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Perceptions of Preparedness For Serving Intimate Partner Violence Clients

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PERCEPTIONS OF PREPAREDNESS FOR SERVING INTIMATE PARTNER
VIOLENCE CLIENTS

A Project
Presented to the
Faculty of
California State University,
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work

by
Diana Berenice Galvan

June 2017

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ABSTRACT

This study utilizes a cross-sectional quantitative study design that explores the perceptions of preparedness of advanced year Master of Social Work (MSW) students, regarding intimate partner violence (IPV) clients. Currently, there may be gaps in regards to adequately preparing students for serving intimate partner violence clients. This is an exploratory study and data is collected using self-report surveys, which include questions on: demographics, perceptions of preparedness, and education/training received on IPV. This study seeks to identify a correlation between the education/training that MSW students receive on IPV, and their levels of preparedness for serving IPV clients. This study hopes to gain a better understanding on which factors affect MSW students' feelings of preparedness for serving IPV clients. The results indicated that perceptions of preparedness are associated with field training, field placement, age and gender. There was a positive relationship between field training and feelings that field placement prepared students for serving IPV clients, and a positive relationship between field training and feelings of having sufficient knowledge in IPV. There was a positive relationship between age and feelings of having sufficient knowledge of IPV, and a negative relationship between age and feelings of needing more knowledge. Finally, there was a negative relationship between being a woman and feelings of preparedness for making appropriate IPV referrals. Findings will be used as a way to recommend future education/training

implementation on graduate-level coursework, in order to better prepare students for serving this client population

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CHAPTER ONE

INTRODUCTION

Problem Statement

While a master's education and a national code of ethics is expected to better prepare social work students in working with a wide range of client populations, there may still be inadequacies in the abilities of these students, due to some of the gaps that exist in both educational and organizational settings. More specifically, there may be gaps in preparing students when it comes to serving intimate partner violence clients. Currently, the Council of Social Work Education [CSWE] and the National Association of Social Workers [NASW] lack standards, competencies, or policies, that specifically addresses areas regarding domestic violence or sexual assault, unless attached to other family violence statements (McMahon, et al. 2013). For purposes of this study, the terms domestic violence and intimate partner violence will be used interchangeably as they both describe the same criminal offense, but come from different origins (Wallace, 2015).

Educational settings such as graduate social work departments may be limiting Master of Social Work [MSW] students from acquiring adequate training and education on intimate partner violence, since not all MSW programs offer courses specifically designed to teach this topic area to MSW students. Additionally, intimate partner coursework is not mandatory for licensing requirements, which is a larger, organizational issue. In a survey completed by

the Social Work Boards in the United States, it was found that only two of the country's states required mandatory coursework on intimate partner violence for social workers that were seeking to obtain or maintain a license (Stylianou & McMahon, 2013). Intimate partner violence is an area that many social workers will find themselves encountering in the field due to the rates for these individuals being extremely high and are negatively impacting many of those around us.

A survey accessed through the National Coalition Against Domestic Violence [NCADV] indicated that millions of Americans were impacted by intimate partner violence every year, approximating to 20 individuals per minute (2015). Additionally, statistics show that a woman in the United States is assaulted or beaten every 9 seconds, domestic violence accounts for approximately 15% of all violent crime, and the most common age of women being these victims of these cases fall between the ages of 18-24 (NCADV, 2015).

Individuals that suffer from intimate partner violence make up a large number of those in our society, therefore it is imperative for students preparing to be social workers in their master's program to have the appropriate skills, beliefs, and competency levels to effectively work with these populations. The field of social work is one of the major professions currently serving clients affected by intimate partner violence, therefore, these professionals should be prepared to adequately assist these client populations.

Having a course relating to intimate partner violence at the graduate level

can benefit social workers to be better practitioners, as this would not only include more content knowledge and topic sensitive support skills for them, but it would also help address and eliminate any potential prejudicial beliefs about this topic area as well; Prejudicial beliefs of intimate partner violence clients may stem from not being educated in this topic area, and may result in difficulties with beginning a therapeutic relationship with these clients in the first place.

It is significant to produce this study as past research has also demonstrated unprepared MSW students by their own self-evaluations. One study showed that the social work discipline has struggled with preparing students to deal with issues of intimate partner violence, where the case indicated that 55% of social work students had either little or no preparation for working with these survivors (Danis & Lockhart, 2003). Another study examined 124 social work students, only a small percentage of them were aware of specific interventions for cases of domestic violence (Black et al. 2010). It is imperative for MSW students to be prepared for serving intimate partner violence clients, as they are likely to be at the forefront for serving these clients. Intimate partner violence clients may suffer dramatically if helping professionals are not feeling prepared to serve them.

Purpose of Study

The purpose of this research study is to assess MSW students at California State University, San Bernardino, in regards to their preparedness for serving intimate partner violence clients. As practitioners in the making, MSW

students are one of the most prominent groups of individuals that will likely be working with victims of intimate partner violence, both within their graduate field work timeline and post-graduation as well. It is necessary to assess whether MSW students at CSUSB feel prepared in serving intimate partner violence clients, since they will be playing a large role in managing counseling and providing services for this population.

At the graduate-level program at CSUSB, MSW students receive more education, supervision, and practice pertaining to this human services field than the school's BSW students. MSW students enter CSUSB's generalist program to gain certain skill sets, beliefs, and competencies, with the effectiveness to promote social support and positive change for clients of all backgrounds. MSW students at CSUSB are expected to gain the necessary tools required to be successful practitioners, but it is necessary to assess if completion of their graduate-level curriculum is sufficient in developing them into skillful and cognitively empathetic, social workers.

For MSW students studying the generalist program at CSUSB, a course in intimate partner violence is not mandatory or even offered in their curriculum. Additionally, a course on violence against women is also not offered at the graduate-level. Content area on violence against women could potentially allow CSUSB students to gain a better understanding of intimate partner violence as well, since violence against women has been known to teach about power differences between genders and as statistics have indicated before, rates of

intimate partner violence are skewed in favor of one particular gender. As research has shown, women maintain the highest victimization rates in cases of intimate partner violence, therefore, a course on violence against women could potentially help educate MSW students more on intimate partner violence, overall strengthening their skills and knowledge to work with this client population.

Specialized courses that do currently exist in CSUSB's MSW program are alcohol and substance abuse and gerontology, where students are able to get a deeper understanding of these topic areas that currently affect high rates of individuals, today. As was mentioned before however, intimate partner violence rates are also high and are affecting large numbers of society's population today as well. It is imperative to assess whether or not the absence of an intimate partner violence course for CSUSB's MSW curriculum is negatively impacting CSUSB's students' competency levels, and overall, affecting their levels of preparedness to work with this client population.

This research study employs a cross-sectional quantitative design and focuses on MSW students from CSUSB. More specifically, this study uses self-administered survey questionnaires and collects data from the advanced-standing MSW students at CSUSB. This is an exploratory study, as topic areas concerning the need for in-depth intimate partner violence courses in MSW programs are still relatively new. Several questions pertaining to this topic area were asked in order to better identify general themes that may be causing CSUSB MSW students to not feel prepared upon graduation of the program.

Significance of Study

Some social work education does not specialize or go in depth in teaching or training graduate students about intimate partner violence clients; this lack of training and education may be influencing these future social work professionals' ability to adequately provide services for these client populations. For the purposes of this study, the generalist intervention of assessment is informed. By assessing MSW students at CSUSB, we can better determine whether or not the current graduate-level social work curriculum is providing students with a wide enough range of skill sets that will best prepare them for field. After determining potential graduate-level inadequacies, we can then better determine additional or even alternative content to best prepare students at the CSUSB campus, and potentially, other university campuses as well.

This research study was conducted based on an earlier article review (Ahrens, 2006), which discusses unsatisfied intimate partner violence clients; these clients were unsatisfied with the services they received from human services professionals. It is crucial for MSW students to be prepared for serving these client populations, which includes them having adequate knowledge and training on this topic area. MSW students should acquire knowledge and training on intimate partner violence, at the minimum, during their graduate years.

By assessing MSWs' perceptions of preparedness regarding intimate partner violence, we can improve and standardize social work practice among universities nation-wide. Since student perceptions of preparedness tend to be

attributed to the development of skills, beliefs, and competencies gained throughout their MSW programs, it would be beneficial for MSW programs to incorporate policies and procedures in their curriculums that include training and education regarding intimate partner violence. Graduate social work programs may utilize the findings of this particular study to develop and implement standards and competencies in this topic area. Additionally, the findings of this study could potentially incline other researchers to assess social work education in regards to preparedness and current treatment services for other client populations as well.

The research question for this study is: Is there a relationship between education/training received on intimate partner violence and MSW students' perceptions of preparedness to work with intimate partner violence clients?

CHAPTER TWO

LITERATURE REVIEW

Introduction

As social workers play a large role in having cases that involve intimate partner violence, it is vital for them to receive adequate education throughout their graduate-level course studies in order to effectively address these types of sensitive cases in the future. Unfortunately, several existing factors related to graduate-level programs may be leading to MSWs feeling unprepared to work with these particular client populations. This chapter consists of articles relevant to the research that may better help us understand how the structure of a graduate-level social work program may be contributing to MSW students' abilities and feelings of preparedness when working through cases relating to intimate partner violence.

Graduate-Level Curriculum

In a previous study with social workers already in the field, 36% of social workers had not received exposure to content on domestic violence during their MSW education (Tower, 2003). Graduate programs for social work oftentimes rely on general courses to address family violence rather than on deliberate, focused intimate partner violence courses. Decision-makers such as social work school administrators have not expressed the need to go past general courses for addressing intimate partner violence competency needs.

Administration in many schools of social work believe that necessary knowledge, skills, and attitudes in addressing domestic violence issues are incorporated in foundation courses in social work curriculum (Black et al., 2010). In a study about teaching domestic violence to social work students, 31% of direct-practice textbooks used in social work programs in California contained no information on domestic violence; other textbooks either supported or failed to address some of the most common myths about domestic violence (Friend & Petrucci, 2001). This study illustrated that in-depth content in regards to knowledge, skills, and attitudes for addressing domestic violence were lacking in many social work curriculums.

A study that administered a survey to 124 graduating MSW students assessed their ideas about the causes of domestic violence and interventions for it as well. In this study, many students appeared to be unfamiliar with some of the literature on domestic violence. Most of the students surveyed suggested couples' intervention or family intervention; two interventions that should take place only after the batterer has been involved in their own batter's intervention where they learn to take responsibility for their violence (Bograd & Mederos, 2007). Students appeared to lack knowledge on how to effectively intervene in domestic violence situations, as most of the participants showed low familiarity with specific domestic violence interventions and low familiarity with domestic violence terminology overall (Black et al., 2010). A limitation in this study was that the sample of students that participated in this study belonged to only one MSW

program. This sample of students may differ in familiarity with domestic violence and interventions compared to other samples of students, therefore, this study would need to be performed on more samples of MSW students. If this study had similar results among more samples of MSW students, it would further support the finding that many MSW programs are lacking in teaching their MSW students about domestic violence and hindering their competency levels in this topic area overall.

The numbers of graduate-level social work programs that offer courses in domestic violence are another factor that may be leading to ineffective practitioners working with cases of domestic violence. In one study, it was recorded that among websites of social work programs, only 5 out of 74 master of social work programs offered courses in intimate partner violence and only 17 had course that addressed family violence (Cohn et al., 2002). The unavailability of courses in this topic area may be contributing to social workers being unprepared upon entering the field with cases of domestic abuse, as it is likely that students who do not have these courses available to them will have less opportunities to learn about this topic area.

A different type of study illustrates how content-specific classes in domestic violence can contribute to MSW students feeling more prepared when working with cases of domestic violence. According to Tower, 93% of MSW students indicated feeling better prepared for screening clients for domestic abuse in their clinical settings after taking an MSW course on domestic violence

(2003). These previous studies can infer that having additional content on domestic violence in MSW coursework may help social work students gain more knowledge and feel more prepared when working with populations that have experienced or are experiencing domestic violence.

Social Work Research on Domestic Violence

In addition to social work curriculum lacking domestic violence as a topic area, impacting MSWs' readiness with domestic violence cases, a scarcity of social work research literature in this area is also an issue that may negatively be affecting these students and their future professional careers. A lot of research literature that teaches on the topic of domestic violence is more prevalent in nursing and medical literature compared to social work literature, where research on sexual assault is also less available within the field of social work (McMahon & Schwartz, 2011). One limitation to this may be that in earlier times, domestic violence was an area that medical fields treated at higher rates compared to social service facilities, therefore, the social work field may still be adjusting to now becoming one of the primary calls of action to this population. The scarcity of social work research literature in domestic violence may also be contributed to the types of social work field placements that students are placed into as well as types of the social work faculty that are employed in MSW programs.

Through social work thesis papers, it is expected that MSW students construct scholarly research relating to a specific topic area, preferably related to their advanced year field placements. In 2014 however, the CSWE reported that

out of 37,699 students enrolled in master's programs, the most common field placements were in community mental health or mental health services, with rates of approximately 32.8%, while only 2.8% of students are in domestic violence or violence field placements (CSWE, 2014). Due to social work curriculum already lacking domestic violence as a main topic area, and field placements having low numbers of students in these sites, less research is constructed in areas of domestic violence, making it difficult to increase knowledge in this field of area overall.

Domestic violence research might also be limited due to the research project areas that social work PhD candidates regularly pursue in the doctoral setting. Many doctoral research topic areas, such as the University of Southern California [USC], do not typically focus on areas of domestic violence. Currently, their web page advertises 31 different types of research projects that are ongoing, where not 1 of the 31 projects is concentrating in areas related to domestic abuse (University of Southern California, 2016). Concentrations on topics related to domestic violence in social work programs such as with USC, are not always emphasized as an area of specialization to doctoral students, possibly leading to less PhD candidates being involved in this type of research and population group. Of course, USC is only one of several social work programs that offer PhDs in social work; therefore, it cannot be assumed that this is the case for all research projects in all social work doctoral programs, in regards to addressing areas of domestic violence. More research is needed in

identifying all ongoing research projects in PhD programs in order to see how many doctoral social work programs do and do not have ongoing research projects in areas pertaining to domestic violence.

Not only do doctoral programs create barriers for PhD candidates and graduates to pursue research in domestic violence, but they also create barriers for adequately preparing these individuals in teaching domestic violence to graduate-level students after becoming social work faculty. Since lower numbers of PhD candidates and graduates pursue research in domestic violence, this may contribute to having less faculty members being specialists in this topic area, ultimately, being unable to provide enough information about it while teaching graduate-level students. A lower number of faculty members being specialists in teaching about domestic violence at the graduate-level, may limit opportunities for master's level students to gain knowledge about areas pertaining to domestic violence, overall, negatively affecting MSW's competency levels in this topic area.

Theories Guiding Conceptualization

Students graduating from MSW programs typically graduate with a mental health orientation, focusing mostly on the individual and interpersonal dynamics; this may be contributing to the lack of MSW students really understanding the complexity of domestic violence (Black et al., 2010). By focusing on individual and interpersonal dynamics, MSW students may lack in understanding the issues related to power and control, something that contributes to domestic violence. A

feminist perspective on domestic violence may be lacking in MSW programs, causing students to miss the opportunities for learning about violence within traditional power structures of male dominance and female subservience, as women are typically the victims of domestic abuse.

Two theories used to conceptualize domestic violence, and more specifically, battering on women, are social learning theory and patriarchal theory. Social learning theory suggests that domestic violence is learned behavior that is modeled, rewarded, and supported by families and/or the broader culture (Wolfe & Jaffee, 1999). This theory focuses on aggression used to resolve conflicts based on the way individuals learned about it from a younger age. Social learning theory would suggest that children from violent households are at higher risk to harm others when they reach an older age, after witnessing it from interpersonal groups of family and peers (Gosselin, 2005). Unfortunately, social-learning theory focuses more on witnessing individual behaviors and not as a social structure.

Patriarchal theory, also referred to as the feminist approach, is a more widely used perspective on woman battering and emphasizes gender and differences within the context of society within power relations (Gosselin, 2005). This theory states that the power of men is attributed to a privileged status, where women are controlled and abuse against them are justified in order for men to maintain power (Gosselin, 2005). Both power and control work to establish and maintain the subordination of women, and the only way to make

changes to this power struggle is by changing social structures. (Gosselin, 2005).

Aligning with patriarchal theory is The National Coalition Against Domestic Violence [NCADV] description of domestic violence that states that domestic violence is part of a systematic pattern of power and control and is perpetuated by one intimate partner against another (The National Coalition Against Domestic Violence, 2015). The patriarchal theory helps to frame the process that domestic violence against women holds constant due to the patriarchal structure that society has continued to maintain, where women are the subordinates and men control and abuse them in order to hold power.

Summary

This study explores graduate-level curriculum of social work at CSUSB in order to assess students' competencies and levels of preparedness regarding intimate partner violence. Barriers such as generalization of courses, literature, and current research on domestic violence have been identified. A feminist perspective with sociological views of causality may help MSW students better understand and support cases regarding intimate partner violence. This study assesses current knowledge bases and feelings of preparedness of advanced-standing MSW students; this study seeks solutions that will improve MSW students' skills, beliefs, and competency levels upon graduation, and ultimately, their professional lives ahead of them

CHAPTER THREE

METHODS

Introduction

In this section of the study, methods and a research design are used to explore and investigate MSW students' perceptions of preparedness to serve clients of intimate partner violence. The study design, sample characteristics, data collection, instruments, procedures, protection of human subjects, and data analysis are outlined and described. This methods section illustrates how the research was conducted.

Study Design

This study explored the relationship between levels of preparedness to serve clients of intimate partner violence and education/training received on intimate partner violence. MSW students completed self-reports regarding the number of education/training they received in the past (or are currently receiving), as well as self-reports regarding how prepared they perceive themselves to work with intimate partner violence populations. The data collected is used to show a relationship between intimate partner violence content and preparedness to work in this topic area.

If results demonstrate a positive relationship between perceived perceptions of preparedness and education/training received, regarding intimate partner violence, MSW departments may reflect on the need to add specialized

training or curriculum content in this area. If a positive relationship is observed, CSUSB and other universities with MSW programs may consider providing opportunities and professional development in intimate partner violence education, and this may potentially lead to better prepared social workers upon graduation, in regards to working with intimate partner violence clients.

This study used a quantitative process with a survey questionnaire that was developed by the researcher. The survey gathered information regarding MSW students' perceived perceptions of preparedness for serving intimate partner violence clients. This study used an exploratory design with self-reported surveys that were distributed and administered by the researcher, between two MSW cohort classes. This self-reported survey design best fits the study based on sample size, time limitations, and university settings. Results were collected from large groups of people within a short period of time and were easy to quantify as well.

A limitation from using this quantitative process with a survey questionnaire was the amount of researcher imposition that was made. The quantitative survey questionnaire imposed the researcher's own decisions and assumptions in regards to what the respondents could choose from. Another limitation was that respondents may have interpreted the questions differently from one another, and may not have acknowledged a level of subjectivity. Additionally, there was no way of telling if respondents completed the quantitative surveys honestly or with much thought.

The research question for this study was: Is there a relationship between education/training received on intimate partner violence and MSW students' perceptions of preparedness to work with intimate partner violence clients?

Sampling

The sample used in this study was collected from MSW students attending California State University, San Bernardino. This study was assumed to consist of different genders, ages, and ethnicities, but this also depended based on which individuals actually completed the demographics section to its entirety. The sample was a non-probability sample, where data was gathered through purposive sampling.

Forty-seven participants took part in this research study. Of the forty-seven participants that took part in this study, all participants were advanced year students in the MSW program at CSUSB, and included both part-time and full-time students. This sample was chosen due to its convenience, cost-effectiveness, and because it provided a moderate time-consuming method of measure.

Data Collection and Instruments

The data was collected by having MSW students complete self-administered surveys that the researcher handed out at the beginning of MSW student classes. Data collected included demographic data, perceptions of preparedness data, and data indicating education/training received by MSW

students. Patterns between data will be observed, and the researcher will identify any (significant) relationships between the data, specifically, between perceived perceptions of preparedness and education/training received by MSW students. The independent variable was educations/training received by MSW students while the dependent variable was perceived preparedness. The level of measurement for the independent variable was nominal dichotomous and the dependent variable was interval.

The survey was adapted from an existing instrument called the PREMIS (Physician Readiness to Manage Intimate Partner Violence) survey tool. The objective of the PREMIS tool is to measure physician preparedness to manage IPV patients and this tool can be used to measure the effectiveness of IPV education programs (Short et al., 2005). The tool has been shown reliable and valid and its internal consistency among items on this scale was high ($\alpha=0.963$) (Short et al., 2005). A limitation of using this tool is that it was originally intended for physicians and not for professionals in the social work field.

The adapted survey focused on MSW students and IPV clients rather than on physicians and patients. While other works have demonstrated that the PREMIS was sensitive to change and capable of discriminating between trained and untrained physicians, this research was cautious about ensuring that the adapted instrument was culturally sensitive.

Procedures

Research was conducted through the support from CSUSB's MSW

program director, Dr. Laurie Smith. A letter of approval was received from Dr. Smith giving permission for researcher to distribute surveys beginning Winter Quarter 2017. Paper surveys were offered to students in their classrooms at the beginning of class. Prior to offering students surveys in class, the researcher gained professor approval to do so. Students were informed that the school did not require participation. No incentives were offered to students that participated. Surveys were kept secured and confidential, and were transferred to the computer software Statistical Package for the Social Sciences (SPSS). After coding and analyzing of the data was completed, hard copy surveys were destroyed. Data collection lasted one day, as surveys were distributed to two cohorts at different times of the day. MSW students who received surveys took no longer than 10-15 minutes to complete them. Data analysis commenced shortly after surveys were collected and inputted into SPSS.

Protection of Human Subjects

Precautions for ensuring confidentiality and anonymity were provided to protect participants in the research study. Data was collected directly from participants during class time and informed consent forms were provided in the beginning section of the surveys. The informed consent included the purpose of the research that was being conducted, a description of procedures to follow, and information in regards to MSW student's participation in the study.

Students were informed that their participation in completing the survey was optional and that even if they had chosen to begin the survey, they had the

choice to withdraw from the survey at any given time as well. Participants were given the option to not complete the survey to its entirety, as they were allowed to choose and not answer certain questions. The survey included a debriefing statement towards the end, where the purpose of the study was reiterated to participants. Additionally, the debriefing statement provided contact information to direct any concerns or questions that arose from the study.

Identifying information was not collected in the survey, as this helped ensure protection of the participants' confidentiality as well as anonymity. Data analyzed was destroyed and disposed of and students were given an opportunity at the end of the school year to view results of the study, after being publicized by the university.

Data Analysis

Quantitative data analysis took place for this research study and was collected and coded through SPSS. The quantitative data analysis was bivariate and attempted to demonstrate a correlational relationship between the independent variable of education/training and the dependent variable of perceived perceptions. Frequency tables were used in order to describe MSW students who participated in the surveys.

Independent variables such as education/training received by MSW students attempted to help the researcher understand if those factors had an impact on MSW student's perceived perceptions to succeed in serving clients of intimate partner violence. Perceived perceptions of success were the dependent

variable.

Descriptive statistics were used to summarize demographic characteristics, such as age, gender, and race. Cohort level (part-time and full-time) and previous experience was gathered to possibly demonstrate causal relationships for determining perceived perceptions of preparedness. Inferential statistics were used to generalize results to the entire CSUSB MSW student population. This was an exploratory study that used both descriptive and inferential statistics in order to show MSW students' levels of preparedness for serving clients of intimate partner violence. The statistical test used was a correlational study.

Summary

This methods section explores and investigates perceptions of preparedness of MSW students in regards to serving clients of intimate partner violence. Ethical research methods were employed and research was conducted in order to provide knowledge and understanding of MSW students' level of preparedness to serve this vulnerable population group. Implications of the results of the study will be up for discussion.

CHAPTER FOUR

RESULTS

Introduction

This purpose of this chapter is to outline the results of the statistical analyses conducted. This chapter will include a detailed report of the sample tested, descriptive statistics, and the results of inferential statistics analysis conducted. The first section will summarize the results for the descriptive statistics, which include age, gender, race/ethnicity, and student status. Other areas of this section will report a correlation analysis between education/training received and scales pertaining to perceived perceptions of preparedness.

Presentation of Findings

Descriptive Statistics

More than three quarters of the of the survey participants, as presented in Table 1, identified as female (n=37, 78.7%) and 9 (19.1%) identified as male. One participant (2.1%) preferred not to disclose their gender. Ages ranged from 18-24 (n=5, 10.6%), 25-34 (n=33, 70.2%), 35-44 (n=16, 2.8%), to 45-54 (n=3, 6.4%). Of the participants surveyed, 4 (8.5%) identified as African American/Black, 16 (34%) identified as Non-Hispanic White, 22 (46.8%) identified as Hispanic/Latino (a), 2 (4.3%) identified as Asian American/Pacific Islander, 1 (2.1%) identified as American Indian/Alaska Native, 1 (2.1%) identified as Non-Hispanic White and Latino, and 1 (2.1%) identified as Non-

Hispanic White and Asian American/Pacific Islander. For student status, 26 (55.3%) participants identified themselves as full-time students and 21 (44.7%) participants identified as part-time students.

Table 1. Demographics Characteristics of Study Sample

| | N | Percent |
|--|----|---------|
| <i>Age</i> | | |
| 18-24 | 5 | 10.6 |
| 25-34 | 33 | 70.2 |
| 35-44 | 6 | 12.8 |
| 45-54 | 3 | 6.4 |
| <i>Gender</i> | | |
| Male | 9 | 19.1 |
| Female | 37 | 78.7 |
| Prefer not to disclose | 1 | 2.1 |
| <i>Race/Ethnicity</i> | | |
| African American/Black | 4 | 8.5 |
| Non-Hispanic White | 16 | 34 |
| Hispanic/Latino (a) | 22 | 46.8 |
| Asian American/Pacific Islander | 2 | 4.3 |
| American Indian/Alaska Native | 1 | 2.1 |
| Non-Hispanic White and Latino | 1 | 2.1 |
| Non-Hispanic White and Asian American/Pacific Islander | 1 | 2.1 |
| <i>Student Status</i> | | |
| Full-time | 26 | 55.3 |
| Part-time | 21 | 44.7 |

Inferential Analysis

Analysis was conducted using SPSS software version 24. Pearson correlation analysis was used to examine the association between education/training received on IPV and perceptions of preparedness statements. A series of correlation matrices were conducted where independent variables of interest (e.g. education/training received and select demographic characteristics) were correlated with the perception of preparedness items. It was found that field training received was positively related to feelings that field placement prepared students in serving IPV clients ($r=.47$, $p=.01$; See Table 3. in Appendix D). It was also found that field training received was positively related to feelings of having sufficient knowledge in IPV ($r=.36$, $p=.05$; See Table 3. in Appendix D). It was found that age was positively related to feelings of having sufficient knowledge in IPV ($r=.30$, $p=.05$; See Table 8. in Appendix D), but also negatively related to feelings of needing more knowledge on IPV ($r=-.32$, $p=.05$; See Table 8. in Appendix D). Gender was found to be significant, as being female was negatively related to feeling prepared in making appropriate IPV referrals ($r=-.30$, $p=.05$; See Table 9. in Appendix D).

CHAPTER FIVE

DISCUSSION

Introduction

The purpose of this chapter is to discuss the implications of the results of the present study. Limitations of the study will also be presented, and recommendations for social work practice, policy, and future research will also be discussed. This chapter will conclude with final thoughts regarding IPV training and education, and how social workers and other human services organizations can benefit from gaining this knowledge, specifically during a master's program.

Discussion

The purpose of this study was to explore MSW students' perceptions of preparedness in serving intimate partner violence clients, and how their perceptions may be affected by education/training received on IPV. The results indicated that higher perceptions of preparedness are associated with field training, field placement, age, and gender. It is important to note that field training and field placement had the strongest relationship with perceptions of preparedness to work with IPV clients. The findings also illustrated that while age was positively associated with higher perceptions of having sufficient knowledge, it was also negatively associated with perceptions that more knowledge was still needed.

Another notable result was that education on IPV, was not significantly associated to perceptions of preparedness for serving IPV clients. It can be inferred that having courses or lectures on IPV does not increase MSW students' perceptions of preparedness. The study's results that field training and field placements have a significant association in MSW students' perceptions of preparedness demonstrates that experience in the field has the most impact on MSW students' perceptions, and perhaps the best way for student's to feel and become prepared in serving this client population.

Limitations

A limitation of this study was the sample size. The sample size was small and only consisted of advanced year, MSW students. It was also limited in its generalizability to other advanced year students, as only two MSW classes were presented the opportunity to take part of these self-administered surveys. A sample size that would have provided the opportunity for *all* MSW advanced year students to take this self-administered survey, would have addressed this limitation.

Due to the fact that this was a self-administered, quantitative study, the definition of intimate partner violence may not have been clear to participants, which may have impacted their level of understanding of the subject being studied. This was a limitation as the researcher was unable to explore what intimate partner violence meant to MSW students, and questions on the survey were not offered the opportunity to be clarified or challenged.

Recommendations for Social Work Practice, Policy and Research

It would be beneficial to provide more field training regarding IPV, as results indicated that field training and field placements are positively correlated to MSW students' perceptions of preparedness for serving IPV clients. It would also be beneficial to offer MSW students a course on IPV, as currently, many MSW programs do not offer these courses. Having more courses offered in this area may potentially better prepare students in serving this client population when entering the field post-graduation.

Currently, there are no policies in place that require social workers to be trained on how to address cases related to IPV. It could be beneficial that both students and practicing clinicians receive training in this area, as rates of IPV cases continue to be prevalent, and services to this population are needed. It would be beneficial to have training and certification in IPV counseling and interventions as well, similarly to substance abuse certifications that exist for substance abuse counselors.

Future research should involve surveying students from MSW programs that *do* offer courses related to IPV. It would be useful to compare those results to the results of MSW students at CSUSB, since CSUSB does not typically offer a course specifically on IPV. From those surveyed, 44 (93.6%) of MSW students at CSUSB were never enrolled in a graduate-level IPV course and 45 (95.7%) MSW students were never enrolled in an undergraduate-level IPV course. It is

possible that taking a course on IPV may have an impact on MSW students' perceptions of preparedness for serving IPV clients.

Conclusion

The purpose of this study was to gain an understanding on MSW students' perceptions of preparedness for serving intimate partner violence clients. Findings from this research study indicated that field training and field placements were the most significant variables in having a positive correlation on MSW students' perceptions of preparedness for serving IPV clients. While results indicated that field training and field placement had the most impact on MSW students' perceptions of preparedness, education as a factor should not be dismissed. It may still be necessary to incorporate formal education, such as a specialized undergraduate or graduate-level IPV course, in order to discuss IPV issues and teach MSW students how to provide services to these client populations. IPV rates continue to be at a high and appropriate services should be made available to clients. Preventative measures regarding IPV should also be a goal, and mainly, the forefront of these issues, but training and education on IPV would still be necessary. It is necessary for MSW students to receive both training and education on IPV, in order to be prepared in providing services related to treating (and more importantly preventing) intimate partner violence.

APPENDIX A
PARTICIPANT DEMOGRAPHIC QUESTIONS AND INSTRUMENT

Perceptions of Preparedness for Serving Intimate Partner Violence Clients Study

Demographic Characteristics: Please indicate your demographic characteristics below.

1. Age:
 - 18-24
 - 25-34
 - 35-44
 - 45-54
 - 55-64
 - 65+

2. Gender:
 - Male
 - Female
 - Transgender
 - Prefer not to disclose

3. Race/Ethnicity (please check all that apply):
 - African American/Black
 - Non-Hispanic White
 - Hispanic/Latino(a)
 - Asian American/Pacific Islander
 - American Indian/Alaska Native
 - Other

4. Student Status
 - Full-time
 - Part-time
 - Pathways

Education/Trainings Received on Intimate Partner Violence (Select all that apply):

- Online Training
- Field Training
- IPV course enrolled during graduate program
- IPV course enrolled during undergraduate program
- IPV lecture attended during graduate program
- IPV lecture attended during undergraduate program

Perceptions of Preparedness Statements: Please indicate how much you agree with the following statements. Use a scale where 1= strongly disagree, 2= disagree, 3= neither disagree nor agree, 4= agree, and 5= strongly agree. Please circle one answer per row.

| | Strongly Agree | Disagree | Neither agree nor disagree | Agree | Strongly Agree |
|--|----------------|----------|----------------------------|-------|----------------|
| 1. I feel prepared responding to disclosures of abuse | 1 | 2 | 3 | 4 | 5 |
| 2. I feel prepared helping a victim of intimate partner violence assess his/her danger of lethality. | 1 | 2 | 3 | 4 | 5 |
| 3. I feel prepared helping a victim of intimate partner violence create a safety plan. | 1 | 2 | 3 | 4 | 5 |
| 4. I feel prepared making appropriate referrals for intimate partner violence. | 1 | 2 | 3 | 4 | 5 |
| 5. I feel prepared to work with perpetrators of intimate partner violence. | 1 | 2 | 3 | 4 | 5 |
| 6. I feel prepared to work with intimate partner violence clients in any setting. | 1 | 2 | 3 | 4 | 5 |
| 7. I feel that the MSW program at CSUSB has helped me to prepare for working with intimate partner violence clients. | 1 | 2 | 3 | 4 | 5 |
| 8. I feel that my field placement has helped me prepare with intimate partner violence clients. | 1 | 2 | 3 | 4 | 5 |

| | | | | | |
|--|---|---|---|---|---|
| 9. I feel that my personal life experiences have helped me to prepare to work with intimate partner violence clients. | 1 | 2 | 3 | 4 | 5 |
| 10. I feel that taking an MSW course on intimate partner violence would help me to prepare in working with intimate partner violence clients. | 1 | 2 | 3 | 4 | 5 |
| 11. I feel that taking an online training on intimate partner violence would help me to prepare in working with intimate partner violence clients. | 1 | 2 | 3 | 4 | 5 |
| 12. I feel that having field training on intimate partner violence would help me to prepare in working with intimate partner violence clients. | 1 | 2 | 3 | 4 | 5 |
| 13. I feel that I have sufficient knowledge on intimate partner violence counseling. | 1 | 2 | 3 | 4 | 5 |
| 14. I feel that I need a great deal of knowledge on intimate partner violence before I can provide these services to clients. | 1 | 2 | 3 | 4 | 5 |

Adapted from PREMIS
Physician Readiness to Manage Intimate Partner Violence Survey

APPENDIX B
CORRELATION MATRICES OF STUDY VARIABLES

Table 2.
Correlation matrix: Online
training obtained.

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
|-----------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|------|-------|----|
| 1. Online training obtained | 1 | | | | | | | | | | | | | | |
| 2. Disclosure of abuse | 0.09 | 1 | | | | | | | | | | | | | |
| 3. Assessing danger | 0.28 | .70** | 1 | | | | | | | | | | | | |
| 4. Creating safety plan | 0.04 | .66** | .77** | 1 | | | | | | | | | | | |
| 5. Referrals | 0.02 | .35* | .51** | .57** | 1 | | | | | | | | | | |
| 6. Perpetrators | 0.12 | .48** | .52** | .40** | .38** | 1 | | | | | | | | | |
| 7. Practice in all settings | -0.03 | .50** | .58** | .51** | .42** | .53** | 1 | | | | | | | | |
| 8. MSW program | 0.21 | .41** | .30* | .35* | 0.23 | .45** | .41** | 1 | | | | | | | |
| 9. Field placement | -0.06 | .29* | 0.25 | 0.19 | 0.25 | .31* | .39** | 0.28 | 1 | | | | | | |
| 10. Personal experiences | 0.26 | 0.25 | .40** | .32* | .36* | .41** | .31* | 0.18 | 0.01 | 1 | | | | | |
| 11. MSW course | 0.22 | 0.16 | .30* | 0.12 | .37* | 0.08 | 0.11 | 0.04 | -0.11 | .46** | 1 | | | | |
| 12. Online training | 0.07 | 0.17 | 0.19 | 0.12 | .34* | 0.15 | 0.15 | 0.13 | -0.09 | .35* | .60** | 1 | | | |
| 13. Field training | -0.04 | 0.25 | 0.23 | 0.27 | .38** | 0.10 | .29* | 0.15 | 0.09 | .40** | .65** | .48** | 1 | | |
| 14. Sufficient knowledge | 0.11 | .43** | .50** | .40** | .33* | .57** | .54** | .42** | 0.17 | .34* | 0.22 | .30* | 0.18 | 1 | |
| 15. Need more knowledge | -0.10 | -0.23 | -0.31 | -0.23 | -0.24 | -0.33 | -0.15 | -0.17 | -0.08 | -0.28 | 0.00 | -0.23 | 0.22 | .55** | 1 |

** Correlation is significant at the 0.01 level (2-tailed).

* Correlation is significant at the 0.05 level (2-tailed).

Table 3.
Correlation matrix: Field training received.

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
|-----------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|------|-------|----|
| 1. Field training received | 1 | | | | | | | | | | | | | | |
| 2. Disclosure of abuse | 0.23 | 1 | | | | | | | | | | | | | |
| 3. Assessing danger | 0.20 | .70** | 1 | | | | | | | | | | | | |
| 4. Creating safety plan | 0.16 | .66** | .77** | 1 | | | | | | | | | | | |
| 5. Referrals | 0.06 | .35* | .51** | .57** | 1 | | | | | | | | | | |
| 6. Perpetrators | 0.04 | .48** | .52** | .40** | .38** | 1 | | | | | | | | | |
| 7. Practice in all settings | 0.23 | .50** | .58** | .51** | .42** | .53** | 1 | | | | | | | | |
| 8. MSW program | -0.04 | .41** | .30* | .35* | 0.23 | .45** | .41** | 1 | | | | | | | |
| 9. Field placement | .47** | .29* | 0.25 | 0.19 | 0.25 | .31* | .39** | 0.28 | 1 | | | | | | |
| 10. Personal experiences | -0.02 | 0.25 | .40** | .32* | .36* | .41** | .31* | 0.18 | 0.01 | 1 | | | | | |
| 11. MSW course | -0.06 | 0.16 | .30* | 0.12 | .37* | 0.08 | 0.11 | 0.04 | -0.11 | .46** | 1 | | | | |
| 12. Online training | -0.06 | 0.17 | 0.19 | 0.12 | .34* | 0.15 | 0.15 | 0.13 | -0.09 | .35* | .60** | 1 | | | |
| 13. Field training | -0.03 | 0.25 | 0.23 | 0.27 | .38** | 0.10 | .29* | 0.15 | 0.09 | .40** | .65** | .48** | 1 | | |
| 14. Sufficient knowledge | .36* | .43** | .49** | .40** | .33* | .57** | .54** | .42** | 0.17 | .34* | 0.22 | .30* | 0.18 | 1 | |
| 15. Need more knowledge | -0.20 | -0.23 | .31* | -0.23 | -0.24 | .33* | -0.15 | -0.17 | -0.08 | -0.28 | 0.00 | -0.23 | 0.22 | .55** | 1 |

** Correlation is significant at the 0.01 level (2-tailed).

* Correlation is significant at the 0.05 level (2-tailed).

Table 4.
Correlation matrix: Graduate
course taken.

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
|-----------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|------|-------|----|
| 1. Graduate course taken | 1 | | | | | | | | | | | | | | |
| 2. Disclosure of abuse | 0.27 | 1 | | | | | | | | | | | | | |
| 3. Assessing danger | 0.20 | .70** | 1 | | | | | | | | | | | | |
| 4. Creating safety plan | 0.22 | .66** | .77** | 1 | | | | | | | | | | | |
| 5. Referrals | -0.08 | .35* | .51** | .57** | 1 | | | | | | | | | | |
| 6. Perpetrators | 0.21 | .47** | .52** | .40** | .38** | 1 | | | | | | | | | |
| 7. Practice in all settings | 0.24 | .50** | .58** | .51** | .42** | .53** | 1 | | | | | | | | |
| 8. MSW program | 0.23 | .41** | .30* | .35* | 0.23 | .45** | .41** | 1 | | | | | | | |
| 9. Field placement | 0.00 | .29* | 0.25 | 0.19 | 0.25 | .31* | .39** | 0.28 | 1 | | | | | | |
| 10. Personal experiences | 0.16 | 0.25 | .40** | .32* | .36* | .41** | .31* | 0.18 | 0.01 | 1 | | | | | |
| 11. MSW course | 0.10 | 0.16 | .30* | 0.12 | .37* | 0.08 | 0.11 | 0.04 | -0.11 | .46** | 1 | | | | |
| 12. Online training | -0.25 | 0.17 | 0.19 | 0.12 | .34* | 0.15 | 0.15 | 0.13 | -0.09 | .35* | .60** | 1 | | | |
| 13. Field training | 0.14 | 0.25 | 0.23 | 0.27 | .38** | 0.10 | .29* | 0.15 | 0.09 | .40** | .65** | .48** | 1 | | |
| 14. Sufficient knowledge | -0.06 | .43** | .49** | .40** | .33* | .57** | .54** | .42** | 0.17 | .34* | 0.22 | .30* | 0.18 | 1 | |
| 15. Need more knowledge | 0.13 | -0.23 | .31* | -0.23 | -0.24 | .33* | -0.15 | -0.17 | -0.08 | -0.28 | 0.00 | -0.23 | 0.22 | .55** | 1 |

** Correlation is significant at the 0.01 level (2-tailed).

* Correlation is significant at the 0.05 level (2-tailed).

Table 5.

Correlation matrix:
Undergraduate course
taken.

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
|-------------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|------|-------|----|
| 1. Undergraduate course taken | 1 | | | | | | | | | | | | | | |
| 2. Disclosure of abuse | 0.18 | 1 | | | | | | | | | | | | | |
| 3. Assessing danger | 0.10 | .70** | 1 | | | | | | | | | | | | |
| 4. Creating safety plan | 0.21 | .66** | .77** | 1 | | | | | | | | | | | |
| 5. Referrals | 0.03 | .35* | .51** | .57** | 1 | | | | | | | | | | |
| 6. Perpetrators | -0.03 | .47** | .52** | .40** | .38** | 1 | | | | | | | | | |
| 7. Practice in all settings | -0.01 | .50** | .58** | .51** | .42** | .53** | 1 | | | | | | | | |
| 8. MSW program | 0.26 | .41** | .30* | .35* | 0.23 | .45** | .41** | 1 | | | | | | | |
| 9. Field placement | -0.03 | .29* | 0.25 | 0.19 | 0.25 | .31* | .39** | 0.28 | 1 | | | | | | |
| 10. Personal experiences | -0.25 | 0.25 | .40** | .32* | .36* | .41** | .31* | 0.18 | 0.01 | 1 | | | | | |
| 11. MSW course | 0.01 | 0.16 | .30* | 0.12 | .37* | 0.08 | 0.11 | 0.04 | -0.11 | .46** | 1 | | | | |
| 12. Online training | -0.08 | 0.17 | 0.19 | 0.12 | .34* | 0.15 | 0.15 | 0.13 | -0.09 | .35* | .60** | 1 | | | |
| 13. Field training | 0.07 | 0.25 | 0.23 | 0.27 | .38** | 0.10 | .29* | 0.15 | 0.09 | .40** | .65** | .48** | 1 | | |
| 14. Sufficient knowledge | -0.12 | .43** | .49** | .40** | .33* | .57** | .54** | .42** | 0.17 | .34* | 0.22 | .30* | 0.18 | 1 | |
| 15. Need more knowledge | 0.10 | -0.23 | -.31* | -0.23 | -0.24 | -.33* | -0.15 | -0.17 | -0.08 | -0.28 | 0.00 | -0.23 | 0.22 | .55** | 1 |

** Correlation is significant at the 0.01 level (2-tailed).

* Correlation is significant at the 0.05 level (2-tailed).

Table 6.
Correlation matrix: Graduate
lecture attended.

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
|------------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|------|-------|----|
| 1. Graduate lecture attended | 1 | | | | | | | | | | | | | | |
| 2. Disclosure of abuse | 0.09 | 1 | | | | | | | | | | | | | |
| 3. Assessing danger | -0.03 | .70** | 1 | | | | | | | | | | | | |
| 4. Creating safety plan | 0.00 | .66** | .77** | 1 | | | | | | | | | | | |
| 5. Referrals | -0.08 | .35* | .51** | .57** | 1 | | | | | | | | | | |
| 6. Perpetrators | 0.07 | .47** | .52** | .40** | .38** | 1 | | | | | | | | | |
| 7. Practice in all settings | -0.01 | .50** | .58** | .51** | .42** | .53** | 1 | | | | | | | | |
| 8. MSW program | 0.04 | .41** | .30* | .35* | 0.23 | .45** | .41** | 1 | | | | | | | |
| 9. Field placement | -0.08 | .29* | 0.25 | 0.19 | 0.25 | .31* | .39** | 0.28 | 1 | | | | | | |
| 10. Personal experiences | 0.10 | 0.25 | .40** | .32* | .36* | .41** | .31* | 0.18 | 0.01 | 1 | | | | | |
| 11. MSW course | 0.10 | 0.16 | .30* | 0.12 | .37* | 0.08 | 0.11 | 0.04 | -0.11 | .46** | 1 | | | | |
| 12. Online training | 0.05 | 0.17 | 0.19 | 0.12 | .34* | 0.15 | 0.15 | 0.13 | -0.09 | .35* | .60** | 1 | | | |
| 13. Field training | 0.04 | 0.25 | 0.23 | 0.27 | .38** | 0.10 | .29* | 0.15 | 0.09 | .40** | .65** | .48** | 1 | | |
| 14. Sufficient knowledge | -0.23 | .43** | .49** | .40** | .33* | .57** | .54** | .42** | 0.17 | .34* | 0.22 | .30* | 0.18 | 1 | |
| 15. Need more knowledge | 0.05 | -0.23 | -.31* | -0.23 | -0.24 | -.33* | -0.15 | -0.17 | -0.08 | -0.28 | 0.00 | -0.23 | 0.22 | .55** | 1 |

** Correlation is significant at the 0.01 level (2-tailed).

* Correlation is significant at the 0.05 level (2-tailed).

Table 7.

Correlation matrix:
Undergraduate lecture
attended.

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
|-----------------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|------|-------|----|
| 1. Undergraduate lecture attended | 1 | | | | | | | | | | | | | | |
| 2. Disclosure of abuse | 0.03 | 1 | | | | | | | | | | | | | |
| 3. Assessing danger | -0.06 | .70** | 1 | | | | | | | | | | | | |
| 4. Creating safety plan | -0.03 | .66** | .77** | 1 | | | | | | | | | | | |
| 5. Referrals | -0.02 | .35* | .51** | .57** | 1 | | | | | | | | | | |
| 6. Perpetrators | 0.077 | .48** | .52** | .40** | .38** | 1 | | | | | | | | | |
| 7. Practice in all settings | -0.01 | .50** | .58** | .51** | .42** | .53** | 1 | | | | | | | | |
| 8. MSW program | 0.04 | .41** | .30* | .35* | 0.23 | .45** | .41** | 1 | | | | | | | |
| 9. Field placement | -0.11 | .29* | 0.25 | 0.19 | 0.25 | .31* | .39** | 0.28 | 1 | | | | | | |
| 10. Personal experiences | 0.02 | 0.25 | .40** | .32* | .36* | .41** | .31* | 0.18 | 0.01 | 1 | | | | | |
| 11. MSW course | 0.09 | 0.16 | .30* | 0.12 | .37* | 0.08 | 0.11 | 0.04 | -0.11 | .46** | 1 | | | | |
| 12. Online training | 0.01 | 0.17 | 0.19 | 0.12 | .34* | 0.15 | 0.15 | 0.13 | -0.09 | .35* | .60** | 1 | | | |
| 13. Field training | 0.01 | 0.25 | 0.23 | 0.27 | .38** | 0.10 | .29* | 0.15 | 0.09 | .40** | .65** | .48** | 1 | | |
| 14. Sufficient knowledge | -0.10 | .43** | .49** | .40** | .33* | .57** | .54** | .42** | 0.17 | .34* | 0.22 | .30* | 0.18 | 1 | |
| 15. Need more knowledge | 0.08 | -0.23 | -.31* | -0.23 | -0.24 | -.33* | -0.15 | -0.17 | -0.08 | -0.28 | 0.00 | -0.23 | 0.22 | .55** | 1 |

** Correlation is significant at the 0.01 level (2-tailed).

* Correlation is significant at the 0.05 level (2-tailed).

Table 8.

Correlation matrix: Age.

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
|-----------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|------|-------|----|
| 1. Age | 1 | | | | | | | | | | | | | | |
| 2. Disclosure of abuse | 0.21 | 1 | | | | | | | | | | | | | |
| 3. Assessing danger | 0.13 | .70** | 1 | | | | | | | | | | | | |
| 4. Creating safety plan | -0.01 | .66** | .77** | 1 | | | | | | | | | | | |
| 5. Referrals | 0.05 | .35* | .51** | .57** | 1 | | | | | | | | | | |
| 6. Perpetrators | 0.21 | .47** | .52** | .40** | .38** | 1 | | | | | | | | | |
| 7. Practice in all settings | 0.14 | .50** | .58** | .51** | .42** | .53** | 1 | | | | | | | | |
| 8. MSW program | 0.20 | .41** | .30* | .35* | 0.23 | .45** | .41** | 1 | | | | | | | |
| 9. Field placement | 0.09 | .29* | 0.25 | 0.19 | 0.25 | .31* | .39** | 0.28 | 1 | | | | | | |
| 10. Personal experiences | -0.16 | 0.25 | .40** | .32* | .36* | .41** | .31* | 0.18 | 0.01 | 1 | | | | | |
| 11. MSW course | -0.18 | 0.16 | .300* | 0.12 | .367* | 0.08 | 0.11 | 0.04 | -0.11 | .46** | 1 | | | | |
| 12. Online training | -0.08 | 0.17 | 0.19 | 0.12 | .34* | 0.15 | 0.15 | 0.13 | -0.09 | .35* | .60** | 1 | | | |
| 13. Field training | -0.17 | 0.25 | 0.23 | 0.27 | .38** | 0.10 | .29* | 0.15 | 0.09 | .40** | .65** | .48** | 1 | | |
| 14. Sufficient knowledge | .30* | .43** | .49** | .40** | .33* | .57** | .54** | .42** | 0.17 | .34* | 0.22 | .30* | 0.18 | 1 | |
| 15. Need more knowledge | -.32* | -0.23 | -.31* | -0.23 | -0.24 | -.33* | -0.15 | -0.17 | -0.08 | -0.28 | 0.00 | -0.23 | 0.22 | .55** | 1 |

* Correlation is significant at the 0.05 level (2-tailed).

** Correlation is significant at the 0.01 level (2-tailed).

Table 9.

Correlation matrix: Gender.

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
|-----------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|------|-------|----|
| 1. Gender | 1 | | | | | | | | | | | | | | |
| 2. Disclosure of abuse | -0.15 | 1 | | | | | | | | | | | | | |
| 3. Assessing danger | -0.03 | .70** | 1 | | | | | | | | | | | | |
| 4. Creating safety plan | -0.06 | .66** | .77** | 1 | | | | | | | | | | | |
| 5. Referrals | -.30* | .35* | .51** | .57** | 1 | | | | | | | | | | |
| 6. Perpetrators | -0.04 | .48** | .52** | .40** | .38** | 1 | | | | | | | | | |
| 7. Practice in all settings | -0.07 | .50** | .58** | .51** | .42** | .53** | 1 | | | | | | | | |
| 8. MSW program | -0.09 | .41** | .30* | .35* | 0.23 | .45** | .41** | 1 | | | | | | | |
| 9. Field placement | 0.03 | .29* | 0.25 | 0.19 | 0.25 | .31* | .40** | 0.28 | 1 | | | | | | |
| 10. Personal experiences | 0.15 | 0.25 | .40** | .32* | .36* | .41** | .31* | 0.18 | 0.01 | 1 | | | | | |
| 11. MSW course | -0.06 | 0.16 | .30* | 0.12 | .37* | 0.08 | 0.11 | 0.04 | -0.11 | .46** | 1 | | | | |
| 12. Online training | 0.15 | 0.17 | 0.19 | 0.12 | .34* | 0.15 | 0.15 | 0.13 | -0.09 | .35* | .60** | 1 | | | |
| 13. Field training | 0.08 | 0.25 | 0.23 | 0.27 | .38** | 0.10 | .29* | 0.15 | 0.09 | .40** | .65** | .48** | 1 | | |
| 14. Sufficient knowledge | 0.12 | .43** | .50** | .40** | .33* | .57** | .54** | .42** | 0.17 | .34* | 0.22 | .30* | 0.18 | 1 | |
| 15. Need more knowledge | 0.09 | -0.23 | -.31* | -0.23 | -0.24 | -.33* | -0.15 | -0.17 | -0.08 | -0.28 | 0.00 | -0.23 | 0.22 | .55** | 1 |

* Correlation is significant at the 0.05 level (2-tailed).

** Correlation is significant at the 0.01 level (2-tailed).

Table 10.
Correlation matrix.
Student status.

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
|-----------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|------|-------|----|
| 1. Student Status | 1 | | | | | | | | | | | | | | |
| 2. Disclosure of abuse | 0.28 | 1 | | | | | | | | | | | | | |
| 3. Assessing danger | 0.20 | .70** | 1 | | | | | | | | | | | | |
| 4. Creating safety plan | 0.10 | .66** | .77** | 1 | | | | | | | | | | | |
| 5. Referrals | 0.05 | .35* | .51** | .57** | 1 | | | | | | | | | | |
| 6. Perpetrators | 0.01 | .48** | .52** | .40** | .38** | 1 | | | | | | | | | |
| 7. Practice in all settings | 0.09 | .50** | .58** | .51** | .42** | .53** | 1 | | | | | | | | |
| 8. MSW program | 0.08 | .41** | .30* | .35* | 0.23 | .45** | .41** | 1 | | | | | | | |
| 9. Field placement | -0.12 | .29* | 0.25 | 0.19 | 0.25 | .31* | .39** | 0.28 | 1 | | | | | | |
| 10. Personal experiences | 0.09 | 0.25 | .40** | .32* | .36* | .41** | .31* | 0.18 | 0.01 | 1 | | | | | |
| 11. MSW course | -0.09 | 0.16 | .30* | 0.12 | .37* | 0.08 | 0.11 | 0.04 | -0.11 | .46** | 1 | | | | |
| 12. Online training | -0.05 | 0.17 | 0.19 | 0.12 | .34* | 0.15 | 0.15 | 0.13 | -0.09 | .35* | .60** | 1 | | | |
| 13. Field training | -0.08 | 0.25 | 0.23 | 0.27 | .38** | 0.10 | .29* | 0.15 | 0.09 | .40** | .65** | .48** | 1 | | |
| 14. Sufficient knowledge | 0.25 | .43** | .49** | .40** | .33* | .57** | .54** | .42** | 0.17 | .34* | 0.22 | .30* | 0.18 | 1 | |
| 15. Need more knowledge | -0.27 | -0.23 | -.31* | -0.23 | -0.24 | -.33* | -0.15 | -0.17 | -0.08 | -0.28 | 0.00 | -0.23 | 0.22 | .55** | 1 |

** Correlation is significant at the 0.01 level (2-tailed).

* Correlation is significant at the 0.05 level (2-tailed).

APPENDIX C
INFORMED CONSENT

College of Social and Behavioral Sciences
School of Social Work

INFORMED CONSENT

The study in which you are asked to participate is designed to examine advanced year MSW students' perceptions of preparedness for serving intimate partner violence (IPV) clients. The study is being conducted by Diana Galvan, a graduate student, under the supervision of Dr. Erica Lizano, Assistant Professor in the School of Social Work at California State University, San Bernardino (CSUSB). The study has been approved by the Institutional Review Board Social Work Sub-committee at CSUSB.

PURPOSE: The purpose of the study is to examine advanced year MSW students' perceptions of preparedness for serving IPV clients.

DESCRIPTION: Participants will be asked questions on their current perceptions of preparedness for serving IPV clients, number of education/trainings they have received on intimate partner violence, and some demographics.

PARTICIPATION: Your participation in the study is voluntary. You can refuse to participate in the study or discontinue your participation at any time without any consequences.

CONFIDENTIALITY OR ANONYMITY: Your responses will remain anonymous and data will be reported in group form only.

DURATION: It will take 10 to 15 minutes to complete the survey.

RISKS: There are no foreseeable risks to the participants.

BENEFITS: There will not be any direct benefits to the participants.

CONTACT: If you have any questions about this study, please feel free to contact Dr. Lizano at (909) 537-5584.

RESULTS: Results of the study can be obtained from the Pfau Library ScholarWorks database (<http://scholarworks.lib.csusb.edu/>) at California State University, San Bernardino after July 2017.

This is to certify that I read the above and I am 18 years or older.

Place an X mark here

Date

909.537.5501

5500 UNIVERSITY PARKWAY, SAN BERNARDINO, CA 92407-2393

APPENDIX D
DEBRIEFING STATEMENT

Debriefing Statement

The study you have just completed was designed to investigate whether students feel prepared with providing services for intimate partner violence clients, and whether students perceived if they have received enough education/training relating to intimate partner violence. The study asked questions regarding perceptions of preparedness and education/training on intimate partner violence. The study was conducted by Diana Galvan. This is to inform you that no deception is involved in this study.

Thank you for your participation. If you have any questions, comments, and/or concerns about the study, please feel free to contact Dr. Erica Lizano at (909) 537-5584 and/or e.lizano@csusb.edu. If you are interested in the results of this study, you can obtain a copy of the results at John M. Pfau Library at California State University, San Bernardino, or on their website at <http://scholarworks.lib.csusb.edu> once the study has been completed, on July 2017.

The following resources are available for counseling and/or support:

Counseling Psychological Services (CAPS)- California State University, San Bernardino Phone: (909) 537-5040

Health Center Building, 5500, University Parkway, San Bernardino, CA 92407

Option House, INC

Phone: (909) 383-1602

Emergency Hotline Phone: (909) 381-3471

REFERENCES

- Ahrens, C. E. (2006). Being silenced: The impact of negative social reactions on the disclosure of rape. *American Journal of Contemporary Psychology, 38*(3/4), 263-274.
- Black, B., Weisz, A., & Bennett, L. (2010). Graduating social work students' perspectives on domestic violence. *Affilia, 25*(2), 173-184.
- Bograd, M., & Mederos, F. (2007). Battering and couples therapy: universal screening and selection of treatment modality. *Journal of Marital and Family Therapy, (25)*, 291-312.
- Cohn, F., Salmon, M. E., Stobo, J. D. (2002). *Confronting chronic neglect: the education and training of health professionals on family violence*. United States: National Academies Press.
- Council on Social Work Education (2014). 2014 Statistics on social work education in the United States. Retrieved from <http://www.cswe.org/File.aspx?id=82845>
- Danis, F., & Lockhart, L. (2003). Domestic violence and social work education: What do we know, what do we need to know? Guest Editorial. *Journal of Social Work Education, 39*, 215–224.
- Friend, C., & Petrucci, C. (2001). Teaching domestic violence interventions to social work students: what's the text got to do with it?
- Gosselin, D., K. (2005). *Heavy hands: An introduction to the crimes of family violence* (3rd ed.). Upper Saddle River, NJ: Pearson.

- McMahon, S., Postmus, J., Warrenner, C., Plummer, S., & Schwartz, R. (2013). Evaluating the effect of a specialized msw course on violence against women. *Journal of Social Work Education*, 49(2), 307-320.
- McMahon, S., & Schwartz, R. (2011). A review of rape in the social work literature: A call to action. *Affilia*, 26(3), 250-263.
- National Association of Social Workers. (2008). *Code of ethics of the national association of social workers*. Retrieved from <http://www.socialworkers.org/pubs/code/code.asp>
- National Coalition Against Domestic Violence (2015). *Domestic violence national statistics*. Retrieved from <http://ncadv.org/files/National%20Statistics%20Domestic%20Violence%20NCADV.pdf>
- Stylianou, A., McMahon, S. (2013). Requiring continuing education units on interpersonal violence. *Social Work*, 58 (2). 189.
- Tower, L. (2003). Domestic violence screening: Education and institutional support correlates. *Journal of Social Work Education*, 39(3), 479-494.
- University of Southern California. (2016). School of social work. Research projects. Retrieved from <https://sowkweb.usc.edu/research/research-projects>
- Wallace, R. (2015). Domestic violence and intimate partner violence: what's the difference? Retrieved from <http://inpublicsafety.com/2015/10/domestic-violence-and-intimate-partner-violence-whats-the-difference/>

Wolfe, D. A., & Jaffee, P., G. (1999). *Emerging strategies in the prevention of domestic violence*. 9(3), 133-44.