3

PHOTO BY HAFM JANSEN

Developing a Research Strategy

Topics covered in this chapter:

Different types of research
The research process
Choosing a research topic and objectives
Formulating your research questions
Choosing a research design
Quantitative or qualitative methods?
Population- or service-based research?
Collaboration between researchers and activists
Drafting the protocol

Developing a research strategy may be the most crucial task in any research project. The entire project can be derailed by errors in this phase. Common errors include research questions that are not well conceptualized or articulated, a research design that is not well suited to the task, or methods that do not match the needs of the project or the skills and resources at hand. With proper planning, however, these pitfalls can be avoided.

Which elements are most critical to developing an effective **research proposal protocol**? This chapter begins with a brief overview of the different types of research and the roles they can play in strengthening the global response to violence against women. It continues with a discussion of the early steps in the research process—namely, formulating the research question and objectives—and gives examples that show how these concepts can be applied to issues of violence.

Next it describes some of the more common research designs used in social science and public health research and discusses the advantages and disadvantages of each. Box 3.1 provides a study checklist of the tasks that researchers need to address throughout the research process. Asterisks denote elements most relevant for researchers using a quantitative approach (e.g., a community survey).

DIFFERENT TYPES OF RESEARCH

There are many different types of research and the language of research can be daunting. For the purposes of this manual, we

TABLE 3.1 DIFFERENT KINDS OF RESEARCH

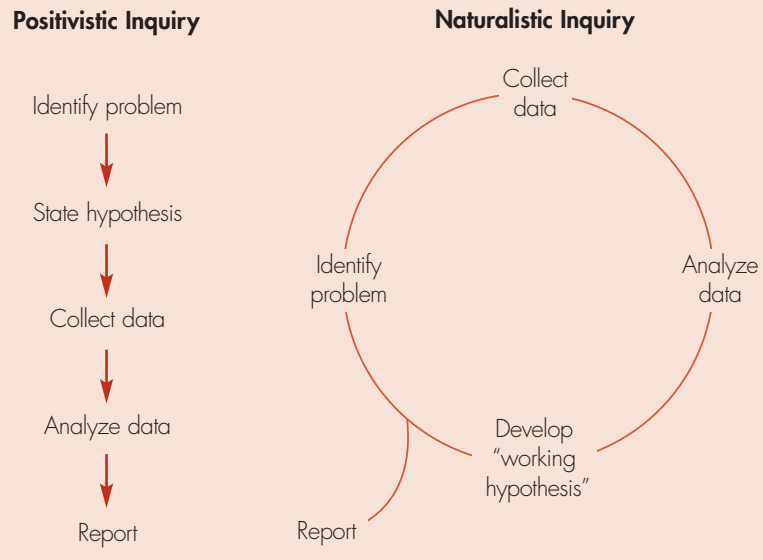
Type of Research	Purpose
Basic	To increase knowledge and advance theory as an end in itself
Applied	To understand the magnitude, nature and/or origins of social problems in order to identify solutions
Formative	To facilitate the development of an intervention (e.g., a program or policy) or help develop quantitative instruments
Operations	To monitor and improve ongoing interventions
Evaluation	To evaluate the impact/effectiveness of completed interventions

have adopted the following typology to describe the many different types of research (see Table 3.1).

Basic research is dedicated to advancing theory and may not necessarily answer questions that have obvious program or policy implications. **Applied research** uses many of the same techniques but concentrates on asking questions of more immediate, practical relevance. **Formative or exploratory research** tends to be less in-depth and is geared toward generating the background insights and knowledge necessary to pursue further research or to design an actual intervention. **Operations research** concentrates on improving the process of ongoing interventions. **Evaluation research** helps evaluate the impact or success of interventions.

This manual concentrates primarily on the logic and tools of formative and applied research. All types of research are important and can make substantial contributions to knowledge in the field of gender violence. Theory building, evaluation, and operations research are complex fields in their own right, however, and are beyond the scope of this book.

FIGURE 3.1 THE RESEARCH PROCESS IN QUANTITATIVE AND QUALITATIVE RESEARCH



(From Dahlgren et al, 2003.[1])

THE RESEARCH PROCESS

Four basic steps are common to virtually all research projects:

- Identify a problem to study
- Collect data
- Analyze the data
- Report the results

Box 3.1 presents a more detailed list of the steps that are commonly taken to achieve the goals of the study. The order in which these steps are performed and the techniques used to achieve them may vary widely from study to study depending on the researcher's theoretical framework—the underlying assumptions about how knowledge is produced.

The two main traditions within research—positivistic and naturalistic inquiry—approach the enterprise in distinctly different ways. **Positivistic inquiry**, also known as science-based or deductive inquiry, generally starts with a hypothesis and proceeds to test it in a systematic and linear way (see Figure 3.1). In contrast, **naturalistic inquiry** (also known as **interpretive inquiry**) concentrates on studying the natural environment without manipulation or predetermined constraints on the outcome. The research process in naturalistic inquiry tends to follow a circular path. A

general theme may be identified for study, and the research question becomes more focused as additional data are collected and analyzed. This is referred to as an **emergent design** because the actual focus of the study and even the methods used for data collection and analysis may emerge as the study progresses. Naturalistic studies tend to use qualitative research methods and positivistic studies tend to use quantitative methods. Both traditions can be either descriptive or analytic and both can play an important role in the study of violence against women. This manual presents examples from both approaches.

CHOOSING A RESEARCH TOPIC AND OBJECTIVES

The first step in any research endeavor is to identify a problem or area that could benefit from further investigation. In the field of violence there are hundreds of topics worthy of further study. One simply needs to determine what kind of information is most needed in a specific context.

The next step in the process is to narrow the focus of inquiry to a topic amenable to investigation. Guiding questions here are: What do you want to know and what is worth knowing? Researchers generally begin to narrow their topic by gathering and reading all the relevant articles and books on the subject (also known as a "literature review"). It is very important to identify what is already known about an issue before deciding on a research topic. Otherwise, you risk either "reinventing the wheel" or investigating questions that do not contribute to advancing knowledge or improving people's quality of life.

When the research impulse emerges from the need of a service provider, an NGO, or an activist group, it may be relatively easy to define a research objective. For example, you may be a family planning provider who wants to know the degree to which coercion

BOX 3.1 STUDY CHECKLIST

Following are some of the most important steps that will need to be taken in the course of most studies. There may be some differences according to whether the research is based primarily on quantitative or qualitative methods.

Problem formulation

- Explore the research problem through contacts with community representatives, health workers, local women's groups, and through a review of the published and unpublished literature.
- Formulate the research problem; discuss within the research team and with others concerned to get suggestions and identify a conceptual framework.
- Formulate and decide on research objectives, study design, study area, study population, and study methods.
- Operationalize the variables under study.*
- Design an appropriate sampling plan or strategy.
- Prepare draft questionnaire.*
- Plan for initial data analysis.
- Translate materials, questionnaires, forms.
- Plan for study personnel, equipment to be used, transport, accommodation, finance, and other logistics.
- Write a preliminary study protocol.

Organization

- Obtain consent from the participating communities (individually or via representatives).
- Obtain consent from other local, district, or national authorities concerned.
- Obtain financial support.
- Obtain ethical clearance from ethical review committee.
- Develop manual or instructions for fieldworkers.
- Organize support network for women participants and fieldworkers.
- Obtain educational materials on violence for use by study participants.
- Recruit fieldworkers.
- Train fieldworkers.
- Pilot study of organization, questionnaire, equipment, standardize measurement procedures.*
- Revise questionnaire, instructions to fieldworkers, study protocol.*

Fieldwork

- Supervise fieldwork.
- Edit interviews to identify errors.*
- Maintain contact with the local community to ensure a good participation in and support for the study.
- Hold "debriefing" sessions with fieldworkers to avoid "burnout."

Analysis and reporting

- Control data entry to minimize errors.*
- Discuss quality of data, difficulties with certain questions, and routines with fieldworkers.*
- Inspect the data matrix together, collaborate with fieldworkers in the control and clearing of data.*
- Perform preliminary analysis, discuss with the research team and with community representatives and relevant authorities.
- Complete final analysis and interpretation.
- Report back to community, health authorities, and political authorities. Discuss consequences and possible actions.
- Present results in reports and publications both for local and broader audiences, where relevant.
- Plan for intervention and evaluation.

** These steps are particularly relevant for quantitative studies.*
(Adapted from Persson and Wall, 2003.[2])

and abuse affects your clients' interest in and ability to use different methods of contraception. Or you may be the director of a women's shelter who wants to know what happens to women once they leave your care. Even here it is important to investigate what may already be known about the topic, either in the research literature or by others in the community.

The best way to build trust and long-term allies is to include individuals and organizations in the process of establishing research topics and questions.

When the motivation for research comes from outside the local community, perhaps from a university or government agency, it is especially important to to involve others—preferably service providers and activists—in the process of refining your research topic. One way to do this is to consult with local **stakeholders** or individuals who, by virtue of their work and/or life experience, may have insights into questions that need to be asked, and answered. This can take the form of consultation with a local advisory board, or individual meetings with women's groups and others who may have opinions on what research would be useful to pursue. Consulting with potential stakeholders early in the process can help ensure that the research is both relevant and doable, and it can help build trust and alliances with the very groups that will probably be in a position to use and disseminate the findings. Too often researchers only seek out local women's groups or other nongovernmental organizations when they want access to a research population (e.g., approaching a local shelter in order to find "abused women" to interview). Not surprisingly, this can breed resentment and distrust.

Decide on a research design or on data collection methods after you decide what you want to know.

FORMULATING YOUR RESEARCH QUESTIONS

The next task is to express your research interests in simply worded, direct questions, preferably one question for each topic. The research questions should support your research objectives. Table 3.2 gives several examples of how you might go about developing research questions. You may start out with many more questions than can be resolved in a single study. If you do, trim the list to a manageable number. This can be a sensitive process, particularly if you are balancing the needs of different actors. For example, the kind of information that a governmental women's institute would like to collect on violence may be quite different from the data that women activists need for advocacy purposes, or what a researcher might consider important from a theoretical perspective. Although reaching a consensus regarding the research questions can be time-consuming, including the perspectives of stakeholders at this stage is likely to greatly increase the potential impact of the study results.

Remember that as a rule, research questions in qualitative research can be initially more general, because they will be refined as data are collected and analyzed. However, in quantitative research, when conducting surveys, for example, you need to determine the research questions before data collection begins because they form the basis for establishing the hypotheses to be tested. (See Table 3.2.)

CHOOSING A RESEARCH DESIGN

Many organizations interested in using research to improve the quality of their programs or services make the same mistake: They choose a study design before clarifying exactly what information is needed. We recommend that you carefully consider alternative study designs, and choose one that best addresses the research objectives and is most likely to answer the research questions you have

developed. This decision must, of course, take into account what is feasible given a project's material and human resources. If you cannot implement the most appropriate design for a given research question, it is better to change the focus of the research or to modify the design. A poorly designed study may actually do more harm than good. For example, a survey carried out with a sample size that is too small to yield significant results may underestimate the prevalence of violence or its impact on a given population, which could in turn negatively affect policies or program funding.

While there is a wide range of different research designs available to address different research questions, this manual will

TABLE 3.2 SELECTING A RESEARCH DESIGN

Examples of different methods that might be used for different research questions. Descriptions of the specific methods are provided in later chapters.

Research Objective	Research Question	Possible Study Design
A Cambodian woman's advocacy organization wanted to determine how widespread violence was in Cambodia and how women responded to domestic violence. They also wanted understand how community members viewed victims and perpetrators of abuse. The purpose of the research was to bolster lobbying efforts and to produce a public awareness campaign.[4, 5]	How common is abuse by an intimate partner in Cambodia? How common is forced sex? Who are the perpetrators? Where does the violence take place? In the home? On the street? At work? Other places? To whom do women turn after they have been victimized? What services do they think are important? How commonly do community members subscribe to common rape myths?	Population-based survey of men and women Focus group discussions with community leaders In-depth interviews with survivors of violence
An international organization working with Somali refugees in Kenya was interested in finding out more about sexual violence in the refugee camps. Aid workers had heard rumors that a number of women in the camp were raped when they left the camp to get firewood and feared that some pregnancies may have been the product of forced sex by guards or bandits.[6, 7]	Do women in the camps feel at risk of rape? What are the most common circumstances of forced sex? Who are the perpetrators? What do women and men think could be done to improve women's safety?	Survey of women in the camp In-depth interviews Participatory appraisal
The International Planned Parenthood Federation, Western Hemisphere Division (IPPF/WHD) initiated a program to integrate screening and care for survivors of gender-based violence within reproductive health programs in Venezuela, Peru, and the Dominican Republic. The program managers wanted to evaluate how the program had succeeded in changing the attitudes and practices of health providers and whether women felt satisfied with the care they were receiving.[8]	What did the health promoters know about domestic violence prior to the training? What did they learn during the training course about the identification, assessment, and referral of abused women and children? Was there a positive change in providers' attitudes towards victims of violence? How many women attending family planning and sexually transmitted infection clinics were asked about violence? How many were appropriately referred according to the protocols developed? How satisfied were women with the care they received at the clinics?	Before and after surveys of providers' attitudes and knowledge Review of service data Focus groups with providers and clients Exit interviews with clients
A Voluntary Testing and Counseling (VCT) clinic in Tanzania was interested in finding out whether the threat of violence after disclosure of HIV status was an obstacle for women to come in for testing. The program managers also wanted to know whether violence was a risk factor for women contracting HIV.[9]	What percentage of women attending voluntary clinical treatment services have been physically or sexually abused by their partners? Did the violence take place before the testing or afterwards? Was fear of violence an important issue in women's ability to protect themselves from HIV? Was fear of violence a reason that women might be reluctant to go for VCT?	Survey of clients In-depth interviews Focus groups with community men and women

(Adapted from Shrader, 2000.[3])

focus on five broad types of designs that are often used in public health research.

Quantitative approaches

- Cross-sectional surveys
- Cohort studies
- Case-control studies

Qualitative approaches

- Rapid assessment techniques
- In-depth qualitative studies

These study designs will be described in greater depth in Chapters 4 and 5.

QUANTITATIVE OR QUALITATIVE METHODS?

Quantitative research methods produce information that can be presented and analyzed with numbers, such as the percentage of women who have been raped or who attend shelters for battered women. These methods are drawn largely from the fields of epidemiology, sociology, economics, and psychology. In contrast, **qualitative** methods gather information that is presented primarily in text form through narratives, verbatim quotes, descriptions, lists, and case studies. Qualitative methods are primarily borrowed from the disciplines of anthropology, sociology, nursing, and psychology. As we mentioned earlier, although research methods are not necessarily tied to a specific theoretical tradition, quantitative methods tend to be used in research using a positivistic or post-positivistic framework, whereas qualitative methods are more associated with the naturalistic or interpretive framework.

__Quantitative methods__ usually produce findings that can be summarized in numbers. __Qualitative methods__ produce results that are commonly summarized in words or pictures.

__Quantitative methods__ tend to provide less in-depth information about many people, while __qualitative methods__ give more detailed information about relatively few people.

The two approaches represent different **research paradigms**, or views about the nature of reality and how knowledge is produced. The positivistic paradigm assumes that there is only one true version of reality and that it can be uncovered through scientific research. In contrast, the naturalistic paradigm assumes that reality is subjective rather than objective—it exists in the views, feelings, and interpretations of individuals, including the researcher. According to this perspective, many different and equally valid versions of reality may exist at the same time, and some of these versions may actually be created through the interaction of researchers and subjects. Positivistic researchers try to reduce outside influences or **bias** to a minimum, whereas naturalistic researchers believe that research is inherently biased. They try to be aware of different sources of subjective bias, for example, by keeping reflexive journals of their own reactions and thoughts throughout the research process.

A third paradigm has emerged in recent years, known as a critical or "emancipatory" paradigm.[10-12] According to Ford-Gilboe and colleagues, "The aim of research within the critical paradigm is the development of approaches that have the potential to expose hidden power imbalances and to empower those involved to understand, as well as to transform, the world."[12] Critical theory is embraced by most feminist and participatory researchers, and because it emphasizes uncovering power relations based on class, gender, and ethnicity, it is particularly well suited for research on violence against women.[13] As Ulin and colleagues point out, "An important premise of feminist theory is that social life and behavior are constrained in various ways by what is considered acceptable behavior based on gender. Feminist research focuses on the political dimension inherent in understanding these constraints from the standpoints of

people in different power and gender positions."[14] Because the underlying goal is to contribute to social change, critical researchers tend to be more pragmatic in the use of methods, and often use a combination of qualitative and quantitative data depending on what is likely to be most persuasive to policy makers and to the public.[12]

Quantitative methods are useful for drawing conclusions that are valid for the broader population under study. They are particularly appropriate for measuring the frequency of a problem or condition and its distribution in a population (for example, how many women in a community have experienced violence and which age groups are most affected). Surveys are often used to obtain information about people's opinions and behavior, for example through Knowledge, Attitudes, and Practices (KAP) surveys. When quantitative data are collected about a group of people that is chosen using special methods known as "random sampling techniques," it is possible to carry out statistical analysis and to generalize the results of the study to a larger population. (For more information about sampling techniques, see Chapter 7.) If the target group of the program is not very large—for example, if it is limited to a single community—then it may be possible to survey all homes or individuals in the study population (i.e., conduct a census).

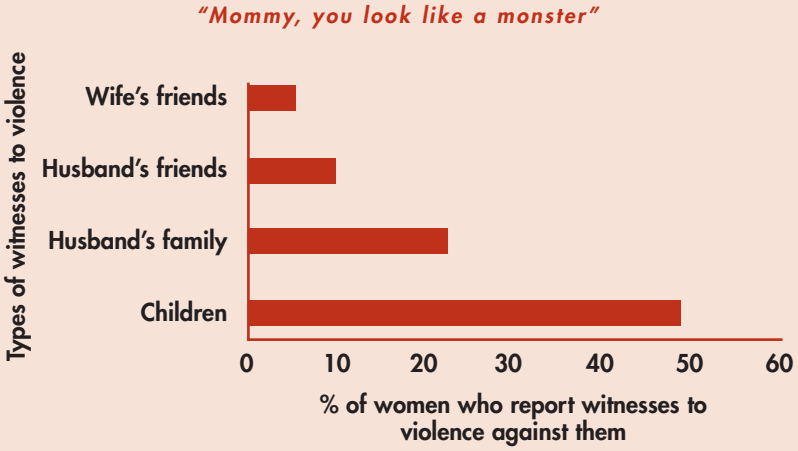
The main disadvantage of surveys is that they often provide fairly superficial information, and may not contribute much to understanding complex processes or their causes. For example, a survey may indicate how many women are experiencing violence or how many have heard an educational message, but it provides less information about how women experience violence, or how well they understood the educational message. Qualitative methods are more appropriate when the aim is to gain understanding about a process, or when an issue is being studied for the first time in a particular setting. Qualitative results allow you to understand the nuances and details of complex social phenomena from the respondents' point of view. Although you cannot say your findings are true for everyone, you can reveal multiple layers of meaning for a particular group of people. This level of understanding is particularly important when studying human behavior and trying to discern how it interacts with people's beliefs, attitudes, and perceptions.

As an example, the National Committee for the Abandonment of Harmful Traditional Practices in Mali, a network of organizations that work to discourage female genital mutilation (FGM), wanted to learn why some approaches had been more successful than others in motivating villages to abandon FGM. Instead of carrying out a population-based survey to measure individual behaviors and attitudes towards FGM, they decided to carry out a qualitative study in three villages where the practice of FGM had been abandoned. Although this study did not give information about the number of villages that had taken this step, it provided very rich information about the different issues and considerations that helped village leaders and community members make their decision. For the purpose of improving community-level interventions, this study was much more useful than a survey would have been.[15]

Most research objectives are best achieved through a combination of qualitative and quantitative methodologies. We encourage researchers to use a variety of methods to look at the same issue, or **triangulation**, to enhance the validity and utility of their research. Because triangulation allows you to view your subject from different perspectives and to look for potential inconsistencies, it increases the validity and trustworthiness of

Triangulation *refers to the use of more than one method to look at the same issue. It can also involve the use of one method on different study populations. Triangulation helps to ensure that your findings are trustworthy, or convincing to others.*

FIGURE 3.2 AN EXAMPLE OF COMBINING QUALITATIVE AND QUANTITATIVE DATA



"When he would beat me, my daughters would get involved in the fight. Then he would throw them around in his fury, and this hurt me more than when he beat me. …and once, I was recovering after he had beaten me, and my daughter came up to me and said "Mommy, you look like a monster." And she began to cry, and what really hurt me wasn't so much the blows, it was her sobbing and the bitterness that she was feeling… *Survivor of violence from Nicaragua*

(From Ellsberg et al, 2000.[16])

your findings. For example, the results of survey research may be complemented and enriched by in-depth interviews with a subsample of women who were interviewed. Their words, thoughts, and observations lend depth and meaning to the numbers generated to describe the essentially painful reality of physical and sexual abuse. Similarly, one can strengthen qualitative data displays and narrative with references to population-based data, thereby giving an approximation of how widespread certain types of violent behavior are.

In Nicaragua, researchers combined the results of a survey of 488 women on experiences of violence with narratives of three women's experiences obtained through in-depth interviews.[16] The narratives covered many of the same themes as the survey, and often provided moving illustrations of how women felt about the violence. Figure 3.2 illustrates how survey results and narratives may be used to provide different perspectives on how children are affected by domestic violence. Although the feelings expressed by the young woman cannot be generalized to all battered women, her story provides a window into the devastating impact that abuse can have on women and their children. This type of insight is difficult to obtain from numbers.

Likewise, a research project in Tanzania used qualitative and quantitative methods to examine how violence affected women's decisions to seek VCT for HIV/AIDS.[9] Through in-depth interviews with men and women, the researchers learned about how testing and disclosure of HIV status could lead to violence. Two women described the aftermath of disclosing their seropositive status with the following words:

"It took two weeks to tell him. He told me, 'You know who has brought it?' I told him, 'If you are blaming me then blame me, but you are the one who has brought it.'"

"When I informed him of the results there was endless violence in the house."

In a second stage, the researchers interviewed 245 women who attended the clinic, and asked them standardized questions about experiences of violence. They found that HIV positive women were twice as likely to have been beaten by a partner than were HIV negative women, and among young women, HIV positive women were ten times more likely to have been beaten than HIV negative women. The researchers concluded that violence is a risk factor for HIV/AIDS because it limits women's ability to protect themselves. Moreover, HIV positive women are at greater risk of physical abuse if they disclose their serostatus. It was difficult to determine from survey data alone when the violence took place in relation to disclosure of serostatus. Thus, the qualitative information provided insights useful in interpreting the survey results.

POPULATION- OR SERVICE-BASED RESEARCH?

A key decision regarding design is whether to draw one's sample from the community at large (this is often referred to as a "population-based study") or from a service provider, for example, a women's crisis center or a community health center. The decision should be based on the goals and objectives of your research. If the goal of the research is to evaluate a service (e.g., how well the women's police station meets victims' needs) or determine what proportion of emergency room clients suffer abuse, then it makes sense to focus your research on women attending these services. If, however, your goal is to be able to say something that applies to abuse victims more generally, then it is important to recruit your sample from the community at large. Too often, researchers rely on service-based data (police statistics, hospital records, or interviews with women attending crisis services) to draw conclusions about patterns of physical or sexual abuse in a larger population. In reality, these data apply only to women who seek formal services—a group that differs substantially from the full universe of abused women and children. Women that make their way into police or hospital records have frequently suffered more severe abuse and are more likely to have been abused by a stranger than women that do not report abuse.

An example of this can be seen in the comparison of results from two studies carried out in Nicaragua on sexual abuse of children. One study was based on police records, and included only cases of abuse that were reported to the police. This study concluded that in 95 percent of child sexual abuse cases girls were the victims of abuse.[17] In contrast, a study carried out in León, Nicaragua, asked men and women who were randomly selected from the community to respond to an anonymous questionnaire about their experiences of sexual abuse in childhood. This study found that 30 percent of the total number of incidents of child sexual abuse were reported by men.[18] These findings indicate that either boys are less likely than girls to disclose abuse when it happens, perhaps because of shame or fear of being stigmatized, or that parents are less likely to report cases of abuse of boys to the police. This comparison shows that the information obtained from service-based samples can differ greatly from results obtained from a community-based survey.

Record reviews can nonetheless yield important information, especially about the quality of services that women receive from health and justice system professionals. A case in point is a study conducted by the South African NGO ADAPT that reviewed the charts of 398 women presenting with a history of assault to the Casualty Department of Alexandra Health Clinic during October and November in 1991. (Alexandra Township is a rapidly urbanizing community near the heart of Johannesburg.) This study found that providers failed to record the identity of the perpetrator in 78 percent of cases. The charts included only disembodied descriptions of the violence such as "chopped with an axe" or "stabbed with a knife." Organizers used these data to emphasize to clinic administrators the need to sensitize providers to issues of violence and to encourage more complete and accurate documentation.[19]

In another example, the IPPF carried out a study before initiating a program to train providers to screen for abuse in three Latin American countries (Peru, Venezuela, and Dominican Republic). They reviewed records to see how many women were being asked about violence in reproductive health clinics, and carried out a survey among providers to measure their knowledge and attitudes towards survivors of violence. By carrying out periodic follow-up surveys and record reviews, program

managers were able to measure changes in attitudes as a result of training, and increases in screening and care for survivors of violence.[8]

COLLABORATION BETWEEN RESEARCHERS AND ACTIVISTS

Throughout this manual, we emphasize the importance of creating partnerships between researchers and those who are in a position to use the research effectively, such as service providers, government agencies, women's health advocates, or NGOs. We believe that this is the best way to ensure that research objectives are grounded in local needs and perspectives, and that the results will be used for promoting social change. Those who work with victims of abuse also bring knowledge and skills that will surely enrich the research process and improve its quality.

"Collaboration works best when there is mutual learning on both sides," notes Gita Misra of SAKHI, a community-based group that works with South Asian battered women in New York City. SAKHI encourages anyone undertaking research on abuse in the South Asian community to participate in its 20-hour intensive training course for community volunteers.

We recognize, however, that successful partnerships between researchers and practitioners are not always easy to forge, as each group brings a different set of expectations, needs, and skills to the endeavor. Practitioners frequently worry that the research process could compromise their primary mission or undermine services. Researchers, for their part, often fear that nonresearchers may not appreciate the importance of scientific rigor.

There is also a legacy of past experiences that any potential collaboration must overcome. Researchers are sometimes surprised when their overtures to activists or service providers are met with suspicion. They don't realize that many activists have had negative experiences with researchers.

At a 1993 symposium on research around sexual coercion, a panel of service providers and activists explored the origins of the historical tension between researchers and community-based organizations. As panel members explained, many NGOs had experiences with research in the past that left them distrustful of requests to "collaborate" on research. Frequently, they noted, researchers appear more concerned with their own professional advancement than with the well-being of the respondents. The power imbalance between researcher and respondent becomes especially problematic when northern researchers conduct research in southern countries. Panelists could all relate instances in which research results from developing countries were widely reported at international conferences, but remained unavailable and unknown in the host country.

At the same time, all panelists could give examples of research collaborations that were highly positive. In these examples, the researchers involved the service providers or community group in the formulation of the research questions. The investigators treated the NGO as a true partner, as opposed to a site for research. They also recognized the practical expertise that comes from years of living with or working on an issue. Most importantly, the study generated knowledge that was useful, not only for advancing the field of violence research, but also for improving the work of the service providers.

Past experiences have highlighted the following points as key to facilitating successful collaboration:[20-22]

- Flexibility
- Shared goals
- Clear sense of responsibilities and roles
- Benefits on both sides
- Mutual respect and recognition of each other's strengths
- Equal access to funding and credit

The last point is particularly important. The organization that controls the budget in any collaboration often wields the greatest power. Collaborating partners, therefore, should develop written agreements in advance about how to allocate available resources and/or how practitioners and their agencies will be compensated for their time and expertise.

The WHO VAW study has developed an effective model for research based on the partnership between researchers, policymakers and women's organizations that work on violence against women. The goals of the study explicitly included strengthening national capacity to address violence against women by raising awareness and fostering collaboration between local actors. To achieve this, each national research team included researchers with the technical skills needed to carry out the research, as well as representatives from organizations involved in work on violence against women. In addition, consultative groups were formed in each country to bring together policy makers, researchers, and activists to oversee the implementation of the study. This process has helped establish long-term working relationships between these groups that in some cases have continued beyond the study. Both the researchers and activists agree that this model of collaboration has been important, both by increasing the quality of the data and the interpretation of the findings, and by ensuring that the results are used to inform policy changes.[23]

DRAFTING THE PROTOCOL

Once all the basic issues regarding study design have been resolved, it is time to draft the study protocol. The protocol summarizes the decisions that have been made thus far regarding the study objectives, study population, and sampling strategy,

BOX 3.2 SUGGESTED OUTLINE OF STUDY PROTOCOL

Title: As short as possible, but covering and indicating the research problem formulated.

Researchers: List of researchers, their titles, and professional affiliations.

Background: Explain why this study should be done. What is already known about the problem through other studies? What experience do you have in this research area? What is your theoretical or conceptual framework? A well-referenced literature review is essential.

Research objectives: State the general objectives of the study and specify each of the specific research questions. The objectives should correspond to study design and methods used.

Study area: Specify the geographical area for the study. What is known about the social, economic, and epidemiological context?

Study design: Will the design involve a population-based survey, a case-control study, participatory action research, in-depth interviews, focus groups, or some combination of the above?

Study population: This specifies who makes up the study population, including age, sex, other characteristics, and follow-up period.

Sampling design and procedures: What is the sample size and the rationale for the sample size calculation? What are the eligibility requirements for participation? How will respondents be located, recruited, and selected? Will the sample be selected using randomization procedures? If so, provide the details.

Study methods: Describe in detail or refer to standard descriptions of methods used. Attach any research instrument to be used (e.g., survey questionnaire, interview guide).

Description of main variables: Include a detailed description of how you will define and measure them.

Data management and analysis plans: How will the data be processed and analyzed?

Organization of fieldwork: All steps in the fieldwork should be described. What should be done, when, how, and by whom? What obstacles are anticipated? How will they be dealt with?

Ethical considerations: Ethical issues should be identified and assessed by the researchers as well as by an ethical review committee.

Timetable: When will stages such as preparations, piloting, study start, study end, analysis, writing, and reporting take place?

Budget: Costs should be specified and should correspond to the time plan and the general description in a realistic way.

Potential policy and program implications: What are the potential policy and program implications of this research? What changes, interventions, or other consequences could you expect as a result of your research?

References: Back up statements with references to other studies and method descriptions.

Appendices: Often the research instrument, such as an interview guide or questionnaire is attached, as well as a curriculum vitae for each researcher and maybe some more specific details and instructions for some parts of the study performance.

(From Persson and Wall, 2003.[2])

and will serve as a guide throughout the research process. It will be essential for obtaining funding and ethical clearance, for training research personnel, and for providing information to the advisory board and others interested in the study. The protocol will evolve over the course of the project, so that the final version, while the same in terms of content, reflects the refinements and details added along the way. Box 3.2 presents a suggested structure for the research protocol. It is a recommendation for the kinds of information a research protocol should have. You probably will want to add other information or rearrange the contents to better reflect your research project.

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