ABSTRACT

STRENGTHENING FAMILY VIOLENCE COALITIONS THROUGH ENGAGING CITIZEN PARTICIPANTS IN ACTION RESEARCH

by Raven Elizabeth Cuellar

Family violence (FV) has gained recognition as a major public health issue facing the United States. Though many approaches to FV intervention and prevention have been attempted, few have been adequately evaluated or demonstrated as effective. Aligned with community-centered, participatory approaches to FV research and evaluation, the current action research project was designed and implemented in collaboration with a FV prevention coalition. This research investigated one method of engaging citizen participants as researchers in the study of FV in their community, and through this process to surface barriers to effective FV prevention and preferred prevention approaches. It was hypothesized that participation in research study groups would positively impact youth participants’ knowledge, attitudes and beliefs towards FV, while generating information which would inform the coalition’s prevention efforts. Findings show that participants reported significant increases in their knowledge, awareness, and prosocial attitudes towards FV from pre- to post-intervention as well as increased efficacy to impact their community. Additional findings highlight gains for citizen participants and the community coalition who partnered in the research. Results suggest that action research is a promising method for promoting citizens’ awareness of salient issues affecting communities and facilitating citizens’ investment in partnering in violence prevention.
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Research Framework

Although many approaches to intervention and prevention of FV have been attempted, there is a paucity of literature with adequate empirical support to guide current initiatives (Chalk & King, 1998). Increasingly, researchers across fields and disciplines have insisted that traditional intervention approaches have failed to effectively bridge the gap between research and practice (e.g., Green, 2001; Wandersman, 2003), arguing that many gains in science never fully translate to the practice level where these gains could result in widespread benefit. These critiques of prevention science have led to shifts away from single-focus, researcher-driven approaches to prevention to more community-based, multi-faceted approaches involving diverse partners (Miller & Shinn, 2005; Schorr, 1997). New approaches focus on implementation of interventions through community partnerships (Nelson, Amio, Prilleltensky, & Nickels, 2000), and evaluation of interventions through participatory action research (PAR; Jason, Keys, Suarez-Balcazar, Taylor, & Davis, 2004). Aligned with the new approaches, the current PAR project was designed and implemented in collaboration with a local FV prevention coalition that strives to increase citizen participation in their efforts and expand their perspectives on the problem of FV in their community.

Community-centered models have emerged to address criticisms of traditional research models, with the new models asserting that citizens should have a more primary role in generating science that directly impacts their lives. Historically, many researchers have maintained non-reciprocal relationships with communities by conducting research “that benefits the researchers but not the community studied” (Dalton, Elias, & Wandersman, 2007, p. 77). In contrast, community-centered researchers are charged with recognizing the impact of their involvement with communities on the communities themselves, working from an explicit value of doing research with rather than on communities. These models assume that active community participation will result in higher quality research and practice as well as greater positive impact and associated benefits. In PAR, the relationship between researcher and subject is characterized by collaboration, as all stakeholders work together in defining a problem, taking action, and engaging in evaluation (Balcazar et al., 2004). The current research evolved from the perspective of community-centered models which prioritize local needs as a driving force for school- and community-based research, and was made possible through a long-standing collaboration between a researcher and a community prevention coalition.
The Warren County United to End Family Violence (WCU) coalition was formed in 2001 to provide a host of FV prevention services targeted primarily at school-aged children. WCU serves an entire county with seven school districts and is located in a mid-sized Midwestern town within a short driving distance from two mid-sized cities. When the author and a small team from Miami University (four graduate students and one faculty member; the MU partners) began partnering with WCU in 2006, there was a growing concern within the coalition that their ability to engage in successful FV prevention efforts was being threatened by the significant challenges they faced (e.g., shrinking membership, dissatisfaction from their funding agency). The MU partners agreed to collaborate with WCU to identify a set of strategies to help the coalition to strengthen its prevention efforts. Thus, the partnership between the author and the coalition began in 2006 and has continued into the present.

The collaboration began with efforts to identify the barriers that were impinging upon the coalition’s ability to engage in successful prevention efforts. Barriers included a lack of capacity within the coalition due to shrinking membership; a lack of interest and input from the community at-large regarding coalition efforts; and uncertainty about the community’s needs and preferences regarding FV prevention due to outdated needs assessment information. Based upon these identified barriers, the MU partners designed a locally-driven process that would engage members of the community as researchers on the problem of FV in their own community. This action research process was designed to address the identified barriers that were blocking WCU’s ability to be successful by engaging members of the community at-large in assessing the needs of their community, uncovering local barriers to successful FV prevention, and identifying their preferred prevention strategies. Furthermore, the process would likely have the added benefits of enhancing citizen participation in coalition efforts, expanding the coalition’s perspective on the problem of FV in the community, and bolstering the sustainability of the coalition.

Throughout the design of the action research process, members of the coalition provided critical feedback in order to ensure that the end product was both responsive to local needs and produced in a user-friendly format. The final product was a comprehensive guidebook intended for use by the coalition as a manual for conducting research study groups with citizen participants. The guidebook walks users through a series of action steps, including session plans for each proposed step in the study group process as well as additional tools for facilitating (e.g.,
activities, methods of presenting FV research and data) and evaluating (e.g., pre-post survey) study groups. Through the author’s ongoing collaboration with WCU, it was determined that the author would co-facilitate the research study group along with coalition members. Thus, it must be acknowledged that the author’s experiences with the coalition have offered her a unique perspective as both an insider and an outsider to WCU.
Introduction

FV poses a serious public health risk to our nation, with an estimated 3.5 million violent crimes committed against family members between 1998 and 2002 (United States Department of Justice, 2006). FV is the most prevalent form of violence in this country (APA, 1996; Tolan & Gorman-Smith, 2002). Across all age groups, violence between family members is more common than violence between acquaintances or strangers. FV occurs in many forms, the most prominent being domestic violence (DV), child abuse (CA), and elder abuse (EA). The results of FV include physical injuries and deaths, psychological harm, and impaired family functioning as well as immeasurable societal costs related to health care, criminal justice, and decreased productivity (APA, 1996).

Overwhelmingly, the strategic focus of most intervention and prevention efforts has been on providing services for victims, and to a lesser extent to perpetrators of FV, as well as on policy reform (Tolan, Gorman-Smith, & Henry, 2006). However, while a great many approaches to the prevention of FV have been attempted, there is a paucity of literature with adequate empirical support to guide current initiatives (Chalk & King, 1998). Moreover, while a growing number of researchers are citing the need for prevention efforts that challenge the cultural norms, attitudes, and beliefs that condone violence among family members, there is currently little consensus among FV researchers as to which strategies represent best practices in the field of FV prevention (Daro, Edleson, & Pinderhughes, 2004). This suggests a growing recognition that initiatives aimed at changing the social norms towards FV represent an important focus for future violence prevention efforts, representing a potential shift away from individual change strategies towards a public health approach centered on changing broad social norms towards FV. The current research project represents one such initiative that engaged a group of citizens in action research designed to shift their attitudes and beliefs regarding FV and invite them to contribute to the prevention efforts of a local FV coalition.

Numerous research studies confirm that, at any one time, the majority of victims suffering abuse at the hands of a family member are not receiving formal services, but instead are either in denial of their situation, silenced by fear, or unconvinced that the potential benefits outweigh the very real risks of taking action to seek help (e.g., Fawcett, Heise, Isita-Espejel, & Pick, 1999; Kelly, 1996; Wilcox, 2000). Thus, the majority of today’s interventions are serving the needs of a small minority of those affected by FV. A growing number of researchers believe
that the answer to making a significant impact on FV rates lies in shifting cultural norms and beliefs that view violence among family members to be acceptable (e.g., Daro et al., 2004; Tolan et al., 2006). Researchers investigating attitudes towards interpersonal violence and victimization, both in the social psychology and clinical psychology research literatures, have concluded that attitudes have tremendous power to influence abusive behavior (Anderson, Cooper, & Okamura, 1997; DeBono & Snyder, 1995; Jackson, Witte, & Petretic-Jackson, 2001). Multiple studies examining societal attitudes towards DV victims have revealed the tendency of individuals to blame victims of interpersonal violence for their assault (e.g., Kristiansen & Guilietti, 1990; Stewart & Maddren, 1997). For example, an early study on attitudes towards DV examined whether a community sample (N = 216) held erroneous beliefs about abused women (e.g., beliefs that battered women are masochists who are somehow responsible for the abuse they suffer and could avoid being abused by simply leaving their batterers). This study concluded that many community members (more than one-third of those surveyed) held erroneous, stereotypical beliefs about abused women (Ewing & Aubrey, 1987), views which blame the victims of DV and maintain that violence among family members is acceptable.

A more recent study examined university students’ attributions of blame regarding DV and the relationship between such attributions of blame and students’ use of violence in their own relationships (Bryant & Spencer, 2003). They found significant positive correlations between all students who used violence in their dating relationships and their attributions of blame in DV incidents to the victim (with a 39% prevalence rate of dating violence in this sample of 350 students). These findings regarding victim blaming are widely supported in the literature, often with reported gender disparities that show males as more likely than females to blame the victims of DV. For example, many studies have found that males are more likely than females to blame victims, especially men who espouse more traditional attitudes regarding familial relationships (e.g., Holcomb, Holcomb, Sondag, & Williams, 1991; Schult & Schneider, 1991; Thornton & Ryckman, 1990). Additionally, both males and females who participate in dating violence are less likely to acknowledge how their behaviors relate to the level of violence in their own relationships. Other studies have confirmed that both male and female use of dating aggression was related to their belief that dating violence was justified (O’Keefe, 1997; Riggs & O’Leary, 1996). Taken together, this research demonstrates the need for interventions aimed at shifting societal attitudes and beliefs that uphold FV as normal, acceptable behavior.
Straus and Smith (1990) identified five causes of intra-family violence that can guide primary prevention efforts: intra-family conflict, male dominance in family and society, cultural norms permitting FV, family socialization in violence, and pervasiveness of violence in American society. Straus and Smith’s (1990) study found that abused women were significantly more likely than non-abused women to believe that cultural norms permitting FV contribute to the problem. In fact, a growing body of research has found that many abused women believe that society gives tacit consent to abusive behavior through its silence, and that talking openly about the problem will make it easier to solve (Nabi & Horner, 2001). These findings raise the question: To what extent does the general public contribute to FV through its silence? If it is the case that abused women feel that others ignore the problem, thus giving tacit consent to the abuser, this finding speaks to the need to change the social norms around abusive behavior such that it becomes socially unacceptable for a person to abuse his or her intimate partner. Furthermore, the fact that many abused women believed that talking in general about the problem would make DV an easier problem to solve suggests that they perceive a silence around the issue that, if broken through conversation, could empower other women to change their adverse circumstances.

The communal coping model put forth by Lyons and colleagues (1998) is based upon the concept of a ‘shared action orientation,’ which holds that FV is not simply the victim’s problem or a matter of punishing the perpetrator, but rather an issue that concerns the collective of the social and personal networks in which victim and perpetrator are embedded. The communal coping model incorporates the recognition that every intimate relationship is conditioned by all separate and shared relationships with others. Thus, friends, family members, neighbors, coworkers, and acquaintances can exert a strong impact on victims and perpetrators of FV through the ways in which they convey acceptance or intolerance of violence. As active agents, the role of third parties in FV prevention is heavily influenced by their own attitudes, beliefs, and stereotypes about gender, violence, and relationships; their loyalties or split loyalties; their fears for their own safety; and the pressure they feel from members of their own social networks to either ignore or intervene in incidences of FV (Klein, 2004).

Research has shown that when victims of abuse choose to reach out for help, the first person they turn to is most often a family member or close friend, rather than a professional or formal agency (Kelly, 1996; Wilcox, 2000). How this entrusted individual responds to the
victim’s efforts to reach out for help can be crucial to whether that person continues to seek support in breaking the cycle of abuse, or whether the victim retreats back into the isolation and self-doubt that serves to hold a person in the victim role. Kelly (1996) states,

“Each community of which women and men are members can condone or challenge domestic violence, can recognize it as an issue or ignore it, can support women who are abused or exclude them. …The response women encounter will generally be a contradictory and confusing mixture of solace, support, and advocacy alongside skepticism, indifference, and exclusion. The balance contributes to or subtracts from her sense of personal and social power to resist and refuse abuse.” (p. 68)

Thus, the attitudes, beliefs and behavior of friends, family members, and neighbors towards victims of FV can contribute to the shared action orientation of each community in which victims and perpetrators of FV reside. While the extant literature on FV suggests that there have been positive shifts over the past decade in awareness and attitudes within the professions that deal with FV, little attention has been paid to the awareness, attitudes, and responses in the community at-large (Wilcox, 2006). This highlights a practice gap of interventions tailored to the community level. Brown (1997) states in her study of change among battered women in the United States,

“The balance between a supportive, understanding environment and a person’s readiness to change is a delicate one. Some people will persevere, no matter what. Others will find change daunting even in the most supportive environment. The majority, however, will be encouraged to consider change sooner if their immediate environment and the community at-large support their views with understanding and concrete services” (p. 11).

Taken together, the research base on FV points to the importance of attending to the attitudes and salient factors that contribute to beliefs such as acceptance of violence or victim blame at the level of the community. One of the goals of the current intervention is to raise awareness of FV within members of the community to help create the kind of supportive environment that both Kelly and Brown refer to above. The following section will provide a review of FV research, with a particular focus on definitional issues that could affect the current research. Subsequent sections review the literatures on community prevention coalitions and
citizen participation, which includes a discussion of how PAR can be utilized to build and sustain community partnerships.

**Review of FV Research: Definitions, Prevalence, and Risk Factors**

Despite increased attention to the problem of FV in recent decades, researchers and policy makers alike have struggled to reach consensus about which forms of violence should be included within the category of ‘family violence’ (Tolan et al., 2006). Numerous terms are used to refer to interpersonal violence, including but not limited to domestic violence, family violence, intimate partner violence, dating violence, and sexual violence. Since the current research has been designed in collaboration with a community coalition focused specifically on FV prevention, the term FV will be adopted for the purposes of this study. However, in addition to prioritizing a focus on FV based upon the local research context, several researchers have indicated that there are important practical and methodological reasons for valuing greater integration of theory and research across areas into a FV approach (Daro et al., 2004). For example, Tolan and colleagues (2006) reviewed the past decade of research on domestic violence (DV), child abuse (CA), and elder abuse (EA) and found that there is significant overlap in the patterns, causes, and effective interventions across all three forms of FV.

There is general agreement that FV encompasses DV, CA, and EA (Loseke, Gelles, & Cavanaugh, 2005; Graham-Berman & Edleson, 2001), though research and theory have tended to focus separately on each of the major component problems with little integration of how issues are framed or studied (O’Leary, 1993). There have been controversies regarding definition, conceptualization, and measurement within each area, but little focus on the relation between areas or an overall understanding of violence in families (Loseke et al., 2005). Similarly, efforts to promote policy change have tended to focus on a single problem related to FV and, in doing so, have failed to capitalize on overlapping issues related to affecting change in violence rates (APA, 1996). Yet, there is a growing recognition of the considerable overlap in the occurrence of DV, CA, and EA. They share many risk factors (e.g., living in resource-poor communities, associating with individuals who support the use of violence), and studies of effective interventions for each have revealed many common features (Chalk & King, 1998; Daro et al., 2004; Tolan et al., 2006). Moreover, research suggests that the presence of one form of FV is a risk factor for the presence of another form (Graham-Berman & Edleson, 2001). In fact, many families experience multiple forms of violence, both concurrently and sequentially...
Numerous reviews have documented the co-occurrence of CA in families in which DV is also occurring among adults (e.g., Edleson, 1999; Fantuzzo & Mohr, 1999; O’Leary, Slep, & O’Leary, 2000; Rossman, 2001). More than 30 studies investigating the link between these two forms of FV show a 41% median co-occurrence of CA and DV in the families studied (Appel & Holden, 1998).

There is also a growing recognition of the importance of understanding why a majority of violence is family-based, and how a broader consideration of all forms of FV could have benefits for each type (Jouriles, McDonald, Norwood, & Ezell, 2001). Recognition of the need for greater integration must also be accompanied by an appreciation that FV is a complex problem replete with a challenging set of scientific and practical issues that need to be considered in order to reduce this major public health threat (Graham-Bermann & Edleson, 2001). For example, the social and contextual structures surrounding FV have been found to exert a powerful impact on overall rates (Daro et al., 2004; Graham-Bermann & Edelson, 2001). Studies of CA and neglect have shown that neighborhoods with a heavy child care burden (e.g., a high ratio of children to adults, with low percentages of male and elderly residents) and residential instability had higher rates of child maltreatment (Nation, Wandersman, & Perkins, 2002). Such studies point to the importance of attending to the local context and local norms in which FV is occurring to frame prevention efforts.

A great deal of controversy exists regarding how to define FV and its components. Jouriles and colleagues (2001) explain that these are more than mere semantic disputes, but are representative of the major differences in views regarding the important features of FV. Central to this controversy is the degree to which the term ‘FV’ should be regarded as synonymous with abuse or substantial mistreatment of family members. That is, should the definition contain all acts of violence, or be confined to only serious or ongoing patterns of violence? Many researchers argue that a focus on physical violence that clearly causes serious harm is too narrow a conceptualization, and that common relationship characteristics seen in families such as coercive control, neglect, and psychological and verbal abuse must be included in the definition (e.g., Heise, 1998; Jouriles et al., 2001). These researchers argue that physical violence should be viewed as part of a set of behaviors that define abuse, which cannot be separated without neglecting important contributors to the overall impact of the abuse. There is growing consensus that threatening verbal behavior and intimidation should be considered as components of FV.
(Chalk & King, 1998; Jouriles et al., 2001). Moreover, many researchers recognize that violence in family relationships may have different meanings because of dependency among family members; thus, there will be variability among families regarding the role that violence plays in family relationships (Johnson, 1995).

Perhaps the most controversial issue impeding a consensus on the definition of FV involves how or whether to incorporate the gender inequities and dependency differences related to power within family relationships (Tolan et al., 2006). Much of the initial work that gave rise to the DV movement revolves around the central tenet that male-to-female violence differs fundamentally from female-to-male violence in the inherent social differences in gender-accorded power within mixed gender relationships (APA, 1996; Heise, 1998). This gendered perspective provides the basic frame for the research, theory, and policy that developed out of the violence against women movement. However, empirical studies to date do not support the contention that all partner violence occurs within the context of a gendered power differential (Johnson, 1995). In fact, some studies using broadly based samples and including both genders suggest that much of the violence displayed between male and female partners is similar in frequency, initiation, and seriousness (Magdol et al., 1997). Other studies do provide evidence of patterns of serious violence primarily inflicted by men upon women, and question the extent to which survey methods are sensitive enough to detect gender disparities in partner violence (Hines & Malley-Morrison, 2004).

**Review of FV Prevention Initiatives**

Despite numerous FV intervention and prevention efforts, there is a paucity of literature with adequate empirical support to guide current initiatives (Chalk, 2000; Chalk & King, 1998). In keeping with the struggles to define and categorize forms of FV discussed previously, interventions also tend to be focused on a specific form of FV, and few consider shared risk factors or overlap among the forms of FV (Daro et al., 2004; Tolan et al., 2006). While the majority of FV interventions utilize individual change strategies (e.g., DV shelters, counseling and victim’s advocate services), FV prevention strategies are more likely to employ a public health approach through efforts to change the broad social norms around FV which uphold violence against family members as normative, acceptable behavior (Tolan et al., 2006). Across all forms of FV, preventive efforts focused on relationship skills and family management tends to have the most empirical support (Chalk & King, 1998; Tolan et al., 2006). However,
interventions dealing with impulse control, anger management, and other behaviors related to
abuse have also demonstrated promising potential. There is recognition of the need for primary
prevention efforts that raise awareness of the substantial harm to children who are abused,
partners who injure each other, women who are battered, and elders who are harmed by those
caring for them (Shafer et al., 1998).

Recent trends towards developing interventions aimed at changing attitudes, beliefs and
social norms towards violence have largely been focused on youth through dating violence
prevention programs (O’Leary, Woodin, & Fritz, 2005; Tolan et al., 2006). Though dating
violence is not commonly considered to fall within the category of FV, it is considered a
common precursor to FV. For example, physical aggression against intimate partners occurs
most frequently in the late teens and early twenties (O’Leary, 1999). Thus, interventions aimed
at reducing dating violence are believed to prevent later DV by challenging youths’ norms for
romantic relationships. Although few prevention strategies have been empirically evaluated at
present, randomized trials of two prevention programs have confirmed the efficacy of these
youth programs through subsequent drops in reports of dating violence. First, the “Youth
Relationships Project” offers a health promotion approach to dating violence through 18 sessions
of psycho-education on abuse and power dynamics, skills training, and social action (Wolfe et
al., 2003). Second, the “Safe Dates” program consists of a 9-session, classroom-based psycho-
educational curriculum that can be taught by health professionals, which may be supplemented
with a theater production put on by students in the program (Foshee et al, 2004). Both programs
aim to increase youth participants’ knowledge about dating violence, challenge attitudes towards
violence and gender stereotyping, and promote equity in dating relationships, conflict resolution,
and help-seeking behavior. Results from these trials suggest that such prevention efforts are
among the most effective approaches to date in reducing overall dating violence rates (Tolan et
al., 2006).

While such youth prevention programs are showing promising results in their potential to
reduce FV rates, analogous interventions geared towards adults and communities are still
lacking. Because much of what constitutes FV has multiple determinants, quality prevention
efforts must take into account the individual factors as well as the characteristics of the
relationship and social context which have clearly been shown to contribute to risk (Nation et al.,
Thus, prevention efforts that take into account the relational, social, and contextual norms within a given community are more likely to show consistent positive effects.

Most prevention efforts are targeted towards individuals believed to present an elevated risk for FV victimization or perpetration (Daro et al., 2004). However, researchers and service providers alike have failed to obtain perfect predictive capabilities for which individuals are at-risk; this represents one of the most compelling reasons for the expansion of community-based, broadly defined partnerships for FV prevention. Community-centered models value collaboration between service providers and local residents in order to collectively identify and implement a set of strategies perceived as being most effective in supporting prevention (Wandersman, 2003). According to Daro and colleagues (2004), those attempting to develop effective intervention and prevention strategies must know a wide range of information about how families or youth view the services being offered to them, why service users accept or reject a given service, what other options they see in their community to support them, and how they view their relationship with their service provider. Thus, an approach to FV prevention with the potential to reach broad-based audiences and bring about widespread social change appears to lie in the domain of community-based initiatives. In the last decade, comprehensive community initiatives have become the preferred approach to health-related urban interventions aimed at problems such as violence, substance abuse, heart disease, and immunizations (Nation et al., 2002). These community initiatives consist of coalitions of community agencies, institutions, and citizens who come together to address health problems. Before exploring the literature on comprehensive community initiatives, the next section will briefly review methods of assessing outcomes for various forms of FV prevention strategies, highlighting challenges to proper measurement that have a bearing on the current study.

**Measuring Outcomes for FV Prevention**

Tolan and colleagues’ (2006) review of FV interventions reveals that there are myriad issues with current efforts to evaluate FV interventions and demonstrate program outcomes, including a lack of reliable and valid assessment measures, little examination of how interventions work, and methodological issues inherent to the problem of FV (e.g., a highly transient population, lack of randomization). These deficits in current evaluation efforts of FV prevention strategies mean that evaluation efforts with adequate empirical support are not representative of the broad set of FV approaches being applied in practice. This imbalance in
evaluation efforts extends to the empirically-validated assessment scales designed for FV research and practice.

Strauchler and colleagues’ (2004) review of the existing DV assessment scales revealed that, of the 21 DV-related scales they included in their review, all but one scale was constructed for the purpose of measuring or predicting DV in intimate partner relationships, rendering them inappropriate for the current participant focus on citizens who were not presumed to have personally experienced DV. In contrast, the Domestic Violence Blame Scale (DVBS) constitutes the only empirically validated scale designed to measure individuals’ attitudes about DV. The DVBS was designed for use in both research and clinical settings to assess the amount of blame an individual attributes to victims of DV, as well as the amount of blame an individual attributes to situational and societal factors that support DV through 23 items that represent victim, perpetrator, societal, and situational variables common to DV (Petretic-Jackson, Sandberg, & Jackson, 1994). In terms of assessment measures geared towards the level of the community at-large, community prevention coalitions, and/or citizen participants, only one additional measure was available for use with these participant groups. An unpublished measure created by the Montana Coalition Against Domestic and Sexual Violence (2004) for use with community coalitions and/or citizen participants was supplied to the author by WCU’s funding agency. This 30-item measure, which was based on a thorough review of existing surveys on attitudes towards FV, includes an adaptation of the DVBS as well as additional questions about societal, family, and gender norms for violence. This review of existing measures for assessing outcomes of FV prevention efforts makes it clear that there are significant deficits in the domain of accurate outcome evaluation for FV prevention. The next section reviews the literature on community prevention coalitions to help frame the context of the current collaborative partnership between one such community coalition and the author.

Community Prevention Coalitions

Community coalitions aimed at reducing and preventing pervasive societal problems such as alcohol and drug abuse, crime, and violence have become an important part of the larger prevention movement in the last few decades (Stevenson, Mitchell, & Florin, 1996). Although evidence for their effectiveness is limited as of yet, a growing number of researchers are pointing to these local voluntary groups as a promising strategy for targeting a variety of serious community issues, including crime, violence, substance abuse, teen pregnancy, and delinquency.
(e.g., Butterfoss, Goodman, & Wandersman, 1993; Farquhar et al., 1990; Jacobs et al., 1986; Kaftarian & Hansen, 1994; Pentz et al., 1989). Community coalitions grew out of the premise that a multifaceted approach that alters the very fabric of communities is needed in order to bring about powerful preventive effects (Hawkins, Catalano, & Miller, 1992; Pentz et al., 1989). The logic underlying the community coalition approach proposes that locally determined needs and goals are the best guide to action, and that community empowerment is itself part of the solution for problems such as violence and substance abuse (Chavis & Florin, 1990; Zimmerman & Rappaport, 1988).

Coalitions are by their very nature concerned with issues of empowerment (Stevenson et al., 1996). Thus, it is not surprising that the language used to justify coalition building as a viable prevention strategy is dominated by an empowerment motif (Butterfoss et al., 1993; Chavis & Florin, 1990). Successful community coalitions must develop broad-based citizen participation in order to increase the local ownership of community problems and enhance the community’s ability to commit to maintaining prevention activities over time. Moreover, for a community coalition to be successful, it must maintain diverse, well-rounded membership that is broadly representative of the community at-large (Wandersman & Florin, 2000). Citizens who participate in coalitions can enhance their own confidence, competencies, and social connections through their involvement in coalition efforts. The potential benefits to this approach cannot be underemphasized. Shea and colleagues’ (1996) review of effective interventions in their heart disease prevention initiative revealed that citizen participation was a distinguishing factor between effective and ineffective interventions.

The coalition approach has been widely adopted within the DV movement. Throughout the 1990’s, DV advocates across the globe began to organize police departments, prosecutors and other legal system representatives, hospitals, and mental health agencies into what became known as a ‘coordinated community response’ to DV (Shepard & Pence, 1999; Klein, 2004). These coordinated community response networks (CCR’s) were developed to help streamline the responses to victims and perpetrators of DV from formal systems such as the criminal justice system, healthcare providers, child protective services, and housing and welfare offices. Many CCR’s have also begun to focus their efforts on ‘informal responses’ from networks of family, friends, neighbors, coworkers, and other community members (Kelly, 1996).
For example, the Close to Home Domestic Violence Prevention Initiative in Boston works to build the capacity of informal neighborhood networks to engage in prevention efforts focused on changing community norms which allow DV (retrieved at http://www.c2home.org/). This initiative was started under the premise that neighborhood social norms are influential and that people in crisis reach out first to those close to them, namely family, friends, and neighbors. Grassroots organizations such as Men Can Stop Rape use the concept of the ‘visible ally’ to empower boys and men to publicly question social norms and attitudes that support gender-based violence (retrieved at http://www.mencanstoprape.org/). In Australia, the Domestic Violence and Prevention Council strives to build a sense of community participation in responding to DV by investigating how family and friends recognize DV and respond to calls for help (retrieved at http://www.jcs.act.gov.au/dvpc/index.html). These projects illustrate a few of the many community-driven violence prevention networks that have supplanted the responsibility for preventing violence from formal service providers and government agencies toward collective, communal efforts that accurately reflect the social and relational contexts of each unique neighborhood, community, or culture. The current research has been designed in collaboration with one such FV prevention coalition in effort to provide an intervention capable of assessing the attitudes and beliefs of community members and increasing citizen participation in coalition prevention efforts. The following section provides a review of the literature on citizen participation and discusses how a PAR approach is well-suited to engage citizens in local FV prevention efforts.

Citizen Participation

Wandersman and Florin (2000) assert that citizen participation in community-building projects, coalitions or prevention initiatives results in numerous benefits to communities, including improvements in the quality of the local environment or program, increased feelings of control over one’s environment, and increased feelings of helpfulness and responsibility along with decreased feelings of alienation and anonymity. Citizen participation is defined as “a process in which individuals take part in decision making in the institutions, programs, and environments that affect them” (Heller, Price, Reinharz, Riger & Wandersman, 1984, p. 339). Participation has also been found to contribute to feelings of empowerment, including perceived personal competence, political and personal efficacy, increased civic duty, and successful group problem-solving. Such empowerment can have the significant effect of altering the distribution
of power and authority to make decisions within a community (Perlman, 1983 as cited in Wandersman & Florin, 2003). Ultimately, citizen participation strives to provide the opportunity for individuals to direct and participate in decisions relevant to their lives (Prilleltensky & Nelson, 1997). This can occur within the context of participation in community-based initiatives, as well as through engaging citizen participants in research designed to inform local decision-making in policy, advocacy, and prevention initiatives.

Kelly and colleagues (1988) argue that citizen participation in research is essential if it is to be ecologically relevant, understood and valued by members of a community. Wandersman, Chavis, and Stucky (1983) add that involving citizens as partners in the research process is necessary to ensure that the research is responsive to their needs and values. They advocate for citizen participation in its ability to improve the quality and applicability of research, garner public support for research findings, increase the likelihood that research results will be utilized, and empower citizens by increasing their sense of control over their lives.

Elden and Levin (1991) believe that those who live in a particular community come to know more about it and develop more ways of making sense of their world than would be possible for anyone not embedded in this community to comprehend. They suggest that the best way to access such knowledge is through open dialogue with members of the community at-large, inviting them to share their views in a free and supportive context. Increasingly, this approach is being integrated into research designs and has given rise to the field of PAR, which is now widely recognized as an effective approach to forging relationships with communities to work collaboratively to address complex problems (Minkler, 2000). It provides the opportunity for researchers and community members to learn from each other, address power differentials, empower participants, and enhance the relevance of research to the local context (Sullivan, Bhuyan, Senturia, Shiu-Thornton, & Ciske, 2005). Altman (1995) placed such importance on participatory approaches that he asserted, “involving various community constituencies as partners early in the research process is a precondition to successful sustainability” (p. 528).

PAR can empower participants as they learn through the research process how to transform their own social reality (Balcazar et al., 2004). It is precisely this kind of learning that Freire (1970, as cited in Balcazar et al., 2004) classified as the critical step to comprehending one’s potential to take action to transform the world. In this way, the process of learning creates the potential for participants to recognize their own self-efficacy and take control to initiate
transformative action. Ultimately, PAR seeks to transform the social reality of participants by increasing the degree of control they have over important aspects of their community (Balcazar et al., 2004). Due in part to the context-specific nature of PAR, at present there is a lack of empirical evidence to demonstrate the efficacy of PAR or the critical ingredients that should be adhered to in PAR projects (Kemmis & McTaggart, 2005).

Importantly, in PAR there is an explicit value that research lead directly to action (Whyte, Greenwood, & Lazes, 1991). In this way, PAR alters the relationship between theory and practice by generating knowledge for its own sake, but also to produce change. Thus, the PAR framework is uniquely situated to address the research-to-practice gap which has precluded many gains in science from being translated into the service level. The current research utilizes a PAR design to build and strengthen partnerships with a community coalition and, through this collaborative relationship, engage in efforts to increase citizen participation in coalition prevention efforts. The current research grew out of the coalition’s need to engage specific sectors of the community not currently represented within their membership (e.g., youth, teachers, business women). An important characteristic of successful community coalitions is diverse, well-rounded membership that is broadly representative of the community at-large (Wandersman & Florin, 2000). Thus, a community coalition lacking representation from certain community sectors might lack the diverse perspectives needed in order to fully understand the complex issues facing the community. With this in mind, recruitment for the current action research focused on citizen participants from those sectors of the community not presently represented.
Research Purpose and Hypotheses

The purpose of this study was fourfold: (1) To demonstrate an effect on participants’ knowledge, awareness, and prosocial attitudes and beliefs towards FV through their involvement in the current action research project, which engaged a group of young citizens as researchers in the study of FV in their community; (2) to demonstrate an effect on participants’ perceived efficacy to make a positive impact on their community; (3) to uncover the barriers to effective FV prevention surfaced by the research participants; and (4) to uncover the participants’ preferences for local FV prevention initiatives. The third and fourth aims were designed to provide the community coalition partnering in this research with information that could be used to strengthen their current prevention efforts by soliciting feedback from the research participants, who were representative of the primary users and recipients of coalition-sponsored prevention programs. Each of these aims was addressed through a community-centered, PAR approach that recognizes the unique needs of communities and strives to make the research process reciprocally beneficial for researchers and participants alike.
Method

The current research employed a pluralistic methodology in order to gather multiple forms of data to address the research questions of interest. Barker and Pistrang (2005) point out that methodological pluralism is based on the core belief that “knowledge accumulates from a variety of sources in a variety of ways” (p. 202). Methodological pluralism encourages researchers to use the most appropriate method of inquiry to address research questions, with awareness that no single research method is better than any other. Methods used in tandem are more likely to capture a fuller picture of the question at hand than employing a single research method. This study was concerned with exploring the impact of a locally-driven process on the young citizens engaged in the action research project. Thus, a host of participant outcomes were evaluated and tracked throughout the research process. To that end, a mixed methodology of both quantitative (e.g., pre-post surveys) and qualitative (e.g., the author’s reflective journal documenting her experience of participating in the study group process) methods were utilized. A PAR approach was employed in hopes of producing both theoretical and practical outcomes while valuing diverse community perspectives.

Participants

Participants in this study consisted of 7 high school students ranging in age from 15 to 17 years. All participants attended the same high school in a Midwestern suburban area, with three students from the freshman class, three from the sophomore class, and one student from the junior class. In total there were five females and two male students. Six of the youth participants were Caucasian while one youth identified as Asian American, which comprises a sample that is broadly representative of the community demographics.

The target size of the study group was originally 8-10 participants, which is generally considered to be an optimal size for targeted intervention groups in order to ensure that each group member’s voice can be expressed. Given the level of collaboration and cooperation necessary to achieve the aims of the study group process (as described below), both the author and the coalition believed it was important to prioritize healthy group process over obtaining the previously-determined optimal number of participants (of the 12 participants who were recruited, 9 returned consent forms, and 7 attended the first study group session). Thus, although the total number of participants ultimately fell short of the target group size, the decision was made to
execute the study group process with the 7 committed participants rather than allow newly recruited participants to join the study group after the process had begun.

*Recruitment and Informed Consent*

Youth participants were recruited by WCU for participation in a time-limited study group. WCU first engaged in a decision-making process to determine which community stakeholders would be prioritized for participation and which region within the county would be targeted for the study group. After arriving at the decision that the local youth perspective was unrepresented within the coalition, despite a majority of the coalition’s prevention initiatives being targeted at youth, members of WCU made a unanimous decision to focus the study group on youth participants. Because a majority of coalition resources and initiatives were based out of the county seat, the local high school was selected as the target location for the youth study group.

WCU sought permission from key school personnel to conduct the youth study group at the local high school and to give brief presentations in each health class (N = 6) in order to inform students about the opportunity to be involved in the study group. Recruitment flyers were handed out during each presentation, providing students with information about who to contact should they wish to participate in the study group. The twelve students who expressed initial interest were invited to attend a brief organizational meeting. During this meeting, an overview and rationale of the study group process was provided and possible risks and benefits of participation were discussed. Both parental and youth consent forms were required for participation (see Appendices A and B). In total, nine sets of consent forms were returned; however, two students failed to attend any of the study group meetings. Thus, consent was obtained from all participants as well as their legal guardians prior to their participation in any part of this study.

*Measures*

A 37-item survey was administered to youth participants at the beginning of the first meeting and again at the completion of the action research process. The first component of the survey was designed to assess participants’ knowledge, attitudes and beliefs about FV. This is a 30-item measure created by the Montana Coalition Against Domestic and Sexual Violence (2004). Parts of the measure were adapted from the Domestic Violence Blame Scale (DVBS; Petretic-Jackson et al., 1994), which includes 23 items that represent victim, perpetrator, societal,
and situational variables common to DV. The remaining items in the measure include questions about societal and family norms for violence, gender roles and norms, situations that justify the use of physical violence, and behaviors that constitute DV. The Montana Coalition survey was created after a thorough review of existing surveys on attitudes towards DV, and tests of reliability and validity based upon a large number of administered surveys are underway (Karen Lane, personal communication, January 8, 2008/ August 15, 2009).

The second component included in the survey was designed to assess participants’ perceived efficacy to make a positive impact on their community. This scale was adapted from the 10-item Community Service Self-Efficacy Scale (Reeb, Katsuyama, Sammon, & Yoder, 1998), which was designed to measure “the individual’s confidence in his or her own ability to make clinically significant contributions to the community through service” (p. 48). Seven items were retained for the current study with small modifications made in language to enhance the relevance of this scale for the current project (e.g., the phrase “through community service” was removed from all items). A set of three validation studies performed by the CSSES developers demonstrated adequate levels of inter-item consistency (Cronbach’s alpha coefficient = .94), test-retest reliability ($r = .62, p < .01$), and construct validity tests confirmed that the measure taps into a single factor (item loadings ranged from .67 to .81; Reeb et al., 1998).

The Study Group Process

The study group process consisted of twelve 90-minute sessions which took place in the local high school after school had let out. Table 1 provides a session-by-session description of the content and activities of each study group session, which follows the narrative overview presented next. Sessions one through three focused on activities designed to build community (e.g., icebreakers, setting ground rules) and develop a common language to increase youths’ comfort in engaging in discussions of FV. Activities and games (e.g., family violence jeopardy) were used to guide group members through materials designed to raise their awareness of the problem of FV and the current efforts of WCU to combat the local problem. Throughout these three sessions, it was emphasized that WCU wanted to expand their perspective on the local problem of FV and was interested in learning how members of the community at-large view the problem. In sessions four through seven, the study group conducted an environmental scan of the community to increase their understanding of the local needs and resources regarding FV. The environmental scan involved collecting evidence of the nature and scope of FV in the community.
using a variety of methods, including photographs, newspaper or magazine clippings, flyers posted in the community, and interviews with key community members (Cope, 1981; Summit Collaborative, 2002). The specific methodology employed for the environmental scan was chosen by members of the study group, though each participant was encouraged to interview a member of the community deemed to have knowledge or experience on the topic of FV in addition to any other methods enlisted for the scan. In sessions eight and nine, the group synthesized the information and images they gathered during the environmental scan process into a visual display which would later assist the study group in reporting their findings and recommendations back to the coalition. In the tenth session, group members shared their views on what they perceived to be barriers to successful FV prevention and identified potential prevention initiatives that they would like to implement in their community. In the eleventh and twelfth sessions, group members finalized and practiced the presentation they would give at a later coalition meeting, reflected on their experiences in the study group, and engaged in termination activities to conclude the group process. In these final sessions, youth participants also engaged the group facilitators in discussions about how they could continue their involvement in FV prevention at their school. Two weeks after the study group concluded, members attended a coalition meeting which was dedicated to receiving the youths’ presentation of their findings; this meeting was attended by all youth study group members, WCU members, and invited guests from the school community.
<table>
<thead>
<tr>
<th>Session</th>
<th>Description of Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Community-building activities (e.g., icebreaker, set ground rules), confidentiality discussion, introduced facts/statistics through “FV Jeopardy”</td>
</tr>
<tr>
<td>2</td>
<td>Icebreaker, WCU members presented coalition mission/goals/activities, group discussed definitions and attitudes towards FV/DV/dating violence</td>
</tr>
<tr>
<td>3</td>
<td>Activities using state- and local-level statistics on FV and research on effects of FV on children/adults, group discussed ways that FV has affected each of their own lives</td>
</tr>
<tr>
<td>4</td>
<td>Introduced concept of environmental scan, brainstormed ways that participants wanted to research FV in their community, developed plans for executing the scan (e.g., designated individuals to take photos in community, gather printed materials, or search local news media for evidence of FV)</td>
</tr>
<tr>
<td>5</td>
<td>Discussed interviewing techniques to prepare for this environmental scan method, created interview templates of questions for teachers and peers, designated individuals or pairs of participants to conduct various interviews</td>
</tr>
<tr>
<td>6</td>
<td>Participants reported on environmental scan interviews and conducted group analyses of interview data, group decided to invite school principal to next session and drafted their request to interview him</td>
</tr>
<tr>
<td>7</td>
<td>Group interviewed school principal and processed their results/reactions, two participants shared their individual efforts at collecting data (e.g., classroom survey, creation of MySpace page with data-gathering tools), one participant showed a DVD of a preferred prevention initiative (Challenge Day)</td>
</tr>
<tr>
<td>8</td>
<td>Created visual presentation of environmental scan findings (e.g., display board, collages of images collected during scan) while synthesizing data and discussing lessons learned (about findings and participants’ roles as researchers)</td>
</tr>
<tr>
<td>Session</td>
<td>Description of Activities</td>
</tr>
<tr>
<td>---------</td>
<td>--------------------------</td>
</tr>
<tr>
<td>9</td>
<td>Completed visual presentation and practiced ways of verbally presenting findings to the coalition (e.g., decided how to structure the 1-hour presentation, designated speaking roles for each participant)</td>
</tr>
<tr>
<td>10</td>
<td>Led participant feedback session in order to obtain information about participants’ perceptions of local barriers to successful FV prevention and preferred prevention strategies</td>
</tr>
<tr>
<td>11</td>
<td>Began termination activities (e.g., reflected on the group experience/ lessons learned, made decisions about the final celebration), participants initiated discussions of how to continue their involvement with local prevention efforts</td>
</tr>
<tr>
<td>12</td>
<td>Completed termination activities (e.g., pizza party, acknowledgements/ goodbyes), practiced presentation to be delivered to coalition in 2 weeks, participants each clarified their intentions for continued involvement in FV prevention efforts</td>
</tr>
</tbody>
</table>
The study group process was designed to be highly flexible and responsive to the will of the group; thus, the process as it was designed underwent changes (e.g., doubling the number of sessions from 6 to 12 sessions) as the group unfolded in response to participants’ ongoing feedback. In order to capture all changes that occurred to the process, each of the study group sessions was tape recorded and documented electronically through detailed notes. The author also kept a reflective journal to document her experience of participating in the study group process. Appendix C highlights the key adaptations that were made to the study group process in response to participants’ ongoing feedback.

The author co-facilitated the study group alongside the WCU Prevention Director. The author’s role focused on preparing materials for study group sessions, tracking participants’ attendance, taking notes throughout the sessions, and helping to drive the group process while making every effort to ensure that it was led by youths whenever possible. In six of the twelve total study group sessions, members of WCU also joined sessions to help facilitate the process and report out to coalition members about the study group’s ongoing progress.

Data Collection and Analysis

In order to effectively assess the impact of the study group process, it was important to carefully track the process. For the current study, information generated in study groups was collected through detailed notes taken by the author during and after each session. In addition, each tape recorded session was reviewed by the author in order to validate that all critical information was included in her notes, as well as for extracting quoted participant statements. These notes began with a template, or session plan, created by the author for each session, which was then fleshed out to include participants’ voices. Each tape recorded session was also reviewed by an undergraduate research assistant who synthesized the study group sessions into detailed notes in a format akin to the author’s session notes (e.g., beginning with the same template). Both sets of notes were then reviewed by the author in order to ensure that all important information was captured for each study group session. This illustrates one way in which the current study sought to employ triangulation (e.g., the use of varying types of information from multiple sources or informants) in order to increase the credibility of data collection methods (Barker & Pistrang, 2005). Additional data sources include information gathered by youth participants during their environmental scan (e.g., interviews with teachers and other students) and presentation materials created by the study group upon completion of the
process. Because they represent critical forms of data collection for the current study, both the pre-post survey and the participant feedback session will be described in greater detail next.

Assessing the Impact of the Study Group Process on Participants

Given the lack of information on the reliability of the Montana Coalition measure and its centrality to the current research methodology, tests of internal consistency were executed on the current pre-post survey findings (N = 7) to confirm that results could be analyzed at the scale level. The Montana Coalition recommended parsing their measure into five separate scales for analysis, which have been retained for the current study. However, scales have been renamed in light of the adaptations made to the original measure to better suit the current study population (e.g., revisions in item language to increase its applicability for youth participants) and purpose (e.g., to evaluate the study group process rather than the coalition itself). Each scale is presented below according to the concept it is designed to measure, its assigned name, and the reliability statistics for the current sample.

Behaviors that constitute DV. The DVBX scale was created from nine items which look at individuals’ knowledge of the types of behaviors that constitute DV, asking participants to rate whether they believe certain behaviors (e.g., threatening to hurt pets) qualify as DV. It utilizes a three-point scale ranging from never (1) to sometimes (2) to always (3). Results indicate a high level of internal consistency on the DVBX scale (Cronbach’s alpha coefficient, $\alpha = .88$).

Situations that justify the use of physical violence. The PVIOL scale includes seven items which assess individuals’ knowledge of the types of situations that would justify the use of physical violence (e.g., “Using physical force against a partner is acceptable if the partner: hits first”). It utilizes a three-point scale ranging from never (1) to sometimes (2) to always (3). Results indicate a high level of internal consistency on the PVIOL scale ($\alpha = .92$).

Societal and family norms for FV. The SOCFAMN scale was created from 10 items which assess youths’ attitudes and beliefs about societal and family norms for FV (e.g., “A husband who physically abuses his wife should go to jail”). This scale asks respondents to rate items on a five-point Likert scale ranging from strongly disagree (1), to somewhat disagree (2), to not sure (3), to somewhat agree (4), to strongly agree (5). Results indicate a high level of internal consistency on the SOCFAMN scale ($\alpha = .83$).

Prosocial knowledge, attitudes, and beliefs about FV. The PROKAB scale employed ten items which assess participants’ personal knowledge and prosocial attitudes and beliefs about
FV. It utilizes a five-point Likert scale ranging from strongly disagree (1) to strongly agree (5). Results indicate a high level of internal consistency on the PROKAB scale ($\alpha = .90$).

**Attitudes and beliefs about gender roles and norms.** The GENDRN scale was created from seven items which assess youths’ attitudes and beliefs about gender roles and norms, given an awareness that traditional gender norms can perpetuate a view of FV as acceptable. It utilizes a five-point Likert scale ranging from strongly disagree (1) to strongly agree (5). Initial results showed an inadequate level of internal consistency (.61), which prompted a review of item-total statistics that revealed one item which, if deleted, could improve the overall reliability of this scale. This item was subsequently dropped from further analysis: “When two teenagers are drunk, it’s not fair to blame the boy if the girl says she was sexually assaulted.” Results for the revised six-item scale indicate an adequate level of internal consistency on the GENDRN scale ($\alpha = .69$).

**Perceived efficacy to positively impact the community.** The COMMEFF scale was created from seven items which assess youths’ perceived efficacy to make a positive impact on their community. It utilizes a five-point Likert scale ranging from strongly disagree (1) to strongly agree (5). Results indicate a high level of internal consistency on the COMMEFF scale ($\alpha = .87$).

**Uncovering Participants’ Perceptions about Successful FV Prevention.**

The tenth of twelve total study group meetings served as a participant feedback session, during which youth participants were engaged in two focused discussions intended to generate two types of information that could strengthen the coalition’s local prevention efforts. First, youths were asked to create a rank-ordered list of perceived barriers to effectively engaging in violence prevention in the local community. Second, youths were asked to create a rank-ordered list of violence prevention programs or initiatives which they would prefer to see implemented within their community. The facilitator used a list of questions and prompts to structure the feedback session while attempting to remain responsive to questions that might surface through the process. For example, participants were asked to respond to the following prompt in order to generate a list of perceived barriers to successful violence prevention:

“We want to know what each of you sees as the barriers to preventing violence successfully in this school and community. What kinds of things get in the way of
creating a nonviolent atmosphere in this school that we might not be aware of, while you as an insider are able to see?”

The facilitators recorded the barriers youths generated on a flipchart. Once all barriers were compiled, participants were asked to confirm that the barriers recorded by the facilitator accurately reflected the participants’ statements. Each participant was then asked to rank those barriers in order according to their perceived importance or impact. Participants were given nine sticky dots (e.g., votes) to allocate to whatever they felt were the most important barriers to address, and asked to distribute their votes in whatever manner they felt appropriate to the barriers they had identified. Participants were instructed that they could place as many or as few votes next to a barrier as they saw fit. The same method was employed to validate and prioritize a list of recommendations for local prevention initiatives that was generated next by youth participants. Both lists were ranked in order according to the total number of votes each list item received. This method of evaluation, which asks research participants to provide immediate validation that researchers are correctly representing participants’ voices and further invites them to become directly involved in evaluation efforts, is consistent with participatory community research and evaluation methods that support a continual feedback loop of data collected from participants back to participants (Torres & Preskill, 2001; Fetterman, Kaftarian, & Wandersman, 1996; Wandersman et al., 2005).

These discussions were tape recorded and documented electronically through detailed notes taken by the facilitator both during and after the meeting. Additionally, an undergraduate research assistant listened to the recorded feedback session and took detailed notes, which were triangulated against the facilitator’s notes to ensure that all emergent themes from the feedback session were captured. Through this process, it became evident that the youth-generated barriers could be meaningfully grouped into key themes (e.g., barriers related to negative student perceptions). In order to validate the emergent themes, the author and undergraduate research assistant each separately attempted to group the identified barriers into content areas and label the themes emerging from the data. This method confirmed that two independent raters were each able to identify closely related theme areas and assign the same barriers to these content areas. Although themes were not always labeled identically at the outset, both raters were able to converge around common thematic labels for the identified barriers through discussion. While the youth-generated list of preferred prevention initiatives was also explored in terms of
emergent themes, both raters concluded that any attempts to group the recommended initiatives into themes did not contribute additional insights or information. Thus, the list of chosen prevention strategies was considered complete in its rank-ordered form.
Results

Quantitative findings from the 37-item pre-post survey are presented first in this section. Next, qualitative findings from the participant feedback session are presented, which highlight youth-generated data on their perceptions of (1) the barriers to effectively preventing violence in their school community, and (2) the violence prevention initiatives they wanted to implement in their community.

Evidence of Impact of the Study Group Process

Findings from each of the six scales included in the pre-post survey are discussed in the current section. Results are reported for within-subjects t-tests and descriptive statistics. Given the limited sample size (N = 7) and the exploratory nature of the research, multiple t-tests were executed on each of the six scales used in the survey in order to ensure that a significant effect was not overlooked (e.g., Type II error; Cohen, 1992). Given that significant results were found on all six scales, it appears likely that these findings do not reflect spurious results (e.g., Type I error). Table 2 at the end of this section provides the pre-post test scale means and standard deviations. For each of the six scales, increases in mean scores from pre- to post-test represent shifts towards more healthy, prosocial responses.

On the DVBX scale, nine items looked at individuals’ knowledge of the types of behaviors that constitute DV, asking youth participants to rate whether different behaviors (e.g., threatening to hurt pets) would constitute DV using a three-point scale ranging from never (1) to sometimes (2) to always (3). A within-subjects t-test provided evidence that there is a significant difference in youths’ responses from pre- to post-test, such that youths demonstrated an increase in their knowledge of DV-related behaviors from pre- to post-test, $t(6) = 3.60, p < .01$.

On the PVIOL scale, seven items assessed individuals’ knowledge of the types of situations that would justify the use of physical violence using a three-point Likert scale (e.g., “Using physical force against a partner is acceptable if the partner: hits first”). A within-subjects t-test provided evidence that there is a significant difference in youths’ responses from pre- to post-test, such that youths demonstrated increased knowledge of the unjustifiable nature of abuse from pre- to post-test, $t(6) = 2.76, p < .05$.

On the SOCFAMN scale, 10 items assessed youths’ attitudes and beliefs about societal and family norms for FV (e.g., “A husband who physically abuses his wife should go to jail”), using a five-point Likert scale ranging from strongly disagree (1) to strongly agree (5). A within-
subjects t-test provided evidence that there is a significant difference in youths’ responses from pre- to post-test, as youths demonstrated an increase in their endorsement of prosocial attitudes and beliefs regarding societal and family norms from pre- to post-test, $t (6) = 4.76$, $p < .01$.

On the PROKAB scale, ten items assessed participants’ personal knowledge and prosocial attitudes and beliefs about FV on a five-point Likert scale. A within-subjects t-test provided evidence that there is a significant difference in youths’ responses from pre- to post-test, such that youths demonstrated an increase in their endorsement of prosocial attitudes and beliefs about FV from pre- to post-test, $t (6) = 14.79$, $p < .001$.

On the GENDRN scale, six items assessed youths’ attitudes and beliefs about gender roles and norms on a five-point Likert scale, given an awareness that traditional gender norms can perpetuate a view of FV as acceptable. A within-subjects t-test provided evidence that there is a significant difference in youths’ responses from pre- to post-test, such that youths demonstrated an increase in their endorsement of egalitarian gender norms from pre- to post-test, $t (6) = 8.25$, $p < .001$.

Finally, on the COMMEFF scale, seven items assessed participants’ perceived efficacy to make a positive impact on their community using a five-point Likert scale. A within-subjects t-test provided evidence that there is a significant difference in youths’ responses from pre- to post-test, such that youths demonstrated an increase in their perceived efficacy from pre- to post-test, $t (6) = 3.14$, $p < .05$. 
Table 2
Pre-Post Test Scale Means and Standard Deviations

<table>
<thead>
<tr>
<th>Scale</th>
<th>Pre-test</th>
<th>Post-test</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
</tr>
<tr>
<td>DVBX*</td>
<td>2.25</td>
<td>.38</td>
</tr>
<tr>
<td>PVIOL*</td>
<td>2.35</td>
<td>.57</td>
</tr>
<tr>
<td>SOCFAMN**</td>
<td>3.61</td>
<td>.53</td>
</tr>
<tr>
<td>PROKAB**</td>
<td>3.20</td>
<td>.37</td>
</tr>
<tr>
<td>GENDRN**</td>
<td>3.01</td>
<td>.40</td>
</tr>
<tr>
<td>COMMEFF**</td>
<td>4.27</td>
<td>.61</td>
</tr>
</tbody>
</table>

Note: Higher mean scores indicate movement towards healthier responses on all scales

* Response range: Never (1) - Sometimes (2) - Always (3)

** Response range: Strongly Disagree (1) - Somewhat Disagree (2) - Not Sure (3) - Somewhat Agree (4) - Strongly Agree (5)
Participants’ Perceptions about Successful FV Prevention

During the participant feedback session, youths generated information that could help strengthen the coalition’s local prevention efforts. Specifically, participants created a rank-ordered list of perceived barriers to effectively engaging in violence prevention in the local community. The barriers were then grouped into four thematic categories as seen in Table 3. The information provided in the table represents an exhaustive list of the barriers generated by youth participants. Because only six of the seven total youth study group participants were in attendance for these discussions, a total of 54 votes were allocated to participants for each type of information generated in list form.
Table 3

*Barriers to Preventing Violence Surfaced by Participants*

<table>
<thead>
<tr>
<th>Votes</th>
<th>Barriers Related to a Perceived Lack of Adult Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>There seems to be little support from adults for preventing violence at our school, and kids can’t do it alone.</td>
</tr>
<tr>
<td>2</td>
<td>Some students and school staff don’t take the idea of teenagers working to prevent violence seriously, like it’s a joke.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Votes</th>
<th>Barriers Related to Negative Student Perceptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>Being involved in preventing violence is seen as uncool to many students, so the pressures to fit in make it hard to stay involved (it could be social suicide).</td>
</tr>
<tr>
<td>9</td>
<td>Some students criticize the idea of promoting peace as trendy or fake (e.g., “you’re just trying to be a hippie”), so they reject it.</td>
</tr>
<tr>
<td>7</td>
<td>Students have been ostracized or made themselves targets of abuse for speaking out against violence and bullying they see happening, which makes it harder to continue to speak out.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Votes</th>
<th>Barriers Related to an Unhealthy School/ Community Climate</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>Violence seems like the norm, so people don’t question it.</td>
</tr>
<tr>
<td>5</td>
<td>There are too few places for teenagers to hang out in (X) that support positive behaviors (but lots of places where kids go for drugs and violence).</td>
</tr>
<tr>
<td>3</td>
<td>Many students and school staff seem too self-absorbed to dedicate their time to preventing violence (they don’t care).</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Votes</th>
<th>Barriers Related to the Secretive Nature of the Problem</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>It’s hard to know when someone is the victim of abuse because they are often secretive about it, and this makes it seem like less of a problem than it actually is in our school.</td>
</tr>
</tbody>
</table>
In the second half of the participant feedback session, youths created a rank-ordered list of violence prevention programs or initiatives which they would prefer to see implemented in their community. Some of their chosen prevention activities represented initiatives which were already in place in their school; in these instances, notes have been included in parentheses to provide readers with context about the nature of participants’ familiarity with a particular initiative. The information provided in Table 4 represents an exhaustive list of the preferred prevention initiatives generated by participants; while the participants had initially compiled a 10-item list, during the validation process they decided as a group that two list items should be collapsed into one due to their overlapping content (e.g., the group felt that both items actually stated the same thing). As with the list of barriers above, a total of 54 votes were allocated to participants to designate across the list of prevention initiatives in any way they saw fit.
<table>
<thead>
<tr>
<th>Votes</th>
<th>Recommended Program/ Initiative</th>
</tr>
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<tbody>
<tr>
<td>16</td>
<td>Implement “Challenge Day,” a set of school-wide violence prevention activities centered around a student retreat (which students became excited about by watching an extensive video in their freshman English class)</td>
</tr>
<tr>
<td>10</td>
<td>Form a lasting student activist group which meets weekly to promote peace and help to choose and implement local violence prevention initiatives</td>
</tr>
<tr>
<td>5</td>
<td>Work with the “Diversity Club” (a pre-existing student club) to raise awareness of the need to prevent violence and promote peace and understanding between different student groups</td>
</tr>
<tr>
<td>5</td>
<td>Continue offering the “Safe Dates” violence prevention curriculum in 9th and 10th grade health classes (implemented by WCU for 5 years prior)</td>
</tr>
<tr>
<td>5</td>
<td>Form an ongoing support group for students who have experienced violence or abuse</td>
</tr>
<tr>
<td>5</td>
<td>Create a forum for students to share their ideas and perspectives about what is needed to improve the school culture with the principal and school staff</td>
</tr>
<tr>
<td>3</td>
<td>Host a “Peace Picnic” to raise awareness of the need for violence prevention</td>
</tr>
<tr>
<td>3</td>
<td>“Bridges” (a student leadership club which had been offered for 9 years by school staff) should be opened up to include more students</td>
</tr>
<tr>
<td>2</td>
<td>Start a peer mediation program to encourage healthy conflict resolution between students</td>
</tr>
</tbody>
</table>
Discussion

The current research set out to investigate the impact of the study group process on the youth participants as well as additional benefits for the community coalition as a whole. By engaging a group of young citizens as researchers in the study of FV in their community, this intervention strove to: (1) enhance participants’ knowledge, awareness, and prosocial attitudes and beliefs towards FV, and (2) increase participants’ perceived efficacy to make a positive impact on their community. In addition to these intended participant gains, this intervention hoped to provide the community coalition who partnered in this work with the following benefits: (1) uncover youths’ perceptions of the barriers to engaging in effective FV prevention within this adolescent population, and (2) identify the preferred prevention initiatives that young citizens would like to see implemented in their community. Evidence that each of these aims was addressed through the current action research will be discussed in this section. In addition, preliminary evidence will demonstrate that the PAR framework from which the current research was conducted promoted a flexible, responsive, empowerment-based approach that was essential to the success of this intervention.

Demonstrated Outcomes for Youth Participants

Results of the pre-post survey administered to youth participants show that all seven youths who participated in the study group process reported significant increases in their knowledge, awareness, and prosocial attitudes and beliefs towards FV. Results of the pre-post survey also suggest that participants’ sense of efficacy to make a positive impact on their community was significantly increased as a result of their study group participation.

Furthermore, the study group process may have led youths to internalize a sense of personal responsibility for engaging in local violence prevention efforts, as suggested by both intended outcomes (e.g., sustained involvement in coalition efforts after the study group concluded) and unexpected outcomes (e.g., youth participants were instrumental in implementing their chosen prevention initiative at their school). The current section will discuss each of these benefits to youth participants.

Increases in Knowledge and Prosocial Attitudes/ Beliefs Towards FV

Engaging youth participants in the study group process led to demonstrated increases in participants’ knowledge and awareness of issues related to FV, both in their own community and more broadly through the current knowledge base on FV. Specifically, youth participants showed
significant increases in their prosocial attitudes and beliefs about FV from pre- to post-test that suggests greater understanding of the issues victims of FV face and an appreciation for the deleterious effects of the intergenerational transmission of violence. Given the abundance of research concluding that attitudes and beliefs towards interpersonal violence and victimization have tremendous power to influence abusive behavior (e.g., Anderson, Cooper, & Okamura, 1997; DeBono & Snyder, 1995; Jackson, Witte, & Petretic-Jackson, 2001), the changes seen in youth participants’ attitudes and beliefs towards FV suggest that the study group process has the potential to exert a positive effect on youths’ future behavior.

Although the study group process did not intend to delve into youths’ personal experiences with FV, early in the group process it became clear that each of the youths who chose to participate had in fact experienced interpersonal violence in their own lives. As youths began to spontaneously share their personal experiences with the group, the study group process was adapted to ensure that group meetings provided a safely contained space for youth participants to share their personal experiences with interpersonal violence and increase their personal insight into these experiences. Issues of confidentiality and mandated reporting were regularly reviewed in group, and on several occasions youths’ disclosures resulted in referrals being made for mental health services. These disclosures often occurred within the context of the group learning about, for example, what research shows about the effects of FV exposure on children, or the common attitudes that promote abusive behaviors, or the intergenerational transmission of violence. For example, as the group reviewed research on the negative effects of FV exposure on children, one group member reflected,

“Sometimes being sick comes from your mind. Being abused doesn’t just hurt your body. … And I never thought of that before, how my problems with my stomach, or my weight, or wishing I could die might have something to do with what I went through with my family. I always just thought it was me.”

Through the study group process, participants were able to integrate what they were learning with their personal experiences in ways that may have helped them to internalize new knowledge, awareness, attitudes and beliefs towards FV. Thus, it appears that the action research process utilized in the current study provided participants with a vehicle for challenging the norms, attitudes, and beliefs that condone violence among family members.
Increases in Perceived Efficacy to Positively Impact the Community

Findings from the pre-post survey showed that youths who engaged in the study group process experienced an increased sense of efficacy to make a positive impact on their community. Whereas youths’ responses on questions such as, “I believe I could make a meaningful contribution to my community if I set my mind to it,” at the beginning of the study group process were widely variable (ranging from not sure to somewhat agree), by the end of the process all participants gave positive endorsements of this statement (1 somewhat agree and 6 strongly agree). In fact, at post-test, all youth participants gave positive endorsements of each of the seven items related to their perceived efficacy to positively impact the community, which indicated positive change for each youth participant. Notably, four participants revealed their lack of prior involvement in community service activities through their negative endorsement of one scale item: “I have participated in activities or services that have helped to make a difference in my community in the past.” Arguably, it was the nature of these young citizens’ participation in the current action research process that led to increases in their sense of efficacy. This is in keeping with other research findings on the benefits of citizen participation, which include increased civic duty, personal and political efficacy, perceived personal competence, and increased feelings of empowerment (Wandersman & Florin, 2003).

In addition to participant gains in perceived efficacy to positively impact their community, qualitative data collected during the study group process suggests that youths’ participation in this intervention led them to internalize a sense of personal responsibility for engaging in local violence prevention efforts. This sense of personal responsibility is one of the key ingredients needed to develop a ‘shared action orientation,’ which holds that FV is not simply the victim’s problem or a matter of punishing the perpetrator, but rather an issue that concerns the collective of the social and personal networks in which victim and perpetrator are embedded (Lyons et al., 1998). The attitudes, beliefs and behavior of friends, family members, and neighbors towards victims of FV all contribute to the shared action orientation of each community in which victims and perpetrators of FV reside (Klein, 2004). Thus, the current intervention sought to change the attitudes and salient factors that contribute to beliefs such as acceptance of violence or victim blame at the level of the community, as well as cultivate a commitment within young citizens to become change agents in their community through
modeling new attitudes and beliefs about FV and making a personal investment in local FV prevention efforts.

The study group process resulted in a number of intended and unintended benefits and outcomes that, taken together, provide initial evidence that youth participants developed a shared action orientation that has led to their continued involvement in coalition-based violence prevention efforts. First, all but one of the youth study group members committed themselves to participating in a six-week summer planning committee in which youth participants and coalition members worked together to write an action plan for their chosen school-based prevention program. This planning committee was formed in response to a call to action given to study group participants by their school principal during a group interview (as part of the study group’s environmental scan). In this interview, their principal let students know that if they wanted their chosen violence prevention program to be implemented at their school, he would need to see an action plan describing how the program would be implemented, funded, and sustained. From this call to action, youth participants indicated that they had the dedication and ability to plan and implement the violence prevention program which they now felt inspired to bring to their school. One participant stated in a study group session,

“I just feel like students here need to have their eyes opened to all the violence and intolerance that’s around us all the time. It has such a negative impact on us, but you don’t even think about it because it’s everywhere. And I realized that I want to be part of the solution, not just complain about how bad it is at our school. … When we were talking with [the school principal] I felt like he was looking at me as a good influence, not just a kid who always gets in trouble. And it finally feels like I can do something good to change our school the way I think would help.”

Wandersman and Florin (2000) assert that citizen participation in community-building projects, coalitions or prevention initiatives results in numerous benefits, including improvements in the quality of the local environment or program, increased feelings of control over one’s environment, and increased feelings of helpfulness and responsibility along with decreased feelings of alienation and anonymity. Such benefits appear to be reflected in this youth’s statement.

During the summer after the youth study group was completed, students and coalition members worked collaboratively on a six-week planning committee to create an action plan,
which resulted in obtaining formal permission to implement the chosen prevention initiative at the youths’ school. The planning committee also succeeded in forming a committee of students, teachers, school staff, and community members who would help to implement the chosen prevention initiative. Finally, the planning committee wrote and received a small student-led initiatives grant to help fund their initiative. Thus, the youths rose to the challenge presented to them by their school principal, succeeding in completing an action plan describing how their chosen initiative would be implemented, funded, and sustained.

The youth study group members also committed themselves to the formation of a lasting student activist group, which they named “Stand for Peace.” Importantly, the formation of this student violence prevention group was championed by the students themselves, which gained immediate support from the community coalition as an ongoing collaboration that would mutually benefit the youth, coalition, school, and community at-large. This student group has continued to meet weekly since its inception and has more than doubled its original membership to around 20 dedicated members (as well as additional student members who attend group more intermittently). Thus, Stand for Peace represents a lasting partnership between the community coalition and youth stakeholders, and has also joined forces with the school’s diversity club to promote several projects focused on changing school norms which support continued violence.

In particular, Stand for Peace has continued to champion the violence prevention initiative that they investigated during the study group process and designated as their top choice intervention for their school. The program “Challenge Day” is a set of school-wide violence prevention initiatives which stem from a student retreat. The program is designed to challenge students’ biases, stereotypes, and assumptions that lead to violent school norms and to break down the barriers that promote violence and misunderstanding among youths through a series of experiential exercises. Stand for Peace was integral to the planning, fundraising, evaluation, and successful implementation of this student retreat, which took place in the spring of 2009 and again in the fall of 2009. It provides a symbol of the lasting partnership between the coalition and the local high school, who have agreed to collaborate on funding and implementing the “ReDo Day” (Respect Everyone Despite Odds, which the students originated) retreat twice annually. These unanticipated outcomes provide preliminary evidence that youth participants’ involvement in the action research process empowered them to become community change agents through their continued involvement in local FV prevention efforts. The youths’ commitment to remain
actively involved in coalition-based violence prevention efforts suggests that this intervention boosted the sustainability of coalition initiatives, while ensuring that coalition efforts were meeting the unique needs and resources of young citizens.

Benefits to the Community Coalition

The action research process sought to provide the community coalition who partnered in this project with the following benefits: (1) uncover the barriers to engaging in effective FV prevention within this adolescent population, (2) identify the FV prevention initiatives that young citizens would prefer to be implemented in their community. The current section will provide preliminary evidence demonstrating that each of these coalition-related outcomes was addressed by the current research. In addition, although not a formal study aim, it was believed that the action research process would promote sustainability of coalition prevention efforts through ongoing citizen participation after the conclusion of the study group process. Due to the extreme challenges inherent in evaluating increases in coalition sustainability, this section will explore anecdotal evidence of increases in sustained partnerships and draw very tentative conclusions about the impact of the research process on coalition sustainability.

Uncovering Barriers to Effective FV Prevention with Young Citizens

Participants were asked to share their views on the barriers they perceived to stand in the way of preventing violence in their community (see Results for a complete list). One of the themes that emerged from participants’ identified barriers related to a lack of perceived support from adults in the school community. Specifically, participants felt as though there was very little support from school staff for speaking out against violence or engaging in violence prevention efforts, which youths attributed to both a lack of interest and investment by adults. Participants also spoke about receiving implicit messages from adults that teenagers are not able to impact the problem of violence. One youth participant spoke about the implicit messages she received while interviewing her teacher during the environmental scan process, explaining,

“I asked [teacher] about how students like me could help change the problem of violence in our school, and she just laughed a little and gave me a look like I had made a funny joke. … It felt terrible, like I was a joke to her. Like I could never do something positive to change things around here.”

A second theme that emerged from participants’ identified barriers was related to negative perceptions from other students towards violence prevention efforts. Specifically,
students felt as though they would be criticized or made fun of for choosing to engage in violence prevention efforts. In fact, several youth participants asserted that some of their peers had criticized the aim of promoting peace, calling it “trendy” or “fake.” This barrier indicated the need for careful consideration of how violence prevention initiatives would be framed or packaged to students. Awareness of this barrier was then integrated into later discussions about which kinds of violence prevention initiatives would be most likely to be well received by the high school student body and not fall victim to student criticisms of being trendy, fake, or cheesy. Knowledge of these perceived barriers also gave WCU the chance to seek allies within the school staff who could outwardly express their commitment to engaging in violence prevention efforts, in hopes of shifting students’ perceptions that school staff does not support violence prevention. In fact, many of the teachers who were interviewed by youth participants later expressed their interest in being allies of Stand for Peace.

Another barrier within the theme of negative student perceptions was related to seeing students who spoke out against violence and bullying at school being ostracized or themselves being targeted for abuse, which left youth participants feeling as though it was too risky to speak out on behalf of other students. This triggered the group to explore how students might protect themselves from being made a target for abuse while still engaging in violence prevention efforts. Interestingly, youth participants shared their observations that the study group had already created a buzz among the student body and was beginning to build credibility. Several youth participants believed that if the group went on to become a lasting student group, continuing to increase its student membership and notoriety, it would help create a safer environment for students to affiliate with violence prevention initiatives. Thus, participants surfaced practical ways of counteracting the local barriers to successful violence prevention which could contribute to changing the school culture to one of non-violence, where it would hopefully be less acceptable to criticize or bully another student simply for wanting to promote peace. The barriers to successful violence prevention uncovered by youth participants highlight the importance of considering how the degree of congruence among community, organizational, and program values can either facilitate or undermine program success (Miller & Shinn, 2005).

The third theme which emerged from participants’ identified barriers relates to an unhealthy school/community climate. The barrier receiving the highest number of votes was related to participants’ views that violence seems like the norm in their community, which leads
people to not call it into question. Although the current research base offers no evidence related to general or context-specific barriers to successful FV prevention, this barrier holds high face validity as a general, and perhaps even universal, barrier to engaging in FV prevention efforts. The second barrier contained within this thematic category may also serve as a generalizable barrier that cuts across many communities who struggle with violence, as it speaks to a dearth of positive locales for adolescents to socialize and engage in non-violent behaviors (yet an abundance of youth hangouts with drugs and violence).

The final theme which emerged from participants’ identified barriers relates to the secretive nature of FV. Participants summarized it in this way, “It’s hard to know when someone is the victim of abuse because they are often secretive about it, and this makes it seem like less of a problem than it actually is in our school.” Here again, this barrier holds high face validity as a universal barrier to engaging in successful FV prevention efforts. However, it may be that certain contexts, such as schools, would promote even greater secrecy than other service settings (e.g., DV shelters) which have been designed to help FV victims to feel an increased sense of safety in sharing their personal experiences with FV. If context does in fact lead to such variation, then it would hold that this barrier would exert a differential impact on FV prevention efforts according to setting characteristics. This may be particularly salient given the emphasis on demonstrating need for school-based prevention initiatives prior to their implementation in school settings. In sum, aside from a narrow literature on racial/ethnic and language barriers to effective violence prevention, the current research base offers little direction in terms of general versus context-specific barriers to FV prevention or what can be done to evaluate and address the barriers that exist in a given community or context. The current research project offers one method for uncovering these barriers to successful prevention programming and suggests that researchers and program designers may want to structure interventions in ways that involve participants and program users in the implementation process in order to increase the likelihood that both general and context-specific barriers to program success are identified and addressed.

Youths’ Preferred FV Prevention Strategies

Participants were asked to share their views on the violence prevention programs and initiatives they believed to be the best fit for the needs and preferences of their community (see Results for a complete list). In several instances, the strategies youth identified were programs which were already in place in their school. This provided the coalition with valuable
information about youth perceptions of existing services (e.g., participants felt that the Safe Dates program should be retained in health classes). It also spoke to youths’ perceptions about how existing services could be augmented to make them better aligned with their preferences. In contrast, other strategies youths identified revealed their desires for new prevention services, such as the Challenge Day program which received the highest number of votes. Interestingly, participants had previously been introduced to this prevention strategy by their high school English teacher, who represented a local champion for the program. Thus, youth participants recognized the value of building onto existing programs and services as well as implementing new strategies; they favored evidence-based practices as well as local innovations.

Participants also demonstrated their consideration of the way in which prevention strategies could be layered to complement one another. For example, participants’ desires to form a lasting student activist group dedicated to preventing violence led directly into a discussion of how such a group could join forces with the pre-existing diversity club to collaborate on activities designed to promote peace and equality. Participants also expressed their excitement that the student activist group could help to promote, plan, and implement other strategies such as Challenge Day. One student shared her belief that the presence of a lasting student group would greatly increase the chances of the Challenge Day retreat being well received by the student body.

It seems likely that the reflexivity of the process participants used to identify preferred prevention strategies increased the likelihood of certain strategies being favored (e.g., the recommendation to form a lasting student activist group seems to have close ties to the study group process itself). Still, this process suggests a useful method of designing programs and initiatives based upon the identified desires of potential consumers. Such a method is aligned with Daro and colleagues’ (2004) assertion that those attempting to develop effective intervention and prevention strategies must know a wide range of information about how families or youth view the services being offered to them, why service users accept or reject a given service, what other options they see in their community to support them, and how they view their relationship with their service provider. Moreover, such a method of uncovering consumers’ preferences for prevention strategies may have the added benefit of increasing consumers’ sense of desire and responsibility to engage in the process of implementing chosen prevention strategies, as it appears was the case for participants in the current study.
Promoting Sustainability of Youth-Focused FV Prevention

Through gaining permission to conduct the youth study group at the local high school and continually reporting progress and findings back to key school staff, an ongoing partnership between the coalition and school leaders was established. The information gathered throughout the study group process was framed as school needs assessment information, which helped to prove the need for further violence prevention initiatives at the school. This partnership seems particularly meaningful in light of the coalition’s long-standing, but largely unsuccessful, efforts to establish positive relationships with school leaders, as evidenced from the WCU executive director’s reflections on the outcomes of the study group,

“I still can’t believe how effective this process was at creating open communication channels with the school principal and administrators. We’ve been trying for years to get meetings with [the school principal] without much success, but he seemed more than willing to meet with students from the study group. And I guess that opened things up for us, because now we speak on a regular basis and he seems really open to collaborating with us on a number of school-based violence prevention initiatives.”

As such, it can be argued that the study group process helped to clarify and remove some of the barriers to doing effective violence prevention in this high school. The research process also paved the way for sustained collaborations between the school and the coalition.

For example, preliminary evidence of increased capacity for sustainability can be found in the school’s commitment to offer the ReDo Day retreat twice annually. This is a shared commitment made by WCU, school administrators, key staff, and student members of Stand for Peace, who worked collaboratively to plan, promote, fund, and implement ReDo Day initiatives. In both of the ReDo Day retreats that have occurred to date, the author was pleased to see six of seven youth study group participants taking leadership roles in facilitating the retreats (e.g., monitoring students to ensure that small groups did not promote existing cliques). Thus, it appears that youth participants internalized a sense of ownership of local prevention initiatives which enhanced the community’s ability to commit to sustaining prevention activities over time (Wandersman & Florin, 2000).

Although it must be recognized that not all of these additional outcomes can be directly attributed to the study group process itself, it is the position of this author that the action research process helped to create a lasting partnership which gave rise to a host of unintended benefits.
While readers may understandably question the potential for generalizability of these reported outcomes, lessons learned through the current research may be extended to other projects and communities by attending to the key ingredients of the study group process, which promoted the collaborative partnership that gave rise to these positive outcomes.

**Impact of PAR Framework and Lessons Learned about Participatory Research**

The principles of PAR guided all stages of the development and implementation of the current research process and are considered to be integral to the success of this intervention. The PAR framework from which the current research was conducted promoted a flexible, responsive, empowerment-based approach that enabled coalition members and youth participants to co-create the study group process, and this co-ownership facilitated youths’ commitment to continue to engage in violence prevention efforts that lasted far beyond the parameters of the research process. Thus, intervention fidelity focused on adhering to the overarching goals of the study group process, while allowing the specific content and methods of engaging with the specified content to be co-created by study group facilitators and participants.

Arguably, the PAR framework was an essential component of the shared action orientation that formed between coalition members and youth participants, which gave rise to a lasting partnership and a sustained commitment to engage in school-based violence prevention efforts. As one youth participant explained when asked to describe what worked well about the study group,

“You guys listened to us students and let us decide what we wanted the group to be all about, so it made us care more about it and want to keep coming to group. … Like I was shocked when you took my suggestion to get the Challenge Day video from [teacher], and the next thing I knew the whole group was talking about how cool it would be to bring Challenge Day here. And now we get to make that happen…and I feel like it was my idea that got it all started. It makes me proud. It makes me feel like my ideas really matter.”

This statement reflects the explicit value in PAR that research lead directly to action (Whyte, Greenwood, & Lazes, 1991); that citizen participants feel empowered to direct and participate in decisions relevant to their lives (Prilleltensky & Nelson, 1997); and that participation helps to balance the distribution of power by valuing citizens as authorities who should drive important decisions within their community (Perlman, 1983 as cited in Wandersman & Florin, 2003).
Elden and Levin (1991) assert that those who live in a particular community come to know more about it and develop more ways of making sense of their world than would be possible for anyone not embedded in this community to comprehend. In the current study, the youth participants showed that they were uniquely equipped to provide inside knowledge about the violence prevention initiative that was in fact already favored by much of the high school’s student body, unbeknownst to the local coalition. The youth study group process demonstrated that the best way to access such knowledge was through open dialogue with members of the community which the coalition wished to serve, inviting them to share their views in a free and supportive context. The participatory nature of the process provided the opportunity for reciprocal learning (between participants, coalition members, and researchers) that simultaneously helped to empower all participants, break down power differentials, and ensure relevance of chosen prevention initiatives to the local context (Sullivan et al., 2005).

Chalk (2000) suggests that the broad array of current FV services may be best viewed within an evolutionary perspective, recognizing that a diverse range of program experimentation and innovative practice is necessary when dealing with a complex and relatively new phenomenon in order to identify critical components that deserve investment and replication for a broader population in designing long-term strategies. Identification of these critical components is thus an essential step in moving from “promising” approaches to best practice standards and performance criteria in designing strategies to address FV. With this aim in mind, hypotheses about the critical ingredients of the current PAR project represent an important step in discovering what is generalizable outside of the current research framework.

An aspect of the current research which is arguably a critical ingredient for all PAR projects is the act of instilling the value of reciprocity in the research process. For the current project, this was addressed through modeling for the coalition and research participants alike how sharing research findings across community stakeholders (e.g., participants, coalition members, school administrators, and other community constituents) helped to open communication channels between stakeholders and demonstrate that something of value would be given back to them for their efforts. It also seems critical to all PAR projects to communicate value for the perspectives of citizen participants through the expressed belief that citizens of a given community are the best authorities on which services would be useful to them.
For the youth participants in the current research project, a critical ingredient appeared to be helping participants’ voices to be heard by those in positions of power over them (e.g., school staff, prevention service providers) in a way that empowered the participants to feel a greater sense of efficacy to engage in FV prevention efforts. The citizen-driven nature of the study group process also seemed to result in youths showing great initiative in research and action (e.g., one student spontaneously decided to create a brief survey and collect data in his health class; another student took it upon herself to create a MySpace page for the study group and began to poll other students through this online forum). Facilitating a process that was truly youth-driven required a willingness to continually re-evaluate the goals and direction of the group process in light of shifting needs and desires of participants. This necessitated a great deal of reflection on the part of study group facilitators in order to track fidelity to the principles and the process of PAR, while allowing the content of the study group to be molded by participants. This fits with Kemmis and McTaggart’s (2005) key features of the PAR process, which revolves around “a spiral of self-reflective cycles” of planning, acting out and observing the process and its consequences, reflecting on these processes and consequences, and repeating this cycle for the duration of the PAR process (p. 563). Thus, PAR projects may not follow the course researchers originally intended, but are more likely to have relevance and buy-in for the community at-large if determined by citizen participants. Appendix C contains a table highlighting some of the flexible adaptations that were made to the PAR process as it was originally designed for the current research study. It highlights the necessity for the current project of being flexible with proposed time parameters, both in terms of waiting for the coalition to indicate their readiness for the PAR project (which took significantly longer than anticipated) and in allowing the research participants to determine the number of study group sessions needed to fulfill the aims of the intervention (which took twice as many sessions as anticipated). The likelihood of significant alterations being made to the original PAR framework suggests that it is important for participatory researchers to continually remind themselves of the central tenets of PAR projects as decisions are being made about which project elements should not be subject to adaptation.
Limitations and Implications for Future Research

As an exploratory investigation in a relatively young field of study, the current research had a number of limitations which should be incorporated into interpretations of tentative conclusions as well as identifying next steps for research and action. These limitations apply to the content domains that were studied, the methods employed in this study, and the overlap between the two. As discussed, there is confusion in the field of FV prevention about how to best measure and demonstrate outcomes of prevention efforts, and even how to define the forms of violence which should be included under the umbrella of FV. When those prevention efforts are geared towards citizen participants rather than individuals directly at-risk or already involved in FV, the literature is even less clear. Given that the current research represented a locally-derived, context-specific, participatory method of FV prevention, it is perhaps no surprise that the current study raised more questions than answers. Thus, results from the current study should be considered preliminary, such that conclusions should not be assumed to apply to all communities in which FV is considered a problem.

It must be recognized that the current study had methodological limitations, including a small sample size which precluded the use of quantitative analyses which could have offered greater statistical power and sensitivity to detect small changes in pre-post findings (e.g., given more participants an analysis of variance would have been employed over multiple t-tests). The lack of a control or comparison group was also a significant limitation of the current study. Given the resources to conduct research study groups in multiple communities, strategic efforts to identify the essential components of the process itself and mechanisms of change would help to clarify existing questions about which elements are necessary in order to exert the effect demonstrated in participants in the current study, what limits should be imposed on the flexible administration of the study group process, which contexts are conducive to this process, and which community stakeholders are amenable to engaging in the process (e.g., Is this process suited only to youth participants?).

Another potential limitation in this study was the role of the researcher as participant-observer. The nature of PAR necessitates that researchers become embedded within the research process, and arguments could be made that this constitutes a strength over a limitation of the current research framework (e.g., it offers a solution to the research-to-practice gap). Efforts were made to triangulate the data and data analysis to offset the influence of the researcher on
the reported outcomes. However, the highly flexible and continually adapting nature of the PAR process presents a significant challenge to evaluation. Future research on methods for measuring and evaluating outcomes produced by FV prevention initiatives as well as participatory research methods represent important next steps in advancing these fields of study.

Finally, an unintended result of the recruiting process employed for the current study led to youth participants who had personally experienced interpersonal violence self-selecting into the study group. This led to several necessary adaptations to the study group process and suggests the importance of group facilitators possessing the basic clinical skills needed to deal with the psychological and emotional distress that can arise from such personal disclosures. It also suggests the need to pre-arrange referral sources for therapeutic services.
Conclusion

FV constitutes one of the major public health issues facing the United States (APA, 1996). While a growing number of researchers cite the need for prevention efforts that challenge the cultural norms, attitudes, and beliefs that condone violence among family members, there is little convergence across FV researchers as to which strategies represent best practices in the field of FV prevention (Daro et al., 2004). However, many researchers have unified around their rejection of traditional intervention research approaches (e.g., Green, 2001; Wandersman, 2003), arguing that many gains in science never fully translate to the practice level where these gains could result in widespread benefit. These critiques of prevention science have led to the creation of new research approaches which focus on implementation of interventions through community partnerships (Nelson et al., 2000), and evaluation of interventions through PAR (Jason et al., 2004). Such community-centered research holds great potential to inform the work of FV prevention coalitions by addressing the barriers to effective prevention practices. This study was one example of community-centered research which highlights the mutual research and action gains that are achievable when inquiry begins at the level of the community at-large and asks what service users need from science to achieve their aims.

Importantly, the action research process provided the coalition who partnered in the current research with a model of violence prevention and local needs assessment that is citizen-driven and based on empowerment. Coalitions are by their nature concerned with issues of empowerment (Stevenson et al., 1996); however, many continue to use a top-down model of disseminating programs to communities, where communities are viewed as passive systems ready to receive whatever programming is offered by service providers. In stark contrast, the current approach begins with knowledge generated within the community context and applies that knowledge to inform programmatic decision-making, in line with the approach recommended by Miller and Shinn (2005) and similar to Price and Behrens’ (2003) concept of “use-inspired basic community research.” Such a two-way approach, guided by researchers and service providers as well as citizens, requires one to take a contextualist position, which involves understanding the context-laden constraints on all knowledge generated. In the present research, the study group process helped to ensure that youth-focused violence prevention initiatives were informed by young citizens’ needs, resources and preferences. These young citizens then became local champions and co-implementers of their chosen prevention initiatives, which is perhaps the
ultimate evidence of the myriad benefits of citizen-driven efforts. When the moral responsibility for preventing FV is jointly shared by service agencies and citizens alike, a community can begin to build the type of reciprocity and mutual support viewed by many as essential to safety for all residents (Melton & Berry, 1994). Real advances in FV prevention depend upon innovative approaches to research and action that utilize what is known to address what is not, and the ultimate success of FV prevention strategies to transform social norms that uphold violence among family members as acceptable relies on such endeavors.
References


Appendix A
Parental Consent Form

Dear Parent or Guardian,

We would like your permission to include your child in a teen study group being conducted by the Warren County United to End Family Violence coalition. Your child was chosen to participate in this study group because of his/her outstanding contributions in recent health class discussions on the topic of family violence.

By participating in the teen study group, your child has the opportunity to use his/her voice to help us learn what youths in Warren County believe is important to their lives and their community. Their role in the teen study group would provide them with the chance to give back to the community by sharing their views on what they believe would help prevent family violence in Warren County.

Please note that we will not be asking your child to speak about personal experiences, rather the goal is to have your child share his/her views on how we can better understand and reduce the violence in our community. Portions of the groups will be recorded and analyzed for research purposes by a student from Miami University’s department of psychology. In addition, questionnaires will be administered to participating students. All data will be kept confidential. Possible risks of participating in this research project involve the potential for strong feelings to arise as youths discuss the topic of family violence. These risks should be very minimal.

Study group leaders will meet weekly with a small group of students after school for 6 weeks at X High School. If you would like more information about the teen study group, please contact X, Director of Warren County United to End Family Violence at (X), or Raven Cuellar, Miami University research coordinator at (X).

Thank you very much.
Appendix B
Youth Consent Form

Dear Student,

We would like to offer you the opportunity to participate in a teen study group being conducted by the *Warren County United to End Family Violence* coalition. You were chosen to participate in this study group because of your outstanding contributions in recent health class discussions on the topic of family violence.

By participating in the teen study group, you have the opportunity to use your voice to help us learn what youths in Warren County believe is important to their lives and their community. Your role in the teen study group would provide you with the chance to give back to the community by sharing your views on what you believe would help prevent family violence in Warren County.

Please note that we will *not* be asking you to speak about personal experiences, rather the goal is to hear your views on how we can better understand and reduce the violence in our community. The groups will be tape recorded and analyzed for research purposes by a student from Miami University’s department of psychology. In addition, questionnaires will be administered at the beginning and end of the groups. All data will be kept confidential. Possible risks of participating in this research project involve the potential for strong feelings to arise during discussions on the topic of family violence. These risks should be very minimal.

We will meet weekly with a small group of students after school for 6 weeks at X High School. If you would like more information about the teen study group, please contact X, Director of *Warren County United to End Family Violence* at (X), or Raven Cuellar, Miami University research coordinator at (X). If you have questions about your rights as a research participant, please call the Office of Advancement of Research and Scholarship at (X) or email (X).

Thank you very much.
### Table of Highlighted Adaptations to the Study Group Process

<table>
<thead>
<tr>
<th>Proposed Implementation</th>
<th>Flexible Adaptations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meet with coalition for 2 planning meetings prior to beginning study groups</td>
<td>Discussed study group process in 6 monthly coalition meetings before readiness was indicated;</td>
</tr>
<tr>
<td></td>
<td>Held 2 formal planning meetings with WCU subcommittee plus 4 less formal planning meetings prior to beginning study groups</td>
</tr>
<tr>
<td>Conduct concurrent adult and youth study groups</td>
<td>Focused exclusively on youth study group to honor coalition’s decisions about participant recruitment and prioritizing their resources for youth initiatives</td>
</tr>
<tr>
<td>Complete youth study group process in 6 sessions as suggested by guidebook</td>
<td>Extended process to 12 sessions to accommodate the pace set by youth participants;</td>
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<tr>
<td></td>
<td>Extended group meetings into the summer to continue pursuing goals established in the study group;</td>
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<tr>
<td></td>
<td>Formed a lasting student activist group to honor students’ requests for ongoing participation</td>
</tr>
<tr>
<td>The author’s facilitation of the study group process will be limited to preparing materials and taking detailed notes during sessions;</td>
<td>Coalition members requested that the author take the lead role in facilitating the group process;</td>
</tr>
<tr>
<td>WCU Program Director will co-facilitate all groups and hold the primary leadership role</td>
<td>WCU members attended 6 sessions to help with facilitation</td>
</tr>
<tr>
<td>Proposed Implementation</td>
<td>Flexible Adaptations</td>
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<td>-------------------------</td>
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<tr>
<td>Building youth participants’ knowledge and awareness of FV will focus on sharing compiled data on national, state, and local statistics and research related to FV</td>
<td>Youth participants revealed that each had personal histories with FV and expressed their need to process their own experiences in tandem with pre-existing information</td>
</tr>
<tr>
<td>Environmental scan will focus on gaining awareness of local problem of FV in participants’ communities (e.g., neighborhoods)</td>
<td>Youth participants made it clear that they wanted to focus on how FV affected their school community by interviewing fellow students, teachers, and school administrators</td>
</tr>
<tr>
<td>In creating a list of participants’ preferred prevention initiatives, they will draw from information provided on recommended practices in FV prevention and evidence-based programs</td>
<td>Youth participants formed an early consensus around one violence prevention initiative they had learned about from their teacher; At youths’ request, the group watched a 1-hour video on the Challenge Day program and invited their teacher to view and process this video with the group; Youths then decided to poll their classmates to learn about how other students would feel about bringing this initiative to their school</td>
</tr>
</tbody>
</table>