

Jill M. Davies ■ Eleanor Lyon

# Domestic Violence Advocacy

---

Complex Lives/  
Difficult Choices

---

2<sub>e</sub>

图书馆

**SAW**

*SAGE Series on Violence Against Women*



# **DOMESTIC VIOLENCE ADVOCACY**

*Complex Lives/Difficult Choices*

**Second Edition**

**Jill Davies**

*Greater Hartford Legal Aid, Inc. (GHLA)*

**Eleanor Lyon**



Los Angeles | London | New Delhi  
Singapore | Washington DC

FOR INFORMATION:

SAGE Publications, Inc.

2455 Teller Road

Thousand Oaks, California 91320

E-mail: [order@sagepub.com](mailto:order@sagepub.com)

SAGE Publications Ltd.

1 Oliver's Yard

55 City Road

London EC1Y 1SP

United Kingdom

SAGE Publications India Pvt. Ltd.

B 1/1 Mohan Cooperative Industrial Area

Mathura Road, New Delhi 110 044

India

SAGE Publications Asia-Pacific Pte. Ltd.

3 Church Street

#10-04 Samsung Hub

Singapore 049483

Acquisitions Editor: Kassie Graves

Editorial Assistant: Elizabeth Luizzi

Production Editor: Stephanie Palermini

Copy Editor: Megan Markanich

Typesetter: C&M Digitals (P) Ltd.

Proofreader: Eleni-Maria Georgiou

Indexer: David Luijak

Cover Designer: Janet Kiesel

Marketing Manager: Shari Countryman

Copyright © 2014 by SAGE Publications, Inc.

All rights reserved. No part of this book may be reproduced or utilized in any form or by any means, electronic or mechanical, including photocopying, recording, or by any information storage and retrieval system, without permission in writing from the publisher.

Printed in the United States of America

*Library of Congress Cataloging-in-Publication Data*

Davies, Jill (Jill M.)

[Safety planning with battered women]

Domestic violence advocacy : complex lives/difficult choices /  
Jill M. Davies, Greater Hartford Legal Aid, Inc., Eleanor  
Lyon. — Second edition.

pages cm. — (Sage series on violence against women ; 7)  
Revision of the author's *Safety planning with battered  
women : complex lives/difficult choices*, published in 1998.  
Includes bibliographical references and index.

ISBN 978-1-4522-4120-3 (pbk. : alk. paper)

1. Abused women—Counseling of. 2. Social work with women.  
3. Wife abuse—Prevention—Decision making. 4. Risk  
assessment. 5. Social advocacy. I. Lyon, Eleanor. II. Title.

HV1444.D38 2014

362.82'9252—dc23

2013009892

This book is printed on acid-free paper.



# **DOMESTIC VIOLENCE ADVOCACY**

**Second Edition**



## *Sage Series on Violence Against Women*

### **Series Editors**

Claire M. Renzetti  
*St. Joseph's University*

Jeffrey L. Edleson  
*University of Minnesota*

### **In this series . . .**

- I AM NOT YOUR VICTIM: Anatomy of Domestic Violence  
by Beth Sipe and Evelyn J. Hall
- WIFE RAPE: Understanding the Response of Survivors and Service Providers  
by Raquel Kennedy Bergen
- FUTURE INTERVENTIONS WITH BATTERED WOMEN AND THEIR FAMILIES  
edited by Jeffrey L. Edleson and Zvi C. Eisikovits
- WOMEN'S ENCOUNTERS WITH VIOLENCE: Australian Experiences  
edited by Sandy Cook and Judith Bessant
- WOMAN ABUSE ON CAMPUS: Results From the Canadian National Survey  
by Walter S. DeKeseredy and Martin D. Schwartz
- RURAL WOMEN BATTERING AND THE JUSTICE SYSTEM: An Ethnography  
by Neil Websdale
- DOMESTIC VIOLENCE ADVOCACY: Complex Lives/Difficult Choices  
by Jill Davies and Eleanor Lyon
- ATHLETES AND ACQUAINTANCE RAPE  
by Jeffrey R. Benedict
- RETHINKING VIOLENCE AGAINST WOMEN  
edited by R. Emerson Dobash and Russell P. Dobash
- EMPOWERING SURVIVORS OF ABUSE: Health Care for Battered Women and Their Children  
edited by Jacquelyn Campbell
- BATTERED WOMEN, CHILDREN, AND WELFARE REFORM: The Ties That Bind  
edited by Ruth A. Brandwein
- COORDINATING COMMUNITY RESPONSES TO DOMESTIC VIOLENCE: Lessons From Duluth and Beyond  
edited by Melanie F. Shepard and Ellen L. Pence
- CHANGING VIOLENT MEN  
by R. Emerson Dobash, Russell P. Dobash, Kate Cavanagh, and Ruth Lewis
- SAME-SEX DOMESTIC VIOLENCE: Strategies for Change  
edited by Beth Leventhal and Sandra E. Lundy
- MASCULINITIES, VIOLENCE, AND CULTURE  
by Suzanne E. Hatty
- LOCKED IN A VIOLENT EMBRACE  
by Zvi Eisikovits and Eli Buchbinder
- BATTERER INTERVENTION SYSTEMS: Issues, Outcomes, and Recommendations  
by Edward W. Gondolf
- THE BATTERER AS PARENT: The Impact of Domestic Violence on Family Dynamics  
by Lundy Bancroft and Jay G. Silverman
- EVALUATING SERVICES FOR SURVIVORS OF DOMESTIC VIOLENCE AND SEXUAL ASSAULT  
by Stephanie Riger, Larry Bennett, Sharon M. Wasco, Paul A. Schewe, Lisa Frohmann, Jennifer M. Camacho, and Rebecca Campbell

## FOREWORD

### DOMESTIC VIOLENCE ADVOCACY

#### *Complex Lives/Difficult Choices*

Cris M. Sullivan

---

**H**aving had the honor and privilege to be part of the “Battered Women’s Movement” since 1982, I have witnessed firsthand the strengths, stumbles, and successes of this evolving social movement. The results of collective advocacy efforts and political lobbying have included but are not limited to greater visibility of this critical social problem, important legal and social reforms, and significantly increased funding for prevention and intervention. Responsibility for intimate partner violence (IPV) has shifted in the eyes of public opinion from the victim (“What did she do?” “Why does she stay?”) to the perpetrator (“Why does he do that?”) and to our communities and societies that condone or even foster such abuse through social messaging and norms. That shift is certainly not yet complete, and the need for a strong social change movement to end domestic abuse and other forms of gender-based violence is still unfortunately very needed. But the gains have been many since those early days of women opening their homes to women experiencing abuse because no other services or responses were available.

Advocacy for domestic violence survivors has been a cornerstone of this Movement since its inception. In the early years, I don’t remember us even using terms like *survivor-defined*, *trauma-informed*, or *strengths-based*, because the word *advocacy* simply included those philosophies and values implicitly as part of its definition. Advocacy efforts started with *listening* to

women, as complete human beings living within social and cultural contexts, who needed support and information and assistance but who also brought incredible knowledge and strengths and resources to the table. The idea that “domestic violence could happen to any of us” was a genuine belief guiding this work. And while outstanding advocacy is still happening by many individuals in many programs across the country, the reality is that there is (and of course always has been) incredible variation in this practice. The word *advocacy* has been diluted to describe just about any service provided to a domestic violence survivor, including the provision of emotional support and referrals. And while providing emotional support and referrals are both incredibly helpful, *advocacy* is a distinct activity that involves working to change policies, practices, and conditions that negatively impact survivors and their children. It involves addressing injustices and increasing resources for disadvantaged individuals and groups and is therefore, by definition, proactive and community-focused. Jill Davies and Eleanor Lyon not only understand this distinction but they have lived it in their own work over the years and have done an exemplary job in this book of describing domestic violence advocacy principles in concrete terms that will impact the field in a myriad of ways.

While this book addresses many important issues and provides specific examples and guidance to advocates across a variety of topics, I think there are three overarching foci that set this book apart from others and that are critical for advocates’ work. First is the authors’ emphasis on helping survivors achieve far more than “increased safety” from physical violence over time. Through comprehensive safety planning and advocacy efforts, the focus can and should go beyond protection from physical violence, to economic stability, emotional well-being, and ultimately toward helping survivors achieve their hopes and dreams. Advocacy with abused women has always been about more than ending or reducing the violence, but this message has gotten lost not only in our communications with those outside of this work but sometimes even within the work as well. The deep exploration of what it means to be safe and expanding that definition, along with setting realistic, incremental goals for making each survivor safer are among the many contributions of this book. While putting forth the pragmatic, the authors never lose sight of nor lessen the commitment to complete safety for every survivor as the mission of this field.

Second, this may be the first book to describe what is needed contextually, within domestic violence organizations, in order for advocates to effectively do their work. The authors stress the importance of creating organizations that

include flexible work policies, are culturally diverse, and that are empowering for those working within the program. These are critical elements that will hopefully spark thoughtful conversation and organizational changes. The work environment described in this book would not only lead to better practice for survivors but would undoubtedly lead to greater retention of employees over time, which is a problem that continues to plague all advocacy organizations.

Third, this book offers detailed steps for engaging in creating policy change. As Davies and Lyon note, systems and policy change are imperative if we want to create change for communities and not just individuals. While most, if not all, advocates would agree with that premise, this book details *how* advocates can do this important work. Such instruction has often been missing in the past, yet we cannot expect people to simply know how to do such complex work without some direction and guidance.

This book makes numerous other valuable contributions to the Movement and the work of advocates, but it is important that the Foreword not become longer than the book! In short, Jill Davies and Eleanor Lyon have done it again. Where their first book, *Safety Planning With Battered Women: Complex Lives/Difficult Choices*, revolutionized safety planning by raising readers' awareness of both batterer-generated and life-generated risks, *Domestic Violence Advocacy: Complex Lives/Difficult Choices* will take advocacy work to a whole new level as well. This book is a must read not only for new advocates but for all of us committed to promoting the safety and well-being of domestic violence survivors and their children.



# PREFACE

---

In the 15 years since the first edition, the depth and breadth of work with family violence victims has been awe-inspiring. The progress of the movement to end violence and the family violence field it created is even more profound. Research has contributed new knowledge about violence and its impact on individuals, families, and communities. It has begun to provide clearer evidence about the ways family violence is experienced differently across culture, race/ethnicity, social class, and gender and sexual orientation, while demonstrating shared pain and resilience as well. Advocates' experience has contributed to new understandings of the range of supports victims need as they navigate potential sources of help to find safety for themselves and their children. In addition, family violence has been increasingly recognized as a serious issue to address across social institutions: legal, medical, mental health and other treatment, antipoverty, immigration, and others—many of which now include specialized protocols to identify and respond to it. As more people in more places have been asking questions about possible family violence, recognition of victims' diverse needs and their connections has been reinforced. It is clear victims need comprehensive advocacy. For all of these reasons, we decided to write this second edition to our first book: *Safety Planning With Battered Women: Complex Lives/Difficult Choices*. We are grateful that advocates and others have found that work to be helpful. They have urged us to update it and incorporate what has been learned. That is what we have set out to do here.

## HOW THIS BOOK IS DIFFERENT

In light of all of the changes that have taken place, it makes sense that this book is different from the first one in many ways, as reflected in the partial change in

its title. We wanted to make it clear that we are writing about advocacy, since “safety planning” has sometimes been interpreted more narrowly, although we’ve always put forth a broad view. The model we outline embodies the same essential framework, values, and approach as in the first book, with their emphasis on listening and forming a partnership. However, our thinking has evolved over the years. We now place more emphasis on *comprehensive* advocacy and devote more attention to doing that work with people who, for a variety of reasons, do not want to, cannot, or are not yet ready to leave their relationship with the person who is abusing them or to cut off all contact from a person they have left. Both research and advocates’ experience have increasingly recognized that many women who seek help are not planning to leave their abusive partners but do want more safety for themselves and their children.

Accordingly, we have added more depth and breadth to understanding victims’ perspectives and safety needs. This has led us to broaden our definition of safety and to include not only safety across the personal, family, economic, legal and other social institutional dimensions of women’s lives but also their well-being. This shift aligns with a holistic approach and also reflects a growing change in the field. We have also incorporated more of what has been learned about well-being in the context of diverse cultures. As we have moved more explicitly to a comprehensive view of safety and advocacy, however, we have argued that the goal of advocacy needs to become more realistic for both victims and advocates. We call that goal *safer*. Making complete safety as the goal has unintended negative consequences for both women and advocates if they are held and hold themselves to that often unachievable standard (and then “fail”). While safety remains the overarching goal of systemic advocacy, maintaining that goal in the individual advocacy context of often-constrained resources can result in limiting options and unrealistic plans. Realistic goals facilitate success and support change.

In this book, we also devote more attention to the advocate side of the partnership and what advocates need in order to continue to do such challenging work well. We incorporate more recognition of the wider context in which advocacy occurs—both the range of private and public organizations, big and small, and the broader social climate. We argue for agency environments that pay attention to the conditions under which advocates must work and victims will be offered advocacy, since these are one and the same. These environments will be both victim-defined and advocate-defined. We have also broadened the context of advocacy to include more on *family* violence, although we do not attempt to address all forms in detail. We simply explicitly acknowledge that

the broader family context is important for effective advocates to keep in mind. We have made a clear distinction between what we call *battering* and *non-battering IPV*. The 15 years since the first edition has led to increasing recognition that not all physical violence between intimate partners involves the elements of fear, intimidation, and other coercive patterns that characterize battering. Although all victims of violence deserve advocacy and safety, advocates need to recognize the difference and not treat everyone the same. We devote more attention to these distinctions, although our focus remains on advocacy in the context of battering relationships. We also include harm to children and other adult violence (not between intimate partners, including elder abuse and siblings) in our approach to family violence and integrate the safety needs of children throughout this book.

We have written five new chapters for this edition and deleted or reorganized others. Four of these new chapters apply our approach to specific areas of advocacy that are particularly challenging: children; victims in contact (with abusive partners/ex-partners or parents—this focuses explicitly on advocacy when women do not leave the household where they have been abused or continue contact after they have left); trauma, mental health, and substance use (providing an overview of effects on victims and offering general approaches to making advocacy more trauma-informed); and violent partners (emphasizing the importance of viewing them from victims' perspective and recognizing that this is part of advocates' work both individually and systemically). The fifth new chapter focuses on advocacy environments and organizations—providing what both victims and advocates need to form the most effective partnership.

Finally, we have also added summaries and discussion questions to the end of each chapter (except in Chapter 1). The questions are aimed at a general audience. These two features were suggested as useful additions for possible use of this book for training or in classrooms.

## ABOUT THE TERMS USED IN THIS BOOK

### Advocate

We use the term *advocate* broadly—much as we did in the first edition—to mean anyone who responds directly to help family violence victims in an organizational context. This can include staff or volunteers of a domestic

violence shelter or program, or medical, legal, social service, law enforcement, or other institutional systems that respond to domestic violence. Advocates can develop the skills and knowledge they need through experience, training, supervision, and other ongoing efforts to improve. Formal education may be part of this training but is no guarantee of effective advocacy. Successful advocates can come from diverse backgrounds and work in a variety of settings. Changes in recent years have increased the opportunities and challenges for advocates as well. Different contexts provide diverse theoretical approaches to family violence and multiple, sometimes conflicting, goals for advocacy. The services available in a particular context may also shape the advocacy, with advocates focusing on the use of those services to help an individual.

### **Victim/Woman**

It should already be apparent that we have changed our language in this edition so that we are not exclusively using the terms *woman* or *battered woman*. We did this after much discussion and thought. No terms adequately describe the lives or realities of people who experience violence. We use *victim* and *woman* interchangeably because we want to convey both the harm and the gender-basis of most battering IPV. For us, a “victim” is not powerless; she experiences constant change, engages in active safety strategies, and often demonstrates remarkable resilience. When we refer to a victim of battering IPV, we also use the terms *battered woman* or *battered parent*. Since children and some men experience family violence, we also use the term *victim* because it is age and gender neutral. All victims, including children; lesbian, gay, bisexual, and transgender (LGBT) persons; and male victims of a female partner deserve safety-enhancing advocacy that they define. As we explore further in Chapter 4, when working with an individual, it is best to use language that will resonate and not alienate, and the use of the term *victim* or any other label may not be appropriate.

Further clarification of our terminology is in order. A person who experiences violence because the person he is abusing defends herself is not a victim. Correspondingly, a person defending herself is not a batterer, abuser, or perpetrator. We reject the use of these technical criminal legal system terms outside of that arena, as they are not useful or accurate descriptions needed in most advocacy contexts. Their use defies common sense.

We also think it is necessary to reframe the term *victim* to ensure that anyone hearing that word will consider the strength, courage, persistence,

and pragmatism of all people who experience violence. As victims continue to speak out about their lives and experiences and as their advocates convey these full and diverse narratives, it is our hope that the term *victim* will no longer hold any stigma but rather convey—without judgment—all that victims are.

### **Violent Partner/Batterer/Man**

We use the term *violent partner* to include people who use either battering or nonbattering IPV. We sometimes use the term *batterer* to refer to a person who engages in battering IPV, which is usually but not only a man using violence and other tactics to control a female partner. We use this term to avoid the awkwardness of terms we would prefer to use (such as person or man who batters) because we do recognize that as all people are more than any of their behaviors, batterers are more than their violence and control. In addition, we use the term *man* to refer to the person engaging in battering IPV because it is much more common.

### **Victim-Defined/Woman-Defined Advocacy**

We use the word *defined* to strongly express that it is women—not advocates, despite their important role—who determine the content of safety plans and the focus for advocacy in our model. We do not find the term *victim-centered* advocacy to adequately value the role of the victim or the advocate, although it is sometimes used by others when they refer to victim-defined advocacy concepts.

### **Service-Defined Advocacy**

Since we introduced the concept in the first edition, service-defined advocacy has continued, and for many of the same reasons we described then. Service-defined advocacy, in which advocates fit women into the services available without understanding their plans, has continued because of the large numbers of people seeking help related to their experience of domestic violence, limited expansion of resources to provide the range of supports to meet their multiple needs, and the perpetuation of old stereotypical images of victims. We briefly review some of the historical context here because we have

removed the more extensive discussion we provided in the first edition and refer to it in this edition primarily in contrast to victim-defined advocacy.

Although service-defined advocacy is less likely to occur today in domestic violence program settings, that was not always the case. For example, O'Brien and Murdock (1993), in a study of shelter workers, found that workers viewed battered women who thought the abuse might stop much less positively than those who thought it would continue. The women who did not think the abuse might stop were considered most likely to leave their partner and therefore most responsive to the help the workers could provide. Such battered women fit the model of the woman who would take advantage of the services available, were more well liked by the workers, and were therefore more likely to get the most help.

Service providers in other settings—such as the courts (Emerson, 1994; Lyon & Mace, 1991) and public health (e.g., Campbell, 1991)—were found to focus on trying to fit battered women into the services available in similar ways. Warshaw (1993; see also Kurz, 1987; Stark, Flitcraft, & Frazier, 1979) was particularly clear about how the medical model's categories contributed to a service-defined approach and its effect on battered women in a large urban hospital emergency room:

The dynamics of an abusive relationship are recreated in an encounter in which the subjectivity and needs of the woman are reduced to [service] categories that meet the needs of another, not her own, a relationship in which she as a person is neither seen nor heard. . . . In this setting, where large numbers of patients must be seen expeditiously, it is the medical model that predominates. . . . The medical model, in fact, can only "medicalize," reduce things to categories it can handle and control. (pp. 142–143)

Eisikovits and Buchbinder (1996) described a similar process operating in battered women's encounters with their social workers. In this case, however, the social workers' approach led the women to try to fit themselves to the services:

[The battered women] were forced to think simultaneously of what they wanted to report and how it would be heard by the social worker—their audience. In such cases, the women felt they were not true to themselves. They were what they were expected to be. (p. 433)

Over acceptance of a psychological understanding of women as uniformly damaged by abuse suggested that women themselves may not be the

best judges of their situation and that the “experts” in shelters, the courts, and psychological treatment settings needed to help them interpret their experience and construct the best plans (Cahn & Meier, 1995). A combination of large numbers of women seeking help and research that focused on “battered women’s syndrome”-related explanations of women’s behavior helped to make a service-defined approach seem appropriate. This, coupled with the limited resources available and limited coordination among the various organizations battered women turned to, contributed to the expansion of service-defined advocacy, which has continued in many contexts.

## THE ORGANIZATION OF THIS BOOK

This book is organized into three sections: (1) The Victim-Defined Advocacy Approach, (2) Victim-Defined Advocacy Practice Issues, and (3) Systems Advocacy. The first section is about the framework for victim-defined advocacy. It begins with an overview and presents the core components of both individual and systemic advocacy. The first chapter also sets out the types of violence distinguished for advocacy purposes, discusses the reasons for moving to a goal of *safer* when working with individual victims, and explores why victims defining the advocacy is the foundation of this approach. Chapters 2 and 3 explore in detail the risks victims face and how their perspectives and priorities are formed. They focus on how victims analyze the dangers they face and how they make decisions and plans for the safety of themselves and their children. These chapters explore the complexity of victims’ experiences and illustrate how essential it is for advocates to discover each victim’s unique perspective. Chapter 4 explains how to implement each component of the approach, beginning with understanding each victim’s perspective and then working with each victim to strengthen her comprehensive plan.

Section II, Victim-Defined Advocacy Practice Issues, is about four areas in which practice issues regularly arise. Chapter 5 discusses advocacy with victims who remain in their relationship or otherwise in contact with a violent partner, ex-partner, or parent. Advocacy with and for children is discussed in Chapter 6, including the effects of violence, standards for child safety, what makes children safer, and working with parents and other caretakers. Advocacy with victims experiencing trauma, mental health, and/or substance use issues is discussed in Chapter 7. Along with the current research on trauma, the effects of violence and the interrelated issues of substance abuse and



mental health are summarized. Chapter 8 looks at violent partners, offering an overview of characteristics, causes, and interventions. The behavior of violent partners is key to strengthening safety plans. All four chapters in this section discuss the application of the victim-defined advocacy components in each of the practice issue areas.

Section III, Systems Advocacy, is about advocacy at a systemic level. The basic premise is that safety for all victims cannot be achieved if advocacy occurs within an environment that is not committed to this goal and does not support advocates, and solely involves helping victims maneuver through systems that may be ineffective or unresponsive. Advocates must also identify what victims need to be safer and then work to make those strategies and resources available. Chapter 9 begins this discussion with a look at the advocacy environment and how it affects both victims and advocates. Chapter 10 presents a process for victim-defined policy advocacy, along with a summary of evolving concepts to inform that advocacy.

Throughout the book, the examples and case stories are hypothetical although they are based on knowledge gleaned from years of advocacy and research.

## BACKGROUND AND ACKNOWLEDGMENTS

The revelation that advocacy with battered women needed to change began in 1986, shortly after passage of mandatory arrest provisions in Connecticut, as Jill Davies trained and provided legal consultation to advocates and Eleanor Lyon studied the new role of family violence victim advocates in court. Development of the woman-defined approach to advocacy began in 1988 as part of the Model Court Response Project, which provided the opportunity to study and consider the court's response to family violence cases. The lessons learned from battered women during this project led to an extensive exploration of the proper role of advocacy. One result of this exploration was Jill Davies' development of advocacy materials and training for the family violence victim advocates who worked in court. The core concepts of victim-defined advocacy were formulated as part of this early work, known as safety planning. Jill continues to be the catalyst for the development and evolution of victim-defined advocacy. Through her work with victims and advocates, her writing, and analysis, she continues to lead the exploration and refinement of this approach to advocacy.



The early work on woman-defined advocacy was informed by Eleanor Lyon's research and analysis. Eleanor evaluated the first pilot testing of materials and training and provided research support to the training and evaluation of the follow-up work with advocates using the approach. Eleanor has played an ongoing significant role in woman-defined advocacy as a community researcher, offering information, analysis, and support as the training and development of woman-defined advocacy has proceeded. Some of the most meaningful information in this book came from her federally funded studies of battered women's experiences in court, men's experiences in court ordered batterer's intervention programs, and multistate surveys of participants' experiences in domestic violence programs. Eleanor also placed the woman-defined advocacy model into the context of the current literature and thinking about family violence, battered women, and advocates.

We are both grateful to the many people who helped us:

- Victims, who courageously plan for their safety, sometimes taking great risks to help us understand what we need to know in order to help them. The many lessons they've taught us are the foundation of this approach and inform this book.
- Advocates, whose use of this approach confirmed its efficacy and raised the practical issues and questions that helped refine it. Thank you for all you do, every day, that makes victims safer.
- Greater Hartford Legal Aid, Inc. (GHCLA), whose leaders understand that the pursuit of justice requires a broad view of lawyering.
- The National Resource Center on Domestic Violence and Anne Menard, its executive director, for support of both Eleanor's research and the Building Comprehensive Solutions to Domestic Violence Initiative, directed by Jill. Each of these efforts informed the continued refinement of this approach.
- Cris Sullivan, for all she's done to contribute knowledge to the field and for writing the Foreword.
- Diane Monti-Catania, for her contributions to the first edition and for her belief that the concept of woman-defined advocacy should be presented in a book.
- Annika Gifford Brothers, Lonna Davis, Kaaryn Gustafson, Kara Hart, Anne Menard, and Jennifer Rose, for reading the draft manuscript and providing helpful comments.