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## Domestic Violence Prevention and (Mis)managed Empowerment



An empowerment approach to <u>domestic violence prevention</u> is one in which women and their families are encouraged to take control of their own decisions and destinies. However, misunderstandings around meanings of empowerment can pose challenges for domestic violence prevention workers. Our study examined how domestic violence prevention staffs deal with the challenges of putting empowerment into practice.

<u>Domestic violence prevention organizations</u> that take an empowerment approach increase the likelihood that survivors will achieve positive outcomes because of their focus on

individualized care and flexibility in goal setting and attainment. But how empowerment is defined and what it actually looks like to be empowered can vary with the survivor.

To develop a better understanding of how domestic violence prevention staff define and enact empowerment, we examined "Harbor Safe House" (pseudonym), a domestic violence center and shelter for survivors of domestic abuse. Having participated in a rigorous 40-hour training to become volunteers at the shelter, we were in unique positions to access a myriad of data for analysis. Eventually, over a six-month period of data collection, this included 29 in-depth interviews with staff, interns, board members, and volunteers; field notes from our weekly volunteer shifts; and organizational documents, such as the policy and procedures manual.

Harbor Safe House adopted an <u>empowerment approach</u> with survivors. However, we found the extent to which empowerment was (not) defined and enacted was problematic. As such, this case study highlights how an organization that promotes empowerment paradoxically works to undermine the agency of social service employees.

We discovered two main challenges Harbor Safe House staff faced when trying to empower survivors. The first challenge staff talked about was a consistency problem. That is, because Harbor Safe House took an empowerment approach to client interaction, the staff also expected to be empowered.

How the organization developed since its founding illuminates this challenge. In the 1970s, Harbor Safe House was established as a <u>feminist collective</u> without a hierarchy or executive director. Instead, staff engaged in consensus decision making about where the organization went, what grants were applied for, how much the staff would make." At this time, staff perceived they were empowered to do their jobs.

By 2010, the organization had gradually transitioned to a more <u>formal hierarchy</u> with an executive director and two midlevel managers because the Board felt the executive director was not doing enough "big picture work." However, staff no longer felt they were empowered in their positions. Some didn't understand why these changes had occurred; others felt they should have been consulted about these changes; and still others felt the new hierarchy compromised their voice. Most staff believed that management "should be doing a little more empowering of their staff while they're supposed to be having the staff empower the women."

The second challenge Harbor Safe House staff talked about was a <u>transparency</u> problem. Staff felt the organization's official definition of empowerment was too ambiguous, leaving them confused about "what kind of responses to women's questions are empowerment." But management argued the definition of empowerment needed to be flexible enough to allow staff to address the individual needs of survivors.

When management did not provide staff with more clarity regarding empowerment, some workers created their own meanings of empowerment that, unfortunately, worked to disempower survivors. Staff often blamed survivors for failing or for not being empowered. Staff constructed survivors as lazy and entitled for "getting free rent and board." Staff claimed that the empowerment model "can create a crutch" where survivors become too reliant on staff to meet their needs. Staff also generated informal rules

to determine who would receive services. For instance, survivors who applied for jobs and appeared to be actively trying to improve their situation were allotted more resources than survivors who appeared to be spending their time sleeping and "doing nothing."



Importantly, not all staff resolved their desire for empowerment transparency in these ways. For example, some staff redefined what constituted an "emergency" to determine where the work of empowerment ends and to redirect efforts back to advocacy and away from enabling. A staff member whose personal life was suffering because she would always quickly respond to survivors' requests admitted, "The only emergencies for me are if your abuser found you and you need to get out of town."

This study directs attention to how differences with regard to workplace expectations and empowerment meanings between management and staff can create and perpetuate problematic workplace practices. This study also considers the effectiveness of <u>domestic violence prevention</u> and <u>intervention programs</u> by indicating how the services offered sometimes do not have the intended outcome.

We offer some practical take-away points in the form of suggestions for empowerment-based programs to address these challenges. First, organizational leaders should encourage staff and survivors to collaboratively develop empowerment guidelines that add specificity and clarity without creating a "one-size-fits all" approach. For instance, Harbor Safe House does utilize an <u>advocacy wheel</u> that outlines the different facets of empowerment, but they need to clarify a baseline of "quality services." This baseline could take the form of a checklist that assists advocates and survivors in collectively assessing the particular needs of a survivor, but not a list that generates a hard and fast process. Advocates and survivors would ideally discuss checklist items to determine, for instance, a survivor's short-term and long-term goals (e.g., financial, employment, housing, childcare), what she perceives she needs to achieve those goals (e.g., resources), and her general timeline (e.g., days, weeks, months). This checklist should build in flexibility to accommodate a woman's individual and particular needs and to assist her in prioritizing her goals. Then advocates could discuss survivor checklists with other advocates to offer advice in how best to empower each survivor.

The second suggestion is a reminder to explicitly acknowledge the emotional aspects of domestic violence work by engaging in conversations and strategizing with staff about how to balance the tension between advocacy and enabling and how to avoid favoritism while still doing good work. These conversations could be incorporated into regularly scheduled meetings where individual staff report the challenges they experienced each week and gain insight from organizational colleagues on how to move forward. Alternatively, these conversations could be part of a series of sessions devoted exclusively to discussing the emotion work of domestic violence prevention and potential coping strategies.

The third suggestion is to constantly reflect on whether the organization is sticking with its fundamental beliefs. For instance, we collaborated with Harbor Safe House leaders on developing a series of "brown bag" presentations based on our recommendations and topics about which the staff wanted to learn more (e.g., learning about how to facilitate group communication skills and how to enact self-care practices). Reflection on the organization's strategic vision and everyday workplace procedures were incorporated into this series.

Although empowerment based approaches to domestic violence prevention are on the rise, given the increased likelihood of positive outcomes for survivors, our study reveals the challenges staffs face when putting empowerment theory into practice. Organizations charged with doing the work of domestic violence prevention should consider how thoughtful reflection, candid conversation, and strategic focus can assist staff with bridging the gap between theory and practice.

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