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THE EFFECTIVENESS OF DOMESTIC VIOLENCE TRAININGS ON HELPING PROFESSIONALS

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THE EFFECTIVENESS OF DOMESTIC VIOLENCE TRAININGS ON HELPING PROFESSIONALS

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

by
Paula Virginia Preciado Romero
June 2018
Approved by:

Dr. Janet Chang, Faculty Advisor, Social Work
Dr. Janet Chang, Research Coordinator
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ABSTRACT

This research project examined the effect of domestic violence trainings on helping professionals. This research project sought out to measure differences in pre-test and post-test scores from study participants to assess the participants’ beliefs and knowledge regarding the dynamics of domestic violence.

The research project gathered quantitative data from a convenience sample of 28 helping professionals who participated in a domestic violence training. A series of paired samples t-test were conducted to assess differences in the pre-test and post-test scores to determine if our hypothesis was confirmed. Key findings from this study revealed that the domestic violence training was quite effective overall. In particular, participants reported increased knowledge around types of abuse, the role of culture in an abusive relationship, and safety planning strategies. Practice recommendations include providing ongoing training for students in MSW programs, continuing education for social workers who work with domestic violence victims and continued federal funding for the Violence Against Women Act.
ACKNOWLEDGEMENTS

I would like to thank all the individuals who participated in this study as without them this research project would not have been possible. I would also like to thank my internship supervisor Amy Tuati, MSW, who played a pivotal role in helping me develop the training and measuring instrument. I would also like to thank Dr. Chang for her guidance and patience as I finished this research project.
DEDICATION

To my mother, Margarita Romero, for supporting me throughout my entire educational journey. I know that I would not have been able to get this point without your support.

To all of my friends who supported, listened, and cheered me on during the last three years. You all have been an amazing support system.
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CHAPTER ONE
ASSESSMENT

Introduction

This chapter describes the assessment phase of the research project, the research question is stated, and the hypothesis is introduced. This chapter also covers the paradigm that will be used to complete the research project and discusses the rationale for choosing this paradigm. Additionally, this section presents the literature review, discusses the theoretical orientation of the research project, and shares the potential contribution to the social work practice.

Research Question

The United States Department of Justice states that domestic violence is defined as pattern of assaultive behaviors that are used to establish power and control by one partner over the other (United States Department of Justice, 2016). Domestic violence takes form in many ways and can include physical abuse, verbal/emotional abuse, sexual abuse, psychological and economic abuse (United States Department of Justice, 2016).
Given the varied forms of domestic violence it is important that helping professionals who may interface with victims be knowledgeable regarding the dynamics of domestic violence, can spot red flags for any form of domestic violence, and be well-informed regarding resources available to victims. For this research study helping professionals are defined as case managers, mental health workers, marriage and family therapists, and social workers.

Domestic violence impacts all ethnicities, races, sexual orientation, religions, genders, and socioeconomic levels. Additionally, the effects of domestic violence are detrimental to the victim and family. Victims of domestic violence do not only suffer physical injuries such as chronic pain, eating disorders, gastrointestinal issues, and neurological disorders due physical abuse (Stockman, Hayashi, & Campbell, 2015) but they suffer psychological impairments such as anxiety, depression (Alizandeh, Ravansha, Rad, Khamnian & Azarfar, 2015) and Post-Traumatic Stress Disorder (Dejonghe, Bogat, Levendoski & von Eye, 2008). Furthermore, research indicates that children who witness any type of domestic violence (e.g. physical, verbal, psychological, etc.) are also at higher risk of perpetuating the cycle of domestic violence as adults (Kimball, 2015).

The Center for Disease Control and Prevention’s National Intimate Partner & Sexual Violence Survey (2011) estimates that in the United States approximately 20 people per minute experience physical abuse by a partner (Black et al., 2011). This same report states that more than 1 in 3 women and more than 1 in 4 men
have experienced rape, physical violence, and/or stalking by a partner in their lifetime (Black et al., 2011). Additionally, The National Intimate Partner & Sexual Violence Survey (Black et al., 2011) estimates that in California 32.9% domestic violence victims are women while 27.3 % are men (Black et al., 2011).

Studies have shown that helping professionals such as benefit workers are not aware about the dynamics of domestic violence and therefore not able to asses or intervene (Payne & Triplett, 2009). This finding has serious implications given that benefit workers are often the first helping professionals that interface with victims who may have just left a domestic violence situation and are seeking county services or community resources (Payne & Triplett, 2009). Additional studies have found that in addition to not knowing dynamics and resources for domestic violence victims many professionals who interface with domestic violence victims experience societal and personal attitudes towards domestic violence victims and feel uncomfortable screening for domestic violence (Sprague et al., 2002). Given the likelihood that helping professionals will encounter victims of domestic violence it is imperative that they be trained to identify signs of domestic violence, resources available to victims in their community, and be knowledgeable regarding the dynamics of domestic violence in order to provide appropriate support to victims.

This research project will assess the effectiveness of domestic violence trainings. According to California Evidence Code 1037.01 domestic violence counselors need to receive training regarding the following topics:
history of domestic violence, civil and criminal law as it relates to domestic violence, the domestic violence victim-counselor privilege and other laws that protect the confidentiality of victim records and information, societal attitudes towards domestic violence, peer counseling techniques, housing, public assistance and other financial resources available to meet the financial needs of domestic violence victims, and referral services available to domestic violence victims (Cal Evid Code § 1031.01, para. 2).

Although this study will not be certifying participants as domestic violence counselors it will provide information on the same topics to ensure comprehensive training.

The research question for this study is: will there be a difference in knowledge and beliefs in the outcomes of participants who assist the domestic violence training?

The hypothesis of this study is that participants who assist the domestic violence training will report feeling better prepared to work with victims of domestic violence because of an increase knowledge regarding dynamics, resources, legal process, and crisis intervention skills.
Paradigm and Rationale for Chosen Paradigm

This research project will be completed using the positivist paradigm. The positivist paradigm “assumes that an objective reality exists outside of personal experience that has demonstrable and immutable laws and mechanisms” (Morris, 2014). This is the most appropriate for this research project as the positivist paradigm focuses on “finding causes and correlations” (Morris, 2014) and the research question in this study seeks to answer causality between two variables. Finally, the positivist paradigm is most appropriate for this project given that the study is assessing numerical information to help us determine if domestic violence trainings are effective.

Literature Review

This literature review will focus on the criteria for domestic violence. It will also include a brief discussion regarding the components and goal of domestic violence trainings and will culminate with a discussion about the data regarding effectiveness of domestic violence trainings.

Domestic Violence

As previously stated domestic violence is a prevalent issue that is impacting our communities and it can occur in various forms. According to the Center for Disease Control and Prevention’s report Intimate Partner Violence Surveillance: Uniform Definitions and Recommended Data Elements (Breiding, Basile, Smith, Black & Mahendra, 2015) physical abuse includes but is not
limited to behaviors such as biting, restraining, kicking, pushing, slapping, and choking (Breiding et al., 2015). Domestic Violence also occurs in the form of sexual abuse which includes intimate partner and marital rape, demanding sex when it is unwanted and demanding sex in ways that are unwanted (Breiding, et al., 2015). Additionally, domestic violence can occur in the form of verbal and emotional abuse which is defined as verbally attacking, degrading, and also humiliating the other person in public (Breiding et al., 2015). Additionally, psychological abuse includes behaviors such as abusing children as a way to harm the victim, abusing or killing pets, damaging property and gaslighting the victim by denying previous abusive incidents (Breiding et al., 2015). Furthermore, domestic violence in the form of economic abuse includes behaviors such as controlling all the money and blocking attempts for the victim to go to school or work (Breiding et al., 2015). Finally, domestic violence also includes stalking and this can include behaviors such as following the victim, appearing at the victim’s workplace or home, confronting the victim in public spaces, and repeatedly contacting or issuing threats to the victim by any means of communication such as making phone calls, sending text messages, emails, and even sending messages through social media (Breiding et al., 2015).

The effects of domestic violence are detrimental not only to the victim but to children when they are a part of the dynamic. Research has found that children who witness domestic violence are more likely to perpetuate the cycle as adults (Ibiloglu, 2012).
Domestic Violence Training

Domestic violence trainings are relatively short trainings and consist of helping participants understand what domestic violence is, how it affects victims, and resources and interventions they can use when working with domestic violence victims. As previously stated, California has designated specific topics that need to be addressed in domestic violence trainings. Therefore, domestic violence trainings typically present information to participants regarding the dynamics of domestic violence, resources available, crisis interventions, limits to client-counselor privilege and the impact criminal and civil law on domestic violence cases (Cal Evid Code § 1037.01).

Data Regarding Effectiveness of Domestic Violence Trainings

Studies regarding the effectiveness of domestic violence trainings on who we have identified as helping professionals are relatively limited. However, Saunders, Holter, Phal, & Tolman (2006) assessed the effectiveness of a brief domestic violence training for Temporary Assistance for Needy Family Workers and found that workers who participated in the training reported increased ability to recognize signs of domestic violence and that they would be more likely to further assess for abuse, safety plan with victims, and refer victims to appropriate services and/or programs (Saunders et al., 2006). This is similar to Murray et al., (2015) who found that it is imperative that individuals who work with victims of domestic violence understand the variables that need to be taken into account when safety planning. These variables can include the victim and perpetrator’s
mental health, current access to resources, and the type of abuse being experienced (Murray et al., 2015). Another factor that should be taken into account when working with domestic violence victims is the influence that their culture plays on their ability to leave an abusing relationship. For example, Fuschel et al. (2012) found that culture influences Mexican-American immigrant women’s decision to stay in an abusive relationship. As such, it is important for helping professionals to understand these and many other variables so that they are able to provide better support to victims.

Moreover, researchers have studied the effectiveness of domestic violence trainings on a variety of disciplines who may interface with domestic violence victims. For example, Mythri, Raju, Suresh, and Bharateesh (2015) state that due to the physical form of domestic violence dental professionals are likely to come across domestic violence victims who may seek services due to broken teeth or jaws. Therefore, Mythri et al. (2015) sought out to assess the effectiveness of domestic violence trainings on dental professionals and found that there was improved recognition of domestic violence behaviors and that participants felt comfortable assessing for domestic violence. Additionally, Mythri et al., found that participant’s personal attitudes towards domestic violence victims changed as they no longer blamed the victims for the abuse (Mythri et al., 2015). Similarly, Achini Chinthika et al. (2015) researched the effectiveness of training public health midwives in Sri Lanka on domestic violence. Achini Chinthika et al. (2015) found that the training improved the midwives’ ability to identify and provide
services to domestic violence victims. Finally, McColgan et al. (2010) studied the effectiveness of training pediatric residents on domestic violence and found that after the training the residents reported having higher knowledge regarding questions they could ask when screening for domestic violence, knowledge regarding dynamics of domestic violence, and available resources for victims of domestic violence (McColgan et al., 2010).

To sum up, domestic violence takes form in a variety of ways and can include physical, verbal/emotional, sexual, psychological, and economic forms. In California, domestic violence trainings consist of presenting information regarding the dynamics of domestic violence, crisis interventions to use with victims, resources available, limits to client-counselor privilege, and information on how laws affect domestic violence cases. The data regarding the effectiveness of trainings on disciplines that may interface with domestic violence victims states that training these professionals increases their ability to assess for domestic violence and provide information on resources available to domestic violence victims.

Theoretical Orientation

The theoretical orientation for this research project is Systems Theory. System theory posits that all systems (e.g. individuals, groups, communities, cities, etc.) are interrelated (Zastro & Krist-Ashman, 2015). Therefore, a change in the environment or one subsystem affects another system. Additionally,
System theory encourages social workers to examine the many systems in an individual’s life (Zastro & Krist-Ashman, 2015). Thus, by training helping professionals on domestic violence we are helping them understand how the family, organizations, and societal systems impact the victim or survivor.

Potential Contribution of Study to Micro and/or Macro Social Work Practice

This research study will contribute to social work practice in that the results will indicate if these types of trainings increase helping professional’s ability to work with domestic violence victims.

Summary

This section introduced the research question which seeks to understand the effectiveness of domestic violence trainings on helping professionals. The positivist paradigm was identified for this research study as the research question seeks to examine numerical data to determine if our hypothesis is correct. Moreover, the literature review discussed behaviors associated with the various forms of domestic violence and data regarding the effectiveness of domestic violence trainings on multidisciplinary professionals who interface with domestic violence victims. The theoretical orientation for this research project was discussed and included the System Theory. Finally, the potential contribution to social work practice was discussed and concluded that this study has the potential to help social workers determine whether these trainings increase
helping professional's ability to identify domestic violence and provide appropriate resources and interventions.
CHAPTER TWO
ENGAGEMENT

Introduction

In the engagement chapter the study site and its location is discussed. This chapter will also cover information regarding services the study site provides along with engagement strategies for the site’s gatekeepers and self-preparation. Additionally, engagement strategies to address the diversity, ethical, political, and the role of technology will be addressed.

Study Sites

This study was carried out at two nonprofit agencies located in Southern California.

The first agency is a small nonprofit that provides therapeutic services children, families, adults and seniors from various ethnicities including Asian, African American, Latino, and Caucasian. Additionally, services at the study site can take form in individual or group models. The gatekeeper in this agency is the Executive Director. Additional staff that provide services at this agency include Licensed Marriage and Family Therapists and Marriage and Family Therapy Interns, Master of Social Work Interns, Drug Counselors, and bachelor level social workers. The agency site provides therapeutic services such as parent training,
domestic violence perpetrators group, individual/couples therapy, and case management for seniors and their caregivers.

The second agency is a big nonprofit agency in the community, however, the study was carried out at just one of its sites. This agency site provides intensive mental health services children, psychiatric services, case management, and parenting support. The services are primarily provided in an individual model although the family system is often incorporated when appropriate. The site clientele consists of primarily African American, Latino, and Caucasian ethnicities. The gatekeeper at this site is the Program Director. Additional staff that provide services include psychiatrist, Licensed Psychiatric Nurse, Licensed Clinical Social Workers, Licensed Marriage and Family Therapists, Associate Social Workers, Marriage and Family Therapy Interns, as well as bachelor level social workers. There was a total of 28 participants in this study.

Engagement Strategies for Gatekeepers at Research Site

The first step of engagement for this study was to engage the gatekeepers at each of the nonprofit agencies. This engagement step was completed by requesting a meeting to explore the gatekeepers interest in participating in research studies. The first nonprofit was this writer’s MSW foundation internship placement, the gatekeeper was approached prior to terminating the internship to discuss the possibility of completing the project there.
The second agency was this writer's MSW advanced internship placement, however, completion of the project was discussed during the placement interview process and the gatekeeper confirmed that the project would be able to be completed in the agency. A request for a meeting to strategize regarding the project was requested with the Program Director.

During the meetings with each of the gatekeepers, the research question and hypothesis were addressed. Additionally, the gatekeepers were informed of the need to schedule a date to facilitate the domestic violence training and that data will be obtained from participants. The gatekeepers received information regarding the steps that will be taken to obtain this data (e.g. consent forms, measuring instruments, etc.). Both gatekeepers then scheduled a date and time that suited both parties. Additionally, the gatekeepers were asked to introduce the study to their staff during the following staff meeting. Finally, steps to ensure the confidentiality of the participants were addressed.

Self-Preparation

In order to carry out this study, measuring instruments were developed. A Likert questionnaire was developed and reviewed by a Macro Social Worker prior to it being issued to participants to ensure that the content made sense and it was not leading. Because this research project was quantitative, obtaining access to a statistical analysis software was important. To prepare for this, JMP software was downloaded from CSUSB’s Software and Licensing Support which is available to
California State University, San Bernardino students. Another issue to self-preparation was maintaining the confidentiality of all the study participants’ responses. Because the training is a group format, to ensure confidentiality a code was imposed on the demographic portion (See Appendix A) and participants were instructed to use that code in the pre-test and post-test.

Diversity Issues

Diversity issues that were considered for this study include being cognizant of the different levels of education and time spent in the field when developing the questionnaires for participants. To address this, the questionnaire used basic clinical language and common domestic violence terms. Additionally, the questionnaire was reviewed by a Macro Social Worker to obtain feedback regarding neutrality of the questions and assess the content validity of the measuring tool. Another diversity issue that needed to be addressed was the power differential between the participants and the gatekeepers who introduced the study. To address this, Program Directors were instructed to state that participation is absolutely voluntary and that their employment or internship status will not be impacted in any way should they decline participation in this study.
Ethical Issues

Ethical issues that the study introduced included assuring that no harm will be done to participants and it was completed by subjecting the study to a review process by the Institutional Review Board. Another ethical issue that was introduced was obtaining access to participants and this will be done through the use of informed consent. Lastly, this study also introduced confidentiality as another ethical issue to consider. Therefore, all data obtained from participants was recorded by assigning a code to the demographic section and participants were instructed to note this same code in their pre-test and post-test (See Appendix B). Additionally, the gathered data was kept in a locked cabinet and the researcher was the only one with access to it.

Political Issues

Political issues that this study introduced included the possibility of determining that domestic violence trainings are ineffective as this could have an impact on availability of domestic violence trainings and counselors who can work with victims of domestic violence. The final political issue presented by this study is that of sharing the study’s findings. Thus, participants will be informed that research findings will be shared with the academic community as well as with the research site.
The Role of Technology in Engagement

The role of technology during the initial phase of engagement consisted of an email with the gatekeepers to request a meeting to explore their interest in participating in the research study and to build rapport with the gatekeepers. Once this was established communication to clarify questions between the gatekeeper and the researcher occurred through phone calls and e-mail.

Summary

This section discussed pertinent information about the study site such as locality and clientele. It was determined that requesting a meeting with the site directors to introduce the research study would be the most appropriate engagement. This section also covered the researcher's steps towards self-preparation to successfully carry out the study and includes the development of measuring instruments and developing a system to ensure participants' confidentiality. Furthermore, diversity, ethical, and political issues pertaining to this study were discussed. Finally, the role of technology in the engagement process was addressed and it was determined the phone calls and e-mails would play a vital role during this state of the research process.
CHAPTER THREE
IMPLEMENTATION

Introduction

This chapter will discuss study participants and the selection process of said participants. Additionally, data gathering, the phases of data collection, data recording, and data analysis will be addressed.

Study Participants

Study participants consisted of case managers, bachelor and master level social workers, and Marriage and Family Therapy interns who provide direct service to community members. Participants for this study included men and women from various socioeconomic statuses and ethnicities. The age of participants ranged from early 20’s to 31 or older. Participants in this study have at least a bachelor’s degree, were in their advanced year towards obtaining their bachelor’s degree or were graduate students entering the helping profession (i.e. MFT, MSW). As previously stated, the total participants for this research project was 28.

Selection of Study Participants

This study consisted of a one group pre-test post-test explanatory design. The selection of participants for the study consisted of a convenience sample.
The gatekeepers disclosed information on the research study to their staff and provided interested staff with information on when and where the training was scheduled to take place.

Threats to internal validity that were considered for this research project included “history, maturation, testing, instrumentation, statistical regression, selection bias, experimental mortality, effect of the study (Morris, 2014). For history to be a threat to internal validity events would have to happen outside of the study that explain the change in the dependent variable (Morris, 2014). Given that the domestic violence training will be completed in one day, it is not believed that history will be a threat to internal validity.

In regard to maturation, it is believed that it will not be a threat since as previously stated, the training is slated to be relatively short. Moreover, testing as a threat to internal validity will occur in this study because the pretest will measure items that measure our dependent variable (Morris, 2014). Instrumentation will be addressed by pre-testing and post-testing study participants using the same instruments, therefore, this should not threaten validity. Regarding statistical regression, it is believed that there will be outliers given that some participants will be clinicians with a lot of practice experience and perhaps some experience working with domestic violence victims while other participants may just be starting out in the field, therefore, it is believed that this will have an effect in the data sample. Moving on to selection bias as a threat to internal validity, it is believed that this will play a role in the study. As previously
stated, the research sites are composed of licensed, unlicensed, and interning staff, therefore, participant’s experience in the field will impact the present study. Moreover, experimental mortality will not be a threat to the internal validity of this study as the training will be completed in one day. Another threat to the validity of this study is that this there is a possibility that the training facilitator can unintentionally disclose of the study’s expectation to participants. To address this the facilitator will only present facts in the presentation and will not engage in small talk with participants during the training.

Data Gathering

This research study gathered quantitative data. The research study’s data was gathered by using a self-administered Likert measurement for participants during pre-test and post-test. This questionnaire sought to assess participant’s knowledge and perceptions regarding the dynamics of domestic violence, resources available to domestic violence victims, the effect of domestic violence on special populations, and interventions to help domestic violence victims. The study also assessed participant’s belief that their ability to work with domestic violence victims increased because of participation in the training. This measure included questions such as “domestic violence includes financial abuse” and “I know where to refer a victim of domestic violence who may need housing, food, legal resources”. This measuring instrument asked participants to select a
number from 1-5 on a continuum to indicate their answers where 1” will indicate “never” and “5” will indicate “always”. (See Appendix B)

Phases of Data Collection

The first phase of data collection for this study occurred on the actual domestic violence training day where participants were first provided with a consent form and asked to complete the demographic page and pre-test. The pre-test measured participant’s baseline knowledge and beliefs about domestic violence. The second phase of data collection took place immediately following the completion of the domestic violence training where a post-test was issued to participants.

Data Recording

Because this study used actual paper questionnaires the data was recorded by participants on the measuring tools themselves. As previously discussed, to ensure confidentiality of data recording, each measuring tool was imposed with a code.

The next step was to create a database where scores from the measuring tools were recorded. There was one spreadsheet and the spreadsheet had 40 columns that corresponded with each pre-test and post-test question on the measuring tool. The numbers (i.e. 1-5) that participants select in both pre-test and post-test were entered into each corresponding column.
Data Analysis Procedures

The first step in data analysis was to input the data onto JMP and review the information to ensure accuracy. The first analysis was a univariate analysis to gather descriptive statistics regarding the data including standard deviation. The next step was to conduct bivariate statistics to determine if the hypothesis is confirmed. To do this, a paired sample t-test comparing the dependent variable’s scores gathered from the pre-tests and post-tests was completed.

Summary

This section provided an overview of study participants and identified key demographic information. The selection of participants was described and the steps for data gathering were addressed, it was determined that data would be gathered quantitatively using Likert Scale self-administered instruments during pre-test and post-test. Threats to internal validity were discussed in this section as well. This chapter also discussed the phases of data collection and recording. Additionally, data analysis was discussed and it was determined that a JMP software would be used to run paired sample t-tests. This section also covered termination of the research study and follow up and determined that termination consists of completion of the post-test measures at the end of the domestic violence training. Additionally, a copy of the final research project would be made available to the study site for their review and so that they can share with the study participants.
CHAPTER FOUR
EVALUATION

Introduction

This chapter will present the findings of the study. The data analysis contains a description of the demographic information pertaining to the participants and t-test results. Additionally, an interpretation of the results is provided to help the reader understand the significant links between this study and current literature. Finally, implications and limits of the study are discussed.

Data Analysis

The total number of participants in the study was 28. The age of participants varied, 60.7% were 31 years of age or older while 39.3% were between the ages of 23-30 years old. None of the participants reported being younger than 23 years of age.

Table 1. Age of Study Sample

<table>
<thead>
<tr>
<th>Age Categories</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>23-30</td>
<td>11</td>
<td>39.3</td>
<td>39.3</td>
<td>39.3</td>
</tr>
<tr>
<td>31 or older</td>
<td>17</td>
<td>60.7</td>
<td>60.7</td>
<td>100</td>
</tr>
<tr>
<td>Total</td>
<td>28</td>
<td>100</td>
<td>100</td>
<td></td>
</tr>
</tbody>
</table>
The data indicated that 64.3% of participants were female while 35.7% were male.

Table 2. Gender of Study Sample

<table>
<thead>
<tr>
<th>Gender</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>18</td>
<td>64.3</td>
<td>64.3</td>
<td>64.3</td>
</tr>
<tr>
<td>Male</td>
<td>10</td>
<td>35.7</td>
<td>35.7</td>
<td>100</td>
</tr>
<tr>
<td>Total</td>
<td>28</td>
<td>100</td>
<td>100</td>
<td></td>
</tr>
</tbody>
</table>

The sample participants self-identified their ethnicity and thus the sample was comprised of 67.9% Latino, 14.3% Caucasian, 7.1% Asian, 7.1% of participants identified as Other, while 3.6% identified as Black/African American.

Table 3. Ethnicity of Study Sample

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asian</td>
<td>2</td>
<td>7.1</td>
<td>7.1</td>
<td>7.1</td>
</tr>
<tr>
<td>Black/African American</td>
<td>1</td>
<td>3.6</td>
<td>3.6</td>
<td>10.7</td>
</tr>
<tr>
<td>Latino/Hispanic</td>
<td>19</td>
<td>67.9</td>
<td>67.9</td>
<td>78.6</td>
</tr>
<tr>
<td>White</td>
<td>4</td>
<td>14.3</td>
<td>14.3</td>
<td>92.9</td>
</tr>
<tr>
<td>Other</td>
<td>2</td>
<td>7.1</td>
<td>7.1</td>
<td>100</td>
</tr>
</tbody>
</table>
Of the sample participants 85.7% self-identified as clinical while 14.3% identified as nonclinical. For this study, clinical was defined as providing therapeutic services while nonclinical staff did not provide therapeutic interventions at the research sites.

Table 4. Occupation of Study Sample

<table>
<thead>
<tr>
<th>Occupation</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Staff</td>
<td>24</td>
<td>85.7</td>
<td>85.7</td>
<td>85.7</td>
</tr>
<tr>
<td>Nonclinical Staff</td>
<td>4</td>
<td>14.3</td>
<td>14.3</td>
<td>100</td>
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<tr>
<td>Total</td>
<td>28</td>
<td>100</td>
<td>100</td>
<td></td>
</tr>
</tbody>
</table>

A series of t-tests were completed to analyze the data. The t-test assessed if the mean of the pre-test and post-test samples is statistically significant. For this study, any score less than 0.05 on the paired t-test sample was considered statistically significant. A pair which had a statistically significant result indicated that a change in knowledge or belief had taken place. In this study, 10 of the 20 pairs were statistically significant (See Appendix C). The items that were found to
have statistically significant differences in the pre-test score and post-test score include the following:

“I think that domestic violence occurs most often in lower socioeconomic classes.”

“I think that a victim’s culture can influence a victim’s decision to stay in a relationship plagued with domestic violence.”

“I think that children who witness domestic violence are more likely to abuse their own partners.”

“I think that domestic violence includes financial abuse.”

“I think that I am the expert when dealing with victims of domestic violence.”

“I think that I know where to refer a victim of domestic violence who may need housing, food, and legal resources.”

“I think that I know how to spot read flags for domestic violence.”

“I think that giving the victim and allowance is a form of domestic violence.”

“I think that stopping domestic violence is the responsibility of the perpetrator.”

Data Interpretation

Although the study sample was small it nevertheless indicated that domestic violence trainings help to those who may work with domestic violence victims
understand the signs and dynamics. This present study found that participants realized the important role that culture plays in domestic violence relationships. Culture is already documented in Fuschel et al. (2012) who found that Mexican-American immigrant women often stayed in abuse relationships due to cultural influence (i.e. machismo). The study also found that the training increased participants knowledge regarding identification of domestic violence signs. This finding is consistent with Saunders et al. (2006) who determined that training TANF workers helped them recognize domestic violence red flags. Additionally, study found there is significant changes in participant’s pre-test and post-test’s regarding their perceived ability to safety plan with victims. This study’s findings are consistent with Murray et al. (2015) study which found that individuals who work with domestic violence victims must be knowledgeable regarding the safety planning process including personal resources the victim has access to and perceptions such as cultural background which may prevent a victim from assessing their risk. Finally, this study found that belief that children who witness domestic violence are likely to perpetrate domestic violence as adults. This finding is supported by Ibiloglu (2012) who found that children who grow up in households where domestic violence is present go on to suffer disturbances that can include committing domestic abuse.

This study’s hypothesis posited the following: will there be a difference in knowledge and beliefs in the outcomes of participants who assist the domestic violence training? Although the study was small it was determined that providing
a training on domestic violence was effective for those who work with domestic violence victims as their knowledge and beliefs regarding domestic violence increased.

Implications of Findings for Micro and Macro Practice

The findings of this study point to the importance of exposing helping professionals to the content and dynamics of domestic violence in order for them to understand the dynamics and local resources available to domestic violence victims. As such, it is recommended that administrators of MSW programs incorporate the topic of domestic violence into its curriculum so that students are exposed to information and leave their graduate programs with a basic understanding of domestic violence and the impact it has on client's they will potentially work with. Additionally, agency administrators should provide ongoing trainings to help practitioners increase their knowledge and skills. Finally, given the reported statistics on domestic violence it is important that legislators continue funding programs such as the Violence Against Women Act which funds programs aimed to help victims of domestic violence by funding shelters and also funds domestic violence training programs for first responders such as police officers. In regard to micro practice implications, social workers who work with the domestic violence population should make a concerted effort to keep current with knowledge on domestic violence including trends of domestic violence in the communities they practice. Additionally, social workers who work with victims
should have up to date referral resources available for victims of domestic violence.

The limitations of this current study include the sample size as the small sample compromised the validity of the findings. The reliability of the instrument is another limitation of the study. The instrument used was developed by the researcher and Amy Tuati, MSW, specifically for this study so reliability and validity are unknown. Another limit of the study is that some participants had a lot of experience working as therapists, so it is likely that they have been exposed to the dynamics of domestic violence which could have skewed the findings.

Summary

This chapter analyzed the data gathered from the study. The data was then interpreted and key findings from the study were discussed. The hypothesis of the study was determined to be supported by the study’s findings. Additionally, implications for micro and macro social work where discussed and it was recommended that MSW programs incorporate domestic violence training/education onto their programs. It was also recommended that individuals seek continuing education to learn or increase their skills to work with domestic violence victims. Finally, the limits of the study were addressed, and these included the instrument, sample size, and participants previous work history with domestic violence victims.
CHAPTER FIVE
TERMINATION AND FOLLOW UP

Introduction

This chapter will discuss the termination steps that this study will take. It also shares ways the findings will be communicated. Finally, this chapter will address the researchers ongoing relationships with participants and the dissemination plan.

Termination of Study

Termination of the study began upon the completion of the post-test. Given that the researcher is a third party of the research sites there will not be ongoing communication with participants regarding the study. However, participants were informed that a copy of the study would be shared with the research site upon completion so that those who wish to follow up on results of the study are able to do so.

Communicating Findings to Study Sites and Study Participants

The findings of the study will be shared with the agency by providing a copy of the final research project. Communicating the findings to participants will be difficult, however, as previously stated study participants were informed that a copy of the report will be shared with
the study site once the research project is completed in case they wish to obtain final results.

Ongoing Relationship with Study Participants

There will be no ongoing relationship with study participants from the first site as the researcher is no longer placed at that site and has no communication with any of the participants of the study. There is limited ongoing relationship with the participants of the second research site as the researcher’s internship is ongoing at this site. However, to date there have been no follow up questions regarding the findings and the researcher has decided to not share so as to ensure privacy to participants.

Dissemination Plan

The findings of this study will be drawn up and published on CSUSB’s Scholarworks website. A copy of the final report will be shared with each of the participating agency Director.

Summary

This chapter discussed the termination plans of the study. As previously discussed the study is a one-day event thus the study ended upon completion of the post-test. In terms of communicating the results, a copy of the final reports will be shared with the Director at each site and they will be asked to share the
information with any staff that is interested. There will be no on-going relationship with participants as the researcher is a third party to the participating agencies.
APPENDIX A

DEMOGRAPHICS QUESTIONNAIRE
These questions will help us understand who attended this training. Again, all responses are anonymous.

How old are you? (Circle one)
18-22  23-30  31+

Which gender do you identify with? (Circle one)
Female  Male  Other

What is your racial or ethnic identity? (Circle all that apply)
American Indian or Alaska Native  Native Hawaiian or Other Pacific Islander  Other:
Asian  Latino/Hispanic
Black/African American  White

What is your occupation?
___ Clinical staff  ___ Nonclinical staff

So that we can track questionnaire without identifying individuals, please remember the following code to use in your post-test questionnaire:
_____________
APPENDIX B

PRETEST AND POST TEST
Dear Participants,

**CODE:**

As we go through this training it is helpful to us to understand the knowledge and beliefs that participants have prior to this training. Please complete the following survey, answering to the best of your ability. Your knowledge (or lack thereof!) is not a reflection on your intelligence, it simply helps us understand the effectiveness of this training on participants. So please answer honestly.

<table>
<thead>
<tr>
<th>I think…</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neither Agree or Disagree</th>
<th>Agree</th>
<th>Strongly Agree</th>
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<tbody>
<tr>
<td>that domestic violence occurs most often in lower socio-economic classes.</td>
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<td>that if the victim really did want to leave they would just leave.</td>
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<td>that domestic violence goes through a cycle or stages.</td>
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<td>that domestic violence only affects a small percentage of the population.</td>
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<td>that a victim’s culture can influence a victim’s decision to stay in relationship plagued with domestic violence.</td>
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<td>that children who witness domestic violence are more likely to abuse their own partners.</td>
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<td>that domestic violence is used to exert control from one partner over the other.</td>
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<td>that domestic violence includes financial abuse.</td>
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<td>that I am the expert when dealing with victims of domestic violence.</td>
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<td>that domestic violence occurs because perpetrators are abusing alcohol and/or drugs.</td>
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<td>I know where to refer a victim of domestic violence who may need housing, food, legal resources.</td>
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<td>that the LGBTQ community experiences domestic violence in the same way that heterosexual partners do.</td>
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<td>that teens experience the same forms of domestic violence that adults do.</td>
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<td>that I know how to spot red flags for domestic violence.</td>
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<td>that making the victim believe he/she is crazy is a common behavior of emotional abuse.</td>
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<td>that giving the victim an allowance is a form of domestic violence.</td>
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</table>
I know how to safety plan with a victim of domestic violence.

that stopping domestic violence is the responsibility of the perpetrator.
Thank you for attending this training! Please complete the following survey, answering to the best of your ability. Your knowledge (or lack thereof!) is not a reflection on your intelligence, it simply helps us understand the effectiveness of this training on participants. So please answer honestly.

<table>
<thead>
<tr>
<th>I think…</th>
<th>Strongly Disagree 1</th>
<th>Disagree 2</th>
<th>Neither Agree or Disagree 3</th>
<th>Agree 4</th>
<th>Strongly Agree 5</th>
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<tr>
<td>that domestic violence occurs most often in lower socio-economic classes.</td>
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<td>that domestic violence includes financial abuse.</td>
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<td>that domestic violence occurs because perpetrators are abusing alcohol and/or drugs.</td>
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<tr>
<td>I know where to refer a victim of domestic violence who may need housing, food, legal resources.</td>
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<td>that the LGBTQ community experiences domestic violence in the same way that heterosexual partners do.</td>
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<td>that teens experience the same forms of domestic violence that adults do.</td>
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<tr>
<td>that I know how to spot red flags for domestic violence.</td>
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<tr>
<td>that making the victim believe he/she is crazy is a common behavior of emotional abuse.</td>
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<td>that giving the victim an allowance is a form of domestic violence.</td>
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<td>I know how to safety plan with a victim of domestic violence.</td>
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<tr>
<td>that stopping domestic violence is the responsibility of the perpetrator.</td>
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<td></td>
</tr>
</tbody>
</table>
APPENDIX C

STATISTICALLY SIGNIFICANT PAIRS
<table>
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<tr>
<th>Item</th>
<th>pretest</th>
<th>postest</th>
<th>t</th>
<th>Sig (2 tailed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>I think that domestic violence occurs most often in lower socioeconomic classes</td>
<td>2.57</td>
<td>1.79</td>
<td>2.569</td>
<td>.016</td>
</tr>
<tr>
<td>I think that if the victim really did want to leave they would just leave</td>
<td>1.71</td>
<td>1.5</td>
<td>0.769</td>
<td>.449</td>
</tr>
<tr>
<td>I think that domestic violence goes through a cycle of stages</td>
<td>4.5</td>
<td>4.79</td>
<td>-1.247</td>
<td>.223</td>
</tr>
<tr>
<td>I think that domestic violence only affects a small percentage of the population</td>
<td>1.54</td>
<td>1.86</td>
<td>-1.362</td>
<td>.184</td>
</tr>
<tr>
<td>I think that men are the primary perpetrators of domestic violence</td>
<td>2.61</td>
<td>2.21</td>
<td>1.89</td>
<td>.070</td>
</tr>
<tr>
<td>I think that children who witness domestic violence are victims of child abuse</td>
<td>4.36</td>
<td>4.32</td>
<td>0.279</td>
<td>.787</td>
</tr>
<tr>
<td>I think that a victim's culture can influence a victim's decision to stay in a relationship plagued with domestic violence</td>
<td>4.36</td>
<td>4.75</td>
<td>-3.667</td>
<td>.001</td>
</tr>
<tr>
<td>I think that children who witness domestic violence are more likely to abuse their own partners</td>
<td>4.00</td>
<td>4.46</td>
<td>-3.099</td>
<td>.004</td>
</tr>
<tr>
<td>I think that domestic violence is used to exert control from one parter over the other</td>
<td>4.21</td>
<td>4.68</td>
<td>-1.948</td>
<td>.062</td>
</tr>
<tr>
<td>I think that domestic violence includes financial abuse</td>
<td>4.11</td>
<td>4.79</td>
<td>-3.105</td>
<td>.004</td>
</tr>
<tr>
<td>I think that I am the expert when dealing with victims of domestic violence</td>
<td>1.93</td>
<td>2.61</td>
<td>-3.4</td>
<td>.002</td>
</tr>
<tr>
<td>I think that domestic violence occurs because perpetrators are abusing alcohol and/or drugs</td>
<td>2.54</td>
<td>2.18</td>
<td>1.544</td>
<td>.134</td>
</tr>
<tr>
<td>I think that I know where to refer a victim of domestic violence who may need housing, food, legal resources</td>
<td>3.57</td>
<td>4.36</td>
<td>-0.31</td>
<td>.005</td>
</tr>
<tr>
<td>I think that the LGBTQ community experiences domestic violence in the same way that heterosexual partners do</td>
<td>4.00</td>
<td>4.29</td>
<td>-1.216</td>
<td>.234</td>
</tr>
<tr>
<td>I think that teen experience the same forms of domestic violence that adults do</td>
<td>3.79</td>
<td>4.14</td>
<td>-1.78</td>
<td>.086</td>
</tr>
<tr>
<td>I think that I know how to spot red flags of domestic violence</td>
<td>3.79</td>
<td>4.54</td>
<td>-2.881</td>
<td>.008</td>
</tr>
<tr>
<td>I think that making the victim believe he/she is crazy is a common behavior of emotional abuse</td>
<td>4.25</td>
<td>4.5</td>
<td>-1.655</td>
<td>.109</td>
</tr>
<tr>
<td>I think that giving the victim an allowance is a form of domestic violence</td>
<td>3.00</td>
<td>4.43</td>
<td>-6.145</td>
<td>.000</td>
</tr>
<tr>
<td>I know how to safety plan with a victim of domestic violence</td>
<td>3.21</td>
<td>4.36</td>
<td>-4.563</td>
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<tr>
<td>I think that stopping domestic violence is the responsibility of the perpetrator</td>
<td>2.25</td>
<td>3.50</td>
<td>-3.813</td>
<td>.001</td>
</tr>
</tbody>
</table>
APPENDIX D

INFORMED CONSENT
INFORMED CONSENT

The study in which you are asked to participate is designed to assess the effectiveness of domestic violence trainings on helping professionals. The study is being conducted by Paula Preciado Romero, Master of Social Work student under the supervision of Dr. Janet Chang, Professor in the School of Social Work, California State University, San Bernardino. The study has been approved by the Institutional Review Board Social Work Sub-committee, California State University, San Bernardino.

PURPOSE: The purpose of the study is to assess effectiveness of domestic violence trainings on helping professionals who may interface with domestic violence victims.

DESCRIPTION: Participants will participate in a domestic violence training and will be asked of a few questions on the dynamics of domestic violence, knowledge about resources available to domestic violence victims, knowledge about crisis interventions, and knowledge regarding legal process once domestic violence is reported.

PARTICIPATION. Your participation in the study is totally 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 only in group form.

DURATION: It will take 2 hours to complete the study.

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. Janel Chang at 909-537-5183.

RESULTS: Results of the study can be obtained from the Pfau Library ScholarWorks (http://scholarworks.lib.csusb.edu) at California State University, San Bernardino after December 2018.

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

Place an X mark here

Date
APPENDIX E

DEFRIEFING STATEMENT
DEBRIEFING STATEMENT

This study you have just completed was designed to investigate the effectiveness of Domestic Violence Training on Helping Professionals. In this study, you completed a pre-test regarding the dynamics and resources and referrals available for domestic violence victims. You then participated in a domestic violence training and then completed a post-test assessing the dynamics, resources and referrals available for domestic violence victims. We are particularly interested examining the effectiveness that domestic violence training has on helping professionals who interface with domestic violence victims. This is to assure you that no deception is involved in the study.

Thank you for your participation it is greatly appreciated as the data collected could possibly help other people working with domestic violence victims. If you have any questions about the study, please feel free to contact Paula Preciado Romero or Professor Janet Chang at 909-537-5184. If you would like to obtain a copy of the group results of this study, please contact Professor Janet Chang (email: jchang@csusb.edu) after December 2018.
APPENDIX F

INSTITUTIONAL REVIEW BOARD APPROVAL
Researcher(s): Paula Preciado-Romero

Proposal Title: Effectiveness of Domestic Violence Training on Helping Professionals

Your proposal has been reviewed by the School of Social Work Sub-Committee of the Institutional Review Board. The decisions and advice of those faculty are given below.

Proposal is:

x approved
to be resubmitted with revisions listed below
to be forwarded to the campus IRB for review

Revisions that must be made before proposal can be approved:

Investigator signature missing missing informed consent debriefing statement revisions needed in informed consent debriefing

data collection instruments missing agency approval letter missing
CITI missing
revisions in design needed (specified below)

Committee Chair Signature

Date: 4/25/2017
REFERENCES


Cal Evidence Code § 1037.01. Retrieved from
[https://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=EVID&sectionNum=1037.1](https://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=EVID&sectionNum=1037.1).


