MEETING the NEEDS
of AFRICAN AMERICAN SURVIVORS within
BATTERED WOMEN’S PROGRAMS

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and
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EXECUTIVE SUMMARY

In the forty years since domestic violence became a national issue, enormous progress has occurred. Every state has programs for battered women and domestic violence is recognized as a pandemic social issue. The purpose of this study is to document how battered women’s programs inform and help develop programs for African American survivors. In this project, researchers examine how the multiple needs of African American victims and survivors are met in battered women’s programs across the country.

We chose five programs that serve diverse populations. The five programs are: A Safe Place, Oakland, California; Our House; Greenville, Mississippi; Interval House, Long Beach, California; New Orleans Family Justice Center, New Orleans, Louisiana; and Asha Family Services, Milwaukee, Wisconsin.

FAMILY JUSTICE CENTER

NEW ORLEANS, LOUISIANA

New Orleans Family Justice Center opened its doors August 28, 2007, nearly two years to the day of the most damaging disaster in American history, Hurricane Katrina. Presently, the main program is located at the downtown federal building on Loyola Avenue next to the main post office. In this project, we interviewed the Director on five separate occasions, and conducted two focus groups with staff (8 people in total) and two interviews with board members. We also facilitated a conversation with ten survivors.

Members and supporters of the Family Justice Center pose for photographers
OUR HOUSE

GREENVILLE, MISSISSIPPI
Our House opened its program in 1995 with funding from the Presbyterian Women, Presbyterian Church. Our House has a direct link to the New Life Church; Bishop Roderick Mitchell is one of the founders of the program and they collaborate on many issues. Our House has a multipurpose facility that houses its administrative offices. The facility is spacious and is used for assessment, training, programs, counseling and other related activities. At this site, we interviewed the director four times, conducted a focus group (7), met with the leadership team (5), and facilitated a conversation with two members of the board of directors and three members of the community who have been or who are currently receiving services through Our House.
ASHA FAMILY SERVICES

MILWAUKEE, WISCONSIN

Asha Family Services began its program in 1989. We regret to report at this writing that Asha closed its doors in September of this year. It remained the only program in Wisconsin providing services centered on the needs of African-American victims and survivors of domestic violence. Asha Family Services had its headquarters in a converted store front in an inner city community in Milwaukee. Services were provided in multiple locations including re-entry programs for incarcerated men and women and their partners. There were three interviews with the director, one focus group with a variety of staff and board members (7), conversations with staff, board members and survivors. (7).

From Left to Right: Debra Mejchar (white sistah), Cheryl Coleman (back row), Betty Brown (standing in front of cheryl and next to Debra. U.S Congresswoman Gwen Moore, Antonia Drew Vann, and Vicki Harrison (Native sistah) far Right next to Antonia.
A SAFE PLACE

OAKLAND, CALIFORNIA

A Safe Place opened its doors in 1976. The main office is in an accessible location in downtown Oakland. Other programs locations, especially the shelter site, are at confidential locations. In this process, the director was interviewed twice and four members of the leadership team and the Chair of the Board were also inter-viewed.

INTERVAL HOUSE

LONG BEACH, CALIFORNIA
Interval House serves Los Angeles County and Orange County, California. Interval House began its programming in 1979. One of the two main community service centers for this program is located in Long Beach, and there are six emergency shelter and transitional housing sites and 12 community service and satellite centers throughout the two counties. At this site, we interviewed the director three times, conducted two staff and survivor focus groups (45 in one group, 10 in the other) and facilitated conversations with numerous staff and survivors.

Since 1979, Interval House has created an environment of diversity, inclusion, empowerment and “training from within” that has inspired award-winning leadership and a historic longevity among staff. Today, Interval House’s staff is unique in the nation: over 98 percent of staff and advocates are culturally and ethnically diverse, speaking over 70 languages, and have been personally affected by domestic violence.

Two Interval House pioneers, Executive Director Carol Williams (right) and Rev. Dr. Mary Walton pose with Governor George Deukmejian in 1983 accepting the first of four California Governor’s Awards bestowed to Interval House over the years for its cutting edge work on behalf of the nation’s culturally diverse communities.
GUIDING ASSUMPTIONS THAT FOCUS ON AFRICAN-AMERICAN PROGRAMMING

In addition to the formal mission statements, each of the directors and staff made specific reference to how they understood their role in programming for African American survivors.

- Asha Family Services’ Executive Director Antonia Vann stresses that for success, African American survivors need access to culturally specific programs that operate in the context of the African American community. This involves giving consideration to historical trauma and a daily life of victimization.

- The New Orleans Family Justice Center views programming as a holistic initiative, including issues of poverty, violence and trauma.

- Our House refers to its context as a rural, southern community, predominantly African American, facing the same issues present in urban areas.

- Interval House has found that immigrants and individuals from different cultural backgrounds often face many additional barriers and challenges in addition to domestic violence.

- A Safe Place stresses the need to understand the history and collective trauma that often accompanies a sense of hopelessness, which differentiates African American survivors from others.

These similar assumptions reflect the understanding that for African American survivors, domestic violence is compounded by deep, complex issues of survival and resilience.
PROGRAM DESCRIPTION

These five programs have several factors in common. Each has received local, state and national awards. Each program, on its own, provides leadership to the broader community on issues concerning domestic violence and, in some programs, sexual assault. Part of this influence is reflected in leadership – all the programs have directors and dedicated staffs that have been able to sustain and innovate their programs over time. Most of the programs have been in existence for more than twenty years, with the exception of the New Orleans Family Justice Center. However, much of the Family Justice Center’s staff, including the Director, came from a longstanding local shelter, Crescent House.

All of these programs serve diverse populations. Four of the programs report that their survivors are predominantly African American. When asked about their programs’ focus, they stated that they developed and altered programs to reflect their African-American populations. In addition, most of the programs have created new programs that are linked to the African-American communities they serve, such as links to faith-based communities, programs for incarcerated survivors and several programs for men.

All of these programs have combined the need for general services for battered women, while at the same time, creating specific programs for particular racial and ethnic groups, especially the African-American community. Most of the programs provide customized services for diverse communities, as well as more traditional services for survivors of domestic violence (Tables 2 and 3).

EVIDENCE BASED PRACTICE IN THE CONTEXT OF DIVERSITY

Although it would be misleading to describe our entire sample of programs as data driven, each program to some extent is data informed. The use of an evidence based approach can range from the use of trauma informed resources to documenting the resources available and used by clients. One item that was frequently mentioned during our visits was related to the concept of trauma informed. Both providers and survivors frequently made reference to how their traumatic experiences could be used to understand their current status and the path they must take to obtain their desired goals. To some extent, the work on intimate partner violence within our sample is changing because of a greater emphasis on evidence based practices. Some of the providers suggested that these practices are correlated with better case management and have an impact on program effectiveness.
e asked directors to think about what they would recommend specifically for African American survivors.

1. All programs recognized a need for more programming specific to African American survivors.

2. From all the programs, there is a call to work to change the lived conditions of African American survivors. This includes working with new partners on issues such as poverty and mass incarceration.

3. All directors mentioned the challenge of sustained funding for their programs. All said there was need to diversify from the federal funding into other areas, especially for programs that are not traditional domestic violence services.

4. Four directors emphasized the need for trauma services. This need grows out of the effects of domestic violence and of all the conditions that oppress these survivors.

5. Three directors mentioned the continuing silence in the African American community about domestic violence and the need for the broader African American community to recognize the issue.

6. Every director mentioned the necessity of integrating survivors into their program in meaningful ways.

7. Reflecting a concern about the over-criminalization in African American communities, several directors emphasized the importance of working with law enforcement to help dismantle the pipeline to prison so prevalent in many Black communities across America.

8. All directors want to increase their cultural and artistic programming.
OVERALL RECOMMENDATIONS

From the research, we began to document how programs view their own work now and in the future. These recommendations reflect how the programs in this study created diverse programs that serve African-American survivors.

Recommendation 1. For a program to be diverse, there needs to be sense of intentionality about diversity in the program with the staff, board, volunteers and board members. From our research, programs that spent time and effort discussing diversity developed broader programs.

Recommendation 2. Domestic violence and sexual assault programs need to create a climate where diversity issues can be discussed in a reflective manner. Without exception, participants stated that in the process of answering our questions, they learned from each other and gained new insight.

Recommendation 3. Programs should collaborate with community agencies that can extend their understanding and programming about race, ethnicity and diversity. Programs that intentionally work with diverse community groups expanded their understanding of different cultures.

Recommendation 4. Agencies should assure that their own programs understand the context of their communities. Agencies should review their partnerships to determine how these partnerships reflect the communities they serve.

Recommendation 5. While external evidence based practices and evaluation continue to be important, programs may evolve other qualitative and quantitative measures that can reflect their successes and challenges.
BACKGROUND

In the forty years since domestic violence became a national issue, enormous progress has occurred. Every state has programs for battered women, and domestic violence is recognized as a pandemic social issue. The purpose of this study is to document how battered women’s programs inform and help develop programming for African American survivors. In this project, the researchers examine how the multiple needs of African American victims and survivors are met in battered women’s programs across the country.

It is from this perspective that we began this project, understanding that the dynamics of domestic violence may form similar patterns, but that the context of race, ethnicity and class will create unique contexts. This study examines how five battered women’s programs meet the needs of African-American battered women. As we traveled from site to site, we heard remarkable and inspiring narratives of staff, survivors and board members. With all programs that serve African American survivors, there is need to describe and replicate the wisdom of these programs. We understand that domestic violence is not the only problem facing women who seek services. In this project, we wanted to understand how the multiple needs of African-American victims and survivors are met in battered women’s programs across the country.

We are aware, as well, that we are writing in a time of a great struggle for social justice. The mass incarceration of men of color and the escalation of police violence toward African Americans are part of daily life for some communities. Whether the unrest is in Milwaukee, Oakland or any of the other communities in our sample, these forces can exacerbate how individuals respond to domestic violence. When a community is on edge because of racial tensions, there could be longer term impacts for survivors and their families.
Meeting the needs of African American survivors within Battered Women’s Programs

These five programs serve diverse populations. They are: A Safe Place, Oakland California; Our House, Greenville, Mississippi; Interval House, Long Beach, California; New Orleans Family Justice Center, New Orleans, Louisiana; and Asha Family Services, Milwaukee Wisconsin. The map below illustrates the geographic diversity.
THE STUDY

The research design of this project is qualitative, using observations, interviews and focus groups. Dr. Oliver J. Williams, Professor of the School of Social Work at the University of Minnesota, served as project manager. Dr. Robert Hampton, Professor of Sociology at Tennessee State University, and Dr. Pamela Jenkins, Research Professor of Sociology at the University of New Orleans (Emerita) worked on the project and serve as authors of the report. To begin, Dr. Williams and Dr. Hampton had numerous discussions about the scope of the project. Dr. Williams provided a preliminary list of potential programs to be included in our sample and, over time, the five sites were selected. Each site was contacted several times before our visits. In each site, there was a set of interviews and multiple conversations. Before and after the visit, documents were reviewed and after the visit, there were several follow-up conversations. Throughout the project, the authors continued to collaborate with Dr. Williams and with directors at each of the five sites while reviewing data, building codes and themes. Throughout our work, we were mindful of the community context within each program. Listed below is a brief description of each.

NEW ORLEANS FAMILY JUSTICE CENTER

New Orleans Family Justice Center in New Orleans, Louisiana opened its doors August 28, 2007, nearly two years to the day of the most damaging disaster in American history: Hurricane Katrina. The main program is located at the downtown federal building on Loyola Avenue next to the main post office. In this project, we interviewed the Director on five separate occasions, held two focus groups with staff (8 people in total), conducted two interviews with board members and facilitated a conversation with ten survivors.

The New Orleans Family Justice Center is located in a city still in recovery from Hurricane Katrina. Since Hurricane Katrina, the African American population is lower than in 2000, when it represented 66.7 percent of the city’s population. (African-Americans are still the majority in the city at 58.5 percent). The rate of poverty remains persistent. 2014 median household incomes of $35,504 in the city are significantly lower than the U.S. median of $53,657. The poverty rate in New Orleans declined from 28 percent in 1999 to 21 percent in 2007, but then rose to 28 percent in 2014 (Pyler and Ortiz, 2012). The median income for white families is $60,553; that’s $35,451 more than the median income for black families, which is $25,102 (Quigley,2015). These statistics reflect the population that the New Orleans Family Justice Center serves. Eighty percent of the survivors have an income of less than $20,000 a year. Seventy-four percent of the survivors served were African-Americans.
OUR HOUSE

Our House has a direct link to the New Life Church; Bishop Roderick Mitchell is one of the founders of the program and they collaborate on many issues. Our House has a multipurpose facility that houses its administrative offices. The facility is spacious and is used for assessment, training, programs, counseling and other related activities. At this site, we interviewed the director five times, conducted a focus group (7) and met with the leadership team (5), two members of the Board of directors and three members of the community who have been or who are currently receiving services through Our House.

Greenville is a city in Washington County, Mississippi. Most of the population in the city and county are African American. Greenville is located in an area known for its “persistent poverty.” For the county, more than 26% of the population is classified as being in poverty and the median household income is $28,936 (The Declaration Initiative, 2012). The poverty is mostly found in the African American community where the average income is $22,939. In addition to Greenville and Washington County, Our House provides services to families and individuals in the seven adjacent counties in Mississippi and Arkansas. Our House serves mostly African-American (95%) and low income (64%).

ASHA FAMILY SERVICES

Asha Family Services, which began its programming in 1989, was forced to close its doors in September of this year. Undeterred, Asha will continue to provide culturally specific Sister Circle support groups for African American survivors and provide jobs, job training and business development at Sistah's Cafe & Deli and Sistahs’ Nail & Hair Shop. These micro-enterprises will train survivors, including those transitioning from prison and those who were trafficked in food and/or cosmetology fields.

We will also provide survivor groups in women’s prisons and work with trafficking victims on a case by case basis, referring them to long-term substance abuse treatment and mental health services, and to trauma-informed care professionals.

We will also make referrals to The Milwaukee Women’s Center and to Sojourner Family Peace Center for survivors who will access services outside the Black community. The lack of culturally specific African American services in the community is problematic for many survivors who are distrustful of programs that appear to be a part of historically injurious systems to the African American community.

For this report, there were three interviews with the director, one focus group with a variety of staff and board members (7) and several conversations with staff, board members and ex-offenders and survivors (7).
Milwaukee, in many ways, is another urban center racked by economic crisis. Poverty held a persistent grip on Milwaukee; in 2014 the city’s poverty rate of 29% was nearly double the national rate of 14.8%, leaving Milwaukee as the nation’s fifth most impoverished big city (U.S. Census Bureau, 2015). Milwaukee’s younger population is largely minority and its older population is largely White and census tract maps show that racial and ethnic groups are heavily clustered in certain areas of the city. A recent study found that the gap between the richest and poorest American communities widening, and ranked Milwaukee the seventh most distressed city in America, with 52% of the population considered economically distressed (Russell, 2016). The Asha Center reflects this racial and ethnic dynamic: 60 percent are African American; 27 percent are white, 10 percent are Native and 3 percent are Latin.
INTERVAL HOUSE

Interval House serves Los Angeles County and Orange County, California. Interval House began its programming in 1979. One of the two main community service centers for this program is located in Long Beach, and there are six emergency shelter and transitional housing sites and 12 community service and satellite centers throughout the two counties. At this site, we interviewed the director three times, conducted two staff and survivor focus groups (45 in one group, 10 in the other) and facilitated conversations with other staff and survivors.

Long Beach has an estimated population of 474,140 and has grown 2.6% since the 2010 Census. It is widely considered among the most ethnically diverse communities in the United States. The population is 40 percent Hispanic or Latino, 12 percent Asian and 13 percent African American. More than one in four full-time workers in Long Beach lives below twice the federal poverty level (U.S. Census Bureau, 2015). As in other cities, poverty is concentrated within minority populations. The program also serves Orange County, where one in three of its 3 million residents is foreign-born. Interval House serves survivors from all communities in the area, with a specialization in culturally diverse communities.

A SAFE PLACE

A Safe Place in Oakland, California opened its doors in 1976. The main office is in an accessible location in downtown Oakland. In this process, the director was interviewed twice. Four members of the leadership team and the chair of the board also were interviewed.

With a population of 413,775, Oakland is the third largest city in the San Francisco Bay area. Its population is quite diverse: 34.5% White, 28.0% Black, 25.4% Latino, 16.8% Asian. Poverty rates in Oakland are moderately higher than the poverty rate for California (25.5% vs. 22.1%). The poverty rates for Blacks/African Americans is the highest among all racial/ethnic groups and is twice as high as the poverty rate for whites (US Census, 2015). A Safe Place serves mostly African American survivors. During the 2015-16 service year, the demographic distribution within the client population was roughly 46% African American, 34% Hispanic/Latino, 13% White, 4% Asian, 4% Native American and 4% other.
ASSUMPTIONS BEYOND THE MISSION STATEMENTS

All of these programs have mission statements that reflect their understanding of how and why they provide services and programs. Three of the programs specifically mention diversity in their mission statements, but only one of the programs specifically addresses African American communities in its mission statement. (For all mission statements, see the Appendix.)

In addition to the formal mission statements, each of the directors and staff made specific reference to how they understood their role in programming for African American survivors.

• Asha Family Services’ Executive Director Antonia Vann stresses that for success, African American survivors need access to culturally specific programs that operate in the context of the African American community. This involves giving consideration to historical trauma and a daily life of victimization.

• The New Orleans Family Justice Center views programming as a holistic initiative, including issues of poverty, violence and trauma.

• Our House refers to its context as a rural, southern community, predominantly African American, facing the same issues present in urban areas.

• Interval House has found that immigrants and individuals from different cultural backgrounds often face many additional barriers and challenges in addition to domestic violence.

• A Safe Place stresses the need to understand the history and collective trauma that often accompanies a sense of hopelessness, which differentiates African American survivors from others.

These similar assumptions reflect the understanding that for African American survivors, domestic violence is compounded by deep, complex issues of survival and resilience.
These five programs have several factors in common. Each has received local, state and national awards. Each program provides leadership to the broader community about domestic violence and, in some programs, sexual assault. Part of this influence is reflected in leadership: all of the programs have directors and dedicated staffs who have been able to sustain and innovate their programs over time. Most of the programs have been in existence for more than twenty years, with the exception of the New Orleans Family Justice Center. However, much of the Family Justice Center staff, including the Director, came from a long-standing local shelter, Crescent House.

Throughout the interviews, all of these programs discussed their assumptions about developing and working with the African American community. One advocate remarked: “We cannot be a cookie-cutter program. We cannot have a survivor to fit a mold we have.” Interval House also has a philosophy that is survivor centered: “Everyone who comes to Interval House has a chance to grow. From the time women and children walk into our program until the time they leave, they are encouraged and inspired by . . . real life examples of individuals from their own neighborhoods, communities and cultures who have been able to overcome their abuse and blossom into extraordinary models of strength and self-sufficiency.” This illustrates an intentionality for survivors to be part of their program; their staff leaders are primarily “graduates” of Interval House. More than 98 percent of staff and advocates are multilingual, multicultural and ethnically diverse, and have been affected by domestic violence. Throughout the interviews and observations, it became clear that this hiring philosophy integrates the staff with survivors on an ongoing and authentic basis.

These programs over the years evolved both the range of programs offered or their approach to engage communities. Taken together, the programs provide a significant number of services linked to the community they serve. A review of the programming through their websites tells part of the narrative of how race and ethnicity are taken into consideration for services and programming. The directors and staff stated that the programs arose from the needs of the community and not from the availability of grant funding.

Throughout the conversations with the directors, it became clear that programs as shaped by the issues that impact African Americans, especially low and median income families. The issues in these communities include but are not limited to lack of adequate housing, health, job opportunity and education. Beyond these structural issues, three other issues are common in these communities: disparate treatment by law enforcement, higher rates of mass incarceration and exposure to high rates of community violence.
Four of the programs report that their survivors are predominantly African American. For example, the New Orleans Family Justice Program is, according to the director, one of the few family justice programs that predominantly serves African American survivors. The Executive Director, Mary Claire Landry, states that their programming is driven by the needs of the community. Since Hurricane Katrina, the shortage of affordable housing for New Orleans has meant that much of their efforts surround short- and long-term housing for women of color.

At Our House, the focus is almost entirely on the African American survivors. Of the nine counties it serves in Mississippi, 86 percent of the population is African-American. The director states that they have adapted the more traditional battered women programs to their population as they have developed a range of programs focusing on healing from the trauma of violence. Also, their emphasis on youth programs is directly linked to the lived experiences of African-American youths facing a number of challenges. While Interval House serves the most diverse population, its programming for African-American survivors reflects its communities’ needs, such as outreach to faith-based institutions, specialized services, programming for boys and men and specialized advocacy.

**TRADITIONAL SERVICES**

All the programs have a variety of traditional programs for victims and survivors of domestic violence. They range from crisis lines, transitional housing and permanent housing. Yet, even these similar programs vary. For example, Asha Family Services offered Asha Women of Color "Sister Circles." These circles were an opportunity for African-American women to share their stories. While this seems like a particular support group for women of color, there were also more traditional victim and survivor services and case management services offered at this center. Interval House, as well, runs support groups that are specific to a particular group, but also provides services that integrate individuals from different racial and ethnic backgrounds. For example, Interval House has five active cultural domestic violence and support and advocacy programs: Hermanas (Latina women), Asian Women Speak, Salaam (for the Middle Eastern and Muslim communities), Slavic Voices and its wide-ranging African American Network for Violence Free Relationships. These support groups are able to also reach out into the diverse communities to partner with groups that may not usually be involved with domestic violence service provision.

All programs have some type of youth programming, but these programs are each different. Some sites have programs specifically for teenagers, while other programs have more traditional children’s counseling programs. Our House, for example, has a number of programs for youth. YES (youth enrichment services) is a recovery program for youth age 12-18 whose experience with violence has caused trauma in their daily lives. Let’s Talk about It provides group sessions for victims of sexual assault ages 6-17 and support for secondary victims of sexual assault (who may know someone who is a victim). And WAVE (Working Against Violence Everywhere) is a public awareness program for youth ages 13-24. The Wave program won this year’s Mary Byron Project Celebrating Solutions Award. The basis for this program is to let the youth lead and let the adults listen.
The youth design the programs and the adults follow their lead. The director states that all three programs were created to recognize the need for services among the youth of their community who have greater exposure to all types of violence.
SPECIFIC PROGRAMMING

Programming for African-American survivors is most often built into existing programs. Carolyn Russell from A Safe Place states, “We acknowledge that for a variety of historical and contemporary reasons, Black women don’t want to call the police. Because we understand the historical context of our work, we have to develop programs that honor and respect this context. For example, we have developed a program that relies heavily on the arts and dance.” This quote illustrates how programs have adapted their services to meet the needs of African American survivors by adding cultural and artistic programming. Every program has at least one outreach component; others have developed extensive outreach into diverse communities. Interval House has the most extensive of these outreach programs. As noted, each of the racial/ethnic groups in the program has a corresponding support group as well as a specific outreach to its home community.

Outreach also involves another component; three of the programs have specific outreach to men. Some of the programs for men are the more traditional counseling services for batterers, but other services for men are educational and intended for men who are incarcerated. Interviewees from Asha Family Services indicated that it was necessary to provide services for men to strengthen the African American family. They stated that mainstream programs, from their point of view, do not want to include men in programs. One of the pivotal moments for Our House was working with a father whose daughter was a domestic homicide victim. Her death led to his involvement with his community. Part of his lesson to other men is to say, “Before you hit a woman, remember her father loved her first.” As part of their adoption of the Duluth Model for Domestic Violence, Our House added an additional night for men that examined their spiritual lives. Interval House also hosted a conference in 2009 and 2013 called, “Calling All Men: Dialogue to End Violence Against Women,” which was the first gathering of its kind to successfully convene a higher percentage of men than women to participate in a day of dialogue and education.

Another unique aspect of programming involves agency outreach to the faith community. A Safe Place details its work directly with the African American community, especially communicating between black churches and the criminal justice system. While Our House is secular, it has a close connection to New Life Church. And the church’s congregation, as a consequence, has inaugurated plans to educate their members and their larger community about domestic violence. Interval House has also developed long-lasting relationships with African-American congregations through its Creating a Safe Environment program (the first demonstration project in California providing specialized services for the African American and faith communities), Muslim faith-based leaders and other community faith leaders.
Finally, the last specific programming linked to the African American community are those programs that have made efforts to connect with incarcerated individuals, formerly incarcerated individuals and families of incarcerated individuals. A Safe Place provides re-entry services for victims of domestic violence who are soon to be released from incarceration for non-violent offenses. It also provides re-entry services for survivors when their abuser is about to be released from prison. Asha Family Services has a unique program for incarcerated men and women in correctional facilities in Wisconsin. Asha also provides after care for men and women released from prison. These two programs focus on African American communities who are incarcerated at a rate higher than the population as a whole. Both programs also acknowledge the high rates of recidivism in many of these communities, which could place many survivors in harms’ way for an extended period beyond what many would define as normal.

All the programs recognize the communities in which they are located. Especially in African American communities, the connection to faith-based programs, programs for men and programs linked to the issues of mass incarceration are critical to African American survivors.

The tables that follow (2 and 3) show the distribution of the programming in each agency. The information for the tables was derived completely from the websites of the programs.
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Table 3. Specific Programming
The Place of Race and Ethnicity

The programs provided insight into how they understand diversity in general and African-American survivors specifically. The deeper issues surrounding how programs view race and diversity are discussed in this section.

Diversity in Everyday Life

As we stated earlier, the program directors are well aware that in providing services for battered women, there are similar patterns that lead to more general and universal programmatic development. Asha Family Services began specifically as an African American program; yet, the program was clear that it accepted everyone into the program. However, this program states that their services to African American women fill a need that traditional agencies cannot meet. Asha directors stated that, “provision of services by traditional services could not meet the needs of the population they serve: Many survivors avoid going to mainstream programs totally, or discontinue shortly after their initial contacts. Some say that they felt mistreated during the initial intake. Although most did not suggest that they felt that they were victims of racism, some survivors felt that their racial or cultural background made a difference.” Asha staff explained that African-American survivors thought the traditional program employees did not understand or take into consideration their specific cultural contexts.

There is evidence that African Americans struggle more with domestic violence. (Fiminista Jones, 2014). African American couples, because of their ethnic-minority status and the continuing effects of racism, are more likely to experience life events and life condition stressors (La Tailladad, Hampton, Pope and McDowell, 2010), often identified as a risk factor for partner violence. Many African American women think that racism is a bigger problem than sexism. This perspective, reinforced by some African American men, partially explains the underreporting of partner violence (Hampton, Williams and Magarian, 2003). The culture of mistrust has been reinforced by many events, including some that are quite recent. Some survivors are more likely to endure abuse in their relationship than to appeal to agencies and law enforcement for assistance.

All programs identified specific needs for different survivors. Interval House officials stated that inclusion was their guiding principle in programming and service provision; their strength was in how their program modeled how individuals from different groups could live and work together. New Orleans Family Justice Center (NOFJC), as the only justice center in the study, practices inclusion in their partnerships; the center works with a range of different partners in the same space. This proximity is changing how traditional institutions such as police and prosecution view survivors.
Because of Interval House’s cultural diversity, its staff works alongside one another in addressing the needs of diverse communities exposing them to various cultures and traditions and providing them with a unique opportunity to learn about one another in a non-threatening way. For example, due to Interval House’s work within the LGBTQ community, some of its Muslim staff members learned about common prejudices, myths, barriers and challenges impacting LGBTQ victims of domestic violence, making them more comfortable in addressing the culturally specific needs of victims from this community. At first, one Muslim staff member stated that she was uncomfortable; but over time, she learned that LGBTQ victims suffer from the same fears and challenges as others.

Another aspect of the practice of diversity is how each program responds to specific individuals. Interval House, which intentionally creates a climate where differences are appreciated, understands the need to work in specific communities. Our House, although primarily a program that serves African-American survivors, views its program as one where anyone would be welcome to receive services. But programs generally reflect African American survivors – the focus on faith-based programming, the broader view of community and domestic violence, and a focus on the family.

All these programs operate in a context where the issues of race, ethnicity and class emerge. The programs responded in a variety of ways to how they navigate the context of racism and discrimination. Several of the programs referred to the discrimination that African American programs have seen in funding opportunities and actual funding from public and private sources. Several of these program directors, one in particular, thought they were under siege and have frequently been at risk to eliminate or closed programs because of insufficient funding. Three of the programs are situated in very conservative states. Some of that conservatism has resulted in state funding cuts to all the programs, specifically those programs focused more on African American communities. Two program directors mentioned that smaller African American programs are closing or are closed in this atmosphere and they have shut down parts of their programs as the funding has changed.

Another part of race and ethnicity in everyday life is how their survivors are treated by other agencies. Part of the advocacy for each of the programs is helping survivors negotiate discriminatory systems. During one focus group, this struggle became apparent as several counselors talked about how difficult it was for black survivors to find housing where their white clients did not have the same obstacles. The advocates stated that landlords would stereotype their black clients and not consider them for housing. One of the obstacles in this poor community is that the African American survivors did not have the income to qualify for some housing opportunities. Other programs noted how difficult it was to work with those immigrants whose legal status is ambiguous within the increasing hostile climate to immigrants. Another program director/official mentioned how African American women are criminalized through the criminal justice system and child-protective services. In an urban setting, poor black women are likely to experience punitive, life-changing measures, such as being arrested and having their children removed.
Although not a dominant theme, ideas regarding racism and sexism were discussed without any prompting in at least two sessions with individuals who were receiving services from one of the programs. They suggested that this might be a factor influencing their decisions regarding their safety and the safety of their children.

Another aspect of race relations in everyday life is the discussion of how staff and survivors relate to each other based on perceptions of race and ethnicity. During one focus group, African American staff brought up that when a white woman complained about an African-American staff, a white staff person would "act as if they believed the white survivor." At the same program, another focus group participant, a respondent said that she thought sometimes the African American survivor would believe the white staff more than the African American staff. This perception of a power differential from the larger society came into play in the program’s everyday life. At another program, an Asian staff member reported having to move a white survivor to another shelter because of her reaction to an African American child.

EVIDENCE BASED PRACTICE IN THE CONTEXT OF DIVERSITY

The use of evidence based practices has been described by some as similar to a social movement. The conceptual framework for evidence based practice was initially articulated almost two decades ago, and within many fields, practices and disciplines, has become the new gold standard. Simply stated, one definition speaks of the "integration of the best available research with clinical expertise in the context of patient characteristics, culture, and preferences." (American Psychological Association, APA, 2006, p 273).

It is important to acknowledge that the increased emphasis on evidence based practices is having a direct impact on funders. Both private and public organizations are beginning to insist more and more for evidence that support their funding requests. Our sample of programs is not exempt from the degree to which agencies, foundations and a growing number of private donors want to know more about the extent to which a program or practice is having a positive measurable impact or is meeting the outcomes it was designed to achieve. For many, this is translated into a simple question: “Is there evidence that this program or approach has been successful (locally or elsewhere)?”

One program official said the agency’s long-standing practice was to provide counseling for battered women. When they examined the outcomes of this approach, however, they were somewhat dissatisfied. They agreed that counseling for survivors was certainly a service needed by many; but, some suggested that they change from an individual counseling model to a family counseling model (mother and children). Officials reported that when they looked at outcome data several months later, slightly better outcomes were achieved among the clients where family counseling was an option.
A Safe Place developed a highly structured set of expectations for residents in its shelter. One expectation involved assigning each resident a set of responsibilities that would rotate on a weekly basis. Expectations involving “Family Dinner,” probably had less to do with the meal itself and more to do with social bonding, networking and relationship building. Their data suggested that this intervention was among the most important factors associated with more positive outcomes in this 90-day program.

Evidence based practice implies more than simply acquiring or collecting data. In one program initiative, there was a higher than expected attrition rate among African American participants compared to other racial and ethnic groups. An African American service provider suggested that the program was developed for a different audience and that it really needed some revisions to reflect its target audience. This discussion suggested, for example, that a highly successful program in one location with a particular set of demographics may not be as successful in another location with a different racial, ethnic and socio-economic profile.

Although it would be misleading to describe our entire sample of programs as data driven, each program to some extent is data informed. The use of an evidence based approach can range from the use of trauma informed resources to documenting the resources available and used by clients. One item that was frequently mentioned during our visits was related to the concept of trauma informed. Both providers and survivors frequently made reference to how their traumatic experiences could be used to understand their current status and the path they must take to obtain their desired goals. To some extent, the work on intimate partner violence within our sample is changing because of a greater emphasis on evidence based practices. Some of the providers suggested that these practices are correlated with better case management and have an impact on program effectiveness.

Beyond the best practice and evidence based practice discussion, we asked each of the program officers to think about how they measured success. We had the directors think about this dynamically, and consider when they thought they had failed. In each of these conversations, staff seemed to take a collective step back. Asking about failure or challenges is often awkward, but also provides a space for staff and board to think critically about their program. The narratives from this set of questions were about individuals and systems, not formal measurement.

Bishop Roderick Mitchell, co-founder of Our House and other programs through New Life Church and himself a witness and survivor of family violence, is also a strong supporter of evidence based measures. He cautions, however, that measurable success requires a more longitudinal perspective. For many youth-oriented programs, it may take a decade or longer to measure impact on program participants. For most battered women programs, process measures are often the norm – how many women and men came through the program or how many attended support group program. Impact measures, on the other hand, require a commitment by funders and programs to track survivors over decades.
For staff, though, failure was most often about a survivor that somehow could not be saved – either returning to their abuser, disconnecting from the program or in some cases, not surviving at all. For one program, the response of a homicide victim’s family, which subsequently became involved in the program, was framed ultimately as a success. The victim’s father became instrumental in providing community education on domestic violence. The death of the victim allowed the community to coalesce around this critical event. Despite the tragedy, some good came out of it.

Others, especially directors, framed their challenges and successes outside of their own programs. All of the directors discussed limited ability to successfully acquire funding for specific projects and operating expenses. Other staff referred to outside agencies that contribute to what they view as failures such as inadequate housing, lack of economic opportunities or discrimination.

Respondents discussed success through their work – individuals and communities. Agency staff recounted former survivors that have now become staff or board members. For programs that have been here for two decades or more, they spoke of relationships as the most important success. Interval House, for example, recruits from its survivors for staff and board members intentionally. “From day one, we’ve always practiced a model of empowerment that inspires our clients to become part of the solution. Everyone who comes to Interval House has the opportunity to succeed on their own terms and, as they experience their own success, often stay on at Interval House to help others in need. We’re so proud that many of our earliest clients now lead our programs and have blossomed into nationally recognized leaders in the field, and their children have also become the youngest experts in domestic violence prevention.” To a program, the success was framed in relationship to the women they had worked with over the years.
RECOMMENDATIONS FROM DIRECTORS

We asked directors to think about what they would recommend specifically for African American survivors. From a recent study conducted by one of the directors, African American survivors stated that they needed for program directors to understand: “No one cares about us; re-victimized by domestic violence services treatment; subtle and blatant racism; and few black domestic violence service leaders” (Vann, Horton and Horton, 2014, p. 25). The following recommendations from the directors reflect their understanding and, in many ways, their hope for the future:

1. All program directors recognize the need for more programming specific to African American survivors. When these specific programs do not exist, the African American survivor may not use a service or the program may not be able to address their needs. As well, the directors recognize that the needs of African American women are not uniform and must be determined on an individual basis.

2. From all the programs, there is a call for working to change the lived conditions of African American survivors beyond the services of their programs. Every pro-gram official recognized that other issues such as racism, poverty, lack of educational and employment opportunities, community violence and the rates of mass incarceration impacted their survivors and subsequent programming.

3. All directors mentioned the challenge of funding to sustain their programs. All said there was a need to diversify from the federal funding into other areas, especially for programs that are not traditional.

4. Four of the directors emphasized the need for trauma services. This need grows out of the effects of violence and of all the conditions that oppress these survivors. Most of the directors noted the link between history, violence and trauma.
5. Three directors mentioned what they perceived as the continuing silence in the African American community about domestic violence. Also, as part of this, they would like more African American institutions to work with the programs to remove the stigma of domestic violence.

6. Every director mentioned the necessity to integrate survivors into their program in meaningful ways. Several of the programs have made significant strides in including survivors as advocates, administrators and board members.

7. Reflecting a concern about the over-criminalization in African American communities, several directors emphasized the importance of working with law enforcement to help dismantle the pipeline to prison so prevalent in many Black communities across America. This reduction can take many forms including diversion, reducing the rate of dual arrests and wrap-around services for families.

8. All directors spoke of the need for cultural and artistic programming. Andrea Turner, Board Chair of A Safe Place, stated: “People really need more ways to communicate with each other without the use of violence. Although most people would deny that violence is a means of communication, it is. We must enable people to develop more acceptable ways to communicate. Our programs must provide a venue for people to learn to communicate, for example, through the arts and culture (ancestral, contemporary, fine, performing and cross-cultural).”
OVERALL RECOMMENDATIONS

The process of providing programs and services for battered women from diverse backgrounds is a challenge that all programs across the country face. Through the analysis of this data, several recommendations emerged.

**Recommendation 1**
*For a program to be diverse, there needs to be sense of intentionality.* From the research, the degree of intentionality that each program has about issues of diversity can inform how specific programs are developed and sustained. In this recommendation, intentionality translates to all levels of the organization. We recommend that organizations review how diversity is reflected in their agency, from program staff and governing board. For example, the Program Committee of the organization, as part of its annual review, could examine how diversity shows up in the current programs.

**Recommendation 2**
*Programs need to internally create a climate where diversity issues can be discussed in a reflective manner.* Without exception, participants in this project stated that in the process of answering our questions, they learned from each other and gained new insights into their own programming. We recommend that programs take the opportunity to have structured conversations about issues of diversity, both internal and external to the organization. Even in times of high stress, discussing issues as staff, board and survivors will lend new insights and directions for any program.

**Recommendation 3**
*Programs should specifically collaborate with community agencies that could extend their understanding and programming about race, ethnicity and diversity.* Programs that intentionally work with diverse community groups expanded their own understanding of the different cultures. We recommend that programs think beyond the traditional partners of domestic violence programs and extend their partnerships to a variety of non-traditional groups.
**Recommendation 4**

**Agencies should place their own programs in the context of their communities.**

In this research, some programs have developed specific activities around their communities including their connection to faith-based organizations and prison work. Also, we found an increase in youth-based initiatives in every program. We especially noted those agencies that continue to expand programs based on community needs, including economic justice and immigration.

**Recommendation 5**

**While evidence based practices and evaluation continue to be necessary, broader measures of successes and challenges can aid in a program’s future planning.** We cannot begin to relate the levels of commitment and the tremendous stories of success that we heard at each site. While much of current funding requires a more normative system of accountability, we recommend an accountability about diversity. We recommend here that program directors/officials examine their board and staff diversity in light of their survivors’ race and class. Further, we recommend that programs - in their partnerships with outside agencies - take a critical look at the language of their programs and the programming itself.
APPENDIX
MISSION STATEMENTS OF PARTICIPATING ORGANIZATIONS

A Safe Place, Oakland, California
Our mission at A Safe Place is to end domestic violence by providing battered victims and their children with safe shelter and with resources to survive and heal. Our ultimate goal is to break the cycle of violence through outreach and education to at-risk populations and diverse communities.

Interval House, Long Beach, California
The mission of Interval House is to ensure safety for people who are battered, abused or at risk; to create public awareness about the epidemic of violence; and to mobilize the community to prevent violence and end this recurring scourge. Interval House was founded in 1979 as a lifeline to underserved victims in crisis. Today, Interval House has strengthened its mission and purpose by offering specialized programs and services in over 70 different languages for both youth and adult victims.

Asha Family Services, Milwaukee, Wisconsin
We are committed to the provision of a spiritually based, holistic and culturally specific service method designed to end violence, poverty and other social ills impacting poor African American women and children specifically, and all families in general. To adequately address domestic, sexual and dating violence and promote healthy living, we must treat the abuser as well as the abused and build networks to that end.

Our House, Greenville, Mississippi
Tag line: A place of healing, ministry and peace.
Mission Statement: To eliminate domestic violence and sexual violence through intervention, prevention, prosecution, victim protection and sustainable restoration.

New Orleans Family Justice Center, New Orleans, Louisiana
New Orleans Family Justice Center is a partnership of agencies dedicated to ending family violence, child abuse, sexual assault and stalking through prevention and coordinated response. This is accomplished largely by providing comprehensive client-centered, empowerment services in a single location. Its guiding principle includes being culturally competent, which is defined as celebrating and welcoming diversity.
REFERENCES


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Oliver J. Williams, Ph.D., Professor of School of Social Work at the University of Minnesota, in St. Paul. From June 1994 to September 2016 he was the Executive Director of the Institute on Domestic Violence in the African American Community (IDVAAC). He has also served as the Director of the Safe Return Initiative that addresses the issues of prisoner reentry and domestic violence from 2003-2016 and Director of the African American Domestic Peace Project (AADPP), which works with community leaders in 10 U.S. cities to address domestic violence. He has worked in the field of domestic violence for more than thirty-five years. Dr. Williams is a clinical practitioner, working in mental health, family therapy, substance abuse, child welfare, delinquency and sexual assault programs. He has worked in battered women’s shelters, developed curricula for batterers’ intervention programs and facilitated counseling groups in these programs. He has provided training across the United States and abroad on research and service-delivery surrounding partner abuse.

He has been appointed to several national advisory committees and task forces from the Centers for Disease Control, U.S. Department of Justice, Office on Violence Against Women, U.S. Office on Women’s Health and the U.S. Department of Education. He has been a board member of various domestic violence and human service organizations including the National Domestic Violence Hotline (1999-2000) and the National Family Justice Center Alliance Advisory Board, 2006 to 2016. In 2000, he was appointed to the National Advisory Council on Domestic Violence by the U.S. Secretary of Health and Human Services and U.S. Attorney General. In 2010, he hosted a roundtable on youth and violence for the U.S. Attorney General and participated in a roundtable with the U.S. Attorney General on issues related to fatherhood. He also participated in a White House Roundtable on Fatherhood and Domestic Violence. He has conducted training for the U.S. Military Family Advocacy programs in the U.S. and abroad. He has presented to numerous Family Violence, Research and Practice organizations in the U.S., Kenya, Canada, United Kingdom and Germany. In 2015, Dr. Williams was invited to speak at the United Nations about domestic violence among Africans in the United States and in Africa. His research and publications in scholarly journals, books, reports and DVD’s have centered on creating service-delivery strategies to reduce violent behavior and support victims of abuse. He also has consulted with the NFL, MLB and NBA on issues related to domestic violence. Dr. Williams has received many awards, including an award from the American Psychological Association, a International “Telly Award” for his documentary work; the National “Sheila Wellstone Institute Award” related to his national work on Domestic Violence and a Distinguished Alumni Award from the University of Pittsburgh, School of Social Work. Dr. Williams received a bachelor’s degree in social work from Michigan State University; a Masters in Social Work from Western Michigan University; a Masters in Public Health and a PH.D in Social Work from the University of Pittsburgh.
Robert L. Hampton, Ph.D. is a Professor of Sociology at Tennessee State University. A former Vice President for Academic Affairs at American Intercontinental University in Atlanta, he previously served as Provost/Executive Vice President at Tennessee State University and as President and Social Sciences Professor at York College of the City University of New York. Prior to joining York College, he served as Associate Provost for Academic Affairs and Dean for Undergraduate Studies, Professor of Family Studies and Professor of Sociology at the University of Maryland, College Park. He has also served Connecticut College as a Professor of Sociology and Dean of the College.

Dr. Hampton has published extensively in the field of family violence including several edited books:

- *Black Family Violence: Current Research and Theory*
- *Preventing Violence in America, and Substance Abuse*
- *Promoting Racial, Ethnic and Religious Understanding in America*
- *The Prevention and Treatment of Interpersonal Violence Within the African American Community: Evidence-based Approaches.*
- *The Handbook of African American Health* (awarded the American Journal of Nursing — Book of the Year Award in the community/public health category 2010-2011.
- *Substance Abuse, Family Violence and Child Welfare*

He also has written more than 30 articles and book chapters.

He is one of the inaugural Steering Committee members for the Institute on Domestic Violence in the African American Community. His research interests include partner violence, family abuse, community violence, healing, student success in higher education and social change.

Dr. Hampton’s degrees include: a BA from Princeton University and an MA and Ph.D. from the University of Michigan.
Pamela Jenkins is a Research Professor of Sociology and faculty in the Women’s Studies Program at the University of New Orleans (Emerita). She is a founding faculty member of UNO’s Center for Hazard Assessment, Response and Technology (CHART).

Before Hurricane Katrina, her research interests were diverse but focused on how communities respond to a variety of social problems. Her research interests post Katrina include documenting the response to Katrina as part of a national research team on Hurricane Katrina evacuees.

She has published on first responders, faith-based communities’ response to the storm, and the experiences of elderly during and after Hurricane Katrina. Throughout her career, she has evaluated a number of national and local efforts focused on community sustainability. At a community level, she is involved in several projects that work directly with best practice for violence prevention including domestic and community violence. Her latest book with Steve Kroll Smith and Vern Baxter, Left to Chance, documents the recovery after Hurricane Katrina of two African American neighborhoods.

This document was supported by grant #90EV0412 from the Administration for Children and Families, Family and Youth Services Bureau, the U.S. Department of Health and Human Services. The contents are the responsibility of the authors and do not necessarily represent the official views of the U.S. Department of Health and Human Services.