THESIS

DISPELLING DOMESTIC VIOLENCE MYTHS AMONG GRADUATE SOCIAL WORK

STUDENTS

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ABSTRACT

DISPELLING DOMESTIC VIOLENCE MYTHS AMONG GRADUATE SOCIAL WORK

STUDENTS

Numerous studies have found that graduate social work students are not adequately prepared to provide appropriate services and interventions for victims of domestic violence. Social Work graduate programs find themselves under intense pressure to provide quality education covering many topics in a relatively short amount of time. As a result, schools do not always offer semester length classes on domestic violence. This study seeks to fill a gap in the literature by studying the experiential learning activity In Her Shoes that is often used for community education in the context of graduate social work classes. Results suggest that providing time limited interventions on the topic of domestic violence has potential to reduce student acceptance of domestic violence myths. However, time limited interventions do not appear to be effective at increasing student sense of professional efficacy. Recommendations for additional research as well as increased curriculum content on the subject of domestic violence are also included.

ACKNOWLEDGEMENTS

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Chapter One: Introduction

Recent findings by the Center for Disease Control indicate that one in four women will experience "severe violence by an intimate partner" during their lifetime (Black et al., 2011, p. 2). With violence this widespread, social workers should be prepared to deal with victims and perpetrators of domestic violence in a wide variety of practice settings. However, critics within the social work field have stated that social work education has not adequately prepared students for work with individuals and families effected by domestic violence (Danis & Lockhart, 2003). The stakes for this knowledge are very high, according to Golden (1994), who issued the strong warning that "what social workers don't know about domestic violence can kill our clients" (p. 637). While there have been many solutions suggested for improving social work education related to domestic violence, there has been little examination of the potential effectiveness of specific educational methods or teaching tools (Danis & Lockhart, 2003). This study seeks to address this gap by examining the potential effect of the experiential activity In Her Shoes as a teaching methodology for social work students to learn about domestic violence. This activity was developed by the Washington State Coalition Against Domestic Violence and was intended for use as a community education tool in a variety of settings including "every profession, club, social group, congregation, classroom and community" (In Her Shoes: Living with Domestic Violence Reference Guide, 2000, p. 1).

Significance Statement

Despite domestic violence being such a cross-cutting issue, social workers are often not adequately prepared to work with individuals and families affected by domestic violence. The profession has historically had a poor reputation regarding their work with domestic violence, including victim blaming, silence and collusion (Danis, 2003; Kanuha, 1998). One solution to

improve social work response to situations involving domestic violence is to increase content related to domestic violence into the graduate school process. This solution has been encouraged by a number of studies and authors (Colarossi, Breitbart, & Betancourt, 2010; B. Payne, Carmody, Plichta, & Vandecar-Burdin, 2007; Postmus, McMahon, Warrener, & Macri, 2011; Tower, 2003, 2006; Warrener, Postmus, & McMahon, 2013). While there have been a variety of suggestions of how to increase domestic violence content in graduate schools, there is still a need to examine specific teaching methods to see what methods are effective. It is this gap in the research that this study seeks to fill.

Topic Overview

Domestic violence is a significant health and social problem in the United States impacting individuals across demographic categories. For the purposes of this study, the following definition expressed by Danis and Bhandari (2010) will be used to define domestic violence:

> A pattern of coercive behavior to control one's partner through physical abuse, the threat of physical abuse, repeated psychological abuse, sexual abuse, progressive social isolation, deprivation, intimidation, or economic coercion. Domestic violence is perpetrated by adults or adolescents against their intimate partners in current or former dating, married or cohabiting relationships of heterosexuals, gay men, lesbians, bisexuals, and transgendered persons. (p 30)

The topic of the proposed study is the potential impact of the experiential learning activity In Her Shoes on the domestic violence myth acceptance and professional efficacy of social work students. This will be assessed by administering the Domestic Violence Myth Acceptance Scale (Peters, 2003) before participation in the activity and immediately after the activity. Students will also be asked questions about professional experience and for feedback.

In Her Shoes: Living With Domestic Violence

The experiential activity In Her Shoes was developed by the Washington State Domestic Violence Coalition in 2000. This agency is a non-profit network of domestic violence programs located in Washington State. In addition to conducting research and providing advocacy in the political arena, this agency has also developed a number of trainings around the issue of domestic violence, including the In Her Shoes experiential learning activity. In Her Shoes was created as a way to "help participants understand, in a very compressed period of time, the ups and downs a battered women experiences over the course of many years (In Her Shoes: Living with Domestic Violence Reference Guide, 2000, p 1)." The experiential learning activity was developed with the intention that anyone could participate including "every profession, club, social group, congregation, classroom and community (In Her Shoes: Living with Domestic Violence Reference Guide, 2000, p. 1." The simulation is designed to be effective for groups of as much as 40 people, with the ideal group to be between 20 and 30 participants (In Her Shoes: Living with Domestic Violence Reference Guide, 2000). The activity is intended to take between an hour and a half and two hours, including a debriefing session afterwards. The stated goals of the In Her Shoes activity as expressed by the reference guide in the description of the activity are as follows:

> To increase awareness of the struggles that women with abusive partners face;
> To illustrate that domestic violence is a community tragedy, not a private problem;
> To show that we all have a role in the movement to end domestic violence…
> To encourage everyone to think creatively about the ways we can work to end domestic.
> violence (In Her Shoes: Living with Domestic Violence Reference Guide, 2000, p. 1)

The participants are assigned a fictional character made up of composite experiences of real victims of domestic violence. In pairs, participants follow their character's story and are posed with various choices. Participants are encouraged to make choices based on what feels

right to them. Each choice leads to the next step in the story as participants are faced with real life situations from the perspective of a victim of domestic violence. Participants follow their story as they go to several of the 17 stations representing various locations in the stories. Some stations may have an interactive element (for example, participants would put a new band aid on their sleeve every time a character goes to the "Abuse Happens" station). Participants can enact more than one character if time allows. After the allotted time for the activity, participants are given a chance to debrief. During this time, facilitators are encouraged to ask questions of the group to encourage processing of this experience (In Her Shoes: Living with Domestic Violence Reference Guide, 2000). Facilitators are also encouraged to avoid victim-blaming in the discussion, and draw attention to how various people and institutions can create barriers to leaving (In Her Shoes: Living with Domestic Violence Reference Guide, 2000). This activity is widely used among community, professional groups and on campuses. Despite the frequency of its use, no research has been done to measure its effectiveness at preparing social work students for work with individuals affected by domestic violence.

Chapter Two: Literature Review

Physical and sexual violence against women is a global health epidemic that has victimized approximately one-third of women throughout the world (Garcia-Moreno et al., 2013). In the United States, a study conducted by a division of the Center for Disease Control found that more than one in three women have "experienced rape, physical violence and/or stalking by an intimate partner" (Black et al., 2011 p. 2). As a result of this prevalence, social workers inevitably come across families and individuals experiencing domestic violence in their work, regardless of the setting. This cross cutting issue can be co-occurring with other issues such as child abuse (Button & Payne, 2009; Postmus & Merritt, 2010), poverty (B. K. Payne & Triplett, 2009), elder abuse (B. K. Payne, 2008) and homelessness (Baker, Cook, & Norris, 2003).

Historical Context of Domestic Violence

The Puritans: a case study. Beginning in 1640, a series of ground breaking laws titled the Body of Liberties were enacted in early American history by the Puritan colonies in Massachusetts that included prohibitions on domestic violence (Pleck, 2004). These laws were notable in their departure from the inherited English legal concept of chastisement as a marital right which gave a husband the right to abuse his wife (Rambo, 2009). The Puritans conceptualized domestic violence as both a legal issue and a sin, and encouraged community involvement in family affairs (Pleck, 2004). This placed domestic violence in the realm of the public sphere, challenging previous conceptions of domestic violence as an issue residing in the private sphere and opening families up to community involvement if domestic violence was occurring (Kelly, 2003). This resulted in numerous levels of support for families experiencing domestic violence, including neighborhood intervention, intervention by the church community,

and legal ramifications such as fines or corporal punishment (Pleck, 2004). These interventions appeared to have some success, as the Puritans of the Massachusetts Bay Colony had a domestic murder rate that was "the lowest ever reported in American history" (Pleck, 2004, p. 4).

Despite these groundbreaking laws, the Puritan community understood the issue of domestic violence as primarily a sin (Pleck 2003). This community often used the legal system as a method of enforcing morality (Pleck, 2003). Because of this, family reunification was the primary goal, and the courts and community often supported this. Pleck (2004) notes that "although the *Body of Liberties* made wife beating illegal, Puritan courts placed family preservation ahead of physical protection of victims" (p. 23). Puritan courts and churches also were noted to engage in victim blaming and considered an abused wife "to be almost as much at fault as her husband" (Pleck, 2004, p 21). Divorce cases alleging domestic violence were often dismissed, blaming the victim for violence or quoting from the Bible to justify or minimize the abuse (Rambo, 2009).

Eventually, the legal system came under pressure to adjust their laws to increase the similarity to English law, as a second generation of Puritans began to doubt the state's responsibility to enforce morality (Pleck, 2003). These elements combined to reduce the power of church courts and decrease the community involvement with individual families. Eventually, enforcement of these laws decreased and made way for a much more secular legal system (Pleck 2003). The issue of domestic violence wasn't re-engaged again in the public sphere until attention was brought to it by activists in the temperance movement in the 1840's (Rambo, 2009).

Temperance and suffrage. For activists in the temperance movement, domestic violence was conceptualized as primarily a symptom of the problems with alcoholism (Pleck,

2004). Rambo (2009) notes that "Many temperance workers at this time believed alcohol to be the sole cause of domestic abuse, and this belief logically suggested that eradication of alcohol consumption would eliminate the violence" (p. 113). This movement was notable for being "the first public effort against family violence led by women on behalf of women" (Pleck, 2004, p. 49). This movement was also notable in its departure from family preservation and encouragement of divorce of drunken husbands as a solution (Pleck, 2004).

During this same time, the social movement for women's right to vote, or suffrage, also picked up the cause of domestic violence. This movement had some crossover with the temperance movement (Rambo, 2009). Women, it was assumed, would vote for temperance and encourage more lenient divorce laws, which would provide solutions to the issue of domestic violence (Rambo, 2009). Suffragists framed domestic violence as primarily a problem to be solved by granting women the right to vote. Suffragists and temperance activists worked to promote the enactment of laws that would protect women from domestic violence, allow divorce, as well as create the countries first domestic violence shelters and legal services in Chicago in 1885 (Pleck, 2004). While important advancements were accomplished by members of this movement, domestic violence continued to be framed as a symptom of other social problems and not as a social problem in its own right.

The women's rights movement of the 1970's. The issue received little national attention again until the 1960's and 1970's (Danis, 2003). During these decades, the feminist movement began to emerge as women began to become disillusioned with their treatment and the treatment of women's issues in other social movements (Pleck, 2004). As women began to meet in small informal discussion groups, they shared experiences with each other and found that domestic violence was not a unique problem, but was pervasive (Danis & Lockhart, 2010). Many

prominent feminist leaders of that period spoke out about their personal experience with domestic violence (Pleck, 2004). The feminist movement began to conceptualize the issue of domestic violence (along with rape) as an issue in its own right and to create a clear theory that domestic violence was rooted in power and control (Pleck, 2004; Schechter, 1982). They began to work on solutions, including the creation of domestic violence shelters, crisis lines and raising public awareness (Danis 2003). These grassroots efforts quickly grew with Ms. magazine listing only 20 domestic violence shelters in the United States in 1976 and the same magazine listing 300 shelters in 1982 (Pleck, 2004). However, as provision of services became standard, and shelters began to resemble social service agencies, many lost their feminist roots as bureaucratic elements came into play and funding began to require some policies and procedures contrary to a feminist ideology (Pleck, 2004). The involvement of professional social workers has been associated with these changes (Danis & Lockhart, 2003; Pleck, 2004). Social workers replaced volunteers and brought a level of professionalization into shelters. This was concerning to many feminist activists who had been involved in the movement from the beginning, who feared that professionalization would mark a departure from the feminist, collectivist, non-hierarchical ideology on which shelters were initially founded (Schechter, 1982).

Social work history. Social work has a very difficult and complicated history with the grassroots domestic violence movement (Danis, 2003). This conflicted relationship can be traced to the early twentieth century when social work was still a very new profession struggling with its identity. In an attempt to respond to criticisms that social work was not a legitimate profession, social workers began to move away from their origins of social reform and embrace the more individual approach found in psychology (Trattner, 2007). This allowed social workers

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to employ more technical skills and training that they hoped would allow them professional recognition (Trattner, 2007).

It was during this time that social workers began to encounter individuals and families affected by domestic violence in large numbers (Rambo, 2009). With new legal protections such as more liberal divorce laws gained by the suffrage movement, individuals experiencing domestic violence began to become increasingly involved with the courts (Pleck, 2004). To manage the increase in cases, states created separate *domestic relations courts*, similar in concept to modern family courts, to manage the increase in cases (Rambo, 2009, p. 145). The first of these courts was created in Buffalo, New York in 1910 (Pleck, 2004). These courts were staffed by social workers and psychiatrists and domestic violence was treated as a non-criminal act, resulting from sexual and biological problems of women and was considered best served by reunification and family preservation regardless of abuse (Pleck, 2004). These courts commonly placed responsibility and fault on both members of a couple, blaming them both for "creating a troublesome but trivial misunderstanding" (Pleck, 2004, p. 137).

This set the stage for social work involvement with domestic violence. The social work profession in this period was embracing a Freudian view of women as masochistic which easily translated into victim blaming attitudes towards individuals experiencing domestic violence (Rambo, 2009). Social workers involved with these courts were engaged in a system that conceptualized domestic violence as the problem of both parties involved and as primarily an issue solved by counseling, and not by legal solutions (Pleck, 2004). Social workers may have felt compassion for women experiencing domestic violence, but "those who failed to enforce agency policy were regarded as hopelessly naïve" (Pleck, 2004, p. 139). Because the courts were perceived as having more power than they actually did (Pleck, 2004) social workers became

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engaged in a problematic power relationship with those involved in these courts. Social workers became "handmaidens of judicial decision-making" (Pleck, 2004, p. 125) and became an integral part of a system that perpetuated oppressive policies and perspectives (Bundy-Fazioli, Quijano, & Bubar, 2013).

Tensions between the social work profession and the battered women's movement continued through the 1970's. Evidence of this problematic relationship is noted by Schechter (1982) in her history of the battered women's movement. She notes that professionals, (including social workers) were often critical of feminist activists and agencies, viewing them as pushing a feminist agenda over individual self-determination (Schechter, 1982). Some professionals even went so far as to "dismiss all feminist shelters as man-hating agencies that want to break up the family" (Schechter, 1982, p. 107). On the other hand, she also notes that feminists were often highly critical of professionals and their role in the battered women's movement, accusing them of "professional arrogance and indifference toward battered women" which led to a decidedly anti-professional bias (Schechter, 1982, p. 107). This tension meant many shelters and other domestic violence agencies actively sought to prevent or eliminate professionalization within their agencies (Schechter, 1982). Social workers and other professionals were actively excluded in an attempt to prevent bureaucracy, hierarchy and problematic power differentials from creeping into the grassroots, collective ideology of feminist shelters. These historical elements created a problematic relationship between domestic violence service providers and social work professionals. This tension prevented social workers from being engaged in a concerted way with domestic violence agencies and services. This resulted in the problems noted in the literature through the late twentieth century where social workers found to blame victims, reframed abuse as masochism, failed to recognize abuse as a problem, and failed to make appropriate referrals

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and interventions (Danis, 2003). This problem persisted from the 1970's through the early 1990's; with social work "earning a reputation as uncaring, uninformed and unhelpful to battered women" (Danis, 2003, p. 178).

Domestic Violence Myths

Many historic elements came together to create and increase domestic violence myth acceptance. Domestic violence myths can be defined as any idea perpetuated that "minimizes the crime, blames the victim, and exonerates or at least excuses the perpetrator" (Peters, 2008, p. 7). Growing out of research on rape acceptance myths, domestic violence myths are still a relatively new concept to research (Peters, 2008). While the concept of domestic violence myths is new, the adverse effects of holding victim blaming attitudes has been understood for some time. Victim blaming attitudes have been found to prevent those effected from receiving services, seeking help or leaving the situation, resulting in continued victimization (Policastro & Payne, 2013) and prejudicial treatment of survivors (McMahon, Postmus, Warrener, Plummer, & Schwartz, 2013). Helping professionals who hold and accept domestic violence myths run a risk of engaging in therapeutic abuse when they "collude …with a set of damaging insinuations that further imperil women" (Golden, 1994, p. 636).

Domestic violence myths that serve to blame victims, excuse perpetrators or minimize the crime have wide historical acceptance on both the individual and the societal level (Bryant, 2003). One study that examined myths held on the individual level was conducted by Worden (2005). In this study, 1200 telephone surveys were conducted across six New York communities. Participants were selected randomly through a process that created a representative sample of the communities chosen. Survey questions were used to ascertain respondent's beliefs about the causes of domestic violence. Questions included both open ended and closed ended questions.

This study found results that suggest that "while most people agree that violence is associated with documented risk factors, many also attribute some abuse to women's role in seeking, provoking and tolerating violence" (Worden, 2005, p. 1229). By conceptualizing abuse as the result of actions by the victim, it endorses the myth that victims are to blame for the violence. Worden also found that one third of respondents believed that domestic violence is common or normal behavior in relationships. This belief indicates acceptance of myths that serve to minimize the crime of domestic violence by normalizing it. Worden also found that one in four respondents believed that some women want to be abused (Worden, 2005). These beliefs "implicitly [place] responsibility on victims for permitting, if not for initiating, violence" (Worden, 2005, p. 1238). These findings indicate some levels of acceptance of domestic violence myths in a general population.

Policastro and Payne (2013) conducted a study with a general student population at a large Southern university. A total of 370 undergraduate students participated and completed a survey including an instrument designed to measure domestic violence myth acceptance and support for criminal punishments to victims. The results indicated that "moderate support for myths existed" within this student population (Policastro & Payne, 2013, p. 341). Half of the sample agreed with the statement that women decide on their own to stay in abusive relationships (Policastro & Payne, 2013). This statement is an example of myth acceptance. It minimizes the crime by subtly suggesting that if women aren't leaving the relationship, it must not be that bad, and places blame on the victim for not leaving. Half of the sample also indicated that they found it difficult to understand why women stay in abusive relationships (Policastro & Payne, 2013). By endorsing this statement, respondents indicate their ability to implicitly place the responsibility on women for leaving and excuse the perpetrator. In addition, one third of

respondents agreed with the statement that women stay in violent relationships because they like the attention from their abusers (Policastro & Payne, 2013). This myth places blame on the victim for staying and excuses the perpetrator because they are reacting in a way desirable to the victim. This study demonstrated moderate acceptance of domestic violence myths in a general student population.

Social workers and myth acceptance. Social workers, like the larger population, are effected by social and cultural beliefs about gender and violence (Danis, 2003) which often support or endorse victim blaming attitudes and domestic violence myths (Berns, 2004). Without additional training, social workers may rely on informal sources of knowledge including personal attitudes, prior experience, media, and cultural and social attitudes in deciding how to interact with victims (B. Payne et al., 2007; Policastro & Payne, 2013). If these informal sources support prejudicial and victim blaming attitudes, social workers may communicate victim blaming messages and unintentionally cause secondary victimization for their clients (McMahon et al., 2013, p. 310).

A study by B. M. Black, Weisz, and Bennett (2010) examined social work students' preparedness to effectively interact with individuals and families experiencing domestic violence. This study was conducted with 124 recently graduated MSW students from a large urban public university. Students were presented with a short case study describing a situation where a wife was physically assaulted by her husband in a domestic violence incident. Students were asked to describe their recommended interventions and their thoughts on the causes of domestic violence. Results were coded and examined. While this study is not generalizable due to the convenience sample, lack of randomization and qualitative nature, it does provide important insight into graduating students' perspectives on domestic violence. Some of the

findings of this study are especially notable. In this scenario, the top three recommendations for interventions were counseling, substance abuse intervention and psychosocial education. Only approximately 17% of codes indicated a specific domestic violence intervention, such as shelter, safety planning, legal advocacy, etc. When asked about the causes of domestic violence, student's responses had a higher percentage of victim blaming comments (32.6%) than any other response, including the next highest response, which was that domestic violence is complex (26.09%). These results suggest that "students had little specific knowledge about domestic violence on graduating from an MSW program" (Black et al. 2010, p. 181). Responses from students who indicated prior experience working with individuals and families affected by domestic violence showed no significant difference from students who indicated no prior experience. This may indicate that experience alone may not be enough to dispel domestic violence myths. This study provides an important and interesting example of the lack of student's preparation for working with victims of domestic violence.

Domestic Violence and Social Work Response

Despite a difficult history between the domestic violence movement and the social work response, some important improvements have been noted. Danis (2003) finds reason for a cautious optimism when comparing the present situation to the past. Her research indicates that social workers today are better prepared to respond to individuals experiencing abuse than their predecessors. Social workers currently are more likely to understand safe screening practices, make referrals to appropriate services, to communicate that abuse is not the fault of the victim and that no one deserves to be abused (Danis, 2003). Another cautiously optimistic article by Pyles and Postmus (2004) found some overall improvements to the social work response to domestic violence. In a study examining and coding content regarding domestic violence from

abstracts of social work research, results indicate an increase in social work researchers' use of the voices of battered women in the research. This, the authors postulate, indicates that the voices of women experiencing domestic violence are being heard and validated, rather than dismissed or silenced (Pyles & Postmus, 2004). While the profession has increased the quality of its response to individuals and families experiencing domestic violence, there are some areas in need of improvement.

National Association of Social Workers response to domestic violence. The National Association for Social Work (NASW) is a membership organization for social workers in the United States. It states as part of primary functions "to create and maintain professional standards" (NASW, 2014a). This organization has issued standards for practice in a number of areas of social work, including school social work (Anastas & Clark, 2012), medical social work (Craig de Silva & Clark, 2005b), child welfare (Anastas & Clark, 2013), social work with adolescents (Bailey, 2003) and clinical social work(Craig de Silva & Clark, 2005a). The organization currently has no standards for practice in the area of domestic violence. NASW has issued a family violence statement (Danis & Lockhart, 2003) and a press release that is a few paragraphs long (NASW, 2014b). However, these items don't provide the extensive and clear direction that is usually present in the standards for practice, which typically run between 20 to 40 pages long and give clear direction for best practices for specific areas of social work. The Council on Social Work Education (CSWE), the sole accrediting agency for social work education in the United States, similarly has no competencies identified for educational content on the subject of domestic violence (B. M. Black et al., 2010; Danis & Lockhart, 2003).

This lack is of standards on best practices work for domestic violence notable, as other similar professional organizations have given clear guidance for work in the practice area of

domestic violence. For example, the American Association for Marriage and Family Therapy (AAMFT), a comparable professional organization to NASW, has included content on domestic violence in their core competencies (Schacht, Dimidjian, George, & Berns, 2009). Similar organizations in the medical community have also issued official guidelines and recommendations around domestic violence issues, including the American Medical Association, American College of Obstetrics and Gynecology and the American Association of Family Physicians (Schacht et al., 2009). This lack of standards and competencies indicates that the social work profession is choosing to not emphasize the issue of domestic violence (B. Payne et al., 2007). Implementing standards and competencies communicates a strong message of commitment to the prevention of domestic violence and providing assistance to survivors. Implementing standards and competencies can also encouraging appropriate interventions.

Domestic violence interventions. Standards issued by NASW could also communicate important information on appropriate domestic violence interventions. A study conducted by Danis (2003) studied examined social workers' ability to identify, assess and intervene with individuals and families experiencing domestic violence. This study utilized a survey instrument with a randomized sample of licensed social workers from a large state. One intervention examined screening practices for identifying domestic violence. The intervention most often encouraged by other professional organizations is the practice of universal screening, or assessing every client for domestic violence (Schacht et al., 2009). This can be done using the a standardized measure, such as the Conflict Tactics Scale, which has been found to have a relatively high detection rate, using questions on the intake form, or using individualized interviews (Schacht et al., 2009. Multiple forms of screening are the most effective, and questions focused on specific behavioral components of domestic violence are more effective

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than open ended questions (such as "Are you experiencing domestic violence?" or the worse example, "You aren't a victim of domestic violence, are you?") This is especially important in couples counseling, where domestic violence is contraindicated. The results indicated that respondents were "unlikely to practice universal screening for past or current abuse, preferring to initiate discussions of domestic violence only if it was suspected" (Danis, 2003, p. 182). Of those who responded, 53% stated there was little to no domestic violence questions in their intake forms. Encouragingly, respondents stated that they were interviewing couples separately to assess for domestic violence.

After screening has identified individuals experiencing domestic violence, additional skills must be engaged to appropriately address the issue. These skills include making referrals to specialized community agencies, safety planning, or assisting clients to obtain protective orders. Being able to connect individuals experiencing domestic violence with specialized services is very important. Encouragingly, Danis (2003) found that that 90% of respondents stated they make referrals to community agencies specializing in domestic violence. However, other specific domestic violence interventions were less likely to be utilized. Less than half of respondents stated that they engaged in safety planning with their clients all or most of the time. This commonly used intervention consists of brainstorming with the client to examine a number of areas of their life and make plans to increase their safety. Only 27% of respondents stated they were able to help clients obtain protective orders. While this is a very specialized intervention, Danis notes that social workers "should know that the option exists and where their client can get [this] specialized service" (2003, p. 187). These findings indicate a continued need for improvement in the social work response to domestic violence.

Policy. Policies have been found to be influential at increasing continuing education on the subject of domestic violence. Payne et al. (2007) surveyed social work supervisors in agencies throughout Virginia. The survey asked supervisors to rate their employees on how much they knew about a number of different areas of domestic violence, and how much they needed to know in each area. The survey also had questions about domestic violence training policies of the agency. This survey had a high response rate (92%). Using a cross tabulation and t test statistical analysis, the study looked at the influence of a formal policy on worker's knowledge as perceived by supervisors. The results found that agencies with a formal policy on domestic violence specific training were more likely to have their workers participate in domestic violence training programs. They also found that "agencies that do not require or even encourage training have workers who actually need to know more than do those in agencies with policies" (B. Payne et al., 2007). The study hypothesizes, based on their results, that agencies that have policies may be able to increase their worker's knowledge and decrease their levels of needed knowledge by creating clear policies on domestic violence training. This study found a connection between agencies implementing a policy mandating or encouraging domestic violence specific training and workers having increased knowledge on the subject.

Tower (2006) surveyed NASW members in Florida who have health care or clinical professional experience on the frequency of their screening behaviors. Surveys were sent to 508 social workers, and there was a 37% response rate. However, the demographics of those who responded were reflective of larger Florida NASW membership. One of the findings of this study were that respondents who reported a policy providing guidelines on universal screening perceived fewer barriers to screening. Respondents who identified a policy on universal

screening also reported that they screened more than those who didn't, and that they identified more victims of domestic violence than those who reported no policy on universal screening.

Social work education. One often suggested method for increasing the quality of the social work response to domestic violence is to intervene during the educational process. Many authors have called for an increase in the quality and amount of educational content on the subject of domestic violence (Colarossi et al., 2010; B. Payne et al., 2007; Postmus et al., 2011; Tower, 2003, 2006; Warrener et al., 2013). Current educational practices are considered by some researchers to have substantial deficits in the preparation for domestic violence work. Danis & Lockhart (2003) note overall some significant problems with domestic violence content in social work programs, including:

> An established history of bias and blame against domestic violence victims, no practice standards nor published competencies, inadequate and inaccurate direct practice textbooks, two articles published in the Journal of Social Work Education in the past 20 years, sketchy information regarding whether content is addressed and how it is addressed in BSW and MSW programs, and uncertainty about the number of domestic violence faculty experts that schools have available to them (p. 218).

Students similarly self-report a lack of coursework on the topic of violence against women (Danis, 2003; B. Payne et al., 2007; Tower, 2003; Warrener et al., 2013).

In a study performed by Tower (2003), members of the Florida chapter of NASW who identified their primary work setting as in the healthcare field or clinical/direct practice were surveyed on a number of topics related to domestic violence including their education and screening practices. While this finding has limited generalizability due to low response rate, the sample was demographically similar to Florida NASW members. Over a third of respondents indicated no exposure to domestic violence content in their professional education at all. For respondents who stated that they had professional education on domestic violence, the study found "no relationship between exposure to domestic violence content during MSW education

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and either perceptions of barriers to screening or screening behavior" (Tower, 2003, p. 490). This finding may indicate problems with the current approaches to social work education around the issue of domestic violence. One result from this finding is that it "suggests that domestic violence has not been incorporated throughout social work curricula" (Tower, 2003, 491).

One potential solution to improve the domestic violence content found at the graduate level is to provide a specialized course on domestic violence and violence against women. McMahon et al. (2013) examined students attitudes, beliefs and professional efficacy after completion of a specialized course on violence against women compared to other elective courses. In a quasi-experimental exploratory study, 179 students were surveyed in a pre-test post-test format after taking a semester long course on violence against women. While not generalizable due to the convenience sample, self-selection bias, and lack of randomization, this study provides important exploratory research on a viable educational intervention. McMahon found that the students who participated in the specialized course on violence against women "significantly decreased their negative attitudes and beliefs about violence against women as compared to students in other HBSE [human behavior in the social environment] classes" (2013, p. 317). This study provides some encouraging data on the potential of a specialized course on violence against women.

Another study by Postmus et al. (2011) surveyed MSW students at a large university regarding their personal and educational experience with domestic violence. While the response rate was low, it did provide a sample that was demographically similar to the student population. Students were asked a number of questions about their educational preparation for domestic violence work as well as a number of questions to gauge their attitudes towards victims, beliefs about domestic violence and behaviors relating to domestic violence work. Analysis of their

results found that "as MSW education, training or professional experience increased, blaming attitudes decreased" (Postmus et al., 2011, 312). Students in this study also had a high rate of exposure to domestic violence content in their educational experience with 47% of respondents indicating educational content on domestic violence. This may be explained by a program with that specific university provided by their Office of Violence Prevention that sponsored classes on violence against women to any discipline as an alternative to professors having to cancel class due to illness or inability to attend that day. While the authors postulated that this additional content may have affected their results, it is also a practical example of integrating domestic violence content into campus life without an excessive commitment in time and resources.

Another study examining the effects of a course on domestic violence was performed by Colarossi and Forgey (2006). Utilizing a pre-test post-test control group design, students were surveyed to ascertain their knowledge about domestic violence, attitudes towards interdisciplinary work and myths and stereotypes about domestic violence. This study had 93 student respondents. Analysis of their responses indicated that students experienced a significant increase in knowledge about domestic violence at post-test when compared to the control group. Students also significantly decreased their acceptance of myths and stereotypes at post-test when compared to the control group (Colarossi & Forgey, 2006). These findings indicate the potential of specialized courses as a method of providing domestic violence content to social work students.

Professional efficacy. The concept of professional efficacy grew out of research surrounding self-efficacy. Self-efficacy has a wide definition that can range "from a sense of self-worth to more specific areas regarding beliefs about one's physical, personal, or professional abilities" (Warrener, 2013, p. 195). Self-efficacy measures success by whether or not an

individual is able to try harder after a failed effort (Bandura & Locke, 2003). Professional efficacy is a more specific construct of self-efficacy, and can be defined as the ability to complete tasks related to professional work. Even more specifically, within the realm of domestic violence professional efficacy is the feeling of confidence one feels in their abilities to work with a survivor of domestic violence (McMahon et al., 2013; Warrener et al., 2013). Professional efficacy has been linked to a number of positive outcomes, including being a significant predictor of behavior (McMahon et al., 2013). Dispelling myths through education has many important benefits; however, it alone may not be enough to change behavior. Students "must also possess the confidence that they can appropriately respond to survivors" (McMahon et al., 2013, p. 311).

A study by Warrener et al. (2013) examined results from an online survey of 283 students enrolled in a MSW program at a large northeastern university. While respondents were not collected through a randomized process and there was a low response rate (27%), limiting generalizability, the results provided a valuable addition to the conversation. Questions were asked to ascertain professional experience with domestic violence work, personal experiences with domestic violence, college level educational content on domestic violence or external training on the subject of domestic violence, as well as questions to assess professional efficacy. Students were also asked questions about their screening practices. This study found a link between professional efficacy and behavior – specifically that "students who had stronger professional efficacy will be more likely to screen for victimization with their clients" (Warrener et al., 2013, p. 201.) The study also found that "the greatest indicators of the students' professional efficacy included exposure to the issue through education, training or professional experiences" (Warrener et al., 2013, p. 202.)

In a previously cited study, McMahon et al. (2013) examined students attitudes, beliefs and professional efficacy after completion of a specialized course on violence against women compared to other elective courses. In this study, 179 students were surveyed in a pre-test post-test format after taking a semester long course on violence against women. The study found that students in the specialized course increased their confidence to perform work related tasks specific to domestic violence. However, the study also found that this increase was not significantly higher than students in another elective course. One possibility for this may be that an elective course in violence against women doesn't provide direct service experience or skill building that can help increase professional efficacy and additional methods of teaching and training are needed to increase professional efficacy significantly.

Experiential learning. Experiential learning has long been considered essential to social work education (Goldstein, 2001). The idea that some aspects of social work are best learned through experiential learning has been a longstanding tradition dating back to the apprenticeship models of early social work history (Stoesz, 2010). While experiential learning is commonly associated with field education or service learning, it can also be applied to any activity that encourages the learner to obtain knowledge firsthand, rather than traditional classroom learning based on memorization, lecture and repetition.

Experiential learning is vital because classroom education alone may not be enough to adequately prepare social workers for work with those effected by domestic violence (Tower, 2003). Professional experience is another vital component that gives students invaluable real life experience that can be effective at dispelling domestic violence myths and increasing professional efficacy (Postmus & Merritt, 2010; Warrener et al., 2013). Despite the benefits, Warrener et al. (2013) notes, "It is not realistic to require that all MSW students work with

survivors at some point in their field placements, nor is it possible to require them to pursue external training" (p. 202). Experiential learning has the potential to bring opportunities for professional experience into the classroom setting.

Cheek (2007) examined the responses of students after participating in an experiential learning activity The Clothesline Project. Thirty-one students from a MSW program in the south were chosen through a nonprobability purposive sample to participate in The Clothesline Project with community members experiencing domestic violence. Students were then encouraged to attend a debriefing focus group and their responses were collected and studied. One finding from this exploratory study was that students "reported that this had a positive impact on them personally as well as a positive impact on the victims of domestic violence" (Cheek, 2007, p. 152). This response is consistent with other studies which have found similarly positive reactions to experiential learning activities (Cheek, 2007; Evans, 2001; Rocha, 2000). Students also gain specific skills, and relate theories to practice (Cheek, 2007). Experiential learning can also increase confidence in the ability to perform specific tasks with long lasting effects (Evans, 2001; Rocha, 2000).

Chapter Three: Theory

Effective domestic violence interventions are based in solid theory (B. M. Black et al., 2010). Theory can give an understanding of the complexity of the issue and the causes of domestic violence (B. M. Black et al., 2010). Without a solid theoretical understanding of the problem, social workers may reach conclusions "based on personal perspectives rather than on the research" (Colarossi, 2005, p. 152). These personal perspectives can often lead social workers to blame the victim, engage in authoritarian practices, or viewing domestic violence as a problem of individual deviance rather than as a social issue (Colarossi, 2005; Danis, 2003; Pyles & Postmus, 2004).

Feminist Theory

A common theoretical lens used in current domestic violence work is feminist theory. Feminist theory can be defined as "a theoretical project committed to producing critical constructive analyses of systemic power structures, theoretical presuppositions, social practices, and institutions that oppress and marginalize women, and to effecting social transformation" (Code, 2000, p. xix.). The connection between the current conception of domestic violence and the feminist movement has historical roots. Pleck (2004) notes that the historical connections between domestic violence and early feminism date back to the suffrage period and continuing into the women's rights movement of the 1970's. During this time, women became disillusioned with the sexism they experienced while working as activists in other social causes and began to come together in consciousness-raising groups to share their experience and create an understanding of women's experiences (Schechter, 1982). In these groups, women began to share their stories and experience of violence against women (Danis, 2003). As feminists in these groups began to focus on understanding and conceptualizing rape and domestic violence as

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issues fundamentally about power and control, a theory began to develop that conceptualized violence against women as being essentially about maintaining power and control (Straus, 1980). Schechter (1982) states this feminist theory of domestic violence as "an historical expression of male domination manifested within the family and currently reinforced by the institutions, economic arrangements, and sexist division of labor within capitalist society" (p. 209). Feminists also conceptualized the idea of rape myths, which are the foundation for domestic violence myths (Schechter, 1982).

Feminist theory applied to domestic violence provides an understanding of domestic violence as a means of maintaining power and control in an intimate relationship. This understanding places the responsibility for violence squarely on the shoulders of the perpetrator and limits victim blaming attitudes and practice. This commonly used theoretical approach has been considered essential to understanding domestic violence (Black et al., 2010). Danis (2003) warns that "when social workers lack a feminist perspective on domestic abuse, their response leads to continued revictimization" (p. 179). While not all social workers and social work professors may be comfortable with a feminist theoretical perspective, it bears notable similarity to strengths perspective and current ethical guidelines of the profession (Pyles & Postmus, 2004). A movement towards understanding the feminist theoretical foundations of domestic violence prevents revictimization (Danis, 2003) and supports current ethical mandates and strengths based perspectives (Pyles & Postmus, 2004).

There are some notable criticisms of a feminist theoretical approach to domestic violence. An early criticism of the movement was brought to the attention of mainstream feminism by Moraga (1983) in an anthology of writings by women of color who expressed their critique of the ideas of universal sisterhood offered by white middle class feminism. While these criticisms

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had been felt and commented on prior to the publication of her book *This Bridge Called My Back*, this text brought attention to the concerns and perspectives of women of color within the feminist movement. Within the battered women's movement, women of color were often underserved by a lack of understanding of the unique culture and needs of their situation (Schechter, 1982). As the movement and theory have evolved, activists and academics have sought to increase the voices of women coming from diverse backgrounds into this movement, however, some would argue that feminism as a theory still excludes and minimizes the voices of women of color (Henderson, 2009).

Adult Learning Theory

A second theoretical lens that provides a frame for this study is adult learning theory or andragogy. Andragogy can be defined as "the art and science of helping adults learn" (Knowles, 2011, p. 35). This theory postulates that the adult learners' needs differ from the child learners' needs and teaching style and methods should accommodate these differences (Knowles, 2011). Within this theoretical framework, adult learners are understood to have certain characteristics that differentiate them from child learners. These characteristics are as follows:

1. The need to know. Adult learners need a context for their learning and will invest considerable energy into understanding potential benefits from learning and potential negative consequences of not learning.

2. The learner's self-concept. Adult learners understand themselves as having responsibility and independence. If a facilitator acknowledges these qualities rather than being overly directive, it creates a better learning environment for adults.

3. The role of learner's experiences. Adult learners bring a wealth of personal and life experience to a classroom, and it is important for facilitators to view this as strength and provide learning activities such as group discussions, peer led learning, and simulation exercises to engage this strength.

4. Readiness to learn. Adult learners gain readiness to learn as they see need for the educational content.

5. Orientation to learning. Adult learners respond well to educational content that directly affects their ability to perform needed tasks, or that has a practical application

6. Motivation. Adult learners are primarily motivated through internal pressures rather than external motivators (Knowles, 2011).

These core concepts in adult learning theory provide application to the experiential learning activity In Her Shoes. This activity engages these core concepts. Participants in this activity will better understand the reasons why effective domestic violence interventions are needed, providing an explanation of why the content is important. Engaging in the primarily self-directed experiential learning process honors participants' self-concept as being responsible independent agents. Participants will engage in a group debrief session after the activity, allowing adult learners to share their wealth of experience. Student's readiness to learn may be engaged by the fact that they are attending graduate school – indicating participants already acknowledge a need for greater knowledge. Providing situations that mirror those of individuals and families experiencing domestic violence allows learners to see the practicality of the knowledge and its application to their work and lives.

Chapter Four: Methodology

Research Questions

The purpose of this study is to examine the effects of the experiential learning activity In Her Shoes on domestic violence myth acceptance and professional efficacy as compared to a traditional classroom learning activity among master's level social work students. Specifically, this study examines the following research questions:

1. What differences are observed in domestic violence myth acceptance as measured by the Domestic Violence Myth Acceptance Scale (DVMAS) (Peters, 2008) and levels of professional efficacy after the experiential activity In Her Shoes among master's level social work students when scores are compared pre-test and post-test?

2. What differences are observed in domestic violence myth acceptance as measured by the DVMAS (Peters, 2008) and levels of professional efficacy after the traditional classroom lecture among master's level social work students when scores are compared pre-test and post-test?

3. How do the change in scores on the DVMAS professional efficacy scale compare between students who participate in the In Her Shoes activity and those who participate in the traditional classroom lecture?

This study measured two independent variables. The independent variable in the experimental group was the experiential learning activity In Her Shoes. The independent variable in the comparison group was a traditional classroom lecture. The active independent variable was the In Her Shoes experiential learning activity. There were also two dependent variables in this study. The first dependent variable was the level of domestic violence myth acceptance as

measured by the DVMAS (Peters, 2008). The second dependent variable was the level of professional efficacy as measured by the professional efficacy scale (Danis, 2004).

As pre and post-test levels of domestic violence myth acceptance were compared, an overall significant decrease in the mean would suggest a decrease in student's acceptance of domestic violence. As pre and post-test levels of professional efficacy were compared, an overall significant increase in the mean would suggest an increase in student's sense of professional efficacy in students. Comparisons of rates of domestic violence myth acceptance and professional efficacy between groups receiving the experiential learning activity and the traditional lecture format were also examined to see if one method displays a greater change than the other.

Setting. The intervention was performed with MSW students in their regular classroom setting at a state university in in the western United States. On campus students received the intervention during their regularly scheduled class on campus. Distance learning students received the intervention in their regularly scheduled classroom setting as well. This school of social work is accredited by the Council on Social Work Education.

Sample. The theoretical population for this study is graduate MSW students at all universities. The sampling frame is graduate MSW students. The sample is MSW students at a large university in in the western United States who consent to the study. Approximately 73 students were invited to participate in the study. Students were recruited from three cohorts of MSW students.

Each class was assigned either the experimental intervention or the comparison intervention. The comparison group had a higher level of participation than the experimental

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group. Assigning each class an intervention was intended to prevent a self-selection sampling bias that is common in studies examining student chosen elective courses on domestic violence.

Based on the composition of students within the school of social work, it was anticipated that the sample would have some demographic characteristics that may seem unusual, such as a high percentage of female students, but which actually demonstrate a representativeness of social work schools across the country.

Design

This study examined the effects of two interventions on domestic violence myth acceptance and professional efficacy. A quasi-experimental pre-test post-test design was utilized. Two classes were chosen to receive the intervention In Her Shoes, and one class was chosen to receive the control, or traditional classroom lecture.

In Her Shoes. The activity In Her Shoes was created and marketed by the Washington Coalition Against Domestic Violence. This tool has been widely used in community education, workshops, and classrooms across the United States. This activity took approximately one hour to complete. Prior to the intervention occurring, the room was set up with 17 stations. Each station had a clear label, supplies, and a place for character cards. Each station had color coded character cards. For characters that had more than one card per station (indicating that a character had options to return to a station at different times during the activity), the cards were stacked and clearly numbered.

After a brief introduction and description of the activity, students were invited to participate in pairs or on their own, based on the small numbers of participants. Each student or pair of students received a character card printed on a character-specific color. There were eight characters in total, based on composites of stories from real victims of domestic violence. This

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card provided information about the relationship, background and experiences of the character. After introducing the character's story, the initial cards concluded with the statement "Abuse Happens" and included instructions to go to the station with that title. At this station, students were instructed to put on a Band-Aid to provide a visual representation of the abuse. Each subsequent trip to the "Abuse Happens" station included instructions that the student put on additional Band-Aids. At this station, students also picked up the color-coded card for their character. Students read through the description provided which included a description of the incident, or what lead up to the abuse. At the end of the card, students faced choices. These choices included directions on which station to go to next. Stations represent a variety of formal and informal helpers, such as Clergy, Friends and Family, Hospital and Shelter. Each station provided students with a color coded card for their character that included a description of their character's experience, and directions or choices as to where to go next.

As students made choices, they were able to better "understand, in a very compressed period of time, the ups and downs a battered woman experiences over the course of many years (In Her Shoes: Living with Domestic Violence Reference Guide, 2000, p. 1)." Some stations that appeared straight forward become more complicated when visited. For instance, attempts to go to the station titled shelter were stalled as students flipped a coin to find out if there was space available. Characters may also revisit a specific station more than once. Students continued with their character's story until it was completed. After the students completed the story with one character, they were encouraged to repeat the process with a new character.

A five minute warning was given, and again at one minute, indicating the completion of the activity. Students then came together for a debrief session. The discussion began with questions intended to ascertain students' response to the activity, such as "What was most

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surprising? What was most frustrating? What made it difficult for women to find safety?" After a discussion of the experience, the focus moved to community responsibility, with questions about how various formal and informal helping systems (represented by stations) increased or decreased safety for victims. Students were encouraged to discuss the effectiveness of the activity as a community education tool.

Traditional classroom lecture. The comparison group received a traditional classroom lecture. In order to provide consistency across the classes, a pre-recorded lecture was shown. The lecture, taken from the lecture series "It's Not Far From Home," was titled "Holding Offenders Accountable: Improving Community Response" and was the fourth lecture in a series held in Northern Colorado in 2006. One hour of this lecture was shown to students. The lecturer, Lundy Bancroft, is a notable author on the subject of domestic violence who has four books written on the subject and has 20 years of experience treating abusive men. During the selection shown in class, Lundy Bancroft discussed domestic violence prevalence, common myths about men who abuse women, and ways that the community participates in assisting men to escape accountability for abuse (Longmont Cable Trust, 2006). In this lecture, Lundy Bancroft also provides an in-depth understanding of the dynamics of abusive relationships (Longmont Cable Trust, 2006). The lecture locates the causes of domestic violence as rooted in power and control and addresses some common domestic violence myths (Longmont Cable Trust, 2006). A session was chosen with a focus that includes community elements in order to provide comparable educational content to the experiential learning activity In Her Shoes.

Data Collection Procedure

Informed consent was obtained from students prior to participation in the study and after approval from the Institutional Review Board. Participation in this study was voluntary and

students were given the option withdraw their consent at any time. Students were also informed that their participation would not impact their grade or standing in the class in any way. Prior to the study taking place, professors for each class were contacted for their permission to utilize regularly scheduled class time for the purposes of this study. Participants included both full time students attending on campus and part time students who are enrolled in a distance learning program.

Once scheduled, students received an email informing them of the date of the upcoming activity in class. This email provided a brief explanation of the study, informed consent information, as well as a link to the online pre-test. The pre-test was made available both online and through hard copy in class. Students were also informed of an alternate assignment if they declined to consent to participate in the activity. This was important because the high rates of domestic violence in the United States increases the likelihood that students may be in a violent relationship or know someone who is, and could potentially find participation in the intervention distressing. For this reason, students who felt uncomfortable engaging in an activity on this topic were provided an alternate assignment. Students who opted out of the study were provided with a specific reading on the topic of domestic violence. Students who did participate were provided the post-test survey in class, as well as receiving an email with the link to the post-test survey.

Students were asked to respond to a survey both before and after participating in the activity. The pre-test survey contained the Domestic Violence Myth Acceptance Scale (see Appendix A). This scale contains 18 statements which students were asked to rank on a seven point Likert scale from strongly disagree to strongly agree. The survey also contained a scale measuring levels of professional efficacy, which used a 5 point Likert scale. Students were asked to complete a brief demographics section at the end. Students were asked to respond in their own

words describing their experience working with victims of domestic violence. Students were asked to provide the last four digits of their student ID number rather than a name to preserve confidentiality but allow researcher to link pre-test and post-test results.

The post-test survey provided the items contained in the Domestic Violence Myth Acceptance Scale for a second time, and questions regarding professional efficacy. It omitted questions regarding education and professional experience and demographic information to prevent redundancy. Students were asked to provide the last four digits of their student ID number to link pre and post-test results. At the end of the survey, students were provided space to respond to the experience in their own words.

Survey research. This research utilized a self-administered pre-test and post-test survey. Surveys are a very popular method for conducting research, and online surveys specifically have been gaining popularity in recent years (Babbie, 2012). Despite the popularity, there are some potential problems with online survey research. For instance, it may create problems with sampling and unintentionally exclude those without access to a computer or who are not computer literate. To combat this, students were provided an option of taking the surveys in class on paper.

Instrument

An effective method to help increase reliability is to use a previously proven measure (Babbie, 2012). For this purpose, two previously studied measures were chosen for this study. The first the is Domestic Violence Myth Acceptance Scale (DVMAS), which was created and validated by Peters (2008). The second measure was created by Danis (2004) to measure professional efficacy. This second measure is still under examination but has some preliminary data to support it.

Both measures are based on self-report from students. Students rated themselves on a Likert scale indicating their level of agreement with a number of statements – the DVMAS questions pertain to attitudes towards victims of domestic violence, and professional efficacy questions pertain to an individual's confidence in performing tasks related to work with victims of domestic violence. There are no correct or incorrect answers to either of these measures. Student surveys were linked using the last four digits of their student ID number. Students' responses were compared from pre-test to post-test to determine if there was any difference in their attitudes towards victims or their confidence in performing tasks related to work with victims of domestic violence.

Domestic violence myth acceptance scale. The Domestic Violence Myth Acceptance Scale (DVMAS) was developed by Peters (2008). This scale was created with the intent to follow the example of rape myth acceptance scales and provide domestic violence workers and researchers with a tested and validated scale to measure these attitudes. Peters also stated his intention to create a scale with enough sensitivity to be used in a pre-test post-test format (2008). This scale was pre-tested with a small convenience sample of graduate students and professors, as well as a small panel of individuals in the field of domestic violence work. Feedback was requested regarding needed content, errors and clarity. A pilot test study was conducted with university students. Data from this pilot test study was examined and revisions were introduced to increase the strength of the scale. In the final stage of testing, the scale was compared to other measures of myth acceptance. Using a sample of university students, the final test was performed.

Peters (2008) compared the results from the DVMAS final testing to other pyschometrically tested scales in the final test. Due to the lack of existing tested scales

measuring domestic violence myths, these scales measured rape myth acceptance, attitudes towards wife abuse, sex role stereotyping and attidues towards women. These scales are well tested, and serve as a comparison for the DVMAS results. Peters (2008) examined the data to see if the DVMAS had a convergent construct validity and correlated significantly with these scales. Participants were asked to complete these scales along with the DVMAS as part of the final test of the scale.

Peters (2008) assessed this scale using Cronbach's internal reliability coefficient. The revised and final version of the DVMAS had a reliability of α= .88, considered a very good reliability score. When tested compared to the other scales used, Peters (2008) found "convergent reliability of the DVMAS was moderately to strongly supported with significant correlations between the DVMAS and all related scales" (p. 97). This correlation was especially strong between the DVMAS and Burt's (1981) Rape Myth Acceptance Scale. This may indicate that they are measuring conceptually similar constructs, which is supports the stated goal of creating a similar scale specific to domestic violence myths.

Hawkins (2007) examined the DVMAS specifically with social work students and found it effective with the population of social work students. In her examination of the data, Hawkins found that social work students in her sample had a mean score of 2.35 (SD .84), "which is exactly on point with the DVMAS author's study" (Hawkins, 2007, p. 42). While there may be some concern that social work students are more aware of social justice issues, and may score differently on the DVMAS based on greater awareness of the politically correct answers, the similarities Hawkins found in this study indicate that it is a worthwhile instrument with this population. Hawkins also found a Cronbach's alpha of .867 for all items (2007). This indicates a good reliability of the scale and is similar to Peter's (2008) findings.

This scale contains 18 statements which students are asked to rank on a seven point Likert scale from strongly disagree to strongly agree. The DVMAS score is calculated by adding up the total scores for each item and dividing by the number of items answered determine the mean. This mean then becomes an individual participant's overall myth acceptance score. In the tests performed to establish validity, Peters (2008) separated male and female scores because it was anticipated that males would have a higher average score, indicated a higher acceptance of domestic violence myths. Peters (2008) explains that the difference in items indicating factors based on gender occurs because myth acceptance functions generally for blame avoidance for men and threat avoidance for women. However, due to anticipated low rates of male students in MSW programs, this separation was not included in this analysis. A higher final score indicates a higher level of domestic violence myth acceptance.

Professional efficacy scale. Danis (2004) surveyed 172 social workers to examine their professional efficacy specific to domestic violence work. Because there was no scale or measure existing to examine professional efficacy regarding domestic violence work, Danis created a specific scale to fill this need. The scale had to be domestic violence specific, because "self-efficacy is context specific…therefore, a global measure of self-efficacy cannot be applied to specific context" (Danis, 2008, p. 153). This scale contains "questions on comfort, perceived capability level in identifying and discussing domestic violence with clients, assessing the level of danger the client is facing, and helping clients with safety planning and other interventions" (Danis, 2008, p. 154). After developing the survey and scale, the measures were pilot tested with a small group of social workers currently engaged in domestic violence work. It was also reviewed by a committee at a national organization that provides training for domestic violence work. The professional efficacy scale contains eleven items scored on a five point Likert scale.

Danis found that this scale has a "reliability coefficient of .95" (2008, p. 154). The scale is scored by determining the mean of responses to the eleven items. This mean is then used as the score for the respondent. In her study, Danis (2008) found that respondents from a southwestern state had an aggregate professional efficacy mean of 3.59. This mean will be used as a reference point for the current study.

Data Analysis

After collecting the responses from participants, each set of data was examined for accuracy. From this examination, consistent rules were created for problematic data. After this preliminary examination, responses were coded for data entry and entered into IBM SPSS software. Variables were defined and labeled in the software. Student pre-test and post-test surveys were connected via the last for digits of student ID numbers and input together into the software. Once data was entered, a descriptive statistical analysis was performed. During this analysis, dependent variables were analyzed. Participant responses to the DVMAS and professional efficacy scales were analyzed to determine mean, and standard deviation. Data was double checked at this point to ensure it had been coded and entered correctly. Data was also analyzed to determine if it was approximately normally distributed or if it was skewed. The analysis so far consisted of exploratory data analysis. This type of analysis was performed to determine if there were problems in the data, such as outliers, non-normal distributions, problems with coding, missing values, or data entry problems (Morgan, Leech, Goeckner, & Barrett, 2013). It also provided information needed for the next stage of data analysis.

It was discovered during this initial analysis that a number of students completed pre-test surveys but did not complete a corresponding post-test. In addition, a few surveys were completed without enough identifying information to connect the pre-test and post-test surveys.

These surveys were excluded from analysis in this study. A few surveys were returned with missing data. When the missing data was from the demographic section, no attempts were made at replacing the values and that data was simply excluded from the analysis. For the responses on the DVMAS and Professional Efficacy Scale, SPSS software was used to calculate missing values. A linear trend at point analysis was used to calculate missing values. This analysis was chosen because it is an appropriate analysis to use with repeated measures over time. It is also more robust than a simple mean replacement. Howell (2007) has stated it the best simple solution to missing data.

Once these preliminary examinations had been performed, a variable was created to calculate the mean DVMAS score for each participant based on their responses. This variable was used to perform a paired samples t test to determine the change in DVMAS scores from pre-test to post-test. Paired samples t-tests are appropriate for a "study in which the same assessment is used as the pre-test, before the intervention, and as the post-test, after the intervention (Morgan, Leech, Goeckner, & Barrett, 2013, p. 180)." Once the paired samples t test had been performed, it was analyzed for statistical significance. The comparison group additionally was analyzed using a Wilcoxon signed ranks test due to the skewness of that data in order to check for accuracy.

Next, the professional efficacy scores were examined. A variable was created to calculate the mean professional efficacy score for each participant based on their responses. This variable was used to perform a paired samples t test to compare the pre-test and post-test scores for each group. In addition, the comparison group also was tested using a Wilcoxon signed ranks test due to the mildly skewed nature of the data. The results of these tests were examined for statistical significance using Cohen's (1998) guidelines as well as effect size.

Descriptive analysis was used to examine the differences and similarities between the comparison and the intervention group. In addition, individual items on the DVMAS were examined for statistically significant change.

The qualitative data from both open response questions (one pre-test, one post-test) was entered into a spreadsheet for examination. The purpose of this examination was to give additional context for the quantitative results. Participant responses were coded based on content. Student responses could receive more than one code based on the content of their responses. While not a full content analysis, this limited coding was used to ascertain student experiences. This information was used to inform the results and analysis.

Chapter 5: Results

The purpose of this study is to examine the changes in pre and post-test levels of domestic violence myth acceptance and professional efficacy after the experiential learning activity In Her Shoes as compared to a traditional classroom learning activity among master's level social work students.

Response Rate

Two groups of students participated in the study. All received the intervention during the regularly scheduled class. A total of 73 students were invited to participate in the study. Of these students, 43 elected to participate and provide pre-test and post-test survey results for a response rate of 59%.

The first group of students received the In Her Shoes activity, and had 41 students invited to participate. Out of those invited, 18 students participated and responded. This provided a total response rate of approximately 44%.

Students in the second group received the comparison intervention and were invited to participate in the traditional classroom lecture. This group had 32 students invited to participate. Of those invited to participate, 25 respondents participated for a response rate of 78%.

Sample Demographic Characteristics of Participants

Both the comparison and the experimental groups had low percentages of students who identified as male and a high percentage of students who identified as female. Both groups had low percentages of students who preferred not to identify as either gender. The comparison group had a wider range of student ages, ranging from 24 to 61. The experimental group had a smaller range, with students from 22 to 32. Students in the comparison group were predominately part time, and students in the experimental group were predominately full time.

Students in both groups were entirely in their final year of their MSW program. Students in both

groups were predominately in their advanced year. Table 5.1 provided the frequencies of gender,

age, attendance status and MSW year for both the experimental and comparison groups.

Table 1

Frequencies of Gender, Age, Attendance Status and MSW year (Comparison Group n=25,

Experimental Group n=18)

Characteristic	Comparison Group	%	Experimental Group	%
Gender				
Male	4	17	2	11
Female	19	79	16	89
Prefer not to answer	1	4	0	0
Missing	1	4	0	0
Age (in years)				
Under 25	1	4	8	44
25-34	17	70	10	56
35-44	3	13	0	0
45 and over	3	13	0	0
Missing	1	4	0	0
Attendance status				
Full time	3	12	18	100
Part time	22	88	0	
MSW year				
Foundational year	0	0	0	0
Advanced year	23	92	7	39
Advanced standing	2	8	11	61

Experimental Group Pre-test and Post-test Differences

The experimental group received the experiential learning activity In Her Shoes during

their regularly scheduled class. Prior to the activity, they received the pre-test containing the

DVMAS (Peters, 2008) and a professional efficacy scale. After the activity, they received the

post-test containing the same scales. Student scores were compiles from their responses to each

scale, and a class average was calculated and compared pre-test to post-test. Table 5.2 provides

descriptive statistics and t-test results for the experimental group.

Table 2

Descriptive Statistics and t-test Results for Experimental Group DVMAS and Professional Efficacy Scales (n = 18)

	Pre-test		Post-test			
Outcome	M	SD	M	SD	df	t
Experimental Group DVMAS	2.22	.536	1.84	.465	17	8.28*
Professional Efficacy Scale	2.53	.865	2.43	.790	17	1.19

*p<0.001

Domestic violence myth acceptance scale. On the DVMAS, 94% of students in the experimental group had a reduced mean score from pre-test to post test. No students experienced an increase in the DVMAS score. Only one student (6%) saw no change on their DVMAS scores from pre-test to post test. According to the guidelines for skewness, the assumption of normality was not markedly violated for the pre and post-test DVMAS scores. Based on this, the paired t-test was chosen to compare the means.

A paired or correlated samples t test indicated that students in the experimental group scored significantly lower on the post-test DVMAS scale when compared to the pre-test, $t(17) = 8.28$, $p<.001$, $d= .75$. The difference is statistically significant and effect size is larger than typical using Cohen's (1988) guidelines.

Professional efficacy scale. In the experimental group, 50% of students had a decrease in mean professional efficacy score from pre-test to post-test in the experimental group, indicating a decrease in their sense of professional efficacy from pre-test to post-test. In this group, 39% of students had an increase in professional efficacy scores from pre-test to post-test. Only 11% of students had identical scores from pre-test to post-test. According to the guidelines for skewness, the assumption of normality was not markedly violated for the pre and post-test professional efficacy scores. Based on this, the paired t-test was chosen to compare the means.

A paired or correlated samples t test indicated that students scored higher on the pre-test

professional efficacy scale than they did at post-test, $t(17)=1.19$, $p=.25$, $d=.12$. The difference is not statistically significant, and has a small effect size using Cohen's (1988) guidelines.

Comparison Group Pre-test and Post-test Differences

The comparison group received a traditional classroom lecture on the subject of domestic violence during their regularly scheduled class. Prior to the lecture, they received the pre-test containing the DVMAS scale and a professional efficacy scale. After the activity, they received the post-test containing the same scales. Student scores were compiled from their responses to each scale, and a class average was calculated and compared pre-test to post-test. Table 5.3 displays the results of this analysis.

Table 3

Descriptive Statistics and t-test Results for Comparison Group DVMAS and Professional Efficacy Scales (n =24)

	Pre-test		Post-test			
Outcome	*M*	*SD*	*M*	*SD*	*df*	*t*
Comparison Group DVMAS	2.01	.595	1.68	.589	24	5.98*
Professional Efficacy Scale	2.33	.681	2.20	.637	24	2.48**

*p<0.001 **p<0.005

Domestic violence myth acceptance scale. In the comparison group, 92% of the responses demonstrated a decrease in their mean DVMAS score from pre-test to post-test. In this group, 8% of the responses demonstrated an increase in their mean DVMAS score from pre-test to post-test. No responses stayed unchanged from pre-test to post-test. The pre-test data was approximately normal, but the post-test data was skewed (skewedness statistics of 1.08). Because the data was close to the limit to be considered skewed, both the paired t-test and the Wilcoxon signed ranks test were used to compare means.

A paired or correlated t-test indicated that the students scored lower on the DVMAS at post-test when compared to pre-test. This difference is statistically significant, $t(25) = 6.0$, $p < .001$. Wilcoxon signed ranks tests also found that the difference indicating lower scores on the DVMAS post-test is statistically significant, $z = -4.03$, $p < .001$, $r = -.81$, a large effect size according to Cohen (1988).

Professional efficacy scale. On the professional efficacy scale, 56% of students saw their mean score decrease from pre-test to post-test. Only 16% of students saw their mean score on the professional efficacy scale increase from pre-test to post-test. In this group, 28% of student mean scores remained the same from pre-test to post-test. The pre-test data was skewed (skewed statistic of 1.11), but the post-test data was approximately normal. Because the data was close to the limit to be considered skewed, both the paired t-test and the Wilcoxon signed ranks test were used to compare means.

A paired or correlated t-test indicated that the students scored higher on the professional efficacy scale at pre-test than at post-test. This difference is statistically significant, $t(25) = 2.45$, $p < 0.021$. The Wilcoxon signed ranks tests confirmed that this difference is statistically significant, $z = -2.61$, $p = .009$, $r = -.52$, a medium effect size according to Cohen (1988).

Individual Items on the Domestic Violence Myth Acceptance Scale

In order to better understand that results for each group on the DVMAS, an analysis was performed on individual items for the DVMAS. Student responses were analyzed using a paired or correlated t test to see which responses had the highest difference from pre-test to post-test and to determine which of these responses were statistically significant. For the comparison group on the pre-test, the four highest rated items were items 5, 7, 2 and 9 (in order of highest rating). All of these items had a statistically significant decrease from pre-test to post-test. Three

of these items (5,2, and 9) also had the highest levels of decrease from pre-test to post-test. Two items increased in value from pre-test to post-test, items 10 and 13. Neither one of these changes was found to be statistically significant.

For the experimental group, four items were found to have the highest levels at pre-test. These items were 2, 7, 11 and 15. All of these items were found to have a statistically significant decrease from pre-test to post-test. Three of these items (2, 7 and 15) experienced the highest rates of decrease for items. One item, number 10, experienced no change from pre-test to post test. No items increased for the experimental group. Table 5.4 displays the results found from this analysis.

Open Ended Questions

Two items on the survey provided students with an opportunity to respond in their own words. The first item was presented in the pre-test. It stated "Please explain briefly your experience working with victims of domestic violence." The second item was presented in the post-test. It stated "Please explain briefly your thoughts about the learning experience on domestic violence today." The results of these two items are analyzed below.

Student experience with domestic violence. In the experimental group, there were only 10 responses to this item. Student responses were coded into four groups – no experience, personal experience, limited work experience and significant work experience. In the experimental group, 3 students indicated no experience working with victims of domestic violence. Only 1 student indicated personal experience with domestic violence. In the area of work experience, 3 students indicated having limited work experience and 3 students indicated significant work experience with victims of domestic violence.

Table 4

Pretest and Posttest Differences for Individual Items on DVMAS

DVMAS Item	Control			Experiment		
	M1	M2	p	M1	M2	p
1. Domestic violence does not affect many people	2.12	1.56	.050*	1.89	1.83	.717
2. When a man is violent it is because he lost control of his temper.	2.68	1.60	.000**	4.05	2.78	.000**
3. If a woman continues living with a man who beat her, then it's her own fault if she is beaten again	1.76	1.56	.134	1.39	1.33	.668
4.Making a man jealous is asking for it.	1.24	1.08	.043*	1.44	1.22	.298
5. Some women unconsciously want their partners to control them.	3.24	2.32	.002*	2.56	1.94	.077
6. A lot of domestic violence occurs because women keep on arguing about things with their partners.	1.44	1.36	.491	2.00	1.67	.187
7. If a woman doesn't like it, she can leave.	2.72	2.32	.030*	3.5	2.78	.015*
8. Most domestic violence involves mutual violence between the partners.	2.56	2.12	.053	2.78	2.61	.483
9. Abusive men lose control so much that they don't know what they're doing.	2.64	1.68	.000**	2.56	2.11	.028*
10. I hate to say it, but if a woman stays with the man who abused her, she basically deserves what she gets.	1.12	1.16	.664	1.17	1.17	1.0
11.Domestic violence rarely happens in my neighborhood	2.24	2.12	.083	3.08	2.54	.089
12. Women who flirt are asking for it.	1.2	1.12	.574	1.44	1.39	.668
13. Women can avoid physical abuse if they give in occasionally.	1.52	1.88	.095	1.61	1.44	.454
14. Many women have an unconscious wish to be dominated by their partners.	2.20	1.92	.215	2.06	1.72	.111
15. Domestic violence results from a momentary loss of temper.	1.84	1.40	.013*	2.89	2.22	.018*
16. I don't have much sympathy for a battered woman who keeps going back to the abuser.	1.76	1.60	.256	1.56	1.33	.042*
17. Women instigate most family violence.	1.56	1.36	.260	1.72	1.28	.028*
18. If a woman goes back to the abuser, how much is that due to something in her character?	2.32	2.04	.166	2.52	1.88	.017*

*Note: N=43, *p< .05, **p<.001*

This significant work experience included working as a victims advocate at a domestic violence shelter, working in a homeless shelter with women and children and working very closely with survivors of domestic violence. In one example of a response indicating significant work experience, a student stated "I currently work very closely with several survivors of domestic violence. I have been in this position for several months."

In the comparison group, there were 23 responses to this item. These responses were coded into the same categories as the experimental group – no experience, personal experience, limited work experience and significant work experience. The first category was no experience, with 6 students providing responses that were coded into this category. Only 3 students indicated personal experience with domestic violence. In the last category of work experience, 4 students indicated limited work experience with victims of domestic violence and 13 students indicted significant work experience with victims of domestic violence. Significant work experience included working with victims on a daily basis, working at domestic violence agencies and shelters, and attending numerous trainings on the subject through work. An example of a response considered significant work experience was provided by one student who stated "I have worked with DV victims in the shelter I intern in and in community mental health. Have worked with both offenders and victims of DV. I do feel like there has been little training working with this populations [*sic*]."

Both groups indicated lower levels of personal experience with the issue of domestic violence than was had been anticipated. The comparison group had much higher levels of responses indicating significant work experience. This may be expected, due to demographic differences between the two groups, including the higher age and part-time status of students in the comparison group.

Student responses to the intervention. In the experimental group, 12 students responded to this item. Of these responses, 9 indicated a positive reaction to the In Her Shoes activity. In addition, 5 students in the comparison group included in their response a desire for additional training on the subject of domestic violence, with one of these comments indicating a critique of the activity. Only 2 students responded to the fact that they had participated in this activity previously during the calendar year. Of these two responses, both indicated at the intervention was beneficial the second time as well. In one example of this, the student indicated a positive response to repeating the activity, stating "I feel as though it was equally beneficial to my first experience with this program. If anything, I feel as though it revealed my lack of knowledge and abilities around domestic violence." Another student indicated a critique of the activity with the comment "I feel like it assists in raising awareness, but less the ability to work victims."

In the comparison group, 18 students responded to this item. Of these responses, 10 indicated that a positive response to the lecture. Only 2 students expressed a desire for additional training on the subject of domestic violence. A critique of the lecture was expressed by 3 students few and 2 students indicated the material covered was a reminder or refresher of information which they had learned previously.

The critical comments provide insight into the student's reactions to the comparison intervention. While few in number, they inform the overall reception of the intervention. One comment critical of the traditional DVD lecture indicated a desire for a female speaker, stating that it was a "good video. Would like to hear from a female expert in the field as well [*sic*]." The second critical comment indicated the student's awareness of a need for a broader intervention addressing a variety of types of relationships in which domestic violence can occur. This student

stated "I enjoyed the speaker, my two concerns are that he in no way addressed same sex

relationship DV and that I could see his talk being very accusatory for men who are not

batterers." The last critical statement indicated some levels of victim blaming still held by the

student in their difficulty placing blame for domestic violence solely on the perpetrator. This

student stated "I think it is important to identify DV and hold offenders accountable and treat.

But I also think its important not to minimize the role that women have in that relationship (and

past) to address that, as well as other systemic contributors [*sic*]."

Chapter 6: Discussion and Recommendations

Findings

The sample of master's social work (MSW) students who participated in the intervention had a number of characteristics. On gender, participants were very representative of the larger population of MSW students. This sample contained 14% male students, 81.4% female students, 2.3% who didn't want to identify as male or female and 2.3% who provided no answer. This is similar to the national demographics of MSW students, where 14.5% of students were male and 85.5% were female (Council on Social Work Education, 2013). Although the sample appears to be disproportionately female, this result is representative of the larger population.

The age of the sample of MSW students who participated in the intervention was approximately similar to the larger population (Council on Social Work Education, 2013). Similarly, the comparison group, which was predominately part-time students, was on average older than the experimental group. This is similar to the national demographics of MSW students which found that part-time students were on average older than their full-time counterparts (Council on Social Work Education, 2013).

Domestic violence myth acceptance scale. Pretest scores on the Domestic Violence Myth Acceptance Scale (DVMAS, Peters, 2008) showed some differences between the two groups of students. Pre-test DVMAS scores for the experimental group (2.22) were higher than for the comparison group (2.01). However, both groups scored lower at pre-test than the sample of social work students examined by Hawkins (2007) (who found a group mean of 2.35), suggesting that students in this sample started out with lower average rates of domestic violence myth acceptance than the sample in the Hawkin's study (2007). The difference in pre-test scores between the comparison and the experimental group was slight, but may suggest that students in

the comparison group began with lower domestic violence myth acceptance levels than the experimental group. Demographic characteristics may help inform an understanding of this difference. Students in the comparison group were on average older and more students indicated significant work experience on the subject of domestic violence.

The experimental group demonstrated a statistically significant decrease in their levels of domestic violence myth acceptance, as measured by the DVMAS (Peters, 2008) after the intervention. The In Her Shoes intervention appeared to have a consistent effect on students, with 17 students experiencing a decrease in their DVMAS scores, and 1 student remaining the same. Despite students having received the same intervention within the last year, the activity still appeared to have an impact on students' level of myth acceptance. This may suggest that the In Her Shoes intervention can have an impact on myth acceptance even if used more than once with the same group. The experiential nature of the activity could have also influenced this result. Despite having done the activity before and being familiar with it, students were still able to choose different characters and make different choices. Being faced with different challenges, obstacles and stories may have allowed them to gain additional insight into the experience of victims of domestic violence.

The comparison group also demonstrated a statistically significant decrease in their levels of domestic violence myth acceptance as measured by the DVMAS (Peters, 2008) after participating in the traditional classroom lecture. This effect appeared to be substantial, as 22 students had a decrease in their DVMAS scores, and only 2 students had an increase in their DVMAS scores. This finding suggests that even a brief traditional classroom lecture has potential to reduce student's acceptance of domestic violence myths. The fact that student's in

both groups had reduced acceptance of domestic violence myths suggests that even time limited educational content in a variety of formats can dispel myths about domestic violence.

Because domestic violence myths blame the victim, excuse the perpetrator and minimize the violence (Peters 2008), decreasing acceptance of these myths in helping professionals is very important. Danis (2003) outlined a number of criticisms brought against the social work profession that indicate social work professionals have been known for their victim blaming attitudes. When social workers hold victim blaming attitudes, they prevent victims from receiving services, seeking help or leaving the situation (Policastro & Payne, 2013). These attitudes result in continued victimization (Policastro & Payne, 2013) prejudicial treatment of survivors (McMahon, Postmus, Warrener, Plummer, & Schwartz, 2013), and run a risk of engaging in therapeutic abuse and increasing risk of danger to victims (Golden, 1994). Decreasing myth acceptance has great potential to improve the social work response to individuals impacted by domestic violence and prevent revictimization by social work professionals. The findings of this study suggest that even a time-limited educational intervention has potential to significantly decrease domestic violence myth acceptance, improving the social work response to victims in professional settings.

Professional efficacy scale. In the experimental group, students had an average pre-test level of professional efficacy of 2.53. Students in the comparison group had an average pre-test level of professional efficacy of 2.33. This is lower than the levels found by Danis (2008) in her study of social workers practicing in a southwestern state who had an average score of 3.59. This difference could indicate that students felt less confident in their ability to perform domestic violence related social work tasks at pre-test than the sample of professionals in the study by Danis (2008).

The experimental group experienced a decrease in the group mean from pre-test to post-test on the professional efficacy scale. This change was not statistically significant. Half of the students in this group had a decrease in professional efficacy scores from pre-test to post-test. Less than half (39%) of the class had an increase in professional efficacy scores from pre-test to post-test and 11% of students had no change. This finding was surprising, as it had been anticipated that an experiential learning activity had great potential to help students feel more confident in the abilities to perform social work tasks with domestic violence victims.

The comparison group experienced a statistically significant decrease in professional efficacy scores from pre-test to post-test. Over half of the group (56%) experienced a decrease in professional efficacy scores from pre-test to post test. Very few students (16%) experienced an increase in professional efficacy scores from pre-test to post-test. Over a quarter of the comparison group (28%) experienced no change in their scores from pre-test to post-test. This may indicate that students felt less prepared to work with victims of domestic violence after the comparison intervention.

The In Her Shoes activity seemed to have a more positive effect on students than the traditional classroom lecture on student's sense of confidence in performing domestic violence related social work tasks. Neither intervention appeared to be highly effective at improving student's professional efficacy. This is in keeping with previous research on professional efficacy. Warrener et al. (2013) found that a number of factors significantly influenced professional efficacy, including age, professional experience, MSW education and external trainings. Danis (2008) found in that professional experience and academic preparation were the strongest predictors of professional efficacy. Similarly, McMahon (2013) found that while a specialized course in violence against women did increase professional efficacy in students, it

was not significantly more than levels found in students who didn't take the course. McMahon hypothesizes that students may actually feel less confident after increasing their understanding of the complexities of domestic violence (2013). These studies may suggest that educational content alone is not enough to significantly increase student's professional efficacy. This may especially be the case with time-limited interventions, such as the two interventions used in this study.

These findings indicate that classroom content alone, while important, may need to be augmented in order to impact levels of professional efficacy. For that reason, Danis (2004) states that to "maximize self-efficacy, the content should be accompanied by opportunities for experiential exercises, particularly in universal screening, risk assessment, and intervention, including safety planning (2004, p. 158)." While the In Her Shoes intervention is effective at simulating the experiences of victims of domestic violence, it doesn't contain any social work specific experiential activities. This may have limited its effectiveness in increasing students' sense of professional efficacy. Some students appeared to feel additional need, as there were free responses from individuals in both groups stating a desire for additional information and training on the subject of domestic violence. It may be that additional content and a variety of types of exposure is needed to adequately prepare students from work with individuals and families experiencing domestic violence.

Students in the free response section appeared to indicate an overall positive reaction to both the intervention and the control. Both groups had student responses indicating a desire for additional training and information on the topic of domestic violence. No students offered a critique of the In Her Shoes activity, while students in the comparison group offered some critiques of the lecture. These critiques included a desire for a presenter who was female, that the

content focused heavily on heterosexual relationship and not enough information on same sex

relationships, that it didn't focus on the women's role in domestic violence and that the

presenters tone could be accusatory toward males.

Limitations

One unanticipated limitation to this study concerned miscommunication between staff

and the researcher prior to the intervention taking place in class. Despite having checked with

university staff that students in the experimental class had not received the In Her Shoes

intervention, upon arrival to class, students informed the researcher that they had not only

participated in this activity, but that they had done so within the last year. This is a significant

limitation. In retrospect, additional communication with students was needed to determine this

information prior to the activity occurring in class.

A second limitation to this study is the small sample size. This limitation was likely

linked to the aforementioned miscommunication between staff and the researcher. Because of

this, students received the In Her Shoes intervention for a second time within a year. Once

students realized that they would be asked to repeat a learning activity they had previously

attended, many appeared disinterested in the activity and opted out. Because the low rates of

participation were seen in the experimental group and not the comparison group, it seems likely

that this was a contributing factor. This small sample size limits the generalizability. However,

the sample does approximate demographic characteristics of the larger MSW student population,

and that is encouraging.

Lack of randomization was another limitation. This meant that students in the comparison

group had some demographic characteristics that were different from the experimental group.

For instance, students in the comparison group were on average older than the experimental

group, had much fewer advanced standing students, and had more responses indicating significant work experience with domestic violence. A convenience sample, which is much more feasible for this study, also limits generalizability.

Additionally, the pre-test post-test format provides a threat to internal validity. This format prevents a certainty regarding exactly what affects any change in scores from one test to another. A potential solution is to keep the two tests close in time to one another in order to limited the chance of outside influences affecting students responses (Bell, 2010). In this study, students were provided the pre-test and post-test surveys close in time to limit this threat. This reduced the chances that historical influences will affect students test scores.

Implications

Domestic violence is a cross-cutting issue for social workers in the field. Because of the prevalence of this issue and the needs of survivors, there is a high likelihood that social workers will encounter individuals impacted by domestic violence in their professional work. Because of this, students need to be prepared to work with these individuals appropriately in order to prevent re-victimizing clients. Because of the problematic history of social work and feminism (Danis, 2003), schools should be thoughtful about their use of feminist theory in the classroom. This theoretical lens is considered essential to understanding and appropriately intervening with victims of domestic violence (Black et al., 2010). Staff should be prepared to deconstruct and critically examine discomfort with this theoretical lens, and be prepared to identify how this theory informs and overlaps with current ethical guidelines and strength-based approaches (Pyles & Postmus, 2004).

The findings from this study suggest that education has potential to decrease problematic myth acceptance and victim blaming among professionals. These findings also suggest that

decreasing myth acceptance and victim blaming can be accomplished by both traditional classroom lecture and experiential learning activities. Potentially, schools desirous of decreasing victim blaming in their students prior to sending them into the field can do so in a short amount of time with a small commitment to staffing and resources.

Students in the experimental group had statistically significant decrease in domestic violence myth acceptance despite having participated in the In Her Shoes activity within the year. This finding may suggest that repeating an experiential learning activity can still make an impact on students. Graduate social work programs may want to expose students to content on domestic violence more than once during their MSW program, as a second exposure has potential to continue to decrease victim blaming attitudes and myth acceptance.

While myth acceptance and victim blaming may be affected in a short amount of time, this study suggests that increasing professional efficacy may be a much more complicated but equally important task. Brief exposure to domestic violence content through a traditional classroom lecture may actually decrease students' sense of professional efficacy. Students may need education about specific domestic violence interventions, as well as opportunities to practice these interventions in order to feel confident in their abilities to perform social work tasks with victims of domestic violence. Students' positive responses to the content also suggest that students are not adverse to additional education on the topic of domestic violence, and that there is a desire for additional training on the subject. This may indicate that students are supportive of this type of practical knowledge being integrated into their course content.

Recommendations

Given the prevalence of this issue and the danger to victims if helping professionals are not adequately prepared (Golden, 1994), it is incredibly important for schools to provide content

on domestic violence for their students to prepare them for work in the field. Many graduate schools of social work are under intense pressure to cover a wide variety of topics in depth during a short amount of time, stretching resources of both time and money. This can become a barrier to graduate schools providing adequate preparation for students to interact with victims in the field. For some schools, providing a semester length course on domestic violence may be cost and time prohibitive. However, the results of this research offer an alternative for schools with limited resources. This study suggests that providing domestic violence education content within the context of other courses, even more than once within a year, has potential to significantly reduce student acceptance of domestic violence myths. Providing content to reduce domestic violence myth acceptance will help prevent students from re-victimizing or endangering clients experiencing domestic violence. This method of infusing domestic violence content within other courses has been encouraged by Danis (2004) as a primary agenda for social work education.

However, these time-limited educational interventions may not be enough to adequately prepare social work students to feel confident in their abilities to perform specific interventions. In order to adequately prepare students to appropriately respond in effective ways with clients experiencing domestic violence, additional educational commitments may be required.

Additional research is needed on the subject of professional efficacy in domestic violence and what factors impact it and how these factors relate. Continued research is also needed to see if the effects seen from educational interventions have an impact over time in a longitudinal study and if the effects are sustained.

Graduate schools of social work also need the support of professional organizations such as the National Association of Social Workers, and the Council on Social Work Education for

long lasting change to occur. These organizations can support graduate schools by creating and providing standards of practice, competencies and statements on domestic violence. This not only demonstrates that these professional organizations are ready to end their silence on this topic, but that they are also ready to take a leadership role in this area. Because these organizations set competencies and standards for accreditation, their emphasis on this issue can make it a priority for schools of social work, and provide impetus for schools to include this content to a greater degree. This is especially needed in light of the problematic history that the social work profession has had with domestic violence work. Leadership and policy from these organizations will assist a generation of students to be confident, prepared and able to provide quality services to individuals impacted by domestic violence.

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Domestic Violence Attitudes

The questions below ask about common attitudes toward domestic violence. While we all know the politically or socially correct answer, please answer how you truly think and feel. To answer, put a number on the line before each question indicating how strongly you agree or disagree with each statement

1	2	3	4	5	6	7
Strongly Agree						**Strongly Disagree**

1. _____ Domestic violence does not affect many people

2. _____ When a man is violent it is because he lost control of his temper.

3. _____ If a woman continues living with a man who beat her, then its her own fault if she is beaten again

4. _____ Making a man jealous is asking for it.

5. _____ Some women unconsciously want their partners to control them.

6. _____ A lot of domestic violence occurs because women keep on arguing about things with their partners.

7. _____ If a woman doesn't like it, she can leave.

8. _____ Most domestic violence involves mutual violence between the partners.

9. _____ Abusive men lose control so much that they don't know what they're doing.

10. _____ I hate to say it, but if a woman stays with the man who abused her, she basically deserves what she gets.

11. _____ Domestic violence rarely happens in my neighborhood

12. _____ Women who flirt are asking for it.

13. _____ Women can avoid physical abuse if they give in occasionally.

14. _____ Many women have an unconscious wish to be dominated by their partners.

15. _____ Domestic violence results from a momentary loss of temper.

16. _____ I don't have much sympathy for a battered woman who keeps going back to the abuser.

17. _____ Women instigate most family violence.

18.   _____ If a woman goes back to the abuser, how much is that due to something in her character?

Each of the statements below has to do with how comfortable you feel providing services to individuals and families experiencing domestic violence. Please rate your agreement with each statement on a scale from one to five, with one being strongly agree and five being strongly disagree.

1 Strongly Agree	2	3	4	5 Strongly Disagree

19.   _____I feel comfortable in discussing domestic violence.

20.   _____I feel capable to identify domestic violence victims.

21.   _____I feel able to identify domestic violence as an underlying cause of client problems.

22.   _____I feel that I have the necessary skills to discuss domestic violence with clients.

23.   _____I feel able to work with clients who are survivors of past domestic violence.

24.   _____I feel capable of helping battered women develop safety plans.

25.   _____I feel able to work with clients who are currently being abused.

26.   _____I feel capable of assessing the level of danger that a battered women is currently facing.

27.   _____I feel capable of assisting clients in same sex relationships who are experiencing domestic violence

28.   _____I feel capable of conducting culturally sensitive assessments of battered women.

29.   _____I feel capable of discussing legal options available to battered women.

30.   Please explain briefly your experience with domestic violence

31.   Please list the last four digits of your student ID number

       _____

32. What is your age (in years)?

       _____

33. What is your gender?
   ☐   Male
   ☐   Female
   ☐   Prefer not to answer

34. What year of your MSW are you currently in?
- ☐ Foundational year
- ☐ Advanced year
- ☐ Advanced Standing

35. What is your attendance status?
- ☐ Full time
- ☐ Part time
- ☐ Other

Domestic Violence Attitudes

The questions below ask about common attitudes toward domestic violence. While we all know the politically or socially correct answer, please answer how you truly think and feel. To answer, put a number on the line before each question indicating how strongly you agree or disagree with each statement

1	2	3	4	5	6	7
Strongly Agree						**Strongly Disagree**

1. _____ Domestic violence does not affect many people

2. _____ When a man is violent it is because he lost control of his temper.

3. _____ If a woman continues living with a man who beat her, then its her own fault if she is beaten again

4. _____ Making a man jealous is asking for it.

5. _____ Some women unconsciously want their partners to control them.

6. _____ A lot of domestic violence occurs because women keep on arguing about things with their partners.

7. _____ If a woman doesn't like it, she can leave.

8. _____ Most domestic violence involves mutual violence between the partners.

9. _____ Abusive men lose control so much that they don't know what they're doing.

10. _____ I hate to say it, but if a woman stays with the man who abused her, she basically deserves what she gets.

11. _____ Domestic violence rarely happens in my neighborhood

12. _____ Women who flirt are asking for it.

13. _____ Women can avoid physical abuse if they give in occasionally.

14. _____ Many women have an unconscious wish to be dominated by their partners.

15. _____ Domestic violence results from a momentary loss of temper.

16. _____ I don't have much sympathy for a battered woman who keeps going back to the abuser.

17. _____ Women instigate most family violence.

18. _____ If a woman goes back to the abuser, how much is that due to something in her character?

Each of the statements below has to do with how comfortable you feel providing services to individuals and families experiencing domestic violence. Please rate your agreement with each statement on a scale from one to five, with one being strongly agree and five being strongly disagree.
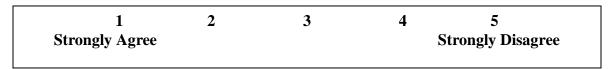
1	**2**	**3**	**4**	**5**
Strongly Agree				**Strongly Disagree**

19. _____I feel comfortable in discussing domestic violence.

20. _____I feel capable to identify domestic violence victims.

21. _____I feel able to identify domestic violence as an underlying cause of client problems.

22. _____I feel that I have the necessary skills to discuss domestic violence with clients.

23. _____I feel able to work with clients who are survivors of past domestic violence.

24. _____I feel capable of helping battered women develop safety plans.

25. _____I feel able to work with clients who are currently being abused.

26. _____I feel capable of assessing the level of danger that a battered women is currently facing.

27. _____I feel capable of assisting clients in same sex relationships who are experiencing domestic violence

28. _____I feel capable of conducting culturally sensitive assessments of battered women.

29. _____I feel capable of discussing legal options available to battered women.

30. Please explain briefly your thoughts about the learning experience on domestic violence today

31. Please list the last four digits of your student ID number

_____

Appendix 3: Letter of Cooperation Fran Danis (email)

Jun 7

To: Ariel Wootan Merkling

Thanks for your kind words. Nice to know this topic is still of interest to social work students. Yes, you may use the scale. I have an article in Affilia as well on this topic.
Fran

Fran S. Danis, PhD, ACSW
Associate Professor
School of Social Work
The University of Texas at Arlington

On Jun 6, 2014, at 5:21 PM, "Ariel Wootan Merkling" <a.wootanmerkling@yahoo.com> wrote:

Dear Dr. Danis,

I am a MSW student who is writing a thesis on the topic of domestic violence educational content in MSW programs. I have really appreciated all your work and research on this topic. It has been inspirational to learn from your research and articles. My thesis is going to examine two educational interventions and see if and how they affect acceptance of domestic violence myths and professional efficacy. I really appreciated your article "Factors That Influence Domestic Violence Practice Self-Efficacy:Implications for Social Work" from 2004 and was wondering if I could get your permission to reuse your self-efficacy scale for my research.

Thank you for your time and for all your work on this subject!
Ariel Wootan Merkling

Appendix 4: Letter of Cooperation Jay Peters (email)

Feb 4

To: Ariel Wootan Merkling

Dear Ariel,

Thank you for contacting me regarding your proposed Thesis. I will be most interested to hear of your results and hereby give permission for you to use the DVMAS. I assume from your thesis proposal that you will be doing a pre- post- testing of the MSW students. I did a similar (unpublished) study many years ago when the University required every employee to go through a 3 hours DV training. My post- measures were administered rather later than I had planned (up to 6 months) and still a significant and frankly quite large main effect for training was found. I was quite surprised. I was also delighted that the scale was sensitive enough to detect the differences pre- and post-

My only concern with your study is that social work students are SO politically correct that I fear they will universally endorse the politically correct choice and that you will therefore have little variation from pre- to post -- they will all be zeros!! I know of no way around this aside from the rather cumbersome additional administration of a social desirability scale and then some fancy stats to control for people's tendency to respond in socially desirable ways.... which I think are going to be universal among your study population. As I said, not an easy problem to overcome with MSW students!

Good luck with your research and please keep me posted regarding your results.

Jay

PS. I am retired on my boat and therefore getting internet only through my iPad. When I go someplace with WiFi (a week or two) I will send you a copy of the scale and a brief page with (sadly outdated) psychometric properties for the scale. Till then, scoring is just the mean of all the items, no reverse scoring needed. JP

===========

On Tuesday, February 4, 2014, Ariel Wootan merkling <a.wootanmerkling@yahoo.com> wrote:

Dear Dr. Peters,
I am a graduate student looking to write my thesis on domestic violence myth acceptance among graduate social work students. In my research I came across the Domestic Violence Myth Acceptance Scale. I was wondering if I could request your permission to use this scale in my research and if you have information about administering and scoring the scale.

Appendix 5: Informed Consent

Dear Participant,

My name is Ariel Wootan Merkling and I am a researcher from Colorado State University in the Social Work department. We are conducting a research study on ways to better prepare social work students to work with individuals and families experiencing domestic violence. The title of our project is Dispelling Domestic Violence Myths Among Graduate Social Work Students.

The Principal Investigator is Louise Quijano, PhD, LCSW from the Social Work department and I am the Co-Principal Investigator.

We would like you to take two online surveys, one prior to our activity in class and one afterward. Participation will take approximately 20-30 minutes. Your participation in this research is voluntary. If you decide to participate in the study, you may withdraw your consent and stop participation at any time without penalty. There will be no impact on your course grade or standing for declining to participate or withdrawing from the study.

We will be collecting the last four numbers of your student ID. This information will only be used to connect your answers before and after the educational activity. No other identifying information will be collected. When we report and share the data to others, we will combine the data from all participants. We will keep your data confidential; your name will not be collected, and the last four numbers of your student ID will only be accessible to the research team.   While there are no direct benefits to you, we hope to gain more knowledge on how to best prepare students to work with individuals and families experiencing domestic violence.

Individuals who have experienced domestic violence in their personal lives may experience some distress during the educational activity or during the survey. For this reason, individuals are given the option to stop participation at any time during the study. Resources are also included at the end of this email for additional support. It is not possible to identify all potential risks in research procedures, but the researchers have taken reasonable safeguards to minimize any known and potential (but unknown) risks.

To indicate your willingness to participate in this research and to continue on to the first survey, click here: http://colostate.az1.qualtrics.com/SE/?SID=SV_4VgHq7pekRAkjZP.

If you have any questions about the research, please contact Ariel Wootan Merkling at a.wootanmerkling@yahoo.com or 720-357-9911 or Louise Quijano at Louise.Quijano@ColoState.edu or (970) 491-7448. If you have any questions about your rights as a volunteer in this research, contact the CSU IRB at: RICRO_IRB@mail.colostate.edu; 970-491-1553.

Louise Quijano	Ariel Wootan Merkling
PhD., LCSW	Student researcher

Resources for those who have experienced domestic violence:
CSU Health Network Counseling Services
123 Aylesworth Hall NW
(970) 491-6053

National Domestic Violence Hotline

1-800-799-7233/1-800-787-3224 (TTY) or chat at www.thehotline.org

Local Resources:

Colorado Springs: TESSA Domestic Violence hotline 719-633-3819

Denver: Safe House Domestic Violence hotline 303-318-9989

Fort Collins: Crossroads Safe House Domestic Violence hotline 970-482-3502

Appendix 6: Letter of Consent (Nancy Banman)

Colorado State University
School of Social Work
Fort Collins, CO 80523-1586
(970)491-6612
FAX: (970)491-7280

August 15, 2014

Colorado State University
Institutional Review Board
321 General Services Building
Campus Delivery 2011
Fort Collins, CO 80523-2011
Attention: Janell Barker, Senior IRB Coordinator

Dear Ms. Barker;

I am aware that Ariel Wootan Merkling, a graduate student in the School of Education at Colorado State University under the supervision of Louise Quijano, PhD, is conducting a research study entitled: "Dispelling Domestic Violence Myths Among Graduate Social Work Students," and she has shared with me the details of the study. I feel comfortable that the participants in this study will be adequately protected, and I give Ariel Wootan Merkling permission to conduct this study with my class at Colorado State University. I agree to participate in either the intervention (receiving the "In Her Shoes" curriculum) or control group (watching a DVD lecture about domestic violence) depending on how my class is randomized.

I have agreed to allow Ariel time in both sections of my Fall 2014 class, SOWK 631, to provide the intervention. I have also agreed to forward two emails to students enrolled in my class, one prior to the intervention and one after the intervention.

Colorado State University requests that the school name and identifiers of its employees be kept confidential in the research results. Ariel has agreed to provide my office a copy of the CSU IRB approval document before beginning recruitment.

If there are any questions, please contact my office.

Sincerely,

Nancy A. Banman, PhD
Assistant Professor

Appendix 7: Letter of Consent (Jonathan Singer)

Colorado State University

College of Health and Human Sciences
School of Social Work
127 Education • 1586 Campus Delivery • Fort Collins, Colorado 80523-1586
Phone: (970) 491-6612 • Fax: (970) 491-7280 • www.ssw.chhs.colostate.edu

Colorado State University
Institutional Review Board
321 General Services Building
Campus Delivery 2011
Fort Collins, CO 80523-2011
Attention: Janell Barker, Senior IRB Coordinator

Dear Ms. Barker;

I am aware that Ariel Wootan Merkling, a graduate student in the School of Education at Colorado State University under the supervision of Louise Quijano, PhD, is conducting a research study entitled: "Dispelling Domestic Violence Myths Among Graduate Social Work Students," and she has shared with me the details of the study. I feel comfortable that the participants in this study will be adequately protected, and I give Ariel Wootan Merkling permission to conduct this study with my class at Colorado State University. I agree to participate in either the intervention (receiving the "In Her Shoes" curriculum) or control group (watching a DVD lecture about domestic violence) depending on how my class is randomized.

I have agreed to allow Ariel time in class to provide the intervention. I have also agreed to forward two emails to students enrolled in my class, one prior to the intervention and one after the intervention.

Colorado State University requests that the school name and identifiers of its employees be kept confidential in the research results. Ariel has agreed to provide my office a copy of the CSU IRB approval document before beginning recruitment.

If there are any questions, please contact my office.

Sincerely,

Jonathan Singer, MSW
Colorado State House Representative
House District 1

Appendix 7: Letter of Cooperation Ilene Stohl (email)

From: Ilene Stohl <ilene@wscadv.org>
Sent: Tuesday, October 24, 2014
To: Ilene Stohl
Subject: RE: In Her Shoes

Yes, you can absolutely use the activity – we do not license individuals to use our training kits – once you have them, you are free to use them.

Thanks so much for checking in!

Best,

Ilene

Ilene Stohl

Program Coordinator
Prevention
Washington State Coalition Against Domestic Violence
711 S. Capitol Way, Suite 702, Olympia, WA 98501
Phone: 360.586.1022 ext. 302 | Fax: 360.586.1024 |TTY: 360.586.1029

www.wscadv.org |www.getmoneygetsafe.org | www.canyourelate.org

From: Ariel Wootan merkling [mailto:a.wootanmerkling@yahoo.com]
Sent: Tuesday, October 21, 2014 3:34 PM
To: Ilene Stohl
Subject: In Her Shoes

Hi Ilene!

My name is Ariel Merkling and I believe we spoke on the phone earlier this year about using the In Her Shoes activity as part of the research for my Master's Thesis. I was wondering if you could send me a brief email stating that I have consent from your agency to use the activity so I can include it in with my research. Once completed, I would love to provide you with the results, which I am very excited about.

 Please feel free to email me with any questions or concerns.

 Thanks so much!

Ariel Wootan Merkling