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Title: “Sometimes cathartic. Sometimes quite raw”: Benefit and harm in an intimate partner violence trial.

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Abstract

Research on intimate partner violence (IPV) has increased over the past two decades, however empirical research on potential harm to participants is limited. The aim of this study was to assess whether 272 women involved in a general practice based IPV intervention trial (*weave*) reported more benefit or harm, whether this differed by intervention or comparison group, and what types of benefit and harm were reported. Feedback was obtained via adapted Consequences of Screening Tool, visual analogue scale and open-ended question in baseline, 6-month, 12-month and 24-month surveys (all participants), and semi-structured interviews (subset of 28 participants). Participants in both the intervention and comparison groups tended to respond positively on all quantitative items, although on a number of items, the intervention group responded even more positively. At 6 and 12 months, 51.1% and 54.7% of all participants, respectively, reported their quality of life as becoming better and over 40% of women at each time-point, indicated they felt more positive about themselves as a result of some aspect of their involvement in *weave*. 42% of all participants reported their home lives becoming less difficult. In qualitative analyses, positive themes identified were altruism, value, evaluation of relationship, validation, self-awareness, empowerment, positive reinforcement, catharsis, motivation to seek help, and response to the research process. Negative themes identified were short-term emotional reactions, long-term emotional reactions, recall, retraumatization and minimization. Many participants indicated short-term negative emotions had been balanced by longer-term positive benefits. Further research is needed regarding characteristics and experiences of the small minority of participants who did not report positive benefit.

Key words: Intimate partner violence; Intimate partner abuse; Domestic violence; Research participation; Harm; Benefit

Introduction

One of the foremost ethical concerns for researchers and ethics committees is to ensure the benefit derived from research outweighs any potential harm to participants, and that this harm is eliminated to the greatest degree possible. This can present a particular challenge in research where participants have experienced abuse or violence, as these participants are already in a vulnerable position (Aronson-Fontes, 2004; Burke-Draucker, 1999). Intimate Partner Violence (IPV) research is one such example. IPV is defined as “any behavior within an intimate relationship that causes physical, sexual or psychological harm.” (World Health Organization, 2010).

Research on IPV has increased considerably over the past two decades (Clark, 2011), however empirical research on potential harm to participants lags behind. This makes it difficult for researchers and ethics committees to objectively assess the potential balance of benefit versus harm (Becker-Blease & Freyd, 2006). They may instead rely on subjective assumptions about whether participants will find the research to be intrusive or offensive, and whether they are at higher risk of unanticipated emotional distress, retraumatization, stigmatization, additional harm from the perpetrator, and other negative consequences (Aronson-Fontes, 2004; Newman and Kaloupek, 2004).

In an effort to address these concerns, a small number of studies have examined the impact of abuse, violence and trauma research on participants (Rosenbaum & Langhinrichsen-Rohling, 2006). This research has found minimal harm to participants, when adequate precautions are taken, with participants who experience strong emotional reactions during the research process rarely regretting or negatively appraising their participation

(Burke-Draucker, 1999; Griffin, Resick, Waldrop, & Mechanic, 2003; Wager, 2012).

Benefits of violence-related research that have been given across qualitative studies include validation of self-worth, altruism, empowerment and feeling heard. Content analyses of open-ended responses in two interview-based studies and one survey-based study (Griffin et al., 2003; Sikweyiya & Jewkes, 2012; Edwards et al., 2013) reveal that participants found it useful to reflect on and think about their experiences, even painful ones. Some women found it to be a cathartic process (Burke Draucker, 1999; Hebenstreit & DePrince 2012; Sikweyiya & Jewkes, 2012) or had a neutral reaction (Griffin et al., 2003; Wager, 2012). While victimized participants may have been more likely to report anger or upset, they were just as likely to comment on its value as participants who did not report victimization (Burke-Draucker, 1999; Black et al., 2006; Clark, 2011).

However, for some participants, research benefit is not derived without consequence. In all studies, a small subset of participants indicated some degree of negative emotional reaction and regretted participation. A majority of the studies report that approximately 10% of participants report some form of emotional distress although a few studies have reported higher percentages (Johnson & Benight, 2003). Participants possibly more at risk of negative (or mixed) research experiences are those who have a more extensive or recent assault history (Griffin et al., 2003; Johnson & Benight, 2003; Wager, 2012), higher levels of neuroticism (Walker et al., 1997; Griffin et al., 2003) or are of older age (Hebenstreit & DePrince, 2012). It is unclear whether those with Post Traumatic Stress Disorder symptomology have differential risk of negative research reactions, with mixed results in this area (Decker et al., 2011; Edwards et al., 2013; Griffin et al., 2003). With regards to higher neuroticism, the upset reported by these respondents may be reflective of the acute intensification of underlying psychopathology, and not directly attributed to uncharacteristic response for the

individual or to the nature of the research (Walker et al., 1997). It is important to note that participants who are most at-risk, vulnerable or distressed may be less inclined to participate thereby eliminating their perspectives from research and introducing sample bias. This may result in an underestimation of the negative impact of the study. Examining whether baseline data on harm-benefit predicts attrition can go some way toward addressing this issue. This does not seem to have been attempted in previous studies.

While the above findings are useful, all these studies have tended to focus on short-term effects of research involving past recall (e.g. childhood abuse, Walker, et al., 1997) or discrete events (Ruzek & Zatzick, 2000). Thus focus on long-term or delayed effects of research is needed, particularly in areas where the abuse or violence is current and/or ongoing. Few studies have used systematic data collection to examine the effects of the research process on participants. In response to the need for more in-depth study of short-term and long-term effects of abuse and violence research participation, and as part of the trial's process evaluation, feedback data from the Women's Evaluation of Abuse and Violence Care (*weave*) project were analyzed (actual trial outcomes are reported in Hegarty et al., 2013). The research questions addressed were:

1. Do IPV research participants report more benefit or harm in response to participation, and does this differ depending on whether they are in the intervention or comparison group of the trial;
2. What types of benefit and harm are reported in response to the IPV research participation experience?

Methods

Study Design and Participants

Data was collected during an Australian cluster randomized controlled trial of an intervention where female patients who had experienced IPV in the past 12 months were invited to attend brief counseling delivered by their family doctor trained to respond to IPV. Trial protocol and results are described elsewhere (Hegarty et al., 2013). Fifty-two doctors and 272 of their female patients were enrolled in the trial; 137 in the intervention group, and 135 in the comparison group (usual care).

Measures

Data were collected via a feedback section at the end of each survey administered to both groups at baseline, 6, 12 and 24-months, and via face-to-face, semi-structured interviews conducted with a subsample of participants after 24-months. The feedback section at the end of each survey included an adapted version of the Consequences of Screening Tool (COST) (MacMillan et al., 2009), a Visual Analogue Scale (VAS), and an open-ended item inviting feedback. The adapted COST contained 14 items, each on a five-point Likert scale ranging from indication of benefit (or no harm) to indication of harm, with a neutral option in the center. Three items were reverse scored. The VAS required participants to place a cross on a 10 centimeter scale ranging from 0 (harmful) through to 100 (beneficial), in response to the question, ‘Overall, how beneficial or harmful have you found the *weave* project to you?’.

Once the 24 month data collection phase was complete, semi-structured, face-to-face process evaluation interviews were conducted with 28 randomly selected participants (20 from intervention and 8 from comparison). This subsample was purposely oversampled for intervention participants to explore the effects of the counselling intervention. The interview data were available as de-identified, word-processed transcripts.

Data Analyses

Quantitative Analyses

Descriptive statistics were used to summarize intervention, comparison and overall group responses to the COST items. Intervention and comparison group responses to each item were compared using Ordinal Logistic Regression, with assumptions for this analysis type tested and met. Linear regression was used to compare intervention and comparison group ratings on the Visual Analogue Scale. Each regression was adjusted for GP cluster and practice location (rural or urban). Results were presented as odds ratios (OR) with 95% confidence intervals (CI) for each COST item. All analyses were performed using Stata, Version 12.1 (StataCorp, 2011).

Qualitative Analyses

Interviews were recorded, transcribed and de-identified as part of the trial's process-evaluation. Interview transcripts and open-ended survey items were analyzed using thematic qualitative analysis. Recurrent themes related to the research question were inductively identified and open codes developed (this involved searching through the data to identify any

recurrent concepts and themes) (Strauss & Corbin, 1990). The analysis was grounded in the evidence discovered in the data and not constrained by preconceptions or pre-existing theory (Patton, 2001). The significance of a code was based on whether it was theoretically relevant to the research focus (Strauss & Corbin, 1990) and not on how prevalent it was within the data set. Coding was performed in Microsoft Excel 2010. The coding frame was continuously developed as the transcripts were re-read and until no new themes relevant to the research focus were developed. At this point theoretical saturation was said to be reached. The initial analysis was performed by author AC. The coding frame was tested and confirmed by authors KH and JV, and an independent researcher, who cross-coded a random selection of a small sample of interview transcripts. AC, KH and JV met weekly during the interpretation phase of the analysis.

Results

At 6-months, 94 (69%) surveys were returned from the intervention group and 99 (73%) from comparison. At 12-months, 96 (70%) surveys were returned from the intervention group and 100 (74%) from comparison. At 24-months, 81 (59%) surveys were returned from the intervention group and 85 (63%) from comparison. Harm scores on the COST feedback items at baseline did not predict attrition at 6, 12 or 24 months.

Quantitative Results

Tables 1 to 3 present the overall findings of feedback items at each time-point during the *weave* project, and significant differences between groups are highlighted. Participants in both groups were likely to respond positively on all quantitative items, however on a number

of items, the intervention group tended to respond even more positively (see Tables 1 to 3). Over 80% of participants at each of the three time-points reported that they were glad to have participated in *weave*. In terms of the overall perception of harm versus benefit, both groups consistently reported more perceived benefit than harm. At 6 and 12 months, 51.1% and 54.7% of participants, respectively, reported their quality of life as becoming better and over 40% of women at each time-point, indicated they felt more positively about themselves as a result of *weave*. 42% of all participants reported their home lives becoming less difficult (see Table 4). The number of participants responding negatively to any of the COST items was relatively small (range 0.0% to 3.2%).

[Insert Tables 1, 2 and 3 in this section]

At 6 months, the intervention group was significantly more likely than comparison to report increased awareness of possible relationship problems and to indicate that responding to the survey had made them more open to dealing these problems (see Table 1). The intervention group was also more likely to report improvement in quality of life as a result of participation in the project.

At 12 and 24 months (Tables 2 and 3), the intervention group reported their home lives as becoming less difficult as a result of being in *weave*, when compared to the comparison group. At 24 months (Table 3), the intervention group were more likely than comparison to strongly agree that they were pleased and comfortable being asked about IPV, and that IPV-related questions were acceptable.

In terms of the overall perception of harm versus benefit, both groups reported more perceived benefit than harm on the visual analogue scale at 12 months (intervention mean = 79.5, standard deviation = 17.4; comparison mean = 74.6, standard deviation = 19.2; adjusted mean difference = 4.02, p-value = 0.09) and 24 months (intervention mean = 77.0, standard deviation = 20.5; comparison mean = 73.7, standard deviation = 18.9; adjusted mean difference = 5.8, p-value = 0.02). The difference between groups was significant at 24 months (adjusted for GP cluster and practice location), with the intervention group reporting higher benefit than the comparison group.

Qualitative Results

Analysis of interview transcripts and written survey comments indicated a general trend of satisfaction with participation in the *weave* project. Almost universally, women saw their participation as a positive and valuable experience overall. Participants expressed few adverse reactions to the research process, and in many cases, derived benefit. Following the coding process, qualitative feedback data were rated as positive, negative or balanced if positive and negative content was intermixed in the same comment. Table 4 presents examples of quotes related to each theme.

[Insert Table 4 in this section]

Positive

Ten positive themes were identified: Altruism, value, evaluation of the relationship, validation, self-awareness, empowerment, positive reinforcement, catharsis, motivation to

seek help, response to the research process. See table 4 for examples of quotes related to each theme.

Altruism.

This theme included comments which revealed a desire to participate in the research not particularly for personal gain, but rather to help others who may be in a similar situation or potential victims who may be naïve about IPV. Altruism towards other women was more of a factor in making the decision to continue; particularly for those at particular points in their healing, research participation was situated within the context of helping other women move toward healing.

Value.

This theme is distinct from altruism in that responses reflected the belief that the purpose of the research was valuable and worthwhile. Participants often spoke of the frustration at being invisible, voiceless victims and many were encouraged by knowing that the often unspoken reality of IPV is being challenged. Participants reported having a sense of purpose, in that their expertise would contribute to the research and potentially have positive long-term consequences. Through their participation they may be able to contribute to an increased public awareness of the issues affecting them.

Evaluation of the relationship.

A prominent theme was participants feeling encouraged to evaluate the relationship in which they felt afraid. This consisted of two aspects; realization and acknowledgement. Coming to a realization included the recognition of recurrent violence, the perpetrator's violent tactics or the gravity of the situation. Women reported coming to the realization that her situation was worse than she had previously accepted or that it was gradually becoming worse.

A number of women did not identify the behaviors of their partners as consistent with IPV until they began to read the *weave* survey. Some described treating survey items as a checklist and praised the options provided for clarifying what types of behaviors were unacceptable. Shock often came from acknowledging fear and true feelings about a partner and the relationship, sometimes for the first time. Despite this shock, this aspect of the process was deemed to be the most therapeutic with some women conceding that they may not have acknowledged the presence of abuse otherwise. This was especially common when the abuse was of a psychological or emotional nature.

Validation.

A number of participants credited the invitation to participate in *weave* with validating instincts they had about their partner or the relationship. The existence of the study and the fact that IPV was considered important enough to be studied, verified and legitimized it for these women.

Self-awareness.

From an external evaluation of the relationship, *weave* also generated internal self-reflection for many participants which, in most cases, had a positive effect on wellbeing. Participants were prompted to delve into stressful issues in their lives and consider how these were affecting them. *weave* presented an opportunity for women to examine their feelings and this resulted in positive gain for participants who reported gaining a self-understanding as to why they felt the way they did. Women spoke of looking at particular incidents from another perspective: a perspective that centered on her; her thoughts and her feelings.

Women found it useful to question themselves about how well they were coping in their daily lives. Through their survey item responses, some participants were made aware of the changes in their own behavior over the course of the relationship, in most cases to avoid any sort of confrontation with their partner. Some conceded that they had been justifying their inability to confront unresolved issues and others became aware of the residual emotional effects of a past abusive relationship or of repressed anger.

Empowerment.

The experience appeared to facilitate a sense of empowerment in a number of women. This involved recognizing their capability to control certain situations or developing a mentality to be more proactive. Empowerment was manifested in a sense of control over the decisions they faced in their lives, a readiness to confront issues or in the development of a positive outlook for the future.

A turning point for some participants was learning that they were not to blame as the project progressed. Women acknowledged making self-discoveries such as learning that no one has the right to hit them and talk down to them.

In the same vein, some women stated that they now felt they had a sense of control in their lives, something they previously lacked. Solely the act of participating facilitated this; it was her choice to continue, it was something she wanted to do. Women became empowered to make decisions in their lives, rather than feel obligated to perform to the expectations of others, including the partner who made them feel afraid. In some cases, participants felt confident enough to approach the partner and discuss their relationship issues together.

Positive reinforcement.

An overwhelming number of participants derived benefit from the recognition of their own progress. For those who were no longer in the abusive relationship and had moved on or were in the process of healing, the survey put them at ease.

Women spoke of an appreciation of how *weave* demonstrated respect for their wellbeing, in particular, how it diminished their sense of isolation and abandonment. Participation in the project fostered a sense of comfort and encouragement for most participants from being shown that they were not alone in their struggles.

Catharsis.

A subset of participants suggested that the project had a cathartic effect. Given the emotionally challenging nature of speaking about IPV, participants noted that the *weave* survey presented a welcome opportunity to discuss their relationships and wellbeing openly and without judgment.

Motivation to seek help.

For some women, *weave* served as a catalyst to seek help. Some women experiencing IPV may feel stigmatized or misunderstood; some had previously feared they would not be believed and had been unaware that a GP could assist even with conditions and concerns that are not of a physical nature. This theme was reported on as early as 6 months, and became more prominent at 12 and 24 months.

Response to the research process.

In written response to the surveys, many women used words such as helpful, therapeutic, insightful, and comforting. With regards to the research process, many participants appreciated contact with the *weave* team in the form of newsletters and gentle reminders to return surveys. Women commented that it was helpful and encouraging to be reminded that her opinion was important and valued, and that there were people in the background.

A number of open-ended responses in the surveys were simply messages of thanks and best wishes for the future of *weave*. A majority of participants commented on the study's value either to them personally or to society in general. Women expressed gratitude because

they felt they had truly been listened to, some for the first time, and were proud of having contributed to a project aimed at addressing similar cases of violence against women.

Negative

Five negative themes were identified: Short-term emotional reactions, long-term emotional reactions, recall, retraumatization and minimization (see table 4).

Short-term emotional reactions.

Experiencing unpleasant emotions was fairly common during survey completion. Participants reported having to remember things they had suppressed or preferred to forget. A considerable number of participants expressed mixed reactions during the process of responding to questions about their wellbeing and relationships. Participants brought to light a range of negative emotions associated with responding to the survey. Feeling anxious, unsettled or flat was commonly reported, as were anger and frustration by a few participants. It should be noted that despite the instances of upset and distress, participants asserted that they found the inquiry about domestic violence and the overall research generally acceptable.

Long-term emotional reactions.

A very small number of participants reported feeling debilitating emotions, predominantly shame and guilt. This was particularly evident for a small number of participants who noticed no change in their responses across surveys or had identified relationship issues, but were ambivalent about addressing them.

Recall.

Some participants anticipated that the research would not be easy emotionally because it would remind them of painful memories. Even among those who found their overall experience to be positive or valuable, the recollection of these memories was identified as the most negative aspect of the research. Frustration and difficulty was encountered also among participants who had moved on, as they were ambivalent about revisiting issues already dealt with. One reason for active study withdrawal for a small number of participants was that they no longer wanted to be reminded of the state of their current situation or of unpleasant experiences from their past.

Retraumatization.

For some participants, the experience was considerably difficult; they felt the emotional effects afterwards and described a profound effect on their mood. The overall results identified a very small number of participants reporting upset due to potential retraumatization. This was manifested in the occurrence of flashbacks and persistent nightmares. A few women reported some degree of marked or unexpected upset and a sizable proportion reported becoming tearful.

Minimisation.

The minimization of abuse by informal comparisons with the lives of hypothetical others was potentially another area of concern. If a participant was to question their

candidacy for *weave*, the most common reason was that their abuse was not as severe as what it could be based on the options provided in the surveys. This caused some women to minimize their abuse because they perceived that what they were subjected to was not the worst. This is a concern because it may discourage acknowledgement of abuse and help-seeking.

Balanced

For some participants, benefit was not derived without consequence. This complex mix of pain and gain characterised the participation of many respondents. An overwhelming majority of participants were able to balance this difficulty with the benefits of continuing. Participants said that thinking over past and current issues needed to be done, and stated that the opportunity to think about and feel past emotions was beneficial for them.

A majority of participants steadfastly maintained the importance of talking about their situations, certain incidents and their thoughts and feelings. In many cases, it was necessary to work through a plethora of emotions to achieve this. A number of participants characterized their initial response to the survey as negative. However an overwhelming majority went on to describe that the surveys became easier to complete over time.

Discussion

The purpose of this study was to examine the benefit and harm reported by women in a randomized controlled trial on IPV, conducted in the general practice setting. Overall, participants generally found their participation in *weave* to be a positive experience. This

supports previous qualitative findings that research can have a number of benefits for those who participate (e.g. Burke-Draucker, 1999; Campbell, Adams, Wasco, Ahrens, & Sefl, 2010; Johnson & Benight, 2003; Wager, 2012). The intervention group was more likely than comparison to respond at the extreme positive end of the scale to many of the items, including increased participant awareness of potential problems in the relationship and less difficult home-life. This is concordant with findings from a focus-group study with women experiencing IPV who reported a less difficult home-life after sharing their difficulties with other women (Morales-Campos, Casillas, & McCurdy, 2009).

A majority of participants concurred that the project encouraged them to be self-reflective, to evaluate their relationship and to assess how it was progressing. Participants found it beneficial to assess their partner's patterns of behavior towards them and to acknowledge the negative aspects of the relationship. By reflecting on and evaluating the relationship, an impact on the level of awareness about possible problems in the relationship was evident for many women. They recognized their own situations and either identified that their experiences were abusive or that they were in need of help. Evaluation of the relationship was described to be one of the most confronting aspects of *weave*, particularly the acknowledgement of IPV. A similar point emerges in relation to the notion that participation may serve as a form of validation; participants may derive benefit from research confirming their situation (Burke-Draucker, 1999; Hutchinson, et al., 1994; Wager, 2012). In order to initiate healing, the acknowledgment of IPV must come first, either by admission or validation (Burke-Draucker, 1999; Morales-Campos, Casillas, & McCurdy, 2009).

This study lends support to the finding that increased self-awareness may be linked to improved self-esteem and ultimately, empowerment (Campbell, et al., 2010; Morales-

Campos, Casillas, & McCurdy, 2009; Sikweyiya & Jewkes, 2012). On an intrapersonal level, participants told of becoming more aware of their self-worth, learning to value themselves as women, and understanding that their reactions and feelings are normal and justifiable. Some credited *weave* with helping alleviate their feelings of shame and guilt. Self-awareness is sometimes an early step down the necessary path of recovery and healing from IPV (Flinck, Paavilainen, & Astedt-Kurki, 2005; Lynch & Graham-Bermann, 2004; Morales-Campos, Casillas, & McCurdy, 2009), although this increased awareness may also trigger short-term emotional upset (Becker-Blease & Freyd, 2006; Burke-Draucker, 1999). Participants also felt empowered through believing their participation may assist other women in similar situations. This parallels many of the motivating factors evident in other studies that show individuals participating in abuse and assault-related research often do so to help others (e.g. Campbell, et al., 2010; Wager, 2012).

Participants often spoke of the need to tell what happened about a certain incident, how they felt about what happened and to understand what triggered negative feelings about themselves. The uniqueness and importance of that opportunity was commented on by a number of participants primarily for aiding with the clarification of thoughts and feelings, and participants tended to be in agreement that expressing emotion whilst responding to the survey was helpful. These emotional responses included anger, anxiety and, in some cases, becoming tearful. This implies the potential for cathartic benefit to participants, and this is congruent with the literature that demonstrates a positive association between the expression of negative emotional reactions and positive outcome (Burke-Draucker, 1999; Griffin, et al., 2003; Wager, 2012). The act of recounting personal and sensitive information about one's personal life can induce discomfort or anxiety, but at the same time aid individuals in

achieving awareness or insight into their situation by re-examining it (Campbell, et al., 2010; Wager, 2012).

The short-term emotional reactions encountered were noted to decrease markedly over the course of the project for both groups. The emotional reactions encountered were typically temporal and not overwhelming to almost all of those who reported them. In line with this, a considerable number of participants reported that the 12 and 24 month surveys were less difficult to complete than the survey at 6 months. This was often attributed to moving past the emotional aspect of reiterating their difficult personal circumstances and becoming more emotionally detached from the questions as the trial progressed. The 12-month survey, in particular, indicated an increase in positive emotion, self-esteem and self-confidence for both groups. This suggests that negative reactions may attenuate over time. Preliminary data from two studies, one longitudinal, support this (Edwards, 2009; Edwards, 2013). These findings confirm and extend previous research findings that propose that emotional reactions associated with the research can be understood to be an emotional engagement with the research process rather than retraumatization, and may be necessary for benefits to accrue for some participants.

Interestingly, the few participants who did report retraumatization in the form of nightmares or flashbacks were not any less likely to positively appraise the project and score favorably on the visual analogue scale. Prior findings have demonstrated that victims of physical and psychological abuse encountered more intense emotional reactions but were as likely to comment on the value of the research as participants who did not report victimization (Wager, 2012).

Although a majority of participants agreed that being asked about domestic violence was acceptable, the questions asked by *weave* were very often described as confronting and challenging. This was particularly evident among the comparison group which reported a slighter higher frequency of discomfort than the intervention group, but almost always agreed that the questions were acceptable. This trend is consistent with prior findings. For example, in two telephone surveys on interpersonal violence, 92% and 95% of respondents thought such questions should be asked and were more likely to skip questions about their socioeconomic status than those about interpersonal violence (Black, Kresnow, Simon, Arias, & Shelley, 2006).

Despite these generally positive findings, a very small number of participants did report feeling more negative about themselves as the project continued. Participants who did not observe improvement between surveys, either if their responses remained neutral or unchanged, tended to report a lower rating on the visual analogue scale. Negative reactions to the survey may also be due to bad timing as a few participants found it difficult to participate if they were to receive their survey on a day they felt particularly down or if their personal situations were most pressing. It is acknowledged that some women did not return all three of the surveys. Women who feel the most vulnerable or do not find the project to be salient, may be less inclined to return, thereby eliminating their perspectives from research and potentially resulting in an underestimation of the overall negative impact of the study.

In summary, the types of benefits reported as a result of participation in *weave* can be categorized broadly into aspects of catharsis, increased self-reflection, increased self-awareness, feeling empowered, feeling validated or comforted and the personal or social value of the research. Aspects of the research which induced discomfort or a degree of

emotional reaction included minimisation of abuse by comparing situations to the lives of hypothetical others or remembering unpleasant incidents and emotions. For some women, participating in the study was part of their personal growth, and that growth continued at 24 months. Both groups found it helpful to compare responses across surveys to appreciate their progress or from watching the changes in their responses move in a positive direction. This facilitated the recognition of personal progress or positive reinforcement. This study highlights the importance of follow-up with participants. When evaluating the impact of an intervention, internal change is most informative; change however may not be observable for some time.

Strengths of this study included a high response rate and utilization of mixed methodology to provide a more systematic, holistic and detailed assessment of benefit and harm in this research. However several limitations should also be noted including recall bias as the interviews were conducted at least 24 months after the commencement of the project; some participants may have felt uncomfortable about leaving negative feedback on the surveys, and some of the few participants who indicated regret did not leave a specific comment. Further research is also needed to better understand the factors that contribute to negative experiences for the small minority of participants. Further consideration is also needed regarding how to account for positive experiences of comparison group participants when interpreting trial results. For example, the therapeutic impact of these experiences may cause outcome effect sizes to appear smaller than what they would be in real-world application of the intervention, creating some potential complexities for ethical reporting and utilization of trial results.

The current study contributes to the growing body of empirical evidence that most IPV survivors are not harmed by participation in IPV research and may, in fact, view their participation as positive or helpful. This has global implications for researchers, ethics committees and others making decisions regarding IPV research. IPV is a sensitive topic and undertaking research on IPV poses some unique methodological and ethical challenges. However these challenges should not discourage researchers from engaging in carefully planned research on IPV. This research is essential for guiding investment and sound practice in IPV prevention and intervention, thus reducing harm caused by IPV. This research should include systematic, multi-method data collection regarding short-term and long-term effects of the research process on participants, which will aid in both monitoring harm and benefit to participants and planning additional future research.

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References

- Aronson-Fontes, L. (2004). Ethics in violence against women research: the sensitive, the dangerous, and the overlooked. *Ethics Behav*, *14*(2), 141-174.
- Becker-Blease, K. A., & Freyd, J. J. (2006). Research participants telling the truth about their lives: the ethics of asking and not asking about abuse. *Am Psychol*, *61*(3), 218-226.
- Black, M. C., Kresnow, M. J., Simon, T. R., Arias, I., & Shelley, G. (2006). Telephone survey respondents' reactions to questions regarding interpersonal violence. *Violence Vict*, *21*(4), 445-459.
- Burke-Draucker, C. (1999). The emotional impact of sexual violence research on participants. *Archives of Psychiatric Nursing*, *13*(4), 161-169.
- Campbell, R., Adams, A. E., Wasco, S. M., Ahrens, C. E., & Sefl, T. (2010). "What has it been like for you to talk with me today?": the impact of participating in interview research on rape survivors. *Violence Against Women*, *16*(1), 60-83.
- Carlson, E. B., Newman, E., Daniels, J. W., Armstrong, J., Roth, D., & Loewenstein, R. (2003). Distress in response to and perceived usefulness of trauma research interviews. *Journal of Trauma & Dissociation*, *4*(2), 131-142.
- Clark, C. (2011). A mixed methods study of participant reaction to domestic violence research in Jordan. *Journal of interpersonal violence*, *27*(9), 1655-1676.
- Cronholm, P. F., Fogarty, C. T., Ambuel, B., & Harrison, S. L. (2011). Intimate partner violence. *Am Fam Physician*, *83*(10), 1165-1172.
- Edwards, K. M., Probst, D. R., Tansill, E. C., & Gidycz, C. A. (2010). Women's reactions to participation in interpersonal trauma research: a longitudinal study. *Journal of Interpersonal Violence*, *28*(2), 254-272.
- Flinck, A., Paavilainen, E., & Astedt-Kurki, P. (2005). Survival of intimate partner violence as experienced by women. *J Clin Nurs*, *14*(3), 383-393.

- Griffin, M., Resick, P., Waldrop, A., & Mechanic, M. (2003). Participation in trauma research: is there evidence of harm? *Journal of Traumatic Stress, 16*(3), 221-227.
- Hegarty, K., O'Doherty, L., Taft, A., Chondros, P., Brown, S., Valpied, J., Astbury, J., Taket, A., Gold, L., Feder, G., & Gunn, J. (2013). Screening and counselling in the primary care setting for women who have experienced intimate partner violence (WEAVE): a cluster randomised controlled trial. *Lancet, 382*(9888), 249-258.
- Hutchinson, S. A., Wilson, M. E., & Wilson, H. S. (1994). Benefits of participating in research interviews. *Image: the Journal of Nursing Scholarship, 26*(2), 161-166.
- Johnson, L. E., & Benight, C. C. (2003). Effects of trauma-focused research on recent domestic violence survivors. *Journal of Traumatic Stress, 16*(6), 567-571.
- Lynch, S. M., & Graham-Bermann, S. A. (2004). Exploring the relationship between positive work experiences and women's sense of self in the context of partner abuse. *Psychology of Women Quarterly, 28*(2), 159-167.
- MacMillan, H. L., Wathen, C. N., Jamieson, E., Boyle, M. H., Shannon, H. S., Ford-Gilboe, M., . . . McNutt, L. A. (2009). Screening for intimate partner violence in health care settings: a randomized trial. *JAMA, 302*(5), 493-501.
- Morales-Campos, D. Y., Casillas, M., & McCurdy, S. A. (2009). From isolation to connection: understanding a support group for Hispanic women living with gender-based violence in Houston, Texas. *J Immigr Minor Health, 11*(1), 57-65.
- Patton, M. Q. (2001). *Qualitative Research & Evaluation Methods* (3rd ed.). Newbury Park, CA: SAGE Publications.
- Renzetti, C. M., & Lee, R. M. (1993). *Researching sensitive topics*. Newbury Park, CA: Sage Publications.

- Rosenbaum, A., & Langhinrichsen-Rohling, J. (2006). Meta-research on violence and victims: the impact of data collection methods on findings and participants. *Violence Vict*, 21(4), 404-409.
- Ruzek, J. I., & Zatzick, D. F. (2000). Ethical considerations in research participation among acutely injured trauma survivors: an empirical investigation. *Gen Hosp Psychiatry*, 22(1), 27-36.
- Sikweyiya, Y., & Jewkes, R. (2012). Perceptions and experiences of research participants on gender-based violence community based survey: implications for ethical guidelines. *PLoS ONE*, 7(4), e35495.
- StataCorp. (2011). *Stata Statistical Software: Release 12*. College Station, TX: StataCorp LP.
- Sugg, N., & Inui, T. (1992). Primary care physicians response to domestic violence: opening pandora's box. *JAMA*, 267(23), 3157-3160.
- Wager, N. M. (2012). Respondents' experiences of completing a retrospective web-based, sexual trauma survey: does a history of sexual victimization equate with risk for harm? *Violence Vict*, 27(6), 991-1004.
- Walker, E. A., Newman, E., Koss, M., & Bernstein, D. (1997). Does the study of victimization revictimize the victims? *General hospital psychiatry*, 19(6), 403-410.
- World Health Organization. (2010). *Preventing intimate partner and sexual violence against women: taking action and generating evidence*. Geneva.

Table 1. Responses to adapted COST items in 6-month survey

	Study arm				Unadjusted		Adjusted	
	Intervention		Comparison		Odds-Ratio (95% CI)	p	Odds-Ratio (95% CI)	p
	n	%	n	%				
I am glad to be a participant in the weave project					1.43 (0.85 to 2.62)	0.160	1.63 (0.96 to 2.79)	0.072
Strongly agree	48	51.61	37	37.76				
Agree	30	32.26	45	45.92				
Neither agree nor disagree	12	12.90	16	16.33				
Disagree	1	1.08	0	0.00				
Strongly disagree	2	2.15	0	0.00				
I am pleased that I have been asked questions about domestic violence					1.57 (0.92 to 2.67)	0.097	1.62 (0.96 to 2.74)	0.070
Strongly agree	40	43.01	32	33.68				
Agree	31	33.33	31	32.63				
Neither agree nor disagree	20	21.51	27	28.42				
Disagree	0	0.00	3	3.16				
Strongly disagree	2	2.15	2	2.11				
I felt comfortable answering the questions about domestic violence in this survey					1.53 (0.89 to 2.64)	0.120	1.54 (0.90 to 2.66)	0.116
Strongly agree	40	43.01	33	34.38				
Agree	40	43.01	41	42.71				
Neither agree nor disagree	9	9.68	17	17.71				
Disagree	1	1.08	3	3.13				
Strongly disagree	3	3.23	2	2.08				
For me, being asked questions about domestic violence in this survey is...					1.61 (0.86 to 3.03)	0.137	1.67 (0.88 to 3.19)	0.116
Very acceptable	47	50.54	37	38.54				
Acceptable	36	38.71	44	45.83				
Neutral	9	9.68	13	13.54				
Unacceptable	0	0.00	2	2.08				
Very unacceptable	1	1.08	0	0.00				
As a result of questions about domestic violence being asked in this survey, my feelings about my relationship with the partner(s) who made me feel					1.24 (0.73 to 2.12)	0.415	1.30 (0.76 to 2.23)	0.327

afraid are...				
More positive	19	20.43	14	15.05
Somewhat more positive	20	21.51	23	24.73
Unchanged	47	50.54	45	48.39
Somewhat more negative	4	4.30	7	7.53
More negative	3	3.23	4	4.30
As a result of questions about domestic violence being asked in this survey, I feel my home life is...				
				1.50 (0.87 to 2.58) 0.142 1.54 (0.90 to 2.65) 0.116
Less difficult	25	26.88	14	15.05
Somewhat less difficult	11	11.83	16	17.20
About the same as before	56	60.22	61	65.59
Somewhat more difficult	1	1.08	2	2.15
More difficult	0	0.00	0	0.00
As a result of participating in the weave project, I see the quality of my own life as...				
				1.72 (0.93 to 3.17) 0.080 1.85 (1.05 to 3.28) 0.035
Better	21	22.58	15	15.79
Somewhat better	33	35.48	27	28.42
About the same as before	38	40.86	50	52.63
Somewhat worse	1	1.08	3	3.16
Worse	0	0.00	0	0.00
The questions I was asked in this survey made me feel that the problems in my relationship with my partner or ex-partner were my fault.				
				1.39 (0.85 to 2.27) 0.181 1.42 (0.88 to 2.30) 0.149
Strongly agree	1	1.08	0	0.00
Agree	2	2.15	2	2.13
Neither agree nor disagree	21	22.58	24	25.53
Disagree	27	29.03	37	39.36
Strongly disagree	42	45.16	31	32.98
As a result of being asked questions about domestic violence in this survey, my feelings about myself as a person are...				
				1.55 (0.78 to 3.08) 0.209 1.66 (0.88 to 3.15) 0.117
Better	18	19.35	11	11.58
Somewhat better	26	27.96	22	23.16
About the same as before	45	48.39	61	64.21
Somewhat worse	4	4.30	1	1.05

Worse	0	0.00	0	0.00				
Responding to this survey has increased my awareness about possible problems in my relationship.					2.00 (1.13 to 3.56)	0.019	2.09 (1.28 to 2.44)	0.004
Strongly agree	17	18.28	7	7.53				
Agree	43	46.24	40	43.01				
Neither agree nor disagree	26	27.96	31	33.33				
Disagree	4	4.30	13	13.98				
Strongly disagree	3	3.23	2	2.15				
Responding to this survey has made me more open to dealing with possible problems in my relationship					1.67 (0.86 to 3.01)	0.132	1.80 (1.02 to 3.15)	0.042
Strongly agree	16	17.20	10	10.42				
Agree	40	43.01	39	40.63				
Neither agree nor disagree	35	37.63	40	41.67				
Disagree	2	2.15	4	4.17				
Strongly disagree	0	0.00	3	3.13				

Note. Analyses conducted using ordinal logistic regression, adjusted for clustering effects and practice location; Significant items are highlighted.
CI = confidence interval.

Table 2. Responses to adapted COST items in 12-month survey

	Study arm				Unadjusted		Adjusted	
	Intervention		Comparison		Odds-Ratio (95% CI)	p	Odds-Ratio (95% CI)	p
	n	%	n	%				
I am glad to be a participant in the weave project					1.44 (0.84 to 2.48)	0.182	1.48 (0.86 to 2.56)	0.158
Strongly agree	54	56.84	47	47.47				
Agree	30	31.58	37	37.37				
Neither agree nor disagree	10	10.53	13	13.13				
Disagree	1	1.05	1	1.01				
Strongly disagree	0	0.00	1	1.01				
I am pleased that I have been asked questions about domestic violence					1.06 (0.61 to 1.83)	0.830	1.08 (0.63 to 1.85)	0.768
Strongly agree	45	47.37	44	46.81				
Agree	30	31.58	27	28.72				
Neither agree nor disagree	17	17.89	22	23.40				
Disagree	2	2.11	1	1.06				
Strongly disagree	1	1.05	0	0.00				
I felt comfortable answering the questions about domestic violence in this survey					1.14 (0.69 to 1.89)	0.610	1.12 (0.67 to 1.89)	0.655
Strongly agree	43	45.26	43	45.74				
Agree	40	42.11	33	35.11				
Neither agree nor disagree	9	9.47	10	10.64				
Disagree	3	3.16	7	7.45				
Strongly disagree	0	0.00	1	1.06				
For me, being asked questions about domestic violence in this survey is...					1.15 (0.69 to 1.93)	0.590	1.17 (0.71 to 1.94)	0.526
Very acceptable	45	47.37	43	45.26				
Acceptable	35	36.84	33	34.74				
Neutral	14	14.74	18	18.95				
Unacceptable	1	1.05	0	0.00				
Very unacceptable	0	0.00	1	1.05				
As a result of questions about domestic violence being asked in this survey, my feelings about my relationship with the partner(s) who made me feel					1.38 (0.76 to 2.53)	0.286	1.40 (0.75 to 2.60)	0.286

afraid are...

More positive	24	25.53	12	12.90
Somewhat more positive	20	21.28	22	23.66
Unchanged	36	38.30	50	53.76
Somewhat more negative	10	10.64	5	5.38
More negative	4	4.26	4	4.30

As a result of questions about domestic violence being asked in this survey, I feel my home life is...

Less difficult	30	31.91	20	21.28
Somewhat less difficult	23	24.47	16	17.02
About the same as before	41	43.62	56	59.57
Somewhat more difficult	0	0.00	1	1.06
More difficult	0	0.00	1	1.06

2.08 (1.23 to 3.32) **0.007** 2.08 (1.26 to 3.45) **0.005****As a result of participating in the weave project, I see the quality of my own life as...**

Better	26	27.37	22	23.16
Somewhat better	31	32.63	25	26.32
About the same as before	34	35.79	47	49.47
Somewhat worse	4	4.21	1	1.05
Worse	0	0.00	0	0.00

1.34 (0.81 to 2.20) **0.251** 1.36 (0.80 to 2.23) **0.247****The questions I was asked in this survey made me feel that the problems in my relationship with my partner or ex-partner were my fault.**

Strongly agree	1	1.05	0	0.00
Agree	1	1.05	1	1.06
Neither agree nor disagree	19	20.00	20	21.28
Disagree	35	36.84	33	35.11
Strongly disagree	39	41.05	40	42.55

0.96 (0.58 to 1.59) **0.862** 0.94 (0.57 to 1.55) **0.805****As a result of being asked questions about domestic violence in this survey, my feelings about myself as a person are...**

Better	26	27.37	17	17.89
Somewhat better	25	26.32	27	28.42
About the same as before	40	42.11	49	51.58
Somewhat worse	4	4.21	1	1.05

1.38 (0.85 to 2.23) **0.186** 1.43 (0.87 to 2.35) **0.153**

Worse	0	0.00	1	1.05				
Responding to this survey has increased my awareness about possible problems in my relationship.					1.29 (0.72 to 2.34)	0.388	1.43 (0.80 to 2.56)	0.224
Strongly agree	20	21.28	16	16.49				
Agree	38	40.43	36	37.11				
Neither agree nor disagree	27	28.72	38	39.18				
Disagree	5	5.32	4	4.12				
Strongly disagree	4	4.26	3	3.09				
Responding to this survey has made me more open to dealing with possible problems in my relationship					1.37 (0.82 to 2.32)	0.227	1.46 (0.85 to 2.52)	0.167
Strongly agree	20	21.05	16	16.49				
Agree	44	46.32	42	43.30				
Neither agree nor disagree	25	26.32	31	31.96				
Disagree	6	6.32	7	7.22				
Strongly disagree	0	0.00	1	1.03				

Note. Analyses conducted using ordinal logistic regression, adjusted for clustering effects and practice location; Items with significant difference between intervention and comparison groups are highlighted; CI = confidence interval.

Table 3. Responses to adapted COST items in 24-month survey

	Study arm				Unadjusted		Adjusted	
	Intervention		Comparison		Odds-Ratio (95% CI)	p	Odds-Ratio (95% CI)	p
	n	%	n	%				
I am glad to be a participant in the weave project					1.69 (0.82 to 3.48)	0.153	1.83 (0.90 to 3.48)	0.094
Strongly agree	49	60.49	36	42.86				
Agree	21	25.93	39	46.43				
Neither agree nor disagree	10	12.35	9	10.71				
Disagree	1	1.23	0	0.00				
Strongly disagree	0	0.00	0	0.00				
I am pleased that I have been asked questions about domestic violence					2.06 (1.10 to 3.85)	0.025	2.19 (1.11 to 4.33)	0.025
Strongly agree	44	55.00	28	33.73				
Agree	19	23.75	31	37.35				
Neither agree nor disagree	16	20.00	21	25.30				
Disagree	1	1.25	2	2.41				
Strongly disagree	0	0.00	1	1.20				
I felt comfortable answering the questions about domestic violence in this survey					1.92 (1.20 to 3.09)	0.008	1.88 (1.12 to 3.14)	0.018
Strongly agree	42	53.16	29	34.52				
Agree	24	30.38	36	42.86				
Neither agree nor disagree	8	10.13	11	13.10				
Disagree	4	5.06	7	8.33				
Strongly disagree	1	1.27	1	1.19				
For me, being asked questions about domestic violence in this survey is...					1.69 (1.05 to 2.73)	0.031	1.70 (1.03 to 2.78)	0.038
Very acceptable	46	57.50	37	44.05				
Acceptable	26	32.50	34	40.48				
Neutral	7	8.75	13	15.48				
Unacceptable	1	1.25	0	0.00				
Very unacceptable	0	0.00	0	0.00				
As a result of questions about domestic violence being asked in this survey, my feelings about my relationship with the partner(s) who made me feel afraid are...					1.30 (0.74 to 2.28)	0.346	1.36 (0.78 to 2.37)	0.275
More positive	16	20.51	10	12.35				

Somewhat more positive	13	16.67	16	19.75				
Unchanged	40	51.28	44	54.32				
Somewhat more negative	6	7.69	10	12.35				
More negative	3	3.85	1	1.23				
As a result of questions about domestic violence being asked in this survey, I feel my home life is...					1.81 (1.04 to 3.14)	0.036	1.89 (1.09 to 3.29)	0.025
Less difficult	21	26.25	17	20.99				
Somewhat less difficult	15	18.75	9	11.11				
About the same as before	44	55.00	50	61.73				
Somewhat more difficult	0	0.00	4	4.94				
More difficult	0	0.00	1	1.23				
As a result of participating in the weave project, I see the quality of my own life as...					1.54 (0.88 to 2.69)	0.129	1.64 (0.93 to 2.88)	0.087
Better	24	30.00	16	19.05				
Somewhat better	19	23.75	20	23.81				
About the same as before	33	41.25	45	53.57				
Somewhat worse	4	5.00	3	3.57				
Worse	0	0.00	0	0.00				
The questions I was asked in this survey made me feel that the problems in my relationship with my partner or ex-partner were my fault.					1.55 (0.91 to 2.65)	0.104	1.54 (0.92 to 2.60)	0.100
Strongly agree	2	2.53	0	0.00				
Agree	1	1.27	2	2.41				
Neither agree nor disagree	13	16.46	21	25.30				
Disagree	25	31.65	30	36.14				
Strongly disagree	38	48.10	30	36.14				
As a result of being asked questions about domestic violence in this survey, my feelings about myself as a person are...					1.24 (0.73 to 2.12)	0.417	1.29 (0.73 to 2.27)	0.373
Better	16	20.00	13	15.48				
Somewhat better	21	26.25	21	25.00				
About the same as before	41	51.25	49	58.33				
Somewhat worse	2	2.50	1	1.19				
Worse	0	0.00	0	0.00				
Responding to this survey has increased my					1.40 (0.79 to 2.47)	0.240	1.47 (0.83 to 2.60)	0.179

awareness about possible problems in my relationship.

Strongly agree	23	28.40	12	14.46
Agree	24	29.63	32	38.55
Neither agree nor disagree	25	30.86	32	38.55
Disagree	6	7.41	4	4.82
Strongly disagree	3	3.70	3	3.61

Responding to this survey has made me more open to dealing with possible problems in my relationship

Strongly agree	17	21.25	9	11.11
Agree	31	38.75	37	45.68
Neither agree nor disagree	29	36.25	28	34.57
Disagree	2	2.50	5	6.17
Strongly disagree	1	1.25	2	2.47

1.43 (0.79 to 2.60) **0.232** 1.49 (0.82 to 2.69) **0.186**

Note. Analyses conducted using ordinal logistic regression, adjusted for clustering effects and practice location; Items with significant difference between intervention and comparison groups are highlighted; CI = confidence interval.

Table 4. Examples of quotes for each qualitative theme

Positive		
<i>Altruism</i>	Taking away from my world and doing something for somebody else, so I was actually quite excited every time I got a survey.	4197, I, interview
	I thought often about women still in thos [sic] situations. When you are IN it you often can't see how bad it is for you. I hope this project has an impact on how D.Violence [sic] is recognised and dealt with.	7131, C, 12m
<i>Value</i>	It has raised vivid memories of what I went thru many years ago but I am reassured to see that there is research in this social issue & that women in the future may benefit.	8045, C, 12m
	So it was probably good in a way and it made me feel good actually, you know, donating my time for something that was really bad and then they get something good out of it.	4048, I, interview
<i>Validation</i>	Just on the initial invitation... it's more or less verification. Once you have that, you can move on...It's very hard to move on, I think, if it's not acknowledged.	3036, I, interview
	The survey has cemented feelings I have had about my ex-partner. It has made me realise that my thoughts + instincts about him + the relationship have been justified.	6047, I, 6m
<i>Evaluation of the Relationship</i>	Weave program has helped me establish a better understanding of my situation/relationship. Also allowed me to express certain details which has somehow helped.	2093, C, 12m
	I found the questions useful to evaluate my life and look more closely at where my relationship was going... in some ways the weave questionnaires helped me sort of formulate what to do next and very much assess where I was at that time.	22017, C, interview
	It's the ongoing project that's really made me realise that I've had relationship issues like this.	51018, I, interview
	It was hard, but not hard I don't want to do this. It was hard, wow, this is actually how I feel...It was quite therapeutic during the time, and especially at the very start where I actually forced myself to acknowledge: I am scared. I am not safe now.	4157, I, interview

	Something that I noticed with the Weave Project is that I would never have considered the feelings and kind of rationalised that that's okay to feel like that and that what he is doing is not okay. If I didn't have a booklet in front of me that says - you know that I kind of did a tick sheet and said well actually yeah, I am feeling like this, and actually yeah, he is doing these things.	51018, I, interview
	It also made me sort of realise that even though I wasn't being physically abused, I was undergoing an emotional abuse of sorts...I really didn't recognise that until I sat down with the questions.	22017, C, interview
<i>Self-Awareness</i>	I used to sit down on a quiet time and really address the questions and think, yeah, well, how am I going. How does it feel?...I really gave myself that - made myself address it.	22017, C, interview
	Considering my life at the time, it really made me – give a long hard look at exactly what was going on.	4157, I, interview
	It has been helpful to be prompted to take time to reflect on my relationship and how it is affecting me/how I feel about it & what my options might be, in a more structured format (as opposed to rambling thoughts day to day)	38020, I, 12m
	It has caused me to stop and think, at times, about the issues covered, caused me occasionally to question my situation, my responses, which is all for the good.	1010, C, 12m
	Having to put it down in writing was interesting. Oh, is that how I feel?	22017, C, interview
	I have appreciated being given the chance to reflect on my relationship. It reminds me of the steps I still need to work on, and has helped me to refocus as I can get really bogged down in my feelings.	43064, C, 12m
<i>Empowerment</i>	I could watch myself become less and less scared, and watch myself become more assertive, realise what I wanted.	4157, I, interview
	It turned me towards a little bit more of this - well if you're aware of this, what are you going to do about it.	3013, I, interview
	Made me realise I'm not alone in this and my life was not over because I married that man now I feel lucky to have a chance to enjoy the rest of my life.	46119, I, 6m
	It was the way I thought about myself that it wasn't my fault...That was a big thing.	4048, I, interview
	It probably got me thinking about - as I said before - that it's not normal behaviour, and I don't have to accept it as normal behaviour.	9104, I, interview
	I became aware of what domestic violence is, what it looks & feels like and that I could take control and make	48130, C, 24m

	changes.	
	It was a good push for me to honestly discuss my feelings and problems with my partner. Things are now much better in our relationship.	21029, I, 12m
	I think I do remember having like a small bit of excitement about it and to make changes.	20163, C, interview
	The survey also made me more aware of my strengths which I believe gave me the confidence to be not in a relationship and know that I am okay on my own and can make my own decisions.	43025, C, 24m
<i>Positive Reinforcement</i>	I did find though that as time went on and I was filling things in I became a little more detached and not as emotional and it was more of a mechanical thing. Oh yes, I remember that I've dealt with it and I'm fine.	4014, I, interview
	It actually probably helped in that it made me realise that, you know, I haven't seen him for a long time. It's insignificant now...So it kind of made me relax a bit more about it, I think, because it made me confront them and think about those things that had happened back then.	10125, C, interview
	Sometimes reading the options reminded me of past incidents that were unacceptable and it was a relief to only be READING about them instead of experiencing them, I felt much better knowing I was out of a bad situation now.	7131, C, 12m
	I had all along gone with the belief I was indeed 'MAD' crazy, gone in the head and all the other things he called me. How very liberating to find out I too was like other women [sic] 'Abused' no not MAD but abused. I suffered in silence... Thankyou for the chance to have a say in this study I hope we will help other women realise they are not alone, isolated or 'MAD'.	38086, 24m
	I'm constantly reminded that you're not the only one. You're not going through this on your own.	3036, I, interview
	The feeling of someone caring about me really gives me strength & hope to carry on, to believe in happiness, even though there's struggle & pain on the way.	54061, I, 12m
<i>Catharsis</i>	I'm a sook and I wouldn't have wanted to put myself in a position where I just started crying and not be able to express what I thought. That's why the survey was good, because if I wanted to have a cry, I could do it whilst doing the survey.	4197, I, interview
	Being frightened in a relationship is very depressing and it is hard to find people you can trust to talk about things and	40021, I, 12m

	really open up about how you are really coping. Thanks to weave I have been able to do this.	
	In some way it was probably actually a release, to be able to get it out...So I guess you would have to say on the positive side because it was, when you unload something.	36047, C, interview
Motivation to Seek Help	The survey allowed me to open up and talk to my GP (weave GP) about the issues instead of the brave / confident front that I had always portrayed.	4160, I, 6m
	I feel by starting weave, it gave me the push I needed to get into counselling and do something about my marriage.	43004, C, 24m
	It helped to clarify my thoughts and feelings which was timely. That process was helpful in my eventual decision to separate.	22017, C, 24m
Response to the Research Process	I think life would have been different, because I was just going like this - spiralling downwards.	29029, I, interview
	I think this project is fantastic as we need to find ways to help those who are not as strong as others, that need people to lend a hand of support and know that they are not alone.	20064, C, 12m
	I didn't really expect to gain anything out of it. So it's been a nice surprise to have learnt the lessons I've learnt.	20163, C, interview
Negative		
Short-Term Emotional Reactions	The survey has resurfaced a lot of emotions that I have had subdued for all these years. It has brought them back to the surface and I have found it has made me feel more anxious generally in my own demeanor.	8045, C, 6m
	I came to the realization with certain things in my life, how certain things in my life were wrong or I wasn't being treated right...I can say I probably would have felt maybe somewhat disheartened and upset about coming to the realization of my relationship and the wrongdoings.	49045, I, interview
	If we were going through a bad patch, seeing it there in black and white, that was pretty awful.	6122, I, interview
	I think because you're answering personal questions about yourself. I don't think you can shut the book and go, that was great. You're reflecting on a lot of things that are happening that sometimes, I suppose, myself pushed to the back and I'd try not to think about things all the time. So sometimes I found it a little bit hard but not to the point that I'd sit out here crying or anything over it. I'd just feel maybe flat after it.	41075, I, interview
	The questions can bring it All back - which made me a little shakey - but glad to do it if it helps.	43071, C, 6m

	At the time of doing them I was very anxious and my heart would be racing and I'd be sweating and I'd think, oh, it's like in my face. So I found that bit, yes, a bit hard but I knew that it was worth it.	25005, I, interview
Long-Term Emotional Reactions	It helped clarify what was acceptable and what wasn't. But the more negative boxes I ticked the more negative I felt about my situation. It's much easier not to think about it.	48052, C, 24m
	I ticked that I felt worse about myself after doing survey. What I meant by that was that it makes me realise what I'm not doing to make life better for me. I try to make my relationship as best I can make it, but this survey makes me realise I really am being unfair to myself.	55102, I, 12m
	My feelings about myself are worse because I realise I am pathetic as my Ex told me but now I write about it, but I don't do anything about it.	51019, I, 6m
Recall	But you get to a point I think where you say, well, I've moved on from that now, so I don't want to keep remembering it. It becomes difficult.	4014, I, interview
	A little bit concerned, because I'd be rehashing things that are a bit nasty. But okay.	29029, I, interview
	Part of it was kind of a bit bad because it made me remember stuff I didn't want to remember.	4048, I, interview
	I don't mind being part of this survey. The only thing I don't like is it makes me think about my situation and how bad/good it may be. I spend a lot of time trying not to think about things, as I just hope they will improve.	2010, C, 24m
Retraumatization	There's sort of like areas in my mind that as soon as things start to come up I block them. But then I couldn't block them because I had to talk about them so they were all like in my face again. So that was hard to deal with and nightmares for a while.	4048, I, interview
	Participating in the weave project stirs up a lot of stuff for me - I have flashbacks, feel sick & frightened and have to do the survey in batches. But it is a really important project to be part of.	15091, C, 24m
Minimisation	I was making progress. That's when I probably nearly stopped continuing on with the project thinking oh there's probably other women out there that need this so much more than what I do.	10069, C, interview
	It was ongoing but it wasn't like I was coming home with black and blue or anything like that. It was just - I don't know. I felt like it was probably insignificant.	10125, C, interview

	I think my world's about to come to an end but, according to some of these questions, some women's worlds really are about to - so I thought, it's not as bad as what it could be.	4157, I, interview
Balanced		
	It hasn't been all roses. It hasn't. I have felt scared at times and anxious but we don't need to be; we have a voice.	10069, C, interview
	Sometimes it would feel like it was bringing up the past, so to speak. That was okay too. I think that it was all worthwhile and needed to be done.	3036, I, interview
	I had a great experience and a very positive outcome. At times I thought I had opened a big can of emotional worms!! But it worked out for the best.	29156, I, 12m
	Sometimes depressing. Sometimes cathartic. Sometimes, yeah, quite raw. Sometimes just taking a deep breath and saying, well, I just don't want to go through this anymore. So yeah, there was good and bad in it.	20163, C, interview
	At the beginning I think it brought up a lot of anger again. Like you sort of get over it and then you do the things and I think you do get angry again. I think at the start it was a negative thing....But sitting and thinking about it and going through it again and then repeating it so many times sort of thing...I think you sort of go - you've got to release it. You've just got to get rid of the anger. I think doing the projects and going over it you do that you know...You've got to get over it and so the anger is not so much there anymore.	38008, I, interview
	Just as I am completing this survey, I am in tears and I haven't cried for a while. Maybe it is because I am remembering how bad my life had been. Please don't take it negatively. Thank you for your help.	55001, I, 12m
	As time has gone on each survey has become easier. At first it was very hard for me to complete the surveys emotially [sic] but I was still glad I did but now it just confirms things.	46119, I, 12m
	Then the more I thought about it and the more I received - as I said I didn't want to rush and answer it...that's why one of the surveys sat there for a wee while very close to the date of finish.	10069, C, interview

Note. The quotes presented are referenced with a participant identification number, the group to which the participant was randomised (Comparison: C; Intervention: I) and the source of the quote (6m: 6-month survey; 12m: 12-month survey; 24m: 24-month survey; Interview: Follow-up interview after trial completion).