LearningNetwork

Mobilizing knowledge to end gender-based violence

Issue 32 | December 2020

TRAUMA- AND VIOLENCE-INFORMED INTERVIEW STRATEGIES IN WORK WITH SURVIVORS OF GENDER-BASED VIOLENCE

This Issue shares trauma- and violence-informed interview strategies for researchers working with adult survivors of gender-based violence (e.g. sexual violence, intimate partner violence). The Issue focuses on one-on-one interviews, either in-person or online. We hope this Issue will be useful to researchers in a broad range of roles and backgrounds including activists, evaluators, care providers, professors, students, and community members.

If you need support as you read through this Issue, please reach out.

WHAT ARE TRAUMA- AND VIOLENCE-INFORMED (TVI) APPROACHES?

TVI approaches emerged in relation to service provision in the fields of anti-violence, mental health, and substance use. They bring attention to the multitude of ways that individuals may experience and respond to trauma, including historical trauma (e.g. colonialism) and structural violence (e.g. ableism). By including an awareness of how broader social-structural factors impact people's lived experience, they offer a unique framework through which to understand and support individuals—one that moves away from asking "What's wrong with you?" and toward an analysis of "What happened to you?"

When applied in the context of research, TVI approaches promote that all research, but especially research with populations that have experienced trauma, be conducted in a way that is responsive to trauma and violence. TVI research seeks to reduce the chances of re-traumatization and harm for research participants and the research team.

INCREASING PARTICIPANT SAFETY WITH TVI INTERVIEWS

Since partaking in a study about gender-based violence (GBV) often means that survivors are discussing traumatic memories, there have been concerns about the well-being and safety of research participants. However, research suggests that survivors of trauma can participate in research about their experiences without experiencing unexpected or high levels of distress.¹

Indeed, engagement in research was identified by many individuals as beneficial since it provided them with an opportunity to speak about their experience openly with someone who was not a close connection (for instance, friends or family) and is perceived as a more neutral listener.² Survivors additionally expressed hope that their experiences might help others. Still, TVI strategies that aim to prevent re-traumatization and empower survivors are worthwhile to implement and can further support the safety of research participants.

4 PRINCIPLES OF TVI APPROACHES

- Understand trauma and violence, and their impacts on people's lives and behaviours
- 2. Create emotionally and physically safe environments
- 3. Foster opportunities for choice, collaboration, and connection
- 4. Provide a strengths-based and capacity-building approach to support coping and resilience³

Learn more about TVI approaches and principles through these resources:

- Webinar <u>From Trauma-Informed to</u> <u>Trauma-and Violence-Informed</u>
- Document <u>Trauma and Violence-</u> <u>Informed Approaches to Policy and</u> <u>Practice</u>
- Report <u>Toward a Trauma- and</u>
 <u>Violence-Informed Research</u>
 <u>Ethics Module: Considerations and</u>
 <u>Recommendations</u>

Interviews are a powerful force to promote understanding and change in efforts to end GBV.

TVI principles can be used to create a safe and respectful environment for interviews with survivors.

PROMOTING UNDERSTANDING OF TRAUMA AND VIOLENCE THROUGH TRAINING AND SUPERVISION

Ethically and responsibly engaging with survivors of gender-based violence requires that researchers are knowledgeable about trauma and violence and that are prepared to support survivors during the interview. Promising training approaches identified by GBV researchers include the use of model interviews, mock interviews, role plays, and debriefing.⁴ TVI supervision is also critical to encouraging and supporting the research team in their learning.⁵

Prior to interviews, researchers could complete training on topics including:

Gender-Based Violence

Many GBV agencies and shelters already offer a comprehensive introductory course on GBV for their volunteers, as well as shorter public education workshops about the causes of violence, myths and facts, safety planning, and community resources. Research teams could arrange to take an introductory GBV course or attend a workshop by GBV specialists (e.g. shelter workers, survivor advocates). In addition to training in general on GBV, research teams can further build their knowledge on the specific form of violence they are studying through online training and webinars such as:

- Learning Network Webinars and Resource Spotlights
- Ontario Association of Interval and Transition Houses (OAITH) Training Portal
- Elder Abuse Prevention Ontario Training
- Ontario Network of Sexual Assault/Domestic Violence Treatment Centres Training

It is important to recognize that research team members themselves may be survivors of GBV (whether they disclose this or not). Create opportunities for the research team to seek support, take a break from training sessions if needed, debrief, and disclose in a safe environment.

Neurobiology of Trauma and Violence

Research has shown that experiences of trauma and violence have impacts on the brain and individuals' physical and mental well-being. For instance, trauma can impact how the brain encodes memory, causing potential memory loss or difficulty recounting the sequence of events. Understanding the neurobiology of trauma and violence is therefore important as it helps researchers to avoid potentially harmful or re-traumatizing questions and to prepare for potential topics and reactions during the interview process.



Learn more: "Her Brain Chose for Her" Interactive Training Tool by OAITH shares information about the neurobiology of trauma and how to utilize an intersectional lens when providing trauma-informed care. Additionally, this report by Lori Haskell and Melanie Randall for Justice Canada details <a href="https://documents.org/learning/l

Structural Violence

Systemic inequities and injustices in our society may impact how individuals experience GBV, their responses, and their ability to seek help. TVI approaches uniquely identify the necessity of not just understanding GBV but also placing it in the context of individuals' cultures and identities, and the interconnecting oppressions associated with them (e.g. ableism, sexism, transphobia, colonialism, racism). Research teams can strengthen their skills by partaking in further training specific to the presence and impacts of structural violence, as well as training on cultural safety. Such trainings can be completed by antiracism and anti-oppression consultants and organizations in your community.



FOUR THINGS INTERVIEWERS
NEED TO KNOW IN ORDER
TO PREPARE FOR THE
INTERVIEW, AS SHARED BY
SURVIVORS OF RAPE:

- 1. Rape happens to all kinds of people and survivors will respond in different ways so interviewers should not be surprised by who or what they encounter
- 2. Rape has devastating impacts on multiple facets of individual's lives, and interviews will be taking place with people at different stages in the process of recovery
- 3. Interviewers cannot truly understand survivors' experiences unless they have "walked in their shoes" although personal and learned knowledge can help
- 4. Interviewers should help individuals feel comfortable in the interview as they bear witness to the individual's experience with patience and compassion⁸

CREATING PHYSICALLY AND EMOTIONALLY SAFE SPACES

Survivors' needs concerning physical and mental health, accessibility, and cultural safety may affect where and when the interview may affect where and when the interview is conducted. Research teams can work within these parameters to offer choice to survivors in a way that recognizes the historical and ongoing effects that trauma and violence have had on their lives. Research teams might:

- Offer childcare during the interview
- Ask if the interviewee would like anyone present during the interview for support. For instance, a friend, family member, sexual assault advocate, or animal companion
- · Connect with trusted and qualified interpreters upon request
- Inquire about whether the interviewee needs any specific lighting arrangements (e.g. to accommodate visual impairment or neurological trauma)
- Build a diverse interview team and offer research participants the option to meet with a particular interviewer to accommodate cultural safety and potential triggers based on the interviewer's positionality
- Conduct the interview at the location most convenient for the interviewee when it is safe and possible to do so (e.g. at their home, a GBV organization, a health unit)
- State explicitly the features and accessibility of the research center if interviews are conducted there (e.g. whether there is a gender-neutral bathroom, audio and tactile signage)
- Cover any costs associated with the interview (e.g. transportation)
- · Provide water and light snacks or encourage participants to bring a light snack with them
- Ask about triggers or issues with specific smells, sounds, images, or words that the research team should avoid
- Have materials available in alternative formats (e.g. large print, audio, braille)

Research teams could additionally conduct a <u>trauma walk-through exercise</u> to assess what it is like to be in their research and interview space and what TVI improvements could be made.

Online and Phone Safety

When interviews are conducted over the internet or over the phone, they can bring a distinct set of safety challenges. For instance, it may be difficult to discern if the interviewee is alone and able to talk safely in that moment. One option is for researchers to consider setting up a confidential code word or pre-established signal (such as a specific hand gesture) between the interviewer and interviewee in order to discern if the interviewee can speak safely. Whatever option is chosen, it is critical that interviews begin with a general description of the research topic (e.g. "women's health study") until the safety and privacy of the participant has been confirmed.9



OBTAIN ONGOING CONSENT

Emily Paradis reminds us that individuals may be "accustomed to accommodating themselves to non-choice situations in order to survive." In addition to obtaining consent thoroughly at the beginning of the research process, consent can be embedded throughout the interview. Survivors should be reminded that their participation is entirely voluntary, that they will face no repercussions for ending the interview, and that they can end the interview at any time. Questions that could be asked to enable ongoing choice include:

- If you want to end the interview, how will you let me know?
- What topics, if any, would you like to avoid talking about?
- Is there any information you would like to not be shared in a publication? For instance, direct quotes. 11

IMPLEMENTING TVI PRINCIPLES WHEN INTERVIEWING SURVIVORS

Though the interview structure and questions asked will be specific to the research topic, there are some general best practices that researchers can keep in mind.

Avoid "Victim-Blaming"

Despite the best intentions of researchers, the questions they ask may contribute to harmful narratives around GBV. Interview questions developed with an awareness of myths around GBV and a sensitivity to the trauma and violence experienced reduce the possibility of re-traumatization and harm. Training and review of the interview protocol by the research team and GBV external reviewers can further help to ensure interview questions do not perpetuate harmful narratives.

Inappropriate Questions	Appropriate Questions
Did you say no or try to fight back?	Tell me about the night that you were raped.
Why didn't you leave sooner?	What were some of the barriers to leaving? What gave you courage to leave?
Did it hurt?	Would you share some of the ways it affected you?
How come you seem so calm talking about it?	How is it for you talking about what happened?

Review for Safety

In addition to interview protocol review by the research team and research ethics board, researchers can gain valuable insights with feedback from GBV and culturally responsive organizations. These expert reviews can help to ensure that the questions do not have unintended negative consequences and can identify safety concerns. Collaborating with organizations devoted to safely and meaningfully including survivors' voices, like WomenattheCentre, is particularly beneficial. Interview protocols may be pilot tested with support of these organizations.

Build Timing and Pace that Enable Choice and Safety

If the interview is rushed, it may lead to the interviewee feeling re-traumatized or exploited. Likewise, if the interview goes long, it may impact compensation and make it difficult for the interviewee to make appropriate arrangements (e.g. childcare, bus schedules). As such, in order to respect survivors' voices and needs, researchers could plan in their initial interview protocol to accommodate for late arrivals, pauses and breaks in interviews, and the time it will take to build rapport.

Interviews could be broken up into different sections with opportunities for check-ins and breaks. Researchers can introduce what each section will address and its purpose, so the interviewee knows what to expect and why these questions are being asked of them. For instance:

"We are now on the third section and are nearly done the interview. This section of the interview will be focused on how violence has impacted you or the effects it has had on your life. We are asking these questions so to inform services on how to better support survivors."

Interviewers also need to be attuned to the behaviours of interviewees (e.g. changes in tone, lack of eye contact) in order to determine if it is appropriate to offer a break or remind the interviewee of their right to end the interview.

As well, at the beginning of the interview, interviewees could be provided with the opportunity to review the questions so they can identify any questions they would like to skip or potential issues.



Recognize and Support Resilience and Coping

Interviews can enable survivors to share not only their experiences of violence but also their resilience. Interview scripts may include questions about the individual's strengths and, especially towards the end of the interview, future goals and aspirations, both short-term and long-term.¹² For example:

- You had a huge smile when you spoke about your son. Can you tell me more about him?
- Before we start, can you tell me a bit about yourself and your interests? What are your favourite hobbies?
- What helped you in your healing?
- Is there anything you would like to get more support with? I would be happy to connect you with some options.

Offer a Variety of Resources for Support

Prior to the interview, researchers should establish a list of community supports that they can offer to the interviewee at the end of the interview. That list could consist of supports in the GBV sector (e.g. shelters, sexual assault centres), in addition to culturally responsive organizations for different communities. The list could also include services that focus on engaging the body, like yoga and sports, and essential resources (e.g. public health centres, food banks, religious organizations). Research staff may work with participants to save relevant resources in a manner that is safe for them (e.g. under a different name in their phone). Through training, the research team can gain familiarity with these resources, what services they offer and their purpose, in order to appropriately direct those seeking support.



In some rural, remote, and Northern regions, culturally responsive resources may not be available or accessible and the research team may need to create short-term support mechanisms (e.g. access to a counsellor, transportation to a shelter).¹³

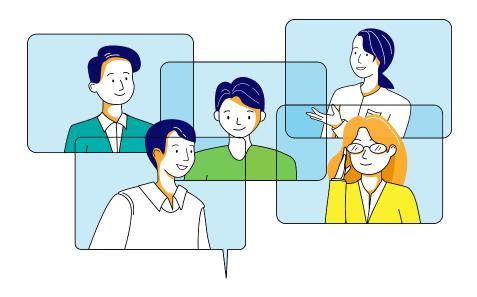
Recognizing Vicarious Trauma and Supporting the Research Team

The research team may be impacted by their work learning about GBV and conducting or listening to interviews from survivors. Sometimes this is referred to as vicarious trauma. Advocates working with survivors of physical and sexual violence have called this soul pain or the "deep, gut-wrenching ache that pierces the core of one's being. It is a spiritual pain, a sorrow born of seeing the cruelty that human beings inflict on one another and of feeling powerless to stop it." Vicarious trauma could manifest in many different ways including post-traumatic stress, nightmares and sleep disturbances, and avoidance of tasks. Research teams can help to prevent and address vicarious trauma through various means including building in supports for researchers (e.g. counselling, peer support), allowing flexible work schedules with breaks and time for healing, and discussing the reality of vicarious trauma.

Learn more about vicarious trauma experienced by researchers and strategies for responding in <u>Guidelines for the Prevention and Management of Vicarious Trauma among Researchers of Sexual and Intimate Partner Violence.</u>

The Importance of Peer Support

One strategy for responding to vicarious trauma experienced by researchers is the use of TVI peer support. Peer support can be useful in strengthening and supporting the research team. Peer support sessions can include debriefing in a confidential and de-identified way about interviews and discussing experiences going through training. They can additionally include group self-care activities that can be completed in person or online like painting, cooking, or practicing guided meditation together.



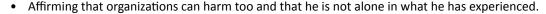
A LOOK AT TVI INTERVIEW STRATEGIES IN ACTION

During the interview, researchers will need to be prepared for how trauma and violence may impact the manner in which survivors respond. In what follows, we consider TVI responses to four scenarios that an interviewer might encounter when conducting GBV research:

The interview with Max focused on experiences of violence that he faced from his same-sex partner. When the interview moved on to Max's experiences in seeking shelter and support, Max started to cry. He said "no one ever helps gay people like me" and that the organizations he reached out to were "homophobic."

A TVI response from the researcher could include:

- · Noticing and validating Max's feelings.
 - » "That sounds like it was really hurtful. It means a lot that you are sharing this with me."
- Asking Max if he would like to continue the interview and affirm that it will not affect his compensation if he chooses not to.
- Asking Max if he would like anything (e.g. tissue, tea, break) and having materials ready that may help with calming and emotional regulation like sensory objects (e.g. stress ball, putty).
- Sharing with Max that it is not his fault that he did not receive the help and supports he deserved using his own words that "no one helps gay people like me."



- Re-stating the research goals and purposes, including why these questions are being asked.
- Referring Max to culturally responsive resources, like supports for LGBTQ2S individuals that he can connect with following the interview.

Alice was participating in an online interview about sexual violence. She logged on 30 minutes late to the virtual interview and said she was feeling rushed. Alice had trouble following the questions and asked that they be repeated multiple times. When the interviewer asked Alice about the sexual assault she experienced, Alice said she was feeling a bit confused about the details. She shared some information, but the interviewer found it difficult to follow and understand what happened. The interviewer worried the research team was not receiving the information the study needed.



A TVI response from the researcher could include:

- Providing time for Alice to get oriented to the interview by asking general questions and perhaps suggesting the interview starts a bit later or move the appointment if Alice would like.
- Checking in about the audio quality over the internet and offering to send the research questions being asked through chat, moving closer to the camera/microphone, or using the phone rather than computer.
- Recognizing that post-traumatic stress and/or a traumatic brain injury may be impacting Alice's recollection of events.
- Refraining from asking closed or leading questions to clarify details or push Alice
 to remember. For instance, instead of asking "Did you go to the house by driving
 yourself?", the researcher could ask "Would you tell me about how you travelled that
 night?"
- Debriefing with the research team to discuss their experiences following the interview.
- Engaging in grounding techniques (e.g. deep breathing, stretching) after the interview.



Denise is part of a university research team on a project about children's exposure to intimate partner violence. Many interviewees and staff noted that Denise was a wonderful and compassionate interviewer in previous research projects. However, in their research meetings, the team found that she was unusually quiet. Raven, the Principal Investigator, approached Denise and asked about what was happening. Denise shared that she felt guilty because her father abused her mother and she never intervened, even though she feels she should have.

A TVI response from the Principal Investigator could include:

- Thanking Denise for sharing what happened.
 - » "I am so sorry this happened to you. I appreciate you telling me."
- Maintaining confidentiality and not sharing this information with anyone unless Denise requests that.
- Asking if Denise is currently safe in her home environment (considering, for instance, that she may be living with her father and experiencing violence herself).
- Letting Denise know that it is not the responsibility of children to stop abusive behaviours and it is not their fault if violence occurs.
- Asking Denise if she would like to continue with the project and if so, what would be a safe way for her to do so.
- Identifying the courage that Denise has shown in joining the project and the strength of her interview skills.
- Offering resources that Denise could reach out to for further support.
- Acknowledging that further members of the research team may be experiencing trauma and in need of support.



Sean walked into the research centre for their interview and was met by a receptionist who said that "Sean is the next appointment and she should be here soon." Sean corrected the receptionist that they are two-spirit and use they/ them pronouns. When the interviewer arrived, Sean shared that they were upset about what happened at reception and asked to start the interview with smudging. The interviewer told Sean that smudging was not possible since doing so would set off the fire alarms.



A TVI response from the researcher and research team could include:

- Acknowledging and apologizing for the misgendering that Sean faced by the receptionist.
 - » "It's understandable that you feel upset about being misgendered. I am sorry that happened as part of your experience with us today."
- Offering that the interview be held at another time and space that works better for Sean.
- Offering Sean alternative options.
 - » "Would it help to have a moment to go for a walk and perhaps smudge outside? We can start the interview when you are back inside and ready."
- Debriefing about the interview confidentially with the appropriate person on the research team.
- Discussing what happened through a TVI lens with the receptionist.
- Changing the intake protocols to include questions about the interviewee's name, pronouns, and any accessibility and/or cultural needs that staff and researchers should be aware of.
- Engaging with culturally responsive organizations to review the research project.

CONCLUSION

This Issue has sought to support research teams in their efforts to recognize the connections between trauma and violence as it pertains to the interview process. Doing so supports the safety of survivors and researchers alike.

While this Issue focuses on best practices, a core value in TVI research is enabling choice and recognizing agency. We therefore encourage GBV researchers to work with survivors to determine what is best for their specific needs. We also recognize that there are limitations to what practices researchers may be able to implement due to funding and institutional constraints. Within these conditions, we acknowledge that many researchers and advocates continue to push for further change within their organizations and funding bodies.

We recognize and appreciate the continued work by researchers advocating for and implementing more safe research practices. TVI approaches to interviewing, and to research more broadly, can supplement this work by offering a range of possibilities for innovative research practices that empower survivors and advance knowledge of GBV.



PLEASE EVALUATE THIS ISSUE

Let us know what you think. Your input is important to us. Please complete <u>this brief survey</u> on your thoughts of this Issue.

THE LEARNING NETWORK

Linda Baker, Learning Director, Learning Network, Centre for Research & Education on Violence Against Women & Children

Dianne Lalonde, Research Associate, Learning Network, Centre for Research & Education on Violence Against Women & Children

Robert Nonomura, Research Associate, Learning Network, Centre for Research & Education on Violence Against Women & Children

Jassamine Tabibi, Research Associate, Learning Network, Centre for Research & Education on Violence Against Women & Children

We are grateful to the researchers and the women who shared their experiences.

SUGGESTED CITATION

Lalonde, D., Baker, L., Nonomura, R., & Tabibi, J. (2020). Trauma- and Violence-Informed Interview Strategies in Work with Survivors of Gender-Based Violence. Learning Network *Issue 32*. London, Ontario: Centre for Research & Education on Violence Against Women & Children. ISBN # 978-1-988412-45-0

GRAPHIC DESIGN

Natalia Hidalgo Castro, Communications Coordinator, Centre for Research & Education on Violence Against Women & Children, Western University

CONTACT US!

www.vawlearningnetwork.ca

y <u>twitter.com/learntoendabuse</u>

www.facebook.com/TheLearningNetwork

Contact vawln@uwo.ca to join our email list!

- 1 Alexander, S., Pillay, R., & Smith, B. (2018). A systematic review of the experiences of vulnerable people participating in research on sensitive topics. *International journal of nursing studies*, 88, 85–96. https://doi.org/10.1016/j.ijnurstu.2018.08.013; Hebenstreit, D., & DePrince, A. (2012). Perceptions of participating in longitudinal trauma research among women exposed to intimate partner abuse. *Journal of Empirical Research on Human Research Ethics*, 7(2), 60–69. https://doi.org/10.1525/jer.2012.7.2.60; Carlson, N., Newman, E., Daniels, J., 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. https://doi.org/10.1300/j229v04n02_08; Edwards, G, Greaney, K., & Palmer, K. (2016). Participants' reactions to and suggestions for conducting intimate partner violence research: A study of rural young adults. *The Journal of Rural Health*, 32(1), 3–12. https://doi.org/10.1111/ irh.12126
- 2 Campbell, R., & Adams, A. (2009). Why do rape survivors volunteer for face-to-face interviews?: A meta-study of victims' reasons for and concerns about research participation. *Journal of Interpersonal Violence*, 24(3), 395–405. https://doi.org/10.1177/0886260508317192; Alexander, Pillay, & Smith, 2018; Carlson et al., 2003.
- **3** Ponic, P., Varcoe, C., & Smutylo, T. (2016). Trauma- (and violence-) informed approaches to supporting victims of violence: Policy and practice considerations. *Victims of Crime Research Digest 9*. Retrieved from https://www.justice.gc.ca/eng/rp-pr/cj-jp/victim/rd9-rr9/p2.html
- 4 World Health Organization. (2016). Ethical and safety recommendations for intervention research on violence against women. Geneva: World Health Organization. Retrieved from: https://www.who.int/reproductivehealth/publications/violence/ intervention-research-vaw/en/; Campbell, R, Adams, A., Wasco, S., Ahrens, C., & Sefl, T. (2009). Training interviewers for research on sexual violence: A qualitative study of rape survivors' recommendations for interview practice. Violence Against Women, 15(5), 595–617. https://doi.org/10.1177/1077801208331248
- **5** Knight, C. (2018). Trauma-informed supervision: Historical antecedents, current practice, and future directions. *The Clinical Supervisor*, 37(1), 7–37. https://doi.org/10.1080/07325223.2017.1413607; Courtois, C. (2018). Trauma-informed supervision and consultation: Personal reflections. *The Clinical Supervisor*, 37(1), 38–63. https://doi.org/10.1080/07325223.2017.1416716; Berger, R, Quiros, L., & Benavidez-Hatzis, J. (2017). The intersection of identities in supervision for trauma-informed practice: Challenges and strategies. *The Clinical Supervisor*, 37(1), 122–141. https://doi.org/10.1080/07325223.2017.1376299
- 6 Campbell & Adams, 2009.
- **7** Haskell, L., & Randall, M. (2019). *The impact of trauma on adult sexual assault victims*. Report submitted to Justice Canada. Retrieved from https://www.justice.gc.ca/eng/rp-pr/jr/trauma/trauma eng.pdf
- 8 Campbell et al., 2009, p.604.
- 9 World Health Organization, 2016.
- **10** Paradis, E. (2009). Ethics in research with homeless women. In Hulchanski, J. David; Campsie, Philippa; Chau, Shirley; Hwang, Stephen; Paradis, Emily (Eds.), *Finding Home: Policy Options for Addressing Homelessness in Canada*. Toronto: Cities Centre, University of Toronto, p. 10.
- **11** Meyer, M. (2018). Practical tips for ethical data sharing. *Advances in Methods and Practices in Psychological Science*, 1(1), 131–144. https://doi.org/10.1177/2515245917747656
- **12** Westmarland, N., & Bows, H. (2018). *Researching gender, violence and abuse: Theory, methods, action*. London: Routledge, p.54-5.
- 13 World Health Organization, 2016.
- **14** Pearlman, L. A., Saakvitne, K. W. (1995). *Trauma and the therapist: Countertransference and vicarious traumatization in psychotherapy with incest survivors. New York*, NY: W.W. Norton, p.31
- **15** Jirek, S. (2015). Soul pain: The hidden toll of working with survivors of physical and sexual violence. *SAGE Open*, 5(3), 1-13, p.1. https://doi.org/10.1177/2158244015597905
- 16 Bober, R, & Regehr, C. (2006). Strategies for reducing secondary or vicarious trauma: Do they work? *Brief Treatment and Crisis Intervention*, 6(1), 1–9. https://doi.org/10.1093/brief-treatment/mhj001; Figley, C., & Kleber, R. (1995). Beyond the victim: Secondary traumatic stress. In C. Figley (Ed.), *Compassion fatigue: Coping with secondary stress in those who treat the traumatized* (pp. 75-98). New York: Brunner Mazel.; Slattery, G, & Goodman, L. (2009). Secondary traumatic stress among domestic violence advocates: Workplace risk and protective factors. *Violence Against Women*, 15(11), 1358–1379. https://doi.org/10.1177/1077801209347469