A Report from a Survivor-Centered Practices Learning Circle

July 2017
“On behalf of Blue Shield of California Foundation, I’m thrilled to share this report with you. When I first read the Full Frame Initiative’s How do Survivors Define Success? I was struck by the need to continue the dialogue with California practitioners in the field of ending domestic violence on why it matters to have survivor-centered practices, and how would I, as a funder, be able to see and recognize those practices? I’m sure those questions are not isolated to me alone. I’ve been honored to participate as a co-learner in this Learning Circle and I’m grateful to each and every practitioner who participated with such commitment, curiosity and passion. I’ve learned a lot from and with them. With this report, I hope you will find some new ideas for how to practice, measure and evaluate approaches that center solutions on the engagement and power of domestic violence survivors, affirm some things you’re already doing, and incite your curiosity on the continuing journey to strengthen the field and prevent violence. I welcome your comments and questions.”

—Lucia Corral Pena, Senior Program Officer, Blue Shield Against Violence (BSAV)
Blue Shield of California Foundation

“Both the process and the findings of the Learning Circle are important. On the process side, the facilitators and participants focused on documenting their best selves, rather than starting from scratch. Holding onto the dual truths that some things are good and working and that we need to really stretch and evolve as a field is hard but vital in a true commitment to supporting survivor-centered work. That such a strong sense of community emerged from the process is also a great value. The findings of the Learning Circle demonstrate an important milestone in the field’s evolving understanding of safety, and the pairing of this with rich examples from the field can help organizations earlier on the journey chart their own course forward.”

—Katya Fels Smyth, Founder and CEO
Full Frame Initiative

GOING AGAINST THE GRAIN:
A Report from a Survivor-Centered Practices Learning Circle

July 2017

This report is co-authored by the Learning Circle Participants listed on pages 2-3 and independent consultants Shiree Teng and Audrey Jordan. The viewpoints expressed in this report represent the individual members of the Learning Circle and not necessarily that of the organizations.
Background and Purpose of Learning Circle

In the fall of 2014, The Full Frame Initiative (FFI) published a report that influenced the domestic violence field. A key finding from the How Do Survivors Define Success? report is that:

Helping survivors own their whole identities is essential to their ability to gain and hold onto person success. For practitioners to do this, they, too, must be able to have fuller, richer identities in their work, which in turn, requires redefining what it means for them to be successful in their practice.¹

The FFI report provided a call to action, and the Learning Circle Project described in this summary was a response. Specifically, ten cutting edge organizations were funded by Blue Shield Foundation of California (which also funded the How Do Survivors Define Success? study), to come together in four facilitated learning sessions to reflect on their practices – practices that lift-up survivor-centered approaches.

In so doing, the learning circle would further identify the core of common features of survivor-centered practices they employ, and the ways they assess and communicate about these features. By highlighting these common elements, not only would these organizations enhance their own learning and practice; they can also provide enrichment of learning and practices for the domestic violence field.

What makes these organizations cutting edge? They each in some identifiable way center their practices on survivors’ experiences, from enrollment through completion and often in follow-up. A common feature is the leadership in program design and/or implementation provided by the survivors themselves. Similarly, the Learning Circle was designed and implemented following the leadership of the cohort practitioners (see Appendix A for Learning Circle process description).

Who Participated and Why?

Lucia Corral Peña, Senior Program Officer at Blue Shield of California Foundation (BSCF) shared how the Learning Circle was formed and who was invited to participate:

“The How Do Survivors Define Success? report disrupted our thinking and provided a huge window for questioning and identifying pathways to long-term survivor success. If you place survivor-defined success at the center of your goals, how does that shift the lens on your project strategy? The peer learning circle was intended to build from the report’s recommendations and identify actionable goals, and concrete practice and policy changes. The grantees who participated in the learning circle were those we funded in innovation spaces... Everyone in the group is trying something new. If we want the system to be more aligned with what survivors need to be more successful, what does that look like at the local level? What does it look like at the systems change level? I joined the learning circle with a spirit of inquiry and curiosity and showing up as a co-learner. It was important that I was learning in that space alongside everyone else; not there to watch, observe, criticize but to learn.”

Co-creation of the peer learning circle was a founding tenet of the process and outcomes. BSCF contracted with independent consultants Shiree Teng and Audrey Jordan as facilitators of the learning circles, who then conducted one-on-one conversations with each of the ten organizations that BSAV invited to participate. These conversations elicited what would become the priority learning topics and goals of the Learning Circles.

The seven primarily DV service providing organizations and respective representatives that ultimately participated are:

• Ada Palotai and Susan Ghanarpour, Asian Pacific Institute on Gender-Based Violence in San Francisco;

• Tamina Alon and Annabelle Berrios from the Contra Costa Family Justice Center, with locations in Richmond and Concord;

• Monica Martinez and Heather Masterton from Joyful Heart in Pasadena;

• Elizabeth Eastlund and Michelle Uglesich from Rainbow Services in San Pedro;

• Laura Diaz, Adriana Garcia and Diana Salazar from Sacred Heart Community Service in San Jose;
• Kate Hart from Safe Alternatives to Violent Environments (SAVE), Fremont

• Jill Zawisza from Women Organized to Make Abuse Nonexistent, (WOMAN Inc.) in San Francisco

**What We Learned – The Two Big Take-Aways**

The biggest takeaways from the learning circle are that:

• A set of **values** undergirds both the most cutting edge survivor-centered practices, and the measurement and documentation of these practices. These values are:

1. Survivor-centered practices go “against the grain” and lean into ways to shift and share power with program participants;

2. Survivors are the experts of their own experiences, not the practitioners who support them, regardless of titles, educational attainment, years in the field;

3. Approaches are adaptable and full of nuance—not “model in a box,” and promote survivor choice and control;

4. A strict intentional adherence to see survivors as whole people, not solely as DV survivors;

5. The best practices come from survivor-led organizations, systems and/or community change efforts, and

6. The work thrives in a culture of healing and therefore a trauma-informed culture that is consciously cultivated and nurtured.

• **Survivor-centered practice happens at all levels**, in a culture of intentional transformation: starting with the individual, to 1-to-1 and group practices within a program, to within the organization among and between participants and staff, to between DV organizations and several other organizations in communities – in both practice and policy change planning and action.
The learning circle started from the goal of digging deeper into survivor-centered practices, why it matters, the “how to” of it, and how to measure it. The result of the learning that came from the learning circle is encapsulated in the following graphic depiction:

Importantly, the steps occur in an environment or culture of values that include: enabling conditions, belonging, engaged voice and leadership; giving back; healing; self-sufficiency; and the risk-taking required to “go against the grain.”

The bi-directional arrows represent the non-linearity in the relationships between and among the values. This depiction applies to what happens for individuals, for practitioners, for organizations, and for collectives of organizations and individuals seeking to enhance wellbeing for domestic violence survivors. It also applies to practice as well as evaluation.
DISCUSSION HIGHLIGHTS

The highlights of our discussions centered on the following:

1. **Healing is an individualized journey.**
   Not a prescription from a diagnosis as the more conventional medical model would dictate. And practitioners need to accept that the healing journey is different for different survivors. There’s no script. There’s no “right” or “wrong” way. Each survivor holds the key to their own healing, on their own timeline, and based on their readiness and capacity. A core part of what makes the organizations in the learning circle special is the safe space provided to survivors for their own expanded and evolving self-determination or choice(s).

2. When the Learning Circle identified, “Against the Grain,” the group had to define what we collectively mean by “Grain” and where we’re pushing it to go and why. The current “Grain” is one where a mostly good-intentioned and well-meaning service delivery system for domestic violence survivors has over time drifted to one where more often than not the staff “holds the key to survivors’ healing.” It’s where there’s the expectation of a “model” to produce predetermined results. In some organizations, it’s a laddered or steps approach: there’s a crisis; client enters into counseling; then safety planning; moves to a shelter or transitional housing; then moves out.

   These models legitimize the organization’s existence, versus a more transformative approach that challenges the fundamental structures prescribed by capitalism, white supremacy, patriarchy, and the revered clinical-medical model.

   Going against this “grain” occurs on multiple levels – within practitioners, one’s agency, with other DV organizations, and within the field of violence against sexual assault.

3. **Holding survivors at the center requires practitioners to be highly adaptive and flexible.** Since the premise is that each survivor heals in their own time and way, we as practitioners need to honor that journey while providing some sense of structure, parameters and predictability.

   This “both/and” perspective recognizes that we are not talking about wide open places where
there are no boundaries or limits. The challenge is to hone in on the gray-zone where there is enough of a container for survivors to feel seen, heard, safe and cared for and to have consistency, stability and compassion. They want this kind of safe space. Practitioners are constantly working to support survivors’ increasing level of self-determination, self-reliance and acting on their own agency that is healing and generative.

Where survivors are valued and respected as whole people who have strengths and competencies to make the best decisions for themselves and to use their talents and gifts in ways that they feel the validation of contribution, practitioners and survivors win.

When the DV field began, it was more like this because survivors started it. But the forces of needing to be legitimized as a field and for services and programs to be financially sustainable, in the context of structural racism and patriarchy, have pushed the field and the practitioners within it towards needing to raise more and more money that comes with strings, rules and reporting templates, and having resources which then beget more and more resources needed. This unfortunate evolution
resulted in the over-professionalization of practitioners, organizations, and systems that has entrenched service-centered system.

The DV field has moved away from its origins of survivor-centered activism and mutual support to over-emphasize services-centered outputs (how many victims served) and evidence-based practices that juxtapose us, the professionals who know best vs. them, the broken people who need to be fixed.

Survivor-centered work goes against the grain by bridging the divide between the powerful and the oppressed, becoming an interdependent healer-and-healed, both practitioner and survivor.

**Survivor-Centered “Against the Grain” Approaches and Ways to Evaluate and Measure Impact**

In the Learning Circles dialogues we identified a set of common practices among the practitioners/organizations represented. These practices, and some observations about ways to evaluate and measure them, are:

- **Culture and Principles of Healing and Nonviolence**
  - Survivors as Experts in their own Lives – Primacy of Survivors is Elevated
  - Honoring Survivors Voice and Choice – Shift Power
  - Survivor-Inspired Organizational, Community and Systems Changes

(See summary chart beginning on page 18)

**CULTURE AND PRINCIPLES OF HEALING AND NONVIOLENCE**

The group delineated the various ways that survivors are encouraged and supported to choose healing modalities and forms of expression that work for them that are not prescribed or offered in an overly simplistic, uniform manner:

*Survivor Engagement* – Survivors are involved in defining success and how they get to it, in their words.

- Survivors define successful outcomes – in their words
- Speak survivor’s language – no jargon, not full of big fancy words and accepting where each survivor is at
**Trauma-Informed Practices** – Supports and resources begin from understanding that survivors are deeply affected by the abuse and violence they have experienced but not defined by it.

- If asked to share their story, survivors can opt in or out in a way that doesn’t re-traumatize
- Compassion and listening = trauma informed care starts with full-hearted, deep listening; listening to understand, not to judge or prescribe

**Cultural Competence and Organizational Change** – Practitioners honor and understand that survivors have culturally different histories and experiences that determine the “fit” of supports and resources.

- Healing is not dependent on a practitioner – positive self-care practices encouraged for survivors and practitioners
- The practitioner and the organization strive to accommodate the survivor and not the other way around.

**Recognize Survivors’ Wholeness and Healing** – Survivors are multifaceted people with lives that cannot be compartmentalized.

- Help survivors and staff self-regulate as they share their stories
- Activate creativity – safety and learning through innovative ways (e.g., arts)

**Types of Culture of Healing & Non-Violence Practices:**

- Mindfulness
  » Meditation
  » Awareness
  » Being present
- Cultural practices that support healing
  » Music/dance
  » Art
  » Poetry
- Mujeres healing circles
- One-on-on’s that bring people together in relationship
- Storytelling
Survivors report that they are recognized as having expertise, value; that their experience and voice matters;

Survivors report that they have opportunities to offer support to others as they share experiences;

Demonstrate, in comparison to other programs, that survivors learned and used more healing practices, that these practices provided more wellness for longer periods of time, that they were able to go at their own pace, with choices that encouraged the use of their whole selves;

Changing narrative of supports vs. harms, from victim to non-victim;

Individual stress levels (pre/post);

Changes in daily quality of life (through self-report and observation);

Participants are making connections so they don’t feel isolated, and

Movement through a development spectrum:
SURVIVORS AS EXPERTS IN THEIR OWN LIVES – PRIMACY OF SURVIVORS IS ELEVATED

Practices that recognize survivors’ expertise and embrace survivors’ experience and knowledge in solutions that result in survivor success are:

• Mutual understanding is fostered with intentionality;
• Survivors speak on their own lives, are not spoken for;
• Survivors define success and tell practitioners what they need;
• Staff are not “the experts,” but have expertise to share as well as broker access to other resources;
• Democratizing knowledge – build the learning about what works with survivors;
• Survivors are not exploited for policy wins, and are not tokenized or used as “window dressing” for hearings but are involved and engaged throughout as champions;
• Belief in survivors’ ability to make right choices for themselves, and
• The work is to help survivors get there and believe for themselves.

MEASURED AND EVALUATED BY...

To what extent do survivors report that:

- They feel seen and valued as whole people;
- They are able to take back their power;
- They can exercise self-agency;
- Practitioners adapt to survivors’ personal goals;
- They see organization culture as “We are not here to ‘fix’ you”;
- Their encounters with staff are non-judgmental, that there is no right/wrong solution, and
- They identify goals that are focused on self-determination and self-sufficiency.
COLECTIVO is a body of leaders actively working to support, create awareness of, and organize around domestic violence that centers immigrant women of color. Three sub-groups make up Colectivo: Direct Service, Mutual Support, and Organizing. The work translates over the three subgroups, consisting of but not limited to trainings on system analysis, services for survivors at the city and county level, meeting with electeds and commissioners, etc. Everyone is affected by DV, directly or indirectly. We are committed to addressing the root causes of Domestic Violence and identifying solutions to end it.

Direct Service: community advocates join the work at Sacred Heart Community Service after completing the Certified 40-hour Domestic Violence Advocate training in Spanish with additional individualized training.

Mutual Support: creating awareness around IPV through social and cultural events that bring all the groups together. Making space for healing by holding events such as trauma informed support circles and art events.

Organizing: addressing the system/root causes of IPV, leaders identify a policy solution that challenges the system through a campaign with the intention of transformation and healing.

Gabriela came to Sacred Heart Community Service for the holiday food program and she learned that we had other services including our DV program which includes the DV advocate training. Although she was shy and introverted she approached us with an interest in the training. Gabriela shared that she witnessed the violence that her dad inflicted on her mom throughout her childhood and wanted to understand why her mom stayed with him. The training was emotionally hard for Gabriela at times as she realized that the violence she grew up witnessing had a deep impact on her as well. She formed strong bonds with the other women in the training and has become one of most active and involved promotoras in the Colectivo. She has organized outreach and awareness events, testified at city hall, and has continued her healing by inviting other strong women to join her in the work.
HONORING SURVIVORS VOICE AND CHOICE – SHIFT POWER

Setting the conditions so that survivors can act on their expertise (not simply be recognized for it) is also a promising practice that was identified in the learning circle:

- Survivor strengths are activated in the process – dependency is not encouraged;
- Start where survivors are – do not assume they are empty vessels, but do not assume they do not need guidance and concrete tools they can use;
- Services and supports are a response to survivors, not the other way around;
- Services are meaningful to survivors, not something abstract, tangential or peripheral;
- Share power and responsibilities, and
- Act from Principles of Dignity & Respect that Honor Survivor Voice & Choice

» Testimonials from survivors that reveal that people feel seen, heard, respected;
» Safety to speak out regarding needs, participation;
» Survivors take initiative (people with more power), and
» Culture of willingness to listen and learn.

THROUGH

Echando Pa’lante, Women Organized to Make Abuse Nonexistent (W.O.M.A.N., Inc.) provides past program participants with culturally relevant, comprehensive leadership training. The program and training co-evolved in part as a response to the desires of the first cohort of participants, who call themselves las Pioneras, and also because of W.O.M.A.N., Inc.’s recognition of structures of power in their own work.

Brief Example: Past program participants are trained to be DV counselors themselves. They perform outreach, facilitate support groups within their own communities (instead of our brick and mortar office) and serve on a steering committee making suggestions for future program revision and development.

“I said when we started Echando Pa’lante, that we have to remember what we were before we went through all the violence: we had dreams and aspirations, we had goals. When you go through domestic violence you can feel like you are a cockroach, your self-esteem is on the ground...Echando Pa’lante motivates you to do something.”

“We are the strength of the program: the participants.”
Relationship Shifting and Sharing Power through:

- Co-created agreements
  - Program creation/evaluation
  - Groups
  - Policies
  - Cohort dynamics
- Clarity about what decisions are negotiable and what decisions are not;
- Exit evaluations listing practical skills gained – practical skills allow for increased capacity for increased participation as equal stakeholders;
- Self-assessments, such as General Self Efficacy, Leadership Self Efficacy/Functional Leadership Activities;
- Design, completion and implementation of self-designed community projects on community issues survivors seek to change;
- Survivor participation in multi-disciplinary training events;
- Survivor contribution to strategic plan;
- Survivor contribution to policies and practices;
- Survivor networking access to countywide systems representatives and service providers, and
- Reported sense of belonging to larger community and continuous participation over time, continuing to participate even past program completion.

MEASURED AND EVALUATED BY...
SURVIVOR-INSPIRED ORGANIZATIONAL, COMMUNITY AND SYSTEMS CHANGES

Transformative change cannot remain within the purview of programs or individual-level change. The dialogue for this promising practice lifted the following highlights:

- Practice is not constrained by how we've always done things – important to be flexible, figure out how to support and not say, “Oh we don’t do that…”;
- Critical and conscious of structural racism, white supremacy and practices that are not culturally-rooted, competent or informed;
- Responsive to survivors needs and goals;
- Honors survivors as change agents;
- More traditional positions of authority (like ED) have less pull than before as staff with direct contact with survivors step into leadership, and
- Organizational paradigm shift begins the moment the organization realizes it wants to be survivors-centered. The shift ripples out into the community, with aim of statewide and national impact.

FELLOWS

Contra Costa Family Justice Center’s Community Fellows (“Fellows”) is a 10-month leadership program for individuals who experienced interpersonal violence a year prior to joining the program or earlier. Annabelle Berrios designed a leadership curriculum for personal and social change and coached the Fellows in project design, development and implementation through an initial training period, monthly cohort meetings and individual coaching sessions. The inaugural cohort of 10 Fellows graduated on December 2016 after each completed a community project. Nine Fellows were low-income women of color who identified education equity and health-related issues they sought to change. Fellows had the opportunity to contribute to the Family Justice Center as equal stakeholders by participating in multi-disciplinary training events, contributing to our strategic plan, improving outreach strategies, noting areas of community concern and inviting community-at-large considerations about client services. One Fellow co-created with the larger community an outdoor sanctuary at the Richmond Center. Fellows also shaped their cohort dynamics by naming their cohorts based upon shared values and identifying the conditions that supported safety in learning. On Exit Evaluations, Fellows listed the practical skills they gained through skills mentorship and access to a wider learning community. The second cohort is scheduled to graduate December 2017.
Movement to more Restorative Justice practices – Survivor-defined engagement of community in resolution, which we recognize as an emergent and controversial approach that pushes against power hierarchies;

An increasingly wide variety of healing modalities in communities – “democratizing healing;”

Distribution of responsibility for leading healing modalities (not led by one person, or one organization);

Focused, mobilized action organized in a network – when and how programs respond to external forces that affect survivors (e.g., immigration policy) – capturing the work that is not only about engaging folks in crisis;

The shift away from predominance of crisis programs to prevention programs;

Mobile Advocacy – how many more people are reached, and what outcomes are different in quality/quantity, and

Cross-sector collaboration that is demonstrably survivor-led or survivor-inspired.

MEASURED AND EVALUATED BY...
The Asian Pacific Institute on Gender-Based Violence’s Survivor Centered Advocacy (SCA) Project was a transformative journey of co-learning that generated and shared knowledge about the meaning and practice of “survivor centered advocacy” in historically marginalized communities. The project used a “research justice” framework, rejecting the transactional and extractive nature of traditional research efforts that have used community-based culturally specific practitioners as merely objects of study. Instead, this project valued and positioned practitioners as lead researchers, who hold a critical perspective that is forged through experiential understanding of SCA and its dynamics, and who, with our support, designed and implemented research projects with their own communities from start to finish. This project was unique because survivors living at the intersections and the margins were the point of departure rather than an after-thought, and because it created a pathway for deconstructing dominant frameworks by centering the experiences of historically marginalized communities rather than just including them.

Rainbow’s contribution to creating a Survivor Center, Trauma Informed Workplace: Rainbow Services continues to examine ways to find the balance between honoring the grassroots approach that started the DV movement, and the constraints imposed by our funding streams – how can we truly work in partnership with our participants in their healing journey? We believe Trauma Informed Care (TIC) brings us closer to that balance. When we first introduced the concept of trauma and its influence on survivor behavior and coping skills, we recognized that staff members were routinely frustrated with participants in our emergency shelter, and would tend towards more punitive approaches to managing non-compliance from participants. Through the process of cultivating TIC, Rainbow invested in leadership training for supervisors to build their capacity to provide reflective supervision to direct service staff. Reflective supervision supports staff in being able to identify challenges and promising practices in a safe environment. Most of Rainbow’s supervisors have not had clinical training, but are invested in learning and adapting their supervision style, if it will result in improved outcomes for our participant families. Additionally, Rainbow continues to invest in ongoing training through providing monthly group reflective practice for our residential staff, quarterly all staff training, an annual all staff retreat, and an opportunity for full time staff to apply for professional development funds for individual learning opportunities.
CORE COMPONENTS OF EVALUATION

- Holistic approach (mind, body, spirit);
- Embracing practitioners’ parallel processes;
- Involving survivors into an evaluation advisory committee with real authority and power in making decisions;
- Responsiveness not directiveness;
- There is conscious, intentional adaptation or a practice of planning for change because it’s going to happen;
- Landscape-mapping of resources available and networks of supports;
- Ready for emergent needs – rapid response data collection and real-time learning and reflection;
- Baseline should be evolving – not static;
- Quit doing what isn’t working – “pruning” (e.g., reorganization, redirection);
- Staff not stuck in program role – staff valued and working and evolving to full potential, and
- Resources invested in staff training and professional development to meet emerging needs.

Secondary traumatic stress and vicarious traumatization present a burden that counselors, advocates, and lawyers risk when working with survivors of childhood sexual abuse, domestic violence, and sexual assault. While effective trauma interventions provide one option for addressing the effects of secondary traumatic stress, the focus of these treatments is typically on clinical symptom reduction, rather than a broader emphasis on healing the whole person. Unlike modern Western medicine, holistic healing is an approach that attends to mind, body, and spirit. The primary objective of this study was to pilot test the standardized procedures for delivering the Joyful Heart Foundation (JHF)’s Holistic Healing Arts Retreat and to gather preliminary data on its effectiveness for improving well-being and supporting resilience. Results of an open trial of the 4-day JHF Retreat found support for improvements in stress-related outcomes (posttraumatic stress symptoms, insomnia, somatic symptoms, perceived stress, depression symptoms, fatigue, general life satisfaction, burnout, secondary traumatic stress) and resilience-related outcomes (self-esteem, self-judgment, self-compassion, nonjudgment, mindful acceptance) over 3 months in a sample of 18 female counselors, advocates, and lawyers who work with trauma survivors. Study limitations include lack of a control group and small sample size.2

# SUMMARY OF AGAINST THE GRAIN APPROACHES

## CULTURE AND PRINCIPLES OF HEALING AND NONVIOLENCE

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## SURVIVORS AS EXPERTS IN THEIR OWN LIVES

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<td>Clarity about what decisions are negotiable and what decisions are not.</td>
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<td>Exit evaluations listing practical skills gained</td>
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<td>Self-assessments, such as General Self Efficacy, Leadership Self Efficacy/ Functional Leadership Activities</td>
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<td>Design, completion and implementation of self-designed community projects on community issues they seek to change</td>
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<td>Participation in multi-disciplinary training events</td>
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<td>Contribution to strategic plan and to policies and practices</td>
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<td>Networking access to countywide systems representatives and service providers</td>
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<td>Reported sense of belonging to larger community and continuous participation over time, continuing to participate even past program completion</td>
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<tr>
<th>SURVIVOR-INSPIRED ORGANIZATION, COMMUNITY AND SYSTEMS CHANGE</th>
<th><strong>Example Practice(s)</strong></th>
<th><strong>“Against the Grain” Approach</strong></th>
<th><strong>Ways to Measure/Evaluate Against the Grain Approaches</strong></th>
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<td></td>
<td>Restorative Justice</td>
<td>Flexible, figure out how to support and not say, “Oh we don’t do that...”</td>
<td>Movement to more Restorative Justice</td>
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<td>Programs like Housing First, DV adaptable to where clients are (not cookie cutter)</td>
<td>Critical and conscious of white supremacy</td>
<td>Wider variety of healing modalities in communities – “democratizing healing,”</td>
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<td><em>Forward Stance</em> that integrates physical movement, awareness of energy, rhythm and flow</td>
<td>Responsive to survivors needs and goals</td>
<td>Distribution of responsibility for leading healing modalities</td>
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<td>Honor survivors as change agents</td>
<td>Focused, mobilized action organized in a network – not only about engaging folks in crisis</td>
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<td>More traditional positions of authority (like ED) follow lead of staff with direct contact with survivors</td>
<td>The shift away from predominance of crisis programs to prevention</td>
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<td>The shift ripples out into the community, with aim of statewide and national impact</td>
<td>Mobile Advocacy – how many more people are reached, and what outcomes are different in quality/quantity</td>
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<td>Cross-sector collaboration that is demonstrably survivor-led or survivor-inspired</td>
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In addition to the content insights described above, the learning circle revealed five important implications for us and others who do (or want to do) survivor-centered practice. The first two are about “The Work” centered on survivors and the other three are about Learning Circles:

1. **Define What to Measure and Shifting Evaluation Paradigms**

In the last ten years, there’s been an increasing and explicit demand that mental health and DV organizations implement evidence-based practices (EBPs). While we support the articulation of what works, we challenge EBPs with important questions such as: who’s in the room when the “evidence” was created? When the success outcomes were decided? Were people of color in the sample proportional to the size of the survivor population? To what extent were LGBTQ members in the evidence pool? What about immigrants with mixed status families? Young people?

Moving to a generative mindset requires accepting that DV is by nature an intersectional field. Survivors live multiple identities, realities and have multiple stories. We need to hold intersectionality in our dialogues about evaluation paradigms. We need to hear from survivors what they hold to be critical in the evaluation of their own progress. In short, we accept complexities to be truth, and in that vein, we approach or embrace evaluation with the rigor and excitement this truth deserves as we look complexities in the face.

In the learning circle, the discussions of promising practices and useful measurement and documentation of these practices were experienced as integral, co-mingled parts of the work. This has not been the common experience of the facilitators (who both have evaluation expertise) in similar settings. Everyone who participated in the learning circle is acutely aware of the need to better operationalize, measure and demonstrate the effectiveness of their practices. Everyone who participated assumes responsibility for the difficult evaluation work involved, of getting past outputs and typical individual change measures in knowledge, attitude or behavior of only the survivors to more transformative measures at multiple levels (e.g., individual, organizational, inter-organizational).
2. HONOR THE PARALLEL PROCESSES: HEAL THE HEALERS

Practitioners and survivors are a team. It’s not an “us vs. them” duality. Honoring the work that practitioners do will strengthen organizational sustainability from a human resource standpoint. Funders, on the whole, have not given practitioners the recognition or resources to heal, process the secondary and vicarious trauma they face and hold as they stand alongside survivors. This needs to change so there’s more balance, less burnout, more sustainability.

For Learning Circles:

3. PARTICIPANTS - THE “WHO” MATTERS AND, IT’S NOT FOR EVERYONE

Who does this work matters and who is in the Learning Circles matters. The transformative models of putting survivors at the center of their own healing is not for everyone. It requires a tremendous level of vulnerability that allows for deep human connections. It requires doing the work and listening with utmost humility. It requires a commitment to sharing power, and working from a place of “power with,” and not “power over.” Transformation is a two-way process, as practitioners are transformed alongside survivors. This work requires a commitment, and even a fierce and at times exhausting struggle to constantly grow and change in an open system where new information necessitates new responses. Not everyone is cut out to work in these ways.

4. ENGAGE FUNDER(S) AS A CO-LEARNER IN THE ROOM

As the initiating foundation staff member, Lucia’s participation in the group could have been stifling for the participation of the practitioners, who are all Blue Shield of California Foundation grantees. Indeed, the facilitators discussed the costs and benefits of her participation in the planning stages, given previous experiences with similar learning projects. Agreeing among all participants upon her willingness to engage as an equal while at the same time stepping back or out whenever the group requested it, we went forward. Lucia did in fact show up as an equal participant. There was not a time that the other participants requested that Lucia step out or back; in fact, the one time Lucia thought she ought to step back and said so, other participants insisted that she remain because “she
was a participant just like everyone else in the room.” In lifting this point, we want to be clear that not every funder would be invited to such a learning circle if grantee partners were given the choice. Indeed, the group bemoaned the realization that it is the rare funder who would show-up as Lucia did in the space. This kind of learning circle is only for the funder who by their own experience or characteristics has the humility, head and heart curiosity, and openness to share, to be vulnerable and to learn as a peer.

5. CO-CREATION

To ensure ownership and engagement, the Learning Circle purpose, outcomes and process need to be co-created and co-owned by everyone before launching. In this case, BSAV staff initiated the idea of the Learning Circle. BSAV staff identified a consultant to guide the co-creation process as well as the facilitation. For this Learning Circle, the consulting team turned out to be a great fit for the Circle participants to optimize co-creation, co-ownership and the learning journey; this may not always be the case.

**Recommendations to the Field**

The primary purpose of the learning circle was to lift the survivor-centered practices that distinguish what the participants describe as “against the grain” principles and approaches, in practice and in evaluation. These common practices, once identified, can provide the understanding that promotes more intentionality in what works to improve more, better and longer-lasting survivor success. The group of practitioners assembled concluded the circle process with a strong desire to continue to learn together and become more articulate, persuasive and outcomes-focused about the power of their practice in fostering transformative change for survivors and for the organizations who work with them.

Beyond sharing the learning with other interested stakeholders, we lift up the following three recommendations to strengthen the power of learning and broaden the field’s promising practices:

1. Invest more in peer-learning and sharing such as learning circles. These kinds of investments can lead to refined practice and evaluation tools as well as to the deepening mutually supportive community of practitioners who do this demanding work.
2. Invest in forums for survivors to meet in a learning community, sharing concrete tools and healing experiences. Survivors, in ways similar to practitioners, can further hone their expertise and healing with opportunities to learn about and practice what works in their own learning spaces. In addition, survivors are their own champions in articulating what works and arguably more powerfully than anyone who would speak for them.

3. Encourage funders to participate in learning forums with practitioners and survivors as co-learners. For systems and policy change to happen, decision-makers who are policy advocates, institutional executives and funding executives must be involved in the learning. It may be unrealistic to ask practitioners to name the concrete “what” and “how” for systems change or institutional reform. Practitioners speak from their experience. What unites all of us in the system are the principles that are at play regardless of level or position. Perhaps a concrete next step would be to ask high-level decision-makers to address the question: “what are concrete examples of what it looks like to be survivor-centered in the systems-change realm?”

“ When we center the survivor, we have to adapt our work. We can’t fulfill every need that comes up. But they will shed light on where they want to go. The art of balancing all of the pieces needed for their safety and their family’s safety without me being in the way as the advocate was a place of learning. As advocates, we bring a lot of baggage, too.”
Appendix A: Learning Circle Process Description

The facilitators of the Learning Circles, Shiree Teng and Audrey Jordan, began in early stages of planning by conducting 1-on-1 conversations with each of the ten organizations invited to participate. These conversations elicited what would be the priority learning topics and goals of the participating organizations. In addition, the goals and priority learning topics for the funder, Lucia Corral Peña from The Blue Shield Foundation of California, also informed the design of the Learning Circles. From the conversations, it was determined that:

- Four half-day convenings, approximately every other month, would occur
- The first convening would be held at The California Endowment, Oakland offices
- The convenings would build upon each other, focusing upon the key components of survivor-centered practice and measuring what works for survivor-centered practices
- Ample time and space would be preserved for sharing learning, co-design and co-creation

As the learning circles commenced, eight of the ten organizations (including the funder who participated as a peer) in the learning circles (see Attachment 1 for brief descriptions).

Following is a brief summary of the learning circle convenings as they occurred:

- The first learning circle was held at the California Endowment in October 2016; however it was determined at that session that the remaining convenings would be hosted at one of the participating organizations alternately in the southern California and Bay areas. This first convening was designed with the intention of all participants leaning more about each other’s practices, and what specifically each would hold-up as a practice about which they were most proud (as relates to survivor-centered, strengths-based approaches). In addition, topics were prioritized for future convenings, and agreements regarding meeting dates, locations and opportunities for participants to lead or co-lead parts of future agendas were made. Importantly, the circle opened with space for self-care and sharing: Joyful Heart staff led a modified version of their healing circle practice called “Heal the Healers” setting a tone for deep engagement, trust-building and sharing.
• The second learning circle was hosted by Rainbow Services in San Pedro, CA. In this convening, the group focused upon elements of survivor-centered practice and approaches to assessing the value and impact of these practices. During the circle conversations, we identified a set of themes or categories for exemplary survivor-centered practice, and for the evaluation of these practices. We ended with the Touchstone project, which was created by A Window Between Worlds, and art organization focused on using art to heal from trauma. The Touchstone project is offered as a way to connect deeply with yourself and with each other. These small pieces of art are a reminder of our strength and connection in the face of challenges. They help us understand that we are not alone in creating positive change. The Touchstone Project allows for the creator to take time to reflect on their needs and strengths, to have a symbol of grounding. Much like we teach our participants about self-regulation, we need to be aware of our own regulation. Touchstones are a great way to regulate and focus as we ground ourselves in this work.

• The third learning circle was hosted by Contra Costa Family Justice Center in Richmond, CA. In this convening the group developed a model for survivor-centered services that requires safety as foundational, but not sufficient, for change.

• The fourth learning circle, hosted by Joyful Heart in Pasadena, CA, was a pulling together of all that the group learned and want to share with the field about the critical importance of survivor-centered practice, what it is, and how to assess its impact – both on the lives of program participants who experienced domestic violence, and on the organizations providing resources and supports to them. The monograph is the result of our collective and co-created learning. The experiential activity was The Clinic, a real-time, 25 minute structured process for peer feedback in solution-seeking for a current issue or challenge in the work. It was highly productive and supportive time spent, for the three practitioners who presented their scenarios as well as those who provided feedback. The funder was unable to join for this last circle due to illness.

Significantly, throughout the course of the learning circle convenings as well as within the convenings, the facilitators cultivated the space for co-design and co-learning; the facilitators assumed the responsibility for both staying focused on the goals of the convenings and supporting the flexibility to adapt the agendas to incorporate the evolution of learning in real time. For example, although the agenda for the second learning circle divided the session such that one part was about survivor-centered promising practices the other a focus on evaluation, the conversations were more fluid, going back and forth between practice and measurement/documentation because the experience of doing the work actually happens in this “learn-by-doing” manner.
Appendix B: Parting Comments: Something New, Something Affirming; Something To Explore Further

**Something New**

- New connections, new people to call to have to support and to support
- Clinic as a tool I can use in my meetings with staff and with clients
- Complexity – how you navigate it rather than avoid it
- This learning space has been so rare and powerful. My first time in such a space where you build relationships and get shit done!
- I was at a point of burn-out. This group has grounded me and inspired me to go on.
- The validation and common experience with peers that will now be a community of support.
- Solving problems – the opportunity to pull our collective hearts and minds together to learn and pull into a powerful package that we and others can use.
- When I first started in DV I felt this awful competitiveness – here we have a shared goal and mutual support – such a wonderful relief.
- Appreciative of the funding for this kind of work – this is really big and new, and worth every dollar.
- Glad to be part of an authentic shift to the real work that needs to be done – thank you to BSFC.
- Reconnected with folk I haven’t seen in a long time – so appreciative.
- This experience gave me a needed reminder of the excitement of collaboration with people who have the constitution to do THIS work.
- Rejuvenated, grateful and connected.

**Something Affirming**

- I need to have more transparency with my organization about where we stand – hard to do but it is the right thing to do and soon.
• I didn’t feel like the only one like I usually feel!
• Collaboration is where it’s at – this was affirmed for me.
• I NEED the collaboration we’ve had in this space – a support system with leaders who know what I go through.
• Creative tension between planning and responding: strategic planning is an oxymoron.
• We do these kinds of kick-ass things DESPITE all that comes at us and our clients.
• Hopeful – appreciate that BSFC wants to hear from us. Maybe other funders should too?
• Sisterhood. Haven’t felt it in years.
• Realizing we all haven’t figured it out, but we’re getting there. It is not like I am missing something.
• Restful – for a little while I didn’t feel like I was swimming against the tide and not exhausted trying to do it. It was like spa time.
• This group exists!
• Not so much about what’s not working – this group lifts-up that there is a lot that is working.
• We need to keep meeting!
• I am not alone. We’re all keeping the torch lit.
• Safe harbor.

SOMETHING TO EXPLORE FURTHER

• How do I prove the good work I am doing (and there are evaluators in the room I can work with)
• How do we continue and expand?
• How do we have resources to promote more self-care that is needed among us, and for our clients?
• How to challenge power dynamics at my own agency and stay focused on getting the work done?
• Who is hosting the next meeting? We don't need funds to make it happen – how do we keep the momentum going?

• Need more of these kinds of opportunities – how do push for them and get the resources to do THIS work?

• How do we bring this learning circle to our own agency – to our staff and clients?

• I realize the need to work on myself so that I am better with others.

• Really concrete ways for us to keep meeting – let’s identify and keep it going.

• What learning can I take back to my organizations? Probably the Clinic tool.

• I’ll host (Kate). What can we do together? We can invite each other to activities we’re a part of or will be hosting (like Bollywood Dancing)

• I am thinking about people I can connect you all to, including me. Wanting to shake it up with you – I understand 3 is critical mass, so you, me and one other person/org!

• How to facilitate connections using our platform – how do we bring you all in and capitalize?

• Supervision – reflective vs. operational. Struggling with a department (Development) that is not survivor-centered – how do I bring learning into that space?

• What would it be like to bring our various community leaders from our organizations together? How would they want their stories to be told, and how would they like to learn together?
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