostly cisgender and trans women survivors of cisgender men’s violence, women, girls trained to accept violence, professional women/LGBTQ, women, women victims of domestic violence, women of all races, ethnicities, cultural backgrounds, women of all sexual orientations and socioeconomic status

Documented and undocumented immigrants and refugees

Undocumented immigrants, immigrants and refugees, undocumented folks

LGBTQ people –inclusive of people of different gender identities and/or different sexualities

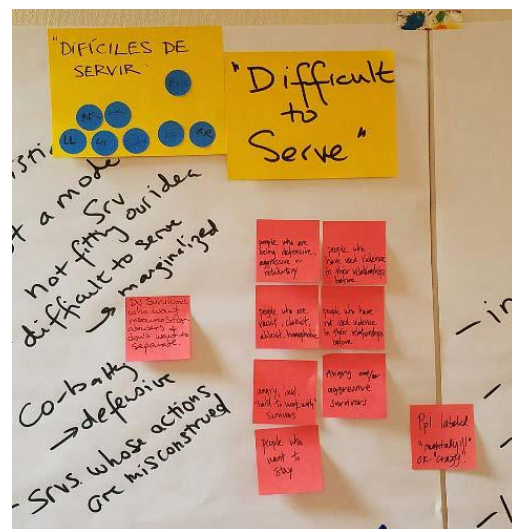
LGBTQ, cis lesbians and queer women, transgender, sexual minorities, cisgender gay men, queer people, LGBTQ survivors, LGBTQ people, genderqueer people, young people who show gay tendencies, LGBTQI folks, trans people, queer, trans women, trans men, gender non-conforming folks

People living with disabilities

People with disabilities, people living with different abilities, disabled people, people living with chronic illness, folks with different abilities, people living with different abilities, Deaf community

“Hard to work with” survivors

DV survivors who want resources for abusers and don't want to separate, people who are being defensive, aggressive or retaliatory, people who are racist, classist, ableist, homophobic, angry loud, “hard to work with” survivors, people who want to stay, people who have used violence in their relationship before, people who have not used violence in their relationships before, angry and/or aggressive survivors, people labeled “mentally ill” or “crazy”



Children and youth

Youth, children living in violent homes, homeless youth, young men (9-14), foster youth, victims of domestic violence with children, children, children who do not fit in, children who experience violence, children who have no one to tell, children, child sexual abuse survivors, children, unaccompanied minors from C. America fleeing emotional trauma, DV, and war, children of survivors of DV, children of victims of DV homicide, children

Elderly

Elderly, elderly, grandparents, elderly, mothers and grandmothers

People struggling with mental health challenges and/or addictions

People living with mental illness, people with situational depression, people with mental illness, people with mental health and instability, people addicted to substances

People who do not use current services

People who do not want formal services, survivors of DV/SA who don't seek services, survivors of DV/SA who don't know about services, people who do not (or cannot) want to leave their violent relationships, people who want to have violent relationships, victims of DV who are confused, depressed, ashamed, have guilt, survivors of DV/SA who would be/are turned away from services, people who want formal services, survivors of DV/SA who seek services

Some cisgender straight men

Men, men, some cisgender straight men, boys trained to become violent

People with diverse socioeconomic realities

People at every level of poverty and wealth, homeless people, people who do not know how to read or write, people at every level of formal education

Parking Lot

People who've experienced vicarious violence, pregnant people, people not in current crisis, married victims of domestic violence, survivors with certain kind of privilege, people who love their pets, survivors who do not have immigration and financial program, complicated, board members, staff and volunteers of anti-violence programs, single people of all ages, people working in social justice movements, resilient, those seen as least powerful



Considerations for “Mainstream” Organizations Budgeting for the Integration of Culturally-Specific Work

Created by the Asian Pacific Institute on Gender-Based Violence and Casa de Esperanza: National Latin@ Network for Healthy Families and Communities
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Domestic violence homicide cuts across a diversity of victims, perpetrators, and communities, yet prevention and intervention strategies are challenged to meet that diversity. Mainstream organizations have tried very hard to make cultural competence a priority in their work. There have been well-intended attempts to diversify staff, to integrate regular cultural competence trainings for staff and volunteers, and to create programs that specifically serve unserved/underserved communities. But is cultural “competence” enough? Furthermore, the reality is this: these valiant efforts on the part of mainstream organizations tend to fall short in the eyes of culturally diverse communities. Mainstream organizations can’t be everything to everyone, and they cannot be thought of as the only solution to providing accessibility to potentially life-saving services.

Historically, grassroots community-based organizations that reflect, and leaders whose identity is representative of, the racially and ethnically diverse populations being supported and served have existed. However and unfortunately in many cases, they have not been recognized by or supported with resources from national, state, or local entities. As a result, mainstream organizations have witnessed the genesis of culturally-specific organizations or learn of informal work happening in the community. Within this current economic and political climate of scarcity, naturally, a tension begins to arise. So, with little to no control over the real availability of fiscal resources, how do we, as a collective, mitigate this tension while also providing culturally responsive services?

In order to ensure that racially and ethnically specific populations have access to programs and services that promote and provide strategies that redress historical, generational, and current trauma and victimizations, mainstream organizations should make cultural responsiveness a priority in their work. In the context of the Domestic Violence Homicide Prevention Demonstration Initiative, cultural responsiveness can be thought of as a set of behaviors on the part of practitioners, providers, system players and/or organizations that maximize racially and ethnically diverse communities’ ability to benefit from their services. These behaviors can include: understanding of racially and ethnically diverse communities’ values, definitions of

help, understanding of their social context, help-seeking behaviors, barriers to service delivery, and service needs. Practitioners and organizations that are culturally responsive are knowledgeable and intentional about addressing the issues faced by the racially and ethnically diverse communities they interact with.⁴² Cultural responsiveness can also be thought of as mainstream entities' willingness to acknowledge and uplift existing supports and sometimes informal services already happening in communities, often displayed through the sharing of resources – monetary and otherwise.

General Considerations for Collaborating and Compensation for Cultural Responsiveness

Relevance: Each partner, including non-traditional or non-organizational culturally-specific partners, is an integral piece of the work. We should operate under the assumption that if any one entity were non-essential, they wouldn't exist.

Compensation: If partnering with organizations or with individuals in the community, you should always make space in your budget to compensate these partners financially, or some other way that is equivalent to financial compensation.

Parity: Parity must be considered across all culturally-specific partners and "mainstream" partners. Culturally-specific partners must not be paid less than what a "mainstream" organizational partner would be paid to do the same work.

Type and Scope of Work: Compensation should be commensurate with the type of work being done and the scope of work being done. You would look at what different types of work are worth – not defined the way society defines it, but in terms of what that work is worth to the success of your project, and what the work is worth relative to your organizational mission.

Ways to Think about Compensation

Sub-contract: Creating a sub-contract with a culturally-specific partner organization is the gold standard, and should be considered first whenever possible. This is a way to consider paying a partner when you know you will need ongoing support in a particular area (or several areas), with no specific end-date. There are, however, many caveats to this option, and your ability to enter into a sub-contract agreement with another entity may depend on many things, including but not limited to the restrictions of the funding entity, internal fiscal capacity, internal policies

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⁴² Adapted by the Institute on Domestic Violence in the African American Community. <http://www.idvaac.org/media/pubs/SuperVisitBook.pdf>. Accessed February 7th, 2015.

and procedures, etc. Once all of these factors have been considered, and a sub-contract still seems like the best option, the way that payment to the sub-contractor will be made can take the form of any of the options described below, that should be decided on a case-by-case basis.

Hourly rate: An hourly rate should be used if the partner has an existing hourly rate (Ex: an independent contractor or consultant who charges a fee for service); or for the type of organizational or individual partner who will be working for a specific time period on a time-limited project.

Example 1: You would like to ask for a culturally-specific organization to provide a representative to sit as a member of the DVHRT. Any team member would be asked to participate in team meetings and other team-related work for approximately 10 hours per month at a rate of \$50 per hour for a total of 24 months (10 hrs x \$50/hr x 24 months).

Each partner organization, regardless of the organization type (culturally-specific or otherwise) would be paid \$12,000 over the course of the 24 month period.

Example 2: You identify a language need for a training that your organization will be providing in the community. This involves finding a competent interpreter, perhaps two interpreters if a session will be longer than two hours, or if a session is in a group setting where there will be cross-talk. The local community may have preferred interpreters with established rates, but it may also be necessary to make an assessment based on an interpreter's previous employment, certification or training. As a basis, a non-certified interpreter averages rates of about \$40.00 per hour. A state certified or provisionally certified interpreter should be compensated at a rate of no less than \$50.00 per hour.

Lump sum: This is a way to consider paying a partner when you either: 1) may not have the amount of funds you would like to have available for this purpose and need to divide up funds equally among multiple partners; OR 2) when you are uncertain of the number of hours this partner will be contributing and are therefore unable to calculate an hourly rate.

Example: You would like for several culturally-specific organizations to provide at least one representative each on the culturally-specific planning team. This team will act in an advisory capacity, will meet with the model teams on a semi-regular basis, but the exact amount of time and scope of work is still yet to be determined. You would like for these organizations to be compensated and have \$15,000 to devote to this piece of work. You may want to dedicate a lump sum of \$5,000 to each organization for a specific time period (per grant year, or per grant cycle, for example).

Stipend: This is something that can be considered similarly to option #1 in the lump sum category, OR if you are looking to provide an incentive for some type of participation, usually in a one-time or extremely short term capacity.

Example 1: Culturally-specific listening sessions or focus groups will be conducted in the community where your program will be implemented. To highlight the importance that you place on this important community feedback, to send the message that you value people's time and expertise, and to encourage people's attendance at these community meetings/sessions, you will give each attendee a \$75 gift card/cash card, or \$75 cash, depending on your what your internal fiscal protocols and your funder(s) require/will allow. You may advertise this compensation, and it should be provided to attendees on the same day of their participation, usually as they are walking out of the session. Please keep in mind whatever might be happening politically in the community surrounding particular vendors and be sensitive to that when determining which vendor you will purchase gift cards from. 50 participants total receive \$75 each for 1 community session = \$3,750. Often, when listening sessions are conducted in the community, a follow up validation session may be conducted to ensure the feedback the facilitators heard was accurate. Participation for this validation session should also be compensated, but can be compensated at a lower rate, and with just a cross-section of participants. According to the earlier example: 50 participants receive \$50 each for 1 validation session = \$2,500.

Example 2: Organizations that hire bilingual speakers often use them to interpret in addition to their regularly assigned work tasks. Mainstream organizations generally recognize these individuals as a resource to meet their own interpretation needs. This forces the bilingual speaker to take on tasks and responsibilities above and beyond their regular scope of work without receiving any additional compensation. When looking to hire a bilingual staff member who will likely be asked to interpret in addition to their normal work tasks, you may want to budget for a bilingual stipend as an incentive for this additional work. Further, mainstream organizations using bilingual speakers from other organizations to interpret should consider paying those bilingual staff at similar rates to what you would pay for a hired interpreter, or consider some other type of comparable compensation.

In-kind: This can be thought of like a barter system. Community partners can contribute X to your project, and you will contribute Y to theirs. This should be a service that is generally above and beyond what you consider a normal part of doing business, and something that you may normally have to pay for.

Example: Individual from Organization A comes and trains Organization B's staff/volunteers in cultural competency free of charge (a service that might normally cost Organization B \$X), and a certain number of staff/volunteers from Organization A are able to attend Organization B's training for free (attendance that would normally cost \$Y for Organization A).