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Cultural translation of a domestic violence intervention for small children: key policy and practice directions

Abstract

Background: This qualitative study responds to recent calls for innovation in domestic violence research in a review, which concluded that the field is dominated by studies that are quantitative and do not take a strong client and social work perspective. It examines Australian child and family support practitioners' perceptions of cultural translation of an activity-based play intervention for small children exposed to domestic and family violence.

Methods: The participants consisted of 335 practitioners, 178 of whom worked with culturally diverse and/or indigenous client groups. Analysis of response sheets involved elements of configurational case-based analysis, computational textual analysis, and critical discourse analysis.

Results: Language associated with cultural or indigenous concepts occurred with 3% and 5% frequencies, respectively, in 8494 instances of 39 concepts found in practitioner responses.

Conclusions: The “order of discourse” in this practitioner language offers theoretical understandings of in-practice challenges of cultural translation of interventions. Findings are discussed in terms of their implications for research methods, theory, and practice in domestic and family violence intervention.

Keywords: activity-based play interventions; child abuse; domestic violence.

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Introduction

There are 5600 articles or reviews listed in the SCOPUS database from January 2008 to January 2013 that include the terms “interpersonal violence” or “intimate partner

violence” or “domestic violence” or “family violence” in the title or abstract or keywords. Of these, 2003 also include the term “children” in the title or abstract or keywords. In the discussion that follows, the terms used in the studies cited have been reproduced in order to maintain accuracy in describing particular studies that distinguish these terms. However, in the main body of this study, the term “domestic and family violence” is used to denote violence included by all these terms.

Recent research on the effects of domestic and family violence on children

The importance of ending domestic and family violence is well known. Effects on early childhood are known to be potentially extensive, although recent reviews suggest that there is substantial variability in the outcomes for children of exposure to intimate partner violence [1]. Exposure to interparental violence has been linked to post-traumatic stress disorder, depression, and reduced cognitive ability. Unsupportive relationships and adverse experiences, such as witnessing domestic and family violence, may play a key role in the development of depressive styles such as self-criticism and dependency in adolescence [2]. The visual cortex of the brain is a very plastic structure, in which the brain regions that process and convey negative environmental input from abusive situations are modified [3].

Children exposed to intimate partner violence also experience a higher degree of diverse physical health complaints in sleeping, eating, self-harm, aches and pains, regardless of their exposure to other kinds of abuse [4]. Maternal intimate partner violence has been linked with higher mortality of children below 5 years old [5]. Fatal child abuse has been described in the literature most often for children 4 years and younger [6]. The long-term effects of early childhood stress on health may be explained through the mechanism of erosion of DNA segments (“telomeres”) linked to mortality and disease morbidity in adulthood [7].

Exposure to family violence during childhood is not necessarily a cause of intimate partner violence in adulthood; however, its presence has been linked across cultures to violent responses in adult relationships as well as severe behavioral and attitudinal issues in adult relationships [8, 9].

Implications of recent research for activity-based play interventions

Risks of negative outcomes from family violence for small children can be understood in terms of individual traits (e.g., self-regulatory capacities), nature of the abuse (e.g., its duration), exposure issues (e.g., degree and nature of violence), and family and parenting resources (e.g., available support) [10]. There is evidence that adverse childhood experiences are mediated by psychosocial characteristics and, consequently, interventions must help reduce these experiences as well as mediate their psychosocial outcomes [11]. This suggests the importance of cultural translation of psychosocial interventions and research that examines the ways by which different cultural contexts present challenges to and opportunities for such translation.

The importance of resources that can support generalist parenting programs for improving child-parent interaction has been emphasized within a framework of theory and accumulating evidence stating that parent-child interaction therapy may be effective in preventing child maltreatment [12]. However, interventions aimed at supporting maternal parenting need to be part of larger programs that, for example, also target depressive symptomatology. Research evaluating domestic violence interventions for children also suggests the importance of interventions that target the alleviation of guilt, self-esteem, building of trust, personal safety, assertiveness, and prevention of the abuse [13]. A study of children in crisis accommodation suggests that they produce narratives that are important to their development of positive ideation about their futures [14]. Other work has drawn on attachment theory to describe how insecure or non-balanced models of the relational self may be helpful in understanding the mechanisms of maladaptive outcomes among mothers and children exposed to intimate partner violence [15]. The development of evidence for specific interventions and mechanisms for their translation is a particular challenge of interventions informed by attachment theory, which address the insecure or disorganized attachments that maltreated children may experience with their caregivers [16].

Interactive resources, such as books for small children, also have the potential to foster resilience and help build positive relationships within and beyond the home [17, 18]. These sources also provide early intervention in the schematization of violence. For example, research indicates that witnessing family violence is associated, even more intensely in girls, with aggressiveness, not necessarily victimization [19]. Girls who have experienced childhood physical abuse may be more inclined to suppress anger, which may put them at greater risk of revictimization as well as perpetration of intimate partner violence [20]. Accordingly, purposive, play-based activity may have a role in mediating such gender differences and narratives of the self.

Translation studies in domestic and family violence

Relatively less is known in the domestic and family violence field about practitioner perceptions of the cultural transmission of resources used in activity-based play, which aim to build positive relationships and schema. The whole area of translation studies is relatively new in the domestic and family violence field. A recent review of knowledge translation in the field of violence against women and children stated that there is a substantial gap between research and practice; moreover, researchers and practitioners face major challenges in translating knowledge across different contexts, with consequences for meeting the needs of those who have been exposed to family violence [21]. This deficit is particularly notable in the building of theory about knowledge translation. Yet studies of maternal perceptions of the content and nature of educational intimate partner violence materials suggest that these do require specific adaptation to be culturally relevant [22]. This is partly due to the fact that domestic and family violence is produced in particular cultural contexts that may differently shape, for example, help-seeking behaviors [23]. The incidence of intimate partner violence may also be shaped by cultural contexts interacting with socio-economic disadvantage or physical disability for some minority groups [24, 25]. Yet motivating factors, such as observed child improvement and quality of relationships with staff administering an intervention, are also known to play a role in mediating the successful translation of interventions in domestic violence treatment programs for different cultural groups [26].

This study of practitioner perceptions of cultural translation issues in a domestic and family violence

intervention responds to calls for innovation in qualitative research methods in a recent review, which concluded that the field is dominated by studies that a) are quantitative, b) use the mothers as the informant, and c) are represented by traditional psychology and social medicine, rather than social work. These studies have found substantial support for the negative emotional and behavioral consequences that occur for children exposed to domestic violence suffer. However, many questions and problems remain unanswered [27].

Methods

Research questions

The three research questions were as follows:

- “What concepts are present in practitioner accounts of the value of ‘Safe from the Start’ as a play-based activity intervention”?
- “How are these concepts related to concepts about the cultural translation of the intervention for specific minority client groups defined as culturally diverse and indigenous”?
- “What does this suggest about the optimal future development of the intervention and the cultural translation of others like it internationally”?

Intervention

The intervention was comprised of a day-long training session presenting a resource kit (“the kit”) for use with small children exposed to domestic and family violence. The training session was led by one or two facilitators with practical experience in child and family services in the area of domestic and family violence. The intervention can be described as a form of play-based activity intervening in the psychosocial outcomes of domestic and family violence, including relationship building, i.e., comprised of age-appropriate story books, puppets, cards, etc., that are available from the non government agency website: <http://www.salvationarmy.org.au/Find-Us/Tasmania/Safe-from-the-Start-Project/>. Accordingly, the intervention was presented by the trainers as belonging to “a positive early intervention model”. The intervention was not designed to be used in a singular fashion, but rather to complement a wider program of intervention in domestic and family violence.

The training program had two parts as follows; 1) discussion of domestic and family violence research to raise awareness among participants of the nature and effects on children of this violence, and 2) description and interactive discussion of the contents of the kit and their possible use with children. Participants in the training received a wide range of materials to assist them in implementing the resource kit, including copies of previous evaluation reports of the pilot of the intervention, a booklet with descriptions of the contents of the kit and suggestions for their use, and a DVD showing child and family support workers using the resource kit materials with children.

Participants

The participants in the study were 335 practitioners attending (not necessarily from) 15 urban and regional centers in all eight Australian states. This represented 67.6% of those 495 who participated in the intervention administered over the 6-month period of its national implementation in 18 individual day-long training sessions. The recruitment of participants involved email flyers being sent with requests to forward these on to all potentially interested agencies, to 1) all child and family services agencies known to each state branch of The Salvation Army; 2) domestic and family violence networks in each state, national clearinghouses, as well as research institutes; 3) agencies that had expressed interest in the intervention previously; 4) advertisements in local newspapers; 5) advertisements on the intervention website; and 6) direct email circulation to child protection agencies, foster care agencies, crisis accommodation services, and other child and family support services identified through scrutinizing publicly available lists of such agencies. This recruitment method obtained the participation of a wide range of child and family support services workers: diverse child and family support staff to child protection staff to family and school educators, nursing consultations, mental health support staff, psychologists and psychiatrists. A total of 178 practitioners indicated that they worked with culturally diverse and indigenous client groups, 139 indicated a different answer, and 18 left this item on the survey form blank.

Given that the method also selected those willing to provide data, the widely recruited sample of participants may be considered useful to the qualitative aim of obtaining a broader understanding of the intervention (not necessarily representative). Accordingly, the data have value for rich theory building about cultural translation, and not measurement of intervention effectiveness or delivering findings representative of practitioners. The research received ethical approval from The Human Research Ethics Committee (Tasmania) network.

Data collection

The data were collected on a response sheet with 11 items, which were designed to be used by participants to record their impressions of the two components of the intervention (the training and resource kit) throughout the day in a “diary” or “journal” format. The open-ended questions (with prompts) targeted three dimensions of the resource kit as well as the training, including quality, appropriateness for clients, and capacity of the intervention to make a difference to clients or the practitioners’ ability to work with clients. Satisfaction ratings accompanied each open-ended question under the “resource kit” evaluation section of the data collection form as well as the training evaluation section. For example, for the “appropriateness” dimension, the survey form asked “What do you think about the appropriateness of the resource kit (e.g., is the resource kit relevant and well-suited to the needs of your client group?) In what way is the resource kit not a good match to your particular client needs”? For this dimension (“appropriateness”), participants were also asked to tick a box with options next to an item asking “The appropriateness of the resource kit – is it a good match to your client needs?”. The choices ranged from “very satisfied” and “satisfied”, “neither satisfied nor dissatisfied”, and “dissatisfied” and “very dissatisfied”. The training section of the evaluation form similarly had two

“appropriateness” of training questions, one open-ended and one a satisfaction rating. This data collection design allowed data about the resource kit vs. the training to be compared. This also allowed for the use data about satisfaction ratings to complement qualitative data across the three dimensions of interest.

Analytic procedure

The analysis of the survey forms involved a three-stage “critical computational textual analysis” using elements of three different methods, namely, 1) summary of types of configurations of satisfaction ratings provided by respondents using a simplified version of Boolean-based software drawn from case-based analysis, 2) quantification of the entire conceptual content of the survey forms using Bayesian-based computational linguistics software Leximancer, and 3) critical discourse analysis of the ways by which practitioners constructed concepts related to the cultural translation of the intervention for culturally diverse and indigenous clients, in order to establish an “order of discourse” about this translation.

Stage one—summary of the types of satisfaction rating configurations

A major challenge in managing categorical data, such as satisfaction ratings, is summarizing these data in ways that retain their configurational complexity at the individual case level. In this stage of the analysis, software for case-based analysis was used to summarize 335 configurations of individual satisfaction ratings on six items related to the kit and the training quality, appropriateness, and the capacity of the intervention to make a difference. Specifically, in this stage, we attempted to summarize the answer to this question as follows: “If each of the 335 practitioners provided a configuration of six satisfaction ratings, how can the overall set of these configurations be summarized?” The work of case-based researchers led by Charles Ragin, Professor of Sociology at the University of California, Irvine, which is described as qualitative comparative analysis (QCA), has been extensively applied across multiple disciplines, including health services, but not specifically in the analysis of domestic and family violence interventions [28–30]. The method has its variants and different elements, including those for the consideration of cases that lack empirical instances [31]. However, the fundamental principle involved focuses not on what case-based analysts call “correlational reasoning” but rather on summarizing datasets without losing their within-case configurational complexity. For the current study, it was important for the QCA software to summarize, using Boolean algebra, the observed configurations of satisfaction ratings provided by individual practitioners, in order to create an understanding of types of configurations, i.e., most common to least common configurations across the dataset.

Accordingly, in this study, which was primarily focused on analyzing language data using computational linguistics software and critical discourse analysis, a simplified summary of observed instances of configurations of satisfaction ratings was obtained using a relatively unsophisticated QCA software package called TOSMANA [32]. The configurational analysis in this study was descriptive and was completed in the first stage only, i.e., it

focused on cases that were classified as empirical instances. Readers interested in more technical details about the QCA method and more complex treatments of the method can be obtained from the textbook [31] and the accompanying software [33]. In this study, TOSMANA software was used to produce a table providing the distinct configurations of observed practitioner satisfaction ratings. The configurations were provided with information about whether they were obtained for those who did vs. those who did not indicate having culturally diverse clients and/or indigenous clients. Accordingly, stage one allowed the summary of these configurations of satisfaction ratings for these two groups, details of which can be used in observations of case-level differences between them.

Stage two—quantification of the conceptual content of the survey forms

In this stage, the relative frequency and co-occurrence of all concepts in the practitioner responses were mapped. For this purpose, Bayesian-based computational linguistics software Leximancer was used [34]. The algorithm-based software works iteratively to build and visually display the structure of large amounts of language data as a network of interrelated concepts. A wide range of data file types can be used, which include PDF files and spreadsheets. Text blocks the size of a paragraph comprised the main unit of analysis in the current work. A major advantage of the software is its capacity to provide multiple windows, which enable the analyst to work iteratively with the original source data. This allowed for multiple checks of the validity of findings and researcher input through, for example, merging of similar concepts for the purposes of analysis such as “multicultural”, “cultural” and “culture” as well as “indigenous” and “Aboriginal”.

The key analysis available in Leximancer (i.e., the concept map) was performed for this study. For the concept map, Leximancer was used to visually represent all survey forms as a set of interrelated concepts that were spatially mapped and color-coded in terms of their contextual proximity and relative frequency. This method of employing Leximancer in conjunction with critical discourse analysis is based on previous studies published in other fields [35, 36]. There are over 700 applications of Leximancer across the disciplines, including those in health services [37–39]. Readers can consult the validity study of the software for further technical discussion of Leximancer’s features [40]. Accordingly, this stage of the analysis helped quantify the content of language data supplied on the response forms.

Stage three—critical discourse analysis of the hierarchy of discourses in practitioner responses about cultural translation of the intervention

In this stage, a more traditional qualitative analysis was used to describe the language practitioners used in concepts related with culturally diverse and indigenous clients. Of the 39 key concepts in practitioner submissions identified in stage two by Leximancer, there were two concepts that captured practitioner language about cultural translation of the intervention, namely, “cultural” and “indigenous”. Practitioner comments about these concepts were analyzed using

critical discourse analysis to identify the order of discourses about cultural translation in the language of practitioners. This involved examining all the language instances of these two concepts identified by Leximancer in stage two, and describing them in terms of the values and knowledge about cultural translation privileged in the language of practitioners. Dominant to less dominant to least present discourses of cultural translation were identified.

In this study, the term “discourse” refers to the way that particular discursive practices or ways of narrating reality reproduce or “normalize” certain assumptions that privilege some social values and knowledge or marginalize others [41, 42]. Therefore, the “order of a universe of discourses” refers to the kinds of discourses or ways of meaning-making about social realities are privileged over others [41]. Thus, in the analysis for this stage, the identification of dominant to less dominant to least present discourses of cultural translation was not about counting the frequency and co-occurrence of concepts (quantification), but rather about analyzing the nuanced ways in which language was used by practitioners to privilege some understandings of cultural translation and place less emphasis on others. A very frequent reference to an issue of cultural translation may, in fact, be working to marginalize it. Conversely, infrequent references may work to privilege certain values or knowledge about cultural translation.

Critical discourse analysis is a complex and wide-ranging set of theories and practices for analyzing language that will not be detailed here. It is united by a focus on the ways by which different social groups create, through language, acceptance of different values and knowledge, resulting in the understanding in critical discourse analysis that language is a technology of power [41, 42]. Key theorists include Habermas [43], Gadamer [44], Foucault [42, 45] and Derrida [46–48]. Accordingly, in this stage, a key aspect of critical discourse analysis – the identification of a hierarchy of discourse about cultural translation – was used to better understand the nuanced aspects of the language of practitioners.

Critical discourse analysis has been extensively applied in thousands of studies across the disciplines. However, in studies of domestic and family violence, its application is only nascent. A SCOPUS search from January 2008 to January 2013 of all articles and reviews since 2008 with the terms “interpersonal violence” OR “intimate partner violence” OR “domestic violence” OR “family violence” AND “discourse analysis” revealed 10 studies in English with these terms in the title, abstract, or keywords. These 10 studies related to understanding the following: 1) constructions of self by women who have experienced this violence [49]; 2) the language women use in high stakes interviews for protective orders [50]; 3) police, judicial and parliamentary discourses on domestic and family violence [51–56]; 4) the ways that advocates in domestic violence construct this violence [57]; and 5) other cultural constructions of intimate partner violence [58]. The relatively greater presence of discourse analysis in socio-legal analyses in the field of domestic and family violence may relate to the wide dissemination of critical discourse techniques in sociology and criminology fields, and their association with the French philosopher Foucault, most notably his celebrated text *Discipline and Punish: The Birth of the Prison* [45]. Yet even this set of studies suggests that critical discourse analysis can take many different forms and levels of sophistication. In the current study, it was used to complement findings from the configurational analysis and the machine-based Leximancer quantification of the content of practitioner responses. The critical discourse analysis focused on the task of describing the evidence for an argument

about the order of discourses in the language of cultural translation used by practitioners.

Results

Configurations of satisfaction ratings

This section examines the configurations of satisfaction ratings obtained from practitioners, and whether they are different for practitioners who did vs. those who did not indicate they had culturally diverse and/or indigenous clients. Table 1 provides the individual configurations obtained from practitioners’ satisfaction ratings as follows:

- v1: quality of resources;
- v2: appropriateness of resources;
- v3: the difference resources could make to clients;
- v4: the quality of training;
- v5: how much the practitioner learnt from the training;
- v6: the difference the training could help the practitioner make to clients;
- C: practitioner group characteristic (where “1”=culturally diverse and/or indigenous clients, “0”=no such clients indicated, and “B” means both included); and
- N#: number of practitioners indicating that configuration of satisfaction (parenthesis indicates first those who indicated they have culturally diverse and/or indigenous clients and then the number who did not so indicate)

Ratings of “dissatisfied” to “very dissatisfied” were given a value of “0”; “neither satisfied nor dissatisfied” was given a value of “1”; and “satisfied” to “very satisfied” a value of “2”. There were a total of 314 survey forms in the table of configurations out of the total of 335 obtained in this study. Of these, 170 were from practitioners with culturally diverse and/or indigenous clients, and 144 were for those who did not so indicate. A total of 21 survey forms were excluded from the table because respondents left one or more satisfaction ratings blank.

Generally, configurations of satisfaction ratings did not suggest systematic differences (especially in dissatisfaction) between practitioners who indicated they had culturally diverse and/or indigenous clients vs. those who did not so indicate. By far, the largest group gave all very satisfied or satisfied ratings: 204 practitioners (64% of the total group supplying configurations), including 102 with culturally diverse and indigenous clients (60% of

Table 1 Configurations of observed practitioner satisfaction ratings.

v1	v2	v3	v4	v5	v6	C	N#
2	2	1	0	0	0	1	1
2	2	2	2	2	2	B	204 (102/102)
2	2	2	2	1	1	B	13 (7/6)
1	1	2	2	2	2	B	4 (2/2)
2	2	2	2	1	2	B	22 (15/7)
2	2	1	2	1	1	B	5 (2/3)
2	2	1	1	0	2	0	1
2	2	2	1	1	1	B	8 (7/1)
2	1	2	2	2	2	B	7 (5/2)
2	2	1	2	2	2	B	3 (2/1)
2	1	1	2	2	2	0	1
2	1	2	1	2	2	1	1
2	0	0	1	1	1	1	1
0	0	0	1	0	0	1	1
1	0	1	2	0	0	1	1
0	0	1	2	1	1	1	1
2	2	2	2	2	1	B	5 (2/3)
1	1	1	1	0	1	1	1
1	1	1	2	2	2	B	3 (2/1)
1	1	2	0	1	2	1	1
1	0	1	2	2	2	1	2
2	2	2	2	0	1	0	3
2	2	2	1	0	1	B	2 (1/1)
2	0	0	2	2	2	1	1
2	2	1	1	1	2	1	1
2	0	2	2	2	1	1	1
1	1	1	1	1	1	0	2
2	2	2	1	1	2	B	2 (1/1)
2	1	2	2	1	1	0	1
0	0	1	2	0	0	0	1
2	2	2	0	1	1	1	1
1	0	1	1	0	0	1	1
2	2	2	1	2	2	1	1
2	2	1	1	2	1	1	1
2	1	1	2	2	1	1	1
2	2	1	1	1	1	1	1
2	0	1	0	0	0	1	1
0	0	1	1	0	0	0	1
1	1	0	0	0	0	0	1
1	1	1	1	2	1	1	1
2	2	2	2	0	2	B	3 (1/2)
1	2	2	2	2	2	0	1
							314(170/144)

this sub-group) and 102 (70% of this subgroup) who did not indicate they had such clients. A total of 26 practitioners gave satisfaction ratings with at least one dissatisfied to very dissatisfied rating. Of these, 14 (8% of this subgroup) indicated they had culturally diverse and/or indigenous clients, while 12 (8% of this subgroup) did not so indicate. In other words, the same proportion of those who indicated they had culturally diverse and/or indigenous clients vs. those who did not so indicate also gave

satisfaction ratings with at least one dissatisfied to very dissatisfied rating. The most common instance with a dissatisfied rating of any kind is for three practitioners, only one of which was a practitioner with culturally diverse and/or indigenous clients.

The concept map

Figure 1 maps the 39 key concepts found across all 335 practitioner responses, which have been clustered by the software using the topical clustering algorithm. The total number of instances of these key concepts is 8494 in 4357 text blocks of about a paragraph each. The map is color-coded to suggest the relative frequency of concepts, such that the warmer (redder) the sphere, the greater the relative frequency of concepts (as in the color wheel). The relative placement or proximity of the concepts suggested their likelihood of co-occurrence when all other concepts in the analysis were considered. Thus, the holistic nature of the map showing both frequency and proximity or overall co-occurrence of concepts meant that most, but not all, concepts in the warmer circles were the most frequent. The gray lines indicate the typical storylines or pathways between multiple concepts, i.e., not just two concepts. The size of the gray dots for any one concept suggests the degree of their co-occurrence with the other concepts across all the participant responses. For example, the map suggested that, across all the practitioner responses, there was relatively little discussion of “indigenous” issues or those related with risk (as suggested by the location of these concepts in blue spheres), but when this discussion did occur, it was most often linked to discussion of family issues (as suggested by the grey lines). The “cultural concept”, like the “indigenous” concept, was also not so dominant and less well connected to specific concepts about the kit, where they occurred. In contrast, responses focused on generic issues related with ideas for the use of the resources in play and therapy (concepts located and linked in the red sphere).

The broad finding in Figure 1 showed that practitioner responses were most focused on issues related to generic uses of the resources in play therapy and in engaging the feelings of their client groups. By contrast, they were less focused on issues of cultural or indigenous relevance or the individual components of the kit. Language associated with indigenous clients or cultural concepts occurred with a 5% and 3% frequency across all 8494 instances of the 39 key concepts. The poorer connection of these two concepts to individual components of the kit suggests practitioners may not have repertoires of strategies for

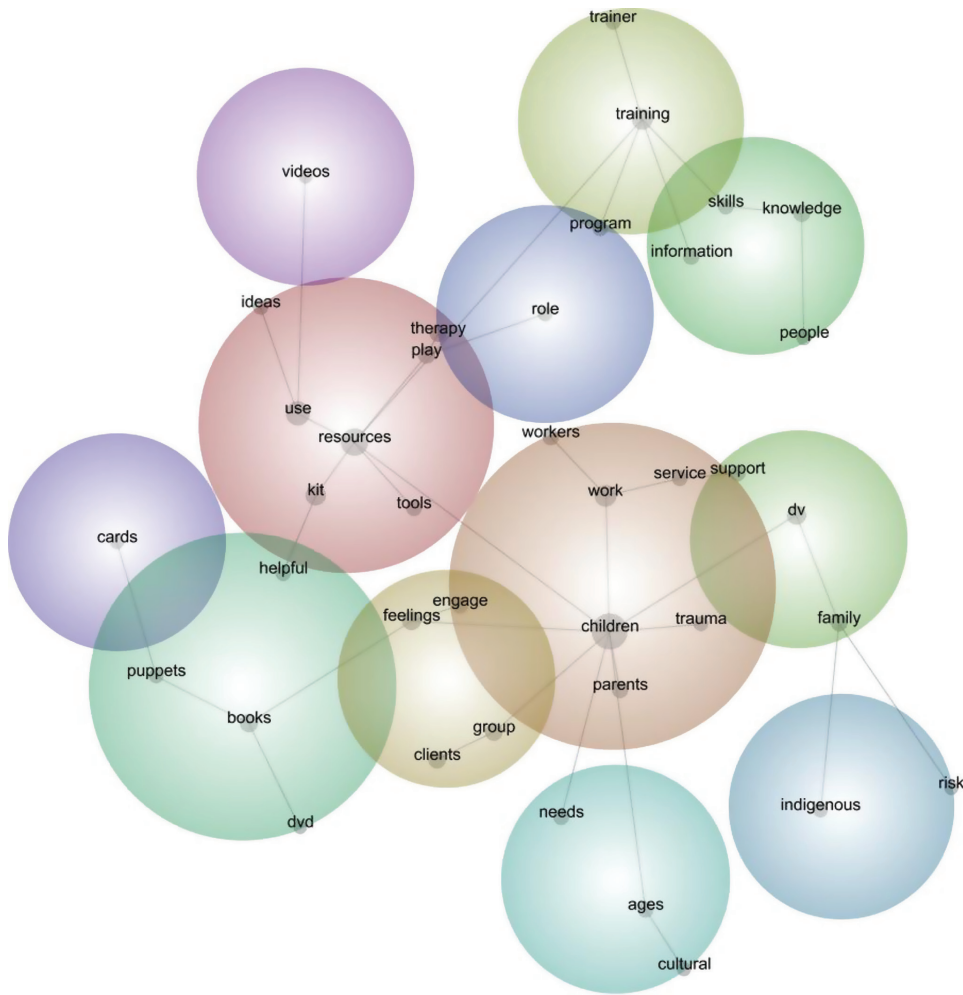


Figure 1 Concept map of participants' responses to the intervention (training and resource kit).

translating the activity-based play intervention to culturally diverse and indigenous clients. The low presence of the cultural and indigenous concepts must be considered in light of the fact that, while domestic violence as a concept had a relatively high presence in these responses, with a frequency of 22%, discussion of trauma only had a 4% frequency. In contrast, discussions of feelings, play, therapy, and engagement occurred with 21%, 11%, 10% and 10% frequencies, respectively.

Critical discourse analysis

The discussion that follows summarizes the results of the critical discourse analysis, in order to present an argument for a definition of the “order of discourses” regarding cultural translation in practitioner language. The cultural and indigenous concepts were described with reference to the 47 and 73 instances, respectively, of

these concepts across all practitioner responses. These two concepts were least well connected to play concepts and implementation concepts in the Leximancer analysis. Illustrative quotations were given to support the arguments about the nature of the hierarchy of discourses in these two concepts. Where the practitioner quoted indicated mostly satisfaction, dissatisfaction, or neutrality on the configuration of satisfaction ratings on the response sheets, this information was included (if different ratings were equally indicated, both were included, for example, “satisfied and neutral”). Place names given indicated only the location of the workshop involved though, in the available detail, information about the nature of the practitioner’s clients was also included.

The dominant discourse asserted the generic cultural translatability of the kit. In this discourse, the universal and fundamental characteristics of the intervention, as well as its essential perceived soundness, effectiveness, and diversity, made it potentially culturally translatable. In this

discourse, feelings were positioned as universally shared and represented in the kit. The resource kit was described as appropriate for a wide range of cultural and special needs groups and ages, not necessarily only very small children. As one “satisfied” Adelaide practitioner with client families with complex needs advised:

“I would rate the quality of resources very high as it provides child-centered ways of engaging with children from various backgrounds (cultural) and age groups. It introduces parents to... ways to interact with their children in strengthening their developmental potential ... builds parental knowledge, awareness, motivation to spend time with a child with a goal and sense of purpose”.

One “very satisfied” Toowoomba practitioner with small children in child safety contexts advised that *“the resources could be used across multi-faceted situations and cultural aspects along with providing the opportunity to express underlying feelings of children, adolescents and some adults”*. There were other practitioners, such as another “satisfied” Toowoomba practitioner working with indigenous children who advised that *“it is not 100% indigenous-specific but that isn’t a real issue. It is a good idea to use mainstream resources – less isolating”*. A “satisfied” Sydney practitioner with culturally diverse clients advised that *“I’m aware of the cultural-specific edition of this but, as far as books are concerned, I think they are universal concepts”*.

Accordingly, cultural translation was seen in this discourse as possible even without content specific to different cultural groups. This was also about the universality of feelings: as one “satisfied” Darwin practitioner responsible for training indigenous playgroup staff advised, *“The text books (in English) would not be meaningful to the indigenous staff I work with as they think and speak in other languages, but the concepts are transferable in the images to illicit talks about feelings”*. Cultural translation of the kit was viewed in this discourse as possible though not optimal, even in situations where it was used by non-indigenous workers with indigenous children. For example, another “satisfied” practitioner in Darwin, who advised that s/he was an indigenous worker with indigenous child clients, appeared optimistic the kit could be adapted by workers, stating *“I believe non indigenous workers/staff can deliver this kit, but it would be even better with indigenous support workers”*.

However, a contrasting lesser discourse was also produced, asserting that broadly culturally relevant content, which incorporated culturally diverse and indigenous contexts as well as language as a general good, was needed to credibly reflect the universal nature of violence. In this discourse, cultural translation was seen as arising from

the specificity of the cultural contexts of violence; furthermore, the cultural barriers presented by not having non-English language content were not so easily surmountable. In such discourse, culturally appropriate training in the use of the kit was important not only to achieve successful cultural translation but also to avoid the possibly harmful effects of disclosure. This discourse suggested that culturally specific content was seen as inherently desirable and its absence may be a potential limitation of the effectiveness of the intervention, regardless of whether practitioners gave satisfied ratings to the intervention. For example, one “satisfied” Sydney practitioner working in NGO and church groups with diverse clients stated that *“the mixture of books, toys, visual and tactile, was valuable although the representation of different cultures and different color skin was important if the kit was not to be ‘too mono-cultural’: obviously in our multi-ethnic society, it would be great to see these great resources in various languages”*. In such discourse, cultural diversity of content, very much including visual representations, reinforced the cultural universality of experience. More than that, it suggested the credibility of the intervention as speaking to – and ideally from within – different cultures. As one “dissatisfied and neutral” practitioner in Perth working with indigenous clients in child protection stated:

“the lack of indigenous-specific content meant that very little, if any, are Aboriginal-focused. As 100% of the children I work directly with are indigenous this is of concern. Many Aboriginal families will be a little dismissive of the message trying to be relayed – it doesn’t relate to them. They would recognize some of the books from school but would also realize that no one has brown/black skin. Both white and brown faces reinforce that many of these experiences are shared and occur in both indigenous and non indigenous families”.

For practitioners in this discourse, cultural translation involved an engagement of content with the culturally conditioned complexities of domestic and family violence. One satisfied Katherine practitioner working with both indigenous and non indigenous clients advised that the resources *“need to fit the context of the Northern Territory with two-way violence”*. Parental engagement in this discourse also relied upon the practical inclusion of non-English language content. Another “satisfied” practitioner in Sydney with culturally diverse clients indicated that *“I would read different books with the children and then encourage the mothers to read to their children. I would also like the resources in different languages so mothers with no English or limited English can read to their children”*. In such a discourse, culturally specific content was also important in managing risks of inappropriate

implementation and avoiding risky assumptions of generic translatability of content. For example, another “neutral” practitioner in Darwin who was working with indigenous children in remote communities advised that “some of the resources are relevant....[but we] would need to present this to our indigenous workers to explore appropriateness of resources”. He/she added that “the resource is presented in a way which allows anyone to use, however, if used inappropriately without proper training would actually harm children if issues that are disclosed are not dealt with in a safe therapeutic context”.

Another related lesser present discourse suggested that the kit would not translate culturally due to complex needs for very local cultural and geographic content specificity, which that could only be met through local consultative processes. This discourse often asserted the value of cultural specificity at the community level in a context in which local community knowledge, culture, and difference was positioned as generally not valued. For example, a “dissatisfied” practitioner in Darwin working with remote indigenous clients urged the resource designers to “include more indigenous-specific resources from communities. Many have produced their own story books and other child development/safety focused resources”. For at least one “dissatisfied and neutral” practitioner in Perth working with indigenous clients in child protection, meeting this need for local community-specific indigenous content was as complex as the landscape with which indigenous people have a relationship: “A possum as one of the puppets is relevant to places that have possums. There are not many possums in the Kimberlies so this is not a puppet (animal) that would be familiar to Kimberly children”. This discourse suggested that the process for creating culturally relevant content must be correspondingly local and regionally specific as well shaped by heterogeneous community consultation and engagement. As one “satisfied” Darwin practitioner with mixed indigenous and non-indigenous clients advised, “When the indigenous resources are made, there needs to be consultation with different states, not just Tasmanian indigenous people as they are so different”.

This discourse also suggested that this consultation would involve adding local resources to the kit primarily for local use and in flexible alternative formats. As a “satisfied and neutral” Katherine practitioner advised, “the resources are useful for our playgroup centers [and] the books are excellent [but] the designers must consider indigenous parents and their literacy levels”. This practitioner then requested the designer to consider including “small day packs” or smaller combinations of the resource kit aligned with the needs of local communities. These references in this discourse were related not only to indigenous

content, but rather locally defined rural and remote indigenous cultural content as well.

A third lesser discourse was produced about the personal style and cultural knowledge levels of the trainers being central to the creation of the cultural empathy and confidence required for successful cultural translation by practitioners. Cultural translation was also described in this discourse as a function of rigor and attention to cultural detail by trainers, in order to inspire practitioner confidence, which was quickly lost with culturally inappropriate language use and errors of cultural expression. In this discourse, it was critical that the ability of language use by trainers reflected their recognition of the cultural history, including struggles to re-appropriate language appropriated by the dominant culture. The language of practitioners about cultural relevance related largely to aspects of the kit content, not the training content or trainers. However, there were some comments about the style and cultural knowledge levels of the trainers and their importance in helping those who were already working for indigenous clients feel confident with the cultural translatability of the intervention. In relation to whether the trainers were appropriately inclusive of indigenous culture, one “satisfied” Darwin practitioner working with remote clients stated, “As an indigenous Australian I was glad to hear ... the opinion of the facilitators that provided awareness of how our indigenous people provide and support our extended families through tough times” adding that “the facilitators were passionate and sensitive and know their stuff”. In such discourse, culturally relevant language use was seen as sentinel evidence, among trainers, of empathy with cultural history and the struggle for recognition of this history in language.

Conversely, language use was also seen in this discourse to also work against the goals of culturally inclusive interventions and practitioner confidence in the cultural relevance of the intervention.

A “satisfied and neutral” Darwin practitioner working with adolescent and young adult clients from diverse cultures advised that the use of language in the training session could work to disempower indigenous people: “‘family violence’ was coined as a way of describing the experience of indigenous families re: aunty, uncles, brother and cousins... using these words interchangeably, i.e., domestic violence and family violence, takes away from indigenous experience and is disempowering”.

Accordingly, the comments on the cultural translation of the training, like the comments on the kit, also suggested the importance of creating content, in which practitioners can see and experience their clients’ own knowledge and experience, including in language use and use of key terms.

A fourth lesser discourse was related to the importance of empowering research evidence used in the training delivery, in order to facilitate practitioner confidence in cultural translation.

This discourse also involved practitioners bringing their knowledge to that evidence to see the connections between them as well as the task of cultural change. In this discourse, research was positioned as having a universal value and as offering a language, in which culturally enshrined beliefs about domestic violence could be challenged across different cultural contexts of violence. The use of evidence to deliver training was, therefore, described as an essential part of creating practitioner confidence in the translatability of the kit content, as well as of empowering practitioner efforts at cultural transformation to prevent domestic and family violence. One “satisfied” Sydney practitioner with clients from diverse cultures emphasized, as did others, the importance of an “evidence-based” approach to training because, while *“training is also about sharing ideas and networking, domestic violence and child protection happens across all the cultures and in certain cultural frameworks beliefs do not prefer the feminist approach. The research papers are helpful documents to challenge some of those beliefs”*. Yet in this discourse that privileged research evidence with international currency, the assumption was not necessarily that the training in its present form delivered all the necessary evidence for modeling practice. Another “satisfied” Adelaide practitioner with client families with complex needs suggested the need for more *“Information on effective resource/tools used in other Australian states and internationally”* as well as evidence-based information about *“role plays on how to interact/engage with CALD and Aboriginal children”*

A least present discourse of practitioner roles positioned the cultural relevance of kit content as a challenge related with colliding program aims, roles, and resources in different child support contexts. In this discourse that valued practitioner roles, conflicting program roles could make cultural translation difficult. Practitioners in remote child support contexts with existing programs also suggested that they needed more specific support, which translated the resources to these existing programs. As one mostly “dissatisfied and neutral” practitioner with remote Aboriginal clients observed, *“while I might be able to share knowledge about the resource kit, the ten week program that is delivered has a focus on the parent-child relationship and reflective practices and I would find it difficult to incorporate these resources”*. Yet practitioners also positioned themselves as active translators whose resourcefulness could overcome the cultural translation limitations of the kit.

In this language, which valued practitioner roles as a limiting and facilitating factor in cultural translation, there were also practitioners who advised they had their own suites of resources that are culturally relevant. Such language could suggest that this alternative practitioner design of culturally relevant interventions made the kit’s limitations, and perhaps the kit itself, much less important. For example, one “satisfied and neutral” Darwin practitioner with indigenous clients advised that *“the resources that I have used (from my own resources that I already own) have already been well received”*. Such active translators used a language characterized by professional autonomy and resourcefulness or inspired resource use. For example, one “satisfied” Melbourne practitioner advised that *“the vast majority of our clients are from CALD backgrounds”* yet while *“the mothers would not be able to use the books (most of them) without an interpreter, we do have different cultural workers that would be able to do group sessions and we could do translations and attach these to each book”*.

In a second least present discourse, cultural translation was also described as being about access and related affordability issues. This was a language of local professional and personal struggle and hardship, but also personal, as opposed to professional resourcefulness. In such a language, the obstacles of workplace and profession were overcome by personal commitment at high and sometimes unsustainable costs. For example, one “satisfied” practitioner in Katherine, working with indigenous clients advised that, *“as I am a remote school counselor with a zero operation budget, it is often difficult for me to access great resources such as these unless I purchase them from my own personal funds, so some information on a grant or a way to access to the kit would be great”*.

Table 2 summarizes the key discourses of cultural translation in the language of practitioners in this study and the extent to which they were dominant in these data.

Discussion

This study suggested some of the complex challenges of cultural translation of interventions, in a context in which much domestic and family violence research is not qualitative or centered on broader child and family practitioner perceptions. It responded to needs for better theory on, and directions for, developing interventions for diverse cultural contexts, in light of evidence that interventions targeting resilience, narratives of the self,

Table 2 Hierarchy of discourses on cultural translation in the language of practitioner concepts of “culture” and “indigenous”.

Discourse definition	Key values and knowledge in this discourse	Presence in the hierarchy of discourses
Generic cultural translatability	The fundamental soundness, effectiveness, and diversity of an intervention facilitates cultural translation across the universal contexts of feelings.	Dominant
Broadly culturally relevant content	Culturally appropriate contexts and language in an intervention are a general good and help overcome practical barriers of cultural translation, thus limiting culturally influenced risk.	Lesser discourse
Local cultural and geographic content specificity	Complex needs for local cultural and geographic content specificity should be met through local community consultative processes and flexible formats.	Lesser discourse
Personal style and cultural knowledge levels of trainers	Central to creating the cultural empathy and confidence required for successful cultural translation by practitioners. Loss of practitioner trust can occur through culturally inappropriate language use and errors of cultural expression that suggest a lack of knowledge of the cultural history of client groups.	Lesser discourse
Culturally empowering research evidence supporting intervention	Research evidence can facilitate practitioner confidence in cultural translation, thus allowing practitioners to bring their knowledge to that evidence to see the connections between it and the task of cultural change.	Lesser discourse
Colliding program aims and roles in different child support contexts	Conflicting program roles can make cultural translation of the intervention difficult. Practitioners can be active cultural translators, but this is reliant on professional autonomy and resourcefulness.	Least present discourse
Access	Cultural translation is a function of access understood as affordability in contexts where practitioner personal commitment is needed to overcome the obstacles of workplace and profession.	Least present discourse

and relationship-building, are important to minimizing the negative effects of domestic and family violence on children.

In examining practitioner perceptions of cultural translation, this study suggested the value of combining elements of novel software and methods for analyzing qualitative data. The analysis of configurations suggested the potential of configurational analysis for understanding categorical data at the case level, suggesting no systematic difference in satisfaction with the intervention between practitioners who indicated that they have culturally diverse and/or indigenous clients and those who did not so indicate. Moreover, the machine-driven quantification of the language of practitioner responses identified the overall limited presence of concepts to do with cultural relevance and indigenous clients in the dataset, thus raising questions about the extent to which these practitioners possessed repertoires of strategies for translating the activity-based play intervention to culturally diverse and indigenous clients.

The critical discourse analysis built on the first two stages presented an argument about the more nuanced meanings of text selected by the Leximancer software, thus offering a picture of the order of discourses in the language of cultural translation. The key findings of this analysis suggested that the construct of cultural translation is a multi-faceted one, which involves different levels and mechanisms of translation. Table 2 offers a number of specific theoretical constructs for understanding the cultural translation of complex interventions. It suggests that a new construct of “generic cultural translatability” may be more important than has been previously understood. Nevertheless, more work needs to be done in order to investigate the generic features of culturally translatable interventions that do not necessarily have culturally specific content, and how the generic strengths of such interventions can be better developed.

In relation to developing the cultural specificity of the intervention, the discourse analysis suggested that a distinction could be made between broadly culturally

relevant content as well as more local cultural and geographic content with local community relevance. It suggested that the cultural translation of such interventions must focus on constructions or levels of cultural translation. The study also suggested that the creation of styles of cultural translation confidence in practitioners is important, and is perceived to be linked to the personal style and cultural knowledge levels of the trainers and their skilled deployment of culturally empowering research evidence supporting interventions.

Table 2 does, however, need to be interpreted with caution, in light of the machine-driven Leximancer analysis suggesting that not only were cultural and indigenous concepts not dominant in these data, where they were present they were poorly connected to concepts of play and implementation of the intervention. Furthermore, the study was not supported by empirical evidence of the extent to which these particular practitioner respondents were, as a group, generally representative of their professions or were proficient in the task of cultural translation (in general) or translation of the present intervention (in particular). Accordingly, the practical use of Table 2 is to challenge limited understandings of cultural translation in building interventions, with the awareness that the in-practice reality may, in fact, be far more complex and demanding.

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