How Do We Attend to Safety, Confidentiality and Diversity?

Before even beginning any evaluation efforts, all programs should consider three important issues: (1) how you will protect the confidentiality and safety of the survivors providing you information, (2) how to be respectful when gathering and using information, and (3) how you will address issues of diversity in your evaluation plan.

Confidentiality and Safety of Survivors
The safety of the survivors with whom we work must always be our top priority. The need to collect information to help us evaluate our programs must always be considered in conjunction with the confidentiality and safety of the adults and children receiving our services. It is not ethical to gather information just for the sake of gathering information; if we are going to ask someone very personal questions about their lives, there should always be an important reason to do so, and their safety should not be compromised by their participation in our evaluation. The safety and confidentiality of survivors must be kept in mind when: (1) deciding what questions to ask, (2) collecting the information, (3) storing the data, and (4) presenting the information to others.

Respecting Survivors Throughout the Process
When creating or choosing questions to ask those who use our services, we must always ask ourselves whether we really need the information, how we will use it, whether it is respectful or disrespectful to ask, and who else might be interested in the answers. As an example, let's assume we are considering asking survivors a series of questions about their use of alcohol or drugs. The first question to ask ourselves is: How will this information be used? – To ensure that they are receiving adequate services? To prevent them from receiving services? Both? If this information is not directly relevant to our outcome evaluation efforts, do we really need to ask?

Second, how should we ask these questions in a respectful way? First and foremost, survivors should always be told why we are asking the questions we're asking. And whenever possible, an advisory group of survivors who have used our services should assist in supervising the development of evaluation questions. Next, consider who else might be interested in obtaining this information. Defense attorneys representing those charged with abuse? Child Protective Services? Survivors should always know what might happen to the information they provide. If you have procedures to protect this information from others, they should know that. If you might share this information with others, survivors need to know that as well. Respect and honesty are key.
The words **anonymous** and **confidential** have different meanings. Although many people incorrectly use them interchangeably, the distinction between these two words is important.

**Anonymous** - you do not know who the responses came from. For example, questionnaires without names or other traceable identifiers left in locked boxes are anonymous.

**Confidential** - you do know (or can find out) who the responses came from, but you are committed to keeping this information to yourself. A woman who participates in a focus group is not anonymous, but she expects her responses to be kept confidential.

**Attending to Issues of Diversity**

Most domestic violence service delivery programs are aware that they must meet the needs of a diverse population of women, children, and men. This requires taking steps to ensure our programs are **culturally competent**, as well as flexible enough to meet the needs of a diverse clientele.

*Cultural competence is more than just "expressing sensitivity or concern" for individuals from all cultures (cultural sensitivity). A culturally competent program is one that is designed to effectively meet the needs of individuals from diverse cultural backgrounds and experiences.* It involves understanding not only the societal oppressions faced by various groups of people, but also respecting the strengths and assets inherent in different communities. This understanding must then be reflected in program services, staffing, and philosophies.

In addition to diversity in culture, there is a great deal of other variability among the individuals needing domestic violence service delivery programs, including diversity across:

- Age
- Citizenship status
- Gender identity
- Health (physical, emotional, and mental)
- Language(s) spoken
- Literacy
- Physical ability and disability
- Race and ethnicity
- Religious and spiritual beliefs
- Sexual orientation
- Socioeconomic status

Although process evaluation is commonly thought of as the best way to understand the degree to which our programs meet the needs of survivors from diverse experiences and cultures, outcome evaluation should also attend to issues of diversity.
The NRCDV and many of our colleagues take the position that outcome evaluation must be designed to answer the question of whether or not survivors attained outcomes they identified as important to them. So for example, before asking survivors if they obtained a protective order, you must first ask if they wanted a protective order. Before asking if your support group decreased a survivor’s isolation, you would want to know if she/he felt isolated before attending your group. Not all survivors seek our services for the same reasons, and our services must be flexible to meet those diverse needs. Outcome evaluation can inform you about the different needs and experiences of survivors and their children, and this information can be used to inform your program as well as community efforts.

Attending to issues of diversity in your outcome evaluation strategies involves: (1) including the views and opinions of adults and children from diverse backgrounds and experiences in all phases of your evaluation; (2) including "demographic" questions in your measures (e.g., ethnicity, age, primary language, number of children, sexual orientation) that will give you important information about respondents' background and situations; and (3) pilot testing your outcome measures with individuals from diverse cultures, backgrounds, and experiences.

Knowledge is power. The more service providers and advocates know about designing and conducting evaluation efforts the better those efforts will be. Evaluating our work can provide us with valuable information we need to continually improve our programs.

The other Evaluation Briefs in this series address why domestic violence programs should want to evaluate our work (#1), review the distinctions between research and evaluation and between process and outcome evaluation (#2), further define outcome evaluation (#4), provide practical guidance on gathering, maintaining and analyzing data (#5), and recommend how we can make evaluation work for us (#6).

The content of this series of Outcome Evaluation Issues Briefs is drawn from a 2007 NRCDV publication entitled “Outcome Evaluation Strategies for Domestic Violence Services Programs Receiving FVPSA Funding: A Practical Guide”, authored by Eleanor Lyon, PhD and Cris Sullivan, PhD.

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