Sustainable, Empowering Organizational Model
for Intimate Partner Violence Services

by
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The Clinical Research Project is a graduation requirement for MSW students at St. Catherine
University/University of St. Thomas School of Social Work in St. Paul, Minnesota and is conducted within
a nine-month time frame to demonstrate facility with basic social research methods. Students must
independently conceptualize a research problem, formulate a research design that is approved by a research
committee and the university Institutional Review Board, implement the project, and publicly present the
findings of the study. This project is neither a Master’s thesis nor a dissertation.
Abstract

IPV refuges are an important resource for those wishing to free themselves from IPV violence, but only if they truly empower the IPV survivor by not replicating the control and power differentials from which they are fleeing. Early feminist grassroots activists actively fostered empowering helping relationships in the organizational model of collectives which espoused equality, participatory decision making, and interpersonal relationships. Due largely to funding pressures, collectives were gradually replaced by the hierarchal organizational model found in refuges today. Many worry that most IPV organizations today may actually pose a barrier to the empowerment of survivors. This research project explored the question “What would an organizational work model for an IPV refuge look like that could provide sustainably funded, best practice services to survivors while holding paramount the early battered women’s movement ideals of equality, inclusive decision making, and empowerment?” The conceptual framework that was used to inform this study was empowerment; operationally defined as the process of acquiring power to direct and control one’s own life. The research design was a qualitative structured theoretical analysis, drawing heavily from the systematic review methodology. A search of the literature was performed after specific inclusion criteria and search strategies were defined. Findings included major and minor themes related to helper relationships, and an analysis of sustainable funding models. A theoretical model of an IPV refuge was created from the findings, and implications for social work practice and further research was discussed. A call was made for taking the next step by developing a social enterprise business plan and seeking funding to test the model.
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Intimate partner violence (IPV) is defined by the Centers of Disease Control and Prevention (CDC) as “physical, sexual, or psychological harm by a current or former partner or spouse” (Injury Prevention and Control, n.d.). One in three women and one in four men reported experiencing sexual assault, physical violence, and/or stalking by a current or former significant other in their lifetime according to the NISVS survey (2011; Lowery, 2011). These statistics do not include any psychological harm that occurs without accompanying physical or sexual assault.

Victims of IPV come from every sociodemographic category. They also differ widely in the amount of support and services they require (Jonker, 2012). Health impacts to IPV victims can include physical injury, post-traumatic stress disorder, asthma, diabetes, irritable bowel syndrome, frequent headaches, chronic pain, difficulty sleeping, activity limitations, and poor physical and/or mental health (Survey, 2011). Economic costs exceed “$5.8 billion each year, $4.1 billion of which is for direct medical and mental health services” (Domestic Violence Facts: Minnesota).

IPV emergency shelters and transitional housing are an important resource for those wishing to break the cycle of abuse. As of September 12, 2012 there were 1,924 identified domestic violence programs, including emergency shelters and transitional housing, in the United States and its territories (‘12 Domestic Violence Counts National Summary, 2012). In a one day census performed by the National Network to End Domestic Violence (NNEDV), 35,323 domestic violence victims were served by 1,646 domestic violence emergency shelters or transitional housing programs (2012). Yet despite these resources, 40% to 60% of women who attempt to separate from their abusive partners return to the circumstances they left (Ben-Porat, 2008).
In the United States, battered women’s emergency shelters first emerged in the 1970’s as a feminist grass-roots response to a growing awareness of domestic violence (Ben-Porat, 2008; Gengler, 2012). Second wave feminism\(^1\) envisioned a world where “‘...women were revalorized, fully integrated and set free from male domination ...’” (Dobash, 1992, p. 15). The feminist anti-rape movement first articulated that violence against women was a form of social control perpetrated not just by individual men, but by the patriarchal society that sustained “domination based on relationships of unequal power” (Schechter, 1982, p. 34). The early battered women’s movement drew heavily on the knowledge and experience acquired by activists involved in the anti-rape movement, while differentiating from them by using the term “battered women” to designate violence within the home (Dobash, 1992; Schechter, 1982). Some of the earliest shelters such as Women’s Advocates in St Paul, MN actually developed when women who participated in consciousness raising groups identified battering as a social problem and decided that “something” must be done (Dobash, 1992; Schechter, 1982).

While not all women involved in the battered women’s movement were feminists, early shelters often espoused the feminist principles of equality, inclusive decision making, and empowerment of the women they served (Gengler, 2012; Itzhaky, 2005). These feminist principles were developed as a reaction to the perceived abuse of power experienced in the male dominated hierarchal organizations of the day. “Because male domination often inhibited women from talking and taught them to doubt their abilities, the women’s liberation movement emphasized egalitarian and participatory

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\(^1\) Historically, the feminist movement in the West is divided into three waves: the first wave of feminism (late 19th – early 20th century) focused on suffrage; the second wave of feminism (beginning in the 1960’s) focused on social equality; and the third wave of feminism (beginning in the 1990’s) is “informed by post-modern thinking” and “shuns... artificial categories of identity, gender, and sexuality” (Rampton, 2008).
organizational models” (Schechter, 1982, p. 33). Whether identifying as feminists or not, early battered women activists found common ground in an IPV response that provided alternatives to the domination and control experienced by survivors at the hands of their abuser. Thus, early battered women’s shelters were often organized as non-hierarchal collectives (Schechter, 1982; Tierney, 1982).

As the movement gained legitimacy and support, many organizations that did not share in the feminist ideology began to provide services for battered women (Schechter, 1982). While many professionals contributed to the early battered women’s movement as primarily unpaid activists, when the funding base for IPV services expanded, professionals whose primary interest in IPV was as an occupation became involved (Dobash, 1992). Thus began the shift from predominately non-hierarchal, volunteer managed shelters to more hierarchal, professionally managed shelters as grassroots organizations found themselves in competition for funding with more traditional operations. Funders were normally more comfortable with the hierarchal organizational model where there was a clear line of authority for the accountability of funds (Schechter, 1982). Grassroots organizations were often pressured (overtly or covertly) to adopt a more heirarchal and professional model of operation in order to continue to provide services (Gengler, 2012; Rudrappa, 2004). Melbin (2003, p. 458) elaborated that “[p]rograms continually face[d] the challenge of complying with funders’ directives while adapting to meet the changing and unique needs of each battered woman they serve.” Several of the more well known shelters survived as collectives into the 1980’s (Schechter, 1982), but I am not aware of any IPV shelters currently operating as collectives.
In addition to the organizational structure changing, so did the emphasis of societal responsibility for IPV transform into an emphasis on individual responsibility. Social work professionals brought to the work of IPV the medical model of practice, where the survivor who had just needed a helping hand was re-defined as the victim or client that needed services and counseling to fix her personal pathology (Kanuha, 1998; Schechter, 1988). Even though the feminist language of empowerment was commonly used, feminist principles appeared to be taking a back-seat to the more pragmatic concerns of “professional commitments and the organizational need to maintain order” (Gengler, 2012, p. 502). Instead of participatory decision making where the residents were in charge of making and enforcing house rules, there was a high level of policies and practices aimed only at behavioral restrictions as a condition for staying in shelters (Hartnett, 2010). Many worry that the professional organizational model found in most IPV organizations may actually pose a barrier to the empowerment of survivors; that these models pathologize and infantize the victim, becoming just another form of social control (Hartnett, 2010; Melbin, 2003; Rudrappa, 2004; Schechter, 1982).

The purpose of this study is to explore the possibility of creating an organizational model that could incorporate the empowering egalitarian ideals of the early battered women’s movement into the funds driven task environment of the IPV response today.

**Literature Review**

In order to explore the possibility of creating an organizational model that could incorporate the empowering egalitarian ideals of the early battered women’s movement into the funds driven task environment of the IPV response today, this paper will first review the conceptual framework that will inform this study. Then using literature
written from the 1980’s to the present, the relative benefits and short-comings of non-hierarchal versus hierarchal organizational models will be considered; the schism between the grassroots volunteer and professional work models including their various effects on empowering (or dis-empowering) women will be reflected upon; and a contemporary model of an IPV response that incorporates feminist principles will be examined. Finally, the basic funding conundrum that contributes to the difficulty of maintaining an IPV response informed by those empowering egalitarian ideals will be examined.

**Conceptual Framework**

The conceptual framework that will be used to inform this study is empowerment. Braithwaite in the Encyclopedia of Psychology (2000) discusses that because the concept of empowerment has been used in so many contexts it is difficult to operationalize and is easiest to conceptualize in its absense. “Empowerment is the antithesis to powerlessness” (Braithwaite, 2000, p. 193). Generally, empowerment means to develop the capacity to acquire power to direct and control one’s own life. Braithwaite remarks that the term empowerment “has been used synonymously with such measures as coping skills, mutual support, social support systems, personal efficacy, competence, locus of control, self-esteem, and [positive] self-concept . . . ” (2000, p. 193). Empowerment challenges the assumption that power is a zero-sum commodity; that an increase of power to one person or group necessitates a reduction of power for another person or group (Braithwaite, 2000). It also rejects “blaming the victim” and looks for structural and systemic explanations for social problems (Braithwaite, 2000, p. 194).
Power and Control

IPV is essentially about power and control. Whether victims have been designated battered women or the experience described as domestic violence, family violence, or more recently intimate partner violence, the stark reality entails one intimate partner who uses violence (physical, sexual, mental, emotional and/or financial) to assert and maintain power and social control over the other partner (Domestic Abuse Intervention Project; Thomas, 2014). Today’s favored term of “intimate partner violence” acknowledges that IPV can happen to either women or men; and in either same-sex or heterosexual relationships (George, 2014).

What sometimes gets blurred in this attempt at inclusion is that IPV is still essentially a women’s social issue and affects far more women than it does men (Minaker, 2006). Second wave feminists of the 1970’s defined domestic violence as a women’s issue, holding sexism and patriarchy responsible for its prevalence (Schechter, 1982). Even in recent studies that claim the female initiation of violence in relationships equals that of men, it is acknowledged that women still experience the greater physical and emotional harm (Minaker, 2006). Emery (2011) posits that this is due to power differentials influenced by three factors: the social impact on relationship norms that legitimates male power; the relative larger average size and strength of men to women; and the societal inequality which often leave women with greater walk-away costs. Thus IPV for women, who experience less social power and often have less physical resources, becomes a method of social control (Schechter, 1982)

Empowerment

As IPV is essentially about taking away power and control from the victim, any
effective IPV response should return power and control to the survivor (Itzhaky, 2005; Rudrappa, 2004). As has been noted earlier in this paper, 40% to 60% of women who attempt to separate from their abusive partners return to the circumstances they left (Ben-Porat, 2008). Characteristics of women who return to abusive partners include “low self-esteem, a sense of helplessness, and passivity” (Itzhaky, 2005, p. 40). Thus, if shelters are to be effective in helping break the cycle of violence they must focus on women’s need for empowerment (Ben-Porat, 2008; Rudrappa, 2004) including “strengthen[ing] women’s confidence in their ability to function independently” (Itzhaky, 2005, p. 40).

Studies of women’s satisfaction with their refuge experience (refuge includes both shelters and transitional housing) highlights the need for women to participate in “decision making and planning in their daily lives” (Ben-Porat, 2008, p. 603; Melbin, 2003). Finally, it is important to note that any effective response must be flexible enough to accommodate the varied needs and experiences of IPV survivors. The “one size fits all” mentality must be fought (Cerulli, 2012; George, 2014), particularly when working with cultural differences experienced by women of color (Schechter, 1982).

**Feminist Egalitarian Ideals and Empowerment**

Consistent with the concept of empowerment, early battered women’s shelters were inspired by the collective model of “women working together and respecting one another” (Schechter, 1982, p. 98). Emphasis was placed on residents strengthening residents. The non-professional non-hierarchal model viewed survivors not as clients, but “participants in a joint struggle” (Schechter, 1982, p. 4). As they worked together, making decisions on a consensus basis, they were able to demonstrate an alternate working relationship based on an equality of power (Leghorn, 1976; Schechter, 1982).
Non-Heirarchal vs. Hierarchal Organizational Model

**Non-heirarchal model.**

Radical feminists were often the first to organize battered women’s services. As feminist ideals espoused equality, participatory decision making, and interpersonal relationships, the early shelter organizational models were largely non-hierarchal (Itzhaky, 2005; Schechter, 1982). Women’s Advocates, Inc., for instance was originally organized as a collective. Not all persons concerned about battered women were feminists, however. Nor were all women who found refuge in the shelters (Schechter, 1982; Tierney, 1982). For these women, building shelters was about providing a safe refuge for women. Many of these non-feminist activists rejected the feminist analysis that patriarchy was the root cause of violence against women (Schechter, 1982). Despite differing ideologies, early battered women activists encountered agreement in that “battered women faced a brutality from their husbands and an indifference from social institutions that compelled redress” (Schechter, 1982, p. 54). Feminists and non-feminists also found common ground in an IPV response that provided alternatives to the domination and control experienced by survivors at the hands of their abuser. Thus, the non-hierarchal organizational model found proponents in the non-feminist grass roots neighborhood models as well (Schechter, 1982; Tierney, 1982). Two notable examples of this were La Casa de las Madres, and some grass roots neighborhood shelters in Idaho. La Casa de las Madres had written into the original proposal that “there would be no separation between staff and resident . . . that the residents would, hopefully, by the end of the first year, become staff” (Segovia-Ashley, p. 104; as quoted in Schechter, 1982, p. 57). The Idaho shelters were run by volunteers with no overnight staff and espoused self-
help and peer support. Local communities aided survivors by providing housing and jobs. (Schechter, 1982).

Unfortunately, the collective model had its drawbacks; the primary one being how much time it takes to get work done when you are using consensus decision making. Consensus decision making works best when there is already a high degree of ideological and political agreement as well as shared respect (Berger, 1981; Schechter, 1982). It does not work well when conflicts need to be resolved. The collective model also has been criticized for its weak internal accountability; as power tends not to be truly neutral but collects around persons with more capabilities and/or time (Berger, 1981; Schechter, 1982). This unequal power often goes unacknowledged in a collective setting, resulting in covert power struggles to the detriment of the organization (Schechter, 1982). Then there is the issue of shared work and rewards. Deeply suspicious of hierarchal leadership roles, second wave feminists sought to limit power accruing to the few by rotating leadership and work tasks within the collective (Schechter, 1982). Yet all persons do not have the same abilities. Collectives began to examine whether it was really in the best interests of the organization to rotate tasks (Schechter, 1982). After all, a person who is gifted at securing funds for the organization may not be best used taking her turn at laundry. But if tasks are allocated according to interests and abilities, power may be accrued due to the inequalities of the societal valuation that is associated with each task. While collectives tried to address this issue by pay being allocated according to need rather than status, raising money for the organization would still have a much greater social cache than doing laundry (Schechter, 1982). The greater social value, the greater danger of accruing power that could be abused.
Still, with all the challenges pertinent to the collective model, both Women’s Advocates, Inc. and Transition House maintained their collective status into the early 1980’s, becoming models for the entire country (Schechter, 1982; Tierney, 1982). For organizations who want to preserve the collective ideal, care must be taken to place it within an organizational model that encourages accountability, long term organizational planning and task accomplishment. A balance must be achieved between staff specialization and a focus on equality in both inter-staff relationships and relationships between staff and survivors (Schechter, 1982).

**Onset of the hierarchal model.**

Many factors drove what some would say was the inevitable shift away from the non-hierarchal organizational model established in the early shelters. Some shelters opted to adopt a hierarchal work model as a way of accomplishing tasks more efficiently or because they lacked experience with the non-hierarchal organizational model (Schechter, 1982). As the battered women’s movement gained legitimacy, established social service organizations with their hierarchal organizational models already in place began to offer services to battered women (Kanuha, 1998; Schechter, 1982). Sometimes funding sources would dictate that the organizational structure of a shelter must include a board of directors and/or an executive director (Goss, 2007). By the early 1980’s only a few battered women’s organizations had held onto the collective model (Schechter, 1982).

The hierarchal organizational model does have advantages; tasks are accomplished more efficiently and power structures are apparent, offering clear accountability to funding resources (Schechter, 1982). The primary criticism of the
hierachal organizational model as an IPV response is that “women as a group learn fewer skills, gain less self-confidence, and must again defer to the authority of others – a poor model for battered women” (Schechter, 1982, p. 98).

**Grassroots Volunteer vs. Professional Work Models**

**Grassroots volunteer work model.**

The first IPV response in the United States occurred in the early 1970’s by mostly feminist survivors coming together in a grass roots effort determined to “do something”. Volunteers would run 24 hour crisis lines from their homes in an attempt to provide support; resource referrals to callers; and the attempt to redefine the social problem of battering into a social movement; (Schechter, 1982). It quickly became apparent to these women that resources to aid IPV survivors simply did not exist (Schechter, 1982; Tierney, 1982). Women’s Advocates in St Paul Minnesota, established in 1972 as a crisis line, was one of the first of those that evolved into a shelter in 1974 as volunteers began to shelter survivors in their own homes (NonProfitOffice.com, n.d.). Transition House in Cambridge Massachusetts began in 1975 when two women survivors offered their apartment as shelter to other battered women (Above the Fold, LLC, 2014). In 1976, La Casa de las Madres had a more traditional opening in San Francisco, California (La Casa del las Madres, 2014). After 1976 hundreds of battered women’s service organizations emerged, many of them run primarily by volunteers (Dobash, 1992; Kanuha, 1998; Schechter, 1982). While professionally degreed women were part of the movement, most were involved as participants in and spokeswomen for the fledgling movement, rather than paid employees of any given shelter (Dobash, 1992). As such they were committed to the ideals of the battered women’s movement first, using their
professionally obtained skills to support and shape the movement (Kanuha, 1998).

**Professional work model.**

As the battered women’s movement gained legitimacy and funding became available to pay employees, what Dobash (1992, p. 47) terms “occupational” professionals joined the effort; law, social work, and research professionals entered the arena primarily seeking jobs. Dobash asserts that these professionals were mostly concerned with establishing the “relevance of their profession in responding to the new problem and [in] establishing the necessity of having their members built into required staffing for shelter programmes” (1992, p. 47) with little interest in the feminist analysis of violence against women. The clinical social work perspective in particular, with its alignment with the medical model of psychology that reduced social ills to individual pathology, was particularly contrary to the feminist perspective (Dobash, 1992; Kanuha, 1998). Soon social workers became the archetype of the insensitive professional (Kanuha, 1998) as they developed a reputation for being “uncaring, uninformed, and unhelpful to battered women” (Danis, 2003, p. 216).

The medical model was not the only cause for the schism between grassroots activists and social work professionals. Kanuha (1998) notes that class tensions could account for much of the recurrent strain between grassroots activists and professional social workers. Many of the grassroots activist spokeswomen were white, middle class women with multiple degrees. Espousing a strong feminist rhetoric did not jeopardize their livelihood, whereas that rhetoric was “antithetical to the academic preparation and career expectations that accompanied the profession of social work prior to and during the early years of the battered women’s movement” (Kanuha, 1998, p. 8). Working class
social work professionals needed the money and the stability that traditional social service organizations provided so were reluctant to identify fully with the movement (Kanuha, 1998; Schechter, 1988).

**Grassroots activist / professional schism.**

Whatever the source of the schism, the divide between grassroots activists and social work professionals has been well documented in all Western domestic violence movements (Kanuha, 1998). According to Dobash, the schism boils down to two different orientations; the grassroots feminist perspective that espouses a “social movement seeking social change for all women and improved conditions for those who are abused” or the professional perspective of providing “a social service [with] individual assistance and / or therapy for a few” (1992, p. 46). These different orientations embody the dualities expressed by the hierarchal nature of the therapist / client relationship on the professional side versus the mutuality of those who work and those who live in the refuge on the grassroots feminist activists’ side; the professional’s emphasis on individual pathology complete with victim blame, versus the grassroots feminist activists’ assumption that the battered woman has a great capacity to effect change in her own life if offered adequate resources; and the professional’s “normalizing tendencies associated with middle-class conceptions based on the therapist as a model,” versus the grassroots feminist activists’ “recognition that success and development must be assessed relative to the circumstances and possibilities associated with the concrete position of women” (Dobash, 1992, p. 221). To the grassroots feminist perspective, “Battering was an integral part of women’s oppression; women’s liberation its solution” (Schechter, 1988, p. 302). Even within the movement, social work professionals were
divided; some agreeing with the grassroots feminist perspective and others ascribing the cause of domestic violence to family pathology, yet those that identified most closely with their profession advocated “providing traditional, ‘quality’ services to women based on a separation between helper and client” (Schechter, 1988, p. 302). Professional values, formed shortly after the turn of the 20th century when social work was fighting for its identity as a profession, “emphasized helping the ‘needy’”, thus making it easy to relegate the battered woman to the role of helpless ‘victim’ (Schechter, 1988, p. 306). In addition, within the social work profession, “[t]he pervasive influence of psychological explanations for social problems . . . [d]efined battered women as a mental health issue” (Schechter, 1988, p. 306).

Fundamental to the schism was the movement’s ambivalence to the role that professionals should take. On the one hand, professionally degreed women could lend their expertise and legitimacy to fund raising efforts, could play a protective role for marginalized populations, and working class women desired professional status for the control it gave them over their professional lives (Dobash, 1992; Kanuha, 1998; Schechter, 1988). On the other hand, professional status permits and encourages domination” (Schechter, 1988, p. 307). As the funding base for battered women’s shelters grew and more and more traditional social service agencies offered services, the grassroots feminist analysis was largely overtaken by the medical model of the social work profession in many shelters (Dobash, 1992; Kanuha, 1998; Schechter, 1982; Walker, 2002). “With no reference point to a larger women’s progressive, or even self-help movement, it was easier for many committed people to turn shelters into traditional, professional social service agencies” (Schechter, 1982, p. 312).
While many people maintain that this schism between grassroots feminist activists and social work professionals continues into the present day (Danis, 2003; George, 2014; Walker, 2002), Kanuha (1998, p. 14) claims that “[t]he decades long tension between professionals and non-professionals is essentially a non-issue today. Why? Because almost everyone from the men’s group therapist to the shelter director to the legal advocate is now a ‘professional.’” Dobash argues that the question of grassroots versus professional should not be “so much a question of the exclusive presence of one group or the other, but, rather, of how they combine and what they strive to achieve” (Dobash, 1992, pp. 46-47). Kanuha appears to agree with this analysis as she expositis, “. . . social work . . . [is] still the field of practice that offers the best analyses and promise for social change. We began as activists and our work is deeply ingrained in those foundations” (1998, p. 16). Today’s clinical social work values include “social justice” and the “dignity and worth of the person” (NASW Delegate Assembly, 2013), both components of the essential mindset of grassroots feminist activists of the early battered woman’s movement. The Domestic Abuse Intervention Project is an excellent example of grassroots feminist activists’ and clinical social work professionals’ collaboration (Kanuha, 1998). Together they to developed an effective IPV response that continues into the present day.

**Domestic Abuse Intervention Project (DAIP)**

The Domestic Abuse Intervention Project (DAIP), sometimes called the Duluth model, is one instance in which a community integrated the feminist perspective into a coordinated IPV response that included grassroots feminist activism as well as professional expertise. The impetus for DAIP occurred in 1978 when Cindy Landfried
shot and killed her abusive husband, but was not indicted for murder by a grand jury, fueling intense debate within the Duluth, MN community (Pence, 1999). At the same time, activists were searching for a community to start an experimental “proactive domestic assault intervention plan” (Pence, 1999, p. 151). Shelter advocates in Duluth persuaded the activists that their city was ripe for just such an effort. Starting with forming an autonomous coordinating agency, over the next 15 years the “local shelter movement, criminal justice agencies, and human service programs” developed “a system of networks, agreements, processes and applied principles” where the overriding concern was securing the safety of battered women (Pence, 1999, p. 150). Perhaps best known for its batterer education programing, DAIP has been called the "most successful justice project in the United States" (Dobash, 1992, p. 180) because of the legal penalties given to batterers for not completing the program. Still, the educational programing is only a small part of the whole. Its multi-system, collaborative approach “has been cited as one of the most effective interventions for domestic violence” (Kanuha, 1998, p. 15). DAIP considers that all of the work they do falls under one of “eight essential activities” (Pence, 1999, p. 155). Pence (1999) explains that the first activity is to coordinate a coherent philosophical approach with the many agencies and programs, keeping victim safety as the paramount goal. She goes on to describe the remaining seven activities as developing best practice policies and protocols; reducing the fragmentation of the IPV response in the community; building monitoring and tracking into the system; ensuring a supportive community infrastructure with appropriate resources for the battered woman; intervening directly with abusers to deter violence; undoing harm to women and children affected by the batterer’s violence; and evaluating the community IPV response from the
perspective of the victim. "DAIP organizers stress that women's safety depends on having intervention practices which are rooted in how women experience violence and not simply how the legal system abstractly defines violence" (Pence, 1999, p. 157).

DAIP has been successful in several ways. From 1982 to 1984 “there was a 47 percent reduction in repeat [domestic disturbance] calls . . . , a reduction in assaults in the home . . . , and injuries to police officers were reduced to zero” (Dobash, 1992, p. 180). Perhaps equally important has been the shift in perspective; “[r]ather than seeing violence in the family as merely a 'domestic' problem arising from pathological individuals or dysfunctional families, battering is now seen as a criminal offence. The violence is also seen in a more feminist manner, as attempts by men to establish and maintain control in their relationships with women” (Dobash, 1992, p. 180). DAIP does not consider their work done, as they have “ongoing discussions between criminal and civil justice agencies, community members and victims to close gaps and improve the community’s response to battering” (What is the Duluth Model?, 2011).

The Funding Conundrum

While DAIP continues to provide a coordinated community response to IPV in Duluth, MN to this day (What is the Duluth Model?, 2011), the model has not spread throughout the country as originally hoped. To understand why such a markedly successful IPV response has not become the standard IPV response in every community in the US, one must understand the role that funding plays in the process.

The first battered women’s shelters survived by staffing with volunteers and appealing directly to their communities for the limited funds it took to provide food and shelter for the women who sought refuge from IPV (Dobash, 1992; Schechter, 1982).
Schechter (1982) documents shelters in Idaho, for example, that had yearly budgets as low as $700 per year. She notes that even Women’s Advocates, one of the earliest shelters to establish legitimacy, had to engage in a never-ending struggle to obtain funding. For women whose primary concern was to change the social order they felt perpetuated domestic violence, spending so much time securing the funds to keep the shelters open was an energy drain (1988). Still, while funding was uncertain, grassroots organizations were free to maintain their feminist ideals of equality, inclusive decision making, and empowerment (Schechter, 1982).

As the battered women’s movement gained momentum and legitimacy, many private and public funding sources began to fund shelters (Goss, 2007). This was a mixed blessing however, as often funders exerted a sometimes subtle (and sometimes overt) control over what priorities got funded and how organizations operated (Dobash, 1992; Goss, 2007). Many funders prioritized helping “the needy” or “helpless victims” (Schechter, 1988, p. 306) and defined battered women through an individual pathology mental health lens, the antithesis of the feminist analysis (Walker, 2002). Other funders directed what kind of organizational structures would be funded. Still other funders restricted the use of funds for activities that would induce social change like community education (Schechter, 1982). Grassroots organizations often faced the dilemma of being able to provide needed services to battered women albeit in compromised form, or having to close the shelter altogether from lack of funds (Gengler, 2012; Rudrappa, 2004). Most chose to provide the services.

Now over thirty years later, funding sources still largely determine what domestic violence services are prioritized (Goss, 2007). In this era of scarce resources, best
practices are often subsumed by necessity (Melbin, 2003), and there is concern that our current response to IPV is ultimately ineffective. Walker (2002, p. 101) expresses this concern when she notes that despite thirty years of effort, “women abuse in the world has not been significantly reduced.” Early feminists blamed capitalistic patriarchy for the battered woman’s plight and fought to create a solution by advocating an egalitarian and participatory social and economic structure (Schechter, 1982). Current best practices embrace a complexity of explanations and the need to have an individualized IPV response to meet the heterogeneous needs of survivors and their abusive partners (George, 2014; Walker, 2002). Both approaches are hampered by the pressures of having enough of the right type of funding.

**Summary**

This literature review has described IPV as being caused essentially by an imbalance of power within the partner relationship. Women bear the far greater burden of harm of IPV due to power differentials influenced by society’s legitimization of male power, the relative larger size and strength of men to women, and societal inequality that gives women the greater walk-away costs. Early feminist battered women’s activists recognized that the only IPV response that made sense was to empower battered women, or find ways for them to acquire power to direct and control their own lives. They created non-hierarchal refuges for battered women that emphasized neutral power and mutual helping relationships run primarily by volunteers. As the battered women’s movement gained legitimacy and established social service agencies began to offer services, these non-hierarchal, non-professional refuges began to be replaced by the more conventional hierarchal, professionally run refuges. Early professional social work
values favored the medical model where family violence was explained in terms of individual pathology. Funding played a large role in which organizational and work models have survived to the present time, as currently there are no refuges that survive as collectives. A successful model of coordinated community IPV response integrating a feminist perspective with current best practice professional expertise has been developed, but due to the scarcity of appropriate funding has not spread throughout the nation. Therefore, I propose to research the question, “What would an organizational work model for an IPV refuge look like that could provide sustainably funded, best practice services to survivors while holding paramount the early battered women’s movement ideals of equality, inclusive decision making, and empowerment?”

Methods

The Methods section will present how the research project will answer the question, “What would an organizational work model for an IPV refuge look like that could provide sustainably funded, best practice services to survivors while holding paramount the early battered women’s movement ideals of equality, inclusive decision making, and empowerment?” This section will include a discussion of the research design chosen, the data inclusion criteria and search strategies, and the strategy for the abstraction and organization of the findings. Finally, the strengths and limitations of the chosen research methodology will be discussed.

Research Design

I have chosen to use a qualitative structured theoretical analysis, drawing heavily from the systematic review methodology, to answer the research question, “What would an organizational work model for an IPV refuge look like that could provide sustainably
funded, best practice services to survivors while holding paramount the early battered women’s movement ideals of equality, inclusive decision making, and empowerment?” Qualitative research with its inductive approach is well suited to the constructivist epistemology that “human phenomena are socially constructed rather than objectively ‘real’” (Paget, 2008, p. 7). A qualitative approach therefore, is called for as this research project will attempt to construct a theoretical organizational work model drawn from a systematic review of the available literature. A systematic review is a relatively new research methodology that seeks to “minimize bias using explicit, systematic methods [to] collate all evidence that fits pre-specified eligibility criteria in order to address a specific research question” (Higgens, 2001, p. 1.1). A systematic review utilizes specific literature inclusion criteria as well as a laid-out search strategy to find that literature and a well-defined method of organizing and distilling the information found in the literature (Higgens, 2001).

**Data Collection**

In order to answer the research question, “What would an organizational work model for an IPV refuge look like that could provide sustainably funded, best practice services to survivors while holding paramount the early battered women’s movement ideals of equality, inclusive decision making, and empowerment?” it was first broken down into two smaller questions: “What helper relationship, or work model would best empower IPV survivors?” and “What organizational model could provide sustainable funds to an IPV response centered on a refuge whose ideals include equality, inclusive decision making, and empowerment?” For the purposes of this research project, the helper relationship is operationalized as that relationship which exists between staff
and/or volunteers at the refuge and the IPV survivor who lives at the refuge. It may also include supportive relationships with fellow IPV survivors within the refuge. Empowerment is operationalized as the process of acquiring power to direct and control one’s own life. The term refuge is operationalized as either an emergency IPV shelter or IPV transitional housing. A full response to IPV involves more than just services extended to women in shelters and transitional housing (Dobash, 1992; Schechter, 1982), but the focus of this research project is limited to constructing an organizational model that can be applied to those places where women seek refuge from the violence in their homes as they try to re-build their lives. Both emergency shelters and transitional housing are included in the analysis, because while each has unique challenges they share a common orientation of providing a safe environment for women fleeing from the powerlessness and social control of IPV. To simplify language within this paper the British term “refuge” (Dobash, 1992) is used to describe both types of facilities unless the material warrants more specificity.

**Inclusion criteria.**

For the first sub-research question, “What helper relationship, or work model would best empower IPV survivors?” the objective was to review 1) all qualitative studies 2) that examine the helper relationship 3) within the context of a refuge 4) in the United States 5) that draw conclusions about what empowers female IPV survivors 6) between the years 1975 to the present. As mentioned earlier, qualitative studies have the greatest ability to examine socially constructed human phenomena (Paget, 2008) such as helper relationships. And while the research question presumes that the early battered women’s movement ideals of equality and inclusive decision making lead to greater
empowerment of IPV survivors, it is important to not only test that assumption, but to examine what those relationships based on equality and participatory decision making may look like. As the literature review has established that while men may experience IPV, the level of harm women experience is far greater (Minaker, 2006), it makes sense to limit studies to those which examine empowerment in connection with women. Studies made within the context of a refuge and within the United States will be most consistent with the desired outcome of a theoretical organizational work model that can be employed in a refuge in the United States. What may work well in some other political and/or cultural climate may not work at all in the United States. Studies that draw conclusions about what empowers IPV survivors will be most useful in an analysis of what to include in the theoretical model. Helping relationships have evolved greatly since the inception of the battered women’s movement. By including any studies that may have been done in the early years, this research project may be able to examine helper models that might not be in existence in later literature.

For the second sub-research question, “What organizational model could provide sustainable funds to an IPV response centered on a refuge whose ideals include equality, inclusive decision making, and empowerment?” the objective was to review all 1) qualitative studies, 2) program evaluations with a qualitative component, and 3) theoretical papers 4) written within the last ten years that 5) evaluate egalitarian, participatory decision making organizational structures, 6) are self-funding in a capitalist economy, and 7) have a social justice outcome focus. As the idea of obtaining funding within an organization is relatively new, in order to obtain the most recent data, the inclusion criteria had to be expanded to include program evaluations and theoretical
papers. This is not inconsistent with the systematic review method as long as the
evaluation of the methodology stays consistent with the more traditional peer reviewed
journal articles (Higgens, 2001). Ten years encompassed most of the literature that was
written on this subject. As the purpose of this paper is to not just find an organizational
model that can fund itself, but can do so using the early battered women’s movement
ideals of egalitarianism and participatory decision making, only evaluations of
organizations with both the ideals and the self-funding will be included. It is also
important to look at evaluations of organizations that have a social justice outcome focus
as that provides additional challenges for organizations that an IPV refuge would have to
face also.

**Search strategy.**

For the first sub-research question, “What helper relationship, or work model
would best empower IPV survivors?” a series of eight searches were made in each of two
electronic databases (for a total of 16 searches) accessed through the UST library website
(Social Work Abstracts and SocINDEX with Full Text). Search one (S1) used the search
terms *domestic violence AND empowerment*; search two (S2) used *intimate partner
violence AND empowerment*; search three (S3) used *battered women AND
empowerment*; search four (S4) used *family violence AND empowerment*; search five
(S5) used *domestic violence AND helper relationships*; search six (S6) used *intimate
partner violence AND helper relationships*; search seven used *battered women AND
helper relationships*; search eight (S8) used *family violence AND helper relationships*.
For the second sub-research question, “What organizational model could provide
sustainable funds to an IPV response centered on a refuge whose ideals include equality,
inclusive decision making, and empowerment?”, a series of searches were made within each of two electronic databases (Business Source Premier and Inter-university Consortium for Political and Social Research) accessed through the UST library website. After doing some initial exploratory searches using the terms non-profit AND egalitarian AND sustainable funding; non-profit AND participatory decision making AND sustainable funding; business AND egalitarian AND social justice; and business AND participatory decision making AND social justice; and finding no usable articles, I broke the searches into smaller pieces and used seven alternate searches in only the Business Source Premier database. Search one (S1) used the terms business model AND egalitarian; search two (S2) used business model AND participatory decision making; search three (S3) used business model AND social justice; search four (S4) used business model AND non-profit; search five (S5) used business model AND sustainable funds; Search six (S6) used non-profit AND self-funded; and search seven (S7) used non-profit AND sustainable funds. After duplicates were discarded, titles and abstracts were examined to eliminate any articles that obviously did not meet the inclusion criteria. For the remaining articles, the full article was quickly scanned to more fully determine if each one met the inclusion criteria. Decisions to discard an article at this point were documented in a research journal. The remaining articles were then printed out to prepare for data abstraction.

**Data Abstraction and Analysis**

Each article that met the selection criteria was thoroughly read and the pertinent information was highlighted. Upon careful examination of the remaining articles, several more articles were found that did not meet the inclusion criteria and were
discarded. Again, these decisions were recorded in the research journal. Information collected from the remaining articles were entered into a tabled Word document. For the first sub-research question (on helping relationships) the table cells headings are Citation (including year of publication) Research Design, Study Validity, Type of Refuge, the Refuge Location, Helper Relationship (including whether professionals, grassroots activists, or volunteers were involved), and Conclusions (the study conclusions about whether the relationship examined is an empowering one). This table can be found in Appendix A. For the second sub-research question (organizational model) the table cell headings are Citation (including year of publication) Research Category (qualitative research, program evaluation, or theoretical paper) and Design (where applicable), Research Validity, Context (what is the research examining), Description of Model, Achievement of Project Focus (how well the organizational model achieves egalitarianism and participatory decision making in a the social justice focus) and Evaluation (an evaluation of whether this model could be applied to an IPV refuge). Appendix C contains this table.

Once the information was organized into tables, the information in each article was organized into yet another table by themes for each sub-question (Appendix B and D). This information was then used to explore possible answers to the primary research question and inform the construction of a theoretical organizational model for an IPV refuge that could provide sustainably funded, best practice services to survivors while holding paramount the early battered women’s movement ideals of equality, inclusive decision making, and empowerment.
Strengths and Limitations

One of the primary strengths of qualitative research is that you can explore social phenomena that is not yet fully understood (Paget, 2008) and expand the boundaries of social thought. A systematic review of the literature on a topic is a qualitative research technique that can bring the results of multiple studies to answer questions that are not fully answered by any one of the studies individually. By building in the inclusion criteria before looking at the articles, a measure of objectivity is built in to what is essentially a subjective process. Adding the theoretical analysis to the study is powerful in that it is possible to make a logical extrapolation to build a model that could then be tested more empirically in the next round of research.

One of the greatest limitations of creating a theoretical organizational and work model from existing research, is that little research has been conducted into developing a multi-cultural understanding of empowerment. More specific research into what empowers women of color in the context of IPV would need to be performed before the model constructed from this paper could be generalized into multi-cultural populations. Limitations also include the basic subjectivity of the methodology, and the fact that the final result of this paper is still only theoretical.

Findings

As outlined in the methods section, the primary research question of “What would an organizational work model for an IPV refuge look like that could provide sustainably funded, best practice services to survivors while holding paramount the early battered women’s movement ideals of equality, inclusive decision making, and empowerment?” was broken down into two sub-research questions: “What helper relationship, or work
model would best empower IPV survivors?” and “What organizational model could provide sustainable funds to an IPV response centered on a refuge whose ideals include equality, inclusive decision making, and empowerment?” For each research question, a series of searches for journal articles were performed within databases accessed by the UST library web site. A full description of the searches used was detailed in the methods section. This section will present the findings from those articles.

**Findings for the First Sub-Research Question**

For the first sub-research question, “What helper relationship, or work model would best empower IPV survivors?” eight searches were performed in each of two databases (a total of 16 searches) using various combinations of the terms *domestic violence, intimate partner violence, battered women, family violence, empowerment* and *helper relationships*. A complete explanation of these searches is found in the methods section. A total of 847 articles were found to meet the search criteria. After a cursory examination of titles and the removal of duplicates, 71 articles remained that might possibly meet the inclusion criteria that had been established in the methods section. Further examination of abstracts reduced that number to 19 articles. At this point each article was opened and examined to see if it met the inclusion criteria of 1) all qualitative studies 2) that examine the helper relationship 3) within the context of a refuge 4) in the United States 5) that draw conclusions about what empowers female IPV survivors 6) between the years 1975 to the present. Any article that did not meet the inclusion criteria was discarded, and the reason that it was discarded was noted in the project research journal. A total of only five articles remained that fit the complete inclusion criteria. All articles were then read carefully, and pertinent information was highlighted. A Word
document table (Appendix A) was created to document the findings, and an additional Word table (Appendix B) was created to organize the findings. Five articles published between the years 1991 and 2012 were found to meet the project’s inclusion criteria. A summary of these articles is found in Table 1.

**Table 1. Summary of Analyzed Articles for First Sub-research Question**

<table>
<thead>
<tr>
<th>Citation</th>
<th>Research Design</th>
<th>Refuge Type and Location</th>
<th>Helper Relationship</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Srinivasan, 1991)</td>
<td>Qualitative Participant observation</td>
<td>Shelter Location unknown</td>
<td>Fifteen paid and 40-50 volunteer staff. Staff hierarchal relationships minimized to run like a hybrid collective. Residents had no input into shelter decisions</td>
</tr>
<tr>
<td>(Lempert, 1997)</td>
<td>Qualitative Semi-structured interview Self-selected sample</td>
<td>Outreach ancillary to shelter US</td>
<td>Informal helper</td>
</tr>
<tr>
<td>(Parsons, 2001)</td>
<td>Qualitative Focus group Semi-structured interview of participant sample</td>
<td>DV support group Location unknown</td>
<td>Professional facilitation of group Peer support</td>
</tr>
<tr>
<td>(Melbin, 2003)</td>
<td>Qualitative Semi-structured interview</td>
<td>Shelter Transitional Housing Six programs in one mid-western state</td>
<td>Varied from “authoritarian” to “supportive”</td>
</tr>
<tr>
<td>(Gengler, 2012)</td>
<td>Qualitative Participant observation Semi-structured interview of participant sample</td>
<td>Shelter Midsize city in Southeast</td>
<td>Empowerment rhetoric Staff enforced rules by use of a point system</td>
</tr>
</tbody>
</table>

**Themes.**

Three major themes emerged from an analysis of these five articles: helper relationships, empowerment, and self-definitions. A major theme was designated if three or more articles of the five discussed the topic. Four minor themes, designated if at least two of the five articles discussed the topic, also emerged; services, value of refuge, rules, and power.

**Helper relationships.**

Four out of the five articles explored helper relationships, and what relationships are most helpful to women IPV survivors. Lempert (1997) focused on informal helping
relationships; Melbin (2003) and Srinivasan (1991) focused on helper relationships within the context of a refuge, and Parsons (2001) focused specifically on what helper relationships empowered IPV survivors. All of the articles concluded that collaborative, supportive, and respectful relationships were the most helpful. Melbin (2003) noted that “women who mentioned that their advocates were empathic and flexible and provided practical assistance were the most likely to rave about the program’s effectiveness” (p. 452). Lempert (1997) noted that women experienced other’s belief in them as supportive. Parsons (2001) explained that “the members of DVS valued having a place to talk where what they said was treated with respect and responded to, not ignored or depreciated” (pp. 169-170). On the other hand, the bureaucratic structure of the agency that Srinivasan (1991) observed “inhibited the development of reciprocal relationships between the staff and the residents from which both could have gained” (p. 53).

**Empowerment.**

Of the four articles that discussed empowerment, three of the four pointed out behavior that was not empowering. Gengler (2012) observed that empowerment rhetoric that focuses on women’s personal choices implies that the woman has “failed to take control of her life and must be taught how to do so. This is particularly true for women who are seen as ‘victims’” (p. 517). Srinivasan (1991) noted that the ideology of her study’s shelter was that violence was a learned behavior, it had a cycle, and that empowerment of women would break the cycle (thus focusing on individual learning and choices, and largely ignoring the larger social context). Lempert (1997) added to the argument of what does not empower women by pointing out that reductionist definitions of abuse increase women’s confusion. “Abused women live in a social ‘Catch 22’, that is
they are held complicit in the abuse for their continuing presence in the violent relationships versus their own recognitions that violence is only one aspect of a complex multidimensional relationship that also includes significant acts of love and affection” (Lempert, 1997, p. 297). Only Parsons (2001) focused on practice behavior that empowers. She claimed that the women in her study confirmed that

\[ \ldots \text{empowerment processes for women arise from belonging to a community based on commonality and interdependence, not independence. This experience is consistent with the idea that women’s development occurs in and through the healthy expression of emotions in relationships with others} \ldots \] (Riger, 1993 as quoted by Parsons, 2001)

suggested a perspective that moves empowerment beyond the unrestricted exercise of personal choice to an appreciation of collective good and social responsibility. The voices of these women support the importance of the collective in empowerment models for work with women (Parsons, 2001, pp. 176-177).

So while empowerment rhetoric that focuses on individual choices takes away from the empowerment of women, practice behavior that incorporates interdependence becomes truly empowering. Table 2 further details Parson’s (2001) theory about empowerment practice.

\textit{Self-definitions.}

Three out of the five articles examined the impact that others had on the self-definition of abused women. Lempert (1997) explored this concept in the most detail. She related that just as women experiencing intimate partner violence often were required
Table 2. Components and Processes of Empowerment (Parsons, 2001, p. 165)

<table>
<thead>
<tr>
<th>Presenting Situation (problem)</th>
<th>Environment [cultures and norms]</th>
<th>Practice Strategy intervention</th>
</tr>
</thead>
<tbody>
<tr>
<td>Isolation</td>
<td>Safety, common experience</td>
<td>Having [a voice that was heard and responded to (p. 169)]</td>
</tr>
<tr>
<td>Depression</td>
<td>Opportunities for interaction</td>
<td>Being respected</td>
</tr>
<tr>
<td>Alienation</td>
<td>Mutual Sharing and support</td>
<td>Having helping professionals or peer who believe in you</td>
</tr>
<tr>
<td>Needing community, commonality, and support</td>
<td>Validation – being listened to and accepted</td>
<td>Having to make one’s own decisions and take risks</td>
</tr>
<tr>
<td>Seeking relationship and mutuality</td>
<td>Interdependence [“defined as mutual dependence, assuming responsibility for the well-being of each other, collective support, mutual aid, and problem solving” (p. 168).]</td>
<td>Having an advocate and being an advocate, learning about the social problems one is facing, resolving conflicts successfully, being confronted and challenged, having and being a role model, and trying out new behaviors</td>
</tr>
</tbody>
</table>

...to “acquiesce . . . to their partner’s definition” (Lempert, 1997, p. 293) of themselves and their relationship, so they often found themselves in the same position with those to whom they turned for help. “If the women rejected supporter’s definitions and prescriptions, they were often blamed for continuing in the relationships, for refusing help, for liking the abuse, and so on” (Lempert, 1997, p. 304). Gengler (2012) also likened a women’s IPV experience with the experience she had when she sought help by pointing out that women protected their self-definitions in both situations by practicing resistance within the constraints of the controlling relationship. Melbin (2003) agreed with Lempert (1997) when she asserted that helpers need to acknowledge the individuality of women’s experiences so that the “meanings negotiated . . . include[d] the women’s own interpretations of their experiences. Respondents asked that [helpers] listen and interpret, but not impose their own definitions . . . They wanted definitional
assistance, not definitional oppression – whether framed by others or by their own partners” (Lempert, 1997, pp. 299-300. 302).

**Services.**

Two of the five articles talked about the services that refuges could offer that would be helpful. The strongest finding that Melbin (2003) articulated was that the services that were requested were as individual as the women requesting them. She suggested that for a refuge to truly be responsive to its residents, that they should assess and modify service offerings on a continual basis. Parsons (2001) mentioned that one of the strongest themes in her study was the value of education. One DVS member was quoted to say, “You couldn’t do without the learning about domestic violence. If you don’t have the education, you can’t see what you are doing” (Parsons, 2001, p. 171). Women in the DVS group learned about laws, the prevalence of domestic violence, resources, and about their legal rights.

**Value of refuge.**

Melbin (2003) and Parsons (2001) also wrote about how valuable the refuge was to women fleeing from abuse. Melbin (2003) found that the majority of the women who used transitional housing said that if they had not been able get housing that they would have ended up back with their abusers. Shelters just do not allow enough time to become re-established, as stays at shelters usually do not last longer than 90 days and can be much shorter. The women in the Parsons (2001) study reported “increased self-esteem, self-confidence, and self-efficacy” (Parsons, 2001, p. 175) from participating in DVS, in addition to developing knowledge and skills that helped them to negotiate their immediate world.
**Rules.**

Gengler (2012) and Melbin (2003) both addressed the contradiction of rule-setting in the refuge. While it is acknowledged that the running a refuge involves the challenge of keeping order in a potentially volatile situation, while simultaneously meeting resident’s needs, women showed great variability in the rules that they felt were necessary (Melbin, 2003). “The only rule that received unanimous approval was the one prohibiting assailants from being on the premises” (Melbin, 2003, p. 455). Gengler (2012) argued that rules were often enforced inconsistently, many of the rules were impractical given the realities poor and working class women faced, and that “framing rule enforcement as good for women’s long-term development hid paternalism behind empowerment rhetoric” (p. 510). Largely, women just wanted input into the making of the rules” (Melbin, 2003). An interesting finding was that

in the programs with the most prescriptive and proscriptive rules and expectations of the participants, every woman who was interviewed mentioned at least one incident in which she felt disrespected by the staff.

In contrast, in the one program in which the staff spoke of the importance of being flexible with rules and the staff’s opinions of the program (both what was most helpful and what could be improved), no participant could think of one instance in which she felt disrespected by the staff (Melbin, 2003, p. 457).

**Power.**

Lempert (1997) addressed the unequal power in the IPV system by writing, “this work challenges conventional assistance models, in which the power to decide what
constitutes help and support for abused women has remained largely in the hands of involved activists reacting to institutional violence against women” (p. 307). Srinivasan further elaborates,

*In rejecting traditional hierarchal forms of organization we are left with the question of what to put in their place. No group is structureless and in the absence of formal structure, informal structure will develop which can be even more exclusive as there is no way of challenging them. The answer is not simply to abandon structure but to create structures which enable everyone to participate* (Dixon et al., 1982, pp.61-62 as quoted by Srinivasan, 1991, p.52).

**Findings for the Second Sub-Research Question**

For the second sub- research question, “What organizational model could provide sustainable funds to an IPV response centered on a refuge whose ideals include equality, inclusive decision making, and empowerment?” seven searches were performed in the Business Source Premier database using various combinations of the terms *business model, egalitarian, participatory decision making, social justice, non-profit, sustainable funds, and self-funded.* All searches were limited to the years between 2005 and 2015. A complete explanation of these searches is found in the methods section. A total of 1207 articles were found to meet the search criteria. After an examination of titles, abstracts, and the removal of duplicates, 34 articles remained that might possibly meet the inclusion criteria that had been established in the methods section. At this point each article was opened and examined to evaluate if it met the inclusion criteria of 1) qualitative studies, 2) program evaluations with a qualitative component, and 3) theoretical papers 4) written
within the last ten years that 5) evaluate egalitarian, participatory decision making organizational structures, 6) are self-funding in a capitalist economy, and 7) have a social justice outcome focus. Any article that obviously did not meet the inclusion criteria was discarded, and the reason that it was discarded was noted in the project research journal. A total of ten articles remained that seemed to fit the complete inclusion criteria. All articles were then read carefully, and pertinent information was highlighted. During this process five more articles were discarded, as unfamiliarity with business terms, and multiple usages for the words sustainability and stakeholder caused the initial selection to include articles that did not meet the inclusion criteria. Again, each discard decision was listed in the project research journal. A Word document table (Appendix C) was created to document the findings, and an additional Word table (Appendix D) was created to organize the findings. Four articles published between the years 2012 and 2014 were finally found to meet the project’s inclusion criteria. Due to the paucity of information on this subject I also include an article (Stecker, 2014) that met all of the criteria except an egalitarian or participatory decision making context because it had excellent information on sustainable funding. A summary of these articles is found in Table 3.

**Analysis.**

An analysis of these articles will not fit comfortably into themes, as each article looks at highly different structures in uniquely different ways. As three articles address collaborative leadership models, and two articles address social entrepreneurship, I have organized my analysis according to those two broad categories.

**Collaborative leadership models.**

Three articles out of the five address collaborative leadership models. In the first
Table 3. Summary of Analyzed Articles for Second Sub-research Question

<table>
<thead>
<tr>
<th>Citation</th>
<th>Research Category and Design</th>
<th>Context</th>
<th>Model</th>
</tr>
</thead>
</table>
| (Viader, 2014) | Descriptive                   | Research to determine if for-profit governance structures were influencing non-profit. | Stewardship Theory  
~ Executive are stewards  
~ Key function of board to empower top executive to achieve goals  
~ Decisions are shared by board and executive  
~ Collaborative system  
~ Collectivist approach based on goal alignment and trust |
| (Osula, 2014)  | Theoretical                   | US management theory comparison of for-profit and non-profit            | ~ Non-profit need transformational or “servant” leaders for collaborative leadership in the 21st century. Qualities of such leaders described. |
| (Brewton, 2012)| Case Study                    | Description of shared governance in non-profit hospital which had won the 2002 Nurse Magnet Hospital award. | “The Chief Nurse Executive (CNE) supports a decentralized and participatory management organizational structure by promoting staff autonomy and accountability and facilitating shared governance through committee structure” (p. 40) |
| (Wilson, 2013) | Qualitative Multiple Case Analysis | Describe and analyze social business as a phenomenon. | Six Emergent Propositions  
1. Social mission design principle  
2. Multiple rationales  
3. Deliberately for-profit / not profit maximizing  
4. Need to invent or re-invent business model  
5. Takes patience and time  
Mission aligned capital and governance structures |
| (Stecker, 2014)| Theoretical Persuasion       | Sustainability of non-profits in jeopardy; social entrepreneurship may be the answer. | Five viable social entrepreneur models  
1. Selling of branded merchandise  
2. Fee for service  
3. Non-profit starts a for-profit to fund non-profit  
4. Hybrid business  
5. Social entrepreneurs turn existing non-profit into for-profit social enterprises |

of these, Viader (2014, p. 3), describes a Stewardship Theory of leadership where executives are considered stewards “aligned with the objectives of the principles.” The key function of the board is to “support [the] top executive in developing the necessary
skills and resources to achieve [their] common goals” (Viader, 2014, p. 3). Thus the board acts as a mentor to the executive. In this model decisions are shared between the top executive and the board, and the executive may be a voting member. This model is considered a collaborative system with a collectivist, rather than an individualistic approach, based on “goal alignment and trust” (p. 4).

In line with the first model, the second model by Osula & Ng (2014) proposes the role of a “transformational” or “servant” leader. “The practical application of transformational leadership . . . would focus on activities where followers are empowered, where independent relationships through delegation of authority, training and skills development, access to information and building a culture of support is encouraged and applauded” (Osula, 2014, p. 91). Ten qualities are essential in a transformational leader; that of listening, empathy, healing, awareness, persuasion, conceptualization, foresight, stewardship, commitment to growth of people, and building community (Osula, 2014). Five key dimensions are required in an enterprise that wishes to have a transformational leader: 1) a structure for collaborative decision making and shared power, 2) boundaries and clear roles and responsibilities, 3) to “balance self-interests versus collective interests”, 4) collaboration deeply rooted in interdependence and mutual benefit, and 5) “healthy and supportive interpersonal relationship[s]” (Osula, 2014, p. 92).

The third model has less emphasis on the leadership concept, and more on shared governance. Brewton (2012) describes a system of shared governance found in a non-profit hospital in southern Louisiana, which was awarded the Nurse Magnet award of 2002 for its excellence in patient care and superior environment for professional nurses.
“The Chief Nurse Executive (CNE) supports a decentralized and participatory management organizational structure by promoting staff autonomy and accountability and facilitating shared governance through committee structure” (Brewton, 2012, p. 40). The committee is manned by staff level members which adopts its own charter, elects co-chairs, and controls the agenda and outcomes. Clerks with laptops are assigned to each committee to facilitate task completion. Each committee has non-voting organization leaders as co-facilitators. Key resources are made available at the time of the meetings to promote more efficient decision making. The organizational structure named VOICE (Vital Organization for Inter-disciplinary Culture of Excellence), has succeeded by having a “positive direct impact on six pillars which include service, finance, quality, people, community and growth,” (Brewton, 2012, p. 41); “positively affect[ing] job satisfaction,” (p. 43); and developing future leaders “whether that leadership is realized at the bedside or within an administrative role” (p. 46).

**Social Entrepreneurship.**

Social entrepreneurship is a relatively new phenomenon born out the increasing difficulty to find sustainable funds for non-profits. “With over 1.4 million active nonprofits in the United States, competing for fewer and fewer dollars, organizations must seek new funding sources (Stecker, 2014, p. 349). Wilson (2013) performed a rigorous case multiple case analysis to “describe and analyze the phenomenon of social business” (p. 179). His findings outline six emergent propositions on social entrepreneurship formation: 1. “Social mission as the driving design principle for the social business” (p. 722); 2. “Multiple rationales support the deliberate choice to address social missions through a market-based approach” (p. 723); 3. “Deliberately for-
profit but deliberately not profit-maximizing” (p. 726); 4. “Requirement for business model and value chain invention (or reinvention)” (p. 727); 5. “Social business design and refinement takes patience and time” (p. 728); and 6. “Mission-aligned capital and governance structures” (p. 728). In addition, Stecker (2014) argues that “the current funding model of the nonprofit sector should be disrupted in order to achieve a greater level of financial sustainability and mission driven success” (p. 349). Stecker (2014) offers five viable social entrepreneur models including 1) the selling of branded merchandise, 2) fee for service, 3) a non-profit starts a for-profit to fund the non-profit, 4) hybrid businesses - “for-profit enterprises that integrate social mission with making a profit” (p. 354-355), and 5) “social entrepreneurs who turn existing non-profit social” (p. 355) enterprises into for-profit enterprises.

Discussion

This research project asked the question, “What would an organizational work model for an IPV refuge look like that could provide sustainably funded, best practice services to survivors while holding paramount the early battered women’s movement ideals of equality inclusive decision making, and empowerment?” The research question was broken into two smaller questions, “What helper relationship, or work model would best empower IPV survivors?” and “What organizational model could provide sustainable funds to an IPV response centered on a refuge whose ideals include equality, inclusive decision making, and empowerment?” A systematic review has been performed to answer these questions.

Answering the First Sub-Research Question

Braithwaite’s (2000) discussion of empowerment presented in the conceptual
framework for this research project included “such measures as coping skills, mutual support, social support systems, personal efficacy, competence, locus of control, self-esteem, and [positive] self-concept . . . ” (p. 193). While the number of articles found to meet this project’s inclusion criteria on how to empower women were limited, there was enough consistency of information to support Braithwaite’s premise when answering the first sub-research question of “What helper relationship, or work model would best empower IPV survivors?” Parsons (2001) particularly detailed that helping battered women is best done within an environment of safety and common experience where there are “opportunities for interaction, mutual sharing and support, and validation” (p. 365).

Social work practice strategies should include ensuring that women have a “voice that [is] heard and responded to, [are] . . . respected, hav[e] . . . helping professionals or peers who believe in [them], [are able] to make one’s own decisions and take risks, [and] hav[e] and [experience] being an advocate” (Parsons, 2001, p. 365).

One of the surprising findings that social workers should pay particular attention to is the impact that the helper relationship may have on the IPV survivors’ self-definitions. Consistent with the NASW ethical standard of self-determination (2013, 1.02), Lempert (1997) and Melbin (2003) both discussed how survivors of IPV need helpers that listen and help interpret the woman’s individual experience while not imposing their own self or relational definitions. Thus, a woman who chooses to maintain a relationship with an abusive partner must not be made to feel that she is failing because she does not meet the helper’s expectation that she should get out of the situation. This idea of the helper not imposing her own definitions on an IPV survivor’s experience may be particularly important when dealing with women who come from a
different culture than the helper’s. As little research has been performed into what empowers IPV survivors of different cultural populations, the best way to find out what helps any given woman regardless of race, socioeconomic background, religion, or sexual orientation is to ask, listen, and respond accordingly. The idea that each IPV survivor’s individual experience should be accommodated continues into the minor themes of services and value of refuge. The recommendation is that services should be offered on a non-mandatory basis and adjusted to the needs of the resident population, and that for survivors who wish to leave abusive partners, a refuge with longer residential times is important in the achievement of that desire (Melbin, 2003).

In addition, Melbin (2003) pointed out how the organizational rule structure affects helper relationships when she found that the type of helper relationship was directly related to the organization’s structure.

In the programs with the most prescriptive and proscriptive rules and expectations of the participant, every woman who was interviewed mentioned at least one incident in which she felt disrespected by the staff. In contrast, in the one program in which the staff spoke of the importance of being flexible with rules and the staff’s opinions of the program (both what was most helpful and what could be improved), no participant could think of one instance in which she felt disrespected by the staff (Melbin, 2003, p. 457).

The establishment of many rules, most of which were more directed towards social control than safety, accentuated the uneven power between staff and IPV survivor (Gengler, 2012). If refuges are to avoid perpetuating the social control that most
survivors of IPV are fleeing, they must pay careful attention to eliminating bureaucratic power differentials in both philosophy and practice. Early feminist grassroots activists actively fostered empowering helping relationships in the organizational model of collectives which espoused equality, participatory decision making, and interpersonal relationships (Itzhaky, 2005; Schechter, 1982). However, because collectives had difficulty with conflict resolution, efficiency of task accomplishment, and securing funding, collectives were gradually replaced by the hierarchal organizational model found in refuges today (Berger, 1981; Schechter, 1982). So while it is evident through the research what helper relationship would be most efficacious for women seeking help to remove themselves from IPV, the hierarchal structure and individualistic ideology of most refuges foster the opposite environment and practices (Gengler, 2012; Srinivasan, 1991).

Hope has been offered by the literature towards fostering empowering helper relationships in the refuge of the future. In spite of the limited information available on the subject, the systematic review of literature found two articles that described social enterprises organized around more empowering business models; the cooperative (Wilson, 2013) and shared governance using committees (Brewton, 2012). The cooperative’s organizational structure was not described, so is therefore useless for this paper’s purposes, but the detailed description of shared governance using a committee structure outlined in the findings could be adapted to an IPV refuge. For instance, committee membership that included residents could provide IPV survivors a voice in the operation of the refuge where they lived. Certainly, the hospital’s assertion, “In order for an organization to be fully empowered it [must be] centered around the following four
principles: partnership, accountability, equity, and ownership” (Brewton, 2012, p. 40) fits well with this project’s findings on empowerment.

**Answering the Second Sub-research Question**

This brings us to the second sub-research question, “What organizational model could provide sustainable funds to an IPV response centered on a refuge whose ideals include equality, inclusive decision making, and empowerment?” IPV refuges are not the only non-profit organizations to suffer mission drift due to a scarcity of resources. Stecker (2014) particularly argues that the reliance of non-profit enterprises on philanthropic and government funding cannot be sustained. “With over 1.4 million active nonprofits in the United States, competing for fewer and fewer dollars, organizations must seek new funding sources” (Stecker, 2014, p. 349). He advocates that “the current funding model of the nonprofit sector should be disrupted in order to achieve a greater level of financial sustainability and mission-driven success (p. 349). Yet “the answer is not simply to abandon structure but to create structures which enable everyone to participate” (Dixon et al., 1982, pp. 61-62 as quoted by Srinivasan, 1991, p. 52).

The social enterprise is a new phenomenon (the earliest article to meet the inclusion criteria for this research project was published in 2012), but it seems to be gathering momentum. The word “enterprise” seems to be used to distinguish this organizational philosophy from either traditional for-profit or non-profit organizations. Social enterprises combine a social mission with a for-profit business designed either to fund the social mission or to provide limited profit to socially responsible investors (Srinivasan, 1991). This business philosophy allows greater freedom while providing better funding sustainability for the social mission. As such, this would be a good fit for
a refuge that wanted to be free of the financial conundrum, and re-establish equality, participatory decision making, and interpersonal relationships as the standard for IPV helping relationships. While Stecker outlined five specific models of social enterprises (selling of branded merchandise, fee-for-service, for-profit funds non-profit, hybrid business, and the turning of a non-profit into a for-profit social enterprise), the one that seems most useful for this paper’s purpose is the for-profit that funds a non-profit. The selling of branded merchandise is unlikely to make sufficient funds to fund the depth and variety of services necessary and there is no “product” that the refuge can produce that would allow for a fee-for-service, or a hybrid social business venture. Also, since the end result of turning a non-profit into a social for-profit enterprise is a hybrid social business, the same limitation of not having a “product” to sell eliminates that option also.

Answering the Research Question: A Model

So, what would an organizational work model for an IPV refuge look like that could provide sustainably funded, best practice services to survivors while holding paramount the early battered women’s movement ideals of equality, inclusive decision making, and empowerment? I propose the following theoretical model, based on the information gleaned from this systematic review of the literature, as one possible answer to the question.

Organizational work model – social enterprise.

The refuge should be organized as a social enterprise where a for-profit enterprise funds the non-profit refuge. Individual state laws vary (Stecker, 2014), so each refuge would have to determine whether it is best for the refuge itself to own the for-profit business, or whether the for-profit business and the non-profit refuge should be separate
enterprises bound together by contract. Wilson (2013) emphasizes how important it is to intentionally weave the social mission into the creation of the business plan. “The enterprises describe careful and intentional consideration of multiple stakeholders and their interests – at the point of inception – such that they are broadly and deeply imbedded in the fabric of the business model” (Wilson, 2013). He also emphasizes that the for-profit enterprise’s social mission be aligned with the non-profit’s mission. In a refuge, one good for-profit business that would align with the mission of a refuge would be a therapeutic daycare center, as many IPV survivors have children who have been traumatized by the violence.

**Best practice services to IPV survivors.**

Melbin’s (2003) article offers a number of suggestions offered by IPV survivors for an empowering IPV refuge. In addition to “the combination of a safe home and supportive services, provided by staff in the context of . . . respectful and flexible relationships”, the structure should include a security system, “units in close proximity to each other” (thus promoting community), a secure playground, the ability to own pets, a plan for conflict resolution, and the input of the residents into rules and policies by which they must live (Melbin, 2003, p. 454). Other services should be offered on a non-mandatory basis as need and interest for the services are identified by the residents. In addition, standardized length of stays should be eliminated. Length of stay should be an individualized decision based on the need of the IPV survivor.

**Achieving equality, inclusive decision making, and empowerment.**

Paramount to any organizational structure would be to develop an empowerment philosophy that takes into account the social causes of IPV, as well as what help each
individual survivor of IPV needs in order to be free of IPV. While this philosophy needs to be part of the original enterprise plan as mentioned earlier, it will also be necessary to develop ongoing training and accountability measures to keep this empowerment philosophy always to the forefront. Special attention should be given in those refuges that serve multi-cultural populations to empowerment practices that accommodate the resident’s respective cultures. Leaders motivated by and trained in the “stewardship” or “servant” theory of leadership would help maintain egalitarian policies and limit mission drift by utilizing the ten constituents of transformational leadership: listening, empathy, healing, awareness, persuasion, conceptualization, foresight, stewardship, commitment to growth of people, and building community (Osula, 2014).

Shared governance, using a committee structure like that found in the Brewton (2012) article could be adapted to give the residents of the refuge, as well as line staff, input into enterprise decisions. For instance, it would be possible to develop two committees, one for residents, and one for staff that would have voting rights at board meetings. The non-voting facilitation model would allow leaders to facilitate in the staff committee, and the staff to facilitate in the resident committee, without having undue power to influence the decisions each committee makes. Each committee could choose a person from their ranks to be their voting representative on the board. Depending on the size of the board, the size of the refuge, and the cultural make-up of the refuge population, more than two committees may need to be created to effect a balanced representation of all views. Committees should have true power to affect matters within their own sphere. For instance, refuge residents should have the power to make or reject policies and rules that effect their day to day living, but they would have no power over
specifically employee matters such as the pay scale and employee benefits on which the staff committee may act.

**Implications for Future Research**

It is obvious, from the scarcity of articles found, that this topic is wide open for future research. More work certainly must be done on variations of empowerment practices in IPV refuges based on specific culture. I would also like to see more research into power differentials in refuges, and the effect they have on ultimate outcomes for IPV survivors. As there is no way to research what currently does not exist, a next step could be to find a way to test out the theoretical model proposed by this paper. To aid this process, more research may need to be done into specific business plans that have been successful in other social enterprises.

**Conclusion**

IPV refuges are an important resource for those wishing to free themselves from IPV violence, but only if they truly empower the IPV survivor by not replicating the control and power differentials from which they are fleeing. This research project has explored the question “What would an organizational work model for an IPV refuge look like that could provide sustainably funded, best practice services to survivors while holding paramount the early battered women’s movement ideals of equality, inclusive decision making, and empowerment?” by first performing a systematic literature review. Findings from the literature review were presented, a theoretical model of a refuge that could meet the criteria was created, and implications for social work practice and further research was discussed. As an “increasing number . . . of private foundations and funders are aggressively seeking to support social entrepreneurial ideas” (Stecker, 2014), the next
step might be to use this research to develop a social enterprise business plan and seek funding for such a refuge. Perhaps, one successful refuge that is sustainably funded and serves IPV survivors in an atmosphere of equality, inclusive decision making, and true empowerment would be the model that would inspire a revolution in how IPV services are delivered.
References


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SUSTAINABLE, EMPOWERING MODEL FOR IPV SERVICES


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doi:http://www.wadvocates.org/index.asp?Type=B_BASIC&SEC={1D664209-1B02-4B3F-9A6F-EBFB3DB804EE}


doi:10.3390/adminsci4020087


Appendix A

First Sub-research Question Analysis
**Conclusions**

While the “overarching philosophy” stresses empowerment including in the training of staff, only the employees were empowered by the shelter’s organizational structure. Good delineation of the effect that structure had on staff and residents under Authority, Rules, Social Control, Social Relations, Recruitment and Advancement, Incentive Structure, Social Stratification, and Differentiation.

**Authority:** Staff had authority over residents, and residents were careful about what they said around staff because staff could expel them for being “difficult” (p. 45)

**Rules:** For the residents were the most rigid and hardest part of living at the shelter. From the curfews to the rules on child discipline, residents were not allowed to make their own choices if the wanted to stay at the shelter.

**Social Control:** The shelter’s ideology was that violence was a learned behavior, had a cycle, that empowerment of women would break the cycle (thus focusing on individual learning and choices.) Since the ideology largely ignored the larger social context, the ideology, though shared with residents was not effective in the social control of residents. Instead, the rules and threat of being kicked out provided the social control.

**Social Relations:** Staff and residents each had personal relationships among their respective groups, but very little personal relationships bridged the gap. The one place this differed slightly was were staff were survivors and shared that information with residents. Some residents had a favorite staff whom they felt comfortable with. Staff were not assigned to specific residents.

**Recruitment and Advancement:** Residents could volunteer then become employed by the shelter after “they had demonstrated that they were able to live and work independently” (p. 50). Few residents took advantage of this opportunity.

**Incentive Structure:** Did not effect residents

**Social Stratification:** “Although social stratification was minimized among the staff, the social stratification between the staff and the residents was clear” (p. 51).
Differentiation: Did not effect residents.

“In rejecting traditional hierarchal forms of organization we are left with the question of what to put in their place. No group is structureless and in the absence of formal structure, informal structure will develop which can be even more exclusive as there is no way of challenging them. The answer is not simply to abandon structure but to create structures which enable everyone to participate” (Dixon et al., 1982, pp.61-62 as quoted by Srinivasan, 1991, p.52).

“The emphasis on rigidly applied house rules re-created for many the oppressive conditions from which they had come” (p. 53)

“The bureaucratic structure also inhibited the development of reciprocal relationships between the staff and the residents form which both could have gained” (p. 53)

“The basis of empowering practice is a helping relationship based on collaboration, trust, and the sharing of power” (Gutièrrrez, 1990 p.151 as quoted by Srinivasan, 1991, p.52).

“The residents . . . felt comfortable forming lon-standig relationships with one another that they maintained even after they left the shelter. Perhaps the holistic relationships that the staff members had with one another provided models for residents to emulate” (p. 54)
<table>
<thead>
<tr>
<th>Citation</th>
<th>Research Design</th>
<th>Study Validity</th>
<th>Type of Refuge</th>
<th>Refuge Location</th>
<th>Helper Relationship</th>
</tr>
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<tbody>
<tr>
<td>(Parsons, 2001)</td>
<td>Qualitative; focus groups; in-depth interviews; purposive sampling to find empowerment-based projects; 2 groups; 15 members total; 2 AA; 6 Latinas &amp; 7 white; 7 (3 Latinas &amp; 4 whites) participated in the interviews; socioeconomic ranged from poor to working class to unemployed. Programs had to have specific goals and strategies to achieve empowerment. Groups were selected from 5 programs that participated in a larger study. Transcripts analyzed through a constant comparative method. Research Question: What are the strategies that are used for facilitating empowerment, and how do the participants perceive and experience them? What was it about the experience that facilitated empowerment and development?”</td>
<td>Study met all criteria; criteria stretched as only one of the groups studied were in the context of a refuge, and this Criteria was stretched to include a DVS support group. Included because it asked DVS specifically what empowered them. Generalizable only in that the two group’s had similar responses, and in how the DVS groups match other research. Seems to have good internal validity</td>
<td>DVS support group</td>
<td>US, no specific information on what region</td>
<td>Professional facilitation of group; peer support. Professional was valued as someone who was “there for them when they needed her and who really listened” (Parsons, 2001, p. 167)</td>
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Research Design cont . . .

“How did the women in the groups describe changes or outcomes in themselves as a result of the process?” (p. 162)

Conclusions

Table 1: Components and Processes of Empowerment (p. 165)

<table>
<thead>
<tr>
<th>Presenting Situation (problem)</th>
<th>Environment [cultures and norms]</th>
<th>Practice Strategy (intervention)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Isolation Depression Alienation Needing community, commonality, and support Seeking relationship and mutuality</td>
<td>Safety, common experience Opportunities for interaction Mutual Sharing and support Validation – being listened to and accepted Interdependence [“defined as mutual dependence, assuming responsibility for the well-being of each other, collective support, mutual aid, and problem solving” (p. 168).]</td>
<td>Having [a voice that was heard and responded to (p. 169)] Being respected Having helping professionals or peers who believe in you Having to make one’s own decisions and take risks Having an advocate and being an advocate, learning about the social problems one is facing, resolving conflicts successfully, being confronted and challenged, having and being a role model, and trying out new behaviors</td>
</tr>
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</table>

- “. . .feeling accepted meant feeling understood, not judged; being able to pull off the mask—to be oneself; and not being judged when one reveals oneself” (p. 167).
- “. . .defined validation of their experiences as being confirmed, being heard, and learning that they were not crazy” (p. 168).
- “When others listen to her story and understand what she is talking about because they have experienced the same thing, it seems to normalize the experience and encourages her to trust her own perceptions again” (p. 168).
- *Interdependence* “fosters a new level of responsibility in the participants” (p. 168).
- “The members of DVS valued having a place to talk where what they said was treated with respect and responded to, not ignored or deprecated” (pp. 169-170). – changed how the women viewed themselves and the confidence they felt.
- Helper demonstrates belief in woman “by asking them to do for themselves, challenging them to take risks, and encouraging them to give to others” (p. 175-176).
- Effect of being believed in is to begin to have hope for the future.
- *Education (one of strongest themes)*: DVS member quoted in study “You couldn’t do without the learning about domestic violence. If you don’t have the education, you can’t see what you are doing” (p. 171). Learned about laws, prevalence, resources, and their rights.
- Having an advocate “critical” (p. 172) for learning how to advocate for self. “Advocacy seemed to start with having an advocate, a role model, and then moving to self-advocacy and being an advocate for others” (p. 172).
“Working out differences and learning that conflict can be resolved without violence gave the DVS members confidence in their ability to interact with others and to become more assertive” (p. 172).

Important to learn how to move forward in small steps, even if you don’t know where you will end up.

While the goals of the groups were different, they had a “substantial number of common experiences” (p. 174).

Changes described were “increased self-esteem, self-confidence, and self-efficacy; the development of knowledge and skills to negotiate their immediate world; and their greater propensity to take action and participate in the larger environment” (p. 175).

“Because the lack of voice, isolation, and alienation are common experiences of women, programs for women need to address the need for mutuality, safety, relationship, acceptance, validation, commonality and interdependence” (p. 175).

“The opportunity to work and learn in a mutual relationship with others was essential for the participants” (p. 176).

“. . . empowerment processes for women arise from belonging to a community based on commonality and interdependence, not independence. This experience is consistent with the idea that women’s development occurs in and through the health expression of emotions in relationships with others. . . . Riger (1993) suggested a perspective that moves empowerment beyond the unrestricted exercise of personal choice to an appreciation of collective good and social responsibility. The voices of these women support the importance of the collective in empowerment models for work with women.”
Citation
(Lempert, 1997)

Research Design
Qualitative; in-depth interview; 32 women IPV survivors from male partners. Self-selected respondents from outreach ancillary to women’s shelter; Grounded theory analysis;

Study Validity
Non-generalizable; internally cohesive

Type of Refuge
Outreach

Refuge Location
Unknown

Helper Relationship
Informal helper

Conclusions
“. . . their victimization as female partners appeared to transcend issues of race and/or ethnicity” (p. 292) -- 9 out of 32 self-identified as persons of color. The spread of ethnicity over the 9 may just mean there was no meaningful sample to find differences.

Study focused on other and self definitions. Found the “most women acquiesced to their [partner’s] definition” in public, but resisted the characterizations in private.

“As the violence escalated from verbal to physical abuse, . . . it often became the catalyst for help seeking overtures” (p. 294-295).

As the individual strategies for coping began to fail, women began talking about their experiences with trusted others. “Through the stories they told themselves and others, they sought assistance that would help them make sense of, justify, and legitimate their continuing efforts in the relationships. . . . Their narrations reflected the failures of the binary model of abuse conceptualization, the either/or of staying/leaving, to adequately capture the complexity of these intimate interactions” (p. 295).

Respondents sought help when own resources exhausted, “when they had lost hope in their own efficacy to reduce or eliminate the violence” (p. 296).

Telling others “primary help seeking strategy” (p. 296). Purpose to “generate external involvement and to bring in additional problem solving techniques and perspectives” (p. 296).

Reductionist definitions of abuse increase women’s confusion. “Abused women live in a social ‘Catch 22’, that is, they are held complicit in the abuse for their continuing presence in the violent relationships versus their own recognitions that violence is only one aspect of a complex multidimensional relationship that also includes significant acts of love and affection” (p. 297)

Women look to others to help them re-define the definitional frameworks of their relationships.
What women found helpful:

Other’s belief as supportive. “Respondents asked that [helpers] listen and interpret, but not impose their own definitions. . . . They wanted definitional assistance, not definitional oppression – whether framed by others or by their own partners” (p. 299-300).

“Assistance that was experienced as helpful . . . did not include false promises or totalizing solutions. Effective helpers suggested, but did not demand, alternative actions, additional interpretations and fresh strategies” (p. 300).

“To be experienced as helpful, the meanings negotiated had to include the women’s own interpretations of their experiences” (p. 302).

“Attributing victim status led others to see the women as incapable of managing, or understanding, their own situations without help. . . . As a consequence, the women again lost control over their definitions of self, over interpretations of their experiences, and over their relationships with the men” (p. 302).

Women found they could get help only if they accepted other’s definitions for their experience and acted in the way others wanted them to act, for example, leaving. “If the women rejected supporters’ definitions and prescriptions, they were often blamed for continuing in the relationships, for refusing help, for liking the abuse, and so on” (p. 304). “To alter these outsider definitions while simultaneously cling to their own definitions, the abused women stood in the same relation to their helpers as they stood with regard to their abusers” (p. 304).

“. . . those with personal and/or social power can create and impose their definitions of the situation on others” (p. 306).

“Failure to account for the perspectives of the women results in assistance built on theory, ideology, and/or prior conceptualizations that are not consonant with battered women’s lived experience” (p. 306). “. . . this work challenges conventional assistance models, in which the power to decide what constitutes help and support for abused women has remained largely in the hands of involved activists reacting to institutionalized violence against women” (p. 307)

“It is both ironic and paradoxical that the most efficacious assistance provided by helpers was to honor the women’s often long and frequently frustrating definition-making processes. Helpers had to assist abused women in developing coping and problem-solving strategies for the short term, while maintaining and reiterating their definitions of the abuse as intentional, deliberate, and dangerous” (p. 305).
<table>
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<tbody>
<tr>
<td>(Melbin, 2003)</td>
<td>In-depth, semi structured qualitative interviews; 55 women in 6 TSH programs.</td>
<td>Interviews transcribed and content analyzed by 3 person research team.</td>
<td>Shelter and TSH. TSH scattered sites; one agency was two tiered – certain number of shelter rooms designated as TSH. TSH were one or two year sites.</td>
<td>Midwestern state; 4 of the sites in metropolitan areas; 1 suburban; 1 rural.</td>
<td>Services offered by staff: counseling, support groups, safety planning, practical assistance including transportation vouchers, telephones, referrals, advocacy; case management. Some offered discretionary funds, workshops, recreational activities; and partnerships with community agencies, businesses, and/or housing resources.</td>
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<td></td>
<td>12 in shelters; 20 in TSH; 19 staff. All had dependent children and income eligible for public assistance; not all receiving public assistance. 2 Females trained in DV, interviewing &amp; crisis intervention did interviews; All residents and staff at the chosen locations were given the opportunity to participate.</td>
<td>Credibility enhanced by triangulation; negative case analysis; independent interpretations; external audits.</td>
<td>Eligibility for TSH – TANF eligibility, and other eligibility per site, preference to “motivated” women who had ability to “identify and work on specific goals related to becoming self-sufficient” (p. 449). Denied current substance abuse or severe mental illness.</td>
<td></td>
<td>Rules and Regulations varied from minimal, “related primarily to safety and confidentiality; to quite rigid and invasive such as written documentation of 30 hrs /wk on program activities, and no alcohol, and no overnight guests. Sometimes “strongly encouraged” (read pressured) to participated in non-mandated services they did not feel that they needed like counseling.</td>
</tr>
</tbody>
</table>
Conclusions

Rules: accepted as “part of the program” but felt too prohibitive. Feel not at home. Eg. “Although all the women praised the rule prohibiting assailants on the property, many found the rule about not having people watch their children in the apartment to be especially inconvenient, because it required the women to pack up their children and drop them off somewhere or take them around while they ran errands” (p. 451)

Great variability in the rules women felt necessary. “The only rule that received unanimous approval was the one prohibiting assailants from being on the premises” (p. 455).

Women wanted input into the making of rules. One woman said, “It should be like a small community with internal rules. The women should be involved in decision making and in keeping the area clean and invested in improving their own situation. It would prove to other people that just because you’re in a certain situation, it doesn’t mean that you can’t succeed . . . Everybody is in a different situation, and the rules should reflect those differences. One rule doesn’t apply to every person” (p. 455).

“. . . in the programs with the most prescriptive and proscriptive rules and expectations of the participants, every woman who was interviewed mentioned at least one incident in which she felt disrespected by the staff. In contrast, in the one program in which the staff spoke of the importance of being flexible with rules and the staff’s opinions of the program (both what was most helpful and what could be improved), no participant could think of one instance in which she felt disrespected by the staff” (p. 457)

Safety issues: paramount. Security systems; restricting assailants from property; safety planning, etc. Women in shelter wanted to go into a TSH for safety reasons. “Many women [in TSH] . . . felt safer because, with the support and help of the programs, they were able to regain some of their internal strength. They felt that they had a place to go or someone to talk to if they did not feel safe” (p. 452).

Staff-Participant Relationships: Types of relationships “directly related to the participant’s satisfactions with the TSH programs. Women who mentioned that their advocates were empathic and flexible and provided practical assistance were the most likely to rave about the program’s effectiveness” (p. 452). Where advocates “were viewed as patronizing and authoritarian[,] . . . women . . . were less likely to want to seek services from the programs and were more interested in leaving as soon as possible

~ “Many women mentioned wanting the staff to offer specific help more rather than expect the women to ask for everything” (p. 453).
~ “. . . supportiveness of staff and/ or other women” (p. 453) “most important component”.

“All the women mentioned wanting to be treated like competent adults. Those who were satisfied with the staff often spoke of the degree to which staff members offered support and options, but left decisions up to them. The less-satisfied women tended to describe the staff as judgmental, paternalistic, or ‘on power trips’” (p. 455).

Services: the ones found helpful varied greatly. “It is interesting to note that some of the services that some women thought were the most helpful were rated the ‘least helpful’ by other women. . . . This finding speaks to the unique and varied needs of the individual participants in TSH and suggests that a multitude of services should be made available to women but on a voluntary basis” (p. 453-454).

“. . . it appears to be the combination of a safe home and supportive services, provided by staff in the context of a respectful and flexible relationships, that results in women feeling that they have the ability to get back on their feet” (p. 454).

Suggestions for structure of TSH:

~ Houses
~ Houses in rural areas
~ Units in close proximity to each other
Security system, and bullet proof glass
Secure playgrounds
Allow pets
TSH for women without minor children

Because of limited resources, important that provide only services that are helpful. May have to modify services on continuous basis. Funding sources may impose limits on programs”

(p. 458)

Without Transitional Housing

Majority would have gone back to the abuser or been homeless

“Some women talked of needing the extra time and support, provided by the TSH programs, to gain the strength to stand up to pressure from their assailants (and sometimes their children) to return home” (p. 456).

Individuality of participants

“. . . it is critical that the design of such programs involves the input of women with abusive partners. The services that are offered and the rules that are implemented should be informed by a respect for the autonomy of battered women. It is only by acknowledging the individuality of each woman’s experience that we will create effective solutions to the complex housing needs of battered women.
### Citation
(Gengler, 2012)

### Research Design
Qualitative; 10 months observing house meeting and support group. 15 semi-structured in-depth interviews (staff=4, residents=11) recorded and transcribed. Data also came from written program materials.

### Study Validity
Author does not address author bias, which in this type of study should have been addressed. Otherwise, interesting. No generalizability, except as it agrees with other research.

### Type of Refuge
18 bed shelter

### Refuge Location
Mid-size city in Southeast

### Helper Relationship
Empowerment program. Empowerment defined "regaining strength, courage, confidence, and personal power. In other words, empowerment is taking back your life" (p.507)

Shelter rules enforced by point system. “Staff framed the point system as one that empowered women to make their own choices. Residents experienced the point system differently. To residents, it was something they lost rather than used” (p. 507)

Point system applied inconsistently and “created an environment of uncertainty” (p. 507).
Conclusions

“Through their resistance, residents were able to derive self-efficacy within the constraints of a structure of control, protect their identities as capable and autonomous adults, and defend themselves against subordination to shelter staff by imbuing their life experiences with equal or greater value” (p. 502).

“The anxiety induced by the inconsistently enforced point system was, for some women, reminiscent of what they experienced living with their abusers: never knowing what they might do that would get them in trouble” (p. 508).

“Because attendance [at Group] was required, the women participated, but were often skeptical of facilitators’ activities and agendas and chafed at the implication that they lacked basic parenting, communication or daily life skills” (p. 508)

Push back against the perceived control.

“...they highlighted the challenges they faced as poor and working-class mothers, and the impracticalities of the shelter’s policies given these realities” (p. 510).

“Residents also used Group to point to inconsistencies between house rules and the empowerment rhetoric, and explicitly cited their skills as poor and working-class women and mothers to argue for more control and autonomy” (p. 512)

Empowerment rhetoric that focuses on women’s personal choices allows staff to eschew responsibility for bad outcomes for women.

“By framing rule enforcement as good for women’s long-term development, the empowerment rhetoric justified the staff’s exertion of control over residents and masked the paternalistic assumptions lurking just beneath the surface” (p. 517)

The idea of maintaining order in a potentially volatile living situation is challenging.

“The very notion of empowerment assumes that women have failed to take control of their lives and must be taught how to do so. This is particularly true for women who are seen as ‘victims,’ and implies that an inability to make ‘good life choices’ – rather than structural gender arrangements, economic exploitation, or both – led to their victimization” (p. 517).

“While it makes good feminist sense to empower women as a group, the rhetoric of empowerment at Recourse reduced women’s problems to matters of individual choices, thus shoring up the status quo. While residents did manage to defend their dignity and derive feelings of efficacy from their resistance – which could, ironically, be considered ‘empowering’ – these individually satisfying acts posed no real threat to the underlying regime of control operating in the house” (p. 518).
Appendix B

First Sub-research Question Thematic Analysis
## SUSTAINABLE, EMPOWERING MODEL FOR IPV SERVICES

<table>
<thead>
<tr>
<th>Citation</th>
<th>Research Design</th>
<th>Refuge Type and Location</th>
<th>Helper Relationship</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Srinivasan, 1991)</td>
<td>Qualitative Participant observation</td>
<td>Shelter Location unknown</td>
<td>Fifteen paid and 40-50 volunteer staff. Staff hierarchal relationships minimized to run like a hybrid collective. Residents had no input into shelter decisions</td>
</tr>
<tr>
<td>(Lempert, 1997)</td>
<td>Qualitative Semi-structured interview</td>
<td>Outreach ancillary to shelter US</td>
<td>Informal helper</td>
</tr>
<tr>
<td>(Parsons, 2001)</td>
<td>Qualitative Focus group Semi-structured interview of participant sample</td>
<td>DV support group Location unknown</td>
<td>Professional facilitation of group Peer support</td>
</tr>
<tr>
<td>(Melbin, 2003)</td>
<td>Qualitative Semi-structured interview</td>
<td>Shelter Transitional Housing Six programs in one mid-western state</td>
<td>Varied from “authoritarian” to “supportive”</td>
</tr>
<tr>
<td>(Gengler, 2012)</td>
<td>Qualitative Participant observation Semi-structured interview of participant sample</td>
<td>Shelter Midsize city in Southeast</td>
<td>Empowerment rhetoric Staff enforced rules by use of point system</td>
</tr>
</tbody>
</table>

### Self-Definitions - orange

- **(Gengler, 2012)**
  - Protect self-definitions by resistance within the constraints of control.
- **(Melbin, 2003)**
  - Need to acknowledge the individuality of women’s experiences.
- **(Lempert, 1997)**
  - “... most women acquiesced to their [partner’s] definition” in public, but resisted the characterizations in private (p. 293)
  - Women look to others to help them re-define the definitional frameworks of their relationships.
  - Wanted definitional assistance, not definitional oppression
  - Meanings negotiated had to include women’s own interpretations of their experiences.
  - Women found could only get help if accepted other’s definitions.
  - Those with power can impose their definitions on others

### Rules – blue

- **(Gengler, 2012)**
  - Inconsistently enforced rules reminiscent of living with abusers.
  - Residents pointed out inconsistency between house rules and empowerment rhetoric.
  - Framing rule enforcement as good for women’s long-term development hid paternalism behind empowerment rhetoric.
  - Impracticalities of shelter policies given the realities of
poor and working-class women.

(Melbin, 2003) Accepted as “part of the program” but felt too prohibitive. Great variability in the rules women felt necessary. “The only rule that received unanimous approval was the one prohibiting assailants from being on the premises” (p. 455).

Women wanted input into the making of rules. “. . . in the programs with the most prescriptive and proscriptive rules and expectations of the participants, every woman who was interviewed mentioned at least one incident in which she felt disrespected by the staff. In contrast, in the one program in which the staff spoke of the importance being flexible with rules and the staff’s opinions of program (both what was most helpful and what could be improved), no participant could think of one instance in which she felt disrespected by the staff” (p. 457)

*Empowerment – purple gel*

(Gengler, 2012) Women chafed at mandatory services they didn’t feel they needed. Empowerment rhetoric that focuses on women’s personal choices allows staff to eschew responsibility for bad outcomes for women. Empowerment implies women failed and need to be taught how to live.

(Srinivasan, 1991) The shelter’s ideology was that violence was a learned behavior, had a cycle, that empowerment of women would break the cycle (thus focusing on individual learning and choices.) Since the ideology largely ignored the larger social context, the ideology, though shared with residents was not effective in the social control of residents. Instead, the rules and threat of being kicked out provided the social control.


(Lempert, 1997) Reductionist definitions of abuse increase women’s confusion.

- “Abused women live in a social ‘Catch 22’, that is, they are held complicit in the abuse for their continuing presence in the violent relationships versus their own
recognitions that violence is only one aspect of a complex multidimensional relationship that also includes significant acts of love and affection” (p. 297)

• “Attributing victim status led others to see the women as incapable of managing, or understanding, their own situations without help. . . . As a consequence, the women again lost control over their definitions of self, over interpretations of their experiences, and over their relationships with the men” (p. 302).

(Parsons, 2001)

Table 1. Components and Processes of Empowerment

<table>
<thead>
<tr>
<th>Component</th>
<th>Description</th>
</tr>
</thead>
</table>
| Safety – pink | Paramount 
Women in shelter wanted to go into a TSH for safety reasons. |
| Helper Relationships – yellow | Types of relationships “directly related to the participant’s satisfactions with the TSH programs. |
| | • “. . . supportiveness of staff and/ or other women” (p. 453) “most important component”. |
| | • All the women mentioned wanting to be treated like competent adults. |
| | • Many women mentioned wanting the staff to offer specific help more rather than expect the women to ask for everything” (p. 453). |
| | (Srinivasan, 1991) 
Staff and residents each had personal relationships among their respective groups, but very little personal relationships bridged the gap. The one place this differed slightly was where staff were survivors and shared that information with residents. Some residents had a favorite staff member whom they felt comfortable with. |
| | • “The residents . . . felt comfortable |
forming long-standing relationships with one another
that they maintained even after they left the shelter.
Perhaps the holistic relationships that the staff
members had with one another provided models for
residents to emulate” (p. 54)

- Residents could volunteer then become employed by the
  shelter after “they had demonstrated that they were able to
  live and work independently” (p. 50). Few residents took
  advantage of this opportunity.
- The bureaucratic structure also inhibited the development
  of reciprocal relationships between the staff and the
  residents from which both could have gained” (p. 53)
  Telling others “primary help seeking strategy” (p. 296).
- Purpose to “generate external involvement and to bring in
  additional problem solving techniques and perspectives” (p.
  296).
- “Assistance that was experienced as helpful . . . did not
  include false promises or totalizing solutions. Effective
  helpers suggested, but did not demand, alternative actions,
  additional interpretations and fresh strategies” (p. 300).
- Experienced other’s belief as supportive
- “It is both ironic and paradoxical that the most efficacious
  assistance provided by helpers was to honor the women’s
  often long and frequently frustrating definition-making
  processes.
- Helpers had to assist abused women in developing coping
  and problem-solving strategies for the short term, while
  maintaining and reiterating their definitions of the abuse as
  intentional, deliberate, and dangerous” (p. 305).

(Lempert, 1997)

“. . . feeling accepted meant feeling understood, not judged;
being able to pull off the mask—to be
oneself; and not being judged when one
reveals oneself” (p. 167).
- “. . . defined validation of their experiences as being
  confirmed, being heard, and learning that they were
  not crazy” (p. 168).
- “When others listen to her story and understand
  what she is talking about because they have
  experienced the same thing, it seems to normalize
  the experience and encourages her to trust her own
  perceptions again” (p. 168).
- Interdependence “fosters a new level of
  responsibility in the participants” (p. 168).
- “The members of DVS valued having a place to talk
  where what they said was treated with respect and
  responded to, not ignored or depreciated” (pp. 169-
changed how the women viewed themselves and the confidence they felt.

- Helper demonstrates belief in woman “by asking them to do for themselves, challenging them to take risks, and encouraging them to give to others” (p. 175-176).

- Effect of being believed in is to begin to have hope for the future.

- Having an advocate “critical” (p. 172) for learning how to advocate for self. “Advocacy seemed to start with having an advocate, a role model, and then moving to self-advocacy and being an advocate for others” (p. 172).

- “Working out differences and learning that conflict can be resolved without violence gave the DVS members confidence in their ability to interact with other sand to become more assertive” (p. 172).

- “Because the lack of voice, isolation, and alienation are common experiences of women, programs for women need to address the need for mutuality, safety, relationship, acceptance, validation, commonality and interdependence” (p. 175).

- “The opportunity to work and learn in a mutual relationship with others was essential for the participants” (p. 176).

**Services – green**
(Melbin, 2003) Service found helpful varied greatly
- May have to modify services on a continuous basis to continue to meet needs.

(Parsons, 2001) **Education (one of strongest themes):**
- DVS member quoted in study “You couldn’t do without the learning about domestic violence. If you don’t have the education, you can’t see what you are doing” (p. 171).
- Learned about laws, prevalence, resources, and their rights.

**Value of Refuge –purple**
(Melbin, 2003) Majority would have gone back to the abuser or been homeless.
- Extra time.

(Parsons, 2001) Changes described were “increased self-esteem, self-confidence, and self-efficacy; the development of knowledge and skills to negotiate their immediate world; and their greater propensity to take action
and participate in the larger environment” (p. 175).

**Power – pink ink**

(Srinivasan, 1991) Staff had authority over residents, and residents were careful about what they said around staff because staff could expel them for being “difficult”.
- “Although social stratification was minimized among the staff, the social stratification between the staff and the residents was clear” (p. 51).
- “In rejecting traditional hierarchal forms of organization we are left with the question of what to put in their place. No group is structureless and in the absence of formal structure, informal structure will develop which can be even more exclusive as there is no way of challenging them. The answer is not simply to abandon structure but to create structures which enable everyone to participate” (Dixon et al., 1982, pp.61-62 as quoted by Srinivasan, 1991, p.52).

(Lempert, 1997) “Failure to account for the perspectives of the women results in assistance built on theory, ideology, and/or prior conceptualizations that are not consonant with battered women’s lived experience” (p. 306).
- “. . . this work challenges conventional assistance models, in which the power to decide what constitutes help and support for abused women has remained largely in the hands of involved activists reacting to institutionalized violence against women” (p. 307)
Appendix C

Second Sub-research Question Analysis
<table>
<thead>
<tr>
<th>Citation</th>
<th>Research Category and Design</th>
<th>Research Validity</th>
<th>Context</th>
<th>Description of Model</th>
<th>Achievement of Project Focus</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wilson, 2013</td>
<td>Qualitative Multiple Case Analysis Pilot phase (spring 2008) 8 pilot interviews Attending conferences Observing list-serves Purposeful, Intensity, maximum variation sampling of social business willing to participate: 7 social businesses in final sample. Two to five leaders interviewed from each business (late 2008 to early 2009) Interviews recorded and transcribed; detailed case study individually following a common format; then data compared “in as many ways as possible” (Wilson, 2013, p. 722) Qualifies for project because the most quoted case was a worker-owned cooperative.</td>
<td>Careful and detailed methodology. Good internal validity. The use of multiple cases means greater generalization than for most qualitative analysis. Still have research bias to contend with, but all in all, pretty valid.</td>
<td>“The goal . . . was to describe and analyze the phenomenon of the social business, laying the foundations for the development of process theory related to how the form and practice of these hybrid organizations occurs through their design and key structural decisions” (Wilson, 2013, p. 719)</td>
<td>Emergent Propositions 1. “Social mission as the driving design principle for the social business” (p. 722). 2. “Multiple rationales support the deliberate choice to address social missions through a market-based approach” (p. 723) a. “Economically self-sustaining way to achieve their social change agenda.” b. (some) “. . . aims to create conditions for self-sufficiency and self-reliance for traditionally marginalized stakeholders.” Thus social change can be on larger scale and permanent. c. (several) “create a powerful base of influence . . . for social change” 3. “Deliberately for-profit but deliberately not profit-maximizing” (p. 726). a. Cooperative not widely used in US; “requires its members to work towards a ‘common good.’” b. Creating equitable income share seen as “‘means to the end’ and not the end in itself” (p. 727) 4. “Requirement for business model and value chain invention (or reinvention)” (p. 727). a. “The enterprises describe careful and intentional consideration of multiple stakeholders and their interests – at the point of inception – such that they are broadly and deeply imbedded in the fabric of the business model” b. “thinking that is the opposite of the zero sum game . . . (p. 728)” c. “. . . capitalize on opportunities that non-profit, activist organizations often ignore by finding ways to benefit both the intended beneficiary and the end consumer simultaneously.” 5. “Social business design and refinement takes patience and time” (p. 728).</td>
<td>Business model of Equal Exchange, the worker-owned cooperative in this case study not detailed. Value to the project in knowing a cooperative can operate by social business principles, and in getting understanding of successful social business principles. Also, value in understanding how intentional at start-up business needs to be.</td>
</tr>
</tbody>
</table>
Description of Model cont. . . .

   a. “Selecting highly values-aligned investors frees and enables these enterprises to pursue their social mission and to avoid philosophical or strategic conflicts” (p. 729)

Evaluation:
Social business principles could definitely be used for a Refuge. The trick would be to find what business would be best to partner with to keep mission values aligned.
**Citation**
(Viader, 2014)

**Research Category and Design**
Limited to Not-for-Profit Service Organizations (NPSO) which provide services of social interest and welfare in the community (p. 5) that had been in existence at least 5 years. 285 organizations identified and sent usable questionnaires. 18% response rate.

Questionnaire involved descriptive and questions on governance.

Qualifies, due to description and data on stewardship governance model

**Research Validity**
18% seems a little light on the response rate for generalizability. Since mostly using descriptive statistics from this study, validity should be reasonable.

**Context**
Research to determine if for-profit-organizations were influencing not-for-profit. In the process, described several for-profit organizational model, including the one we are interested in; the stewardship model.

**Description of Model**
Only 2% of respondents had the Stewardship Theory practices. Don’t think this was in the US. Does not give us where the research done.

Stewardship Theory:
- Executive are stewards “aligned with the objectives of the principles” (p. 3)
- Key function of board: “support top executive in developing the necessary skills and resources to achieve common goals.” Empowerment “designed to maximize the steward manager’s potential performance.” Board acts as mentor to executive.
- Decisions are shared; executive may be voting member.
- Collaborative system
- Collectivist approach, rather than individualistic approach of Agency theory, based on “goal alignment and trust” (p. 4)

**Achievement of Project Focus**
As this research only looked at the relationship between the board and the top executive, it is not fully useful. Still, gives us a little more information about alternative governance for non-profits

**Evaluation:**
Stewardship theory is certainly within an egalitarian model, but would need to extrapolate to see how this fits into incorporating into the model at the survivor level.
Citation: (Osula, 2014)

Research Category and Design:
Theoretical paper -

Research Validity:
Well documented; balanced paper with believable assumptions and solutions.

Context:
US; management theory;
Some comparison between for-profit and non-profit. "... what differentiates the two [for-profit and non-profit] is whether the organization develops their product or service out of the idea of money making or to attain some social value" (p. 89).

Description of Model:
"... nonprofit sectors... require a broader skill set, character, and qualities, particularly in relation to the value/moral vision and collaboration – the capability in working with wide ranges of stakeholders" (p. 91)
Need “transformational leaders”
"The practical application of transformational leadership... would focus on activities where followers are empowered, where independent relationships through delegation of authority, training and skills development, access to information and building a culture of support is encouraged and applauded” (p. 91)
"... leadership has been likened to collaborative associations and ongoing construction of organizational reality, where interdependence, trust and unscripted initiative drive the group, each performing with a conscious awareness of the role the other must assume and how to best facilitate that process, in a manner that focuses on the good of the next person, and the group as a whole” (p. 92)
Advocate “servant leadership” as proposed by Greenleaf (1997) as quoted by (p. 93). "... servant leaders are driven by the inner motivation of serving others. They seek to serve their followers humbly and do not expect to be served”

10 constituents
~ Listening, Empathy, Healing, Awareness, Persuasion,
~ Conceptualization, Foresight, Stewardship,
~ Commitment to growth of people, Building community
Leaders represent “needs and values that serve each individual by firmly yet gently establishing and reminding everyone of the obvious responsibility each individual has to the welfare of the whole” (p. 93)
~ Put employee in roles in which they fit.
~ Behavior of both leaders and followers must be monitored to ensure continued alignment with mission.

Importance of Collaborative Leadership:
"... most fruitful partnership lies on respecting and valuing the difference between partners, but smoothing out those differences in the interests of making those relationships work more efficiently” (p. 94).

Achievement of Project Focus:
Marginal. Talks about collaborative leadership, and motivating stakeholders through strong shared values. ... still not seeing how this looks at the base level.

Included this because, although it doesn’t specifically talk about self-sustained funding, it does explore the problems not-for-profit face in today’s climate and proposes some management solutions.
Description of Model, cont. . .
“. . . different approaches and levels of collaboration are required in different relationship[s].”

5 key dimensions

~ Structure for collaborative decision making and shared power.
~ Boundaries, clear roles and responsibilities
~ “. . . balance self-interests versus collective interests
~ Collaboration deeply rooted in interdependence and mutual benefit.
~ “. . . healthy and supportive interpersonal relationship is the foundation for a good collaborative process” (p. 92).

~ “The more an organization’s core values are intensely held and widely shared, the stronger [is] the culture of the organization” (p. 96)
~ “In organizations with a strong set of values leaders have more confidence to let go of power and authority. A strong value system creates boundaries and it helps to establish a unified front and foster teamwork” (p. 97).

Leader Qualification for the 21st Century (p. 98)

~ Ethical or values driven
~ Involved
~ Purposeful
~ Self-aware
~ Follower-centered
~ Culturally competent
~ Future oriented

Evaluation:
Idea of establishing strong value system can be incorporated into refuge setting.
SUSTAINABLE, EMPOWERING MODEL FOR IPV SERVICES

<table>
<thead>
<tr>
<th>Citation</th>
<th>Research Category and Design</th>
<th>Research Validity</th>
<th>Context</th>
<th>Description of Model</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Brewton, 2012)</td>
<td>Case Study: non-profit hospital in southern Louisiana – Nurse Magnet Hospital</td>
<td>Descriptive; no validity factor</td>
<td>Description of shared governance in non-profit hospital in southern Louisiana. Licensed for 450 beds; staff of 900 physicians; 3000 employees, 750 of which are nurses. Won the 2002 Nurse Magnet Hospital bestowed by the American Nursing Credentialing Center (ANCC) for excellence in patient care and superior environment for professional nurses. The shared governance is credited with the quality of the hospital</td>
<td>“In order for an organization to be fully empowered it is centered around the following four principles: partnership, accountability, equity, and ownership” (p. 40). “The Chief Nurse Executive (CNE) supports a decentralized and participatory management organizational structure by promoting staff autonomy and accountability and facilitating shared governance through committee structure” (p. 40)</td>
</tr>
</tbody>
</table>

Lessons Learned (pp. 40-41) ~ Staff need to be more involved ~ Front-line staff must run committees and be accountable for the work generated from their efforts. ~ Leaders have to change roles. No leader should be a committee chair. ~ Leaders should play facilitator role in committee groups. ~ Committee participation should be interdisciplinary Committee Structure (p. 41) ~ Staff level team members ~ Each committee adopts own charter, elects co-chairs, controls agenda & outcomes. ~ Assigned clerical staff with laptops to facilitate the work ~ Have co-facilitators from leadership. They have no voting rights. ~ Key resources are available at time of committee meetings. |

Achievement of Project Focus | Vital Organization for the Inter-disciplinary Culture of Excellence (VOICE) has had direct positive impact on six pillars which include service, finance, quality, people, community, and growth. (p. 41) |
| | “... participation in VOICE positively affects job satisfaction” (p. 43) |
| | “VOICE members are our future leaders whether that leadership is realized at the bedside or within an administrative role” (p. 46) |

Evaluation:

Committees are an interesting idea. I could see this model working with separate committees for residents and staff at a refuge. The staff could be the leaders (non-voting facilitators) in the residents meeting, and the director could be the non-voting facilitator in the staff committee. Must be careful to make sure that the committees have some real power, and not just lip service power.
**Description of Model**

5 viable social entrepreneur models

1. Selling of branded merchandise
   a. “nonprofits can earn direct or indirect income, and even if the income is not ‘directly related to mission,’ there is always the option to pay the Unrelated Business Income Tax” (p. 352).

2. Fee for service
   a. Even if organization is having volunteers do work, everyone keeps track of time and bills corporations that are using services accordingly (KaBOOM!) (pp. 325-353).

3. Nonprofit starts a for-profit to fund the nonprofit (pp. 353-354)
   a. Alfond Inn and Conference Center owned by Rollins College. Inn is limited liability owned by non-profit Rollins College.
   b. “venture funds and impact investors fund nonprofit social enterprises”

4. Hybrid businesses (pp. 354-355)
   a. “For-profit enterprises that integrate social mission with making a profit”
   b. Laws vary by state
   c. “Triple bottom line” approach
   d. (Make a Stand) – online lemonade stand that uses funds to stamp out child slavery

5. “…social entrepreneurs who turn existing nonprofit social-entrepreneurship organizations into for-profit enterprises” (p. 355).

**Achievement of Project Focus**

Does not meet criteria for egalitarian or participatory decision making. Included for perspective on various ways to provide sustainable funds.

**Evaluation:**

Both models 1 and 3 could be incorporated into a refuge. # 1 would probably be only supplementary, however, depending on the merchandise, and there may be some ethical concerns depending on what is sold and who is making it.
Appendix D

Second Sub-research Question 2nd Level Analysis Table
<table>
<thead>
<tr>
<th>Citation</th>
<th>Research Category and Design</th>
<th>Context</th>
<th>Model</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Wilson, 2013)</td>
<td>Qualitative Multiple Case Analysis</td>
<td>Describe and analyze social business as a phenomenon.</td>
<td>Six Emergent Propositions</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>1. Social mission design principle</td>
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<td>2. Multiple rationales</td>
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<td>3. Deliberately for-profit / not profit maximizing</td>
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<td>4. Need to invent or re-invent business model</td>
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<td>5. Takes patience and time</td>
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<td></td>
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<td>6. Mission aligned capital and governance structures</td>
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<tr>
<td>(Viader, 2014)</td>
<td>Descriptive</td>
<td>Research to determine if for-profit governance structures were influencing non-profit.</td>
<td>Stewardship Theory</td>
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<td>~ Executive are stewards</td>
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<td>~ Key function of board to empower top executive to achieve goals</td>
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<td>~ Decisions are shared by board and executive</td>
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<td>~ Collaborative system</td>
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<td></td>
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<td>~ Collectivist approach based on goal alignment and trust</td>
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<tr>
<td>(Osula, 2014)</td>
<td>Theoretical</td>
<td>US management theory comparison of for-profit and non-profit</td>
<td>Non-profit need transformational or “servant” leaders for collaborative leadership in the 21st century. Qualities of such leaders described.</td>
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<td>(Brewton, 2012)</td>
<td>Case Study</td>
<td>Description of shared governance in non-profit hospital which had won the 2002 Nurse Magnet Hospital award.</td>
<td>“The Chief Nurse Executive (CNE) supports a decentralized and participatory management organizational structure by promoting staff autonomy and accountability and facilitating shared governance through committee structure” (p. 40)</td>
</tr>
<tr>
<td>(Stecker, 2014)</td>
<td>Theoretical Persuasion</td>
<td>Sustainability of non-profits in jeopardy; social entrepreneurship may be the answer.</td>
<td>Five viable social entrepreneur models</td>
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<td>6. Selling of branded merchandise</td>
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<td>7. Fee for service</td>
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<td>8. Non-profit starts a for-profit to fund non-profit</td>
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<td>9. Hybrid business</td>
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<td>10. Social entrepreneurs turn existing non-profit into for-profit social enterprises</td>
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