Disclosing survivor status to professional colleagues in organisations that address violence against women and girls

Zoe Cox

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Zoe Cox

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Abstract

Despite violence against women and girls (VAWG) affecting one in three women globally, the disclosure of lived experience of VAWG is a nuanced topic which presents complexities for the individual, amplified further when working in the sector as a professional. This study explores how staff in VAWG organisations view interprofessional disclosure of survivor status, and how survivors working in VAWG (survivor-professionals) manage decisions and issues arising from concealing or disclosing their survivor status to colleagues.

This study was in two phases. Data was collected through a qualitative survey distributed to a range of VAWG organisations across England in Phase 1, and 11 qualitative interviews with survivors of sexual or domestic abuse currently working in VAWG in Phase 2. The data was analysed using reflexive thematic analysis and creative methods were used to support analysis and early dissemination of the findings.

The findings show that while survivor-professionals often wish to disclose to combat stigma, to apply their experiences to their work, and to build authentic relationships with colleagues, barriers such as the risk of being seen as impaired by colleagues encourage concealment. The need to maintain professional credibility with wider stakeholders also deter disclosures. Additionally, the political origins of VAWG organisations, rooted in feminist values, often clash with neoliberal pressures such as sector wide professionalisation, impacting on how disclosure decisions are made and disclosures are received.

This study identified the antecedent goals and outcomes for survivor-professionals concealing or revealing survivor status and highlights the complex mix of personal, social, and structural factors that influence disclosure decisions. It emphasises the need for clarity for survivor-professionals on how disclosures may be received in the workplace and offers guidance to both survivors and organisations on navigating survivor status disclosure.

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Thesis overview

This thesis focuses on the disclosure of survivor status between colleagues working in organisations that address violence against women and girls (VAWG). Data was collected in two phases through a qualitative survey distributed to VAWG organisations across England and Wales and 11 in-depth qualitative interviews with survivors of sexual or domestic abuse working in the VAWG sector. I draw upon theories around stigma, impression management, and human relations management to consider how disclosure between professionals in the context of VAWG organisations impacts on survivor staff member’s personal and professional identities and working relationships. I argue that personal, social, and structural factors combine to influence disclosure decisions and outcomes for survivor-professionals working in VAWG. Whilst personal desires to develop close relationships with colleagues and to present oneself authentically encourages disclosure, social stigma and neoliberal pressures on VAWG organisations such as sector wide professionalisation, create barriers. In addition, the unique political position VAWG organisations historically occupy within the women's liberation movement in the UK contributes to survivor-professionals’ motivations to disclose and influences how organisations welcome or respond to staff disclosures.

Chapter 1, *Introduction,* is an Introduction to the thesis, giving a background to the subject area. I explain the terminology used throughout, the rationale for the study and research questions, and situate myself as a researcher, foregrounding the importance of reflexivity and researcher positionality. I offer a brief history of the violence against women and girls sector and introduce a selection of theories which have helped me further define the concepts this study addresses.

Chapter 2, *Literature review,* explores the literature in relation to disclosure of stigmatised identities, particularly in the workplace, and the historic, current, and evolving structures in place around utilising lived experience in professional spheres. This chapter provides background and context to my study and identifies the gap in the research my study aims to fill.

Chapter 3, *Theoretical frameworks,* examines the ontological and epistemological frameworks I have employed to scaffold the study. I outline the intellectual journey that led me to identify and adopt the most suitable paradigm for my study, beginning with an examination of constructionism and critical realism. I then discuss the compatibility and tensions between these perspectives and my commitment to feminist principles.

Chapter 4, *Design and methods,* focuses on the research design and data collection process, and the tools and methods employed for each phase of the research. I introduce my research questions and further consider my positionality, then I describe and provide the rationale for the methods employed in both phases. The chapter ends with a discussion of the ethical considerations of this research, particularly in relation to feminist principles.

Chapter 5, *Illustrations and stories as method,* further builds on the previous chapter with a focus on creative methods. I examine creative methods in their application to research familiarisation, interpretation and dissemination. I begin by covering the background of comics and graphic narratives and their role in research as sophisticated, multimodal forms of literature. I explore the challenges of hermeneutic interpretation and the representation of participants within illustrations. Further, I discuss the rationale for my own illustrated contributions to this thesis, explaining elements of my illustrative style and character design. Last, I explore the epistemological significance of allegory and metaphor and its value in collaborative meaning making which will be addressed further in chapter 10.

The next three chapters, Chapter 6, 7, and 8, displays the findings, themes, and initial analysis of Phase 1 and Phase 2 of the study. Chapter 6 presents Phase 1 in the form of commix (explained further below), whilst chapter 7 presents the first two themes of Phase 2, and chapter 8 presents the second two themes.

Chapter 9, *Discussion,* builds on the findings from the previous three chapters by exploring the personal, social, and structural factors that influence survivor-professionals' disclosure experiences. This discussion is grounded in relevant theories, models, and literature. The chapter begins by examining the role of disclosure in shaping relationships and fostering solidarity and connections among staff, drawing on Goffman's (1963) concepts of 'the own' and 'the wise'. It then addresses the difficulties of active concealment, referencing self-verification theory (Swann, 1983) and the theory of recognition (Honneth, 2012), further, it discusses participants' motivations for disclosing in order to maintain authenticity and the benefits of personal congruence and authentic leadership. Next, it discusses disclosure as a means of self-promotion and validation of survivor insights, considering lived experience as a form of epistemic privilege. It questions whether relational-cultural theory (Miller, 1987) provides a more suitable framework for understanding survivor status disclosure in VAWG workplaces. The chapter then transitions to the impact of political and structural factors specific to VAWG organisations, addressing issues of depoliticisation, bureaucratisation, and professionalisation and its impact on staff disclosure experiences. Lastly, it explores structural stigma (Link & Phelan, 2001), the political power of testimony and its challenges under neoliberal politics, and ends with a consideration on the reframing of disclosure from a form of confession, to a position of being a witness.

Chapter 10, *The Wild Woman and the Winding Forest,* presents a selection of the key findings in the form of an illustrated fairytale. I discuss the metaphorical representations employed and my reasons for creating this fictional piece as an experimental creative method.

Chapter 11, *Conclusion,* concludes the thesis. I review the key findings in relation to my research questions and identify my original contribution to knowledge across a range of disciplines. I consider the implications of the research, including further research possibilities, and the recommendations that can be drawn from this study. I also present the recommendations made by my research participants. I reflect on the methods used in my data collection and analysis and the limitations of this study. To end, I discuss the philosophical journey this research project has taken me on, I consider knowledge ownership, and ask what is a PhD.

This thesis takes an unconventional approach by integrating illustration and storytelling into the communication of its findings. As someone with a background in art and illustration, I have always been drawn to the power of visual storytelling to convey complex ideas and evoke emotions which contribute to knowledge generation. Midway through this project I began to explore whether these skills could find a place within the realm of social sciences. Though arts based methods of data collection or dissemination are not new, the traditional PhD thesis is a formal academic paper. While I adhere to traditional methods for most of this thesis, I have also explored visual and metaphorical interpretations of my data. By experimenting with illustrated metaphors and allegories, I aim to add depth to the interpretation of the findings and express concepts that might otherwise be dry or difficult to articulate. I intend for these creative methods to capture the nuances of experience and emotion in ways that text alone may not. I hope that this offers readers a richer, more immersive understanding of the research findings.

This research was conducted in two phases; the findings from the first phase are displayed in a format similar to a comic or picture book in chapter 6. The findings from the second phase are provided as a traditional thesis chapter but I have taken a few related concepts from the analysis and created a 6 page illustrated fairytale. There is a dedicated chapter in this thesis (chapter 5) that delves deeper into the use of these illustrations and metaphors when disseminating research findings, particularly research that focuses on individuals' experiences, relationships, and feelings. This chapter discusses the role and effectiveness of illustration and storytelling in academic research, and details my process of designing the illustrated contributions to this thesis.

Chapter 1 - Introduction

1.1 Introduction

Violence against women and girls is a pervasive, global, social issue with significant negative consequences for victims. It is estimated that worldwide, around 1 in 3 (30%) women have been subjected to physical and/or sexual violence by an intimate partner or sexual violence by a non-partner at some point in their lives (WHO, 2024). Despite advancements in the law and social understanding of crimes such as sexual assault and domestic violence, victims and survivors can still be stigmatised and disempowered as a result of cultural attitudes around such experiences (Kenedy & Prock, 2016, Barnett et al., 2018). Sexual and domestic abuse victim stigma can arise for reasons such as the misappropriation of blame put onto the victim, and/or the resulting traumatic or 'damaging' effect of the abuse on the victim's mental health (Weidner & Griffitt, 1983; Chaudoir & Fisher, 2010; Deitz et al., 2015; Kenedy & Prock, 2016; Eaton, 2019; Taylor, 2020). Stigma around sexual and domestic abuse also arises from cultural and religious norms and beliefs (Pylas, 2007; Rife, 2009; Barnett et al., 2018) such as gender expectations (Lanthier et al., 2023), historic and modern social power dynamics (Westlund, 1999; Tramell & Morris, 2012; Barnett, 2016), sexism and rape myths, with studies showing how men are more likely to accept rape myths and blame victims than women (Suarez & Gadalla, 2010; Hayes et al., 2013; Barnett et al., 2018).

Survivors of sexual or domestic abuse can experience stigma in a variety of forms (Deitz et al., 2015; Eckstein, 2016). The stigma can be perceived, based on how they think others view them; internalised, where their own self perception is shaped by negative cultural beliefs about victims/survivors; anticipated, where they fear the negative reactions of others if they were to disclose; and experienced, where they face actual prejudice or discrimination (Quinn & Earnshaw, 2013; Deitz et al., 2016; Murray et al., 2018). Victims/survivors who disclose survivor status may experience felt (internal) stigma such as feelings of low self worth (Scamber, 1998) or enacted (external) stigma, characterised by experiences of prejudice or discrimination from others (Deitz et al., 2016).

Stigmatising or negative responses to disclosures of abuse can also increase distress symptoms in the victim/survivor, inducing further internalised stigma, self blame, anxiety, and depression (Litterton, 2010; Orchowski & Gidycz, 2015). However, within the global north, there exists a societal expectation for survivors to share their stories to undergo a process of recovery (Tamas, 2011). Speaking out is seen as a prerequisite to recovery with 'break the silence' being a common motif in many social movement campaigns (McLaughlin, 2011). Conversely, neurobiological, physiological, and societal factors linked to trauma can act as additional barriers to disclosure (Van der Kolk, 2014). This, in combination with the risk of societal stigma, creates a paradoxical situation wherein survivors are simultaneously encouraged to speak out but are faced with obstacles that prevent them from doing so in a way that does not threaten their social identity or safety.

For those with concealable stigmatised identities, managing how much personal information to share in the workplace can be challenging (Clair et al., 2005; Jones & King, 2014). Workplaces are primarily professional spheres, yet interpersonal relationships are often formed there (David et al., 2023) and in the case of professions that involve relationships and the need for empathy, staff are required to perform emotional labour (Hochschild, 1983). This dynamic may become particularly complex when the work involves sensitive subjects such as sexual or domestic abuse. In such contexts, the issue of one's own survivor status may seem relevant to share, not only due to the personal connection to the subject matter but also because of the potential impact on professional interactions and the political implications of choosing to conceal or reveal survivor status.

Max Weber believed that a key principle for a successful organisation was impersonality, where staff were employed based solely on technical skills and relationships between employees were kept strictly professional (Serpa & Ferreira, 2019). Weber's bureaucratic system was designed to encourage rational decision-making and worker efficiency, and keep organisations free from political influences (Olson, 2006). By minimising the influence of personal biases and relationships through impersonality, a professional environment can be maintained (Serpa & Ferreira, 2019). However, this approach to managing a workforce may not fare well for many human services and empathy-based or caring professions (Mumby & Putnam, 2019; Kim & Williams, 2022). Professions such as social work and healthcare often require a workforce able to apply emotional intelligence and interpersonal skills and knowledge (McLeod & McLeod, 2011). Such professions also carry the risk of vicarious trauma and emotional burnout that personal supervision and supportive collegial relationships can help safeguard against (Melaki & Stavrou, 2023). The forming of positive personal relationships between staff and stakeholders can lead to bonds of mutual care and respect, loyalty, and trust which can be viewed as a form of social capital for organisations (Kramer, 2002).

Frontline staff working in services that address violence against women and girls are required to perform emotional labour, manage the risks of vicarious trauma, and be personally reflective as a basic condition of their job (Iliffe & Steed, 2000; Taylor et al., 2019; Padmanabhanunni & Gqomfa, 2022). This means not only being able to demonstrate empathy towards clients or service users but using one's own emotional understanding of situations as an everyday tool. In contrast to Weber's ideal of impersonal professionalism, the emotional demands in these fields blur the boundaries between personal and professional identities. This may create a complex dynamic where staff must navigate the boundaries of professional and personal disclosures concerning their own lived experiences and survivor status, which this study seeks to investigate. As Hochschild (1983) explains, when workers are expected to perform emotional labour that conflicts with their true emotions, it can lead to feelings of shame, alienation, and burnout. Workers may feel pressured to suppress or display certain emotions to meet expectations set by those in power such as managers or supervisors, causing them to feel disconnected from their authentic selves.

Additionally, violence against women and girls’ organisations were born out of the Women’s Liberation Movement and the influence of the political origins of the sector are still present in many VAWG organisations and the workforce today (Jones & Cook, 2008; Hague, 2021). These organisations also developed management structures based on feminist ideals such as collectivism rather than a typical bureaucratic hierarchy (Hague, 2021). Consequently, the professional boundaries prescribed by Weber may clash with the need for personal reflection and emotional labour required in these settings. This tension highlights the complexities involved in managing personal disclosures, especially around sensitive issues like survivor status, in work environments that require staff to emotionally engage and reflect.

Recognising and managing these complexities may be crucial for the wellbeing of the staff and the effectiveness of the services they provide. Staff must find a way to balance the benefits of disclosure and openness with professional expectations of impersonality. Sharing personal experiences can strengthen empathy, trust, and solidarity among colleagues, potentially enhancing collaboration and support networks (Reich & Herschocovis, 2011; Sutton, 2020). However, disclosing such sensitive information carries risks, including vulnerability to stigma, discrimination, or even professional repercussions (Jones & King, 2014). This balancing act is further complicated by organisational norms and policies which may influence the extent to which personal experiences are shared and valued (Clair et al., 2005).

This thesis explores how women working in organisations that address violence against women and girls manage decisions and outcomes around disclosing their own survivor status to professional colleagues. I turn now to explaining my use of language and how I came to decide on the terminology used throughout the majority of this thesis.

1.2 Terminology

Language carries political weight and can directly influence the framing and understanding of the complex issue of sexual and domestic abuse (Wright & Hearn, 2013). Therefore, particular consideration has been given to the terminology and acronyms used throughout this thesis. There are several terms to consider and interview participants were consulted on their personal preferences which have been taken into account. I have chosen to use ‘violence against women and girls’ (VAWG) as an umbrella term to refer to both sexual abuse and domestic abuse. This choice aligns with the terminology commonly employed in the organisations in the UK under study (e.g. Womens Aid, Rape Crisis, Social Services, and the NHS).

At its core, sexual abuse and domestic violence are manifestations of power imbalances, exacerbated by societal norms rooted in patriarchal structures (U.N. Secretary-General, 2006). For this reason, another common term, 'gender based violence' (GBV) has been rejected as it obscures the fact that men are disproportionately the perpetrators of violence and women and girls are disproportionately the victims (ONS, 2023a; ONS, 2023b). The term 'male violence against women' (MVAW) has been promoted by feminists and organisations wishing to take a more political stance with their language (Vogels, 2023). This political stance is important to me and, as a feminist researcher, it is one I wish to acknowledge. How an issue is discussed impacts how we constitute and reproduce meaning, therefore it can be argued that studies on VAWG that obscure males as perpetrators through language become part of the problem (Philips & Henderson, 1999). Whilst MVAW importantly highlights the social phenomenon of men as the common perpetrator of sexual and domestic abuse, the acronym excludes survivors of abuse perpetrated by women who are of no less importance to this study. As the purpose of this study is to focus on victim's/survivor's management of their survivor status in workplace relationships, the need to focus on and specify details about the perpetrators of abuse has not occurred. However, where relevant, such as when writing about the political activism of VAWG organisations, I shall specify 'male violence'.

Intimate partner violence/abuse and domestic violence/abuse (DV/DA) have nuanced differences, however both are often used interchangeably (with DV/DA being more common) and they are widely understood to mean very similar things. Typically, domestic abuse refers to abuse (physical, financial, emotional, sexual, coercive control) that is perpetrated in domestic spheres, eg, a family home or where the victim and offender are personally connected to each other (Domestic Abuse Act, 2021). The victim and perpetrator do not need to be in an intimate relationship; children, siblings, grandparents, etcetera, can all be victims or perpetrators of domestic abuse. Intimate partner violence/abuse refers to abuse happening between people in intimate or formally intimate relationships such as spouses or people who are dating or recently separated (Nicolaidis & Paranjape, 2009). It excludes abuse perpetrated by or against other intimate family members, however, the distinction is not commonly made, with many referring to intimate partner abuse taking place outside of the home as domestic abuse. As domestic abuse appears to be the more widely used term within the sector, I use this the most throughout the thesis. I will simply use 'abuse' to combine both sexual abuse/violence, and domestic abuse or intimate partner violence under one common word.

The labels 'victim' and 'survivor' have been thoroughly debated and discussed by feminist scholars, survivors, and VAWG organisations. (For examples, see Kelly et al., 1996; Peternelj-Taylor, 2015; Papendick & Bohner, 2017; RAINN, no date.) Whilst 'victim' is a legal status, the term is criticised for having disempowering connotations when used as an identity label (O'Shea at al., 2024). 'Survivor' on the other hand, can again remove the focus away from the crime and the perpetrator, causing one to focus on the response of the person who was abused (see Hockett et al., 2014). Many victims of abuse do not identify with the term 'survivor' as it is seen by some as minimising the impact of the harm and laying out an expectation for the victim to no longer be affected by the abuse. A third option is to use person-first language, 'person who has experienced abuse', which shares similar issues with GBV in its passivity (Henley et al., 1995, Bohner, 2001). The alternative, 'person subjected to abuse', is preferable as it emphasises that abuse does not just indiscriminately happen to women and girls, but is something forced upon them by an active perpetrator. For ease, I use the terms victim and survivor interchangeably, with survivor, and survivor status being used most often. The term survivor appears to be most commonly used and accepted by VAWG organisations and none of the participants objected to its use when asked. 'Survivor status' has been chosen over 'survivor identity' or 'lived experience' to be specific and direct. Survivor identity implies that the experience of abuse becomes a core aspect of one's personal identity, which may not resonate with all individuals. Many survivors may not feel that their abuse defines them or want it to be an intrinsic part of how they identify themselves (Ovenden, 2012). By framing their experience through the lens of survivor identity, it risks suggesting that their entire identity is shaped or determined by their trauma. This can feel reductive or disempowering to those who see their survivorhood as one part of their life rather than something that fundamentally defines who they are. Similarly, lived experience can encompass a wide array of personal insights and life circumstances, making it an ambiguous term that could obscure the specific focus on VAWG survivors' experiences (Mcintosh & Wright, 2019). Survivor status serves as a more specific and neutral term. It acknowledges the individual's experience of surviving abuse without suggesting that this experience necessarily defines their identity. Survivor status avoids the deeper connotations tied to identity and the expansive implications of lived experience, and thus, it can not be as easily contested. It provides a clear, factual reference to one's past experience without imposing a broader or more permanent label on how they must see themselves.

When referring to women working in organisations addressing VAWG, a range of terms could be used, including staff, workers, professionals, practitioners, volunteers, or colleagues. The choice depends on the context and the desired emphasis. The term professionals can be exclusively used to refer to members of a profession; an occupation which is self regulating, that requires extensive training, qualifications, and adherence to professional codes and ethics including counsellors, nurses, and social workers (Davis, 2003; Saks, 2012). However, in common parlance, a professional is anyone who has had specialist training for the particular career as opposed to an amateur (Flexner, 2001) and whose job requires well developed skills, regardless of any legal underpinning. A practitioner is a person who practises a profession, however volunteers within VAWG may also have specialist training and skills on par with paid staff, such as volunteer counsellors. Within this study, participants spoke about their volunteer work and paid work without much distinction and volunteering within VAWG appears to be a stepping stone for women entering paid careers in the sector. Though not all workers may identify as 'professionals', this term has specifically been chosen to emphasise the distinction between someone working in an organisation as a paid staff member or volunteer, and someone accessing the services that organisation runs as a service user or client. Survivor-professional will be used throughout to refer to women who concurrently work in VAWG and have survivor status.

1.3 Rationale for the Research

There are multiple studies exploring the question of practitioners' self-disclosure of their own lived experiences to service users, particularly within therapy and mental health services, see for example Simonson & Bahr (1974); Geller (2003); Phiri et al. (2019). However, there is limited research around disclosure of abuse experiences within the workplace between professional colleagues, especially relating to sexual and domestic abuse services and experiences.

Living through sexual or domestic abuse and dealing with the after effects of trauma may have a significant impact on a person's identity, as well as an influence on their choice of profession (Bryce et al., 2023). Both identity concealment and experiencing stigma from one's colleagues or others outside of work could potentially have a negative effect on survivor-professional's wellbeing and work based performance. The available literature tells us that supervision and peer support plays a vital role in ameliorating the impact of vicarious trauma (Salston & Figley, 2003; Horvath, 2020). It is important that survivor-professionals feel able to speak openly with their colleagues and supervisors, and are able to access appropriate peer support and professional supervision (Kulkarni & Ross, 2016) Survivor-professionals could feel unable to speak openly with their colleagues or supervisors about managing the emotional demands of their job as a victim/survivor due to the risk of being stigmatised (Lorenz & O'Callaghan, 2022). As a consequence, they may miss out on the benefits of peer support and be unable to properly utilise the purpose of professional supervision (Kern, 2014). This could lead to wasted resources and may add to the risk of survivor-professionals developing symptoms of secondary traumatic stress when their supervision is not trauma informed (Cook & Fye, 2023). Burnout related conditions such as anxiety, stress, and depression cause nearly a quarter of all staff absences within the NHS (Kings Fund, 2019). Workers in caring occupations and women had the highest sickness absence rates in 2022, and 12.9% of sickness absences in the overall workforce in the UK were for mental health reasons (ONS, 2023c). Absent colleagues increases the pressure on existing staff to work extra unpaid hours to deliver care to patients and service users, creating a cycle of distress and burnout (Health Education England, 2019). Developing a better understanding of disclosure experiences in the workplace is important to enable staff access to suitable supervision, increase staff wellbeing, and potentially reduce conditions such as empathy based stress and burnout amongst this population. Identifying the contributing factors to survivor-professionals' positive experiences of disclosure or identity congruence in the workplace could help organisations understand what is needed to create an accommodating and supportive work environment.

There are also recognised strengths to having survivor-professionals in the team and in management positions (Janoff-Bulman, 2004; Rauvula et al., 2017). The value of lived experience is being increasingly recognised and promoted within social care through initiatives that aim to create more robust recruitment processes for people with lived experience of services (Career-Matters, 2023; Social Work England, 2023). For example, the Lived Experience Charter was commissioned by NHS England in 2020 to encourage services and organisations in the health, social care, and criminal justice services to recruit and retain a 'diverse, inclusive and representative workforce' as part of the health and justice inclusive workforce programme (Career-Matters, 2023). Gaining Lived Experience Charter status demonstrates an organisation's commitment to improving the inclusive recruitment and retention practices of people with lived experience. Similarly, the education and training standards put forward by the regulator for social work in England (Social Work England) require that people with lived experience of social work are involved in the design and delivery of all social work courses (Social Work England, 2023). Therefore, creating working environments where survivor-professionals feel welcome and supported to identify themselves as having lived experience of abuse could benefit organisations which in turn may improve service delivery for the women using VAWG services.

In the field of VAWG, where the line between professional and personal experiences can blur, understanding how and when to disclose survivor status is particularly pertinent. Such disclosures could contribute to a more nuanced understanding of the subject matter and inform practice, policy, and advocacy efforts (Zerubavel & Wright 2012; Cleary & Armour, 2022). However, they also necessitate careful consideration of the potential impacts on both the individual and the organisation. This thesis examines the factors that influence disclosure decisions and the outcomes of disclosure or non disclosure on survivor-professionals in VAWG.

It explores the interplay between personal agency, organisational culture, and societal norms, and how these elements collectively shape the experiences of survivors working in this field. Understanding these dynamics can inform strategies to create more supportive and inclusive workplaces that recognise and value the complex identities and experiences of their employees.

1.4 Research questions

The aim of this study is to explore the workplace disclosure experiences of survivor-professionals and the impact staff disclosure has on VAWG organisations. Four specific research questions were informed by my personal and professional experiences and further developed after I spent time investigating the literature and theories relating to disclosure. These are covered in further detail towards the end of this chapter and in the literature review (Chapter 2).

1. How do survivor-professionals working in VAWG organisations manage issues arising from self-disclosure, non-disclosure, or being ‘outed’ amongst their professional peers?

2. What informs the decisions of survivor-professionals to disclose or not disclose their survivor status in their working relationships with other professionals?

3. What are the personal and professional impacts of disclosing or concealing survivor status in workplace relationships?

4. What views do professional colleagues hold about survivor-professionals in VAWG and what sort of working environment does that reflect?

By the term disclosure, I am referring to any degree of revelation of survivor status. This may not be via a direct conversation or clear, intentional statement. Survivor status can be revealed through hints, signs, partial and indirect disclosures, and even through what is not said. Disclosure and concealment is not dichotomous, it is often nuanced (Zolkefli, 2020) and this study seeks to explore both the motivations behind these nuanced forms of disclosure and the responses they evoke.

I turn now to discussing how my interest in this research topic developed and reflect on the ways in which my own positionality has influenced the research methodology.

1.5 Researcher positionality

Feminist scholars argue that no research can be neutral, apolitical, or value free (Oakley, 1981; Lather, 1991; Roberts, 2013) and that reflexivity and honesty about one's positionality is a central tenet of feminist research (Stanley & Wise, 2002, see page 25). Positionality encompasses the researcher's experiences, worldview, and their position within the social and political context of the research, acknowledging subjective influences on the research process (Rowe, 2014). Also, the researcher's ontological and epistemological assumptions, assumptions about human nature and agency, political allegiances, and demographic characteristics shape the questions asked, methodologies used, and results produced (Holmes, 2020).

I aim to enhance the integrity of my research by examining my own positionality and considering how my own values, beliefs, and experiences influence my construction of knowledge (Deblasio, 2022). Stating my positionality also allows for transparency of the process so readers can better understand my interpretations and assess the validity of my claims (Darawsheh, 2014). Moreover, considering my positionality allows me to navigate ethical considerations with greater sensitivity and awareness. I am mindful of the power dynamics inherent in research relationships and consider the examination of power hierarchies as crucial in feminist research (Linabary & Hamel, 2017). I strive to approach my work with humility, transparency, and respect for the voices and agency of those I engage with. Reflecting on my own positionality involves drawing on personal, professional, and academic experiences to situate myself within the research process. This reflexivity will guide the development of my study and ensure its integrity and alignment with the interests of the participants.

Although I have never been employed in a typical VAWG organisation in a professional capacity, I have been actively engaged in campaigning against male violence alongside other women who work in VAWG, and like many women, I have been subjected to sexual assault and harassment from men on a several occasions. Since 2016, I have worked and volunteered with organisations for survivors of male violence and sexual exploitation and helped to deliver campaigns, training, and consultancy services to professionals involved in safeguarding women and children.

During my years of supporting survivors to share their personal testimony whilst delivering training and speeches, I have been approached by many women who disclosed their own survivor status to myself or my colleagues and fellow activists. They often spoke about how they had struggled at work to have their insights or ideas taken seriously without qualifying that those insights were informed by personal lived experience, but that they were stigmatised or discriminated against when they then chose to disclose their own survivor status. I heard stories about women who were discredited by fellow psychologists after publicly sharing their own experiences of trauma from abuse, of women being removed from the team office and placed in a small room alone after sharing insight from their own experiences during discussions about how to support service users, and of women who were advised to change careers for no reason other than they were open about their survivor status. Publicly, I witnessed women look over their shoulder before disclosing their own survivor status to me at conferences to make sure their colleagues could not overhear them. I found it contradictory and disheartening to know that survivors were often asked to share their personal experiences and insights on stage or for media outputs, were paid for providing them, and often praised for their bravery, yet the staff already employed by these organisations who hired in lived experience representatives did not feel that their work environment was a safe or welcoming place for them to speak about or openly draw from their own lived experiences of abuse to inform their practice. It was these conversations that inspired my research on this topic. The organisations or events I engaged with through my feminist activism were rarely small, third sector organisations that focused exclusively on VAWG. Most of the professionals attending such events worked in statutory services such as social care teams within their local authority, the police, or the National Health

Service (NHS). This caused me to wonder if women working in organisations that had more overtly feminist political aims and smaller staff teams had a different experience around survivor status disclosure at work. At the time, I was unaware of the history of VAWG services in the UK being built by the women's liberation movement of the 70s (Dobash & Dobash, 1992), but having previously volunteered at one the country's earliest Rape Crisis centres, I could not imagine this stigma towards survivor-professionals being present in such an organisation. I assumed that most were staffed by women who had some personal experience of sexual violence, as many women do. This was a stark contrast to my experiences with statutory health, justice, and social care services, where the professional status and authority of psychiatrists, social workers, and judges appeared to create a very different experience for service users.

My positionality has evolved since I first wrote my research proposal. At the time of applying, I had a vocational degree in illustration but no formal qualifications relating to VAWG, social care, or community organising outside of my activism and community work. My only formal work experience consisted of eight years as a seaside carnival caricature artist and part-time freelance illustrator. Though I did not originally intend to bring the artist side of my identity into my research, it became an organic and inevitable part of the process. Incorporating illustration, discussed in Chapter 5, was not simply a methodological choice but an authentic expression of self. Processing thoughts and experiences through creativity and communicating through art and illustration has always been more of a way of being for me than a vocation. Similarly, my knowledge of the world of social care and social work came from personal interest in VAWG and feminist activism. By being accepted to the PhD programme and being given the graduate teaching assistant role, I've gained symbolic capital and grown my social connections and knowledge of VAWG, the social care world, and academia. However, at the time of data collection, all of my research participants were more professionally experienced, more qualified and accredited, and in most cases, appeared to be older than me. Several of my participants already had qualifications at masters level or higher, making me feel that the power dynamics were only in my favour as I occupied the position of the researcher. This position allowed me to ask the questions and request that my participants make themselves vulnerable by sharing personal information about themselves with me, whilst not receiving equal sharing from me in return (MacLean, 2013).

Positionality is normally identified by locating the researcher in three areas: (1) the subject under investigation, (2) the research participants, and (3) the research process (Holmes, 2020). I have questioned how much of an insider position (Aiello & Nero, 2019, p. 252) I have as I shared aspects of my own identity and lived experiences with my research participants but I did not fully share the experience of managing disclosure decisions when working in VAWG organisations which is the main focus of my study. The outsider researcher can benefit from entering a topic with little prior knowledge, freeing them from over familiarisation and potentially allowing for more objective observations and questioning (Bonner & Tolhurst, 2002). The insider researcher, however, possesses a deeper understanding of the subject's intricacies and nuances and can more easily connect and communicate with research participants which may result in richer data, providing reflexivity around the researchers positionality is honestly acknowledged and considered (Aiello & Nero, 2019).

Impression management (Goffman, 1956) and disclosure decisions (Chaudoir & Fisher, 2010) have always been of interest to me as I often find it hard to navigate the unwritten rules and expectations of communication and relationship forming. I've been especially interested in understanding how these rules operate in work places. Through my activism work, I was introduced to the VAWG sector from a non professional standpoint, placing me in an unusual position. However, this does not mean that I was not conscious of the usual social boundaries and conventions in professional environments around disclosing identities or experiences that are deeply personal, emotionally provocative, or potentially stigmatised. For this reason, I consider myself to be more of an insider than outsider of this subject, overall.

Wilkinson and Kitzinger (2013) describe four approaches to manage the insider researcher experience. The first aligns with a positivist approach which emphasises detachment and objectivity by disregarding the similarities between one's own experiences and those of the participants. The second is to leverage one's insider experience to access certain groups or networks that may otherwise be difficult to access. The third approach involves the researcher engaging in a form of autoethnography, and the last involves the researcher incorporating themselves into the research on an equal level with the other participants (Wilkinson & Kitzinger, 2013).

During the piloting of my study and the recruitment of participants in Phase 2, I was able to strategically utilise my insider position to find interview participants who worked in VAWG, and the design of my research tools and interview questions were informed by my own feelings and observations around disclosure in and outside of professional environments. I was able to communicate and connect with some participants very naturally due to them assuming I was an insider and us having shared lived experiences and political outlooks. This openness allowed me to find the interview process very enjoyable which is a feeling I believe was shared with the participants, helping us to relax into the discussion and explore the topic deeply with a stronger level of trust and rapport.

When beginning this research journey, I had very limited exposure to my area of study and I had next to no experience in academia, my undergraduate degree being entirely vocational with my final dissertation being a stop motion animation. I began my doctoral studies in January 2020 and two months later the country went into lockdown due to the coronavirus pandemic. It was during the first six uninterrupted months of lockdown that I began exploring journal articles, research methods, models, theories, and epistemologies for the first time and through this immersion, came to develop my initial research methodology. In the concluding chapter of this thesis (Chapter 11), I discuss how my positionality and approach to research evolved over the course of this doctoral study.

This section has outlined how I developed my research questions, explored my positionality as a researcher, and considered how these factors have shaped my research design and analysis. To provide further context for the focus of this study, the next section offers a brief overview of the VAWG sector, its history, and its workforce.

1.6 Introducing the VAWG sector

This study includes women who work or have worked in any type of organisation addressing sexual or domestic violence against women and girls. These organisations do not need to fit strictly into a definitive 'VAWG sector', which in itself can be challenging to define. Statutory social services, housing associations, broad anti-abuse campaigning organisations, and pastoral services within universities, for example, all fall within the remit of addressing VAWG. Nonetheless, it is still helpful to provide background into how violence against women and girls has been addressed through the development of specialist organisations and initiatives, and the impact that feminist activism in particular has had on the way VAWG is viewed and responded to more broadly.

Intimate partner violence and sexual violence affect a significant portion of the population, with the majority of perpetrators being male and the majority of victims being female (WHO, 2010). The term gender-based violence was established to describe harm that disproportionately affects women or is inflicted on them because they are women (Council of Europe, 2014) with the Committee on the Elimination of Discrimination against Women (1992) explicitly describing VAWG as a gender discrimination issue deeply rooted in social inequality when understood within the context of patriarchy (End Violence Against Women, 2023). This definition is grounded in key international frameworks, such as the CEDAW report (1992) and the Istanbul Convention (Council of Europe, 2011) which define gender-based violence as harm that is physical, psychological, sexual, or economic in nature. This includes acts of coercion, arbitrary deprivation of liberty, and threats to carry out such harms (EIGE, 2024). While the field of violence research and prevention encompasses multiple areas, each with distinct foci, stakeholders, and approaches, 'intimate partner violence' and 'sexual violence' are often grouped together as a single field (Flemming et al., 2015).

The terms 'gender-based violence' and 'violence against women and girls' (VAWG) are frequently used interchangeably (EIGE, 2024), though the acronym VAWG appears to be more commonly used in association with the sector dedicated to prevention, research, and specialised victim support services. Violence against women and girls costs the UK an estimated

£40 billion annually (Women’s Budget Group, 2018; NHS Highland, 2023), with the Home Office estimating that domestic abuse alone costs the healthcare system over £2.3 billion a year (Domestic Abuse Bill, 2020). The NHS, policing and criminal justice services, generalised victim support charities, statutory social services, and housing associations all play a role in addressing VAWG. However, the VAWG sector consists largely of small to medium-sized voluntary organisations (Heady et al., 2011).

This study focuses on organisations that address sexual and domestic abuse against women, meaning they can be more generalised than specialist VAWG organisations. For example, charities with a broad social justice aim who have worked on VAWG related campaigns, housing associations with specialist domestic violence support services, and statutory services such as Sexual Assault Referral Centers were included in the recruitment phase. However, most of the research involved staff from specialist VAWG services. The most recent survey of specialist VAWG services was conducted by Kelly and Coy (2009). Their Map of Gaps 2 report identifies a total of 605 specialist domestic abuse services, 148 specialist sexual violence services, and 57 sexual exploitation services across Britain. These services offer provisions such as helplines, advice and advocacy, counselling, refuge, self help groups, and access to activism (Kelly & Coy, 2009). When first introduced by the women’s anti-violence movement in the 1970s, these types of provision were unique to grassroots rape and domestic violence services, however, they have since become regarded as essential and standard provisions for addressing a wide range of social issues (Kelly & Coy, 2009).

Early VAWG services have their origins in the broader women's liberation movement of the 1960s and 1970s (Schecher 1982; Dobash & Dobash, 2992). This period, often referred to as the second wave of feminism (Thornham, 2004), was marked by a growing awareness and activism around issues of gender inequality, particularly in relation to violence against women, which have shaped legislation and service delivery today (Wiper & Lewis, 2020). This also came with a new way of organising that was non-hierarchical, with organisations functioning as collectives and operating with a feminist commitment to build ‘a new world’ (Hague, 2021, p. 121) for women and children, as well as providing safe havens for those fleeing domestic violence. One of the most notable early refuges was founded in 1971 by Erin Pizzey, in Chiswick, London (Schecher, 1982). Later known as Chiswick Women’s Aid, this first safe house for women and children had a transnational influence on feminist critiques of domestic violence and the formation of women’s refuges across the UK, USA, and Australia (Simic, 2020). This marked the beginning of a grassroots movement that sought to raise the issue of domestic violence in the public consciousness and provide immediate, practical support to survivors of domestic violence (Schecher, 1982). These refuges offered a safe space where women could support each other and put their lives back together, notably without the need for any psychiatric intervention (Fields & Kirchner, quoted in Dobash & Dobash, 1992). During the same period, the Rape Crisis movement emerged, with the first Rape Crisis Centre opening in London in 1976, offering support and advocacy for survivors of sexual violence whilst campaigning for change in the way society viewed rape and rape victims (McMillan, 2007).

By the 2000s, feminist thinking had moved into its third wave (Evans, 2006). Understandings of violence against women had evolved and in response, statutory services further developed to meet the needs of abused women (Hague, 2021). This period also saw the marketisation of the charity sector as a whole (McKay et al., 2015), during which time, many funding agencies discouraged social change, funding NGOs only for welfare services and rejecting bids that proposed community education or that carried political agendas (Schechter, 1982; Bloodgood & Trembley-Boire, 2016). Many specialised VAWG organisations had to move away from egalitarian collective models to meet requirements for funders and outside agencies who trusted and favoured mainstream professional services with hierarchical management structures more than the traditional women-led collectives (Cook, 2011). This led to the professionalisation of VAWG service provision and a move away from grassroots social activism as a focus (Hague, 2021). Some smaller services joined together under large umbrella organisations to improve their chances of obtaining funding and increased their power when campaigning, though some argue that this conglomeration of services focused on target driven marketisation led to a loss in feminist solidarity (Hague, 2021). Some stakeholders also view these mergers as a potential threat to the sector's capacity to deliver specialised, expert services. For example, provisions tailored to South Asian women or victims of sex trafficking may be compromised as larger organisations, like housing associations, are compelled to adopt more generalised, one-size-fits-all approaches (Heady et al., 2011).

In addition, two years after the financial crisis in 2008, the newly elected Conservative-LibDem coalition government brought in austerity measures along with further policy changes to funding and support for public and community services (Chanan & Miller, 2013). Though touted as a move to empower communities and individuals by taking away power and responsibility from the state (Evans, 2011), the 2010 government's 'Big Society' vision saw investment in regeneration decreased by nearly 75%, leaving charities, community groups, and community practitioners struggling to meet the demands on their service (Chanan & Miller, 2013).

The workforce within the voluntary sector is generally well-qualified, with over half employed in professional, associate professional and technical, or managerial and senior official roles, and over half are educated to degree-level or higher (Rooney, 2019). However, skills gaps persist, particularly in youth work, social care, and healthcare, with a quarter of employers reporting difficulties in filling vacancies (Kane et al., 2009). These gaps are more common in larger organisations, but are still low in comparison to both the public and private sectors (Rooney, 2019). The staff within VAWG voluntary organisations are widely perceived to have grassroots expertise and be deeply committed to the cause (Women's Resource Centre, 2008). However, these organisations often face challenges in recruiting staff, potentially due to the emotionally demanding nature of the work and lower than average wages (Heady et al., 2011; Wood et al., 2019), precarious and temporary contracts, and a lack of funding for external training (Heady et al., 2011; Merchant & Whiting, 2015). Additionally, they tend to have fewer paid management positions and rely more heavily on trustees to guide their operations (Heady et al., 2011).

The public management reforms of the 1980s and 1990s led to the marketisation of the welfare state and the privatisation of services, with the competitive tendering to private and third-sector organisations under New Labour having a significant impact (Teasdale, at al., 2013). While professionals such as lawyers, social workers, forensic nurses, and psychologists play specific roles in addressing gender based violence, their presence in VAWG services in the UK remained relatively limited until the millennium (Dobash & Dobash, 1992; Horvath et al., 2021).

In 2005, the role of specially trained independent sexual violence advisors/advocates (ISVAs) was introduced by Baroness Stern through the Home Office Violent Crime Unit (The Survivors Trust, no date; Horvath et al., 2021). These roles are primarily funded by a range of local commissioners including local authorities, Police and Crime Commissioners (PCCs), NHS England, and charitable trusts (Home Office, 2017). ISVAs and the closely related role of Independent domestic violence advisors (IDVAs) work across both the voluntary and statutory sector and their primary purpose is to provide specialist holistic support and guidance to anyone reporting sexual or domestic abuse, often through the criminal justice system (Hague, 2021).

In addition to these new advisor/advocate roles, VAWG organisations have witnessed a shift away from the language and practice of 'talking to women' towards the practice of 'counselling'; a licenced occupation requiring the hiring of 'experts' with formal qualifications (MacSween, 2023), further professionalising the response to VAWG. Whilst this shift safeguards organisations against 'accusations of amateurism', feminist VAWG workers have argued that it prevents women from being facilitated in understanding their experience politically (MacSween, 2023). This will be discussed further in the literature review in Chapter 2.

The response to gender based violence from the statutory sector has expanded significantly in the last two decades (Heady et al., 2011). This growth includes the establishment of specialist domestic violence courts and the implementation of multi-agency risk assessment conferences to support domestic violence victims (Heady et al., 2011). We have also seen the expansion of Sexual Assault Referral Centre (SARC) provisions, the first of which opened in Manchester in 1986, and by 2000, seven were in operation around the country (Lovet at al., 2004). As of 2022, 55 SARCs were in operation across England and Wales (Forensic Capabilities Network, 2022). Though SARCs are funded through the central government, most are outsourced to large private firms such as security giant G4S and private healthcare provider Mountain Healthcare (Kirsley, 2023).

Volunteer based VAWG services are more cost effective to run than professional SARC models (Cook, 2011) and amid the ongoing cost of living crisis and the enduring impact of the COVID-19 pandemic, a growing number of survivors subjected to additional forms of marginalisation are turning to specialist women-led and 'by and for' VAWG organisations for support (End Violence Against Women, 2023). VAWG organisations have faced a funding crisis for over a decade, leading to staff shortages, longer hours, and wages around 20% lower than those in comparable sectors, including homelessness, criminal justice, and substance abuse (Women’s Aid, 2024). These ongoing challenges have been exacerbated by rapid inflation, resulting in salaries in the VAWG sector that do not adequately reflect the expertise required for this complex and demanding work (Women’s Aid, 2024). Rape Crisis centers in particular depend on skilled volunteers, most often working as trainee counsellors or befrienders (Heady et al., 2011).

VAWG services have had to evolve alongside the rest of the community and voluntary sector. Though many have moved away from their grass-roots, user led, activist beginnings to survive with the times, many are still run with a feminist ethos and are informed by the voices and views of survivors (Hague, 2021). Survivors' voices have also begun to be heard more in social policy and development (Hague & Mullender, 2006).

Overall, the VAWG sector in the UK plays a crucial role in addressing violence against women and girls through a combination of voluntary and statutory services. However, the sector faces significant challenges, including chronic underfunding (Jarvinen et al., 2008; Damm et al., 2023), staff shortages (Heady et al., 2011; Women’s Aid, 2024), and the complexities of delivering specialised support within a landscape increasingly shaped by marketisation and competitive tendering (McMillan, 2007; Cooper & Mansfield, 2020). Despite these obstacles, VAWG organisations remain committed to providing essential services, often informed by the voices and needs of survivors, and the skills and dedication of its volunteers and staff.

Understanding the history of the VAWG sector, its current landscape, and the structural forces shaping its trajectory provides essential background for this study. This section has outlined the complexity of this dynamic and evolving setting. I will now introduce a selection of theories and models that informed my initial understanding of the research topic. Delving into these theories allowed me to explore how personal disclosures may impact workplace dynamics and individual wellbeing, ultimately shaping the design of my research.

1.7 Theories relating to stigma and disclosure

In this section I consider the theories that have helped me further define the concepts of stigma, victim blaming, and social identity. These theories have underpinned the social and psychological drivers which may lie behind disclosure of stigmatised identities in the workplace. In the next chapter, I discuss the theoretical paradigms I have engaged with throughout this study, one of which is critical realism. Baskah (1979) supports the use of existing theories as a starting point to critical realist research, however he cautions against committing to these theories, warning us that existing theories may not accurately reflect reality. I offer these initial theories as a basis to understanding the context of my research questions.

The first theorist I explored was seminal sociologist, Erving Goffman. Goffman (1963) defines stigma as an attribute of an individual which goes against public ideas of normal. These discrediting or disqualifying attributes can lead to the individual being perceived as deviant, spoilt, or flawed by society. Goffman's (1963) theory explores how stigmatised individuals navigate social interactions and expectations. He identifies three main types of stigma: overt, which the individual is unable to hide such as a physical mark or disability; courtesy, where individuals or groups are impacted due to being associated with someone with a stigmatised attribute or identity; and concealable, where the discredited attribute is not immediately apparent, meaning the stigmatised individual can choose to either actively hide it from or selectively reveal it to others as a form of information control to manage impressions and protect their self image (Goffman, 1963). In the case of my study, survivor status would be a concealable stigmatised identity (though some participants spoke of how less concealable attributes like self harm scars also indicated their survivor status). The concept of a courtesy stigma, also known as affiliate or associate stigma (Maldonado et al., 2023) could help explain how VAWG organisations themselves may be at risk of discrimination or stigmatisation by other professional agencies (Domingue et al., 2022) if it is known that staff members with discreditable attributes work for them.

Goffman (1963) described the level of discreditation of stigmatised identities as varying based on factors such as the attribute's degree of concealability, or how disruptive or perilous it is perceived to be. Having a stigmatised identity can lead to prejudice and discrimination from others, so disclosure of a concealable stigma comes at a significant risk (Follmer et al., 2020). Stigmatised individuals may be seen as dangerous or responsible for their own discrediting condition or status which will influence their self-perception as well as subsequent social interactions (Goffman, 1963; Camacho et al., 2020). My study found that in some cases, staff members considered survivors to be a danger to the organisation, particularly around the potential of survivors having unmanaged trauma and the disclosure of survivor status indicating the survivor had inappropriate boundaries. Goffman's (1963) theories can also be used to explain the antecedents and consequences of an individual's disclosure decisions as it highlights the significance of social norms and interactions on reinforcing or contesting stigma.

In Link and Phelan's (2001) conceptualisation of stigma, they expand upon Goffman's (1963, p. 4) observation that stigma is 'a special kind of relationship between an attribute and a stereotype'. They propose that stigma occurs at the convergence of the following components; the distinguishing and labelling of human differences, dominant cultural beliefs in the undesirability of particular attributes leading to negative stereotyping, the cognitive separation of 'us' and 'them', and emotional reactions leading to status loss and discrimination of the labelled group. This inequality is caused by a lack of access to power which may be social, economic, or political. Those with power are then in a position to reject, exclude, or disapprove of the labelled person. This includes structural and institutional power which Link and Phelan (2001) and other critics of Goffman (see for example Corrigan et al., 2004) propose is firmly embedded with the state through its use of discriminatory laws, policies, and processes. What structural stigma theory emphasises is that stigma is enacted by broad systemic forces rather than at an interpersonal level (Yang et al., 2007). Tyler (2020) reinterprets Link and Phelan's framework to show that stigma is not just a personal or interpersonal experience in human to human interactions but is deeply embedded in broader capitalist systems of inequality, control, and exploitation. Rather than being a marginal or reactive force, stigma operates as a strong generative form of power that is more influential than is typically acknowledged in current social science discussions. This structural understanding of stigma as a form of changeable social power (a limitation of Goffman) is vital to understanding the stigma of sexual and domestic violence as attitudes towards victims and survivors evolve. These changes even can lead to victimhood becoming a social status that affords the bearer valorisation, influence, and the ability to silence others (Lawther, 2021).

A third theory I have found helpful in my understanding of stigma around sexual and domestic abuse is Lerner's (1965) Just World Theory. This theory can help us understand the psycho-social origins of victim blaming and links well with Goffman's assertion that stigmatised individuals can be seen as responsible for their own discrediting condition. Lerner's (1965) theory proposes that when confronted with victims of injustice, people are likely to employ a strategy of blaming the victim in order to plan for their own future and maintain a sense of security in the face of a similar threat. Alternatively, they may believe that the victim will be later fairly compensated for their suffering (Lerner, 1997). This belief that the world is fundamentally just offers people a sense of control and relief from anxiety around their own safety. It also allows people to feel that the world has order and reason to it and that outcomes are predictable (Lerner, 1997).

Victim blaming via a belief in a just world may additionally elevate guilt if one feels a sense of responsibility to prevent the victimisation of others or complicity in the victim's suffering (Lerner & Miller, 1978). However, this is only likely to be present if the non-victim believes they have some choice in causing or refusing to alleviate the victim's suffering (Lerner & Miller, 1978). This may be significant in the case of professional colleagues whose job roles focus around alleviating the suffering of victims/survivors of sexual or domestic abuse.

These three theories offer a basis for understanding the complexities surrounding stigma and victim blaming. The next two theories from social psychology have been a useful starting point for understanding why some staff members in VAWG may wish to disclose their survivor status to colleagues.

Self Verification Theory (Swann, 1983) proposes that people are uncomfortable if and when other people do not see them the way they see themselves, even when their own self-perception is negative. This is due to a desire to reduce discrepancies between realities and achieve a sense of congruence that supports their own beliefs and perceptions and relieves them of the discomfort. Swann (1983) argues that engaging in self-verification practices such as disclosing stigmatised identities makes the world seem more coherent and predictable. Additionally, when there are discrepancies between how one sees themself and how others perceive them, it can hamper social interactions and lead to feelings of inauthenticity which may even be detectable to others (Sabat et al., 2017).

Turner's (1982) social identity theory posits that individuals place themselves in particular social categories (such as professional or survivor) which they attach emotional significance to. These categories then shape how individuals perceive themselves through comparisons against others also in that particular social category (the in group) and those outside of it (the out group).
These social categories also influence how people are perceived by others, both in and outside of the group, often relying on the social norms and stereotypes of particular categories.

In the context of VAWG organisations, I theorise the concept of an in group and an out group may not be as easily dichotomised as in other organisations with more clearly distinguished service users and staff members. In some VAWG organisations, identifying as a survivor may be the norm. As such, applying social identity theory to my research question may generate some interesting avenues for exploration. Survivor-professionals may choose to identify themselves as belonging to the category of survivors, particularly if they believe this will establish their belonging to an in group of VAWG survivors already in existence within the workplace. This is then likely to give them a more positive social experience as it decreases self-uncertainty (Hogg, 2020) . However, Turner (1987) explains that people are more likely to form prejudices against people who are dissimilar to them, so conflicting outcomes may occur if disclosing one's survivor status places the disclosing person in an out group instead.

If the distinction between the in group and out group is not as clear in VAWG organisations, it may be helpful to return to Goffman's (1963) writings on stigma and his description of the own and the wise. Goffman (1963) describes stigmatised individuals as belonging to 'the own' group, where those who are not stigmatised, but who are understanding, accepting, and sympathetic to the stigmatised are classed as 'the wise' - a status which one could argue allows individuals to move between in and out groups. This may be the case for women working in VAWG who do not regard themselves as having survivor status, but who become almost honorary members of that group due to closely working with survivors and understanding their experiences without holding any prejudices.

In addition to theories, my early reading of the literature also introduced me to several models explaining the process of concealing or revealing secrets or stigmatised identities. I found that over the last two decades, academics across multiple disciplines have draw upon these theories of social identity, stigma, and impression management (Goffman, 1959) to develop models that can help us understand how and why employees may choose to disclose a stigmatised identity in the workplace (Omarzu, 2000; Clair et al., 2005; Pachankis, 2007; Ragins, 2008, Afifi & Steuber, 2009, Chaudoir & Fisher, 2010; Jones & King, 2014). Many of these models expanded upon the models before them and have overlapping qualities, however, each model offered a unique set of qualities meaning some were better suited or offered more for the context of my study than others. Reading through each model, I identified that each included one or more of the following: a focus on the antecedent goals leading to the decision to disclose (Clair et al., 2005; Afifi & Steuber, 2009), the cognitive process of making the decision (Pachankis, 2007), the process of the disclosure delivery itself, the short and long term outcomes including the impact of the reaction of the recipient, and the presence of a feedback loop (Chaudoir & Fisher, 2010). Some models recognised disclosure as a continuum where stigmatised individuals may signal or partially disclose (Ragis, 2008), and others include an additional level of the effect of the workplace as context for the disclosure (Jones & King, 2014). The elements of these models gave me an indication as to what I may find in my own research and gave me direction for planning the design of my research questions. Each model will be described in more detail in the literature review, Chapter 2.

By researching these theories and models, I have developed a framework for understanding the social and psychological dynamics that may influence disclosure decisions, the risks and consequences associated with revealing a concealable stigma, and the broader systemic forces that perpetuate stigma and discrimination. These theories and models formed the basis of my theoretical framework and guided the analysis of the processes and challenges of disclosing survivor status. However, this is not an exhaustive list, and further theories are discussed in Chapter 9.

In this chapter, I have outlined the background and rationale for this research, providing a comprehensive overview of the topic of this thesis. I have described my own positionality as the researcher undertaking this study, reflecting on the extent to which I consider myself an insider or outsider and how this perspective has shaped my approach. I have introduced the VAWG sector as the location and demographic under investigation, and I have described a selection of theories that have informed my knowledge base and provided a framework for understanding my research topic.

In the next chapter I present a review of the literature which provides further context for this study. This literature review will examine existing research and key findings related to the topics of disclosing concealable stigmatised identities, the value and management of people with lived experience in the social care workforce, the responsibilities of organisations to their staff, and the impact of the professionalisation of the VAWG sector. This review will highlight gaps in the current literature and establish the foundation for the empirical investigation presented in subsequent chapters.

Chapter 2 - Literature Review

2.1 Introduction

In this literature review, I will examine key themes and theories relevant to understanding the disclosure of survivor status within VAWG organisations. I draw on existing research, knowledge, and statistics to support and contextualise my research questions. The chapter is structured into five main sections:

Firstly, it explores the current practices of involving service users in the design and delivery of services, from consultation and co-design to entirely peer led programmes. It discusses the growing movement to involve people with lived experience of specific health and social issues in developing approaches and interventions, directly supporting service users, and acting as role models. It also explores concerns over tokenism and marginalisation of people in these lived experience roles. Next, it examines the prevalence of survivors of abuse working in the VAWG sector. I explore the wounded healer archetype and the studies that show us how personal experiences can influence career choices, contributing to the prevalence of survivors within these services. Following this, the literature on concealable stigmatised identities and the pathways to disclosure such as decision making models are reviewed. This literature covers the process of choosing to disclose or conceal stigmatised identities, particularly in the workplace, the advantages and disadvantages of revealing a stigmatised identity, and the various complexities and consequences of disclosure decisions.

The review then looks at the potential risks, including vicarious trauma and burnout, for practitioners with lived experience of the issues they work within. It also highlights the strengths of survivor-professionals such as the value of lived experience insight and the impact of post-traumatic growth.

I explore the professionalisation of the VAWG sector, giving specific context to the area my study is situated in. Further, I consider the tensions between maintaining feminist ideals such as ‘the we’ (Kelly, 2018) and adapting to neoliberal practices, including the challenges and implications of professionalisation and how this may impact disclosure decisions.

Finally, I address the legal and regulatory obligations and policies of organisations to protect staff from stigma based discrimination and ensure their wellbeing. I cover the necessity of providing adequate supervision and support to staff, highlighting the organisational responsibilities towards employees who disclose stigmatised identities.

The purpose of this literature review is to explore the surrounding context of this study, giving support and background to my research questions by identifying and summarising previously published literature relevant to the topic (Green et al., 2006). To do this, I undertook a traditional, narrative review of the available literature, allowing me to present a broad overview within a flexible structure (Rosella, 2015). Conducting a narrative review enabled me to forgo a predefined review approach seen in systemic reviews, instead, incorporating my prior knowledge and personal assumptions as the researcher (Stratton, 2019). The review involved using keywords and terms such as “Disclosure”, “Professional”, “Wounded healer/helper”, “Lived experience”, “rape/sexual/domestic abuse/violence/assault”, “Professionalisation” and “Stigma”, along with key words to identify literature pertaining to specific professions such as “counselling” and “addiction” Boolean operators 'OR' and 'AND' were used to combine key terms in titles and/or abstracts. Additionally, truncation (*) was applied where appropriate, enabling the inclusion of variant endings for specific terms. The review began with regular searches of the university library database and use of Google Scholar. The same keywords were used to trigger alerts of new publications by signing up to the Zetoc Alerts current awareness service. Leading on from this, manual searches through the reference lists of key publications such as Zerubavel and Wright’s (2012) ‘The Dilemma of the Wounded Healer’ and Chaudour and Fisher’s (2010) ‘The Disclosure Process Model’ proved to be the most fruitful way of finding relevant texts as they acted as a springboard for identifying other key search terms and names of academics within the field of interest. Deeper searches were conducted through the specific journals that key texts were often published in, for example, the Journal of mental health, the Journal of Interpersonal Violence, and the Journal of Management. I start by providing background on how insights from service users' lived experiences are currently integrated into service design and delivery, establishing the context for this research focus.

2.2 Co-production, service user involvement, and lived experience practitioner roles

Beyond the ‘comment and complaints procedures’ requirements in the NHS and Community Care Act (1990), public participation and service user involvement in service design, development, and delivery is increasingly being recognised as beneficial. The practice of consulting with people with lived experience of services or the communities that services support has become ubiquitous in policy, legislation, and guidance in social care, with regulators now insisting on varying degrees of user involvement as a requirement in the development of training and services (Beresford & Carr, 2012). For example, the regulatory body for qualifying social workers in England (Social Work England) requires that all courses offering accreditation are designed and delivered in collaboration with people with lived experience of social work (SWE, 2019). Furthermore, as mentioned in chapter 1, the Lived Experience Charter launched in 2020 supports and encourages health, social care, and justice organisations to employ and retain people with lived experience (Career-Matters, 2023). Additionally, for the VCSE sector, funding bodies such as the National Lottery Community Fund and other charitable grant-giving foundations ask funding applicants to declare that they have at least consulted with the people that their not-for-profit projects aim to benefit (TNL Community Fund, 2019).

The lived experience workforce has evolved from a grassroots support and activist movement into the fastest-growing sector within the mental health field (Roennfeldt & Bryne, 2021). Throughout the literature, the benefits of lived experience roles on both service users and lived experience providers is widely evident (Boisvert et al., 2008; Schon, 2010; Repper & Carter, 2011; Brice et al., 2014; Tracey & Wallace, 2016; Smit et al., 2023). The sense of empowerment gained through using one's experience to support others reportedly increases wellbeing, and peer support models can also reduce costs for services (Bryne et al., 2016).

Despite lived experience expertise being embraced by the health, justice, and social care sectors (Roennfeldt & Byrne, 2021; Fox, 2022), the implementation of co-production and user involvement in services is not without its challenges or critics (Barnes, 2009; Van Dijick, 2024). Public consultation and collaboration with service users can be heavy on resources (Oliver et al., 2009; Pizzo et al., 2015). It requires organisational time and support, and facilitators with appropriate training. It also brings about risks that require extra safeguarding policies to be put in place, and ethical dilemmas that need to be navigated (Driessens et al., 2016). Austerity driven cuts to resources and regressive restructuring of social policies (BASW, 2017) has meant that whilst requirements to consult or co-produce alongside service users are still in place, the practice is at risk of being reduced to a box ticking exercise, resulting in the work having little practical implementation or effect on service provision (Beresford & Carr, 2012).

User involvement can also be discriminatory in practice. In order to participate, service users need to be accessible to services seeking them out for collaboration (Driessens et al., 2016). Participants need to have the ability to express their ideas and views, have the diplomacy and communication skills to potentially work within a team, and be able to maintain stability in their lives and show reliability in their work (Driessens et al., 2016). Issues also arise in the face of remuneration for the participants' time and work which may exclude service users on means tested disability benefits from taking part. This is particularly problematic as the voices of disabled or otherwise marginalised people are essential in the development of health and social care services and education (Beresford, 2019; Hogan et al., 2020). As lived experience advisory groups and collaborative approaches to service design and delivery are gaining prominence in the mental health sector, it is notable that the advisory roles taken up by service users often remain separate and distinct from service delivery roles, and rarely ever are they decision makers, maintaining a clear divide between service users and service providers (Veldmeijer et al., 2023).

Conversely, fully user-led, self-help, and mutual aid models of service have long been established and used by people seeking support from non-professional organisations (Chamberlin et al., 1996; Levy, 2000; Carey, 2023). For example, Informal community support groups are common within the VCSE sector and are utilised by statutory services in their ‘social prescribing’ efforts (Jopling, 2024). As discussed, VAWG services themselves were born out of women supporting women in an informal capacity, and the history and relevance of this is covered further below. Probably one of the most recognised models of peer support, with a global presence, are 12 Step programmes which primarily address issues of alcoholism and addiction (Hopson, 1996; Gross, 2010). After the widespread popularity of Alcoholics Anonymous, the 12 Step programme format was later adapted to address other social and emotional needs such as relationship management in programmes like Al-Anon for family members of alcoholics, and CoDA for people wishing to recover from unhealthy codependent relationship patterns (12stepsappg.com, no date). There are currently 30 known 12 step programmes in the UK supporting people with substance use, relationships and emotions, and the families of those affected (12stepsappg.com, no date). Members who work through the programme are asked to take on service roles such as sponsorship to support newcomers, and these pay-it-forward acts of service become part of each member's recovery plan. In such cases, personal experiences of addiction are useful in helping relationships between supporters and support receivers grow, which in turn has a therapeutic effect on the helpers (Rácz et al., 2015). Rácz et al’s (2015) study on professional recovery helpers in addiction rehabilitation centres identified positive characteristics of peer helpers such as the confidence to ask challenging questions and personal reflective ability, however several of the helpers also thought it was important to gain formal qualifications for their roles as they believed their lived experiences alone where not sufficient for the role. 12 Step programmes remain free from professional involvement but will encourage members to seek professional intervention if necessary.

Hiring paid, trained staff in specifically designated lived experience roles to support service users or develop service design is commonly practised within services addressing mental health (Bryne et al., 2019) and substance misuse (Park, 2020). Having openly identifying recovering addicts in frontline support roles (sometimes referred to as peer supporters, though peer support models vary widely) allows service users to see their worker as a role model. The peer supporters are in a unique position as they are able to draw on their own lived experience of recovery to guide service users. They can also represent and advocate for service users' needs and concerns within the service, taking on a consumer consultant type role. Despite this, within professional services, openly recovering addicts are represented much less in senior management positions and decision making roles and are also paid less (Park, 2020). Bryne et al. (2019) found that within mental health services, stigma, marginalisation, and the isolation-by-design of lived experience practitioners away from professional staff was frequently reported. Ahmed et al. (2014) found that peer specialists encountered various challenges, including inadequate pay, limited employment opportunities, work-related stress, emotional strain from assisting others which was not well supported through supervision, and resultant difficulties in maintaining their own well-being. A lack of acceptance and integration amongst professional colleagues were also seen to perpetuate hierarchies within teams due to the common use of flexible working hours for peer supporters which, though appreciated by peer workers, were seen by some as devaluing the role (Gillard et al., 2013). The employment or involvement of lived experience practitioners can also be tokenistic and this is particularly reflected within government services (Bryne et al., 2019).

2.3 The prevalence of survivors of VAWG working in VAWG services

Like the social care sector as a whole (NHS Digital, 2019; Department For Education (DFE), 2020), specialist VAWG organisations are staffed predominantly, and in some cases exclusively by women. When considering the prevalence of survivors working in VAWG, we must first take into account that there is a high prevalence of sexual and domestic abuse perpetrated against the female population, both globally and in the United Kingdom (WHO, 2013). Statistical reports and crime surveys place the number of reported incidences of abuse against women and girls in the UK to be between 20 to 30 percent of the population (Radford, et al., 2011), though it is widely acknowledged that actual numbers are likely to be higher (Barnardo's, 2020; Women's Aid, 2019b). As somewhere between 81.7% and 86% of the social care workforce are women

(NHS Digital, 2019; DFE, 2020), it is reasonable to assume that there will be a crossover, creating this population of survivor-professionals who entered the profession not through designated lived experience roles, but as professionally qualified practitioners. This is also supported by the wealth of literature discussing the concept of the wounded healer, covered below.

A wide body of research demonstrates how personal experiences of adversity lead many social care professionals to their chosen career (Zerubavel & Write, 2012; Olson & Royse, 2006; Rácz et al., 2015; Newcomb et al., 2017). This is also evidenced in the widely known and explored archetypal dynamic of the wounded healer or helper (Zerubavel & Write, 2012; Olson & Royse, 2006), a concept that has been established and evidenced from as far back as 2,500 years ago (Groesbeck, 1975; Kirmayer, 2003). Psychotherapist Carl Jung introduced the term wounded healer to describe the cultural archetype representing a relationship dynamic that can occur between the analyst and the analysed in therapy (Jung et al., 2014). This concept suggests that the healer's own wounds or hardships enhance their ability to empathise, understand, and support others facing similar struggles. The term is often used in the context of psychology and counselling, though the archetype transcends cultural boundaries, emerging wherever empathy and mutual understanding play a role in facilitating the healing process (Benziman et al., 2012).

The available international research relating to the experiences of survivor-professionals managing dual identities as both professionals and victims-survivors was found to be primarily located within the disciplines of psychology and sociology. It became clear that the available literature and research overwhelmingly related to professionals with lived experiences of mental health issues and diagnoses working in mental health services (Newcomb et al., 2017; Zerubavel & Write, 2012). It is also apparent that self disclosure by professionals is more actively used in services addressing mental health and addiction, and specifically feminist organisations (White, 2000; Mahalik et al., 2000; Reid & Poole, 2013; Gibson, 2012; Zur et al., 2009). As early search results tended to focus on psychiatrists and psychologists as the population under study, additional keywords were required to find and incorporate research on social workers, counsellors, and nurses, however these searches produced fewer relevant results, demonstrating a knowledge gap in this area. Though further studies have been conducted within the broader fields of social work and nursing (Smythe et al., 2018), these, along with many of the studies on counsellors and psychotherapists, tend to focus on students who report early life adversity as motivation for studying the profession and less on those in practice who have already established their professional identity (Fox, 2016). An exception to this is the study by Olson and Royse (2006) who compared the backgrounds of practising social workers to equally qualified professionals in other fields. However, within these studies, evidence of social care practitioners with lived experience of sexual abuse or intimate partner violence is absent or otherwise limited (Newcomb et al., 2017). Olson and Royse (2006) also highlight that studies have neglected to explore how adverse experiences in adulthood or late teens might influence decisions around career choice or career change for social care professionals.

Whilst the risks and benefits of social care practitioners with similar lived experiences to their services users, particularly within mental health services, have been widely discussed (Jackson, 2001; Geleso & Hayes, 2007; Toson et al., 2012; Bryne et al., 2016; Stirrup, 2020; Cleary & Armour, 2022), little attention has been paid to how possible stigma resulting from disclosure of those lived experiences may affect professionals in practice. The focus remains on how their experiences of trauma may impact the quality of their work with clients which, although worth exploring, does not detail how disclosures to colleagues may impact survivor-professionals' personal wellbeing and collegial relationships. Due to this, disclosures of multiple types of concealable stigmatised identity were considered for this literature review.

2.4 Disclosing concealable stigmatised identities

The decision to disclose a concealable stigmatised identity is complex, as is managing the outcomes of others' responses to the disclosure (Quinn & Earnshaw, 2005; Pachankis, 2007; Quinn et al. 2007). Victims/survivors working in abuse support services can choose to, or choose not to reveal their survivor status to colleagues and managers, and there are potential benefits and consequences either way (Chaudoir & Fisher, 2010). In some cases, the choice to reveal or conceal survivor status may be taken out of the hands of the victim/survivor, when information is shared without their intent or consent, creating a non-agentic disclosure (Wood et al., 2024) (they could be *outed*). This could occur accidentally, or intentionally by another person, though specific research into the *outing* of concealable stigmas by others in the workplace appears to be absent.

As mentioned in chapter 1, literature within the psychology, sociology, management, and occupational health fields of study offer multiple models which explore the process of disclosing concealable stigmatised identities or secrets, and how individual and organisational factors influence disclosure methods and outcomes (Omarzu, 2000; Clair et al., 2005; Pachankis, 2007; Ragins, 2008; Afifi & Steuber, 2009; Chaudoir & Fisher, 2010; Jones & King, 2014). These models draw on theories such as stigma and impression management (Goffman, 1963), social identity (Turner, 1982), self-verification (Swann, 2011) social penetration (Altman & Taylor, 1973) and communication privacy management (Petronio & Reierson, 2009). Each model has overlapping features fitting for their subject area and drawing from the models before it, but each offer different insights into the antecedents, moderating factors, and immediate or long term outcomes of disclosure. I shall summarise each of these models in turn, highlighting how they differ and what they offer.

The first model is Omarzu's (2000) Disclosure Decision Model (DDM) which is designed to determine how and when individuals will self-disclose. This model details the cognitive decision process for why and how the disclosure will be delivered. It specifies the processes involved in deciding on the breadth, depth, and duration of a disclosure. It also specifies that one of five antecedent goals must be accessible to instigate the disclosure. These are to gain approval from others, relief from the efforts to conceal, control over one's identity, intimacy in relationships, and identity congruence (Omarzu, 2000). The disclosing person must select a recipient and predict the potential risks and benefits of disclosing. Ormazu (2000) hypothesizes that greater risk will lead to a decreased breadth of a disclosure, and the greater predicted utility will increase the disclosure breath and duration. This model, however, does not focus on the outcomes of disclosure or disclosure in a workplace context. For that, Clair et al. (2005) offer a generalised model of invisible identity management. Clair et al.’s (2005) model focuses on strategies adopted by stigmatised individuals to pass (i.e conceal) or intentionally reveal a stigmatised identity in the workplace. They identify how personal motives and goals, risk taking, and self monitoring propensities, and individuals' level of identity development influences disclosure decisions (Clair et al., 2005). Contextual factors are also taken into account such as workplace culture and diversity, industry norms, individual relationships, and legal protections. However the focus on the outcomes of disclosure are also limited in this model.

Pachankis (2007) offers a cognitive–affective–behavioural process model for understanding the psychological implications of concealing what is considered to be a stigma. This model details the situational influences of the salience of stigma, the threat of discovery, and the consequences of being discovered. It also details the cognitive implications on the concealer such as preoccupation, increased vigilance, and suspiciousness, as well as the psychological and behavioural consequences of concealing a stigma such as self monitoring, avoidance, isolation, maladaptive behaviours in relationships, and negative self evaluation. Pachankis's (2007) model uniquely highlights the challenges faced by individuals with concealable stigmatised identities. It becomes difficult for them to openly identify themselves to others, making it harder to find and connect with others in similar situations for support. This model's main focus is on the consequences of concealing and relies on earlier models to cover the disclosure decision making process. Like the previous models, it does not focus on outcomes post disclosure (Pachankis, 2007).

Similarly, the Disclosure Disconnects model by Ragins (2008) examines and compares the effects of individual and environmental factors of the disclosure process of concealable stigmas across work and non-work domains. Ragins (2008) posits that the variance and inconsistency of disclosure across domains may lead to a disconnect, causing psychological stress, role conflict, and attributional ambiguity. Ragnis (2008) acknowledges that disclosures occur on a continuum rather than a dichotomy, with individuals disclosing some elements of their stigmatised identity to varying degrees across life domains.

The Risk Revelation Model (RRM) by Afifi & Steuber (2009) comes from the literature around secrecy and explains how people evaluate the risk of concealing or revealing secrets when making disclosure decisions. The risks considered are material risks to oneself and others, but also the risk to the relationship between the disclosing person and their confidant. The RRM identifies three main conditions under which someone may reveal a secret; 1, when they feel the need for catharsis, 2, when the recipient needs or has a right to know, and 3, when they are encouraged or pressured to reveal the secret by others (Afifi & Steuber, 2009). The RRM also posits that secrets are more likely to be shared when the secret holder feels capable of talking about it, and if they have an established level of trust with the confidant. There is a lack of focus on outcomes post disclosure with the RRM but it offers a detailed model for understanding the disclosure process and antecedent goals, though this is not specific to concealable stigmas. However, the RRM can help us evaluate the strategies people use to reveal secrets, for example, via indirect mediums, as a series of incremental disclosures, through hints, or by disclosing via a third party. The model suggests that indirect strategies of disclosure are more likely when the risks associated with the disclosure are higher and/or the secret holder's ability to talk about the secret is lower (Afifi & Steuber, 2009).

The Disclosure Processes Model (DPM) by Chaudoir & Fisher (2010) supports us to understand disclosure decision making and the potential positive and negative outcomes of disclosure. Unlike previously described models, the DPM focuses on disclosure experiences rather than the decision making process leading to the act of disclosure. The model suggests that the goals and motivations for disclosing will influence the type of information disclosed as well as the outcomes for the disclosing person on an individual, dyadic, and social-contextual level (Chaudoir & Fisher, 2010). The model suggests that these outcomes are mediated by the alleviation of inhibitions, the social support the disclosing individual receives, and any changes in social information such as cultural stigma and norms for disclosure. The DPM also explains how the antecedent goals influence the depth, breadth, duration, and emotional content of information disclosed as well as the reaction of the confidant which may be supportive or unsupportive. This then generates long term outcomes, including a feedback loop that will influence future disclosure decisions and processes (Chaudoir & Fisher, 2010).

Lastly, Jones and King (2014) have produced a multilevel model of workplace identity management behaviour. They conceptualise identity management as happening on a within-person and between-person model. The within-person model focuses on the individual antecedents such as anticipated acceptance and how the same employee may manage their concealable stigma differently across situations and relationships, leading to fluctuating outcomes over time. The between-person model focuses on the organisational antecedents such as perceived organisational support and individual differences, and it incorporates the behavioural averages, general tendencies, and the accumulation of effects of identity management interactions over time which allows for a meaningful comparison between employees (Jones & King, 2014). Jones and King (2014) highlight the significance of disclosure of a concealable stigma within a workplace context, where identity management concerns are likely to be high given the constant presence of judgement and desire to make positive impressions on supervisors and coworkers. This model focuses less on the disclosure process and more on workplace identity management behaviour (Jones & King, 2014).

These models each offer elements of a supportive framework and insights that contribute to a comprehensive understanding of the complexities within the full disclosure process. What is clear is that the path to disclosure of any stigmatised identity is complicated to navigate and the outcomes of disclosure are affected by multiple factors. These include the confidence of the person making the disclosure (Afifi & Steuber, 2009), contextual factors such as the workplace culture and norms (Omarzu, 2000), and the disclosing persons antecedent goals (Chaudoir & Fisher, 2010). Practitioners may wish to disclose a stigmatised identity or experience to colleagues or supervisors for a number of reasons such as to strengthen relationships or to find relief from the stress of concealment (Quinn et al., 2007), and these disclosures may occur on a continuum and through indirect means (Ragins, 2008).

Whilst keeping a stigmatised identity concealed may protect an individual from being subjected to stigma from others, the act of concealing their identity exposes them to challenges and stresses. Some of these include heightened vigilance or fear and anticipation of their being discovered (Quinn et al., 2015) and social avoidance and isolation, impacting relationship forming, reduced self efficacy, and creating an ambivalent sense of self (Pachankis, 2007). Scambler’s (2004) work on stigma and epilepsy further proposes that felt stigma, meaning stigma that is internalised by the stigmatised person, can actually be more detrimental than enacted stigma, such as overt discrimination by others. Efforts to conceal one's stigmatised identity such as maintaining social isolation, lying about identity-related appointments or meetings, and avoiding discussions about the concealed identity are predictors of poorer physical and psychological quality of life (Quinn et al., 2017). Additionally, receiving a negative response from a disclosure of sexual abuse to a trusted confidant can have a considerable retraumatising effect (Scoglio et al., 2022). For these reasons, most survivors report being very selective about who they disclose to, aiming to avoid potential setbacks in their recovery process (Ahrens et al., 2007). Therefore, the selection of a trustworthy confidant forms an important element of the disclosure process (Omarzu, 2000).

Despite the risks, studies show that disclosure of a stigmatised identity to trusted confidants can alleviate identity incongruence and self-stigma, improving psychological wellbeing (Camacho et al., 2019) and increasing access to peer support (Weisz et al., 2016). Additionally, the redefinition of self that occurs when individuals acknowledge their personal experience with trauma seems to be intricately linked to their sense of healing and recovery. This process also provides an opportunity to rebuild and reorient trust in others (Smith & Kelly, 2001; Ulman, 2010). Disclosure can also be of benefit to practice and can hold an important role in the professional identity of the stigmatised person. Rácz et al. (2015) found that participants in their study on recovering addicts in support roles may have recovered from their addiction — their metaphorical ‘wounds’ — but they still wanted their past woundedness to be visible as scars so they could use their ‘wounded identities’ to help them help others by acting as proof of the possibility of recovery.

Another strong driver for disclosure is explored by Maine et al. (2021) in their study on sexual assault survivors in university faculties. Disclosures of survivor status were made by faculty members to students when pedagogically appropriate to illustrate that sexual assault is far from rare and can happen to anyone, and that feeling responsible and ‘stupid’ for being victimised is a common response (Maine et al., 2021). Disclosures by those with a respected professional or intellectual status may help to shift public views, thus reducing stigmatisation and discrimination (Guerrero et al., 2023).

Disclosure is often essential to gain workplace accommodations and although there are positive professional, political and psychological benefits to disclosure, these benefits need to be weighed up against other costs such as the right and desire for privacy (Zolkefli, 2021). Concealment is also a solid protection against harassment or discrimination (Elliott & Doane, 2015), particularly in environments where responses to disclosure are more hostile (Camacho et al., 2019). For example, in the literature exploring mental health practitioners concealing or revealing a mental health condition, fears were reported around confidentiality being broken, receiving negative judgement from colleagues, and being gossiped about and over monitored by colleagues and supervisors (Cohen et al., 2016; Huet et al., 2016; Edwards & Crisp, 2017; Tay et al., 2018; Zerubavel et al., 2012). In Edwards and Crisp’s (2009) study on mental health practitioners disclosing their own challenges with mental ill health, the requirement to report an impairment to regulatory bodies acted as a deterrent for disclosures. This was despite the threshold for reporting being high and only applicable when a clear risk of harm is present. Still, the fear of losing one's job and income made it less likely that practitioners would disclose in order to seek help, should they need it. Beukering et al.’s (2022) cross-sectional study on disclosing mental illness in work found that whilst most colleagues would encourage a good friend to disclose at work in order to achieve positive outcomes such as the ability to be one's authentic self, the majority also predicted that disclosing mental illness would lead to social ostracism and discrimination preventing career advancement. Workers differed in their expectations based on their own personal, sociodemographic, and work-related characteristics (Beukering et al., 2022). For instance, workers with positive experiences of knowing and working with people with mental illnesses, workers with higher education levels, and those who reported positive workplace atmospheres were more likely to expect favourable disclosure outcomes for colleagues with mental illness. Women were also more likely than men to predict positive outcomes from disclosure (Beukering et al., 2022).

The impact of disclosure on career progression (Huet et al., 2016; Mitchell, 2018; Tay et al., 2018; Zerubavel et al., 2012) and the potential for disclosures to trigger referrals to licensing and professional bodies, resulting in damages to professional credibility (Strang et al., 1998) or the suspension of practice licences were common concerns for practitioners in mental health professions (Boyd et al., 2016; Cohen et al., 2016; Edwards & Crisp, 2017). Due to the stigma attached to sexual and domestic abuse, colleagues, managers and supervisors of the survivor-professional might fear or believe that the survivor-professional is impaired by their abuse experience (Zerubavel & Write, 2012). Furthermore, Zerubavel & Write (2012) theorise that the act of disclosure itself may be seen as inappropriate or unprofessional in a workplace setting, increasing the stigma faced by survivor-professionals who disclose. As discussed in the previous chapter, Non-victims and victims alike may also hold a belief in a just world (Lerner, 1980) in which bad things only happen to bad people (Janoff-Bulman, 2004). This becomes an additional layer of stigma on the survivor (Taylor, 2020).

Zerubavel and Write (2012) question the congruence of professionals who chose a life of ‘bearing witness’, providing warmth, support, and empowerment to service users, but who do not extend that position into their perceptions of and interactions with colleagues. They propose that with patients or clients, psychologists occupy a ‘guiding role’, which consists of validating, accepting and providing positive regard for service users, where as in regard to their fellow colleagues, their focus is on gatekeeping the profession against unsuitable practitioners and protecting clients from potential harm caused by practitioner incompetence. Zerubavel and Write (2012) found that a belief in the monitoring and gatekeeping, particularly by psychologists, of practitioners’ mental health and fitness to practise discouraged practitioners from disclosing or seeking personal support.

Outside of peer reviewed and commercially published literature, the subject of stigma and disclosure of abuse or mental health conditions amongst workplace colleagues or within professional networks has been discussed online by advocates speaking out on YouTube (Taylor, 2018), Twitter (Em, 2020), blogs, and within the comments sections of web pages. The online magazine *The Psychologist,* run by the British Psychological Society published several articles and responding letters around the debate on the appropriateness of 'mental health revelations' being platformed by the magazine (see The Psychologist, 2017a and The Psychologist 2017b).

Whilst discriminatory treatment and stigma from colleagues appears, at least anecdotally, to be a common experience within the mental health professions, my review of the published literature highlights a lack of formal research on this topic in relation to survivorship of VAWG specifically, and the impact that stigma and workplace cultures within VAWG settings has on professional-to-professional disclosures of survivor status.

There is a large body of research focusing on work based disclosure experiences of other concealable stigmatised identities, particularly around disabilities and diseases including hearing loss (Jennings et al., 2013), degenerative sight loss (Spiegel et al., 2016), and chronic illness (Munir et al., 2005; Frndak at al., 2015). Others focus on religion (Gebert et al., 2014; Charoensap-Kelly et al., 2020), pregnancy (Jones et al., 2016; Jones, 2017) and social class (Kallschmidt & Eaton, 2018). The highest number of studies focusing on LGB sexualities (Griffith & Hebl, 2002; Ragins et al., 2007; Bouzainis et al., 2008; Barrett & Lewis, 2012; Einarsdottir et al., 2016; Wax et al., 2017; Helens-Hart, 2017), and mental illness (Jones, 2011; Peterson et al., 2011; Bonaccio et al., 2019; Dewa et al,. 2020; Hastuti & Timming, 2021; Hudson & Lavoie-Tremblay, 2021).

In their interdisciplinary review of disclosure of stigmatised identities at work, Follmer et al. (2020) found that certain identity groups faced more adverse consequences following disclosure than others. In particular, individuals with mental illness and HIV, along with religious minorities, encountered more negative work-related attitudes and interpersonal outcomes post-disclosure. These results imply that the repercussions of disclosure are influenced by both the nature of one's identity and the specific characteristics associated with that identity (Jones & King, 2014). Overall, the majority of research literature on disclosure of stigmatised identities focuses on the experiences and decision making processes of the disclosing person, with outcomes attributed to the disclosing person's identity management, their antecedent goals when disclosing, and the breadth, depth, and style of delivery used during the disclosure event (Quinn & Earnshaw, 2005; Pachankis, 2007; Quinn et al. 2007; Chaudoir & Fisher, 2010). Less attention is given to how the receiver of the disclosure reacts and responds to the information which is of interest to this study.

Research looking into the impact of disclosure recipients' responses can be found within the literature on workplace diversity. For example, in a study addressing the disclosure process for recipients of stigma disclosures, Johnson et al. (2020) explore how disclosure events can activate a stigma-induced identity threat (Major & O’brien, 2005) for the disclosure recipient, which influence a spectrum of behaviour outcomes from hostile to supportive. Johnson et al. (2020) propose that the reactions of recipients to such disclosures hold significant implications for either perpetuating or dismantling workplace stigma, having an impact on the overall inclusion, retention, and engagement of a diverse workforce.

Johnson et al.’s (2020) framework identifies several key factors that influence recipients' responses to disclosure events and the perceived strength of the stigma threat, including the novelty of the disclosure - whether or not the recipient had handled a similar disclosure before; its disruptiveness - when the disclosure calls for a change in the day to day working practices to accommodate the individual; and its criticality - where an immediate or large scale response is required to avoid serious consequences. The characteristics of the stigma itself also come into play. These characteristics may be how noticeable or perceptible (Gofman, 1963) the stigma is through the disclosing person's appearance or behaviour. An example of this may be self harm scars or an overactive startle response, both indicating past trauma. A stigma that is noticeable will likely reduce the novelty of a disclosure event (Gofman, 1963). Other stigma characteristics impacting disclosure recipients' responses would be how controllable (i.e, self-inflicted) the stigma appeared to be. This characteristic may be present in abuse stigma if the recipient holds conscious or subconscious victim blaming beliefs. A third characteristic that may be present in abuse stigma would be the potential danger or threat the stigmatised person poses to other individuals or the organisation. An example here might be a perceived risk of practitioners with survivor status overidentifying with clients, or their potential heightened vulnerability to triggers, empathy based stress, and burnout, which is explored further below.

Victims of rape, child sexual abuse, and domestic violence are often viewed as distinct groups which are each pathologised and stereotyped as lacking in interpersonal, psychological, and professional skills (Harter, 2001; Harter et al., 2009). Studies have shown that this process exaggerates similarities within the group and overlooks the diversity of survivor experiences (Najman et al., 2007). However, Zafar and Ross's (2013) study found that for those that personally know survivors or are survivors themselves, perceptions and stereotypes of both CSA and rape survivors were similarly complex and not wholly negative as previous studies had suggested. Still, research highlights how stereotypes often reflect a hierarchy of victimisation, where certain forms of abuse, or characteristics of the abuse victim impact the level of legitimacy, blame, or support given to the victim. For example, factors such as the race of the rape victim and/or perpetrator (George & Martinez, 2008) whether the victim of domestic abuse had consumed alcohol (Harrison & Esqueda, 2000), the age of the sexual abuse victim, and their relationship to the perpetrator (Davies & Rogers, 2009) all impact how culpable and credible the victims are pereiced, and how the severity of the assault is measured. Survivors of crime who do not present as stereotypically distressed or are not perceived as strictly 'innocent' (McEvoy & McConnachie, 2012) or victims of coercion or non-violent sexual violations may therefore struggle to have their experiences acknowledged as legitimate. The relationship between these stereotypes and disclosure is well documented. Anderson and Doherty (2007) found that women frequently weigh anticipated stigma, disbelief, or blame when deciding whether to disclose abuse, particularly within professional or institutional settings. This is especially relevant in feminist or trauma-informed workplaces, where survivor identities may be politicised, and lived experience may be seen either as a strength or a risk depending on organisational culture (Leisenring, 2006).

2.5 The risks and benefits of practitioners with lived experience

Though social work and other empathy related professions tend to carry an above average risk of burnout and 'empathy-based stress' (Rauvula et al., 2017) compared to other helping occupational groups such as emergency responders (Soderfeldt et al., 1995), research on compassion fatigue and vicarious trauma, particularly in the fields of psychology, social work, and occupational health, consistently finds that survivor-professionals are more vulnerable to developing secondary traumatic stress symptoms and burnout than those who do not report a personal trauma history (Salston & Figley, 2003). In their meta-analysis of 41 related studies, Cieslak et al. (2013) found that reports of secondary traumatic stress symptoms in workers with indirect exposure to trauma were stronger amongst female professionals. It is, however, unclear as to whether this is due to female professionals being more likely to have a personal history of similar abuse trauma to their service users or whether it relates to gender-role socialisation leaving women either more vulnerable to experience stress responses or more likely to disclose experiences of distress, compassion fatigue, vicarious trauma, or any of its counterparts (Cieslak et al., 2013).

Organisations often have safeguarding policies and procedures in place to respond to disclosures of current or recent sexual assault or domestic abuse experienced by their staff. Domestic abuse is recognised as putting a major strain on job performance and attendance. (Reeves & Kelly, 2007; LeBlanc, Barling, & Turner, 2014). Multiple studies show that perpetrators of interpersonal violence harass the victim at work (Tolman & Rosen, 2001; Swanber et al., 2006; Logan et al., 2007). However, these policies are designed to immediately address identified risks to staff members. Reasons for disclosures of current abuse are likely to be different to the reasons staff may wish to disclose historic abuse, namely, safeguarding and protection in the first instance, and understanding or accommodations in the second.

Understanding around occupational health reactions in empathy related professions has expanded over the years to include growth and strength focused outcomes such as compassion satisfaction, vicarious resilience, and post traumatic growth (Rauvula et al., 2017). Janoff-Bulman (2004) describes three explanatory models of how living through and recovering from trauma can be a catalyst for developing resilience against stress. These models include psychological preparedness to manage any further trauma (see also Meichenbaum's (1985) stress inoculation model); existential reevaluation - where the survivor has developed an implicit understanding of human vulnerability and sees the world in a clearer light; and an awareness of a new found strength in the sense of ‘what doesn’t kill you makes you stronger’, which highlights a redemptive value of suffering (Janoff-Bulman, 2004).

Survivor-professionals may offer valuable expertise in their roles as a result of their lived experiences of abuse and of using support services themselves. It can be understood that it is not just the experience of the wound or trauma itself that may assist them in practice, but of managing and healing from the trauma and the personal qualities developed by the survivor-professional as a result. Dheensa et al., (2022) found that health care professionals who had experienced domestic abuse were more likely to recognise it in patients, though for survivor-professionals whose experiences of domestic violence were recent, it was noted that supporting patients experiencing domestic abuse could be additionally distressing. Boyd et al. (2016) suggest that there are positive effects of mental health professionals openly sharing their own experiences of mental distress. They propose that transparency could help to reduce stigma by offering examples of professionals with lived experiences of mental distress who are doing well. This would benefit service users, providing role models, and also challenge clinicians' pessimism regarding the potential for recovery.

In Boyd et al’s (2016) survey of a specific group of mental health professionals working with veterans, 44% of respondents reported that their own experiences of and recovery from mental distress was helpful to their work, increasing their capacity for compassion, and enabling them to offer hope to service users. These findings are similar to those from Huet and Holttum’s (2016) study on art therapists, where participants reported having increased empathy for service users as a result of their own experiences.

Having explored the value of wounded helpers, I will now return to the topic of user-led services and recovery programmes that use a social model of harm and recovery by delving into VAWG sector services, the political space they occupy, and the possible implications for practitioner disclosure.

2.6 Neoliberalism and the professionalisation of VAWG organisations

As explained in Chapter 1, many VAWG services and organisations active today began as grassroots feminist support services set up and run by ‘ordinary women’ (Simic, 2020) - in other words, lay women without professional qualifications or experience in supporting victims of violence. These groups positioned the harm of gender based violence in cultural, social and political dimensions (Schecher, 1983; Dobash & Dobash, 1992; McMillan, 2007; Hague, 2021). Rather than framing the harm of male violence solely as an interpersonal issue and focusing their work on psychological interventions such as traditional counselling models, they took a relational approach, using consciousness raising and collective activism to share personal experiences of violence, and translate the personal into the political and vice versa (Vera-Grey, 2020). As the overall political landscape as well as the social care sector has evolved to to prioritise neoliberal principles (Chanan & Miller, 2013), organisations that deliver social care services have faced increasing structural pressures from stakeholders to professionalise their approach to their work (Dobash & Dobash, 1992), moving towards a model that promotes individual responsibility and self-reliance. Service provision that deviates from this approach risks being dismissed as unprofessional (Vera-Grey, 2020) and many funding agencies discourage work that concerns itself with creating social change, funding NGOs only for welfare services and rejecting bids that propose community education or that carry political agendas (Schechter, 1982; Bloodgood & Trembley-Boire, 2016).

According to the administration and organisational studies literature, neoliberal climates have pressured many public and social care sector organisations to professionalise (Noordegraaf, 2006). Much of the literature quotes Wilensky (1964) stating *everyone wants to be a professional,* suggesting that this is not such a recent phenomenon. Public sector occupations such as social work have long strived for professional status recognition, despite the arguments that reforms and modernisation agendas within the care sector have led to cost-cutting and an increased managerialism (Diaz & Hill, 2020). However, the lure of a monopoly of ownership and control in defining areas of knowledge and eliminating competition adds to the ideological appeal of professionalism (Evetts, 2013). Within mental health, greater regulation of the workforce and a focus on credible, clinical mental health systems are strong motivations for favouring professionalisation over the unique values of lived experience work (Roennfeldt & Bryne, 2021).

Evetts (2013) argues that professionalisation can be used to self-motivate workers to the point of exploiting themselves due the expectation to meet demands of clients and be morally committed to the work. Collins (2019) offers the theory of credentialism, positing that organisational professionalism and distant managerial control will be achieved through an increase in occupational training and the formal certification of workers, which may lead to a prioritisation of qualifications over other occupational assets such as practice-based or lived experiences. It can be argued that professionalising designated lived experience roles may enhance their credibility by aligning the workforce with clinical professionals. However, Roennfeldt & Byrne (2021) raise a valid concern that this shift could compromise or dilute the core perspectives and principles of lived experience work.

Professionalism is also embodied in the identities, behaviours and presentations of the workers where the professional is institutionalised to not only perform the tasks of their profession but to perform the professional identity in their self presentation (Noordegraaf, 2007). Additionally, the perception of professionalism is linked to social identity characteristics which typically disadvantage those who do not fit the professional ideal of white, middle-class masculinity (Adamson & Johansson, 2016). This may place women-led VAWG services in a precarious position. Navigating the stigma placed upon victims and survivors working in the sector may create an additional barrier to VAWG services achieving the professional credibility they need to access funding and the respect of police, judges, and welfare workers (Schechter, 1982). This pressure has the potential to impact both survivor-professionals’ personal decisions to disclose their survivor status, and how their disclosures are encouraged or received from staff and managers within their organisation.

Along with the professionalisation of social care and third sector services, there has been a shift away from the collective, peer models of support and sociopolitical activism, towards a sickness model of understanding victims' responses to abuse (Vera-Gray 2020; Peters, 2019). Peters, (2019) outlines how the intoduction of psychiatric diagnoses such as 'rape trauma syndrome' (Burgess & Holmstrom, 1974), PTSD, and other mental health conditions to explain women's reactions to trauma (Saunders, 2019; Taylor, 2022) have helped to create a neoliberal medicalised framework which puts responsibility on victims for experiencing abuse and for their reactions to violence (Coy & Kelly, 2019), rather than considering violence against women in its sociopolitical context.

The British Association for Counselling and Psychotherapy (BACP), the leading registration body in the UK, is currently working to professionalise counselling by standardising training, qualifications, and other practice guidelines (BACP, 2023). A benefit of professionalisation of counselling, which is not currently a protected title, will be the promotion of ethical and professional standards, but this may come at the cost of gatekeeping unaccredited staff and volunteers from offering talk based support and increasing authoritarian relations between client as patient and counsellor as healer (Bondi, 2004). The formalisation of roles may detract from more egalitarian, person-centred approaches that focus on mutual respect and collaboration. This could potentially reinforce power imbalances, reducing the agency of clients by positioning them as passive recipients of expert advice, rather than as active participants in their healing process (Bondi, 2004). In some cases, such a model could undermine the therapeutic relationship, especially for those who seek a more holistic or relational approach to mental health care.

The debate on professionalisation highlights the challenges of work that is fundamentally rooted in personal experience and relationships, attempting to gain credibility within a system that primarily values formalised knowledge (El Enany et al., 2013). A widely acknowledged core principle of feminist therapy is the utilisation of self disclosure between practitioner and client as a way to build egalitarianism within the therapeutic relationship (Simi & Mahalik, 1997). Therapists practising from feminist and humanistic theoretical orientations are more likely to disclose than classically trained psycho-analytic therapists (Gibson, 2012). Simi and Mahalik (1997) state that feminist therapists, compared to psychoanalytic/dynamic and other traditional therapists support the idea that self disclosure empowers clients by allowing them to choose a therapist who they could see as a role model. Kelly (2018) writes about how since their formation as feminist activist spaces in the 1970s, refuge and Rape Crisis centres have 'lost the we', no longer recognising the solidarity between women collectively exposed to a continuum of violence in our lifetimes. Kelly (2018) observes that during that time, those staffing these organisations would not refer to women as 'service users' or 'clients' as it was understood that all women stood to gain collectively by fighting for liberation from the shared threat of violence.

The professionalisation of roles such as forensic nursing and counselling, both of which may be practised in VAWG services, is a complex and contradictory process from a feminist perspective (Folley, 1994; Ana, 2024) It risks creating hierarchies amongst women providing support to victims, but it also brings credibility to practices previously devalued as feminine work (Bondi, 2010). The move towards supporting neoliberal and consumer models of care also promotes the dichotomisation of service users and service providers by individualising the problem of sexual and domestic abuse. Neoliberal notions of resilience and personal responsibility undermine feminist efforts to encourage collective responsibility to counter sexual violence (Taylor, 2018). This may have the impact of increasing stigma and blame on victims, which will likely negatively influence practitioner's decisions around disclosure.

2.7 Responsibilities of workplaces and trainers

Regardless of the survivor status of staff members, under health and safety legislation such as the Workers Protection Act 2024 and the Health and Safety at Work etc. Act, 1974, workplaces have a legal duty to prevent sexual harassment in the worksplace and put sufficient support and comprehensive safeguards in place for the wellbeing of all of their employees (Health and Safety at Work etc. Act, 1974). This includes the requirement to, as far as reasonably possible, provide adequate training for line managers and HR professionals; protect staff from bullying or harassment, either from colleagues or third parties; and protect staff from discrimination as defined by the Equality Act 2010 (TUC, 2020).

Though being a survivor of abuse is not a protected characteristic under law in England and Wales (Equality Act, 2010), such lived experiences can carry a stigma with the potential to lead to discrimination (Maryn & Dover, 2024). Mental health difficulties resulting from traumatic experiences could be regarded as a disability which would be recognised as a protected characteristic and therefore unlawful to discriminate against. However, for a mental impairment such as post traumatic stress disorder to qualify as a disability, it would need to have a ‘substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities’ (Equality Act, 2010 6.1b). The Equality Act (2010) also offers protection from discrimination for people who have had a disability (such as PTSD as a result of abuse) in the past, but have since recovered. Still, the protection against discrimination relates only to the resulting disability and not survivor status itself (Equality Act, 2010).

Workplaces can address their responsibility to protect and support the wellbeing of their staff by providing adequate supervision. Regular supervision plays a vital role in preventing the development of secondary traumatic stress (Salston & Figley, 2003). When working with trauma victims and survivors of crime, supervision or consultation with colleagues and managers can help workers process the traumatic material they have had secondary exposure to, along with any overwhelming reactions and responses to the content, such as personal triggers (Cerney, 1995).

Many counselling training courses require trainee counsellors to attend a high number of personal counselling or therapy sessions themselves to qualify. Professional associations such as the British Association for Counselling and Psychotherapy expect their members to engage regularly with a supervisor who is also a counsellor, where they are encouraged to practise congruence and ‘care of the self’ as practitioners (BACP, 2018). During training, trainees have the ethical responsibility to seek support and, if appropriate, take positive action to resolve any practice related difficulties they may have. In order to encourage this, trainers must provide opportunities for trainees to discuss these issues without receiving blame or unjustified criticism (BACP, 2018).

Whilst workplaces should ensure legal policies are adhered to and proper safeguards are in place for all staff, disclosing vicarious trauma to a manager or supervisor could still carry the risk of the disclosing staff member being treated differently or unfairly. When a staff member's personal history of abuse or trauma is known to the workplace, assumptions may be made that any issues or struggles they have at work are a result of their own poor trauma management or a lack of personal resilience. This same assumption may not be made about a staff member who has not disclosed a personal history of trauma.

2.8 Conclusion

Overall, the literature review has identified considerable research on disclosing and concealing stigmatised identities, including within the workplace, but this is broad and unspecific around the stigmatised identity being revealed or the particular workplaces or job roles. The question of practitioner disclosure to patients, clients, or service users, particularly within counselling and mental health services, has been previously explored, but there is considerably less research on practitioner disclosure to colleagues and managers. Research around disclosure of stigmatised identities within the workplace amongst and towards colleagues focuses mainly on disclosures of LGB sexualities (Griffith & Hebl, 2002; Ragins et al., 2007; Bouzainis et al., 2008; Barrett & Lewis, 2012; Einarsdottir et al., 2016; Wax et al., 2017; Helens-Hart, 2017; Riggle et al., 2017) and disclosures of disabilities and health-related conditions to managers or supervisors (Jones, 2011; Peterson et al., 2011; Bonaccio et al., 2019; Jones & King, 2014; Dewa et al,. 2020; Hastuti & Timming, 2021; Hudson & Lavoie-Tremblay, 2021). There is limited literature pertaining to the disclosure of historic sexual abuse or domestic abuse survivor status at work and I found no research pertaining to disclosures of stigmatised identities within VAWG organisations. However, these studies help to build a foundation for understanding the dynamics and potential consequences of disclosure in the workplace. By examining how individuals manage stigmatised identities in broader contexts, such as sexual orientation or disability, these studies provide insight into the possible psychological, social, and professional impacts that survivors of abuse might also face when considering disclosure in a work environment. The research on workplace disclosure also highlights recurring themes such as fear of judgment, the need for trust, and the potential for both positive and negative outcomes which are likely relevant to survivors in VAWG organisations. Combined, the various disclosure models explored conceptualise identity management as a process that is both internal, interpersonal (Jones & King, 2014), and iterative. Understanding these dynamics and processes helps to inform my research, offering a framework for investigating how survivor-professionals navigate their own experiences of disclosure within a specialised sector. Moreover, it underscores the importance of exploring these issues within the unique context of VAWG, where personal and professional identities may be closely intertwined.

The documented history of the Rape Crisis and Refuge movements provides valuable insight into the changes that have shaped the VAWG sector, shedding light on the significant shift from feminist activism and collective, peer-based models of support towards a more professionalised and individualised approach. Understanding this shift is crucial for my research as it lays out the cultural and institutional environment that participants operate within. The professionalisation of the sector may influence how survivor-professionals navigate their identities and decisions around disclosure. The power of shared testimony to create solidarity and role model recovery has been replaced with credentialism, and survivors working in the sector must contend with a stigma threat that identifies them as employees who are more vulnerable to burn out, empathy based stress, triggers, and a risk to clients or the organisation as a whole. This context provides a backdrop for the complexities of disclosure in VAWG settings.

Lastly, though individuals with lived experiences are increasingly valued as consultants and peer supporters, it remains unclear from the existing literature how survivor-professionals are perceived by their colleagues within the same profession or how they manage their dual identity and the potential of being stigmatised in the workplace. In summary, this review has highlighted a significant gap in the research concerning VAWG survivor-professionals and their experiences of disclosing their survivor status to colleagues, which my research aims to address. It has also examined the prevalence of VAWG survivors working in the sector, the challenges they may encounter, and the concept of the wounded healer, along with current practices and trends related to lived experience work to provide a foundation for likely occurring themes. The next chapter will explore the theoretical frameworks that guide this study and the process of choosing and integrating these paradigms. It highlights the rationale behind the chosen approach and how it aligns with the research objectives.

Chapter 3 - Theoretical framework

3.1 Introduction

In this chapter, I outline the intellectual journey that led me to identify and adopt the most suitable paradigm for my study. The exploration begins with an examination of constructionism and critical realism. I discuss the compatibility and tensions between these perspectives, particularly in relation to the 'double hermeneutics' problem of interpretation (Parr, 2011) and the desire to produce legitimate accounts to underpin social and political change. Next I discuss how a commitment to feminist principles underlines my research and provides a critical lens through which I interpret my findings and I end on the need for continued reflexivity when conducting feminist research.

To begin this exploration of paradigms, I shall define the role of ontology and epistemology in shaping my study. Ontology refers to the study of what exists, or the nature of reality, while epistemology concerns how we come to know and understand that reality (Crotty, 1998). These philosophical foundations inform not only my data collection methods but also my approach and methods for analysis. In my study, I have adopted feminist theory as my ontological framework, recognising that power and gender structures fundamentally shape interpersonal experiences (Stanley & Wise, 2002). This ontological position aligns with my research questions which explore the lived experiences of women and how they make sense of these experiences.

Epistemologically, I draw on both constructionism and critical realism in my design, using a qualitative questionnaire and semi structured interviews, and my analysis, for which I have used reflexive thematic analysis (Braun & Clarke, 2023) and experimented with my own creative methods. Constructionism allows me to explore how participants socially construct meaning within their narratives, recognising that their understanding of events is shaped by social interactions (Burr, 2015). Critical realism, however, acknowledges that these narratives and experiences are also influenced by underlying systemic power structures (Fopp, 2008), providing a deeper lens for understanding the broader societal forces at play. By combining these two paradigms, I can produce a more nuanced interpretation of my findings, examining both individual experiences and the structural influences that shape them. I begin this chapter with an exploration of constructionism.

3.2 Constructionism

Positivist approaches such as realism focus on the empirical analysis of objective phenomena and examine the relationships between variables to understand them, whilst a subjectivist approach such as constructionism emphasises individual perceptions of reality, exploring how different people experience and interpret the world (Bryman, 2016). Realism in social research and philosophy is a perspective that assumes there is a reality independent of human thoughts, beliefs, and perceptions, which can be studied, observed, and understood (Crotty, 1998). In the context of social research, realism is often contrasted with more idealist or constructivist approaches, where reality is viewed as being shaped entirely by human consciousness or social interactions. Stigma, identity, and relationships are key focuses within my study. These matters of the mind and social world are formed through and reshaped by interactions within social relations (Berger & Luckmann, 1966). My research is primarily concerned with the thoughts and perceptions of the participants around these socially constructed themes. I do not aim to uncover a true account of the social interactions of my participants, but to understand the meanings they hold for the participants.

As a philosophical approach, constructionism views knowledge as constructed through human interaction between our social selves and the social world around us (Burr, 2015). Unlike objectivism, constructionists posit that there is no one objective and knowable truth independent of human perception or inference (Cruickshank, 2012). As such, meaning cannot be discovered, it instead emerges when consciousness engages with an object (Crotty, 1998). For constructionists, the goal is not to find the single absolute truth as truths are constructed in relation to the power and biases each observer holds (Burr, 2015). Constructionists are more likely to put their efforts into examining the potential role of power, interests, and identities of those involved, focusing on the reflective and individualist nature of knowledge (Moses & Knutsen, 2007). That said, constructionism is not entirely subjectivist as it acknowledges that meaning can only be constructed when we interact with and interpret the world, which cannot be done in isolation (Robson, 2011).

Though positivist and subjectivist positions are often regarded as in opposition, Crotty (1998) proposes that social constructionism is not incompatible with a realist perspective. Whilst the construction of meaning is created in the human consciousness, these subjective understandings are constructed from the raw materials of the social world and can only be understood in context (Williams, 2016). This means that while our understanding of reality is shaped by social factors which are shared amongst and between people, the reality itself exists independently of these interpretations.

Claude Levi-Strauss (1966) introduces us to the term ‘bricoleur’ to describe the process of combining ready existing materials together to create something new. For example, imagine we each decide to build a lego house out of lego bricks. The lego bricks are our ready existing materials. When we are finished we’ll notice that each house is different. Some may have a chimney, others not. Some may have four windows, others only two. Despite this, we will agree that each of us has consciously and intentionally built a lego house. There is no one true house whilst all others fail to count as houses. There is no authentic template to measure the builds against but we all share a coherent and pragmatic understanding of what constitutes a lego house. It is the intentionality and meaning we ascribe to it and not the order of the bricks that matters.

Ian Hacking (2000) in his book ‘The Social Construction of What?’ discusses how the classifications that we apply to subjects can profoundly affect how we both form and view them. He uses the examples of child abuse and mental illness amongst others to ask whether these categories or ‘kinds’ are socially constructed or are the naming of pre-existing phenomena. When we name and classify natural kinds, our perception and the meaning we prescribe to them may be affected but the objects themselves do not change (Hacking, 2000). However, when we name and classify what Hackling calls 'interactive kinds' of phenomena within the social sciences, we are shaped and influenced by our own understanding of the category, and this both enables and constrains our interactions with it (Williams, 2016). A socially constructed subject is not inevitable in its nature, it has indefinite potential forms (Hacking, 2000) however, subjective meanings constructed from our lived experiences can appear real to us and this may affect our actions and responses, causing real world consequences (Moses & Knutsen, 2007). Constructionism cautions us against readily accepting these categories or kinds that we have collectively created as truth (Burr, 2015). What we call common sense is more of a common agreement to treat such meaning or understanding as true to us and this can change over time.

For example, as of the 29th of December, 2015, coercive control is legally recognised as a form of domestic abuse under law in England and Wales, allowing perpetrators to be prosecuted for it (CPS, 2023). However, if the same behavior occurred before that date, perpetrators cannot be held accountable under this law. Beyond legal validation, our collective social understanding of domestic violence has also evolved. The term 'domestic violence' was rarely used until the 1990s. Before then, it referred to civil unrest or violence within a country, as opposed to interpersonal violence (NYTimes, 2014). What we now recognise as domestic violence was often historically called wife beating, with victims labeled as battered women, reinforcing the interpretation that domestic violence exclusively involves physical assault (Klein, 2013). Christine Littleton (1989) critiqued this linguistic shift, observing that terms like 'wife battering' and 'battered women' were gradually replaced by more neutral phrases such as 'spousal abuse' and 'domestic violence.' This change, she argued, obscures the gendered nature of the issue, erasing the male perpetrator and potentially preventing female victims from recognising their abuse as part of a broader social and political issue tied to sexism and patriarchy (Littleton, 1989). Both these legal and social developments have significantly structured how we define and understand domestic violence, what it entails, the societal factors contributing to it, and how we should respond. However, this hermeneutic development does not mean women subject to coercive and controlling behaviours before this shift did not experience the same degree of harm or trauma as victims do now. Rather, due to societal norms and structures not previously categorising coercive control as domestic abuse, many of these women may have found it difficult to recognise these behaviors as abusive or to see themselves as victims or survivors and therefore seek help or justice.

This is an example of what Miranda Fricker (2007) terms hermeneutic epistemic injustice. Hermeneutic injustice occurs when someone is prevented from comprehending or articulating an important aspect of their own experience due to a lack of shared social frameworks for interpretation. As agents of meaning-making, we rely on communication not only to convey information to others but also to cultivate self-understanding. Furthermore, the process of self-interpretation is deeply influenced by our social interactions and relationships with others which provide the necessary language and concepts to make sense of our experiences. When those frameworks are absent or inaccessible, individuals may struggle to fully grasp or communicate their own realities, leaving them isolated in their understanding. This, in turn, can perpetuate marginalisation and hinder personal and collective growth (Rittonano, 2022).

3.3 Exploring Critical Realism

In exploring theoretical paradigms, I have identified critical realism as more closely reflecting my own philosophical position. Fopp (2008) argues that whilst social constructionism acknowledges a real world independent of constructions, this is generally underdeveloped and implied without being stated, whereas critical realism is able to go beyond what social constructionism offers. Critical realism explicitly warns us of the danger of abandoning the search for ‘truth’ in social science, for it is ‘truth’ that enables the authoritative claims that initiate change (Layder, 1998). As Bhaskar puts it:

> We will only be able to understand and so change the social world if we identify the structures at work that generate those events and discourses. (Bhaskar, 1982, p. 2)

In mapping these structures, critical realists distinguish three ontological domains of reality, these are ‘the real’ constituted by the structures and mechanisms that generate events, ‘the actual’ of observed and unobserved events generated by activated mechanisms, and ‘the empirical’ which is the domain of observed experiences (Collier, 1994; Sayer, 2000). Taking a wholly relativist approach to my research risks positioning the lived experiences of survivor-professionals as entirely socially constructed, ignoring the impact of already established social structures and mechanisms (the real and the actual) on how my participants observe and construct their understanding of their own experiences (the empirical). A critical realist paradigm allows me to take a relativist epistemological approach whilst positioned within a realist ontology (Eaton, 2019). Adopting this approach to my research may offer me a more rigorous framework, capable of circumventing the shortcomings of social constructionism (Parr, 2009).

Although critical realism manages to combine paradigms by valuing positivism's focus on empirical data, the interpretivist’s hermeneutic approach to understanding meaning, and postmodernism's attention to language, it primarily relies on hermeneutic methodologies in social science research as a starting point (Price & Martin, 2018). Unlike natural structures, human-made social structures are dependent on concepts that are transformed and reproduced, which Vandenberghe (2022) describes as a ‘thin version of hermeneutics.’ Since we cannot rely on empirical evidence to understand our internal world, critical realist research often relies on qualitative methods.

3.4 Tension between critical realism and feminist approaches

The term "critical" in critical realism reinforces the need for researchers to critically evaluate the theories they use and the explanations they offer. Price and Martin (2018) emphasise that the goal of critical realist research is to contribute to improving the world. In this sense, "critical" also carries the same emancipatory connotations as found in critical theory, aiming to promote positive social change (Stutchbury, 2021). Feminist academic Donna Haraway (2003) envisions research as a transformative practice that can contribute to social change. She argues that research should be aimed at constructing worlds that are less organised by axes of domination and more conducive to justice and equality (Haraway, 2003).

Traditionally, feminist approaches to research have sat within more interpretivist methodologies that emphasise the legitimacy of multiple realities that are subjective and specific to the knower (Denzin & Lincoln, 2000). This poses a challenge for researchers who wish to value and represent women's voices and interpretations but also produce legitimate accounts which will form a basis of enabling social and political change (Layder, 1998). Clegg (2006) and Parr (2013) highlight the tension between critical realism and feminist approaches and Parr offers her own methods of interpreting and analysing the stories women shared with her. Parr (2013) describes selecting extracts from her interview transcripts that most saliently related to answering her research questions. Furthermore, Parr interpreted the accounts through her own intellectual perspective having engaged in theoretical ideas and models as a guide.

As a feminist researcher, Parr (2011) accepts the inevitable 'double hermeneutics' problem of having to interpret others interpretations (Danermark et al., 2019). This approach aligns with critical realists who recognise that although concepts and meanings are necessary for an actor's explanation of their situation, we are constrained and bound by social structures and are only able to interpret our experiences through the conceptual tools and discursive resources available to us in our culture. As such, we are likely to not only be flawed but may misrepresent certain aspects of our experiences (Sayer, 2000).

3.5 Feminism, standpoint theory, and reflexivity

In conducting my research, I have chosen to adopt a broadly feminist approach, recognising that while the disclosure of concealable stigmatised identities is not inherently a feminist issue, the context of my study centres specifically on women working within organisations addressing violence against women and girls which themselves often have roots in the women's liberation movement (Fox, 2002; Kelly, 2018; Hague, 2021). The unique nature of this population aligns with feminist concerns and perspectives. Firstly, the workplaces targeted in this study are staffed either predominantly or exclusively by women (Simic, 2020; Hague, 2021). Secondly, as discussed in the introduction, sexual and domestic violence is disproportionately perpetrated by men against women and girls (ONS, 2021; ONS, 2022), making it an important issue for feminist study. Thirdly, despite sharing many similarities, the stigma attached to being a victim or survivor of sexual or domestic abuse manifests differently for men and women (Ralston, 2020).

There is no singular strictly defined feminist research methodology or philosophical paradigm which feminist researchers favour (Cook & Fonow, 1985; Wigginton & Lafrance, 2019) so for the purpose of my study, I have considered and incorporated elements from standpoint theory, constructionism, and critical realism. Standpoint theory is popular with feminist research as it emphasises the importance of incorporating marginalised voices, focusing on how social understanding is structured through women's daily lived experiences (Harding, 2012). Alongside this, constructionism underscores the socially constructed nature of concepts such as victim and survivor, stigma, identity, and disclosure, and critical realism provides a lens to explore how the structural and societal factors influence the experiences of women who disclose survivor status in the workplace. This eclectic approach allows for a nuanced examination and analysis of disclosure experiences within a feminist context.

When incorporating standpoint theory, it is important to recognise that knowledge is not produced by isolated individuals, but within a community context, achieved through the process of communities reflecting together on their shared experiences within the structural dimensions of their social, political, and economic environments (Haraway, 2003). It is through this collective self-reflection and dialogue, rather than isolated personal experiences, that a standpoint is formed (Collins, 1990).

It is argued that the standpoints of marginalised communities hold more epistemic authority because they are able to see and understand knowledge from both their marginalised position and from the dominant ideologies and power structures through which they are subjugated (Hesse-Bieber, 2014). This dual perspective provides them with a unique understanding of both their own experiences and the broader institutional and social contexts in which they operate

(Hesse-Bieber, 2014). However, we must be prudent in regard to the ‘serious danger of romanticising’ situated knowledge as they are not exempt from critical reexamination (Haraway, 2003, p29). Standpoints must be contextualised with the recognition that power and agency are not fixed with or between groups (Collins, 1990). Haraway (2003) argues for a form of objectivity that acknowledges its limited location and situatedness, allowing researchers to produce more honest accounts and be answerable for what they learn and how they see.

Applying standpoint theory to my study enables me to hypothesise that survivor-professionals may have a deeper understanding of their own perspective as well as the perspectives of non-survivor colleagues and the dominant groups and structures that their workplaces operate within. Their lived experiences and their engagement with dominant structures afford them a nuanced view (Harding, 2004), potentially making them more attuned to the complexities of disclosure and identity management in professional environments. This theoretical approach, therefore centers the experiences of survivor-professionals and positions their knowledge as critical for challenging dominant narratives.

When it comes to research methods, there is no single method or data collection tool that is distinctly feminist (Herron, 2023). It is how such tools are applied, the purpose they serve, and the ways in which the researcher's epistemological and ontological assumptions guide the analysis that defines what can be classed as feminist research (Hesse-Biber, 2010). Feminist research, therefore, is defined not by its methods alone but by the overarching values and commitments that frame the entire research process. As a feminist researcher, my analysis of the findings will be informed by my own standpoint, experiences, and political lens, stressing the importance of incorporating reflexivity throughout the research process (Olmos-Vega et al., 2022). This involves constant self-awareness and critical examination of my own values, assumptions, and biases as they may influence the research design, data collection, and interpretation of findings. It is not a one-off consideration but a dynamic and iterative process, requiring me to constantly reflect on how my social identity, positionality, and experiences influence my research choices. By acknowledging my own positionality and embracing reflexivity, I aim to enhance the transparency, integrity, and rigour of the research process (Mackieson et al., 2019).

Moreover, reflexivity is critical in understanding the power dynamics that are often present in the researcher-participant relationship. With the potentially sensitive nature of the research topic and the power dynamics often inherent in researcher-participant relationship, Feminist researchers must be particularly aware of the ways in which their position may impact participants and the data collection process (Olmos-Vega et al., 2022). An ethic of care is important to feminist research as it emphasises prioritising empathy, mutual respect, and collaborative approaches to knowledge production (Phillips, 2015; Brannelly & Barnes, 2022).

In this context, the use of qualitative interviews as the primary data collection method aligns with feminist principles, particularly the ethic of care (Cotterill, 1992). Rather than viewing the data collection process as an extraction of knowledge, I am to treat it as a rich, meaningful, and reciprocal interaction that values and honors the lived experiences of the women involved in the research (Herron, 2023). The methods applied in my data collection and ethical considerations around the care of and building of friendships with research participants will be discussed further in the following chapter.

Chapter 4 - Research Design and Methods

4.1 Introduction

The previous chapter explored the relationships between various ontological paradigms and identified which frameworks and theories were most appropriate for my study. This chapter focuses on the research design and data collection and analysis process, and the tools and methods employed. First, I introduce my research questions and discuss finding the space between insider and outsider positionalities. Then I detail the first phase of the research, describing my sampling criteria, the design and testing of my data collection tools, participant recruitment methods, and data analysis methods. I outline Phase 2 of the study, similarly covering the sampling criteria, the design of my interview schedule, lessons from pilot interviews, and my interview approach. I then detail the transcribing, coding, and theme generating process. The chapter ends with a discussion of the ethical considerations of this research and my approaches, particularly in relation to arguments around risk, pseudonymisation, feminist models of interviewing within an ethic of care, and the building of rapport and friendships with participants. Through this chapter, I aim to provide a clear understanding of how the research was conducted and the rationale behind the chosen methods.

My research design involved a two phased approach; the first was a qualitative survey sent out to staff in VAWG organisations and the second was eleven semi-structured interviews with survivor-professionals working in the sector. The survey in Phase 1 (described more below) was designed to help me develop a general overview of the type of views or attitudes that might be present within VAWG services. It was important for me to develop knowledge and understanding of the perspectives of people working in these organisations to more broadly familiarise myself with the workplace culture. This knowledge was then used to explore the lived experiences and perspectives of survivor-professionals in Phase 2.

Morse and Field (1996, p.1) share that ‘Research fills a vital and important role in society’ - It allows us to make sense of reality, describe and explain the social world, and develop explanatory models and theories, all of which advance society by enabling discoveries, confirming or refuting ideas, predicting or controlling events, and refining or advancing knowledge. However, these different goals and functions require different approaches and the contribution of qualitative research is both unique and essential to fulfilling these roles (Morse & Field, 1996). As discussed in the previous chapter, my chosen epistemological approach aligns most naturally with qualitative methods, making them the most appropriate choice for this study. The aim of my research is to explore and draw out the rich, varied beliefs and experiences of participants on an under-researched topic, rather than to standardise or quantify responses. By using qualitative methods, I was able to facilitate a process of meaning-making, where participants could articulate their experiences in their own words, rather than restricting their responses to pre-set categories or scales, as would be the case with quantitative approaches (Barker et al., 2002). This flexibility in data collection is especially important for capturing the complexity and nuance of experiences related to survivor status, a topic that is socially situated and can be deeply personal (Campbell et al., 2010; Dragiewicz et al., 2023). Qualitative research also supports an open-ended inquiry that fosters deeper reflection and allows for unexpected themes to emerge, providing a more comprehensive understanding of the phenomenon under study (Lyons & Coyle, 2007). My epistemological choices, rooted in a feminist framework, were necessary for creating research that is participatory and inclusive and recognises participants' agency and expertise. A qualitative approach allows me to prioritise the authentic voices of VAWG staff and survivor-professionals and avoid imposing predefined constructs on their experiences and is therefore best suited to addressing the specific research questions. These questions are designed to delve deeply into the complexities of survivor-professionals’ experiences with disclosure and are presented again here:

4.2 Research questions

1. How do survivor-professionals working in VAWG organisations manage issues arising from self-disclosure, non-disclosure, or being ‘outed’ amongst their professional peers?

2. What informs the decisions of survivor-professionals to disclose or not disclose their survivor status in their working relationships with other professionals?

3. What are the personal and professional impacts of disclosing or concealing survivor status in workplace relationships?

4. What views do professional colleagues hold about survivor-professionals in VAWG and what sort of working environment does that reflect?

Whilst my first three research questions pertain to survivor-professionals’ experiences, the fourth more broadly sought to gain an understanding of the views held by staff about survivor-professionals both working in VAWG and disclosing survivor status.

4.3 Finding the space between

Throughout this study I have been able to reject the dichotomy of the insider or outsider situated researcher and work more from what Dwyer and Buckle (2019; 2022) refer to as the ‘space between’. As discussed in Chapter 1, by the time it came to undertaking interviews and analysing my data, I felt myself to be more of an insider researcher, however, during the early design phase, particularly around designing the survey questions for Phase 1, my outsider status felt more prominent. It is likely that this is partly due to how Phase 1 was specifically directed at staff working in VAWG, asking for their views around hypothetical situations in a workplace I have never occupied, whereas Phase 2 involved connecting with survivors to discuss the universally human concern of identity management.

I planned for the analysis of Phase 1 to provide me with a frame of reference to design, compare, and analyse the Phase 2 data alongside. This was intended to help me build a rich understanding of the subject from multiple perspectives (Moore, 2000). Additionally, as discussed in the previous chapter, I planned to use a feminist methodology, including an approach to interviewing where I viewed the interview as an equal interactional exchange (Oakley, 2016). The process of this is detailed further below.

Before I began designing my study, I prepared by studying grey literature and websites and looking into the history and origins of the domestic violence and rape crisis movements (Schechter, 1983; Dobash & Dobash, 1992; McMillan, 2007; Hague, 2021). This enabled me to build up an informal, learned understanding of the culture within the VAWG sector and provided more contextual knowledge for my study. Over the course of the study I have built up my personal network of women involved in VAWG service delivery and campaigning. Forming close relationships and working in partnership with VAWG charities through my own work and activism immersed me further within the VAWG sector than when I began. In the beginning, preparing through reading relevant grey literature such as websites, social media, and books about the history of VAWG organising helped to inform the design of my questionnaire and interview questions ready for applying for ethical approval. The removal of the Covid 19 restrictions in the UK in February 2022 (BBC, 2022) coincided with gaining ethical approval for the study (see Appendix 1). From then, I was able to more fully engage in friendships, work, and activism alongside women working in VAWG. This deepened my understanding and belonging, brought me more inside, and allowed me to build greater rapport with interview participants and understand more about their day-to-day experiences at work.

Shared status with research participants can be beneficial for accessing and building common ground with participants but insiders must take care to avoid assumptions of similarity which could cloud the interpretation of the data (Dwyer & Buckle, 2009). Incidentally, the tensions and debates around insider research are reflected in my own research findings when considering managing bias as an insider practitioner (a survivor-professional) which is further explored in Chapters 7 and 8. In her paper on methodological issues for black insider researchers, Serrant-Green (2002) reflects on how professionals working within their own marginalised or minoritised communities have historically been accused of bias, however the same assumption of bias is not made when white professionals work with white populations. Dwyer and Buckle (2009) point out that being an outsider also doesn’t guarantee objectivity or immunity to bias, just as insider status is not essential to accurately understanding and representing participants’ experiences. Even when conducting research as an insider, Dwyer and Buckle (2009) describe experiencing moments of sharing experiences, opinions, and perspectives with their participants, and moments of not sharing them. They acknowledge that as not all populations are homogenous, differences are to be expected and this does not mean the researcher is switching between outsider and insider status.

When the question of whether one is an insider or outsider researcher is not fully resolved, Acker, (2000) says we must find creative ways to be both. The key to managing insider/outsider status is to maintain a close, critical and honest awareness of one's own biases and perspectives, and to be deeply interested in the experiences of one's participants and be committed to accurately representing them (Dwyer & Buckle, 2009).

I shall now describe the methods I used to collect and analyse the data. I begin with Phase 1 by considering my sampling criteria and how I decided upon my sample size. I then describe how I identified which VAWG organisations to target and how I recruited participants to complete the online questionnaire. I then move on to describing the design of the questionnaire including the writing of the fictional vignettes, and reflect on the piloting process. I then describe how I managed the collected data and analysed it to generate four overarching themes each with two or three sub-themes.

4.4 Phase 1

The first phase of the study collected data through an online qualitative questionnaire which was shared with a selection of VAWG organisations across England and Wales.

4.4.1 Sampling criteria

For this study to be possible, it was a requirement that the participants were able to read and write sufficiently in English to complete the questionnaire. The participants also needed to be over 18 years old and capable of giving informed consent. In order to answer research question 4, the questionnaire was targeted at those who currently work in, or had in the past 6 years (since recruitment began in 2022) worked in services or organisations in England and Wales that addressed violence against women and girls. This timeframe was selected because it coincided with the viral #MeToo movement which may have shifted social attitudes around workplace disclosure (Hilstrum, 2018). However, this was only relevant in Phase 1 if gatekeepers of the organisations contacted chose to share the questionnaire to former as well as current staff and colleagues. Three categories of organisations were approached; domestic abuse specific services; sexual violence specific services; and organisations with more general reach but with a large focus on VAWG, for example, organisations such as the charity Victim Support and the multi-diciplinary research and training organisation The Center of expertise on child sexual abuse. These categories are discussed further below. Organisations that addressed sexual or domestic violence against men and/or boys were not excluded providing they also included a focus on violence against women and/or girls. To align with the feminist paradigm scaffolding the study which is by, for, and about women, services and organisations specifically catering only to male victims were not approached. Additionally, sampling of male survivor-professionals for Phase 2 would have likely been challenging as men are less likely to disclose survivor status due to multiple barriers, one of which being the very limited number of services available to male victims (Huntely et al., 2019). Lastly, perpetrator programmes, specific honour based violence services, and services outside of England and Wales were excluded as they fell outside the scope of this study and the reach of ethical approval.

4.4.2 Sample size

Current recommendations for sample sizes in thematic analyses vary significantly, with little consensus on what constitutes an appropriate sample size (Fugard, 2014). Tran et al. (2016) used computational algorithms to investigate the sample size needed to reach data saturation in qualitative surveys. Their findings suggest that, when using convenience sampling, a sample of 150 participants typically results in the creation of 92 themes, after which additional samples become redundant. However, my sampling approach was closer to probability sampling (Tran et al., 2016) through which I developed a stratified sample where each VAWG organisation was divided into sub groups based on shared characteristics and selected randomly to ensure a non biased representation from each subgroup (Acharya et al., 2013).

The organisations I contacted were selected from categorised lists of VAWG organisations based in England and Wales. The categories I created were based around organisation size, location, and speciality of service provisions for example, those catering to women of certain races or religions. This categorisation process is detailed further below. While I aimed to collect data from a diverse range of organisations, the sample turned out to be relatively homogeneous due to strict inclusion criteria. Boddy (2016) argues that when homogeneity among respondents is expected, a small sample size of around 10 participants can be sufficient. Recent guidelines for thematic analysis recommend six to ten participants for interviews in small projects and 10–50 participants for text-based data, such as qualitative questionnaires (Braun & Clarke, 2013). Based on this guidance, I anticipated that for Phase 1, a sample size of 40-50 questionnaire responses would offer diversity in terms of organisational size, age, structure, service provision, and location, while still providing a manageable amount of data for a qualitative study with a relatively homogenous group. This sample size was expected to generate approximately five themes, in line with the recommendations for thematic analysis (Braun & Clarke, 2013).

4.4.3 Identifying the participant organisations and the recruitment process

To identify the services and organisations I planned to distribute my questionnaire to, I referenced online directories from the websites of Women's Aids, Rape Crisis England and Wales, and the Survivors Trust, as well as my own knowledge of organisations that fell outside the scope of these primarily service directories. Map Of Gaps 2007 and 2009 are the only comprehensive reports mapping all VAWG services across the UK, conducted by Coy, Kelly, and Foord (2007, 2009). This report and its update only counts service provision and type and it does not identify each service. According to the Map Of Gaps 2 report (Coy et al., 2009), there were 825 specialist violence against women services across the UK in 2009. This calculation includes perpetrator programmes, SARCs, female genital mutilation [FGM], forced marriage, and honour based violence services as well as services in Scotland which were excluded from my study due to limitations in the reach of the ethical approval. Whilst the Map Of Gaps report is the most up to date and complete record of UK based services currently available (Coy, 2009), Women’s Aid’s online directory (Women’s Aid, 2025) listed 347 VAWG services at the time I was undertaking this phase of the study in the Spring of 2022. However, even when accounting for the services outside of Scotland and those excluded from my study, it is clear that the Women’s Aid directory cannot be considered accurate or up to date. When cross-referenced with the directories from the Survivors Trust and Rape Crisis, it was the most comprehensive list available. I collected all organisations from the available directories into a spreadsheet and separated them into the three categories of primarily domestic abuse focused services, primarily sexual abuse focused services, and a miscellaneous category for organisations that were not service type specific. Several organisations on the lists had no contact email or working website so I removed these as I was unable to contact them. Several others were part of one larger organisation with one contact email covering multiple sites or services so I grouped these together under one. I used the Charity Commission and Companies House registers to identify the number of staff and volunteers in each organisation and selected fifteen organisations of varying sizes, ages, structures, and locations for each category to contact, and I further defined each list based on any additional specialisms to assure diversity. This left me with five sexual abuse specific services, five domestic abuse specific services, and five which didn’t strictly fit into either. An email contact for each organisation was necessary as the questionnaire was hosted on Qualtrics and accessed through a link. Emailing allowed me to forward a link, along with the participant information sheet to gatekeepers who could then agree to forward these to their colleagues. This allowed me to easily reach participants from different types of services and organisations as I was not limited by location or as reliant on ready formed relationships or networks. I anticipated the possibility that 15 organisations might not allow me to reach the desired 40-50 individual participants so I had a second and third list of 15 organisations with the same categories prepared (See appendix 11).

I sent out emails to the gatekeepers of each organisation, asking if they would be happy to distribute the questionnaire to their colleagues. I then separately sent the survey link to those who replied agreeing to help. This allowed me to keep track of how many organisations were actively engaged in sending out the questionnaire. The organisations with gatekeepers who didn’t respond to my first email were not chased up further. Instead, I contacted other organisations from the three categories on the second and third list until I reached my target number of responses. For example, if I did not receive a response from a small domestic violence organisation from the first list, I contacted a small, domestic violence organisation on the second list as the alternative.

4.4.4 Survey Design

The survey incorporated three short vignettes and a series of both Likert scale questions and open questions asking participants to reflect on the scenarios illustrated in the vignettes. The final questions in the survey asked participants to share a little about their job role, their motivation for working in the sector, and what they think organisations can do to support survivor-professionals in the workplace. Open-ended survey questions can enable researchers to gather information on important issues for respondents in the form of qualitative data (Miller & Lambert, 2014). However, a known disadvantage of open-ended survey questions is the higher demand on respondents' attention and time (Dillman, 2007) causing them to have higher rates of nonresponse than questionnaires that require participants to select items, scales, or tick boxes (Millar & Dillman, 2012). Respondents are also less likely to fully answer open-ended questions as they come towards the end of the questionnaire, which can be problematic if researchers require participants to complete at least some qualitative aspects of the questionnaire for their data to be included in the analysis (Miller & Lambert, 2014).

Despite their many advantages, self-administered, fully qualitative surveys remain underutilised as a data collection method. Their use has most commonly featured in studies concerning women’s and lesbian, gay, and bisexual people’s health and identities (Braun et al., 2020). Qualitative surveys and questionnaires offer flexibility and anonymity and allow research participants to use their own language to describe and express subjective experiences and nuanced views as they would do in an interview, producing a rich and deep data set (Braun et al., 2020). Qualitative online surveys have been used to research sensitive topics as the ‘felt-anonymity’ of online surveys facilitates candid disclosures of experiences that are emotionally difficult to share, or opinions that are considered socially taboo (Terry & Braun, 2017). The absence of the researcher or interviewer also reduces the chance of interviewer effect where the participants may alter their answers based on characteristics of the interviewer (Creswell, 2013). The data from qualitative surveys tend to provide rich, complex, and ‘on target’ responses, without the meandering details of an interview transcript (Braun & Clarke, 2013). Participants can take their time, without pressure from the interviewer and can re-read the questions to formulate their answers.

A recognised disadvantage to self-administered qualitative online surveys is that they require the participant to have adequate digital and literacy skills and internet access (Braun et al., 2020) however, this was not anticipated to be a problem with my intended sample of VAWG staff. Another limitation of qualitative surveys may be that the participant is unable to ask questions or clarify, and the researcher is unable to probe for more information (Braun et al., 2020). It was my hope that using a sample size larger than would typically be expected in qualitative interviews or focus groups would compensate for this as the depth and detail of individual responses could not be anticipated in advance (Braun et al., 2020).

4.4.5 Using vignettes as a data collection tool

Fictional vignettes and corresponding questions were written and arranged to elicit opinions and prompt for reflections from VAWG staff. I chose to use vignettes describing fictional scenarios to remove the need for participants to recall real events or situations involving survivor-professionals in the workplace (Kandemir & Budd, 2018). The vignettes keep the focus on the participants' responses to situations involving the fictional people in the scenarios, depersonalising the issue and allowing the participant’s focus to stay on the cognitive task itself (Lowcock et al., 2017). This method of distancing the context of the vignette from the participant intended to improve access to sensitive themes and allow participants more freedom to explore moral dilemmas (de Macedo et al., 2015).

Kademir and Budd (2018) state that the use of vignettes in qualitative research is scarcely reported in methodological literature, though vignettes do appear to be a helpful tool in exploring complex and sensitive topics, particularly relating to subjective perceptions and values. However, a consistent critique of vignettes, particularly when presented in text form, is that they cannot imitate an authentic situation or show the whole picture as they are decontextualized from the real-life situations (Hughes & Huby, 2004). Participants may struggle to make a judgement about the situation illustrated in the vignette due to a lack of explorable context. Whilst it would be possible to give a much more in-depth case study, it would be at the cost of time and attention required by the participant (Abbott & Sapsford, 1993). A benefit of using a qualitative questionnaire is that the participants had the opportunity to select a neutral position on the dummy Likert scale (further described below), then express and explore the nuances when asked to explain the reason for their answer.

Another limitation to vignettes as a research tool is that they are only able to simulate reality (Wilson & While, 1998). In addition, surveys, questionnaires and interviews can only rely on self reporting which tells us not what people do, but what they say they do (Abbot & Sapsford, 1993). Ethnographic observation may be regarded as a more effective data collection method for a study examining workplace cultures, but even observational methods may suffer from the Hawthorne effect, where research subjects alter their behaviour when they are aware they are being observed (Wilts, 2004). Avoiding the Hawthorne effect is one of the main arguments for the use of vignettes in place of observations (Gould, 1996). Furthermore, complications relating to size, scope, and time limitations of the study, and the ethical and legal implications that arise around conducting observations can be avoided by using the vignette’s simulation of realistic events (Wilson & While, 1998).

The use of vignettes in qualitative studies exploring social care issues is on the rise and there are promising methodological advantages to the shift away from positivist paradigms that prioritise the accuracy of the vignettes over the meanings they might elicit (Wilks, 2004). For example, the ambiguity inherent in a non-directional approach allows participants to 'define the situation on their own terms' (Barter & Renold, 2000). Wilks (2004) states that the vignette's limitation in facilitating behaviour predictions becomes inconsequential when taking an interpretivist approach. Instead, we are able to generate complex and reflective data with 'great hermeneutic power', allowing us to understand the thoughts and behaviours of the participants (Jackson et al., 2015).

Vignettes are an appropriate tool for this study because the focus of the research question is not about discovering what participants would actually do in the situations presented, but to explore the participants feelings and perceptions around the topic (Crafter et al., 2014), the meanings they ascribe to the situations, and their rhetorical positions (Wilts, 2004). The vignettes in this study were used to provide entry points for understanding complex scenarios related to the research questions, allowing me to 'selectively stimulate elements of the research topic' (Kandemir & Budd, 2018) that the participants then unpacked and explored through answering further questions.

Although obviously artificial in nature, reflecting on vignettes allows participants to come nearer to the real situation than generalised questions about their thoughts on survivor-professional use of self disclosure in the workplace (Abbott & Sapsford, 1993). Additionally, the use of hypothetical examples gave me the opportunity to present a scenario twice with minor details changed to see if the changes elicited different answers from participants (Abbott & Sapsford, 1993). I was also able to ask the participant to insert themselves into the scenario and describe how they would act as an observer.

4.4.6 Writing the vignettes

Drawing on personal experiences to develop vignettes is a method supported by the literature (Flaskerud, 1979; Giovannoni & Becerra, 1979, cited in Wilson et al., 1998). I developed the vignettes based on my professional experiences and observations whilst working in activism based projects in the VAWG sector. I drew on anecdotal experiences shared with me by friends and colleagues, and via social media by a wider network of professionals and practitioners working in mental health or the VAWG sector. I drafted six vignettes of approximately the same length and selected the three strongest vignettes that offered the most variety between them in the situations that they described. The language was edited to clear up any ambiguity and remove any terms or acronyms which might not be understood by all participants.

Likert scale questions asking participants to rate the acceptability, professionalism, or reasonableness of the actions of various characters within the fictional vignettes were placed before the text boxes asking participants to explain the reasoning for their answers. This was designed to help participants organise their thoughts by first asking for a simple assessment, before offering participants the space to explore nuances. Additional information or changes to the scenarios were then presented with further prompts for responses. The Likert scale questions are there only as a tool to help participants marshal their thoughts before explaining their reasoning and will be incorporated into the qualitative analysis of the textual answers given. This allows for the questions to be both clear, specific, and not overwhelming with details. Breaking the questions down by using the Likert scale questions and asking for participants to explain their reasoning also reduces the chance of the wording of open questions being leading since participants will be responding to their own answer given on the Likert scale. Researchers have voiced concerns over the sequence of data collection influencing participants' responses in mixed methods surveys (Creswell & Piano Clark, 2007), however Covell et al.'s (2012) study suggests that the sequence of closed and open-ended questions does not greatly affect results when collected in the same data collection session. Using dummy Likert scales for this purpose was experimental and reflections on its success will be discussed further in the concluding chapter of this thesis.

A message at the end of the questionnaire informed participants about Phase 2 of the study and invited those who fit the Phase 2 criteria to express an interest in participating by sending me an email. This resulted in the recruitment of one participant for Phase 2, discussed below.

4.4.7 Piloting the survey

The survey was piloted to screen for any potential problems before large scale distribution (van Teijlingen & Hundley, 2002). I contacted four women from my personal network, unconnected to the study, who have each worked various job roles within the VAWG sector. They completed the survey in their own time and we discussed how they found the survey, how long it took them, and if they had any problems or comments once they had completed it.

The pilot assessed their understanding of the survey language and phrasing to ensure all questions were understood. The pilot participants confirmed that the vignettes appeared credible and were easy to understand and follow. The pilot survey also provided an indication as to how long the survey will take to complete. The participants timed themselves completing the survey and the average time was 15 minutes, with a range of 10-20 minutes. Each participant responded to the questions with similar levels of detail. They reported that the order of the questions felt comfortable and appropriate. Fabbris et al. (2016) suggest there is a benefit to warming up participants with soft questions before asking more challenging or direct questions, however when asked if this would improve the survey taking experience, my pilot participants expressed that these were not necessary. They also all reported that the participant information sheet and consent form were easy to understand.

4.4.8 Data Analysis

In total, 50 people responded to the survey but nine of those cases contained no qualitative data with only the first couple of Likert scale questions completed, and other cases left blank. This is indicative of a limitation to this method. It may be that the inclusion of the dummy Likert scale questions gave some participants the impression an apparent quantitative element of the survey was more important than the boxes asking for the explanations of their reasoning. A more comprehensive evaluation of this experimental method will be discussed in detail in the concluding chapter. The survey responses were downloaded into an Excel spreadsheet and fields from participants who had not given any qualitative data were removed, leaving 41 cases. I imported the Excel spreadsheet with the remaining usable cases into NVivo, saving the files in my Man Met, password protected, Microsoft OneDrive account.

I applied Braun and Clarke's (2021) reflexive thematic analysis (TA) to identify patterns of meaning across the Phase 1 data. This analysis is an ideal method for an early career researcher as it can be applied to a variety of theoretical perspectives whilst offering a clear and usable framework to develop key skills (Maguire & Delahunt, 2017). Thematic analysis is a considerably flexible method, supporting both inductive and deductive approaches (Braun & Clarke, 2021). It allows researchers to interpret and make sense of themes generated across dataset as they evolve (Heyes, 1997) proving useful as I began the process of coding and considering potential themes from my data before all findings had been collected.

4.4.9 The process of generating codes and themes

The six phase thematic analysis process (Braun & Clarke, 2006) was used as a framework. These are:

- Familiarising myself with the data
- Coding the data
- Generating themes
- Reviewing the themes
- Defining and naming the themes
- Producing the report

I initially allowed myself some flexibility in this whilst I was learning how to work with research data and the Qualtrics program for the first time. In the beginning, I didn't know what process would work best for me so I began experimenting with a small data set to familiarise and test myself. I embraced it as a very back and forth process, aware that though I was creating codes that I would later categorise into themes, by the time I reach the stage of theme generation and analysis, I may want to reorganise some of my codes (Braun & Clarke, 2021).

I started practising coding my data when I had collected ten survey responses. At first, I took quite a semantic approach (Braun & Clarke, 2020) and coded many of the extracts as descriptive summaries of what the participants had written. The semantic approach highlighted patterns that were already being generated in the small data set, but they were surface level and provided limited scope for wider conceptualisations or connotations in my analysis (Javadi & Zarea, 2016). I began to generate more latent codes with further attempts as more survey responses came in. Having familiarised myself with the data through these practice attempts, recognising the patterns of meaning became easier as I had already noted down my early impressions (Maguire & Delahunt, 2017).

As this first phase of my research aimed to explore the views and attitudes of professionals in the sector, I took an inductive approach (Clarke & Braun, 2017). However, having already explored the literature, it is unavoidable that I had ideas about what I might find and these were more obvious to me when I came across them (Fereday & Muir-Cochrane, 2006). I expected comments around the risk of bias and projection or the problem of survivor-professionals being triggered at work to come up for example, and they did. Conversely, there were also codes and themes that I expected to be able to generate, that I did not find support for in the data.

When I started freshly coding the almost complete data set, I started from the bottom of the table of data rather than the top. This technique is advised by Braun and Clarke (2021). Though I wasn’t working with the previous code set, I wanted to free myself from trying to squeeze what I was reading into my pre-existing idea of what codes would work. Once content with my refined codes, I experimented with organising each code into theme sets, trialling different combinations until I felt satisfied that the salient meanings generated from the data were represented and didn’t cross over into each other. I finished by reviewing the names of my four themes and seven sub themes and checking that the codes and data extracts still fitted in with the themes I had collected them under and the meaning had not become changed or lost during the process. With this task complete, I was ready to move on to the next phase of data collection.

4.5 Phase 2

Phase 2 of the study involved undertaking 11 qualitative, semi-structured interviews with women who have worked in sexual or domestic abuse organisations and who themselves have experienced sexual or domestic abuse. I took a phronetic iterative approach with this study, applying both deductive and inductive reasoning (Kekeya, 2016). Some of the Phase 2 interview questions were informed by the findings from Phase 1 which I continued to analyse whilst I recruited participants.

4.5.1 The participant sample and inclusion criteria

The inclusion criteria for Phase 2 required that participants had worked in VAWG post 2016, with the addition that they had experienced sexual or domestic abuse themselves. It was not a requirement that they had disclosed their experiences of abuse in the workplace, which itself formed part of the enquiry.

Qualitative studies can reach saturation with relatively small sample sizes (Hennink & Kaiser 2022) therefore, a sample size of between 10-15 was chosen. This enabled me to devote more attention to the individual experiences and perspectives of each participant. This approach aligns with recommendations by Braun and Clarke (2013) and the qualitative research tradition, where the emphasis is often on the depth of understanding and the exploration of complex, context-specific phenomena rather than the generalizability of findings to a larger population (Crouch & McKenzie, 2006).

Alongside attempting to recruit through the Phase 1 questionnaire participants, I used a combination of convenience, and snowball sampling methods to recruit survivor-professional participants for interview. Convenience sampling was a natural approach to start with as I already had direct access to groups of women with work experience in VAWG within my personal networks (Emerson, 2015). After which, snowball sampling was ideal for reaching further populations of survivor-professionals who may otherwise be hard to access due to the topic of the study being sensitive or their being low numbers of the population amongst the general public (Browne, 2005). This process began with my posting a recruitment poster to my personal Facebook page (see Appendix 8) and requesting that friends, several of whom work in the VAWG sector, copied the poster and shared it amongst their own networks. I also shared the poster on the Twitter and Instagram pages of the VAWG related social enterprise I ran at the time, and emailed contacts within my professional network who I believed would be happy to share it and who had a wide reach of potential participants. Lastly, I accepted an offer for the recruitment poster to be shared by the Violence Against Women and Girls Research Network (VAWGRN) who placed it in their newsletter.

Volunteer participants contacted me through my student email account expressing interest. I sent each of them the participant information sheet and consent form, and we arranged a date and time to meet on MS Teams for the interview. Recruitment was swift with 11 participants recruited within 80 days, however during this time I received three expressions of interest from women who did not respond to my follow up email in which I shared the participant information sheet, consent form, and suggested dates and times. I also arranged an interview with one participant who had sent back her signed consent form but who did not turn up for the interview and did not respond to a follow up email.

4.5.2 Interview design methods

Before recruitment began, the interview schedule was drawn up as a list of topics for which ethical approval was sought (see Appendix 9). The opening questions allowed me to build up a context and determine what follow up questions would be needed and what language each participant was comfortable with (e.g., survivor/victim, lived experience, professional/practitioner). Some sections of the schedule were only relevant to participants with experience of disclosure so it was important to identify this early on in the interview.

However, I found that most participants had experience of disclosing in some workplaces but not others so both sets of questions were relevant most of the time.

The data from Phase 1 provided me with topics I wished to explore with my Phase 2 participants. I rewrote my interview schedule as a script and included examples of themes that were generated from Phase 1 which I planned to gather my Phase 2 participants' thoughts and reflections on. The script was intended as a guide only, to support me in phrasing my questions.

4.5.3 Learning from the pilot interviews

I undertook two pilot interviews with volunteers from my personal network. This was to assess the comprehensibility of the questions, gather feedback, and provide me with the opportunity to practise interviewing. These took place over MS Teams. The volunteers were provided with the participant information sheet and consent form to prepare them. We informally discussed the interview process and the phrasing of the questions and prompts both after the interview and occasionally between each question.

One challenge that was highlighted by one of the pilot interviews was keeping the topic focused on decisions around disclosing to colleagues rather than clients or service users. I occasionally needed to ask a pilot participant some of the questions twice, emphasising that I was interested to hear about her interactions and relationships with colleagues. However, the more I listened to my participants' answers, the more I came to realise that her experiences with decisions around self disclosure to clients was explicitly linked to her experiences with disclosures to colleagues and she was comparing the two in order to answer my questions. This helped me to see the benefit of allowing the participant to go seemingly off-track whilst they were processing the question and formulating their answer. We were able to get back on to the topic of decisions around disclosure to colleagues once she had explored her decisions around disclosure to clients and my data from the pilot interview was much richer for it.

4.5.4 The interviews

The interviews took place over MS Teams between August and November 2022. They were recorded through MS Teams and automatically saved directly onto my student OneDrive account. Most of the interviews lasted between 50 and 80 minutes, but two interviews were split between two dates due to the participants running out of time but us having not reached the end of the questions. Whilst I was aware that the interviews were running longer than the pilots had, I informed the participants about how many more questions I had to ask them and we were both happy to take our time or arrange a second date to complete the interview.

My interviewing approach was to be sensitive, reflexive, and relational (Hesse-Biber, 2014). My technique was informed by feminist methodologies and principles, paying attention to issues around friendship, vulnerability, and power (Cotterill, 1992). I leant on Ann Oakley's (1981) feminist paradigm for interviewing which challenges the use of an androcentric 'masculinist mechanistic' (Oakley, 2016) model of interviewing as purely a tool for data collection, where the social interaction necessary to access the data and generate the 'facts' is an inconvenient obstacle which must be overcome. Oakley's (2016) paradigm seeks to view the interview as a more equal interactional exchange. This is achieved by the researcher answering questions from interviewees and incorporating elements of a 'transition to friendship' (Oakley, 2016). Oakley (2016) bases this transitional friendship or 'sisterhood' on shared experiences of gender subordination. This may be concentrated even further by a shared experience of surviving gender based violence. Cotterill (1992) takes a critical view on Oakley's 'sisterhood', stating that not all women will relate to a shared experience of gender subordination or want the interaction to present as a transitional friendship which I maintained an awareness of as I undertook each interview.

Whilst all my interview participants were professionally employed women currently working in VAWG or related sectors, survivors of sexual and/or domestic abuse, and I presume shared an interest in my research topic, there were perceivable differences in our ages and professional experiences and rapport was not instantaneous with every participant (Thwaites, 2017). With some participants, I felt like I was talking with a friend I had known for years, others, I felt like I was talking to women who I revered for their work in the VAWG sector, research, or activism which made me hyper-aware of my own inexperience in interviewing, and of my gratitude for the favour my participants were doing for me.

I was aware that the participants might choose to share about their abuse experiences with me, or that their experiences of disclosure at work had the potential to be emotionally distressing for them to recount. I allowed the interviews to go slightly off topic when I felt that the participants were benefiting from sharing their stories with me as my pilot interviews had shown me that the interviewee may need to process and express their thoughts and memories on a related topic in order to work out their answer to my interview questions. Whilst some participants shared more personal stories and anecdotes and focused on emotions, others spoke more broadly about their theories and observations around my research topic, often highlighting the larger structural context of their working lives such as conflicts around the professionalisation of the sector and feminist approaches to understanding and working with trauma.

The interviews were scheduled to last approximately an hour, however, the structure remained loose and I allowed the interview duration to be led partly by the participants and found that through each conversation, I was gaining much more than data relating to my research questions. Two of my participants were undertaking or had recently completed research projects of their own so our conversation drifted into discussions around academic expectations and feminist research, as well as touching on current political and ethical debates relevant to work and research in VAWG.

Undertaking the interviews over MS Teams posed a slight challenge as the audio delay and difficulty with reading body language through the screen made us miss each other's subtle non-verbal cues which slightly stilted the conversation at times (Wakelin et al., 2024). Also, the fact that I was able to relate quite deeply to some of my participants created a challenge as we would often find ourselves cracking jokes or caught in a back and forth of "You know? I know, Right? You know? Yeah, totally, You get it, I know!" and accompanying gestures and expressions, confirming understanding of shared experiences which I then had no clear textual reference for to convey in the transcription.

4.5.5 Transcribing

After each interview, I downloaded the transcriptions MS Teams had automatically generated which on inspection were 'good enough' and saved considerable time (Bokhove & Downey, 2018). I uploaded them into Word documents and went through each transcript alongside listening to the recordings to correct any mistakes and remove any identifying comments to ensure the participants' anonymity. I transcribed each interview within two days of doing them so that my initial reflections could be captured and noted in my reflective journal. Though the transcripts had been automatically generated, reviewing, extensive correcting, and formatting of them was a laborious but significant period of engagement with my data (Cibils, 2019). I randomly assigned the name of a greek letter to each participant in place of their name as I knew this would cause less confusion for me than assigning traditional women's names as pseudonyms. Ethical considerations around pseudonymisation of participants is discussed below.

4.5.6 Data analysis

The transcribing process became my first read through of the data which familiarised me with it (Point & Baruch, 2023). As I was iteratively conducting and transcribing interviews, at the point where I began to feel myself generating initial ideas for themes, I printed off four of the transcripts and continued to familiarise myself with them, highlighting salient points, making analytical notes in the margins, and noting down potential codes and themes and other thoughts or ideas that occurred to me (Braun & Clarke, 2021). Once I felt like I had a solid understanding of the content of each interview and had transcribed all 11, I uploaded each of the transcripts into NVivo and set about coding them digitally. I initially ended up with 185 codes. As with Phase 1, I reviewed each code, merging duplicates and similar code groups, and I then began the process of grouping the remaining codes into themes (Braun & Clarke, 2021). I reviewed these themes to ensure all the selected data extracts made sense within them, then defined and named them accordingly (Braun & Clarke, 2021). With the final themes established and refined, this concludes the process of Phase 2 of the research.

4.5.7 Generating meaning through interviews

In order to co-create meaning with participants, Hesse-biber (2014) asserts that participants will have their own agenda which the feminist researcher should be ready to work with by being able to drop their own agenda to follow the pace of the interview. I found this to be true and necessary with my participants as we worked together to create meaning. Hesse-biber (2014) advises that feminist researchers have to be mindful of who has the power and authority to make meaning when interviewing. She describes a first-level of meaning making which consists of the words participants say and how they put together their story, and a second-level of meaning which the interviewer reads into the interview, filtered through their own personal biography, expertise, and prior knowledge (Hesse-biber, 2014). To avoid the tensions between the participants' own words and the researcher speaking for them, it is important that meaning is made in conversation between the researcher and participant as it is through this dialogue that new ways of understanding may arise (Hesse-Biber, 2014). With many of the participants, we reached an analytical depth together during the interview as I offered elements of my own knowledge and experiences in discussion which prompted participants to share more of their own theories, analysis and understanding, beyond their personal disclosure experiences. With most participants, I perceived a sense of trust and shared understanding during their interviews as I was familiar with their world of VAWG and many of them were familiar with my world of academic research. Our common ground and in some cases, friendship, allowed us to understand each other and communicate fluidly. This was beneficial in many ways but it also posed challenges for data collection. We often appeared to both instinctively know what the other was referring to, particularly regarding complex emotional experiences and social frustration. However, as mentioned, these experiences were challenging to articulate in detail and we would exchange repeated exclamations of "you know?" and "I know!" as we empathised with each other. This mutual understanding, while powerful in the moment, led to gaps in verbalised explanations, resulting in fewer detailed quotes that could be directly coded or provided in quotes below. DeVault (2014) draws upon the early feminist insight that language reflects male experiences which when used to express women's lives, creates a linguistic incongruence, particularly as experiences are articulated through tone, gesture and other unspoken forms of expression. The process of narrating experiences, or 'storying', is also context-dependent, with some stories being easier to tell or more readily heard by others. DeVault (2014) suggests that, as researchers, we shift from the informal, empathetic 'woman talk' where gestures of solidarity and shared understanding are common, to the formal realm of sociology, leaving the unspoken behind. In some sense, this is a betrayal of the participant as we accept their stories and make them feel heard, but then do not include what we hear, beyond that which is explicitly verbalised, in what we write (DeVault, 2014). Throughout the interview and analysis process, I have been mindful of these risks and sought to hold on to my initial interpretation of their stories from the interview as I analysed my transcripts. This was important as I intended to approach all my research, not just the data collection, from an ethic of care perspective (Cotterill, 1992), reflecting on the influence of emotion on the generation and interpretation of the data, therefore producing 'emotionally sensed knowledge' (Evans et al., 2017).

As for my participants, they appeared to me to be highly self-aware, reflective, analytical, and knowledgeable. The issue of disclosure was clearly a topic they had thought deeply about before learning about my project. In most forms of qualitative research, the early stage of the analysis process, in this case, theme generation, is unseen by others as it is conducted offstage so quotes from participants are often provided to corroborate the researcher's interpretation of the findings (Taylor, 2012). Though a rigorous analysis incorporating data from all interview participants has taken place to generate the themes, the quotes from interviews displayed later in chapters 8 and 9 were selected to illustrate the experiences of the participants in their own words. As the interviews varied in length, with some participants splitting their interviews into two sessions, some diverting from the topic more, or some offering more details than others, some participants provided more data for me to work with, so these names may appear more than others throughout the following chapters. Some of the quotes used have been slightly edited to remove repeated and filler words and phrases such as 'you know' and 'like'. This is a common practice and has been done to improve readability (Corden & Sainsbury, 2006). However, when these words felt significant to the sense of emotion within the quote, I have retained them. For example, some participants appeared to me to struggle to articulate experiences that were complicated and abstract such as feelings of shame. In these instances, each 'you know?' felt more like a plea for empathy and recognition of shared understanding, rather than a filler word.

4.6 Ethical Considerations

Ethical research design is a core element of feminist methodologies and epistemologies (Dragiewicz et al., 2023). Stanley & Wise (2002) argue that feminist social sciences must recognise the ethical and political implications of their practices. Researchers must consider the broader social and political contexts that shape survivors' lives and experiences of disclosure to ensure ethical research (Stanley & Wise, 2002). Mortimer et al. (2023) advocate for ethical considerations in research to extend beyond conventional risk management and medicalised trauma frameworks which are often standardised by university research ethics committees (Mortimer et al., 2023). Ethical approval for this research was granted by the Manchester Metropolitan University faculty of Health and Education Research Ethics and Governance committee on 22nd of March 2022, with the EthOS reference number: 35798 (See Appendix 1). It was not anticipated that this study would involve populations considered to be vulnerable, however, the subject of sexual or intimate partner/domestic abuse or workplace discrimination are sensitive topics and university research ethics committees frequently presume survivors may become distressed by taking part in research about violence and abuse (Dragiewicz et al., 2023). However, Dragiewicz et al. (2023) argue that this is not based on evidence. Burgess-Proctor (2015) emphasises the need for feminist researchers to recast our work and relationships with participants from one of protection to one of empowerment, especially in light of how VAWG research participants report finding the interview process as a beneficial, sometimes therapeutic (Birch & Miller, 2000) or insightful opportunity Campbell et al., 2010) and their involvement is often driven by a desire to share their experiences to help other women (Burgess-Proctor, 2015). All participants in my study had work experience in services or organisations that address sexual or domestic abuse so they were familiar with the topics covered and therefore I thought it likely that they would be comfortable and safe completing the survey without myself as the researcher present. Caution still needed to be taken as the content and questions in the survey asked participants to consider incidents of stigma around sexual and domestic violence and workplace discrimination but the survey did not ask questions about the participants' personal experiences. Support services were listed in the participant information sheet and as an end card once participants submitted their survey responses. The necessary inclusion of this signposting to support services is reflected on further in Chapter 11, article 11.6.

Participants and the gatekeepers of each contacted organisation were fully informed of the nature of the survey through clear communication and access to a PDF version of the questionnaire to read over (see Appendix 10). They were also given the Participant Information Sheet (see Appendix 4) and were encouraged to email me with any questions which ensured that they could make an informed decision on whether to take part or not. A completed consent form was required (See Appendix 5) and there were no incentives offered to take part.

4.6.1 Anonymity of participants

Anonymity and confidentiality were an important research concern, particularly for the interview participants as I asked them about their experiences working in organisations they might still be part of. Participants could be concerned about possible risks to their employment if they shared information that reflected badly on themselves or the organisation and it was traced back to them. I also recruited interview participants through snowball sampling (Browne, 2005), starting within my own personal and professional networks. This meant a portion of the interview participants were friends or associates, or friends of associates, blurring the boundaries around what I might know about them personally, and what they might choose to share with me as a researcher. Whilst I can pseudonymise my participants' data, confidentiality through anonymity cannot be guaranteed. The results of this study will likely be distributed back into the same pool of people who participated, meaning it is possible participants could be identified by friends or colleagues through the experiences they shared with me. I ensured that participants were aware of this risk by discussing it with them before beginning the interviews and I gave them three months to withdraw their data from the study if they changed their mind about their participation or felt that during the interview, they had shared information that made them uncomfortable or could put them at risk if they were to be identified.

Though it is standard practice to anonymise data, it has been increasingly recognised that some research participants want to be named (Perry, 2007; Svalastog & Eriksson, 2010). As my study focuses on the impact of breaking confidentiality around stigmatised experiences, I had concerns that deciding for my participants that they were going to be nameless took that choice away from them and could be felt as disempowering. Offering participants the option of claiming the data as theirs and being named as contributors could be regarded as a more ethical option than the traditional practice of blanket anonymisation and pseudonymisation (Godfrey-Faussett, 2022). However, ethical approval needed to be gained before I could meet with and discuss such preferences with my research participants, meaning the decision to pseudonymise all participants had to be taken without consultation. Additionally, when working with such small samples from well connected networks, having some participants use their real names and others not could lead to those who wished to be anonymised being more easily identified (Wiles, 2013), so there are arguments in favour of this.

4.6.2 The ethics of interviewing friends and befriending interviewees

Two of my interview participants were women from my own network; One was a former colleague I had worked with on one occasion, the other was a friend from both feminist activism and the survivor community. I asked for their support distributing my research poster and as I knew they were both survivors working in VAWG, I informed them that they would be welcome to volunteer themselves. I did not want to ask directly in case they felt pressure to say yes, however, I was confident that both women would only volunteer if they truly wanted to. The friend already knew a fair amount about my research as I had shared my thoughts and reflections with her. I had also shared some of the findings from Phase 1 and my interpretations and analysis before she volunteered to be interviewed. Even before I began this research project, we had many deep and personal conversations, including around concealing and disclosing survivor status. Our discussions had always been of a very analytical nature and they probably had some influence on the development of my research questions. We had also previously discussed surrounding topics which later came up in interviews with both herself and other participants.

Whilst interviewing friends brings the benefit of deepened insight, it also brings the risk of a myopic overfamiliarity (Taylor, 2011). Therefore, I was conscious about how my *ex-ante* knowledge could affect both how I conducted the interview and my interpretation of the data. With both participants from my direct network, I prefaced my interview with a request along the lines of 'anything relevant that we've talked about before, can you act like we haven't talked about it and say it again so I can get it for the transcript?' I was conscious that with my insider status being known, especially with friends, participants might skip over details about things we had previously discussed or things that they assumed I would know by default as we shared similar experiences (Acker, 2000).

Platt (1981) writes of the interview process with friends as a role play in which both parties consciously switch out of their usual way of interacting with each other and adopt the act of researcher and participant. I felt this slight sense of entering into a roleplay with all my research participants at the start of each interview, not just with the participants I already knew, but this feeling quickly dissipated once we got into the flow of the conversation. As my method and style of interviewing was relaxed, honest, and guided by Oakley's (1981) feminist interviewing principles of familiarity and friendship, it did not feel so different to my usual every-day interactions, only I had the task of keeping us on topic and of keeping the conversation based on the participants' experiences rather than my own. With my friend, we both enjoy researching, discussing, and reflecting on VAWG and survivorhood related topics and were used to asking each other probing questions, as is the nature of our relationship. Platt (1981) considers the impact of relationships with friends and colleagues after an interview and questions whether interviewing friends creates a greater level of intimacy between researcher and respondent but in my experience the interview felt very similar to our typical conversations and boundaries of intimacy were not pushed particularly further from my perspective.

Along with interviewing the two women already in my network, I experienced such strong rapport with one of my research participants (a fellow postgraduate researcher) that I reached out again after the interview with an offer of continued friendship. Whilst there is a lot of literature available about researching between friends and within already established peer groups (Garton & Copland, 2010; Blichfeldt & Heldbjerg, 2011; Yuan, 2014; Roiha & Iikkanen, 2022), much of the literature about forming new friendships with research participants is in the context of prolonged ethnographic field work (Glesne, 1989; Ellis, 2007; Hall, 2009; Taylor, 2011; Owton & Allen-Collinson, 2014) and active participation (Beech et al., 2009). Reaching out to past one-off interview participants with invitations of friendship does not appear to be widely written about.

Researchers are cautioned against over building rapport with participants or ‘going native’ (Glesne, 2016) and feminist scholars warn against encouraging disingenuous friendships for the purpose of gaining intimate details from participants (Gorelick, 1991; Cotterill, 1992; Duncombe & Jessop 2002). Whilst it is obviously unethical to falsify friendship to exploit participants for data, feminist research also has a duty to improve the lives of women, not simply describe their realities without causing harm (Kirsch, 2005). Increased collaboration, greater interaction, and more open communication are all methodological changes feminist research seeks to achieve (Oakley, 1981; Kirsch, 2005) and I believe in this case the forming of friendships as a result of connecting through the research process has had a positive affect on both myself as a researcher and my befriended participant.

When interviewing friends or forming friendships with participants, confidentiality was a strong concern for me because the practical anonymity of the usual transient research relationship was not present in such cases (Platt, 1981). Before introducing the friend I made post-interview to my wider friendship group of fellow post-graduate researchers, I preempted that people would ask how we met. I sought her advice on what she would like me to tell people if the question came up and she happily gave me permission to be truthful. However, when I was then asked the question from others, I still felt as if I was going against the rules of research ethics and being unprofessional by sharing that this new friend had been a research participant. Platt (1981) describes researcher professionalism as a role in which the interviewer is concerned with managing impressions of ethical practice more than doing ethical acts (see also Johnson, 1975). Whilst I trusted that I was not risking or causing harm by sharing the fact that the friend participated in my research, I did not want to give the impression that I was treating my participants' confidentially without care or that I was going against presumed ethical guidelines (Platt, 1981). Finding a balance between authentic feminist interviewing and adhering to the typical ethical expectations for a researcher has required caution and reflexivity. Platt (1981) considers that there may be a danger in showing excessive ethical sensitivity and inflexible standards that treat behaviours found in everyday interactions as unacceptable in sociological research. This felt highly apparent to me when I had to follow standards such as the default signposting of participants (who were all professionals in VAWG) to support services they would have certainly been aware of and may have even worked for. This felt exceptionally ironic as many participants spoke about disliking being patronised, treated with caution, and viewed as vulnerable because of their survivor status. I then had to follow the ethical guidelines that further patronised them. Neal and Gordon (2001) propose that for feminist research and fieldwork amongst friends, institutional ethics reviews are not the best way to safeguard against potential consequences of the research. Instead, they recommended continuous articulation around potential ethical dilemmas, and practising reflexivity to ensure we are conducting legitimate, non-exploitative research.

In this chapter, I have outlined and justified the practical approaches taken to conduct this research. I have provided a detailed account of the design process for the data collection tools, as well as my approaches to sampling and interviewing research participants. Additionally, I have explained the steps involved in transcribing the interviews and the methods used to analyse the data from both phases of the study. I have also addressed the ethical considerations relevant to feminist research, particularly how I navigated the challenges posed by friendships between researcher and participant, and managed the complexities of holding an ambiguous insider-outsider researcher position. The next chapter will introduce and explore the use of comics, illustrations, and allegory as a method in research, detailing my rationale and process of creating the arts-based contributions to this thesis. The subsequent three chapters will present my illustrated findings followed by an academic discussion.

Chapter 5 - Illustrations and Stories as Method

5.1 Introduction

This chapter explores the potential of creative outputs in research analysis and dissemination. I begin by exploring the advantages of using visuals and graphic narratives to communicate research findings, emphasising their potential to engage audiences and convey meanings that might transcend the limitations of written text. I examine comics and picture books as sophisticated, multimodal forms of literature that require readers to possess a competency in interpreting visual languages (Nodelman, 1988). Additionally, I suggest that visuals can transform the consumption of research into a more immersive, felt experience (Hatfield, 2009), offering examples from both mainstream graphic novels and illustrated academic works. I then detail the choices I made in designing my own 'commix' (Spiegelman, 1996) to present the findings from Phase 1 of my research (see chapter 6). Following this, I consider the epistemological significance of allegory and metaphor, particularly in relation to the fairytale I developed from the findings from Phase 2 of the research (see chapter 10). Finally, I discuss how illustration and creative writing have contributed to and supported my data analysis process.

5.2 Comics in research

In order to break from the notion that comics need to be funny, influential comic creator Art Spiegelman (1996) coined the term 'commix[1]' to refer to the medium, in reference to the co-mixing of words and pictures to tell a story. These commix are increasingly being recognised

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[1] Not to be confused with 'comix' – the name given to underground publications coming out of the American counterculture movement in response to the restrictive comics code. Comix often depicted explicit content and themes such as sex, drugs, war, and anti-government sentiments (Sabin 2006).

as an accepted format for dissemination of academic work (Mulvihill & Swaminathan, 2020). Visual arts based methods such as illustrations and graphic narratives have been used across academic disciplines in multiple stages of research. For example, Khanolainen & Semenova, (2020) used graphic vignettes to aid in their data collection; Rainford (2021) used single panel illustrations as a focus for wider group discussions and to triangulate emergent research findings; Emmerson (2016) and Darnhofer (2018) used comic style posters for participant engagement and for the promotion of researcher reflexivity; Jellema (2022) used drawings in the margins on field and interview notes and transcriptions as an analytical tool; and many others have used comics to disseminate research findings across languages, cultures, and abilities (Abd el-Gawad & Stevenson, 2021; Sou, 2023).

An often cited benefit of comics in research dissemination is their supposed accessibility for non-academic audiences (Han, 2008; Kuttner et al., 2021). This is in contrast to academic research papers and journal articles which have been criticised for using complex language and obscure prose (Bradley, 2017). Carruthers Thomas (2024) writes that since academics work in a neoliberal, metrics-driven environment, certain types of publications, particularly predominantly text-based, peer-reviewed journals, are essential for career advancement. At the same time, we also place significant value on dissemination and the impact of research beyond the academic article. Disseminating research in print and digital comic format is recognised as an accessible and appealing way for the public and research participants to engage with research outputs (Mannay, 2016) as they are quick to read and easily shared online, particularly across social media platforms (Shaw, 2019). Creative research outputs have more to offer than their accessibility or initial attractiveness to readers (Manney, 2019). I believe that much more can be gained from the medium when we utilise the communicative elements of illustration and design to add deeper meaning and clarity to research outputs, or indeed research production.

Nodelman (1988) asserts that the interplay between the drawn and written aspects of a comic or picture book can convey more narrative information and stimulation for the reader than stand alone text or images. Therefore, illustrations can do more than simply adorn or compliment the written word, they are a medium for meaning making that can be of equal value (Nodelman, 1988). Spiegelman (1996) explains that the combination of art and the written word creates a ‘mental language’ closer to human thought than can be achieved by reading purely graphical or textual data alone, thus creating a triangulation of meaning in the reading process. A reader of comics or commix is required to use both visual and verbal interpretive skills, thus engaging in an ‘act of both aesthetic perception and intellectual pursuit’ (Eisner, 1985, p. 2). In a story told only in words, every action described is of equal significance but the addition of illustrations does more than punctuate the text (Nodelman, 1988). The illustrator can give additional details or highlight particular salient points by reinforcing them through their choice of images, contributing to the reader's understanding and manipulating the emotional effect (Hodnett, 1982).

In the context of incorporating commix into a doctoral thesis, Nick Sousanis (2015) created his seminal thesis-as-comic ‘Unflattening’ for his dissertation at Columbia University, demonstrating how sequential art which combines illustration with words can be a viable scholarly alternative to the purely written thesis (Finch, 2015). Sousanis (2015) explores how images are an equal component in thinking and should not be regarded as subordinate to words. Another example of comics-as-thesis is Tatiana Tavares’ (2011) ‘Carnival Land: A performance in metaphors’. This is a fictionalised autoethnographic work exploring identity and bilingualism through metaphor, produced for Tavares’ masters thesis in art and graphic design at Auckland University of Technology. Like Sousanis, Tavares uses visual metaphors and narratives alongside complex and evocative illustrations to communicate concepts such as sense and emotion within her research. In doing so, Sousanis’ and Tavares’ work challenges conventional western epistemologies which favour words over images in the production of knowledge (Finch, 2015).

Though the medium of comics is often disregarded as being of little literary or intellectual value (Pratt, 2009), comics are a multimodal form of literature and have the potential to be vastly complex in content and design. They can require greater knowledge and skills to interpret than is generally assumed. When reading a comic, pictures and symbols require decoding; pace, place, and space can all be conveyed through innovative and diverse layouts of the panels and pages which may confuse unfamiliar readers, and the art style itself can evoke particular qualities such as atmosphere or give clues to a particular genre (Simpson, 2019). As a result, comics can give a far richer output or reading experience than text alone (Hatfield, 2009). However, in order to correctly understand the comic, the reader must have shared cultural assumptions with the author (Simpson, 2019). They also must have a learned competency in visual languages and comic formats which vary across cultures (Nodelman, 1988). In Unflattening, Sousanis (2015) relies on symbols and visual metaphors which in turn rely on cultural reference points such as well known stories and characters like those from greek mythology, films such as James Bond and 2001: a Space Odyssey, and classic art and sculpture such as Da Vinci's Vitruvian Man and Auguste Rodin's The Thinker. Unflattening requires the reader to have a level of cultural literacy to understand the implications of these visual references (Simpson, 2019). The majority of comics made for research dissemination have a simple cartoon style which is easy to follow, with uniform panel layouts reading sequentially left to right, simplified characters and figuratively realistic environments which are mimetic and representational composite characters of the research participants or subjects. These styles are generic, non-confrontational and arguably safe for readers and commissioners (Hicks, 2016; Harvey-Lewis, 2023). They rarely require any advanced comic reading skills or rely on any obscure visual languages, metaphors, or abstractions, making them accessible to the majority of readers. Tor example, see figures 1, 2, and 3.

Figure 1: Page from ‘Here To Help You’ (Kara & Gray, 2021)

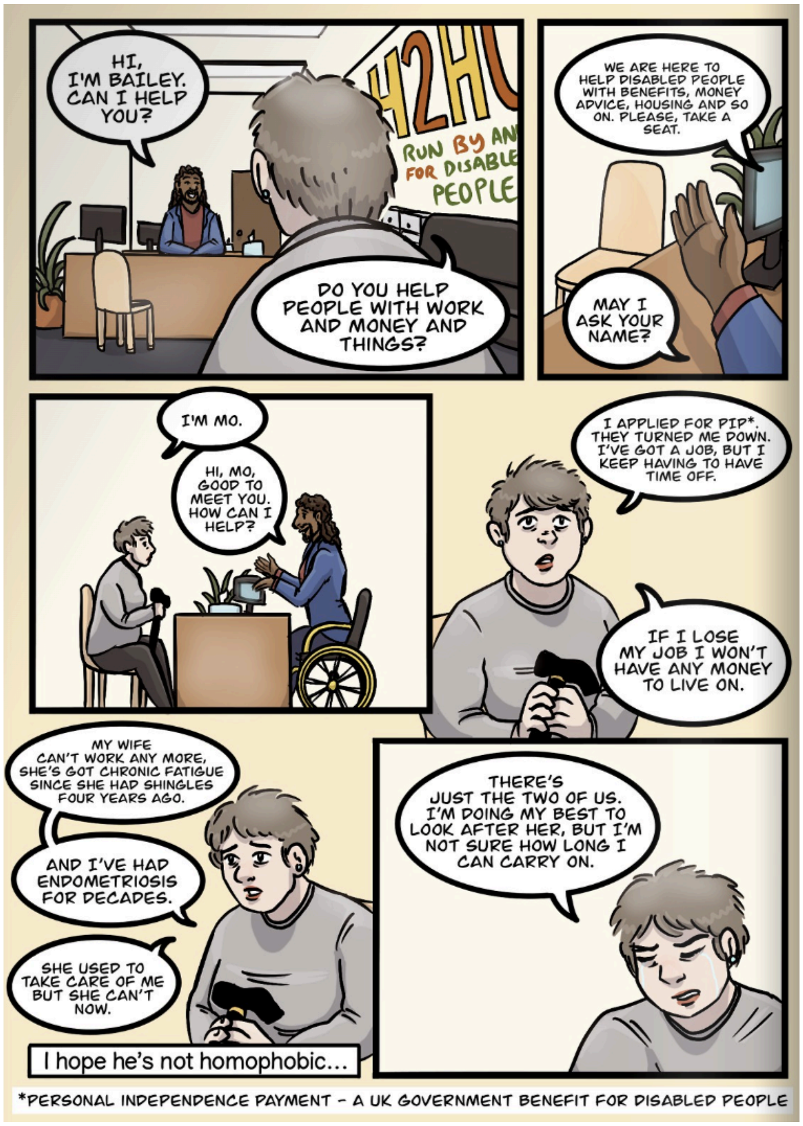
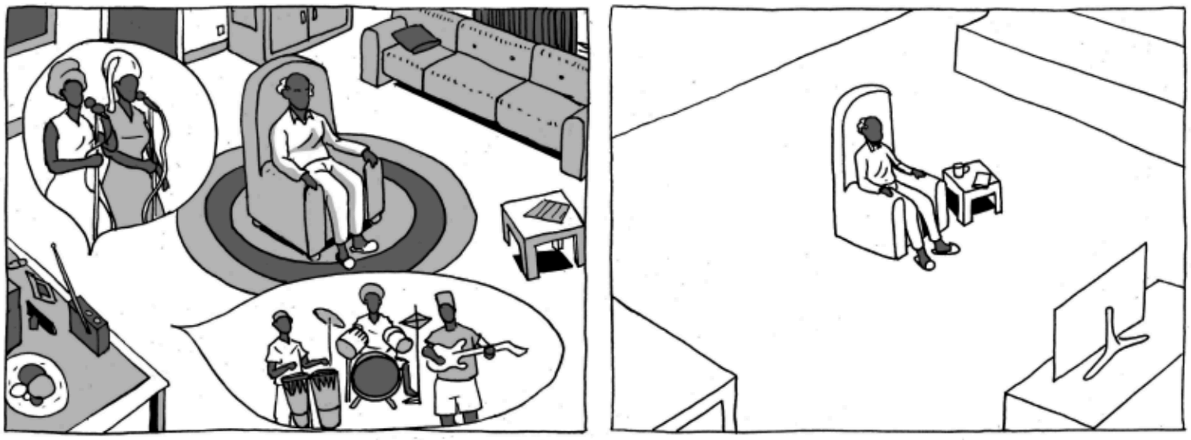


Figure 2: Page from 'After Maria: Everyday Recovery from Disaster' (Sou & Douglas, 2019)

Figure 3: Page from 'Missionary' (Han, 2008)

A good example of more complex use of design in a comic-based research output can be found in Brouswers et al., (2019) comic 'Dementia and Everyday Life #2: Staying In' (see figures 4 and 5). Illustrator Dominique Brouwers uses visual surrealism to depict the internal experience of the focal character, an elderly man with dementia, alone in his home. The details around the character's home fade away when he is not interacting with the outside world. When he interacts with neighbours, the postman, a phone call, a local cat in the garden, or the TV or radio, the details around his home reappear. This visual representation of emptiness in contrast to the detailed, shaded in surroundings of the same scene creates a striking impression of disconnectedness. This communicates the consequences of isolation and how it is experienced by the focal character, and emphasises the importance of staying connected to others for people with dementia.

Figure 4 and 5: Panels from 'Everyday Life and Dementia. 2. Staying in' (Brouwers et al., 2019)



Comics and graphic narratives as an art form and medium for communication have advanced far beyond the simple style reminiscent of North American strip cartoons (Spiegeleman, 1996). No longer restricted by the limits of newspaper printing and basic action, fantasy, or comedy narratives, modern graphic novels play with colour, texture, space, format, and visual languages which complicate and enhance the reading experience, bringing a new level of sophistication and possibility to the medium. Despite these advancements and the growing use and acceptance of comics in academia, comics are not typically viewed as a medium which invites narrative empathy or catharsis, or inspires compassion for real-world benefit (Keen, 2011). When communicating research, particularly findings from qualitative social research, I propose that there has been very limited use of the full potential of comics to emotionally engage readers and communicate meaning, but this is not so for comics and graphic novels in literary fiction, examples of which are given below.

Katie Vigurs (in Preigo, 2016) argues that research-informed comics have a greater potential to both communicate emotion and prompt emotions in readers 'bring[ing] social research findings alive' than written outputs might. As a form of data representation, comics can expand our range of understanding by making clear certain emotions or non verbal messages (Mulvihill & Swaminathan, 2020). By displaying my research findings alongside my own drawings, I am experimenting with the potential for illustration to not only complement textural data, but enhance and influence the meaning-making experience for the reader. The act of creating the illustrations also allows me to explore and express my own way of processing and representing the data from my study. I consider myself to be an experienced comic creator, having drawn comics since my early teen years and throughout my time studying illustration at university and beyond. Therefore, I am both comfortable and confident in my abilities to accurately create visual information the way I intended, especially illustrations that are expressive and emotionally evocative. This places me in a privileged position as a researcher in that I do not need to rely on hiring an artist to create images for me. This allows me to maintain the integrity and authenticity of my own interpretation. Whilst collaboration has its benefits, by directly translating my research into visual form, I ensure that the emotional and conceptual nuances of my findings remain fully aligned with my own insights, without the risk of distortion or misinterpretation that could come with outsourcing the artwork.

Similar to fictional narratives, qualitative and interpretive methodologies typically focus on understanding human experiences and meaning of human actions (Fossey et al., 2002). This then goes through a hermeneutic process of being interpreted and processed by the researcher, disseminated, and re-interpreted by the reader (Bruhn Jensen, 2018). When a research output is turned into a comic, the meaning that the reader interprets will have been shaped by the style in which the artist communicated the researcher's findings through 'hermeneutic images' (Duncan et al., 2015, p. 159). By including non-textual information such as character design and style, facial expressions, body language, and artistic devices suggesting atmosphere or tone, the artist could create a particular emotional experience in the reader which influences their meaning making. When the researcher is able to create the illustrations herself, this removes the additional middle layer of interpretation. (Not to mention the reduction in time and cost.) Incorporating my own 'emotionally sensed knowledge' (Carruthers Thomas, 2024, p. 24) into my research outputs was important to me as a feminist researcher with a degree of insider positionality on this project.

Characters, whether hypothetical or directly representative of the research participants, can be used to tell the stories of the research and the researcher could aim to have readers sympathise or empathise with research subjects as part of their meaning making (O'Sullivan, 2023). In his seminal comic book essay 'understanding comics' Scott McCloud (1993) claims that more detailed, photo-realistic depictions of characters create distance between readers and characters who see them as 'another' whereas more abstract depictions of characters allow readers to place themselves in a world of concepts, supporting their identification with the character and his/her emotional experiences. This phenomenon could be helpful to social researchers wishing to communicate their findings as comics since the more abstract the character, the more unlike any of the actual research participants the depictions will be. This circumvents the question of how to maintain participant anonymity. Beyond the mimetic representation of human or humanoid characters, artistic style and design elements may also influence readers' emotional engagement with the research outputs (Simpson, 2019). A bouncy, exaggerated cartoon style using anthropomorphic animal characters may suggest content of a child friendly or comedic tone, whereas a heavily inked, angular, and proportionally realistic style signifies dark, dramatic themes (McCloud, 1993). Stylistic effects such as colour, texture, shadow, perspective, emphasis, exaggeration, and even leaving the representational world to incorporate metaphorical depictions can all be done through illustrations (Simpson, 2019). This could not only convey the thematic meaning of the research, but could facilitate an emotional experience in the immersed reader. Metaphors and images can act as bridges between the sensory, cognitive and emotive parts of ourselves, allowing us to connect with ourselves and others on multiple levels (Etherington, 2004). It is this holistic experience that I wish to facilitate in my own readers.

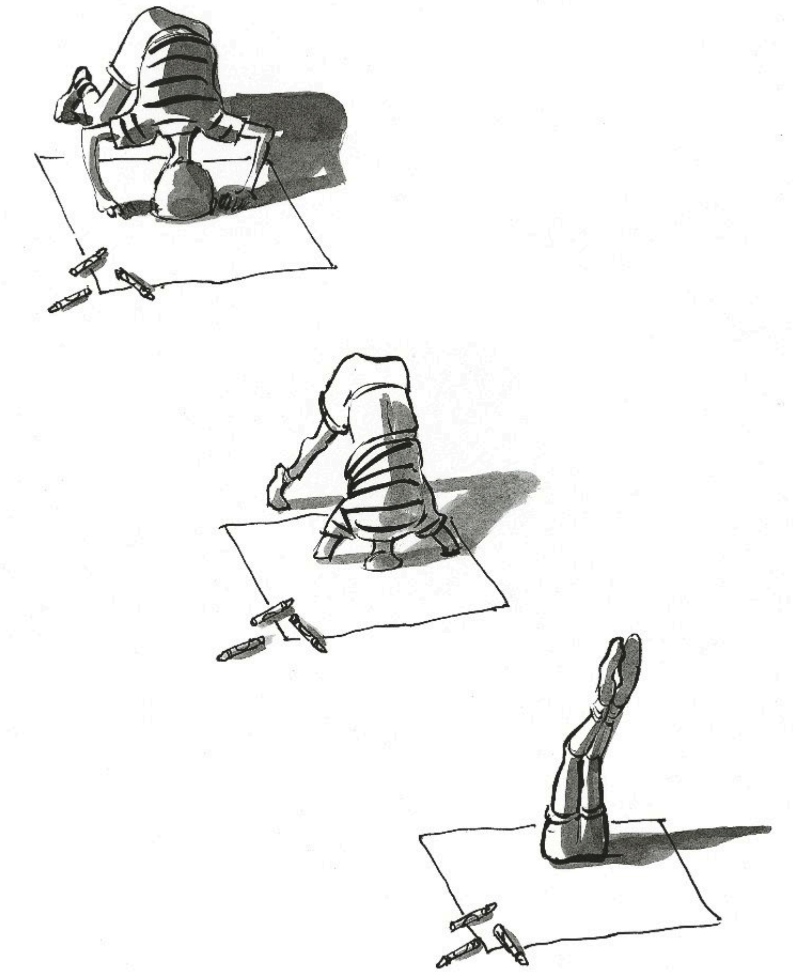
I will now share examples from three award winning graphic novels that use metaphor, surrealism, and metalepsis, meaning a shift of narrative levels that transgresses the established ontological borders of the depicted world.

In Bryan Talbott's *The Tale of One Bad Rat*, the main character, a teenage girl, has run away from home to escape her sexually abusive father. She climbs up a mountain and screams at the sky until the world around her shatters like glass. This is the only page in the book where the illustration does not strictly depict reality. The illustration's explosion out of its panel acts as a fourth wall break (figure 6), allowing the reader to experience the shattering impacting the character's emotional state.

Figure 6: Panel from 'The tale of one bad rat' (Talbot, 1995)

For an example of surrealism; in *Stitches*, the autobiographical graphic novel by David Small (2009), young artist David escapes from his dysfunctional family by diving head-first into the paper he is drawing on (see figure 7). The graphic novel makes regular reference to characters and scenes from Alice in Wonderland, and borrows imagery from the iconic movie poster for Hitchcock's Vertigo to communicate the character’s life spiralling down, out of control.

Figure 7: page from ‘Stitches’ (Small, 2009)



Craig Thompson’s (2003) autobiographical graphic novel *Blankets* includes hermeneutic images that convey the author’s emotions and perspective, evoking similar feelings in the reader (Simpson, 2018). The below image (figure 8) shows the author burning his artwork in an attempt to purge himself from his obsession with drawing. As he does so, he falls to his knees, his head thrown back, his hands contort, and cartoon beasts burst from his mouth in a scream, white against the black sky. This stylized image visually expresses his powerfully emotional turmoil. Such moments offer readers a unique emotional experience, triggered not just by the story itself but also by the visual impact of the artwork (Simpson, 2018).

Figure 8: Page from 'Blankets' (Thompson, 2003)

5.3 Designing my creative contributions

The above examples are from three of my favourite graphic novels, but from fine art to Saturday morning cartoons, I have always been inspired and influenced by drawn imagery and processed information and emotions with the help of visual metaphors. When developing an appropriate artistic style to communicate my Phase 1 findings (see chapter 6), I took into consideration the overall mood and emotional themes of my research. I aimed for a level of artistic professionalism and sophistication to the illustrations and avoided using a more conventionally childish cartoon style. I chose to illustrate the commix digitally to achieve clean lines, and kept the details sparse to create a visual balance between the pictures and text. This was to project a sense of formality and seriousness onto the commix which felt tonally appropriate for the topic (Duncan et al., 2015).

I also developed a surrealist character design to enable readers to more easily engage with the concepts of the comic, rather than the hypothetical characters (McCloud, 1993). I hoped to convey an edge of both hostility and vulnerability by drawing the bodies of the figures as angled and asymmetrical, with unrealistic joints and proportions. This was inspired largely by German expressionist and anti-war film and artworks such as Piccasso’s Guernica. As I did not collect any demographic information about my anonymous survey participants, a highly surrealist style also allowed me to somewhat circumvent the challenge of accounting for differences in representation as visible characteristics indicating race, age, and diverse body types can more easily be projected onto abstract, relatively blank characters. I believed this approach would work better than including characters with overt racial, religious, and disability diversity markers, which could end up looking tokenistic or could ‘veer into crude caricature’ (White et al., 2024, p. 232). I also chose not to draw complete faces on the characters so that they remained anonymous, ambiguous, and allowed for easier reader identification, however, I gave each character one eye. The eye is historically regarded as an icon of multiple meanings in the art world for the eye ‘both looks and sees’ (Eager, 1961). As a symbol, it conveys the bridge between the subjective self and external reality as ‘the window to the soul’ but it is also symbolic of being observed and appraised such as by ‘the all-seeing Eye of God’ (Fingesten, 1959). The characters representing the survey respondent often lean over, point to, or reach around the hypothetical survivor-professional character as they comment on the survivor-professional or situation with their eye directed towards the survivor-professional. This places them as the observer reporting on and discussing the subject.

I incorporated the idioms and metaphors used by my participants in their survey responses such as ‘personal baggage’, ‘letting off steam’, ‘being open’ and ‘crossing boundaries’ into the scenes, poses, and props by portraying them literally. I chose a star shape to represent the assets survivor-professionals can bring to their work, and archery arrows to represent the negative impact of the work or trauma on staff members. I avoided relying on conventional clip art styled iconography such as puzzle pieces, scales, megaphones, cogs and gears as I believe that they bring about an overly corporate feel to images rather than a creative and personal one conducive to evoking an emotional connection for the reader. To differentiate the survey respondents from the hypothetical survivor-professionals (including the respondents who spoke from a survivor's perspective), I gave the survivor-professional character the same *paint-brush tip* styled hair across all depictions, and removed the ben-day dot effect from behind the speech bubbles assigned to the survivor-professional characters.

5.4 Data familiarisation through the illustration process

Data familiarisation is an iterative practice that is formalised in the reflexive thematic analysis process (Braun & Clarke, 2021). Becoming familiar with my data was continued throughout the research process but much of my initial familiarisation happened during the transcribing, reading, and note taking stage, before I began to code my data or generate themes. These were very computer based activities, heavily relying on processing language, and it did not require me to engage with my data on any sensory or physical level beyond reading and typing. Couceiro (2024) shares anecdotal tales of researchers filling living room floors with post-it notes, building models out of pipe cleaners, condensing interview transcripts into haikus, and exercising whilst listening to recordings of their data. She writes:

> Bodily movements [seem] to open up space for the data to breathe and seep into one's consciousness more easily. (Couceiro, 2024, p. 303)

Conscious of the environmental costs of printing survey findings or transcripts, and knowing how easily I can get overwhelmed by piles of documents and paper scraps, my experimentation with this method was limited. Though it felt like I was giving a solid romantic performance of doing what a researcher does, I soon returned to the blue glow of my laptop with relief and began making friends with Nvivo.

I believed I had completed the familiarisation process once I had approved my themes but later spending time illustrating the findings chapter for Phase 1 helped me to more fully re-immerse myself in the data and further familiarise myself with the themes and extracts to understand them in clearer ways. Looking beyond the norm, exploring, and experimenting creatively with the data can open it up in exciting ways (Couceiro, 2024). Good reflexive research practice has multiple layers (Braun & Clarke, 2022) and visuals such as illustrations can help generate that richness and depth (Mannay, 2016). Wilkinson (1988) argues that employing methods that encourage space for new understandings whilst exposing methods that limit or restrict research practice is important in reflexive research, and creative research strategies can support the production of new knowledge whilst challenging traditional disciplinary norms (Hawkins, 2017). I found my relationship with my data changing and deepening as I pulled out which aspects to represent visually and considered how best to represent them. The illustrations allow me, and hopefully also the reader, to gather a sense of the summative core meaning of each theme and sub theme before delving into the description and data extracts. Pictures, even when glanced at briefly or peripherally, are thought to help aid the comprehension of text or verbal information (Eitel et al., 2013). The illustrations in that sense may act rather like a title or heading, however, as images, they offer the reader a supportive alternative to processing solely written text.

Choosing what to highlight with an illustration felt similar to the process of discerning what data was important to include during the coding process and when deciding on my themes. More than simply a way to convey information, art as a process can be a way of understanding and clarifying it (Kochalka, 2005). In social constructivist terms, by choosing what to highlight and how, and what to leave out of the illustrations for only the text to convey, it can be argued that the comic reveals my underlined constructed interpretations as the artist-researcher (Al-Jawad, 2015).

Overall, the Phase 1 data set felt relatively unexpressive as it lacked personal stories, so it did not provide content of great emotional depth to experiment artistically with. A data set with more emotionally rich narratives such as those from narrative interviews would probably be better suited to an art style that further utilises expressive elements such as colour, texture, angles, perspectives, different scenes and environments, and sequential panels communicating time and space. This is something I wish to experiment with more in future research outputs.

5.5 Using allegory and metaphor for analysis and communication

Phase 2 of the research generated a greater amount of data than the questionnaire in Phase 1. I was also able to get to know the individual participants through the interview process whereas the survey was completely anonymous. Therefore, instead of displaying extracts from the interviews in speech bubbles like the Phase 1 findings, or attempting to depict cartoon versions of the interview participants, I have presented the findings from Phase 2 in conventional academic prose (see chapters 7 and 8). To provide me with further scope for creative experimentation, I took a small selection of concepts from the Phase 2 findings and created an allegorical story written in the style of a traditional fairytale or folktale. This is presented in chapter 10. Unlike the digital illustrations for the Phase 1 findings, the style I chose to illustrate the fairytale in is reminiscent of etchings or ink drawings from classic Victorian children's literature, however with a more modern cartoon character design. More important than the art style was the focus on the use of storytelling and allegory to explain an element of my findings. Allegories and metaphors have long been used by philosophers and scientists to explain their theories. Notable examples include Plato's Cave, Schrodinger's Cat, Russell's Teapot, and Foucault's use of the Panopticon, amongst others. These enduring allegories and metaphors effectively communicate complex ideas in relatable and accessible ways. Furthermore, it can be said that we are currently living in a time where the transfer of information is increasingly reliant on images, particularly through smartphones, social media, and other visual platforms. This era is also marked by a heightened need for metaphors and allegories (Guenther, 2023). Mota (2021) argues that in times of crisis, people are drawn to creativity and poetry as they provide a means to navigate uncertainties and intense emotions that literal language often fails to capture. This idea is reinforced by Guenther's (2023) observation that throughout history, people have turned to allegories to articulate complex and ambiguous concepts or emotions. The theory of conceptual metaphor, argued by linguists and philosophers George Lakoff and Mark Johnson in their 1980 book Metaphors We Live By, further supports this. They argue that metaphors are not only a literary device used when people speak or write, but are conceptual tools that help us create and restructure our understanding of reality (Swedberg, 2020). This suggests that metaphors and allegories are deeply embedded in human cognition, shaping the way we perceive and interact with the world. Literary critic William Empson (in Structure of Complex Words, 1951) adds another layer to this by noting that allegory allows us to connect abstract concepts to concrete experiences, making us believe that, due to the corresponding details in each level, there is an underlying reality or fundamental truth in the nature of things which causes them to happen (Fletcher, 2012). In other words, allegories allow us to use the domain of storytelling as a lens to view and make sense of the domain of our reality.

Given this context, incorporating an allegorical story to communicate findings from my research is a methodological as well as a creative choice. Etherington (2004, p. 136). writes that metaphors aid us in our memory but they also 'activate a series of psychological associations and start the mind working at an unconscious level.' As with the use of illustrations for my Phase 1 findings, an allegorical story allows me to capture the complexity and emotional depth of my participants' lived experiences in a way that traditional academic prose might not, thereby enriching the reader's engagement with the research. In the process, I also discovered that just as creating illustrations and visual metaphors for Phase 1 helped to familiarise me with my data and aided in its analysis, thinking allegorically and developing a story for the Phase 2 findings served a similar purpose. Palmer et al. (2009) suggest scholars engage in layers of physical and intellectual ‘information activities’ through the course of synthesising results from research and the process of writing is one of the fundamental activities we use to compose and revise our thoughts. The approach of writing the fairytale not only facilitated my understanding and processing of the data, but it also allowed me to effectively communicate my thoughts and findings to friends and colleagues. Communicating my thoughts and ‘bouncing ideas’ off of friends aided me in the thinking process, clarifying and refining my interpretations (Wislon, 2022).

5.6 Conclusion

When I decided to create illustrations and an allegorical story out of my research findings, my primary intention was to experiment with innovative methods of research communication and dissemination. I aimed to explore how art and storytelling could offer a broader, multileveled way to convey complex ideas and feelings, and turn the process of consuming research outputs into an experience which engaged the reader emotionally as well as intellectually. However, as I progressed through this creative process I realised that the act of creating the commix and fairytale was not merely a method of presenting my findings, it became an integral part of my analytical process. This will be discussed more in chapter 10 where I present the fairytale. Engaging with visual metaphors and narrative elements allowed me to delve deeper into the data, uncovering new insights and refining my interpretations in ways that might not have been possible through textual analysis alone. Ultimately, this process has highlighted the value of arts-based research methods outside of data collection, not just as tools for communicating my research findings to others, but for aiding my understanding of the data and deepening its analysis for myself.

The next chapter introduces the findings from Phase 1 of the research and displays data extracts and the generated themes in the form of the commix discussed above. The following Chapters 7 and 8 display and explain the themes and data extracts from Phase 2 in the conventional academic format.

Chapter 6 - Phase 1 Findings

6.1 Introduction

This chapter presents the original empirical findings generated through Phase 1 of this study. Within this chapter and the upcoming chapters 7 and 8, references to existing literature are kept to a minimum. This is in order to prioritise participants' voices and experiences. This stylistic choice allows the data to be presented with clarity and without the interruption of ongoing theoretical analysis. Where literature is briefly mentioned in this and following chapters, it serves only to orient the reader or provide continuity with previous or upcoming chapters. A fuller engagement with the wider literature is provided in the discussion chapter (chapter 9), where the findings from both phases of the study are explored in relation to existing theories and research.

As discussed in chapter 4, Phase 1 involved an online qualitative questionnaire sent to VAWG organisations across England and Wales. The questionnaire included three vignettes and prompt questions allowing participants to share their reflections. Extracts from the data and descriptions of each of the four themes generated through thematic analysis are presented below as a picture book. Each page displays two double-page spreads. Some of the data extracts make reference to the characters and scenarios in the vignettes also discussed in chapter 4. I provide the vignettes here:

> **Scenario 1**
>
> A 26 year old youth worker is interviewed for a job in an outreach team working with young people at risk of sexual exploitation in a town that is known to have a high rate of child sexual exploitation. She is fully qualified for the role and has three years experience working in a similar service. When asked why she thinks she would be the best fit for this position, the interviewee explains that she had been sexually exploited herself as a child

so has a personal insight into what the young people using the service might be going through. She says she has a lot of good ideas about what approaches might work best for supporting them.

Scenario 2

Cathleen is a forensic nurse working at a Sexual Assault Referral Centre. She appears noticeably shaken after undertaking an examination on a young child victim. When her colleagues ask her if she's alright she explains that the attack on the little girl was very similar to abuse she had experienced as a child at the same age. She lets her colleagues know that she needs to take her lunch break and go on a walk to clear her head and calm herself. Whilst Cathleen is out of the room, Ruth, one of Cathleen's colleagues, comments that she feels Cathleen isn't stable enough to perform her job appropriately and that she should take a break in her career and return once she has fully resolved her childhood trauma.

Scenario 3

An experienced facilitator of a face-to-face group therapy programme for women recovering from abusive relationships expresses frustration about a returning participant who she says will forever attract violent men because she's "addicted to abuse". When another staff member questions what she means by that, the group facilitator explains that the participant only knows how to be a victim and wants to remain helpless. She says she has seen women like this participant time and time again and they are sadly beyond intervention.

6.2 Introducing the themes

Four themes, each with two to three sub themes, were generated from the 42 questionnaire responses. The responses gave insight to how participants perceived and evaluated survivor professionals disclosing to colleagues, how they expected others to respond to disclosures, and how they would react in a situation where a colleague disclosed their survivor status. It is important to bear in mind that some of these responses do not necessarily reflect the personal opinions of the participants, but what they believe are common attitudes and opinions of staff in the sector. Issues with clarity around how participants interpret and respond to questions are commonplace in questionnaires (Wills, 2013). However, when piloting the questionnaire, I engaged in a process similar to cognitive interviewing (Rickards et al., 2012) with my volunteers to assess how the questions were being interpreted and no concerns were raised. It was only later when interpreting the data that I felt unable to determine if some participants were responding based on their own opinions or how they predicted others would view the scenarios. Other responses were clear, for example, in answer to a question about how the youth worker's disclosure in the first vignette might impact the organisation's decision to hire her, one anonymous questionnaire participant shared her personal view alongside her acknowledgement that others may respond differently:

> I think it depends on the person hiring them. I would personally see her as an asset but I understand some places might believe she will impose her personal experience onto others.

Some participants identified themselves as survivors and reflected on their own experiences of disclosure in response to the questions. These quotes are displayed in the commix without the shadow around the speech bubble and as coming from the character with the speckled dress who represents a hypothetical survivor professional. Viewing the responses that discuss the hypothetical survivor-professional character next to survivor-professional participants sharing their own thoughts helps to create a sense of conversation between the questionnaire participants. The comments made by survivor-professionals were similar to what many of the interview participants in Phase 2 expressed. More broadly, the themes that were later generated from the interviews with survivor-professionals in Phase 2 were similar to the four themes generated from the questionnaire, showing consistency in findings across participant groups. The next two chapters make these links explicit and cover each theme in more detail.

The themes from Phase 1 are as follows:

1. Survivor-professionals as damaged goods
    a. A risk and a burden
    b. The need for significant healing

This theme is drawn mostly from the responses that described disclosures as unprofessional, or showed concern for the vignette characters' abilities to perform their jobs safely and without bias.

2. Implications of Disclosure
    a. Disclosure as an act unto itself
    b. Giving others the opportunity to make assumptions

This next theme explores how disclosure is perceived. Sub theme a. focuses less on the impact of being open about one's survivor status and more on how others respond to the act of sharing personal information in a professional setting. Sub theme b. Explores the predicted consequences of disclosure.

3. Embracing the personal as professional
    a. It's all normal and there are no concerns
    b. Lived experience as an occupational asset

The third theme is drawn mostly from responses that were largely positive about survivor-professionals working and disclosing in VAWG organisations. It incorporates responses that made acknowledgement of the high prevalence of survivors working in the sector and the value they bring.

4. Peer relationships as a place to both police and support
    a. Having each other's back
    b. Permissible within the limitations of decency
    c. Deferring responsibility to management

The final theme for Phase 1 explores the working relationship dynamics and workplace environment, the perceived boundaries around professional or appropriate levels of disclosure, and the wellbeing of staff and how this is collectively managed.

6.3 Phase 1 findings

The four illustrated themes with quotes from the questionnaire are presented below. Their original format as an A5 booklet allowed for the illustrations to cross over two pages, however, for readability, each individual page is displayed separately here. See appendix 12 for thumbnails of the double page spread design.

1. DAMAGED GOODS
A Risk and a Burden

Participants were concerned about survivor professionals' abuse experiences having a negative impact on their work performance, professionalism, and judgement.

The biggest concern was around the survivor-professionals' ability to be objective, detached, rational, and not project their own experiences onto their service users and clients.

Participants who shared that they were a survivor of VAWG or alluded to it acknowledged that projection could be seen as a risk by others but that they didn't believe they struggled with projection.

> *My personal experiences inform all of my work but I am very aware they are my own lived experiences and not those of others. They do motivate me to do the work I do.*

Another common concern the participants raised was around the survivor-professional being triggered by the work and potentially unable to take care of themselves when that occurred. It was feared that the work could be damaging to the survivor-professionals' mental health and wellbeing.

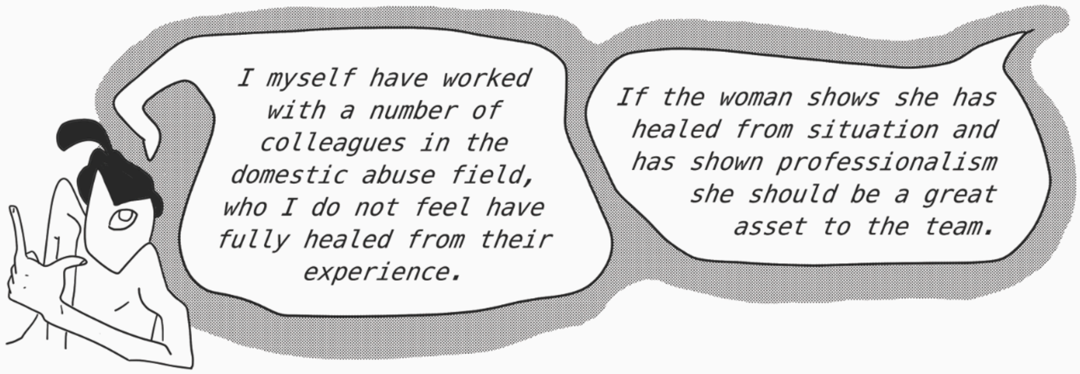
> *[My concern would be] That once she does go home at the end of the day, what she has dealt with at work is actually affecting her day to day life long term without her even realising it.*

> *[My concern would be] That her position could continue to raise unhelpful, traumatic responses in her life.*

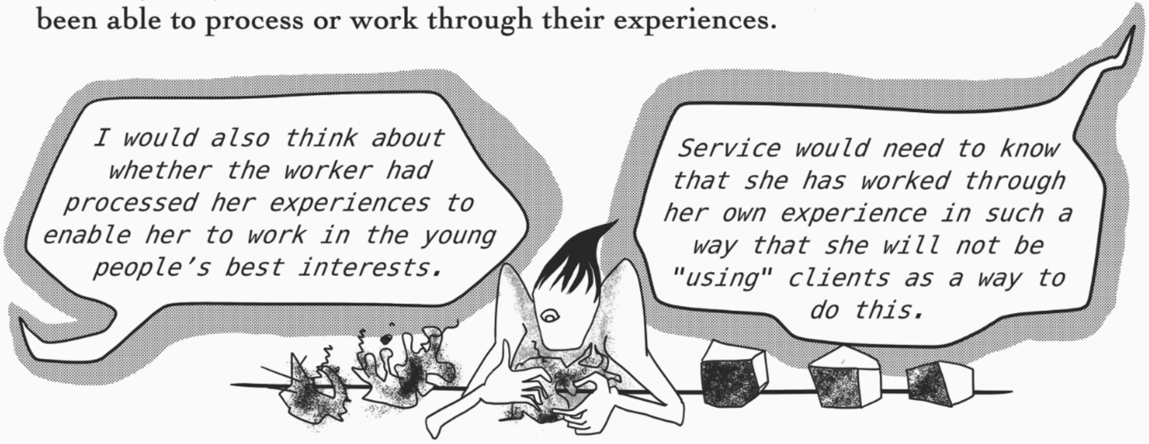
Some participants implied that organisations would not want survivor-professionals working for them because they may become a burden on the organisation or they might lack professionalism.

The Need For Significant Healing

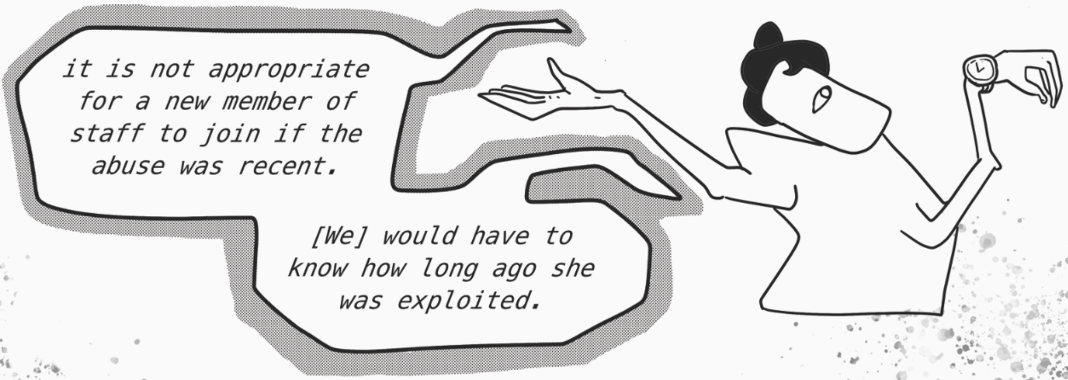
Participants often brought up the issue of the survivor-professional being able to demonstrate that they are 'fully healed' from their abuse or trauma.



Similarly, they were concerned about whether the survivor-professional had been able to process or work through their experiences.



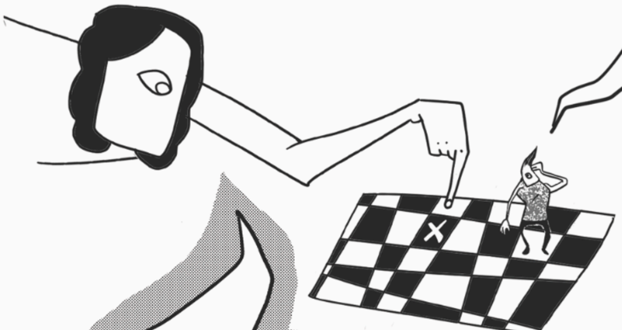
One indicator for whether a survivor-professional was sufficiently healed or had processed her abuse/trauma was the length of time since the abuse occurred.



> The main thing to check is the time since the abuse and the possibility of the worker being triggered by working in the sector.

> [The] nurse needs time to address her own issues.

Again, survivor-professionals who responded to the survey shared that organisations might worry that survivors of abuse may not be ready to engage in this line of work.



> From my own experience of raising a personal experience of being in an unhealthy relationship during my induction process I would worry she might be looked at as not being in the right 'place' to undertake this work.

> I believe that an assessment of [her mental health] would be advisable and offer counselling.
>
> I would also want to know if that person has had support and have moved on from the abuse that they have experienced before considering offering the job.

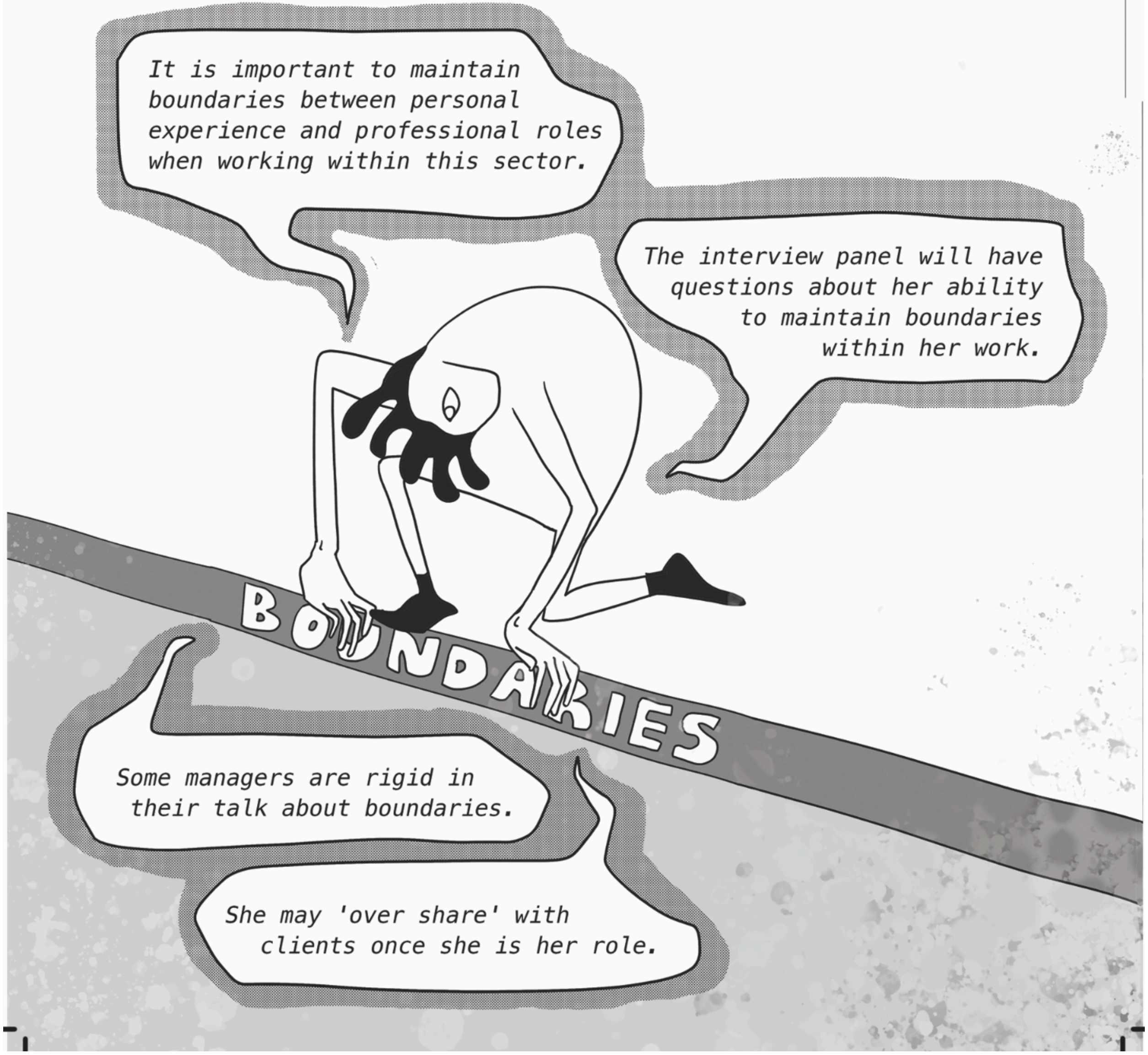
Besides time since the abuse occurred, another indicator of whether the servivor-professional was ‘in the right place’ to work in the sector was whether they had received any formal therapeutic support or intervention. Participants also talked about survivor-professionals receiving support whilst in work. This ‘support’ could be as simple as colleagues being supportive and reassuring, support as part of normal supervision arrangements, or as something additional such as formal counselling.

2. IMPLICATONS OF DISCLOSURE

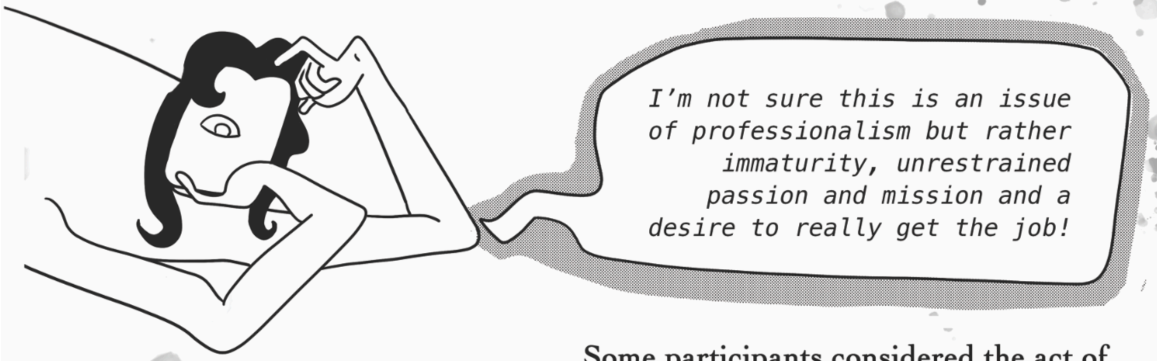
Disclosure as an act unto itself

Participants appeared to make a distinction between the impact of a survivor-professional's survivor status being made known, and the implication of the survivor-professional choosing to make a personal disclosure in a professional setting.

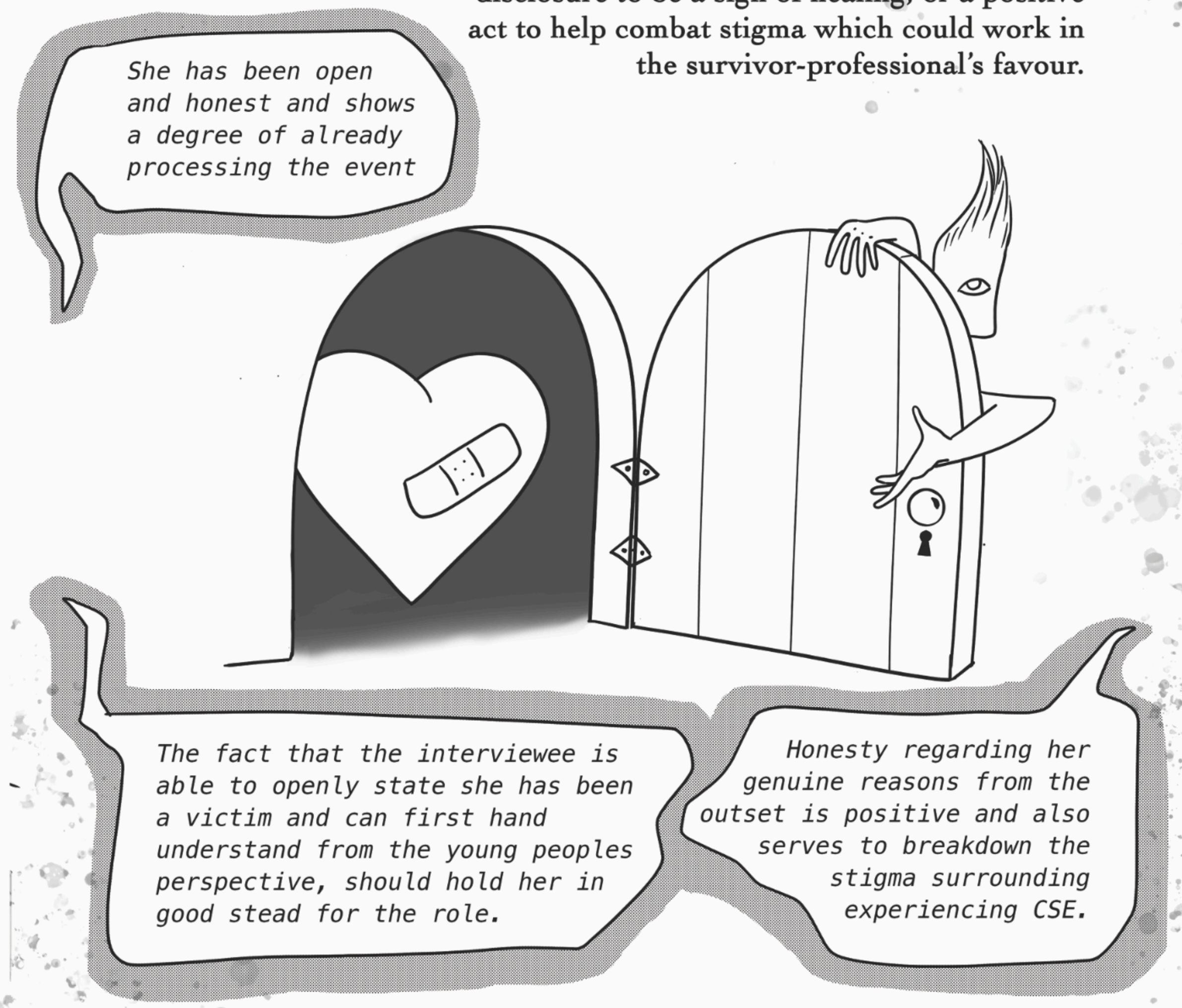
Choosing to disclose something personal raised questions around the survivor-professional's boundaries, for if she can 'over share' with colleagues, she is at risk of doing so with clients as well.



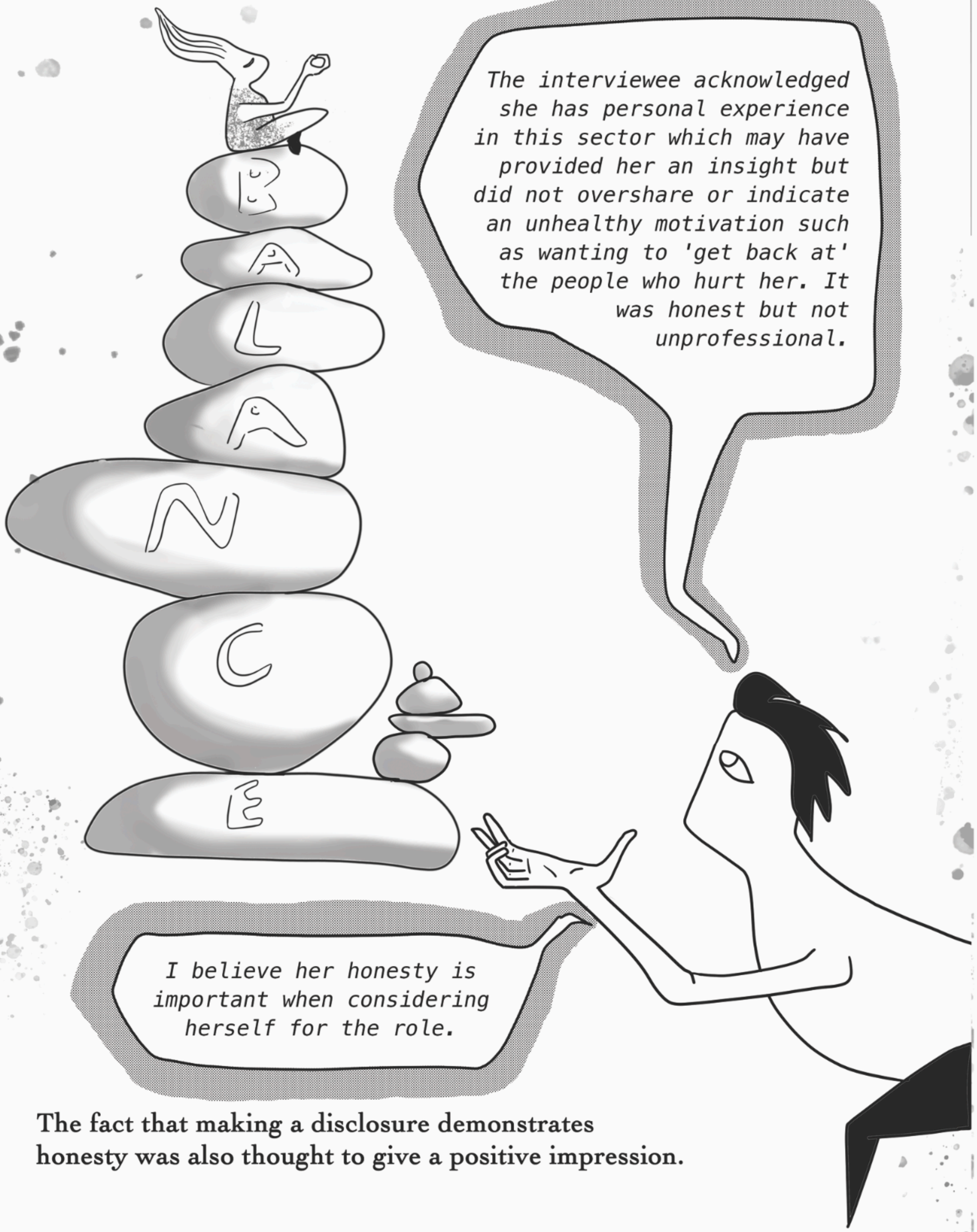
One participant did not state that she thought the act of disclosure was an indicator of poor boundaries or lack of professionalism, but that it could indicate some other characteristic of the survivor-professional which could be seen as favourable or unfavourable.



Some participants considered the act of disclosure to be a sign of healing, or a positive act to help combat stigma which could work in the survivor-professional's favour.



One participant expressed that the character who disclosed in her job interview in the first vignette displayed the right balance of disclosing when it was relevant, without oversharing.



The fact that making a disclosure demonstrates honesty was also thought to give a positive impression.

Giving others the opportunity to make assumptions

Along with how the act of disclosure is perceived, participants reflected on how being open about one's survivor status also gives others the opportunity to make judgements or assumptions, either positive or negative, about the survivor-professional.

Whilst the act of disclosure could be seen as a demonstration of a person's honesty, being open and honest overall was considered to be a valuable attribute in this line of work for multiple reasons, for example, it may allow survivor-professionals to engage more fully in their clinical supervision and help to break down stigma.

Participants also said that knowing about staff members' backgrounds would be helpful to employers as they can make informed decisions when hiring and put support in place if it's needed.

However, several participants expressed concern that colleagues may not respond well to a professional making a personal disclosure, and receiving this reaction could be harmful to the survivor-professional.


I was questioned about my own experience in a way which made me feel if I said it still affected me my job would be at risk. I didn't feel supported to be able to say it did impact me still and have any support with it.
it might adversely effect how her professional colleague relate to her.
some colleagues may not react to her appropriately.
she might have jeopardised her position by speaking to an over-zealous colleague.
I would hope that the disclosure would not be used against the applicant.
They should not be made to feel their job is a risk. If that happens they will minimise their experience, its impact and this will negatively impact on recovery. She should be allowed to do what feels right for her at the time.

3. EMBRACING THE PERSONAL AS PROFESSIONAL

It’s all normal and there are no concerns

Participants acknowledged that there is likely to be a high prevalence of survivors of abuse working within the sector.

Many expressed that it was very normal for staff working in VAWG to be emotionally impacted by their day to day work regardless of whether or not they had personally experienced abuse, and that compassion and support should be afforded to all staff.

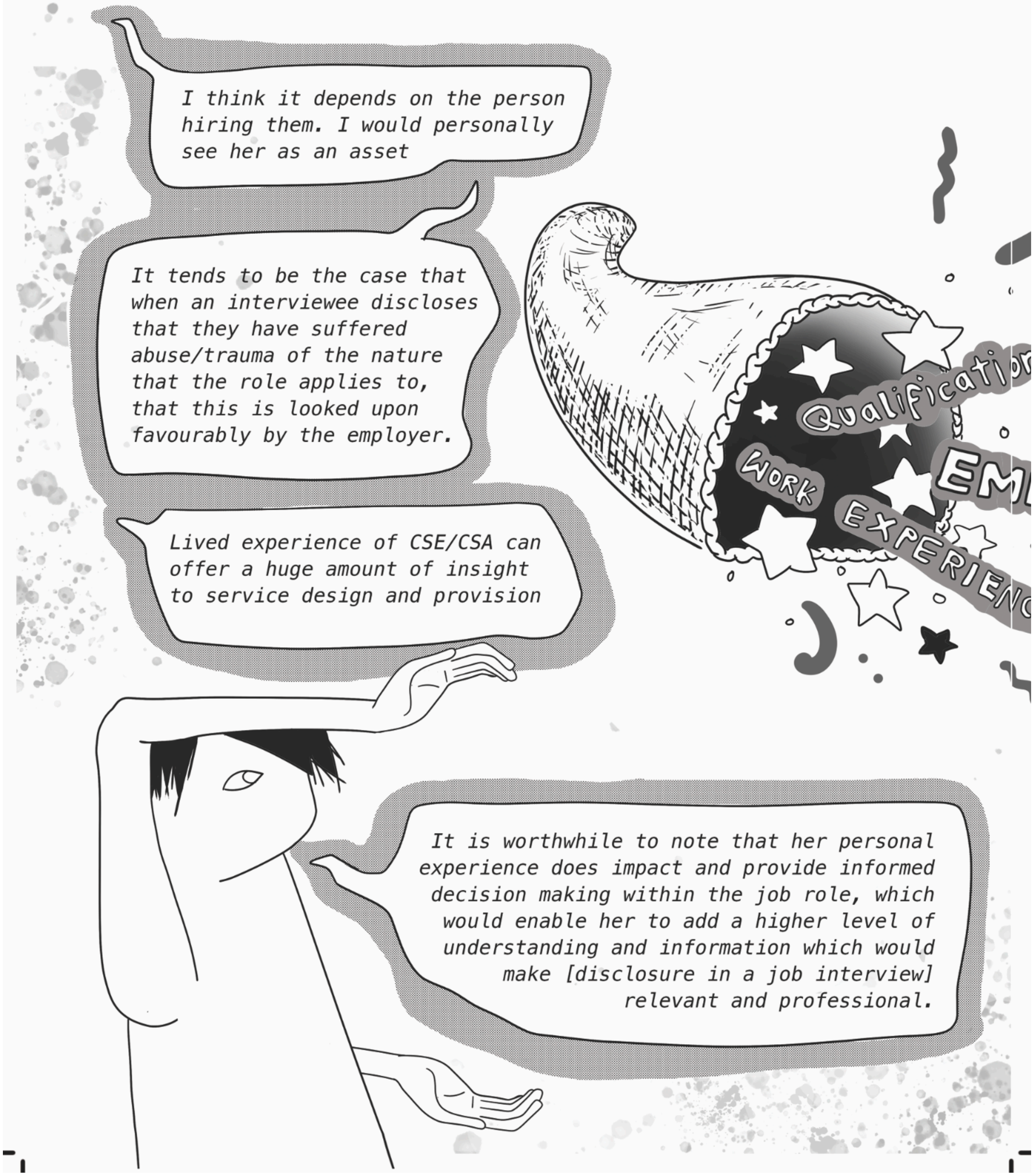
Trauma was normalised by the participants and the idea of a survivor being 'fully healed' was challenged as healing is often not linear or 'coherent'. Participants seemed to accept that ongoing support may be needed, and encouraged organisations to provide it and survivor-professionals to accept it.

Most of the participants prioritised respecting the choice and empowerment of survivor-professionals to work in their chosen role.

It was expressed that survivor-professionals can or should be trusted in managing their own wellbeing, which was presented as an important skill for anyone in that line of work.

Lived Experience as an occupational asset

Several participants viewed lived experience as an occupational asset or assumed that others would view it as such. In these instances, disclosure was thought to work to the survivor professional's advantage.



Greater insight, empathy, and drive or passion for the work were the main benefits to lived experience that the participants mentioned.

Participants also considered the question around how important having lived experience of abuse was compared to being a professional without it. Lived experience was seen as a valued addition to professional experience, training and qualifications, but not necessarily essential, though it was said that some people or organisations may see it as essential.

As touched on in theme one, participants also mentioned the importance of recognising that everyone's experiences of abuse and trauma are different and survivor-professionals should not assume that theirs is the same as others, putting limits on lived experience as an asset.

4. PEER RELATIONSHIPS AS A PLACE TO BOTH POLICE AND SUPPORT

Having eachother's back

In answer to the questions about the second vignette involving Cathleen and Ruth, most participants said that their greatest concern would be for Cathleen's wellbeing and that in this situation, they would offer their support to Kathleen and be led by her.

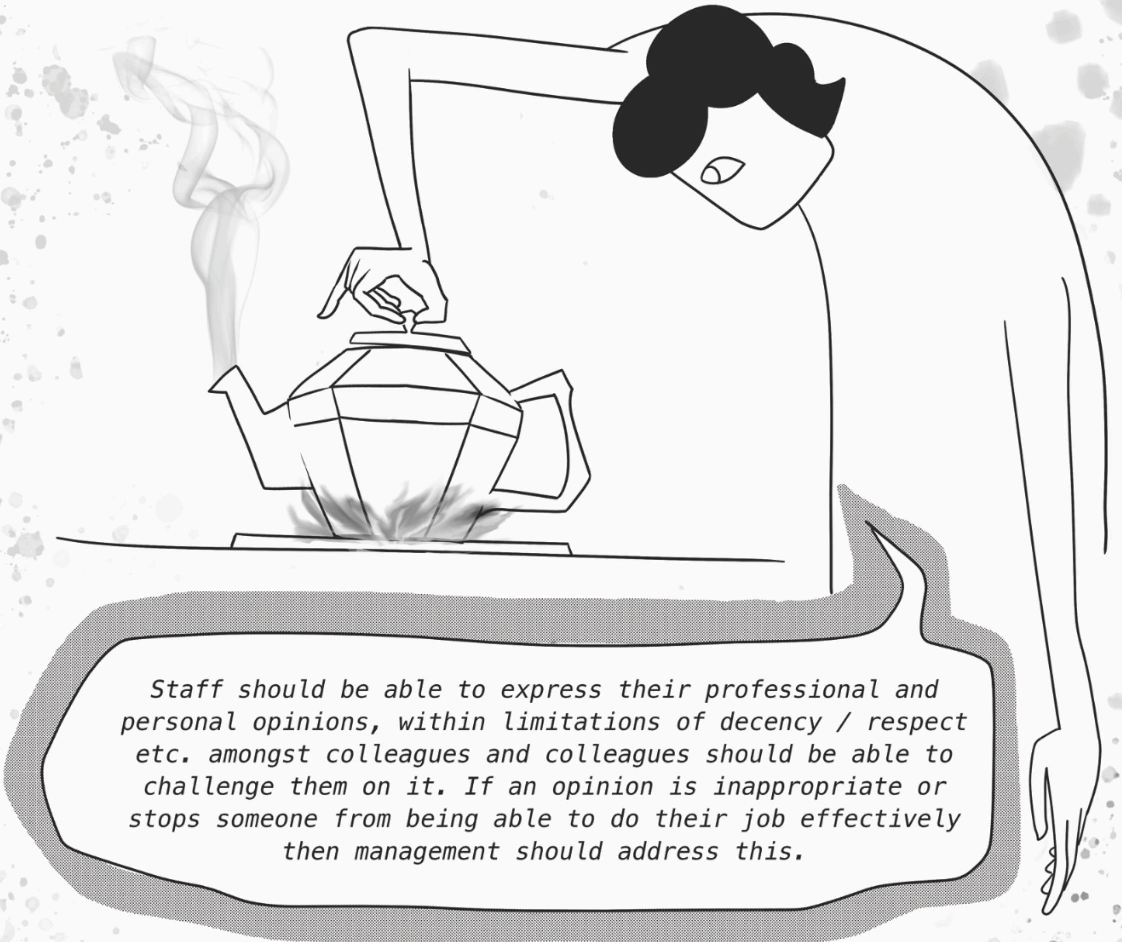
Participants also wrote about extending the same level of compassion and support to colleagues as they would to their clients.

They wrote about how being supportive to each other as colleagues was something that they all should do as a team.

When prompted by the scenario, participants expressed that they would challenge Ruth on her comments about Cathleen. Some participants suggested doing this in a gentle, educating way, perhaps in private, or try to investigate what may lie behind Ruth's comments, others suggested they would take a more direct approach, informing Ruth that her comments were wrong or potentially harmful, and that they may indicate that Ruth herself needed reporting or given clearer support or guidance to understand trauma and what is and isn't appropriate to say.

Permissable within the limitations of decency

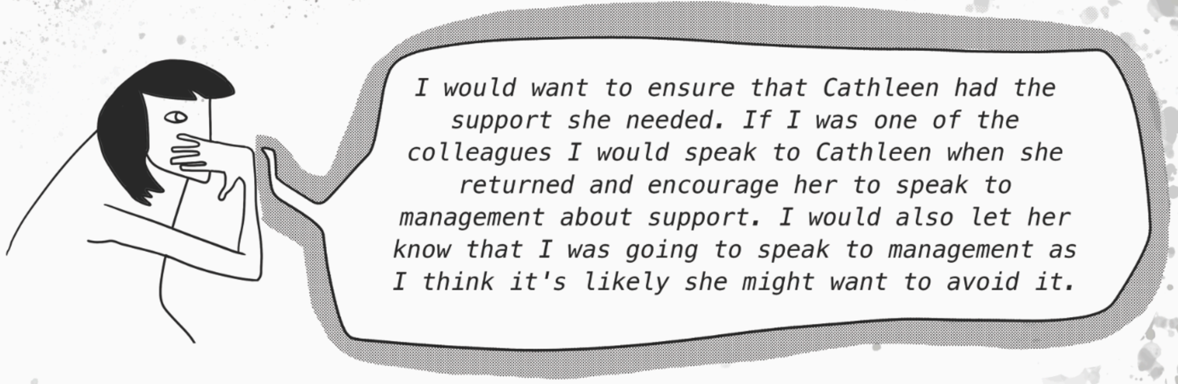
Participants acknowledged that working in sexual and domestic abuse can be extremely stressful and that it was reasonable and common for staff to let off steam by sharing and venting to each other. Collegial relationships were thought to be a safe place to air complicated or challenging thoughts and feelings, to explore, discuss, and work through them together. However, there was thought to be a line where some thoughts were inappropriate to share or could suggest that the staff member was unfit for their role as they did not reflect the core values of the VAWG sector. An acknowledged positive to staff sharing seemingly harmful or inappropriate opinions or attitudes was that at least they could be 'corrected' by fellow colleagues and it was better that they shared these thoughts with colleagues rather than clients, as colleagues will 'understand the full picture of abuse'.



Deffering responsibility to management

The role of managers and supervisors were frequently mentioned by the majority of participants to also handle the policing and supporting of staff. Supervisors and managers were assigned the responsibility to arrange or provide support for staff who are emotionally impacted by the work such as Kathleen from the second vignette.

They were also tasked by the participants with receiving reports about colleagues from other concerned staff members and addressing anything others judged as inappropriate that was said by colleagues such as Ruth in the second vignette and the group facilitator staff member in the third vignette.



Providing clinical supervision and regular meetings with managers, along with broad and inclusive HR policies was suggested as a way to make sure VAWG organisations are meeting the needs of survivor-professionals at work.

These findings show us how staff members' views, attitudes, and responses vary towards colleagues disclosing survivor status in VAWG settings. Concerns for the safety and wellbeing of service users and the functioning of the service were often behind these views. Whilst care, support, empathy, and understanding towards team members with different experiences, identities, and perspectives help organisations run well, there can be limits on what is considered acceptable. Participants expressed a collective responsibility to look after eachother, acknowledging the challenging nature of the work, but ultimately, ensuring all staff members positively contributed to appropriately meeting service user needs was paramount. This study has helped contextualise the second phase of the research which explores survivor-professionals’ views and experiences of disclosing their survivor status to colleagues.

harpieahouse@gmail.com

6.4 Summary

Overall, my analysis of the findings reveal a nuanced and multifaceted perspective within the VAWG sector regarding survivor-professional colleagues and disclosure. Participants expressed significant concern over the potential for survivor-professionals' past trauma to negatively influence their work performance (Salston & Figley, 2003; Rauvula et al., 2017), particularly in relation to maintaining objectivity, professionalism, and sound judgement. The potential for previous abuse experiences to adversely affect job performance was cited as a risk, with fears that unresolved trauma might lead to emotional triggers, compromised mental health, and ultimately, diminished professional efficacy. A recurring theme was the expectation that survivor-professionals must demonstrate considerable healing and emotional processing before engaging in this line of work, with time elapsed since the abuse, the benefits of which were evidenced by Dheensa et al., (2022), as well as evidence of formal therapeutic intervention such as having received personal counselling, serving as critical benchmarks.

The act of disclosure by survivor-professionals emerged as a contentious issue. While some participants perceived it as a demonstration of transparency and resilience as explored in the literature review (Janoff-Bulman, 2004; Rauvula et al., 2017), others were concerned about the potential erosion of professional boundaries and the risk of over-sharing, both with colleagues and clients. This act of disclosure was seen as 'a double-edged sword' akin to the ambivalent consequences of professionalisation described by Bondi (2004), potentially providing opportunities for positive assumptions about honesty and healing, while simultaneously opening the door to negative judgments and stigma.

Despite these concerns, lived experience was widely recognised as a potential occupational asset, enriching professional practice with enhanced empathy, insight, and a deeper commitment to the work. However, participants also highlighted the importance of recognising the diversity of survivor experiences, cautioning against assuming that all lived experiences would universally translate into professional competence. Peer support was emphasised as crucial for mitigating the risks associated with survivor-professionals' potential emotional vulnerabilities. The role of supervision and management was also highlighted (Salston & Figley, 2003), particularly in terms of providing necessary support structures such as clinical supervision to ensure the wellbeing and professional development of survivor-professionals within VAWG services.

In conclusion, this first research phase identified a diversity in staff members' views, attitudes, and responses towards colleagues disclosing survivor status in VAWG settings. Behind these views were concerns for the safety and wellbeing of service users and the functioning of the service. Whilst care, support, empathy, and understanding towards team members with different experiences, identities, and views help organisations run well, there are limits to what is considered acceptable. Participants expressed a collective responsibility to look after each other, acknowledging the challenging nature of the work, but ultimately, ensuring all staff members positively contributed to appropriately meeting service user needs was paramount.

These findings have set the stage for a deeper understanding of the overall research and helped me to answer the research questions. Whilst the first phase of the research primarily addressed the last research question ‘What views do professional colleagues hold about survivor-professionals in VAWG and what sort of working environment does that reflect?’ These themes also influenced the direction of the interviews in Phase 2, as well as my interpretation of the Phase 2 data. Phase 2 expanded on the findings from Phase 1, which have helped to contextualise the experiences of survivor-professionals. In the following chapter, I introduce the first two of four themes generated from Phase 2 and align them with the insights gained from the questionnaire responses. This will then be followed by a discussion of the themes and findings from both phases in relation to existing research and theoretical frameworks.

Chapter 7 - Phase 2, themes one and two

7.1 Introduction

The Phase 1 questionnaire results analysed in the previous chapter provide a picture of the working environments my Phase 2 participants are situated within. The analysis suggests that staff in VAWG organisations have a variety of views on survivor-professionals and their disclosures, ranging from seeing survivor-professionals as unsuitable for work in the VAWG sector, to them having valuable additional insight and abilities and their disclosures being a sign of honesty and personal healing. This chapter examines the findings from Phase 2 and presents the first two of the four themes in consideration with the phase 1 Findings. The next chapter will cover the remaining two themes of Phase 2, leading into the broader discussion in Chapter 9.

7.2 The participants

Many participants had worked in multiple VAWG organisations, giving them varied experiences of disclosure or active concealment to draw from when answering my questions. Managing their identities and presentations in different workplace relationships was complex and appeared to be somewhat intuitive to the participants with years of experience navigating disclosure decisions. Each participant had multiple contextual and social histories influencing them, making it impossible to conclude definitively how each context affected each participant. For this reason, and to ensure anonymity, I have not shared detailed individual profiles of each participant. However, where participants' individual experiences or intersecting identities were directly relevant to the findings, I have provided the relevant contextual information. Table 1 below sets out each participant and the job roles they mentioned or discussed during their interview:

Table 1: Phase 2 participant work experience

Pseudonym	**Work experience**
Alpha	Forensic health practitioner at a sexual health service
Beta	Campaign manager at a large national campaign based charity
Gamma	Support worker for women with complex needs in a small charity
Delta	Crisis worker at a sexual assault referral centre
Epsilon	Helpline counsellor, manager at a domestic abuse charity, perpetrator programme facilitator
Seta	Social worker, anti-human trafficking charity worker, sexual violence support worker at a university
Theta	Social worker, helpline counsellor, sexual abuse charity founder and CEO
Iota	ISVA, frontline worker in a large domestic abuse charity, university lecturer
Kappa	Youth worker, counsellor at a sexual abuse charity
Lambda	Sexual abuse charity volunteers coordinator, CEO of a sexual abuse charity
Omega	Helpline counsellor, consultant at a prostituted women service, male harm reduction service, post graduate researcher in VAWG

7.3 Phase 2 themes

I used a reflexive thematic analysis method (Braun & Clarke, 2021) detailed in Chapter 4 to generate the following four themes and subthemes. Each theme aligns well with those generated in phase 1, and I have noted these connections.

Theme one: Lived experience as an asset to practise (aligned with Phase 1 theme three)

- Disclosing to use survivor insights as a tool
- Disclosure as role modelling to clients and colleagues
- Disclosing as survivor activism

Theme two: A desire for authentic relationships (aligned with Phase 1 themes two and three)

- Identifying a friend to share yourself with
- Interpersonal benefits and consequences of concealing or revealing survivor status

Theme three: Disclosure creates opportunities for judgement or appraisal (aligned with Phase 1 themes one, two, and four)

- Assumptions of impairment from colleagues
- Becoming the office gossip
- The impact of victim blaming beliefs and internalised shame
- Overcompensation and denial to guard against assumptions of impairment
- Assumptions of strength from colleagues

Theme four: The identity of the VAWG sector and its impact on disclosure (aligned with Phase 1 theme four)

- The evolution of the VAWG sector
- The by-and-for movement as a feminist ideology
- The need for credibility and its influence on disclosure

7.4 Theme one - Lived experience as an asset to practice

The first theme explores participants' disclosures made with the goal of positively influencing their own or others’ practice, including raising awareness, exemplifying healing, and improving social attitudes towards survivors. This theme supports the second research question asking what informs survivor-professionals’ decisions to disclose. For many participants, disclosure had an explicit purpose as participants disclosed in order to use their lived experiences in their work in multiple ways.

7.4.1 Disclosing to use survivor insights as a tool

> [As a survivor,] I felt much better equipped to make judgments about what was appropriate and not appropriate than some of my other colleagues. (Beta)

One of the most common reasons participants gave for being open about their survivor status at work was to to use that status as an asset in their practice, either through offering a survivor's perspective to inform the work, or by role modelling survivorhood for clients, colleagues, or wider society and stakeholders. This theme is supported by the findings from Phase 1 where participants acknowledged the value of lived experience as an occupational asset and embraced the personal as professional. Participants in Phase 2 shared how they disclosed their survivor status to colleagues as a way to 'offer a survivor's point of view' (Seta) which they felt would back up or add validity or weight to their own expertise. This was usually when they wanted to steer colleagues away from attitudes, approaches, or language that the participants saw as inappropriate or harmful to victims. Beta explained how her colleagues' way of dealing with the subject of child sexual abuse prompted her decision to disclose:

> They would say things that I thought were really kind of unwieldy and, you know, offensive at times or, you know, just wrong, whatever it was, whether it was about user language or tone or insinuation and so that used to really kind of get my back up. And so I think so I did, I did disclose to my peers[...] In part because I wanted to make sure that people understood that I had extra expertise, which would then overhaul their perspective on this subject.

Beta described this as a way to 'take control' over the charity's campaign work on child sexual abuse as it was accepted by others that her experiences gave her additional knowledge. Gamma gave an example of disclosing to a colleague working in another service after feeling 'really pissed off' at her use of approaches with service users that Gamma felt were harmful. Gamma explained that she and this colleague had a 'personality clash', in part due to the colleague saying things about clients that Gamma felt was unhelpful and not taking Gamma's advice on board. Gamma described that she felt the need at that particular time to disclose as a way of evidencing her deeper understanding of the subject and how to work with service users. Like Beta, Seta disclosed when she feared that colleagues were going to use ‘wholly inappropriate’ methods for interviewing child victims of sexual grooming, which Seta had personal experience of. Seta explained how she felt towards her colleagues at the time and why this led her to disclose to add weight to her own argument:

> I just can't sit with [the inappropriate methods]. However, you are not listening to me from the same level that we're at. I need to tell you why so you can understand, and force you to see this point of view.

Beta, Gamma, and Seta, described how disclosures were made in the hope that it would enable them to have more influence and direction over the approaches and services being delivered. They also expressed strong feelings in these situations which appears to have pushed them to make the decision. Disclosures added validity to their expertise which they hoped could be used as leverage to influence others’ practice. This was successful for Beta, but had consequences for Seta, which will be further detailed in the following themes.

Participants also described disclosing in job applications or at job interviews, again to demonstrate their expertise. This happened when participants felt their own qualifications or previous work experience might not be sufficient, but their lived experiences gave them recognisable, valuable knowledge. For example, Gamma explained:

> I had done some volunteering, but I don't feel like it was enough for somebody to wanna give me a job, so I feel like I had to add that lived experience as well.

This had positive outcomes for Gamma as her employers recognised her lived experience as an additional asset. Working within a multi-agency service, Gamma later discussed feeling the need to disclose to a member of staff from an outside organisation who was supporting one of Gamma’s service users.

> I was really pissed off at another worker from another service. And something I would never usually do is disclosed to workers from other services. There's no need for it,

> right? But [...]she says things about clients that I just don't think are helpful so I felt the need at that particular time to disclose my own recovery as a way of saying ‘I do understand this subject, you know!’

Feeling responsible to ensure that organisations produce appropriate messaging in campaigns and do right by service users and survivors was a strong motivation for disclosure. Participants not only felt that they had additional expertise and understanding, but the issues being so personal to them added to their motivation to see them dealt with appropriately. There was a palpable sense of frustration with colleagues and a desperation to ensure work was done in the way participants felt was appropriate. They were willing to risk their professional reputation by disclosing their survivor status if it meant they might gain more influence over the work. Though the findings from Phase 1 suggest that staff recognise lived experience of abuse as providing additional insight, this comes with a caveat where disclosing survivor-professionals are then more closely scrutinised for signs of impairment. This is further explored in later themes.

7.4.2 Role modelling to clients and colleagues

Some participants, particularly those in leadership roles, felt a responsibility to disclose in order to evidence the potential for survivors to heal and succeed. For Lambda, her decision to disclose was to give women hope that ‘being a survivor is not a life sentence [...] it doesn't have to define you’ and for Theta, disclosing whilst occupying a leadership position was a very deliberate act to ‘give hope and meaning to people who might be […] in the thick of it.’ Both Lambda and Theta were clear that disclosing to be role models to other survivors was important to them, however, they did not want to be viewed as brave or special for disclosing. As Lambda reflected:

> There was always this question in my mind of if the chief executive of Rape Crisis Center can actually stand up and have the confidence to say ‘I’m a survivor’, would that not encourage other women using the service to realize they can do that too? And I don't mean that as a kind of ‘aren't I brilliant’, like a martyring thing.

Role modelling to them was about creating a cultural change by doing what they felt should be standard, rather than hoping that they themselves would be viewed as inspirational. Participants intended for their disclosures to invite honesty and openness amongst staff teams as well as service users. This, again, was more commonly seen in participants who held more senior positions and therefore influence in the organisation. Managers and those higher up in organisations, by virtue of their established job positions and professional experience, may face fewer work-related risks when disclosing personal information. According to Afifi & Steuber's (2009) Risk Revelation Model, the perception of reduced risk makes disclosure easier and more likely. For Epsilon however, her disclosure during an intense, whole team reflective training exercise originally worried her a great deal as she felt she had overstepped a boundary by showing intense emotions as a senior member of staff. Contrary to her worries, her team gave her very positive feedback which encouraged her to continue being open:

> They were like ‘You led by a really good example. You were brave, you shared, you were authentic, you were honest’, you know, and I guess that made me feel quite good. And since that experience, I've moved in more of that direction.

There is a distinction to be made between not wanting to be idolised for showing bravery in disclosing a stigmatised identity, as Lambda expressed, but valuing being praised for disclosing when it benefits others in a way relevant to their job role, such as being an authentic leader. The first praises the disclosure, arguably objectifying the survivor for having been through abuse and surviving it, the second praises the disclosure’s impact, complementing the survivor-professional on how the sharing of their survivor status positively impacts their work.

Lambda intended her disclosure to normalise survivor-professionals being open about their survivor status in the workplace. She spoke about the importance of accepting human vulnerability in work spaces and likened being a survivor with experiencing other emotional challenges such as bereavement, breakdowns, and life upheaval whilst at work. She expressed that it was important for others to ‘see a whole person’ and for that reason had at times taken her ‘less resilient self’ to work. Lambda described how it was important to her that, as a leader, her staff felt they did not need to be ‘at 100%’ to come into work and that the organisation could still function at a lower capacity if necessary. Through this role modelling, she wanted to ensure that her staff knew their workplace was ‘somewhere they were always gonna be accepted, no matter how they were doing’. Likewise, Theta described trying to create an environment in which staff did not feel they had to keep their lived experiences secret. She used her own disclosure as ‘an invitation, or encouragement [to disclose],’ or acknowledgement that there would be other survivors in the room, normalising difficult experiences and promoting the idea that it is not unprofessional to be authentically human.

Not all participants felt able to disclose at work, despite wishing they could role model healing for the victims they worked with. Seta, for example, described feeling that if she’d had a role model like herself when she was a child, she would not have felt so alone or misunderstood. She imagined that a staff member disclosing their survivor status when she was a service user would have given her hope that her life could get better. Despite wishing to be that role model for the girls and young women she now worked with, Seta did not feel safe enough in her role to disclose. She described the experience of being a service user as being ‘surrounded by largely middle class white women who looked like they come from fantastic homes’ and this was apparent in the way staff in such services carried themselves as professionals. For Seta, this created a social divide between victims and professionals that was not conducive to supporting them. Importantly, Seta acknowledged there is a lack of visible representation of survivorship from those offering support to victims because survivor status is often kept secret. Seta felt the need to perform as middle class to fit in with her colleagues and avoid any class based or survivor based stigma. Being unable to safely disclose despite believing in its benefits appeared to be a strong site of conflict for Seta.

7.4.3 Disclosure as survivor activism

Several participants spoke about disclosing as a form of activism, particularly feminist activism. Though disclosing one's own survivor status is a very personal experience, Lambda and Theta spoke about utilising disclosure as a tool to raise awareness of VAWG as a common and universal problem relating to patriarchal oppression rather than individuals’ situations.

Disclosure was seen as a way to combat silencing, stigma, and stereotypes, and to help other survivors know that they are not alone. For Iota, disclosing her survivor status in a professional capacity as a company CEO was a way to 'break those myths of the classic victim' and Seta stated that she thought disclosing was 'empowering and it's very important for the room'. Lambda also reasoned that:

> [disclosing] stops it being this secret, hidden, underground thing that happens that noone can talk about and starts shining a light on it and normalising it […] we need to be able to talk about rape and violence and abuse and name it for what it is and not whisper it in corridors.

Participants also spoke about their thoughts and feelings around survivors disclosing on public platforms. We discussed how some survivors work as 'experts by experience' to inform practice or publicly discuss their lived experiences as a form of activism. Whilst some participants described positive experiences of this, others spoke about not wanting to become the 'token survivor' (Seta) for their organisations or have to deal with the risks involved in being publicly known as a survivor. There was also the unwelcome risk that being seen as an 'expert by experience' would cause people to assume the survivor-professional wasn't also an expert by training and profession or hadn't achieved their job position through putting in hard work if they had. In all cases, participants were professionally qualified for their job roles, even though some expressed feeling they could be more experienced. It was in these cases where disclosing lived experience during the job application or interview process was used to bolster credentials.

Some participants said that speaking publicly as a professional and a survivor was an opportunity to challenge the 'othering' of victims and break down a dichotomy between victims and the professionals supporting them. Some participants felt comfortable sharing their survivor status or experiences of abuse on more public platforms such as on the internet, in the media, at rallies or conferences, or by publishing autobiographies. Others regarded this as a step too far for them personally, despite feeling that there would be a social and political benefit to it. Beta described being offered a job role which involved being public about her survivor status. Originally, she thought this would be the 'perfect conclusion to my whole life history', allowing her to merge her personal and professional experiences to work on a cause that really mattered to her. However, after further consideration she grew concerned that it could end up dominating her identity and take her ‘down some tunnel’, particularly as unlike her current job role, the new one would focus entirely on child sexual abuse.

When considering survivor activism, Omega expressed concern over the risks involved with public disclosure due to its irrevocable nature ‘it's a one-way ticket, right? Like, once you've disclosed, you can't un-disclose.’ She also spoke about wanting to be known and understood as a person and friend, and not to be put on a soap box by others. She expressed concern over the potential for strangers to openly judge and dispute her experiences and made particular mention of the danger of men’s rights activists tearing apart survivors’ stories and telling them what they should and should not consider abuse.

Overall, the participants recognised that their own survivor status or the knowledge gained from their own lived experiences could be used to benefit service users, improve practice, and have a political influence. However, in many cases, they would be required to expose themselves to evidence and justify their ideas and approaches before their colleagues would allow them to be used. Participants had to consider the benefits of disclosing, however publicly, against the potential risks to their professional reputation and personal sense of identity. They were drawn to disclose by their desire to help and protect others, but at times, keeping their survivor status concealed was the best way to protect themselves.

7.5 Theme two - A desire for authentic relationships

Theme two considers participants’ motivations for disclosing their survivor status. Participants described how it was normal to share personal information to form and deepen relationships with colleagues. This could be in the form of direct disclosures of survivor status or it could be information shared in conversations that suggests survivor status such as in discussions around mental wellbeing or as Kappa articulated ‘those kind of nonverbal, not explicitly stated kind of disclosures [...] that gives [colleagues] a little inkling'. This theme also explores the challenges of identity concealment on deepening relationships, and the drive that many participants expressed to be honest and true to oneself.

7.5.1 Finding someone to share yourself with

Participants described how they disclosed to colleagues in a social capacity after establishing a close friendship with them, and for some, this closeness was essential for the sharing to occur. These disclosures could take place outside of work in more informal social settings which established the relationship had moved beyond a professional one. It wasn't always clear for participants how welcome these disclosures would be. Delta said she worried sharing her experiences with her friend and colleague who worked as a crisis worker would burden her with additional work outside of work hours, but the friend was supportive. My analysis suggests that socialising outside of work is an indicator that a disclosure would be welcome and seen as appropriate as the relationship was progressing from a professional collegial relationship to a friendship. Lambda, for example, said:

> The only people that I've told at work are friends and that's why I've felt able to share it. It's like, OK, we've gone out for a glass of wine and would be coming, kind of, friends, Now I can tell you this bit about myself.

Participants gave examples of how they would assess whether or not someone was safe or appropriate to disclose to. They described how they only shared their survivor status with those they believed would understand and respond appropriately. This process of selecting an appropriate confidant is detailed in the second stage of Omarzu's (2000) Disclosure Decision Model. It helped if the target disclosure recipient had already displayed an appropriate response to others' disclosures or shared their own survivor status. Lambda described a series of questions she would run through in her head to decide if someone would be an appropriate disclosure recipient:

> The next question is always like, how do I think it will be received? Is the person open to a conversation? Do I think it can be held and managed in a way that doesn't end up in that hierarchy Bingo? Am I confident that that other person, if they are a survivor, will feel able to say if they want to? Will it shut them down?

The existing literature on disclosure tends to focus on revealing stigmatised identities to individuals who do not share the same stigma (Muir, 2001; Ellemers & Barreto, 2006; Flett, 2012). However, Lambda highlighted the unique complexities of disclosing in a VAWG context, where the recipient may also be a survivor. She explained that, in such cases, she must consider not only how her disclosure will be responded to, but also whether it might trigger the recipient's own trauma. Additionally, she considered the possibility of the recipient becoming competitive about their abuse experiences, downplaying Lambda's experiences by asserting that their own abuse was worse. This 'hierarchy bingo' is a phenomenon Lambda had previously witnessed from others.

The 'testing' of potential confidants by observing how they respond to the topic or to others' disclosures is discussed by Kelly and McKillop (1996) who describe how secret holders may 'float trial balloons' by introducing the topic jokingly or inadvertently. In the VAWG sector, however, the topic of survivorship is constantly responded to, meaning survivor-professionals considering who to disclose to need only observe potential confidants' attitudes and responses towards survivors. Omega discussed a relationship with a senior colleague who publicly spoke about being a survivor himself. Omega and this colleague had also built their relationship over several years and he had shared his experiences with her. Additionally, she had seen how he positively reacted to others' disclosures and the way he talked about men's violence against women and girls generally made her trust him. For Omega, that trust and friendship was essential for her to disclose. Knowing this colleague was also a survivor gave her confidence that he was a safe confidant. Theta gave a similar example of disclosing to a commissioner who she regarded as a trustworthy friend who she knew 'kind of got stuff'.

It appeared that for many participants, the decision to disclose was influenced more by the available confidants than the survivors' personal feelings about their survivor status. Many expressed how they felt comfortable talking about their own abuse experiences, but the barrier was the potential consequences of others' reactions. Seta made this explicit:

> It's not me that feels uncomfortable to talk about it. Maybe I wouldn't go to a big conference [and disclose on stage], but I could talk about it, but I feel that I can't do that [at work], because of other people.

Seta's example illustrates how not all VAWG workplaces had staff or colleagues who the participants felt would respond well to a disclosure. This appeared to be due to the organisational culture, a sense of colleagues' discomfort around the topic, or through a lack of training or understanding on the part of the potential receiver. Omega took a new role away from frontline service provision and at the time of the interview, was involved in a VAWG research group within a university. She said that she did not consider disclosing in this research group because she did not think relationships between colleagues were close enough and that the researchers in her group were 'not savvy enough' to understand the complexities of VAWG and respond appropriately. Omega theorised that this was because as researchers, her group believed themselves to be 'always one step removed' compared to frontline practitioners, and were therefore less emotionally engaged and responsive.

However, being a step removed did not feel applicable for Omega as a survivor. The lack of depth of understanding or consideration of trauma, vicarious trauma, and trauma stewardship (van Dernoot Lipsky, 2010) from Omega's research colleagues made her distrust that they would be able to handle the knowledge of having a survivor on their team. She felt that within the university, their approach to properly managing the risks and challenges inherent in VAWG research was insufficient. This created a barrier as trust that the disclosure would be handled appropriately by people who understood the emotional and political complexity of the issue was essential for Omega to disclose. In contrast, Theta experienced feeling safe to disclose in organisations that addressed the emotional and political layers of VAWG survivorship. She compared the different cultures and expectations between statutory services and grassroots charity sector organisations that she had worked in. She spoke about how it was easier to feel welcome to 'bring your whole self' to the more politically active workplaces where anger was an acknowledged and welcome part of the work. This aligns with Lambda's intentions as a VAWG charity CEO to create a work culture where the personal life challenges of the staff are accepted rather than seen as a detriment to the functioning of the organisation.

Apprehensions around disclosing to certain people sometimes stemmed from the participants' own sense of awkwardness or embarrassment with particular individuals. In other cases, it was due to a lack of confidence in advocating for themselves if the response they received was negative. Additionally, some were unsure how to describe their experiences when they did not fit into a conventionally recognised model of VAWG that would be easy for others to comprehend. For Beta, disclosing to her senior male colleagues was necessary for her to explain why she wanted to take the lead on a child sexual abuse campaign project. However, despite them being 'all very nice [and] behaved in the nicest way I could have hoped for', she felt 'a heightened degree of awkwardness' explaining to male colleagues that she had been sexually abused by another man. Gamma felt that she needed to conceal her survivor status when she was new to her role as she didn't want people to think she 'couldn't handle it' since she was not yet confident enough to defend herself if those assumptions were made. For Omega, the biggest challenge preventing her from disclosing was the concern that the unique specifics of her experiences would be difficult for others to understand. In all these cases, the participants felt secure in their survivor identity, but had apprehensions around how they might respond to the reactions of particular confidants due to the confidants' knowledge or characteristics.

Many participants spoke about how they felt it was possible to identify trauma survivors through intuition or picking up on subtle signs and hints such as their passion or sensitivity, without the survivor having to consciously disclose their survivor status. They thought that fellow trauma survivors and people with a lot of professional experience in the field were more able to pick up on these signs. Beta explained that survivors were more likely to be sensitive around their language use and would be less likely to display inappropriate perspectives, signifying their survivor status and therefore their trustworthiness as confidants. Iota talked about a friend at work who recognised Iota’s partner was abusing her and who tried to support Iota in the situation. Iota believed that this friend’s ability to identify that Iota was being abused and to support her well came from the friend's own experiences of trauma and recovery. Kappa spoke similarly about the insightfulness of her experienced trauma therapist colleagues and how it is possible to pick up on subtle, non verbal signs to identify survivor colleagues. There were also more overt, non-verbal signs that allowed others to identify survivors and potential confidants. Lambda explained that she had scars from self harming which were ‘quite obvious…so lots of people knew just by virtue of seeing and connecting dots’.

Many participants brought up that the VAWG sector was likely to attract survivors to work in it, increasing the amount of potential trustworthy colleagues to share disclosures with. Omega and kappa both expressed that survivors were drawn to the sector, usually due to personal experience or the experiences of someone close to them, and nobody ends up working in VAWG accidentally. Though personal experiences as motivation for working in the sector is recognised in the literature (see McMillan, 2004) participants went on to say that the presence of survivors was a well known but often unacknowledged or unaddressed fact. Delta stated:

> Obviously the statistics of violence against women and girls is humongous. So I feel like so many people who work for organisations who deal with that, there must be so many survivors, hence probably why you're doing this study. But they do need to acknowledge more that there will be people who haven't disclosed anything.

The findings from Phase 1 also indicated that staff believed a significant percentage of their colleagues had similar abuse experiences to the women or girls their service supports, with some participants believing that survivors made up the majority of staff.

The participants talked about their own role in being potential confidants for others or creating cultures of either openness or silence within their organisations. Seta gave an example of the latter. A colleague had expressed that she predicted one of their service users would not be able to overcome the extent of her trauma from sexual violence. Seta wanted to reassure her colleague that there was hope for the service user by disclosing that she had experienced similar trauma and recovered, but due to past negative experiences of disclosure at work and the culture of non-disclosure in her workplace, she felt unable to share this.

Theta was surprised that more women in her organisation had not disclosed. Whilst she was fine with her staff not disclosing and reiterated that it was their choice, she found it interesting that not many did when she had done all she could to remove barriers in her organisation and disclosed herself. She reflected that those who didn’t disclose must have come with their own barriers which prevented them from wanting to or feeling able to disclose, regardless of how welcoming of disclosure the workplace was. Iota acknowledged that while VAWG organisations are likely filled with survivors, some may be more prepared or willing to speak about their experiences than others. She remarked ‘the sad thing is… we all do this masking’ highlighting the prevalent use of impression management, a theory by Goffman (1959) which posits that individuals manage how they are perceived in social situations by controlling the information they share with others. Despite an environment that could seem supportive of disclosure, Lambda and Theta observed that the default behavior for many remains one of masking and concealment, even when there are signs that their disclosures would be well-received. Notably, participants did not express any psychological difficulty with the act of disclosure itself, despite avoidance of discussing traumatic events being a clinically identified characteristic of trauma survivors (Nachar et al., 2014). This may be unsurprising given their work in the VAWG sector, where discussing issues related to abuse is a regular part of their professional lives. Instead, their primary concern was how others would react to their disclosure, focusing on the potential social or professional consequences rather than the emotional challenges often associated with revisiting traumatic experiences.

7.5.2 Interpersonal impacts of concealing or revealing survivor status

Disclosing to a friend in the same workplace was helpful to some participants as it meant they always had a trusted person around whom they could be themselves with. Befriended colleagues offered the benefit of understanding the specific demands and challenges of the work. Without this, the work could be more challenging, as Delta experienced after a friend left the organisation.

> I think I have actually struggled since [the friend I disclosed to] left because I don't have someone who completely gets it. Whereas if I have a hard case now and I come back into the office, it's like people don't quite understand why something's upset me so much or you know, that sort of thing.

Several participants talked about having positive or close relationships with a supervisor or manager they had disclosed to whom they received ongoing support from. These managers were a listening ear but also able to provide practical accommodations like time away from frontline work when needed or flexibility of working hours to attend court trials or therapy. Epsilon described being given the opportunity from a manager to step away from frontline work to do other duties after a triggering event as ‘a life saving experience’. This enabled her to look after herself during a difficult time but still keep her employment and ‘help in other ways’, which was important to her. Delta praised her supervisor for supporting her in recognising her own emotional responses to the work and managing dissociation during triggering tasks.

> it is really important to like, not dissociate too much because you need to recognise what's going on inside and what, why it has made you feel that way. But I would say, like our supervision, like our supervisor is just amazing and, like, that's something that has, I've really progressed since I've worked at [SARC NAME] like the, I've really become a more reflective person within those situations than I was before.

Kappa also talked about a manager she first met during her job interview. Her first impression of the manager was that she was understanding and welcoming of survivor-professionals and throughout their working relationship, this proved to be true. For Kappa, being treated as a competent professional and not a ‘vulnerable delicate little thing’ was very important and the understanding manager was able to offer this after Kappa disclosed.

As well as practical benefits, sharing experiences of VAWG with colleagues was recognised as being a potentially empowering and healing experience that created ‘a sense of comradery, […] solidarity, and sisterhood, whether you're a survivor or not’ (Epsilon), particularly when there was a shared feminist belief that ‘all women are survivors of the patriarchy […] all have lived experience of surviving sexual violence’(Lambda). Epsilon explained how over time, sharing her survivor status turned her sense of shame into something empowering that now fuels her to do the work she does:

> The shame reaction turned into like this empowerment, I suppose, over time, and it just kind of fueled, you know, my energy… I feel very fortunate and lucky for what I've been able to do and how I've turned this experience into something that pays for my bills. It's something I just get up and feel really proud to be part of and love doing. You know how many people on this planet can say they love their job?

Disclosing was also seen as a very normal part of getting close to people, bonding, and making friends. The sharing of personal information helped colleagues ‘see [the survivor-professional] in a more sort of multi-dimensional way’ (Beta). Delta described how closeness in relationships grows over time through incremental disclosures, ‘the more you get to know people, the more, like, little drips come out.’ This idea aligns closely with Altman and Taylor's (1973) Social Penetration Theory, which explains that intimacy in relationships develops progressively as individuals gradually reveal more layers of themselves. However, participants, particularly if carrying internalised shame or blame, still worried about being seen as unprofessional or crossing boundaries, impacting their relationships. This concern was very strong for Epsilon who said:

> I think there's just the virtue of like.. going against the grain where… it's just not normal to disclose yourself and share personal details, especially in a work setting. So there's that fear of am I gonna get sacked? You know, that was mine. That was my first go-to like ‘Oh my God. Have I crossed a boundary? Am I not professional?’ you know? So any fear I think that, yeah, it's packed, the shame is… You know, the shame comes from telling, you know, the worry…

Concerns were similar for Omega who worried about disclosure being seen as a ‘social faux pas’ in British culture which she would not be fully aware of as an American new to living in the UK. She explained that she had experienced other situations where she’d made ‘a social gaff’ with friends at work ‘that wasn't handled with grace’. This made her weary of disclosing her survivor status in case it was viewed as socially inappropriate to share such personal information at the stage their collegial relationships were at.

Conversely, Alpha, who was attacked after a night out with her colleagues, originally didn’t want them to know what had happened. She didn’t express any worries that her colleagues would see her as unprofessional or damaged after being raped, yet she acknowledged grappling with intense feelings of shame and self-blame in the aftermath. These emotional responses are common and well-documented following sexual assault (Bhuptani & Messman-Moore, 2019). Although Alpha understood, on a professional level, that shame and self-blame are natural reactions to sexual violence, this knowledge did not shield her from experiencing them at the time. Unlike other participants whose abuse experiences were less recent, Alpha’s acute trauma response likely influenced her desire to conceal her survivor status. For others, barriers to disclosing appeared to be external to them and focused around fears of their colleagues’ reactions.

Disclosures often appeared to be influenced by the participants’ desires to be authentic and merge both their professional identity with their personal identity. Some participants described themselves as naturally open, honest, people who were comfortable with some forms of vulnerability. As a counsellor, Kappa described herself as naturally being ‘somebody who's very congruent’ in reference to the Rogerian core conditions of counselling (Rogers, 1967), and Alpha described herself as not being good at keeping secrets ‘so I think for me to disclose it was the best decision really’. Kappa explained that concealing her survivor status would never have been a long term option with the work she does:

> There's always gonna be a point where I have to explain [my trauma] and I'm really of the philosophy that I shouldn't have to hide who I am, that my experience adds to the work that I'm doing…. It just doesn't feel right for me to hide that.

The catalyst for Epsilon's disclosure was 'a combination of ingredients'. She was in a safe environment with trusted colleagues, and felt that she 'just couldn't NOT integrate and assimilate those parts of myself anymore'. She felt like her disclosure 'wasn't even a choice' and though she initially experienced intense feelings of shame afterwards, 'it was this big weight lifted as well, of just being like 'this is what it is. I am authentic'.

Disclosing to achieve authenticity was not limited to sharing one's survivor status, but included being authentic in all areas of life. Omega spoke of how she appreciated other colleagues being authentic and straightforward with aspects of their own identity because it enabled her to understand them. She hoped that being open about her own survivor status would enable others to feel the same trust and safety with her. Epsilon also spoke about a desire to work in an environment where everyone was open, authentic, and willing to share about their lives and true feelings, rather than just 'disingenuous[…]small talk'.

As Delta had already been very open with her manager about her health and disability issues, she felt it was also important to be truthful about her survivor status. After a triggering incident that caused her to need to take the day off work, she explained:

> I could have said 'Ohh I've got a headache' or something, but I just think like, we work in in an organisation where we hear [about sexual abuse trauma] every day, and I just think if [my manager] knows it's about that, there's really nothing that I can do to make that go away… So I think it was just like, I have to be honest.

For many participants, there was a sense that if there was any workplace where one should be able to be authentic and open about their survivor status, working in a VAWG organisation should be it. Omega emphasised that when disclosures are handled well, it helps keep people in organisations, benefiting retention rates and from my interactions, participants who were comfortable disclosing at work appeared the most content in their job.

Taken with the above findings, it appears that trust between colleagues does not necessarily need to be established before a disclosure is made; rather, it is the response to the disclosure that determines whether a trusting relationship, leading to a trusting workplace culture, can be built. On the other hand, in cases where the participants' disclosures received negative responses, or when they felt their workplace wasn't safe to disclose, the lack of collegial support and the difficulties of having to actively keep their survivor status secret created a barrier between themselves and their colleagues. This barrier appeared to impact participants' overall happiness and sense of belonging or wellbeing at work. This was especially pertinent for Seta whos childhood sexual abuse experiences had a pervasive impact on much of her childhood, adult life, and identity. This meant that she constantly had to proactively conceal information about herself that others freely shared (for example, conversations around family or stories about teenage experiences) as it could lead to her needing to explain why her childhood was not conventional. This constant concealment would 'spiral' as she censored many facts about herself to avoid further questioning. This prevented her from forming closer relationships with her colleagues.

When participants were not open about their survivor status, they felt colleagues filled in the blanks and made incorrect assumptions about them or their backgrounds, which they didn't like. Omega and Epsilon both expressed frustration at how colleagues would create stories and narratives about them that disregarded their lived experience insight. Seta said her lived experiences made up 'a huge part of my identity' and the longer she kept her survivor status a secret from her colleagues, the harder it became over time to correct their assumptions of her having had a positive and privileged childhood, resulting in her feeling like they didn't know her at all.

> It's distressing in a way, because you really are hiding a part of your story and of your life and your [...] it's almost like you've committed a crime, right? And you just don't want people to know about it and I, and I put a lot of energy into that.

This struggle to reconcile their internal identity with the perceptions held by their colleagues aligns with Swann's (1983) Self-Verification Theory, discussed in chapter 1 which explains that a disconnect between how one sees themselves and how others perceive them can lead to significant distress.

Omega theorised that not receiving the expected positive reaction to a disclosure could lead survivor-professionals to ‘shut down around it’ and socially withdraw from the colleague they disclosed to. However, they would still have to continue to work with the colleague every day which would become uncomfortable and awkward. She explained that not wanting to carry around the memory of a negative experience or feel overexposed around a colleague was a reason for not disclosing, evidencing that even if the disclosure recipient’s response could not affect the survivor-professionals access to work or professional reputation, it could still lead to interpersonal conflicts and social discomfort.

This theme has explored how the desire to socially connect with colleagues and form authentic relationships through sharing personal information was shared by many. Though women who held positions of greater power and influence in their organisations were less likely to report having received negative responses to their disclosures from colleagues, the feelings of professional vulnerability, internalised shame, and uncertainty around the social acceptability of disclosure were often the same, if not stronger, as self-imposed expectations around professionalism and strength may be higher for managers and supervisors. This was summarised well by Epsilon:

> As humans we wanna connect [but] once you've put that out there, you have no control over how that person uses that information or how they view you and that is what makes you vulnerable […] you get this shame reaction. With employers, it has the potential to be higher because they hold positions of power and influence.

7.6 Summary

In this chapter, I have considered the key motivations for survivor-professionals' disclosures and the factors survivor-professionals have to consider when deciding whether to conceal or reveal their survivor status. It explores the significance of workplace culture and peer relationships on disclosure decisions and outcomes.

Theme 1 analyses how survivor-professionals leverage their lived experiences as assets in their practice. Disclosures are often made to validate their expertise to influence colleagues' attitudes and approaches and ensure appropriate handling of important and sensitive issues. Disclosure is also important for achieving the broader cultural and political aims to reduce stigma and shame for survivors. This analysis emphasises how the survivor-professionals' personal connection to VAWG further motivates them to disclose in order to achieve their aim of supporting victims of abuse, even though doing so risks exposing themselves to increased scrutiny.

Theme 2 addresses the interpersonal motivations and consequences of disclosing or concealing one's survivor status. Disclosures are made to both facilitate deeper connections with colleagues and for some participants, to maintain a sense of personal authenticity. However, the decision to disclose is influenced by the perceived safety and appropriateness of the potential disclosure recipient. Survivor-professionals, therefore, must select their disclosure recipient carefully as being open about survivor status can pose a risk to one's professional reputation, collegial relationships, and overall comfort and wellbeing at work. The next chapter will examine the remaining two themes of Phase 2. These will cover the vulnerabilities and risks tied to disclosure and how survivor-professionals manage these, and the broader socio-political influences that shape disclosure decisions within VAWG organisations.

Chapter 8 - Phase 2, Themes three and four

8.1 Introduction

The previous chapter covering themes one and two examined participants' motivations for disclosing their survivor status, as well as how they navigated the complex process of selecting disclosure recipients. It highlighted the personal and relational benefits and challenges of disclosure and concealment along with the barriers participants faced in deciding whether to disclose. This chapter introduces themes three and four, delving deeper into the implications of disclosure. It looks into the risks of one's survivor status being known and how the choice to disclose is perceived by others. It also analyses how participants managed the consequences of concealing or revealing their survivor status. The last theme examines how the historical and political context of the VAWG movement shapes disclosure decisions. In particular, it looks at the tension between authenticity and maintaining professional credibility in a sector dependent on external funders and stakeholders and how this dynamic can potentially compromise the values of the VAWG sector and women's anti-violence movement.

8.2 Theme three - Disclosure creates opportunities for judgement or appraisal

Choosing to disclose can mean choosing to make oneself vulnerable to others' opinions and reactions, leading to both positive and negative consequences. In this theme, I explore how colleagues responded to disclosure and how these responses were managed by the participants.

8.2.1 Assumptions of impairment from colleagues

Most participants described being aware of how disclosure of their survivor status opened them up to being judged or viewed and treated differently. This risk was evidenced in the Phase 1 findings where staff raised concerns about survivor-professional's abilities to maintain professional boundaries and carry out their roles whilst managing trauma. The possibility that they could be judged as impaired by colleagues was an important factor when considering whether the potential benefits of disclosure would outweigh the risks.

The risks associated with disclosure were discussed by participants during different parts of their interviews. As previously mentioned, whether discussing public disclosure as activism, disclosure to managers, or offering advice to other survivor-professionals, variations on the phrase 'once it's out, you can't take it back' were emphasised by many. For participants, disclosure meant losing control over the information. This could have consequences on their reputation and their identity. Epsilon expressed:

> Once you've put that out there, you have no control over how that person uses that information or how they view you and that is what makes you vulnerable. And it's risky.

Vulnerability was a salient topic in both phases of the research. Many participants expressed discomfort around feeling vulnerable and being perceived as vulnerable by others when that vulnerability was not in their control or when it was viewed as a risk by others. However, controlled and intentional vulnerability was sometimes seen as positive and necessary to build authentic relationships with colleagues and clients.

> As humans we wanna connect and we wanna... to connect we need to be vulnerable (Epsilon)
>
> I'm happy to be emotionally open and honest and vulnerable in a different way and by […] Like I am somebody who's very congruent. I am somebody who will share what I'm feeling (Kappa)
>
> I'm reasonably confident in meeting spaces, I'm able to hold my own, I am also able and

> have been incredibly vulnerable at work (Lambda)

Beta offered a nuanced reflection on how others' reactions to the disclosure of past victimization could potentially influence how survivors come to view themselves. This aligns with Cooley's (1902) Looking-glass Self Theory, which suggests that individuals shape their self-concept based on how they believe others perceive them (Siljanovska & Stojcevska, 2018). In Beta's words:

> I guess by disclosing anything where you've been victimised, whether it's about sexual abuse or domestic violence or anything else, there's a risk that you, you're, you're sort of self-image and how people perceive you is altered as a result of that, and that there is potential negative consequences that might come with that that maybe you haven't thought about.

If others perceive the survivor-professional differently after disclosure, it might challenge their internal sense of identity, leading to potential distress or a re-evaluation of self-worth which is a consequence they may not have been able to predict. The vulnerability inherent in disclosure was not just about external consequences of opening up to others but also about managing the risks that disclosure posed to one’s identity and self-concept (Quinn & Earnshaw, 2013). When disclosing something as sensitive as a survivor status, participants, like Beta, were not only vulnerable to how others might judge them but also to how those judgments could seep into their own self-image. The looking-glass self highlights this dual vulnerability where survivors must balance the external risk of disclosure with the potential benefits, all while navigating how such disclosures might reshape their understanding of themselves.

Similarly, Epsilon acknowledged that her own fear that her colleagues would view her differently if they knew about the survivor side of her identity was a greater barrier than the reality of their actual responses.

> it's been a journey of reconciling and consolidating those two identities and working through those defences and barriers of shame and you know, the fear of not being taken seriously. I suppose that the fear of disclosing that to colleagues and them not necessarily holding me in the same light. So I think that that has been the big challenge

> and it’s been more myself probably, than actually the opinions of others that has been the barrier.

This speaks to the internalised anxieties that often accompany disclosure, even when external judgments may be more lenient than expected (Scambler, 2004).

Survivor status being viewed as a sign of weakness or vulnerability was one of the greatest concerns for the participants. Some felt the need to hide their survivor status to avoid others making those assumptions. For example, Lambda was concerned about being seen as weak, vulnerable and unable to do her role as opposed to her lived experience grounding her knowledge of what services users may need:

> Are they gonna go down the route of, you know, basically seeing me as this very vulnerable weak incapable person rather than understanding that actually for me, that experience and knowledge really grounds, I think, an understanding of what individuals approaching a rape crisis service might be going through

Seta described a stark status shift after disclosing to a manager:

> I was highly respected there and I'd worked my way up really quite well and...her eyes almost came out of her head. I honestly, I can't explain to you… errm, and she didn't really know how to respond, even though that's her job. K?, so her job as well is to work with survivors. She couldn't, Could not comprehend these two things being the same... You know what I mean? She couldn’t compare that I may have gone through that and she was very, very anxious and from that point onwards, I would constantly get ‘how are you? No, really, how are you?’ I'll be like... I'm fine. Like nothing has changed...? I suddenly, suddenly I’d gone from here [raises hand to indicate height] to someone that's clearly got no resilience or coping skills. And I'm clearly having a closet mental breakdown or something and, and it just wouldn't shake. Just couldn't shake and she wouldn’t come to me for the same things or the same advice, or the same questions, it just changed. It just was a full 360 change.

These assumptions of weakness were noticeable to participants when they received responses from others that felt, to them, patronising or overprotective. Gamma, who had disclosed to a worker from another service, described the worker as tip-toeing around her afterwards. The worker went out of her way to offer accommodations, claiming she didn't want to put Gamma's recovery at risk. She found it unhelpful that the colleague was only showing concern now that she was aware of Gamma's survivor status when nothing had changed in Gamma's work performance to indicate risk or vulnerability. Participants discussed that a more welcome response to a disclosure would be one of simple acknowledgement, accepting the disclosure as no more than a contribution to a conversation (when it was presented as such) without any extrapolation about the survivor-professional's abilities or needs. Kappa also felt patronised by a colleague after making an indirect disclosure about experiencing nightmares from trauma:

> Her response was a lot more like 'oh Sweetheart, I just wish I could give you a hug' and it was just kind of like 'I'm fine', like, if you think me talking about my night terrors and my sleep paralysis is the peak of my traumatic experience then like…. Like, I'm completely fine… It made me feel small. It made me feel patronised. It made me feel like that vulnerable, delicate thing that I'm not.

Kappa also described that this type of response made her feel misunderstood, impacting her connection to her colleagues as well as her self-image.

> Anyone that's known me for more than 5 minutes knows that I'm not particularly vulnerable and delicate, and it was kind of a just a bit like 'you really just have no clue who I am as a person'. And I'm not against hugs, I'm actually quite a big fan of hugs and you know, that I like, I like having that connection with people in my life. But when it's done in a 'oh you poor, delicate, little fragile thing,' that – Oh fuck off! And I know it was meant kindly. And I know it wasn't meant to be patronising and demeaning. But like, no, I'm fine. I don't need a hug.

Lambda had similar experiences and felt, like Kappa, that whilst such comments were well intended, she sensed that people were insincere with their care, and comments meant as praise or admiration instead were received as patronising.

> There are people that can be fake, they're well intended, and they're trying to be really supportive. but end up being really patronising [...] so one individual that I work with as a freelancer and she's like, haven't you done well for yourself despite everything you've

> been through, I mean, she's right, like, and it's sweet that she recognizes it. And also I'm a bit like ‘Oh, come on’.

Overall, participants found this type of response difficult and unwelcome. They wanted to make it clear to colleagues that they were not lacking in resilience and were more than capable of doing their job and looking after and advocating for themselves if needed. My analysis suggests that there is a delicate balance to be struck between providing appropriate collegial care and support, and allowing space for vulnerability that positively contributes to the work, versus being overprotective or offering unwarranted concern which disregards colleagues’ professional abilities to manage themselves. For my participants, having their resilience or survivorship overemphasised also appeared to make them feel singled out or patronised, rather than respected for their professional capabilities.

Participants discussed being pushed into accepting accommodations or performing acts of self care that they felt were unnecessary for them and undermined their ability to know and meet their own needs. In these instances, assumptions were being made about what they needed, rather than them being asked or trusted to advocate for themselves. Gamma identified that compared to colleagues who were not known to have lived experience of abuse, she was being treated differently:

> I found that I was being told at times to do certain things that I wouldn't necessarily do or being kind of managed into managing myself and my self-care when actually, I think I'm the one that really understands what's best for me and how much I can handle and things like that, and so I found that difficult at times. [...] Because I was the woman with lived experience, I felt that, compared to my colleague who was a support worker as well, I wasn't always respected as a professional. And so like, I don't see someone saying that to my other colleague who didn't have the lived experience. So I felt like I was handled with care. You know? and people worried about getting it wrong rather than listening to what I was saying.

Seta also resented having special adjustments pushed on her. She wanted to be trusted in the role that she chose to take on in full awareness of its potential challenges.

> I don't need any special adjustments or, I can manage myself. And if I need, I know how to seek support if I need. And I know my limits and, etcetera, But I've chosen to go into this role, right? And, and, and I can do this!

Resilience is a contested concept or label (Park et al., 2020; Goward & Torsney, 2024). Fisher and Jones (2024) and Park et al. (2020) argue that the 'fashionable buzzword' is rooted in a flawed Western theory of suffering, well aligned with the neoliberal ideology of individualism. Fisher and Jones (2024) also highlight how it can cause iatrogenic harm by minimising external factors that cause or contribute to the challenges people face. Kappa expressed a strong dislike for the word resilience, even though she acknowledged she had plenty of it. She described how, when faced with triggers at work, she could manage her reactions quickly and privately. What seemed to frustrate her most was the assumption that she would struggle to handle everyday workplace challenges. This stemmed from the fact that what she had survived during her abuse was far more intense than anything work-related:

> I hate the word resilience, but I've dealt with much more complicated, difficult, harmful shit than a stressful work meeting [...] I was worried that people would be like, 'Oh my God! Like, are you OK?' Like, what? I don't need that. I'm totally fine.

The notion that a colleague might think she would find a simple work meeting hard to cope with may have felt invalidating to Kappa as it downplayed the significance of her past experiences which were far more traumatic and required true resilience to survive. In such moments, there can be a desire for recognition of the real strength and depth of what one has overcome. This desire for Kappa can be understood through Axel Honneth's social philosophy of Recognition (2012) which posits that people are driven to seek recognition from others in order to develop a healthy sense of self. This helps them to maintain positive relationships with others as it stabilises their sense of self. It also relates to self-verification theory, discussed in previous chapters, which suggests that people seek to have others see them as they see themselves (Swann, 1983). In Kappa's case, she saw herself as someone who had faced and survived extreme adversity, so when colleagues viewed her as someone potentially fragile or incapable of handling stress, it clashed with her self-concept. This disconnect could cause feelings of frustration and incongruence as the need for others to recognise the depth her true strength remained unmet. On a more practical level, like Seta, Kappa was concerned about the risk to her job if she was viewed as lacking resilience, which may heighten her drive to be recognised as strong.

This concern by participants was not without cause. In some cases, an assumption of weakness or vulnerability by colleagues or managers led to participants having their work responsibilities or career opportunities restricted against their wishes and without consultation. For example, Gamma had to fight to be able to continue supporting her service user clients after disclosing and Kappa had previously experienced being taken off her job role in a youth service after a serious breakdown, which she now believes was the right thing to happen. However, it caused her to later carry the fear that such restrictions would be repeated if she disclosed again. Kappa explained that staying busy with her work and throwing herself into it was ‘the thing that keeps me going’ and she feared that after putting in many years of work to qualify for the VAWG specific therapist role she really wanted, it would be taken away from her.

Seta has a similar fear after a negative disclosure experience. After a disclosure led to her being seen as vulnerable, pitied, and restricted at work, she expressed that she would not disclose again as the risk of losing a job she loved was too great. As a registered social worker, she feared being pulled up by the social work regulator if her professional abilities were questioned as a result of her survivor status.

> the risk that I would have to take to say something is risking a job that I love. So it's not worth that risk… erm.. Because I certainly don't want to create that environment again where I was seen as as some kind of, you know, poor, poor member of staff

Seta’s quote here demonstrates how these past experiences lead to participants being very cautious about future disclosures, even when, as Kappa explained, they believed those original work restrictions were appropriate at the time.

> I was basically taken off of my role. [...] And looking back at it now, absolutely without a doubt I should not have been working with young people because I was a fucking mess.

> But...It was still a fear that I carried with me that if I gave an impression that I was crazy or vulnerable, then the work [...] was gonna be taken away from me.

Gamma reflected that whilst there were some things she found quite difficult about the work, those challenges didn’t mean she was incapable of performing her role appropriately, especially when given basic support all staff should be offered, but this wasn’t recognised.

> There was some things that I found quite difficult about the work. - Doesn't mean I can't do them. It just means I need support… you know, have someone to debrief with afterwards. but I was never asked ‘What do you need to be able to do it?’ I was just told ‘you're not doing it. No, you're not doing it. We'll send somebody else’

These restrictions could be put in place as a blanket ban on survivors working for VAWG organisations. Theta described knowing an organisation that outwardly did not allow survivors to work for them on the front line, advertising on their website that service users would ‘never be seen by a survivor’. Theta expressed that ‘if it looks like we're a bunch of survivors then commissioners won't take us seriously’.

Epsilon and Theta, who were both in senior positions within their organisations, acknowledged that some of their fears around being perceived as incapable and having their work restricted might be unrealistic. However, despite knowing that their apprehensions might not reflect reality, this knowledge did little to assuage their fears. Theta reflected:

> I think it's a fear [of disclosing] I mean, I might, I just might not have been very attentive, but I don't think so. I think my fear of being judged and labelled and discounted, it has been greater than the actuality.

This highlights the tension between rational understanding and emotional experience. While logically they understood that their fellow colleagues were unlikely to judge them harshly, the fear of negative consequences still had a powerful hold. This may have been reinforced by their awareness that external organisations such as commissioners could hold the view that survivors do not make appropriate professionals which will be explored more in the next themes.

The fear that disclosure could lead participants to be discriminated against or restricted in their careers seemed to have a powerful impact on how participants felt about their survivor status and their decisions to share or conceal it. Epsilon and Lambda explained that there was more to disclosing survivor status than simply making others aware that they had experienced abuse in the past. Epsilon feared that she would be sacked for crossing a boundary as it's ‘just not normal to disclose yourself and share personal details, especially in a work setting’, indicating that the problem was at least partially the act of disclosure itself rather than the content of the disclosure which was a strong theme in Phase 1. Additionally, Lambda talked about how disclosing her survivor status indicated other personal aspects of her identity or came with potentially having to disclose additional trauma related mental health challenges.

> I think for me, it was that if I disclose my experience of being a survivor I'm potentially also then having to disclose the difficulties I faced that come with being a survivor and the fact that I haven't worked for a long period of time and will they then just look at me and think I don't have the resilience, ability, capacity, et cetera to be able to do this job?

Again, identifying that it may not only be the victimisation itself that survivors are judged for, but the often associated impacts of psychological trauma, or what choosing to disclose may indicate about a person's social boundaries.

Participants sometimes experienced other professionals assuming they would be too subjective and emotionally close to the subject of VAWG or their service users experiences and therefore would be biased or irrationally swayed by their own emotions. This was a recurring theme brought up by the participants in Phase 1. Questions around the survivor-professional’s subjectivity led participants to a fear that their professional observations, theories, and contributions would be discredited or ignored, creating another barrier to disclosure.

Theta, who spoke strongly about VAWG politics and disclosure as a form of activism, described not wanting to give people a tool to discredit her valid feelings and beliefs around sexual violence and the system that fails victims. She felt this could weaken her political argument.

> I just thought if they knew that I was a survivor of CSA, they would probably think my anger was me having a chip on my shoulder as opposed to a really reasonable appropriate level of anger about the system, and I just didn't wanna give them that to play with… I didn't want that in anybody's head… It was a personal thing about it, 'You're not having me. You're not. You don't get to label my reasonable anger in a way that suits your view of what a survivor is'.

Omega shared about working with a research colleague who researched adolescent perpetrators of sexual violence. This colleague had given a few presentations to the team where she made no acknowledgement of the harm to victims which concerned Omega. Omega explained that she brought this up to the researcher and 'showed some emotion' in the conversation.

> I wasn't, like, outwardly angry with her… but I did say, like, 'You know, I think it's really important to think about this and, like, sometimes, you know, like, whose side are you… are we on somebody's side?'

The researcher responded to Omega by insinuating that the issue she had raised was a case of Omega being over sensitive due to her personal experiences, rather than having a valid point.

> O: Her initial response was like 'Ohh yeah, it's important to remember that these are emotional Issues' and I, like...
> Z: Eargh! Like 'That's just your feelings'.
> O: Right? Thank you! Thank you! Cause I was like, my God, is that acceptable to say?
> These are difficult issues that people have valid emotional responses to!

These disclosure experiences, along with the findings from Phase 1, illustrate how survivor-professionals who disclose, often in an attempt to add credibility to their ideas and approaches, place themselves at risk of losing their power and credibility instead, depending on the beliefs and assumptions of the disclosure recipients.

Participants acknowledged that there were times where they found the work challenging due to it being close to their own experiences and that this had the potential to become a problem, but they each spoke about how they managed that, often with supportive team structures around them or by doing the necessary therapeutic work on themselves beforehand. Additionally, Omega expressed that subjectivity does not have to be regarded as a weakness and she wished that the valuable insights of lived experience would be recognised and publicly acknowledged more. Omega's view challenges a belief that professional objectivity offers a more valid form of expertise over experiential knowledge (Beresford & Boxall, 2013), suggesting instead that personal experience, when appropriately managed, can offer invaluable insights and contribute to a more holistic and empathetic approach in the workplace. This highlights a complex relationship between personal experience and professional identity in the VAWG sector. These findings suggest that whilst lived experience can enhance a professional's insight and empathy (Zerubavel & wright, 2012; Bernhardt et al., 2019), the potential for misinterpretation or devaluation means that disclosure must be navigated carefully to balance achieving their goals with self-protection. When disclosing, they must advocate for the recognition of their expertise without falling prey to the misconceptions that appear to accompany disclosure, highlighted by the findings from Phase 1.

8.2.2 Becoming the office gossip

Disclosure also carried the risk of the survivor professional ‘becoming the office gossip’ (Beta). Seta believed this was the reason she was taken off of her duties after she disclosed to one person, she said ‘I am sure that the news travelled around […] because everything changed for me after.’ This was another reason why Seta chose not to disclose in her next job. Her concern was not with people knowing about her survivor status, but with them discussing it behind her back

> I don't want to be people’s secret, so, you know, in the office, or go ‘Do you know that so-and-so experienced this?’ I've got no time for that in my life. If you've got a question, come and ask me, tell me, that's fine. I'm open.

Omega expressed the same concern. She felt that due to her supervisor having a close friendship with other colleagues, gossip would spread more easily. This was a new and difficult situation for Omega who explained that she had never been in a situation before where she felt like she could not share things with her colleagues.

The findings from Phase 1, theme four further illustrated how work teams often took it upon themselves to report concerns to managers and supervisors. While gossip can have negative social consequences, it can also result in increased managerial oversight, which participants often experienced as overprotection or unwelcome restrictions on their professional responsibilities. On a personal level, this issue extends to the loss of control over one's identity and the management of how they are perceived by others, a concept closely tied to impression management (Goffman, 1959), covered above. My findings indicate that when survivor-professionals disclose, they risk losing control over this impression management, as their story and identity become subject to interpretation and gossip outside of their direct influence. This appears to heighten feelings of vulnerability and stigmatisation for participants, as they felt gossip or unsolicited protection from managers reinforced stereotypes or assumptions about their emotional or professional capabilities. This may further perpetuate the cycle of stigma, where survivors may be seen through the lens of their victimhood rather than their competency and resilience. It may also create a social divide where the survivor-professional, though open to answering questions about their experiences, is not approached by colleagues who may feel it is inappropriate or unsafe to directly enquire about it, as expressed by Seta. Thus, increasing the survivor-professional's social isolation whilst her colleagues bond over the gossip, pushing her further out.

8.2.3 The impact of victim blaming beliefs and internalised shame

The participants had witnessed others, including those working in the sector, holding victim blaming beliefs. For some like Alpha whose attack was publicised in the media, this very directly related to her own experiences and may have impacted how she felt about being open with colleagues.

> it was all over facebook, some people’s comments were really positive and apparently some people’s comments were really negative, you know, people do, don’t they, they post all sorts of blame. Saying it was my fault and I shouldn't have been walking home at that time at night and I deserved it [...] I think that at the beginning when I didn't want anyone to know, I think that would be because I kind of blame myself, you know, maybe I shouldn't have walked that way. I shouldn't have walked on my own. I shouldn't have done this.

Epsilon shared about working in a housing department as an advocate for survivors of domestic violence where ‘there’s still some pretty horrible victim blaming views […], misunderstandings, and misogyny that plays out’. She reflected on how hearing those views about clients from others at work ‘outside of the interview room, when we were all back together in the office’ could impact how survivors working in the organisations view themselves, or causes them to fear being judged by colleagues in similar contexts. Omega had similar reflections within the context of her specific workplace which impacted how much she was willing to disclose. She felt that the VAWG researchers she now worked with, being a step removed from victims, were less likely to be as understanding as frontline practitioners:

> I think there is somewhat of a stigma with, like, domestic abuse survivors, potentially. Like ‘oh you keep getting into these situations’ right?[...] and because researchers are so different than practitioners, I'm learning that that[…] people kind of like are all along the continuum of understanding the dynamics and like making judgments or not making judgments about people.

The participants also recognised that they’d had past experiences of internalised shame and self judgement which impacted their decision to be open about their survivor status. Iota discussed the self blame and humiliation she felt being a victim of domestic abuse, whilst also being aware that this caused a sense of ‘cognitive dissonance’ as she would never blame a client, friend, or colleague experiencing the same.

> I think also it took me a long time to forgive myself for not being able to end the relationship before because that's the classic thing, and again, it's a line I've always

> hated. 'Why doesn't she just leave?' Always hated that, and I understood.. But it's like... but even when I was so sure that I could leave, how come it didn't end? And it took me years to work it out and it's like, because he just wouldn't bloody let me! [....] it was humiliating at the time, it was. It just felt like something to be ashamed of, that I had allowed it to happen.

These experiences deepened participants' awareness of the pervasive nature of victim-blaming, both from others and from within themselves. They illustrate how common negative reactions to survivor status can be, even among professionals who have undergone training or are presumed to be more aware and supportive.

8.2.4 Overcompensation and denial to guard against assumptions of impairment

Participants said they would sometimes try to overcompensate or put on a tough front, either consciously or unconsciously, to defend against an assumption of weakness and oversensitivity. Epsilon spoke about there being a 'kick-back' after disclosure: 'like, work really hard to compensate, you know? to prove yourself.' For Kappa, this 'tough front' response was often triggered at work but for reasons such as having not slept well the night before rather than anything to do with her own trauma. However, she feared her response would still be put down to her being triggered by the work. She explained that on those days her response is to:

> …kind of be very much be 'Not A Trauma Survivor', and be very strong and very independent. I can still emotionally connect with my clients on those days, but I don't emotionally connect with my colleagues in the same way on those days. And I think there's almost this underlying thing in me that if I show a moment of weakness when I'm actually feeling weak then people go 'Oh, look, she's too fragile. She can't do this work'.

Omega reflected on how before she had fully processed her own abuse experiences, a subconscious response for her was to present as very 'guarded, aggressive [and] antagonistic' around the topic of VAWG as a way to avoid addressing her feelings around her childhood abuse. She explained how she would 'have been the one bringing in kind of like the toxic masculinity perspective' around topics such as sensitive use of language, to emulate a toughness.

Some participants described going out of their way to avoid being identified as survivors by attributing the insights from their own experiences to someone else such as a former client or service user, or by omitting personalised details from stories they shared. For example, Gamma shared with her colleagues that she had been a witness in a court case but she did not share that the case was related to her own childhood sexual abuse. Seta explained that in her current role, she would go so far as to 'over-egg the fact that I haven't experienced sexual violence, even though I have' because she didn't want to have a repeat of the experience where she was discriminated against in her previous role for her survivor status. However, she found this act of displacing her experiences to fictional others to be an additional labour.

> [Not disclosing] can be quite tough at times. And because I think sometimes I do have some quite relevant things [that] I could say… However, I have to find a way to try and say it from the perspective of someone else.

8.2.5 Assumptions of strength

Participants also shared about times they had experienced their survivor status being respected and viewed by others as a strength. Beta was able to share her survivor status through the story of winning against her abuser in court which framed it as an 'impressive tale of resilience', suggesting that when the abuse is not the main subject of the disclosure, stigma or assumptions of impairment may be reduced. Gamma felt that the way disclosures are framed can influence how well they are received. When talking about discussing during job interviews she explained:

> It was always like, you know, 'we really respect your honesty' and yeah, I just, I feel like these interviews I've done, where I've actually got the job, because sometimes I go blank, they've actually gone really, really well and people have felt quite inspired when I've, you know, weaved in my, my, my own [experiences].

She agreed that survivors could sometimes be 'put on a pedestal' in cases where survivors had overcome a great deal of trauma and now appeared to be thriving. This in itself could be an unwanted response for some such as Lamba, as reflected in the previous chapter, but no participants mentioned that being seen as strong or an inspiration for their survival put them off disclosing or made them regret being open about their survivor status. It was, however, disliked when one's personal strength was attributed to their abuse experiences rather than an inherent quality of their own character. Lambda expressed:

> I've done well for myself cause I've worked bloody hard for it, frankly. It's like, you know, and it's not really about what I've lived through, it's more about my tenacity.

This theme has highlighted the importance of survivor-professionals carefully considering the decision to disclose their survivor status, as doing so exposes them to others' judgments and opinions, which can influence how they are subsequently treated. Disclosure can have both social and professional consequences, affecting working relationships and potentially leading to unwanted interference or overprotectiveness from colleagues or managers. Survivor-professionals must navigate these risks carefully and have mechanisms for achieving safe outcomes. Some choose not to disclose at all, while others go to lengths to deny their survivor status. Some manage to frame their survivor identity as a strength during disclosure, while others may overcompensate by consistently displaying heightened resilience.

The data showed that participants deeply valued being trusted as competent, capable professionals who could perform their job safely and effectively. They wanted to be seen as qualified and to have their choice to work in VAWG respected. A lack of trust from colleagues not only impacted their social standing within the workplace but also undermined their professional credibility and agency.

As a manager herself who also recruits and interviews job applicants, Theta emphasised the importance of treating everyone as 'adults with agency' who can assess for themselves if they are mentally or emotionally capable of working in VAWG. Self awareness, the ability to be self reflective, and the presence of other positive things in a staff member's or job applicants' lives mattered more to Theta than whether they had experienced abuse or not. Theta felt that an employee's ability to cope with the subject of VAWG and manage their experiences should be the focus of any supervisor or job recruiter, rather than whether or not the staff member or applicant had survivor status.

> I think people are adults with agency… and I think they can make decisions about what is right for them and whether they are good for whatever they're going for. And a good recruitment process will test and push and challenge people in all kinds of areas. You know, just as you know, you'll ask somebody, you know, to evidence what kind of project management skills they've got, you would ask somebody to talk about you know, what kind of, what strategies for kind of, their own health and wellbeing they've got and we don't ask that of everybody. And I would be looking for that, for somebody who is self aware and self reflective and has got good stuff in their lives whether they are a survivor or not.

8.3 Theme four - The identity of the VAWG sector's impact on disclosure

This final theme looks into the impact on the wider structural context of VAWG organisations on staff disclosure. It considers the socio-political system VAWG and VAWG organisations sit within (McMillan, 2007; Lomazzi, 2023) and the influence of the sectors' origins and mission. It highlights conflict between needing to appear credible and avoid the stigma of the individual impacting on the organisation, balanced with the desire to champion person centred, radical approaches to the work, all of which underpin survivor-professional's disclosure decisions. I begin by analysing the discussions I had with participants about the identity of the sector and later address how these reflections were pertinent to how participants viewed disclosure decisions in modern day VAWG organisations.

8.3.1 The evolution of VAWG services

Organisations working to address VAWG often take on multiple roles, for example, they may work to help victims heal and recover emotionally from abuse and prevent repeat victimisation, advocate for victims in the criminal and family courts, conduct research around the topic of

VAWG, or campaign for awareness and policy change (Jones & Cook, 2006; Hague, 2021). They may operate within statutory services such as a Sexual Assault Referral Center within a hospital or police station, as private sector organisations, or as part of the third sector as registered charities or nonprofits. Most participants spoke about their work experience in charities and nonprofits which were mostly service providers or focused on campaigns.

It would not be unreasonable to assume that VAWG sector workplaces would be safe places to disclose in. Indeed, participants reflected that they felt that survivor-professionals should be able and feel safe to disclose in such places if they wanted to, or that the environment in their own workplaces helped them feel comfortable enough to disclose. Beta, Lambda, Theta and Epsilon all spoke from manager or director roles and felt that their workplaces 'must be like the safest environment that there is [to disclose]' (Beta) and 'a really soft landing space' (Theta) for survivors. This is reflected in theme three of Phase 1 which spoke of how some participants considered survivors in the workplace to be perfectly normal, common, and a positive thing, and theme four, which covered the importance of colleague's having each other's back and offering peer support and understanding.

Participants often spoke more broadly about their opinions and observations of the VAWG sector and how it has changed or developed since the first women's refuges and Rape Crisis services were opened in the mid 70s. Iota reflected on how VAWG services at the time were often founded by survivors back when charities were less regulated and therefore easier to form.

> From like the 70s, you have all these amazing little grassroots organisations that sprouted up from feminists who managed to leave abusive marriages and they were able to do that because the regulations were different and the charity sector was different and now it is a big business

Participants reflected specifically on how many former grassroots, often survivor-founded VAWG charities (along with the professionalisation of the charity sector overall) have moved away from valuing intrinsic knowledge and more informal peer support models, and sought to professionalise their approaches and reputation. Some VAWG services began to be run much more like the statutory services they were in competition with for resources and professional influence, whilst others were able to maintain their de-medicalised approach (McMillan, 2007). Epsilon described how the privatisation of public contracts created limited resources for VAWG organisations who had to funnel those resources into risk reduction work. Lambda also reflected that 'statutory services take a much more medicalised 'cope and recover' treatment approach' whilst Rape Crisis Centers, take a more 'holistic, whole person de-medicalised approach'. The differences in these approaches seemed to influence how comfortable or secure participants felt around disclosing their survivor status.

Epsilon, amongst others, described feeling that she and her staff were 'standing on the shoulders of giants' in reference to the feminist activists who set up the original VAWG organisations. Participants reflected that they felt the move away from person centred work to more process focused work was unhelpful to the women they wanted to support and it did not follow an empowering ethos. Even the adoption of the term 'service user' felt wrong for Epsilon as it 'infers that they have to be complying to what that service wants them to do'. She continued:

> What we should be saying to women is 'what's brought you through the door?' not shoving consent forms and risk assessments and safety plans and all of that in their faces and saying 'come on, engage with this'. It's more like just, you know, 'what, what are you here for? What's going on? What do you wanna have change? How can we help you?' And then go from there.

Participants thought that this move away from more holistic, activism focused models meant that the problem of violence against women and girls begins to be viewed as belonging to the victim as an individual rather than to a collective society with a responsibility to address it. This approach increased the sense of blame towards the victim, or viewed the victim as flawed or psychologically damaged. Lambda felt that 'the medicalised world - the scientific worlds has kind of swallowed Rape Crisis up a little bit.' She explained how medical diagnoses such as Complex Post Traumatic Stress Disorder 'individualises the problem' and that regulated professional counselling and one-to-one support have become dominant treatment methods for victims (Peters, 2019). In her interview, Lambda made reference to Vera-Gray’s (2020) sickness model which critiques the shift from addressing the root cause of societal issues to treating individuals as if they are sick or broken. This reframing of the problem of male violence against women diminishes the focus on activism and broader social change (Vera-Gray, 2020). Lambda further explained:

> we've lost all of our activism. You know, we should be spending as much energy trying to end violence against women and girls as we do supporting women that have experienced it, but what we do is pick up the pieces over and over again.

Despite situations where participants felt they could provide a better, more personalised service to women by being person-centred and client-led in their approach, participants expressed that to not follow the official professionalised processes such as DASH risk assessments with victims would risk the service losing its accreditation when it is audited. This seemed to be counterintuitive and frustrating to the participants as it limited their ability to use their interpersonal skills or bring elements of themselves and their own approaches into their work.

Even though it was acknowledged that there are benefits to the more bureaucratic ways of working such as better safeguards for workers and more robust recording systems, participants explained that these professional boundaries and rules have created a very different type of service and organisational culture to the ones provided by the original VAWG organisations. Epsilon explained that whilst she appreciated the need for evaluation, monitoring, and data collection, she felt it was ‘outbalanced [and] outweighed the person centred way of working.’ This shift in approach to supporting victims and combatting VAWG contributed to participants' feelings and decisions around disclosure. She emphasised:

> As a professional, you wouldn't reveal your survivor status to a survivor client [these days], you know, and maybe that would have been different back in the day as well, because these women would have been like ‘I've been there. I'm here to help.’ … could you imagine? We couldn't get away with that these days.

8.3.2 The By and For movement as a feminist ideology

Participants expressed a belief or understanding that ‘all women are survivors under patriarchy’ (Lambda), that we all suffer from patriarchal violence or the threat of violence, and losing touch with this understanding meant that what was once a ‘by and for movement’ (Labda) of women working to fight against patriarchal oppression became a service delivered by professionals for individually vulnerable women who became victims of abuse. Omega shared the idea that we are all collectively harmed from hearing about the abuse of other women:

> There was a term [my mentor] used that was like there's this, like psychic wound that like violence and abuse like causes and it's for all of us, you know? like and I, and it's something that I really believe like, Even if I've never been sexually assaulted, everyone's sexual assault that I hear about affects me, you know? And like, even like the ones that I don't necessarily hear about, but I know about, like, affects me. It affects my life and like I, you know, like when I hear about it, I feel it in my, I feel things in my body, right?

This idea of a collective harm reduced the divide between victims and women who had not been directly abused. Participants spoke of how there is now an impression of a dichotomy between women who receive services and who are the subject of campaigns and research, and the professionals delivering the services or projects and who conduct the research. Epsilon spoke about how before she brought humanistic approaches into her organisation and way of working, she felt that her professional approach refused her permission to connect with service users on a human level.

> I studied Carl Rogers' humanistic approach and it's quite basic isn't it? But once you get those core foundations, it gives you permission, in a way, to connect with that, with another person on a humane level and, you know that, and I, you know, I think sometimes, I mean, and I guess so far back I'd… but I do remember feeling I had a professional divide.

Lambda described the movement as now ‘speaking from fragmented voices’ and ‘not using the language of ‘us’’. She shared about seeing policies in some VAWG services that banned former service users from working or volunteering in the organisation, and described it as an 'arbitrary boundary' which increased stigma and the sense of a divide. This dichotomising of survivors and professionals was thought to have weakened the movement and become a barrier to VAWG organisations achieving what they set out to achieve. This separation also made it harder for survivor-professionals to be open about their survivor status or feel like they would be understood and accepted. Seta felt that despite everyone working for the same goals, disclosures from professionals were not well received and the voices of survivors are not given credence due to the prominence of this dichotomy between victims/survivors and professionals.

> Well, I don't think [disclosure is] taken well. Erm, I just think that people think...So we're all working in the core, in the mission because we all really care about it. However, I think when you've got us and them, those victims over there and us as the heroes come in to help, Those two wheels just don't mix, so disclosing if you are the healer, for example, the helper… I Just don't think, it just doesn't go well. Because they're not ready to hear it from their side.

Participants suggested that when staff working in VAWG services only ever see examples of victims of abuse who are in crisis and whose lives and mental health are in chaos, it creates an impression of how victims and survivors present and what they look like. This could make it harder for professionals to imagine that a victim could heal enough from their trauma to take on a professional role in the VAWG sector. Seta felt this was very true in her experience of trying to convince a colleague that she was stable and capable of doing her job despite her own abuse history:

> We pick [these victims] up from wherever they were, a brothel or whatever, so they're in crisis, right? and they're in crisis for most of the time. And so I think that [the colleague I disclosed to] struggled to see that I could have been that, because she just seen the finished piece, you know?

Kappa added that many of the clients her service works with are unable to work or leave their houses, and 'aren't doing much of anything active in their life'. Compared to herself who is now ‘in a better place’, having come off disability benefits and gained employment, it can be easily missed that ‘professionals have the same shit and they might be further ahead, but it's still there.’ This lack of open representation makes it harder for staff in VAWG services to imagine survivors as capable, functioning, and emotionally healthy women on par with themselves. This is both a consequence of a lack of survivor-professional disclosures, but also a cause for its perpetuation.

8.3.3 The need for credibility and its influence on disclosure

As illustrated by the first theme of Phase 2, most participants felt that their lived experiences were of value to them in their work for multiple reasons. This was also covered in theme three of Phase 1, where participants acknowledged lived experience could be an occupational asset.

Participants spoke of many ways their lived experience or survivor status benefited their work. They explained how it enables them to be more reflective and empathic, helps them understand the practical realities of what victims go through, acts as a source of passion and motivation, and it gives them confidence and permission to advocate for victims and challenge others when needed. However, many participants reflected that they felt intrinsic, lived-experience knowledge was far less valued by others, compared to professional qualifications which carry more credibility. Lambda expressed this as:

> We've ended up with a lot of like, ‘I am a professional and I have a counselling qualification and that's what means I'm capable and credible of working with you’ rather than ‘I'm a survivor and I've got that intrinsic knowledge of what the world might be like for you and can empathise and understand and normalise it for you’, which I think is as good and as important as a skill as against counselling qualifications.

Participants felt that lived experience knowledge was discredited as anecdotal and subjective. Omega spoke about this in the context of academic research traditionally expecting researchers to act as an outside, objective observer, or to at least mitigate for their subjectivity through emphasising their engagement in reflexivity. Omega felt that in her experience, VAWG researchers had to ‘pretend to be objective’ which she felt did not ‘serve the cause’.

Lambda spoke about having many conversations about the discrediting of intrinsic knowledge whilst studying for her Masters degree.

> People talk about anecdotal evidence as less credible than quantitative or qualitative or, you know, full research knowledge. And we had a lot of conversations about, actually, anecdotal evidence is just as valuable, just as important. And we need to get much better at capturing it.

As discussed in the literature review in Chapter 2, there have been shifts towards recognising lived experience knowledge as a valuable resource, particularly in services and organisations addressing human rights and social issues, including VAWG (Sandhu, 2017; Beresford & Boxall, 2013; Roennfeldt & Bryne, 2021). Peer support models and the coproduction of services with service users have increased in popularity (Roennfeldt & Bryne, 2021) but this has not yet reached the level of returning to the by-and-for movement that the original grassroots women’s organisations achieved. Iota expressed that other services could ‘benefit from the work and understanding of the decades of experience domestic abuse charities have’ rather than relying on ‘professionals with blah blah blah backgrounds rather than actual lived experience.’ Iota felt that this was slowly starting to change but it was not going far enough. She gave the example of organisations having a trustee with lived experience or ‘someone that sort of pops up from time to time’ but not having key workers or directors who openly identify as survivors.

These reflections reveal the complex and often contradictory attitudes within VAWG organisations, creating a challenging environment for survivors who work in the sector and who consider disclosing their survivor status. There is a compelling argument for encouraging survivors to work in the sector and supporting them in being open about their lived experiences. However, my findings suggest that disclosure of survivor status can lead to a loss of credibility and respect from peers or outside agencies as survivors are associated with assumptions of impairment (Zerubavel & Wright 2012). These perceived risks can overshadow the potential benefits of having survivors who are open about their survivor status on the team, resulting in their contributions being undervalued. As a result, survivor-professionals may be left uncertain about how safe, appropriate, or beneficial it is to disclose, navigating the conflicting pressures of being open about their experiences while simultaneously feeling the need to conceal them to maintain professional credibility.

According to the participants, following formalised, licenced processes and being staffed by qualified professionals increases the credibility of VAWG organisations in the eyes of commissioners and other external agencies who act as stakeholders. Theta thought that relying on subjective or personalised approaches, and being open about the nature of the organisation being operated by survivors and feminists could put the organisation at risk of not being taken seriously. She said she wouldn’t have disclosed back in the 90s when charities were seen as ‘much more amateur and less-than’ because of the risk that people would think the service was ‘run by a bunch of women who couldn't cope or are distressed all the time.’ Professionalisaition was said to be the price to pay to be taken seriously by commissioners and funded. This meant that for Theta, operating her organisation in the 80s-90s, it was a strategic decision not to be open about the survivor status of the staff.

> Back in that day, the charity sector wasn't quite as organised. It was seen as kind of a poor relation. It didn't have a lot of, kind of processes and procedures, you know? We kind of just got by, then. But it was evident there was no money in the bank so, you know, I thought my job was to try and keep the organisation alive and, you know, I guess we set about professionalising it and coming up with those policies and procedures and making a lot of friends with commissioners in the local authority. And it just never occurred to me to disclose my status at that time when I was trying to steady this ship and bring the money in.

A reputation that a service lacks credibility or is of lower status may not only affect funding for the organisation, it could also impact how the organisation is able to act as a voice for women and the power they have to advocate for women and be taken seriously by other agencies such as the criminal justice system. Epsilon wondered if not disclosing would give her, and by virtue, the organisation she managed, more credibility. She felt that her service already struggled to be influential and was of ‘low status to begin with’. This lack of power meant when they attempted to advocate for women against other agencies such as benefits or housing agencies or statutory social services, her organisation was less able to ‘open doors’. Epsilon asked herself:

> looking at it [as a] practitioner identifying as a survivor, would I want to risk reducing my credibility in that person's eyes because of society's view and because of how we've professionalised this sector? Which, is there anything to lose if we haven't really got the status despite how we professionalised?

Participants felt that the suppression of the survivor status of staff in VAWG services created an incongruity with the message many of these organisations tried to promote. This was challenging for the participants who felt that organisations should align their actions with their stated principles to, as quoted by Epsilon, ‘practise what we preach’ and ‘be the change we want to see’. Lambda asked:

> How on Earth can you expect other people to come in and talk about their experiences of sexual violence and not be prepared to do it yourself?

Epsilon expressed feeling sad about losing opportunities to do ‘pro-social modelling’ by using her own survivor status to create a working environment where discussions about shared lived experiences were welcome. She felt that ‘we do have to bring ourselves into this work’ but her current employer did not encourage any discussion around survivor status or the lived experiences of staff, making her feel very disconnected to the work. She said she did what she could within her own team, but that it was difficult when that organisational culture wasn’t being modelled ‘from the top, from leadership’.

Participants noted that in some organisations there was a lack of acceptance of the presence of survivor-professionals or of disclosures from them. They felt this perpetuated the idea that survivors could be disadvantageous or even dangerous to the organisation. Seta expressed:

> We just need acceptance. I don't know what people think.. that loads of survivors are going to come in and start going absolutely wild and unable to control?

Theta spoke about the organisation she knew that advertised how their frontline staff were not survivors as a positive thing. She understood that ‘if it looks like we're a bunch of survivors then commissioners won't take us seriously’ and wondered ‘What's the implication of that? That survivors are all, excuse me, fucked up or something?’ Lambda expressed that this was a hypocritical and contradictory stance to take:

> I don't see how we can think it's right and nurturing and safe to ask other survivors to be coming in and [disclosing] as part of their healing, but a sign of a lack of healing or a lack of boundaries in the staff to do it.

In summary, participants described how professionalisation across the charity sector has helped organisations to gain credibility in the eyes of external funders, agencies, and other stakeholders. Unfortunately, this has meant that some of the VAWG services and the survivors working in them have had to let go of some of their original activism and the by-and-for model of their work. This has also influenced participants' decisions around disclosing their survivor status as it could have an impact on the reputation of the organisation or sector as a whole. Lambda felt that this had ‘created this fragmentation and mess of a sector’ and felt that VAWG organisations had ‘lost such a massive part of our her story and knowledge and understanding’.

Despite pressures to professionalise for the sake of an organisation’s credibility, participants mentioned that there are still successful VAWG organisations that are able to survive whilst maintaining a culture of openness around survivor status and draw from those more person-centred, holistic ways of working with clients. Epsilon felt this was true with a recent workplace of hers. In previous organisations, there was no space to be open about her survivor status, but joining an organisation that had many staff members who were open survivors ‘almost gave me permission to be like ah ‘Ha. Yeah, of course [I’m a survivor!]’’ and that she didn’t have to be ashamed of it.

Many of the participants found that working in VAWG had been a healing and educational experience for them, allowing them to ‘continue [our] recovery journey’ (Seta), but it had also been a space to find and promote feminist viewpoints and embrace a collective anger directed at the injustice of male violence. Beta felt that survivors found themselves working with other survivors because it was ‘a helpful way of processing the whole experience and making something positive out of it.’ Epsilon shared that she loved the quote by Gloria Steinem ‘The truth will set you free but first it will piss you off’ and she felt it was very true to the experience of working in the VAWG sector. For Omega, her understanding and perspective of her abuse experiences grew during the 36 hour training she received after signing up to volunteer on a domestic abuse hotline as an early role in VAWG. Seta also described the education staff receive when starting work in VAWG as a catalyst for a feminist awakening and a space where ‘you can be angry’. She expressed that whilst her organisation allowed her team to do ‘lovely things’ in supporting victims of abuse, the knowledge of the injustice faced by women and seeing the weekly news of more women being abused caused the team to work ‘with a kind of purpose and vigour’ that was fueled by ‘an ongoing outrage’.

Participants explained how increased awareness and immersion in feminist perspectives that come with working in the VAWG sector lead many women (including some of the participants themselves) to fully recognise themselves as survivors. They reflected that being part of such an environment where survivor status is not just acknowledged but also embraced and normalised can be supportive and healing. The participants' experiences suggest that working alongside other survivors and within a framework that actively challenges male violence helps survivor-professionals to better understand and accept their own experiences. This collective healing experience may also inspire or motivate survivors to disclose their survivor status, not only as part of their personal recovery but as a form of collective activism. The solidarity and shared anger against the injustice of male violence could create a space where survivor-professionals feel more comfortable in their survivor identity. As they witness others being open about their experiences, they may feel empowered to use their own stories to challenge stigma and contribute to systemic change, recognising disclosure as an act of defiance and therefore activism.

Finally, the participants spoke of the need to have more conversations around the subject of practitioners' lived experiences and survivor identities to openly acknowledge the survivor status of staff. They desired to bring a culture of openness to their organisations but it was thought that this 'has got to come from the top' (Theta). Omega suggested that these could include discussions about organisational policies on staff disclosure and how disclosures are responded to. Iota felt that such conversations should be something everyone should have 'as part of our mandatory training' and Seta suggested that recruitment advertising could state 'We welcome survivors to apply' to demonstrate their aim to be inclusive. However, she emphasised that organisations would also need to respond appropriately to job applicants and staff if and when they did disclose to ensure genuine inclusion. These changes could help support a workplace culture where the challenges associated with disclosure are reduced.

In relation to the second theme discussed in the previous chapter, Beta felt that it was important to use personal disclosure (not necessarily of sexual or domestic abuse) to 'forge really strong workplace relationships in order to be a sort of high performing team' and this came down to company culture. She thought organisations that already fostered strong workplace relationships felt like safe spaces to disclose in. Kappa described her managers talking very openly and personally about vicarious trauma and how having personal experience of abuse can make experiencing vicarious trauma more likely. Whilst Kappa didn't necessarily agree that personal trauma made vicarious trauma more likely, hearing the conversation created an opening for her to disclose her survivor status. This is an opportunity that she valued. Lambda felt it was important organisations improved at 'allowing the reflective space to talk about [survivor status] and what it means.' She felt that conversations with staff teams that allowed staff to 'unpack and tease out how complicated it can be' were of enormous benefit and she advocated strongly for more cross team conversations on the topic of managing professionals' own survivor identities and lived experiences. These suggestions show a strong appetite for conversations about survivor status in the workplace.

Lastly, Seta challenged the potentially tokenistic trend of buying in lived experience speakers to train professionals when so many professionals are survivors themselves. She called for a culture shift where staff disclosure was accepted and integrated into the work as valid and valuable knowledge. Normalising and integrating the lived experienced knowledge of staff in the VAWG sector could reduce the challenges of disclosure, making it a more accepted aspect of professional identity. In environments where survivor experiences are openly discussed, the pressure to carefully weigh the risks of disclosing might lessen, and assumptions of impairment and associated loss of credibility for individuals and organisations may be reduced.

8.4 Summary

Overall, my findings from both phases of the research build up a picture of how women working in the VAWG sector navigate and manage decisions around disclosure. Participants shared how various experiences, jobs, and relationships in their professional lives have influenced their sense of safety and confidence when disclosing their survivor status, or, conversely, have led them to be cautious about whom they confide in. Both concealing and revealing survivor status had significant impacts on participants' professional identities and how they chose to present themselves at work. For some, disclosure resulted in increased respect from colleagues, greater responsibility, social connection, and a stronger sense of empowerment and authenticity. For others, disclosure led to feelings and experiences of isolation and a loss of power. These outcomes were shaped largely by how the disclosure recipients and the wider workplace responded to the disclosure.

It is worth considering that all the survivors who participated in this study were in a comfortable enough position with their survivor status to discuss the topic with me, which likely explains why none identified internalised shame as a reason for concealing their survivor status in their current workplace. However, some did mention that, in the past, shame or other internalised defence mechanisms had been a barrier not only to disclosure but to recognising themselves as victims or survivors deserving of being heard. For most participants, their lived experiences underpinned their value base and passion for the work but they preferred to integrate it as a joint or secondary, rather than primary, source of insight, allowing them to maintain a broader professional identity.

Interestingly, though one of the questions I asked towards the end of the interview was on how larger statutory services compare with smaller, usually women-led charities, the participants who spoke the most about the changing political identity of the VAWG sector did so before I reached that part of the interview. That theme tended to run through the conversation like a central thread, which discussions around disclosure experiences were then hung from. This suggests that for those participants who spoke in detail about feminist values in VAWG organisations, their identities as activists against male violence was as important to them as their identities as survivors, or as Lambda, Theta, Omega, Kappa, and Epsilon might put it, as women under patriarchy.

I next turn to a detailed discussion of the themes covered in this chapter and the previous two. I will examine how personal, social, and structural forces intersect to impact survivor-professionals' experiences of disclosure, how these fit within existing literature and theory, and what this means for survivor-professionals and the organisations they work for.

Chapter 9 - Discussion

9.1 Introduction

In this chapter, I consider the findings covered in the previous three chapters to examine the personal, social, and structural influences on disclosure experiences with reference to literature and theories. I begin by exploring the effect of disclosure in forming relationships, solidarity, and intersectional bridges amongst and between staff, drawing on Goffman's (1963) concepts of 'the own' and 'the wise'. Next I discuss the challenges of active concealment, considering theories of self-verification (Swann, 1983) and recognition (Honneth, 2012) and participants' motivations for disclosing to maintain authenticity. The discussion then addresses disclosure for self-promotion and validation of survivor insights, considering lived experience as a form of epistemic privilege, and questioning whether relational-cultural theory (Miller, 1987) provides a more appropriate lens for understanding VAWG workplace disclosure of survivor status. The discussion then transitions to the impact of political and structural factors on survivor-professional disclosure decisions, addressing issues of depoliticisation, bureaucratisation, and professionalisation, and the impact of courtesy and structural stigma on VAWG organisations. Finally, the chapter considers theories and debates around disclosure as a form of activism, the political power of testimony, and the potential dangers associated with disclosure that go beyond the risk of judgement or discreditation of the individual. I conclude with a reframing of disclosure from a type of confession to a more neutral position of being a witness. This will be followed by an illustrated fairy tale in Chapter 10, based upon a section of the findings and analysis discussed below. Lastly, the concluding chapter offers a critical review of the study, its contribution to knowledge, and the implications for further research and practice.

9.2 Key findings

Overall, the survivor-professionals in this study were conscientious around disclosure at work, having given the issue much thought. Participants described how their decisions to disclose or conceal their survivor status was influenced by a number of factors. Revealing survivor status was influenced by a desire to break down stigma, gain credibility, embody authenticity, form deeper relationships with colleagues, engage more fully in supervision, request support or accommodations, and use their insights from lived experience to improve services and survivors' experiences more widely. The decision to conceal was influenced by previous negative experiences of disclosure, concerns about being stigmatised or viewed as 'impaired' or as a risk to service users or the reputation of the organisation, desires for privacy, internalised shame or self blame, uncertainty around the validity of their own survivor status, mistrust of colleagues' abilities to respond appropriately, or simply not feeling any need to reveal their survivor status.

Responses to disclosure varied, with some participants describing positive and empowering outcomes, others describing long term consequences on their wellbeing and job satisfaction. The impact of concealing survivor status also varied across participants. For some, concealing required a conscious effort and had to be managed in regular situations. Others described barely considering disclosure as something they would ever want or need to do, and some participants described how they only realised their own survivor status after years of working in VAWG.

The analysis of both phases of the study demonstrated a variety of staff attitudes towards disclosure. The Survivor-professional interview participants demonstrated awareness that disclosure could result in colleagues or outside agencies viewing them as a potential risk, either to themselves or service users, and this concern was shared by the staff members who completed the questionnaire. To mitigate this, survivor-professionals either chose not to disclose, limited or minimised the information in their disclosures, or altered their presentation to create an impression of resilience and heightened competency.

Positive longer term outcomes from disclosure generally increased participants’ confidence and willingness to continue to disclose within those workplaces. It also helped to reduce fear, shame, and internalised stigma, whereas participants who had negative long term outcomes were less willing to disclose again. These participants reported negative impacts of keeping their survivor status concealed, leading to further consequences. These findings exemplify the feedback loop described in Chaudoir and Fisher’s (2012) Disclosure Process Model. The model identifies that if the outcomes of a disclosure are positive, the individual is more likely to disclose again in the future as their experience reinforces the belief that disclosure can be beneficial. Conversely, if the outcomes are negative, the individual may become more hesitant to disclose in the future as the experience reinforces the belief that disclosure is risky or harmful.

The wider socio-political system that VAWG organisations sit within also influenced disclosure decisions. The political drives of the participants and the influence of the sector’s origins and mission discussed across previous chapters created an impetus to disclose, but this was in conflict with the need to appear professionally credible and avoid any courtesy stigma (Goffman, 1963) impacting on the organisation.

To begin the discussion, I will explore how disclosure is experienced and managed by the participants on a personal and social level, covering four areas: (1) friendships, solidarity and the forming of intersectional bridges; (2) challenges of active concealment; (3) disclosing for authenticity; and (4) disclosing to self promote and validate insights. I will draw from literature and theories previously introduced in this thesis and from new sources, particularly from the secrets and concealment literature my findings led me to investigate. I will then discuss the structural and political factors impacting VAWG organisations and how these influence staff members' disclosure decisions and experiences.

9.3 Personal and social influences on disclosure experiences

It is evident from the findings that concealing or revealing survivor status at work has a range of outcomes which can be dependent on the organisational culture, as identified by Omarzu (2000). Further, the personal motivations and values of the survivor-professional and their colleagues play a role, which is in line with disclosure models by Clair et al. (2005) and Afifi and Steuber (2009) as discussed in the literature review in Chapter 2. These outcomes of disclosure include an increased or decreased sense of authenticity and closeness with colleagues, increased stigma and concern from colleagues or outside agencies, as well as practical benefits to professional practice such as gaining them greater influence over service delivery and approaches or allowing them to access workplace accommodations such as flexible working hours. These predicted outcomes, whether they had been previously experienced by participants in other roles or not, influenced their decisions around disclosure.

Participants who were still processing their abuse experience or who felt that their experiences didn’t align with common understandings of abuse described how these concerns prevented them from sharing their survivor status. A belief that one’s abuse experiences are not serious enough or that one is not entitled to claim survivor status can often act as a deterrent to disclosure (Ahrens et al., 2010). A lack of knowledge about what constitutes abuse may be common in the general population, for example, women who experience non violent or non penetrative assaults may feel that their experiences are not serious enough to warrant disclosure (Spencer et al., 2017). The conceptual model by Clair et al. (2005) may frame this as ‘insufficient identity development’. However, it is reasonable to assume that staff working in VAWG would have sufficient understanding of the complexities and validity of abuse experiences. For my research participants, their reluctance to disclose was not necessarily due to their own uncertainty around the validity of their experiences as abuse, but a concern about how others might minimise or judge their experiences. Where participants revealed their survivor status, it was often in low risk situations or in high trust relationships for this reason. These findings align with previously discussed models of secrecy and disclosure such as the Risk

Revelation Model (Afifi & Steuber, 2009, 2010), Chaudoir and Fisher’s (2010) Disclosure Process Model, and Slepian’s (2021) process model of having and keeping secrets which will be further applied in following sections. This carefully selective sharing of one's identity also aligns with theories around communication privacy management (Petronio, 2013) and feminist theories around relationship forming such as Relational-Cultural Theory – a framework often used in counselling and supervision, developed by a collaborative group of women clinicians (Dr.’s Jean Baker Miller, Irene Stiver, Janet Surrey and Judith Jordan). Relational-Cultural Theory combats ideas of traditional psychology which emphasise and valorise the concept of a highly individuated, separate self (Miller, 1987). This will also be further examined below.

9.3.1 Friendships, solidarity, and the forming of intersectional bridges

As discussed in the Phase 2 findings in Chapter 7, it is widely recognised within psychology that self-disclosure is a crucial aspect of relationship formation and strengthening, and this was evidenced by my participants' disclosures in social settings (Won-Doornink, 1985; Collins & Miller 1994; Sprecher et al., 2018; Mangus et al., 2020). Relationships are formed through gradually revealing personal information such as thoughts, feelings and experiences to others in order to deepen bonds of empathy, familiarity, and trust (Altman & Taylor, 1973; Collins 1994; Slepian, 2018; Barasch, 2020; Bedrov & Gable, 2024). Research has demonstrated that those who engage in higher levels of interpersonal intimacy through self-disclosure experience more satisfying and meaningful relationships (Sprecher, 2004; Sprecher, 2013; Seguera, 2020) and generate impressions of authenticity (Jiang et al., 2020). When positive relationships are formed through self-disclosure, individuals experience an increased sense of support and belonging which improves their wellbeing (Brunetto et al., 2013; Colbert et al., 2016). Self-disclosure also plays a pivotal role in the initiation, development, and maintenance of relationships in the workplace (Tardy & Smithson, 2018).

Forming friendships and strengthening collegial relationships was one of the goals of self-disclosure for several participants of my study. Participants described disclosing their survivor status to work friends who often shared similar experiences of gender based violence. Some participants, however, felt that the culture of their workplace and their workplace relationships meant that disclosure would be considered socially inappropriate and disclosing felt like too much of a risk. They described feeling isolated and frustrated as a result, having to put in effort to actively conceal their survivor status.

The participants who described working in small teams in women focused charities such as Rape Crisis Centres recounted a sense of shared sisterhood and mutual support within their workplaces which were usually staffed by women with similar interests, backgrounds, and life experiences. A shared culture of friendliness, openness and support (such as amongst fellow counsellors, described by Kappa) or shared identity characteristics (Gates et al., 2019) made disclosure feel safer and accepted. In diverse environments, differences in demographics such as class and gender may complicate decisions to disclose personal information and disclosures of this status difference may create further distance between both groups (Phillips et al., 2009). Demographic diversity in workplaces was not commented on much by participants although two participants spoke about their experiences disclosing to male managers. Beta shared that disclosing to male managers added a heightened sense of awkwardness and embarrassment due to the abuse she was subjected to being sexual, however, Omega described feeling most comfortable disclosing to her male manager as he was open about his own survivor status and they had built up a great deal of trust between them. These findings suggest that shared experiences of victimisation could increase closeness and trust between staff of different demographics and status levels through bonds of solidarity. Indeed, forming these bonds across individual differences was the proposed purpose of the feminist consciousness raising and speak-outs common in early feminist organising against male violence (Kelland, 2016).

Numerous researchers have explored how collective traumas produce solidarity between victims across demographics (Weldon, 2006; Wiley & Bikmen, 2012; Rimé et al., 2010; Pruchniewska 2016; Fleischmann et al., 2022), bringing communities together and increasing societal trust (Tonya & Skidmore, 2014). Notably, social solidarity with those with shared experiences increases wellbeing and recovery beyond what can be achieved when survivors receive general support from non survivors (Howden et al., 2012). A shared experience of disempowerment can serve as a catalyst for forming positive intra-minority intergroup harmony (Cortland et al., 2017; Ball & Branscombe, 2019). As such, collaborating with other marginalised communities can be beneficial to overcome marginalisation without the need for the specifics of the experiences to be the same (Ball & Branscombe, 2019). This evidence suggests that a broad shared experience of oppression or adversity can help reduce the salience of difference (McDonald, 2019) and build intersectional bridges that support working together for a common goal. This may explain why the shared experience of male violence helped Omega feel comfortable disclosing to her male manager. Further, his ability to demonstrate understanding of women's oppression made him a trustworthy confidant.

Weldon (2006) argues that establishing norms of inclusivity in the gender-based violence movement is what helped members achieve cooperation and cohesion. It was integral for the women to focus on shared interests relating to gender oppression, whilst incorporating diversity, differing political opinions, and accommodating institutional dissent. This was particularly achieved through the facilitation of specialist organising by and for additionally marginalised groups (Weldon, 2006). Examples of these groups include Southall Black Sisters established in 1979 (Patel, 2013) and Brent Asian Women's Refuge which has been supporting women for over 40 years (Brent.gov.uk, 2023). Patel (2013) describes how these groups were able to focus on the specific oppressions of women coming from within their own communities such as virginity testing, and racism from wider society, while still organising autonomously as women. At the same time, they sought to align their work with broader anti-racist and socialist movements (Patel, 2013). These coalitions enabled women to focus on addressing their collective experience of male violence across political classes.

My analysis suggests that within organisations that address violence against women and girls, we can find what Goffman (1963 p. 31) refers to as 'the own' – being the stigmatised individuals, (in this case, victims/survivors and survivor-professionals) and 'the wise' – being the un-stigmatised who are understanding and accepting of those belonging to stigmatised or marginalised groups. This group is also referred to in the literature as the sympathetic others

(Goffman; 1963), the go-betweens (Jones et al., 1984), allies (Sabat et al., 2014), and bridge workers (Johnson et al., 2017). In Goffman's (1963) writing, the wise are often professionals who work with the stigmatised groups, spending a lot of time with them. It may be assumed that those working in VAWG will be 'the wise', if not 'the own' themselves. However, there were some staff members from Phase 1 of the research who did not appear particularly understanding or accepting of survivors in the workplace and in some cases viewed survivor-professionals as a risk or burden to the organisation. This is also seen in several studies on disclosing mental illness in mental health workplace settings, where the fear of being seen as a risk to service users due to a perceived impairment relating to one's mental health diagnosis becomes a barrier to disclosure (Boyd et al., 2016; Cohen et al., 2016; Edwards & Crisp, 2017). In response to the second vignette in Phase 1, many participants wrote of how they would assist or defend the survivor-professional Cathleen against the colleague who remarked that Cathleen should take time off work to address her mental health. These participants demonstrated belonging to the wise group by suggesting they would advocate for Cathleen and help mediate the conflict between the two characters (Kreiner et al., 2022).

When participants from Phase 2 found members of 'the own' or 'the wise' amongst their colleagues, they felt safe to disclose, and strong, supportive relationships were often formed. For example, Delta described her manager, who was a counsellor by profession, responding to her disclosure after a triggering incident in a very understanding and trauma informed manner. Delta described having already built up trust with this manager due to having previously disclosed health issues impacting her energy levels which the manager regularly accommodated. Kappa described how during her interview for a placement in a counselling service, the interviewers talked very openly about their own experiences of vicarious trauma which helped Kappa trust the interviewers and created an invitation for her to share her own survivor status. Her working relationship with those colleagues continued to be supportive and understanding.

Managers or supervisors occupying positions of 'the wise' were common confidants for the participants. Though disclosures to managers or supervisors often had a primarily practical purpose, they often positioned themselves as supportive and welcoming confidants, bound by the rules of confidentiality, and disclosures during supervision were regarded as important for reflective practice and personal and professional development. It was also common for participants to disclose to colleagues who over time had become friends. Both Delta and Iota described having intimate conversations between themselves and a close work friend in which they shared about their abuse experiences. These conversations happened during social activities outside of the workplace, over food or drink. Forming and strengthening friendships with work colleagues often extends beyond the confines of the workplace, with social spaces offering an informal space for fostering interpersonal connections (Enderjat et al., 2018). However, extra-organisational socialising alone may only support relatively superficial friendships which may not reach the level necessary for an intimate disclosure (Sias & Cahill, 1998). Participants who disclosed in social situations usually did so to one confidant rather than to a group. This one-on-one set up may have increased a sense of intimacy and privacy control (Petronio, 2013).

The theory of social penetration (Altman & Taylor, 1974) provides us with a framework for understanding how relationships develop through the exchange of personal information along with other social behaviours. Secret sharing specifically can increase perceptions of closeness between the sharer and receiver (Jaffé & Douneva, 2020), whereas secret concealment can increase a sense of isolation (Slepian et al., 2019). Though self disclosure of personal information is common when strengthening relationships (Sprecher, 2013; Seguera, 2020; Jaffé & Douneva, 2020; Bedrov & Gable, 2023), it is evident from both the literature and my findings that the process and outcomes of disclosing concealable stigmatised identities within a workplace context adds a layer of complexity.

Along with Altman and Taylor's (1974) social penetration theory, there are other relevant models when looking at the disclosure of concealable stigmatised identities such as the the Risk Revelation Model (RRM) (Afifi & Steuber, 2009) and the Disclosure Process Model (DPM) (Chaudoir & Fisher 2010), both of which were covered in the literature review (chapter 2). These models can help us understand how survivor-professionals manage disclosure decisions and outcomes and what prompts them to disclose. Participants in my study discussed how they calculated the benefits and risks of revealing their survivor status (often based on past experiences), how they selected their confidant, the manner in which the disclosures were made (e.g. incrementally, subtly, directly, formally, or informally, etcetera), and the outcomes and long term impact that disclosure had on their relationships and wellbeing. This underlines existing research detailing disclosure of stigmatised identities both in and outside the workplace which is comprehensively summarised in the interdisciplinary review by Follmer et al. (2020). The unique context of disclosing survivor status in VAWG work environments means survivor-professionals have wider factors to consider, particularly as the stigmatised identity is closely linked to, and may therefore have a direct impact on the work.

For my participants, their goals when disclosing were largely approach-focused such as hoping to strengthen relationships or educate others. Other reasons for disclosing appeared to be more of a neutral, pragmatic sharing of information rather than done in an attempt to avoid a negative social or psychological effect of concealing their survivor status. That said, most participants spoke from the position of having disclosed in their current workplace, allowing them to focus on the positive outcomes they were now experiencing. Several participants mentioned how being open and authentic was important to them or was integral to their personality or way of being. This leads me to consider whether they would report experiencing the negative social and psychological effects of concealment if they had not disclosed for other reasons, and whether this would have driven them to disclose eventually.

Participants reported that reactions of confidants were either positive or neutral during the disclosure event, however, the impact after the disclosure, described in the DPM as the ‘mediating process’ (Chaudoir & Fisher, 2010) sometimes varied from the confidants’ initial responses. These findings indicate that the consequences of disclosure may not be immediately apparent. The recipient of a disclosure may initially respond in a way that indicates support and acceptance of the survivor-professional, but their behaviours towards them may later change. For example, they may begin to act overprotective of the survivor-professional's wellbeing or become more risk averse when assigning tasks or specific service users to that survivor-professional. In some cases like in Epsilon's, the colleagues who witnessed her disclosure gained respect and admiration for her willingness to be honest and open. In others' cases such as Seta's, the participant felt that they were later patronised or judged negatively by their colleagues and that their private information had been shared beyond the person they confided in, meaning they lost control over it. This resulted in a downward spiral towards further concealment (Chaudoir & Fisher, 2012).

9.3.2 Challenges of active concealment

In situations where participants chose not to disclose, the most common reason given was to avoid unnecessary concern or assumptions of impairment about their practice from colleagues. Other reasons were to avoid the social faux pas of crossing boundaries and oversharing personal information that may not be welcome, or because they did not trust that their disclosure would be received and responded to in the way they wanted it to be. These concerns expressed by participants in Phase 2 also align with the comments and findings from the survey participants in Phase 1 where assumptions of impairment, boundary violating, and emotional immaturity were made about survivor-professionals who disclosed at work. These findings mirror Ragins (2008) and Jones and King's (2014) suggestion that individuals' expectations of the consequences of disclosure play a role in shaping their decisions. As such, when individuals anticipate discrimination or negative treatment following disclosure, they are less inclined to disclose.

Notably, whilst negative consequences to disclosure led participants to be more guarded around future disclosures, previous positive experiences did not always lead to survivor-professionals feeling more comfortable disclosing in future situations. For my participants, the culture within certain workplaces and the degrees of distance or closeness in their relationships with new colleagues seemed to have more of an impact on disclosure decisions than previous positive experiences. This underlines how these situations are contextually and socially nuanced each time, but survivor-professionals may lean towards being risk averse.

Though concealing had the benefit of helping participants avoid assumptions of impairment or accusations of boundary violations, concealing resulted in personal and relational consequences. Research on secrecy and concealment shows us that proactive concealment in situations where the secret holder is prompted to reveal demands effort in self monitoring and impression management, particularly in conversations (Critcher & Ferguson, 2014). Concealment in conversational and interpersonal contexts has also been found to result in poorer quality interactions (Maas et al., 2012; Larson et al., 2015; Slepian, 2021; Davies, 2023). Slepian's (2021) process model of having and keeping secrets goes further in helping us understand the consequences of maintaining secrets, even when one is not placed in situations which call for active concealment. The simple awareness of maintaining a secret can lead to repetitive rumination and reflections on one's feelings around it, in addition to other coping efforts and plans for maintaining the secrecy (Slepian, 2021). Participants who actively concealed their survivor status seemed to express frustration and described concealment as taking up a lot of energy. They also experienced a distressing level of internal conflict. Workplace performance can be hindered by environments that either explicitly or implicitly promote concealing one's identity (Critcher & Ferguson, 2014). Additionally, preoccupation with one's secrets can lead to emotional fatigue due to feelings of isolation and reminders of the motivational conflict inherent in secrecy, where the goal of protecting one's identity is in conflict with the goal to maintain intimacy and close relationships through sharing (Slepian, 2019).

Participants of Phases 1 and 2 often commented on the prevalence of survivor-professionals working in VAWG organisations and how it was a known but largely unacknowledged fact. Phase 2 participants also spoke about how they felt it was possible for 'the own' and 'the wise' to identify survivors through subtle signs such as the way they spoke about the subject or small hints. However, some staff members were unable to identify participants as survivors, particularly when they didn't fit the stereotypical image of an abuse victim. Assumptions were made that the participant had not faced any particular trauma or adversity. These assumptions were also received unfavourably by participants as it increased a sense of being misunderstood and therefore socially isolated.

As discussed in Chapter 1, Swann’s (1983) Self-Verification Theory proposes that individuals experience discomfort when others do not perceive them in alignment with their own self-concept, even if that self-perception is negative. This discomfort stems from a desire to reduce discrepancies between internal beliefs and external perceptions. Swann (1983) posits that engaging in self-verification practices such as disclosing stigmatised identities creates a sense of coherence and predictability in one's social environment. However, when disparities exist between self-perception and external perception, it can impede social interactions and induce feelings of inauthenticity which may even be detectable by others (Sabat et al., 2017). This also aligns with Axel Honneth's (2012) Theory of Recognition, mentioned previously, which proposes that recognition is necessary for developing a healthy sense of self and maintaining good relationships with others, so humans are driven to seek it in order to achieve self-actualisation. For these reasons, concealing had negative impacts on those who felt their survivor status was an important aspect of their identity or who struggled to engage with others socially when they were constantly required to censor themselves in conversations where disclosures were prompted. Likewise, reporting on how self disclosure positively relates to perceived understanding, Martin, Anderson, and Mottet (1999) assert that individuals possess a fundamental desire to feel understood, and this perception of understanding from others will shape how they continue to behave and communicate. This may be a factor in why some survivor-professionals choose to disclose even in risky situations.

9.3.3 Disclosing for authenticity

Slepian et al. (2017) propose that when we are consciously concealing a secret which our minds are preoccupied with, we are holding back personal information which we would normally share in order to connect with others. This leads to feelings of being inauthentic in our relationships (Slepian et al., 2017). Constant awareness of one's concealed secret reminds us that we are not upholding relationship standards or values, thus creating feelings of dishonesty and deception (Lopez & Rice, 2006). In addition, the fatigue caused by secrecy can have consequences on task performance at work (Slepian, 2019). This may be particularly pertinent in highly emotionally demanding jobs such as those in the VAWG sector.

The desire for relationships in which the survivor-professional can be her authentic self was shared by several participants. Honesty, openness, and self acceptance came up as important personal virtues. Participants spoke of not wanting to or not being able to split themselves into a professional practitioner on one side and an abuse victim/survivor on the other. This professionalism versus authenticity dilemma is shared by workers with hidden disabilities in Kulkarni's (2022) study. Integrating and embracing their lived experiences and survivor status into their professional identity felt essential, or even unavoidable for some of my participants, given the profound impact these experiences have on who they are, their career choices, and how they work with service users or understand violence against women and girls. Zerubavel and Wright (2012) suggest that the wounded healer paradigm should be viewed as a duality rather than a dichotomy and this identity integration for the practitioner is consequentially beneficial for the practitioner's relationship with clients. Rejection of this duality may result in the professional struggling to access their own experiences of healing which will not only limit their capacity to empathise with the client, but push a persona of woundedness onto the client, leading to a lack of belief or encouragement in the clients own healing abilities (Gelso & Hayes, 2007).

Sutton's (2020) meta-analysis of authenticity, wellbeing, and engagement in workplace settings links authenticity to wellbeing, highlighting how authenticity positively impacts work engagement and healthy work organisations. The positive effect of authenticity may also help to buffer the impact of interpersonal conflicts which arise in situations or environments where a person's identity is stigmatised such as LGB identities (Riggle et al., 2017) or immigrant identity (Zhang & Noels, 2013). Zhand and Noels' (2013) study on ethnic identity evidenced that there were more positive effects to being true to one's counter-normative identity than being untrue to it. In other words, demonstrating self acceptance along with the positive effects of presenting an authentic self can counteract the negative effects of stigma related to the counter-normative identity. Similarly, studies show that when a typically stigmatised identity is seen as a positive attribute or central to one's sense of self, individuals are more likely to disclose this identity in the workplace (Quinn & Earnshaw, 2011; King et al., 2017). This suggests that embracing authenticity in the workplace, particularly for those with stigmatised identities, may enhance staff wellbeing and help create working environments where individuals feel empowered to reveal aspects of themselves that they once might have concealed. A complication with this could arise whereby because personal consequences or risks to disclosure are uncertain and subject to multifaceted nuances and context specificities i.e. beyond the workplace culture, the decision to disclose could lead to negative consequences (King et al., 2017). This means that workplace efforts to embrace stigmatised identities must be balanced with recognition of the real risks and costs to those survivors or other marginalised identity groups.

Regarding authenticity in the cases of participants who had more senior roles, participants remarked that their staff and fellow colleagues appeared to see them as more multi-dimensional and relatable after they had disclosed their survivor status. Authenticity in leadership roles is reported to have multiple benefits for workplaces and staff, improving staff wellbeing, emotional connection, creativity, and performance (Jiang, 2020; Duarte et al., 2021). By understanding and working with the rich information emotional openness provides, leaders who are able to show authentic emotions and encourage the same in their followers may be better positioned to adapt to setbacks and stressors within the organisation and alter the thinking and behaviours of followers through encouraging transformative self-reflexion (Avolio et al., 2004).

Along with disclosing to maintain authenticity or as part of personal relationship forming and strengthening, participants reported disclosing for practical purposes such as when they needed to request accommodations such as leave to attend court cases related to their own abuse or their own therapy appointments. Managers were usually the receivers of such disclosures as they held the authority to allow time off or organise accommodations. Participants shared how disclosing in order to make such requests was easier when their managers or supervisors had previously shown themselves as trustworthy, authentic, or belonging to 'the wise' group.

It is possible that non-disclosure could be an authentic choice for some survivor professionals. For those who see themselves primarily as capable professionals and consider their survivor status to be less relevant or irrelevant to their workplace identity, drawing these boundaries through agentic non-disclosure would support them to be seen the way they see themselves. These agentic boundaries were described by Beta and Theta who both expressed that at the start of their careers, disclosure felt unnecessary and potentially embarrassing or damaging to their reputation or the reputation of the organisation they represented. Theta said ‘it didn't even occur to me to disclose when I was representing that organisation’. Beta also explained that if it wasn’t for the court case she was involved in at the time: ‘I don't think I would have said it just as a matter of course’. Though both participants went on to describe how in certain workplaces later in their careers, disclosure felt like ‘the right thing to do’ (Beta) or enabled them to act as role models to support others. This suggests that disclosing or concealing survivor status to offer an authentic representation of self can be both variable and context dependent.

9.3.4 Disclosing to self promote and validate insights

For the participants in Phase 2, disclosures were also made for the purpose of self-promotion or to influence the direction of services and interventions. This use of disclosure could be seen as a form of asserting epistemic authority, where the lived experience of sexual or domestic abuse or use of VAWG services is recognised and accepted as an important source of knowledge (Bar On, 1993). Participants disclosed to colleagues when advising them on best practice, or to request greater control over projects they had lived-knowledge of. They also disclosed during their recruitment to the job when they felt that their limited professional experiences might not be seen as sufficient. This was particularly true for participants whose abuse experiences had disrupted their education or caused gaps in their work history which they felt the need to justify or compensate for.

Though a survivor may intend for their lived experience to be seen as a strength, the decision to disclose lived experience as a qualification for a specific role or to explain a gap in a CV can have positive or negative consequences (Devendorf, 2022). These can depend on how and when the disclosure is presented (Robers & Macan, 2006) and how that disclosure is interpreted by the interviewer. This was evidenced by the findings generated from responses to the questionnaire in Phase 1. The first vignette asked participants to reflect on how a disclosure during a job interview would be received. Several participants' expressed that the interviewer would likely have concerns and would need to find out more information to assess whether the job applicant was safe and capable of performing the job appropriately. Others thought that the disclosure would reflect positively on the interviewee as it showed honesty and suggested she had additional insight to share. Though disclosing in job interviews and to gain greater influence over the direction of the work may appear to be an act of self-promotion, this could be reframed as less of an attempt to gain control, and more an attempt to advertise and promote the value and validity of their insights for the benefit of victims/survivors and users of their services. I will discuss this point further in the following sections.

Participants also disclosed when it was beneficial to the task of breaking down stigma or acting as a role model for survivors which can be of benefit to the survivor-professional themselves as well as others (Firmin et al., 2017). Repper and Carter's (2011) and Miyamoto and Sono's (2012) reviews of peer support workers in mental health services suggests that disclosing lived experience to service users can improve service users' outcomes; helping them feel more accepted, understood, and empathised with; and offering them hope for their own recovery. The benefits of role modelling through disclosure is further evident throughout the wider wounded healer literature discussed previously. (See for example, Zerubavel & Wright, 2012; Rácz et al., 2015; Melkman et al., 2015; Boyd et al., 2016). Importantly, Probst (2014) identifies that the opportunity to self-disclose to clients or service users offers less benefit to wounded healer practitioners than simply having the knowledge from their lived experience which helps them better understand their clients. This consideration may be a reason for why none of my participants discussed directly disclosing to clients or service users when talking about the benefits of the lived experience to their practice, or about being able to role model healing. Role modelling appears to have been achieved through broadly and openly identifying as a survivor, rather than through making direct disclosures to individuals in need.

In addition to role modelling, participants spoke more generally of their work as a form of activism against gender based violence and activism being part of their own continuous healing process. This can be seen in the #MeToo movement (discussed further below) which mobilised survivors of sexual assault to publicly declare their survivor status (Hillstrom, 2018). The purpose of this mass disclosure based campaign was to raise awareness of the scale of violence against women and build solidarity with other survivors through the power of numbers (Hillstrom, 2018). Research has indicated that this form of collective activism may emerge as a healing response (Draucker et al., 2009; Stidman et al., 2012; Edström & Dolan, 2018) and participating in such movements can help survivors navigate and make sense of their own experiences (Strauss Swanson & Szymanski, 2020).

Several participants described their disclosures to colleagues happening during conversations where ideas or opinions about victims/survivors of abuse were shared which they felt were potentially harmful or victim blaming, for example, where decisions were being made about the interventions being offered to victims or when inappropriate language was being used to describe their experiences. As a result, disclosures were made in defence of specific service users or victims/survivors as a group. These disclosures were more likely to generate conflict than build positive rapport between colleagues. Participants sometimes described these particular disclosures as being triggered by anger or concern on behalf of service users and by their own emotions in the moment and less as a result of a controlled and planned decision to share about themselves. These experiences may fit what Taylor (2021) has termed ‘crisis driven disclosures’ which are a consequence of the build up of enforced silence and the fear of disclosure. Difficulties regulating emotional feelings and composure can potentially lead to crisis-driven disclosures or misunderstood emotional outbursts. As a result, survivors may face additional distress, with the added risk of others misinterpreting their behaviours (Taylor, 2021

p. 80). We also know from existing studies in neurology and psychology that anger and other negative emotions can reduce behavioural inhibitions and increase impulsivity (Shafritz et al., 2006; Goldstein et al., 2007; Verona et al., 2012) which may also contribute to these triggered disclosures.

The sharing of secrets can also be cathartic and relieve stress (Kelly et al., 2001; Afifi & Steuber, 2009) which may be especially desirable during a stressful conversation. However, the stress relieving effect of disclosure often relies on the response from the recipient being positive and is considered to provide more of a long term outcome than an instant relief (Afifi & Steuber, 2009). Some participants who disclosed whilst emotional described regretting their disclosure and in the case of Epsilon, feeling such shame that she sought to resign. Later learning that her colleagues appreciated her openness and authenticity reassured Epsilon and she no longer regretted disclosing. This suggests that if the positive response from the recipient is not immediate but comes later, it can still have a long term positive impact.

In summary, participants were motivated to disclose survivor status to enhance their relationships and personal wellbeing – both of which in turn supported their practice – and to benefit victims/survivors, whether this was through activism and role modelling or through attempting to gain more influence over the design and delivery of services and interventions. Roberts (2005) and Schlenker and Weigold (1992) discuss how disclosures of positive personal attributes in the workplace can be made to enhance professional appearance where self-promotion is a primary goal, however, relational-cultural theory (Miller, 1987) offers a different lens. Miller (1987) reframes the dynamic of workplace disclosure away from what she describes as a male biased paradigm of traditional psychology, focusing on dominance and subordination in relationships, to one more reflective of women's psychology, emphasising the importance of mutual empathy and growth through connection by sharing vulnerabilities. This connection seeking paradigm may be a more helpful way of framing survivor-professional disclosure in VAWG organisations overall. My participants all reflected on how their lived experience improved their practice to some degree, whether that was in their own ability to understand and relate to their clients, or their knowledge of what services and interventions would work best for a particular client group. Though being a survivor of abuse is not traditionally regarded as a positive personal attribute, in the context of VAWG work, it can be an asset. However, only when it is accepted by the disclosure recipient as a positive attribute, is it able to be applied as one. As an alternative, disclosure of survivor status can be viewed as a plea, rather than demand, for greater control over projects or employment in the sector. By offering openness and authenticity and appealing to the empathy of colleagues or interviewers, survivors may establish bonds of trust that lead them to obtaining greater responsibility and influence in their roles.

The above section has explored the personal and social factors involved in disclosure decisions, focusing on the drive for deepening relationships, achieving identity congruence, and the desire to use one's lived experience or survivor status to support other victims/survivors. I will now turn to discussing how disclosure decisions are influenced by the wider socio-political climate that VAWG organisations sit within, covering how growing neoliberal pressures impact on the originally collectivist nature of VAWG work.

9.4 Political/structural factors in disclosure decisions and experiences

Several participants described how structural and political factors impacted their decisions and experiences of disclosure at work. In particular, being open about one's own survivor status was described as a way to defy stigma and be an example of survivors in professional roles. Participants spoke about feminist theories such as the continuum of violence impacting all women (Kelly, 1988) and Andrea Dworkin’s (1983) assertion that all women are living within a system of male violence in which we are always close to death, rape, beatings and humiliation at the hands of men. It was acknowledged that all women live in fear of male violence which many of us do not recognise due to how normalised the collective experience is (Dworkin, 1975). Participants spoke about how the repeat and overt exposure to the women harmed by male violence coming into their services had a radicalising effect, causing them to analyse their own experiences and begin identifying as survivors. This perspective had the effect of softening the distinction between the women working in the services and those attending as service users, bringing ‘the we’ (Kelly, 2018) back into the practice of the organisations. This reframing of survivorhood as a constant, collective experience of subjugation of women as a political class shifts the focus away from individual identities and differences. When all women are regarded as survivors by default, an individual's survivor status no longer needs to be explicitly disclosed.

9.4.1 Depoliticisation

Participants discussed how VAWG organisations have struggled to maintain their political position as a by-and-for movement due to the pressure to professionalise and adapt their management structure and methods to align with statutory service provisions. Whilst this development has been beneficial for securing government funding (McMillan, 2007), ensuring credibility and accountability, and meeting regulatory requirements, the impact of the depoliticisation of these organisations has arguably removed the feminist activism at the heart of many of the original VAWG organisations. Participants spoke about how they felt this had shifted the discourse on VAWG away from being framed as caused by a patriarchal society that required a response that promotes female empowerment and liberation. The newer, depoliticised model of working is thought to individualise the problem to one of women’s own personal circumstances, requiring an intervention which focuses on meeting her immediate mental wellbeing and material needs through providing practical services such as counselling and housing support rather than doing any wider empowerment focused work (McMillan, 2007). This sickness model approach (Vera-Grey, 2020) of placing the victim as the focus of the intervention over the social structures that uphold male violence may have the impact of shifting blame and its related stigma back onto victims, which is in conflict with the original ethos of the VAWG organisations.

In hostile political climates, social movements can survive by adapting to abeyance structures (see Taylor, 1989). This is where movements disengage from explicitly challenging the state on matters such as policy and focus instead on the less visible work of preserving their values and identity. Consequently, this may negatively affect the movement’s future mobilisation prospects and as public attention decreases, policy domains shift further away, changing the structure of political opportunities and increasing the chances of less favourable policies being adopted (Sawyers & Meyer, 1999). Bagguley (2010) proposes that contemporary British feminism has entered a state of abeyance, maintaining its cultural presence as a form of ‘identity politics’, which, as Sheila Rowbotham (1997) argues, can become far too easily commodified by the establishment, ultimately reinforcing existing social structures rather than challenging or changing them.

Whittier (2009) offers the view that the women’s movement did not retreat inward and forsake its radical origins by transitioning from politics to psychotherapy. Rather, this shift towards psychotherapy mirrored a broader trend in the rise of a ‘therapeutic state’ (Polsky, 1993). In order to develop the self-help movement, mainstream culture selected the feminist interpretations of violence against women and girls that best suited their own aims such as the need for empowerment and healing, but without analysis of oppression or wider structural causes (Whittier, 2009). This selective embrace of feminist ideas has arguably muted the political dimensions of the VAWG movement. Similar dynamics have played out in other social movements, where a few palatable and sellable aspects are adopted while the deeper, more revolutionary ideals are sidelined. For example, the ‘greenwashing’ of environmentalism to make it compatible with consumer capitalism (de Freitas Netto et al., 2020) and the wider radical emancipatory movement for gay liberation which over time shifted to focus on individual gay rights and expressions of individual identity (Weeks, 2016).

In the case of VAWG organisations, the transition away from political activism has tempered their once-radical ethos. This change has made these services more compatible with the demands of professionalised, statutory services and the individualism of the therapeutic state (Whittier, 2009). However, this transition has muted the movement's radical, collectivist dimensions, including its emphasis on survivor-led, feminist praxis that attributes the blame and responsibility for VAWG to structural factors (McDonald, 2005). Survivor-professionals may feel they are more likely to be distrusted or stigmatised by colleagues in services that adopt this individualised, therapy-focused approach to addressing violence against women, further discouraging them from disclosing survivor status.

9.4.2 Bureaucratisation and professionalisation

For participants working in these more formalised, bureaucratic organisations, the expectation to be objective, neutral, and impersonal appears to pressure them to conceal their own survivor status. A key principle of organisational bureaucracy is impersonality, where emotions and the personal life of staff are seen as detrimental to the ideal functioning of a successful organisation (Serpa & Ferreira, 2019). Participants expressed that separating their personal selves from their professional selves in VAWG work is detrimental to the cause, their service users, and to themselves. Staff are required to use their empathy and sensitivity in job roles that are often highly stressful, emotionally demanding, and require workers to be reflexive, but the pressures to meet the criteria of being a rational bureaucratic organisation in order to work with or alongside state agencies effectively places them in a double bind.

Alternative approaches within bureaucratic organisational structures that take into account the benefits of positive collegial relationships and staff authenticity (Gayle, 1994) could relieve some of the conflicts faced by VAWG organisations pressured to move away from their original flat or collectivist management structures (McMillan, 2007). A pragmatic approach such as Bounded Emotionality (Mumby & Putnam, 1992) could provide VAWG organisations with a workable compromise. Bounded Emotionality rejects both the idea of patriarchy as a dominant value system and the co-opting of emotional experience found in traditional organisational structures (Mumby & Putnam, 2019). It instead encourages the expression of emotions and the integration of self identity and authenticity in the workplace in order to strengthen work relations. However, there is a risk that this can induce added pressures on employees who prefer impersonality and it could lead to dangerous forms of intimate, emotional control within organisations (Mumby & Putnam, 1992).

Reflecting on what influences their choices around disclosure, participants spoke about how the professionalisation and regulation of services VAWG organisations worked alongside influenced the structural, and therefore cultural shift within VAWG organisations. The statutory regulation of social work in 2001 (Cromarty, 2018) and the professionalisation of the counselling and psychotherapy industries in the mid 2000s (Bondi, 2004) contributed to the movement away from the by-and-for model of many voluntary VAWG organisations. At this time, services for women subjected to domestic violence were integrated into housing associations and state run welfare agencies, and risk assessments such as the MARAC scheme became emphasised and standardised (Robbins et al., 2014). The specialist professional roles of Independent domestic violence advisors (IDVAS) and Independent sexual violence advisors (ISVAS) were created to act as independent advocates for victims in immediate risk, with specialised training to support women whose cases were going through the courts (Hague, 2021). Professionalisation helped VAWG services to be taken more seriously and work alongside outside agencies, giving their staff more power to support and protect some of the most vulnerable women (Foley, 1994; Hoffart, 2021). However, this emphasis on risk management and intervention in the hands of statutory powers can work against the idea of empowering victims and supporting women's rights, privacy, and dignity (Hague, 2021). Patel (2009, p. 168) argues that:

> casework and services, however necessary, cannot empower women, conducted as they are within the parameters of various structures of power which are assumed rather than transformed.

This means that bureaucratic and professionalised approaches to addressing male violence against women do not challenge the societal systems and norms that disempower women in the first place, such as patriarchy, systemic inequality, or ideologies that blame women and stigmatise victims. Therefore, maintaining the campaigning component of VAWG services continues to be important (McDonald, 2010). However, participants expressed a fear that going back to the by-and-for model, and with that, making it known to outside agencies that VAWG organisations were staffed largely by survivors and politically active feminists (regardless of any additional professional qualifications the staff may have) could cause state agencies to no longer see VAWG organisations as credible institutions to work alongside. Whilst this would enable VAWG organisations to go back to putting the needs of survivors (and by virtue, all women) above the expectations of the police, courts, and state welfare services, it could decrease the power VAWG organisations have to find and fund direct support for the women and children most in-need of immediate protection. Thus, working within the confines of these professionalised structures could create an environment that discourages staff disclosure. Adhering to external expectations and standards is a protective measure against the effects of courtesy stigma negatively impacting VAWG organisations.

9.5 Courtesy and Structural stigma

Link et al. (2008), Scambler (2009), and VanDyke (2024) all note that health and welfare services that support stigmatised groups are systemically underfunded, however, very few academic studies have investigated the impact of courtesy stigma on professional services that support these stigmatised groups (Phillips et al., 2012). One study on nursing students conducted by Sadow et al. (2002) found that nursing students held stigmatising attitudes towards both mental health patients and mental health professionals. Using 'professionalisation narratives' in staff education which emphasise the social and status difference between those who use services and those who provide such services can decrease courtesy stigma (Phillips et al., 2012). However, utilising these narratives can have the undesired effect of increasing stigma towards the service receivers (Sadow et al., 2002). For the survivor-professionals in my study, the desire to promote disclosure in order to reduce stigma was aimed at reducing it for all survivors, not simply themselves and other professionals. Survivor-professionals who disclose to champion person centred, radical approaches to the work must balance this against the risks that courtesy stigma brings to the credibility of the survivor-professional and the VAWG sector as a whole.

A common critique of stigma research is the narrow focus on attitude surveys and individual-level analysis disproportionately emphasising micro-level interactions and overlooking broader levels of discrimination (Gaebel et al., 2017). Link and Phelan's (2001) theory of structural stigma considers how the power held by state structures enables stigma to be enacted beyond the interpersonal level, through broader systemic forces such as discriminatory laws, policies, and processes. Additionally, Corrigan et al. (2004) helpfully distinguish between intended (direct) discrimination such as policies that overtly restrict the rights and opportunities of people groups without a rational justification, and unintended (indirect) structural discrimination such as the expectation to adhere to social norms or the impact of job recruiters making assumptions about certain people based on negative stereotypes.

Though the policies and processes of individual third sector organisations may not be enforced at state level, they are influenced by stigmas upheld by the state (Link & Phelan, 2001). An example of this was given by interview participants describing policies by organisations they were familiar with. Lambda shared about it being common for organisations to have intentional policies to not allow survivors to work in the organisation they received care from, before a certain amount of time had passed, most commonly six months. Theta shared about an organisation that explicitly did not allow survivors to work as frontline service providers at all, advertising on their website that women coming to the service would never be seen by another survivor. There may be rational justifications for these policies, for example, a six month break between someone using a service and working for the service may be in place to enable relationships of a *service user - practitioner* dynamic to end before a new dynamic of *colleague - colleague* is formed. However, such policies have the potential to discriminate against survivors, particularly those whose status as a former user of that service cannot be hidden, as was the case for Gamma.

Some participants expressed a reluctance to disclose at the application or interview stage of a new job as they feared it would be seen as inappropriate or that they would be automatically seen as incapable. However, others felt that it was better to get their disclosure 'out of the way' as they would not be able to conceal their survivor status for long. As mentioned, responses gathered from the questionnaire to VAWG staff illustrated that disclosure at interview was often seen as unprofessional. Many respondents also thought that the disclosure would have a negative influence on the organisation's decision to hire.

Additionally, expectations around previous work experience and qualifications can be hard for survivors to meet if their abuse experiences disrupted their education or their recovery caused them to be out of work for a period of time (Loya, 2015; Lantrip et al., 2015). Unexplained gaps in employment history can raise concerns in the minds of recruiters (Innes, 2012). In some institutions, particularly those that follow a lock-step model of career progression, a record of gaps or only part time employment can lead to assumptions that a woman is 'not serious' about her career (Mavriplis et al., 2010). Recruiters like to see a consistent timeline of employment and any gaps need to be explained (Uskaurs, 2018). The need to truthfully explain a gap in work history would require survivors to disclose (directly or indirectly) or explain any resulting health challenges which caused them to be out of work. This may then leave them vulnerable to stigmatisation or discrimination (Van Belle et al., 2018; Shahwan et al., 2022).

Lastly, the stigma attached to survivor status is hard to detach from the stigma of mental illness. The findings from my questionnaire highlight assumptions of impairment or concerns over the mental wellbeing of survivor-professionals who are traumatised by their abuse experiences. Even when survivor-professionals show no sign of trauma or mental ill health, the assumption from others that they may struggle with triggers and the demands of the job still followed participants. Despite efforts to prevent discrimination based on mental ill health such as its inclusion as a disability and therefore a protected characteristic under the Equality Act (2010), mental illness stigma is structurally embedded into society through laws and policies, as well as in settings such as employment, healthcare, and the media (Voldby et al., 2022).

Whilst we might expect that professionals in the field of VAWG or mental health will have the education and awareness to protect them against holding stigmatising beliefs and occupy the position of 'the wise' (Goffman, 1963), this is not necessarily true. Caldwell and Jorm's (2001) study found that psychiatrists, general practitioners, and clinical psychologists actually hold more pessimistic views than the general public about the recovery potential for those with mental illnesses. The research participants and I theorise that this is due to an effect whereby professionals who work extensively with mental health patients or victims of abuse when they are in crisis and who do not see regular examples of survivors who are healthy and stable, build up an impression of survivors as how they present when in crisis. Survivors who are healthy and stable do not then want to risk being stereotyped as unstable or impaired, so they choose not to identify themselves as survivors. This results in professionals not recognising that they are seeing examples of healthy and stable survivors which would contradict their assumptions, so they continue to draw from their experiences of victims in crisis when conceptualising survivors, which creates a paradoxical cycle. This idea is explored further in the following chapter.

Survivor professionals who wish to break this cycle must take the risk of being seen as impaired and less credible, which appears to be particularly difficult for younger, less experienced staff members who do not hold senior positions. However, outside of the VAWG organisation, senior leaders must also be cautious about disclosing their survivor status publicly so as not to lose credibility for the whole organisation in the eyes of stakeholders and other agencies which they must work alongside. This may become particularly problematic for organisations who wish to lead by example and embody anti-stigma activism in the way they operate.

9.6 Disclosure as activism - The valorisation of survivor status and the political power of testimony

For my participants, disclosure was often seen as a political choice in an effort to fight against stigma and silencing of victims. Vasanthakumar (2020) argues that victims of oppression have a duty to fight it, and providing testimony is a primary way for them to raise awareness to coordinate resistance efforts. This was also linked to psychological benefits such as feelings of self-respect, catharsis, and empowerment (Vasanthakumar, 2020). Participants spoke about the power of openly identifying themselves as survivors and of having colleagues and friends do the same as this created bonds of solidarity, understanding and support. Participants also shared about how training and working in the VAWG sector politicised and ‘radicalised’ them and others. It has long been asserted by feminists that ‘the personal is political’ (Hanisch, 1969) however, this catchphrase has been interpreted in different ways (Schuster, 2017). Hanisch’s

(1969) original argument was that the oppressions women face in their personal lives stem from political inequalities, and we need a collective women's liberation movement to tackle structural disadvantages rather than finding personal solutions that raise the position of individual women within the existing oppressive system. However, third wave feminists have reinterpreted the slogan to mean that individual actions that challenge gender inequality in our everyday lives are political acts unto themselves, providing they embody feminist ideals and values (Schuster, 2017). For Hanisch (1969), personal disclosure in the form of consciousness raising had a political rather than therapeutic purpose as it allowed women to recognise male violence against them as a shared experience and identify causes and solutions for their abuse as a form of structural oppression.

Since the rise of the #MeToo movement (Hillstrum, 2018), disclosure is once again being regarded as a political act, but the extent to which it has promoted collective action is debatable. Like the #YesAllWomen hashtag trend that came before it (Thrift, 2014), #MeToo encouraged women to publicly share their stories of being subject to male violence and harassment and became a function to build solidarity and recognition (Jackson, 2013; Hillstrum, 2018). Whilst this raised awareness of the scale of abuse faced by women, it did not call for any other specific action or structural change. However, the campaign acted as a catalyst for the sharing of personal testimonies and like the third wave feminists, communication scholars argue that storytelling has its own power to challenge the status quo (Colvin, 2004; Jackson, 2013). Sharing narratives allows us to recognise similarity and therefore causality (Wieskamp, 2018). It also allows survivors control of the narratives around male violence, and it offers a roadmap to victims looking to others for guidance in overcoming adversity (Wieskamp, 2018). There is also a personal therapeutic benefit to being heard which most talking therapies are founded on (Gu, 2018). The process of telling one's story allows survivors to make and remake meaning from their experiences (Harvey, 2000), which acts as an incentive for disclosure. However, my interview participants spoke mostly about disclosing for political reasons or to form closer friendships, rather than for any therapeutic or support seeking purposes. Alongside this, as covered in the literature review, the incorporation of co-production and lived experience insight into health, social care, and justice services has reintroduced the idea of lived experience as valuable in the design and delivery of services (Beresford & Carr, 2012). However, we cannot yet tell if these developments will remain individualistic and tokenistic in nature, or grow beyond the individual to return us to a collective empowerment of not just victims and survivors of abuse, but women as a political class subject to male violence.

Neoliberalism has not waned and some now argue that we have developed into a culture where victimisation is treated as an individual identity, used to assert moral high ground over others (Campbell & Manning, 2018). This may increase incentives to publicly share one's grievances or victim status. Concepts such as vulnerability and trauma have become dominant paradigms for social movements and with demands for validation and reparations for experiences of injustice gaining increased attention, McLaughlin (2011) argues that such victim identities have become institutionalised within politics and society. The valorisation and commodification of emotion and experience is explored in Sara Ahmed’s (2012) concept of affective economies. Ahmed (2012) described narratives of experience as a form of capital which can be used as leverage in political arguments. Scott (1991) argues that this ‘turn to experience’, though helpful in bringing attention to the diversity of stories, has the consequence of essentialising identities and removing them from their structural and historic context, meaning we lose the ability to identify and challenge the ideological systems that generate these oppressions.

This valorisation of victimhood and its generation of victim hierarchies was touched upon by Lambda and Omega. Lambda gave an example of what the ‘hierarchy bingo’, as she referred to it, might sound like:

> there’s some that will say, well, “you don't know what you're talking about because I experienced child abuse by my dad and that's far worse than experiencing child abuse by a teacher. So you know, therefore, my voice outweighs yours” [...] It can be used for some people as their, like, power play or like “My voice has to be heard more than yours”.

Lambda also considered how those who rank lower within the victim hierarchy can therefore be discouraged from disclosing or may be led to minimise their own victimisation which could result in a loss of or reduction in their access to support.

Link and Phelan (2001), and Tyler (2020) assert that stigma itself is dependent on our shared history and social structures, but as we create new history, and social structures are reorganised within specific communities or social fields, what is and what is not stigmatised can also change. Therefore, within a context where surviving abuse is valorised, the victim/survivor with the least severe abuse experiences, or the women with none at all, can become the disempowered outsider.

Tyler and Slater (2018) make reference to Bourdieu's (1984) symbolic capital operating within social fields. By considering each VAWG organisation as a distinct social field, we can theorise how different values are ascribed to survivor status as either a form of stigma, or a form of symbolic capital which grants legitimacy, authenticity, or insight under certain conditions. When staff members' lived experiences are not viewed as severe enough to hold such symbolic significance, this capital can be devalued and even become a source of stigma for the marginalised non-survivor group. In this way, stigma power operates fluidly, reinforcing hierarchies. This situation reinforces the idea that stigma is not a static or natural interpersonal phenomenon, but one that is embedded within the collective power structures present in socially constructed fields (Tyler & Slater, 2018).

Jacoby (2015) differentiates between victimisation, which is an act of harm inflicted upon an individual or group, and victimhood, which is a collective identity formed based on that harm. Feminists have long struggled with the concept of women as victims (Lamb, 1999; Convery, 2006; Stringer, 2014; Banet-weiser, 2019). On one hand, we have a need to recognise women's political oppression and the significant issue of male violence perpetrated against us. On the other hand, we strive to promote women's agency, moving away from the idea of women as passive, disempowered, and needing to be protected or handed our own liberation rather than taking it (Stringer, 2014). Stringer (2014) asserts that the feminist politicisation of violence against women is integral to resisting the victim blaming logic of neoliberalism. My participants spoke about how in the past it was common for staff in VAWG organisations to organise campaigns such as the Take Back The Night march and victim's rallies which were seen as radical at the time (Cambell et al., 1998). Since the 1990s, coinciding with the professionalisation of the sector and the abeyance of the movement, staff are far less likely to participate in this sort of action and organisations have become less politicised and more institutionalised overall (Cambell et al., 1998).

Participants also spoke about the impact of rape discourse becoming increasingly reliant on the medical model's psychiatric diagnosis of trauma, positioning harm at the interpersonal level (LaFrance & McKenzie-Mohr, 2013). The counselling model of one-to-one professional intervention is now the dominant offer from support services and as a result, practices such as self disclosure and feminist group work have been reduced to mere relics of the women's anti-violence movement's once radical past (Vera-Gray, 2020). Furthermore, feminist scholars once argued that psychotherapy erases the impact of patriarchy, framing it as an individual issue which women must adapt to rather than fight against, and distancing women from one another (Happonen, 2017).

The question remains whether increased disclosures from professionals will have the effect of bringing women together as a political class calling for radical change, or if disclosures will remain centred on the individual whose survivor identity is in conflict with the norm and therefore continues to be stigmatised.

9.7 Reframing the disclosing survivor-professional from confessor to witness

During her interview, Seta described concealing survivor status as feeling like she was hiding a part of her life 'almost like you've committed a crime'. This highlights the framing of disclosure as a confession, in which the survivor carries responsibility for their status rather than simply being someone with knowledge of the truth and courage to tell it (Alcoff & Gray, 1993). Feminist authors Linda Alcoff and Laura Gray propose shifting the discourse around survivors' disclosure from ‘confession’ to ‘witness’. They draw on Foucault’s (1972) ideas around speech and the confessional to analyse survivor discourse around rape, incest, and sexual assault, and reflect on ‘speaking out’ as a political tactic. Foucault (1972, p.216) states that ‘to speak is to do something - something other than to express what one thinks’. He identifies speech itself as an action, making it a direct site of conflict, not merely a medium in which power struggles are played out. However, he also claims that the confessional is not liberatory but a powerful instrument of domination (Foucault, 1978). For example, in psychotherapy, the survivor must confess their trauma to receive diagnosis and treatment. This is controlled by the psychiatrist who operates from the dominant position of expert. Similarly, the media or politicians can exploit survivors' stories, sensationalising their trauma for profit or political gain. These examples demonstrate how disclosure can be co-opted to fit into hegemonic narratives, reinforcing dominant societal structures and power dynamics (Alcoff & Gray, 1993). Alcoff and Grey (1993) identify this as posing a challenge rather than a contradiction; by speaking out, survivors break taboos and challenge power relations, but they may also be reinforcing their own domination. Ultimately, reframing the survivor as a witness offers an important shift in perspective. It emphasises the survivor’s role as a bearer of expert wisdom, moving away from the damaging view of survivors as impaired individuals with discreditable identities. This shift reclaims power and dignity, allowing survivors to be seen as active participants with authoritative voices in their own narratives.

Evidently, the sharing of experiences, particularly publicly, carries risks beyond making the survivor and the organisation they work for vulnerable to discreditation. Disclosure can also lead to survivors’ discrimination, ostracism, or oppression - an outcome that is common across many concealable stigmatised identity types (Wong & Wong, 2006; Brohan & Thornicroft, 2010; DeSouza et al., 2017). As a final thought along these lines, I reflect upon the point made by participants that no woman had the responsibility to disclose for the good of the cause. When speaking out is seen as both necessary for one's own recovery and part of a survivor's political duty to help liberate women from the oppression of male violence, this can put pressure on women who wish to keep their survivor status concealed, for which there are many valid reasons. Beyond a basic wish for privacy, survivors can be at risk of retaliation from perpetrators or negative social reactions (Ahrens, 2006). Recounting one's abuse experiences, even in the abstract, can trigger varying degrees of emotional distress (Koopman et al., 2003). There may be negative repercussions on family members or other victims who need to be considered (Ahrens & Aldana, 2012; Bux et al., 2016), and as my research shows, reputations, jobs, and careers may be put at stake.

In short, calls to speak out may have the effect of disempowering women through coercive means (Alcoff & Gray, 1993) and if disclosure became the norm, the stigma formally assigned to survivors who speak out could be transferred to those who exercise their right to choose not to.

> You don't want anybody to martyr themselves on the disclosure altar, but if it's doable, I would encourage people to do it. (Theta).

9.8 Summary

From my study, it is evident that personal, social, and structural factors combine to influence disclosure decisions and outcomes. Desires for congruence between one's self perception and how one is viewed by others can drive disclosure, as can desires to form close, supportive bonds with colleagues, both of which may be beneficial to organisations as it facilitates mutual support and authentic leadership. However, disclosure is not without its consequences such as the risk of being perceived as vulnerable or less professionally capable which can also impact the wider organisation through courtesy stigma.

VAWG organisations occupy a unique position compared to services such as health or statutory social care where practitioners may consider disclosing lived experience of the issues they address. When an organisation's origins embrace 'the we' (Kelly, 2018) and oppose the depoliticisation of violence against women, disclosing survivor status can be seen as a positive political act, but neoliberal pressures such as professionalisation can shift sector wide attitudes on disclosure, potentially increasing risks for professionals who are open about their survivor status. These structural factors create additional layers of influence on disclosure choices in and across different VAWG organisations, and influence how colleagues and organisations respond.

When insights gained from lived experiences are valued highly, survivor-professionals may use disclosure to utilise the epistemic power afforded to those with survivor status (Schweinsberg & Schweinsberg, 2024). However, this has the potential to backfire if the disclosure recipients do not recognise survivor status as granting epistemic authority (Janack, 1997). Instead, disclosure might leave survivor-professionals vulnerable to victim stigma, casting doubt on their professional capabilities. Additionally, my analysis suggests that in professional environments, this stigmatisation of survivor-professionals may manifest differently from the more widely recognised forms of stigma that survivors face in broader society. This is notable from what was missing from the data. No participant from Phase 1 implied that victims are ever to blame for their abuse. In fact, when asked to comment directly on the vignette depicting a VAWG staff member expressing a victim blaming attitude about a service user, participants were clear that such beliefs were unacceptable. As we can assume VAWG professionals are typically trained or conditioned to challenge blaming and shaming attitudes towards victims of abuse, it appears that stigma can shift focus in professional spheres. Among colleagues or supervisors, particularly those who are part of the educated ‘wise’, the concern may not center on blaming the survivor for their past victimisation, rooted in their belief of a just world (Lerner, 1980) (a theory explored in chapter 1). Instead, the stigma appears to take the form of concern around the survivor-professional’s capacity to practice in an emotionally stable, rational, and unbiased manner, leading to survivor-professionals being discriminated against. This form of stigma would not typically be directed at survivors outside of these professional contexts, where the expectation to manage others' trauma, advocate for certain approaches, or offer objective support does not exist. Instead, it emerges uniquely in environments where the survivor is placed in a position of care or authority over others. These subtle stigmas may continue to undermine survivor-professionals in their roles, placing them in a double bind where disclosure either enhances their contribution within the organisations they serve, empowering them in their working roles, or has the potential to take their power away.

In the next chapter, I present and explain the second creative contribution to this research which is the allegorical fairytale inspired by a selection of these findings.

Chapter 10 - The Wild Woman and the Winding Forest

Chapters 8 and 9 introduced a theory that was posited by the research participants. They observed that workers in VAWG were very used to seeing victims in crisis and hearing details about their traumatic experiences. They also rarely saw examples of healed and high functioning survivors due to how difficult it is for survivors to openly identify themselves. This made it harder for some non-survivor staff to see the potential for victims to heal well enough to not only cope but thrive in a job in VAWG. A paradoxical cycle is then created where healthy and stable survivors avoid disclosing their survivor status to prevent being stereotyped as unstable or impaired. As a result, professionals can fail to recognise that they are interacting with survivors who contradict their assumptions, leading them to continue relying on their experiences with victims in crisis when conceptualising survivors.

As discussed in chapter 5, *Illustrations and stories as method*, when grappling with the hypothesis described above, I found it beneficial to create visual metaphors and draw parallels with analogous situations or narratives that illustrated the same phenomenon. The Greek myth of Cassandra proved particularly fitting. Cassandra was the last princess of Troy (Samatas, 2025). The god Apollo was enamoured with her and seeking her affections, he gifted her the power of prophecy. Cassandra, however, refused his advances which angered him. In his wrath, Apollo sought to sabotage his original gift by cursing Cassandra so that no one would believe her prophecies. Later, Cassandra experienced a vision of Troy burning and attempted to warn the people of the city but due to her curse, no one believed her and she was forced to watch Troy and its people burn (Samatas, 2025). This story felt particularly fitting for describing situations where there were negative consequences for survivor-professionals who disclosed to have more influence over how services or campaigns were run, or to defend or support service users in a way that was informed by their own lived experience.

Other metaphors I found useful when conceptualising this paradox were the children's folk song 'There's a hole in my bucket' where a hole in a bucket cannot be fixed without the help of the bucket, resulting in a deadlock (Naik, 2022) and the much simpler 'chicken or egg' conundrum, first documented over 2000 years ago by Greek writer Plutarch (Wilson, 2018). These are examples of causality dilemmas that illustrate the difficulty of sequencing actions where each seems to depend on the other being done first. In the context of the research, the survivors need to disclose in order to be an example of a healed and capable survivor for their colleagues to see, but their colleagues need to believe and trust in healed and capable survivors before it is safe for survivors to disclose without risking their abilities and stability being brought into question.

I decided to write my own allegorical fairytale to illustrate this dilemma, where I could incorporate other concepts from my findings into aspects of the story. In addition to the visible victim - invisible survivor paradox, I wanted to highlight how disclosures were often driven by a desire to inform practice to help victims. I also wanted to include how my participants described their attempts to hide their survivor status by 'putting on a tough front' or actively denying it. Lastly, I wanted to suggest a solution. It is apparent that less experienced or less senior staff members were more vulnerable to assumptions of impairment. Conversely, senior staff members occupied a safer position within the organisation. Whilst that did not alleviate internalised shame or the fear of being judged for all, the participants still expressed that change and speaking out had to first come 'from the top'.

A fantasy fairy tale was chosen over creating a realistic composite character and first person narrative (Wertz et al., 2011) set in a fictional, generic VAWG organisation. I wanted the story to be engaging to readers unfamiliar with the setting of the VAWG sector, and the human experience to take precedence, be relatable, and transferable to other settings and experiences. As with the Phase 1 findings commix, it also increases anonymity of participants as it allowed me to lean on fairy tale or folk story tropes of the heroine as a mediaeval maiden rather than selecting or excluding certain identity characteristics from my participants for the character design. The Jungian archetype of the fay (the wild woman) fit well for the survivor-professional as the fey comes from another world and often possesses powers of healing, shapeshifting, prophesy, and generosity (Ewald, 1977), all of which are characteristics my Phase 2 research participants demonstrated or claimed. Additionally, the stories my participants shared with me were not chronological detailed accounts of regular daily routines or sensory experiences. There was also no mention of interactions with physical objects or surroundings that could provide scope for illustrations. Therefore, the below is a work of fiction, removed from a real world setting but inspired by my analysis of the findings, rather than a composite narrative based on a selection of interviews (Willis, 2018). In doing so, I aimed to capture the ‘spirit’ (White et al., 2024, p.236) of the research findings and my participants' lived experiences — a spirit which encompasses trauma and trials, but ends with hope and solidarity through the pursuit of justice (Stockdale, 2021).

The Wild Woman and the Winding Forest

by Zoe Cox

Once upon a time there stood three villages on
the edge of a deep, dark forest.

This forest was home to an ancient monster that terrorised the villagers. Worst of all, the monster sometimes came into the villages and stole away children, carting them back to his forest home where he kept them imprisoned.

The villagers would hear the children's cries at night but try as they might, they could not find their way through the forest to rescue them, for the forest was covered in a dense mist and had many twisted, winding paths, with sharp rocks and vines ready to trip any wandering foot.

"Stay away from the forest!" the villagers warned one another, "Once you wander in, it's impossible to find your way out alone."

Then one day, a wild woman stumbled out from the edge of the trees and made her way to the nearest village.

"I've come from the forest!" she cried out to the villagers.
"Follow me, and I can lead you to the stolen children!"

But the villagers were afraid of the wild woman.

"No one can make it out of the forest alone!" they said to each other. "She must have been sent by the monster to trick us!"

And the villagers shunned the wild woman and bade her to leave them alone.

Refusing to give up, the wild woman walked over to the next village.

Having learned her lesson, she decided not to tell the villagers where she had come from.

She combed and plaited her wild hair and washed her dirty dress clean in a nearby well,

then she made her way to the next village to try again.

"Follow me!" she called out to the villagers. "I can lead you through the forest to save your children!"

"That's impossible!" the villagers scoffed back. "How could you know the way through the forest? You've never been inside! You don't know the dark winding paths, the thick mist, the sharp rocks and vines that trip any wandering foot!"

But the wild woman could not explain, for she knew if she told them she had come from the forest, they would shun her as the last village had. So the wild woman left and went to the third village, unsure how she would possibly convince the villagers to trust her.

When she arrived at the third village, she hesitantly called out.

"I know the way through the forest. Follow me, and we can save your children!"

"But how do you know?" they replied.

"Because... Because..." but she dared not tell the villagers how she knew.

Then from the crowd came a lone voice,

"I too escaped the winding forest. I too know the way through!"

And the wild woman's heart leapt.

Then a second voice called out,

"I escaped the forest long ago. I can also show you the way!"

And a third voice,

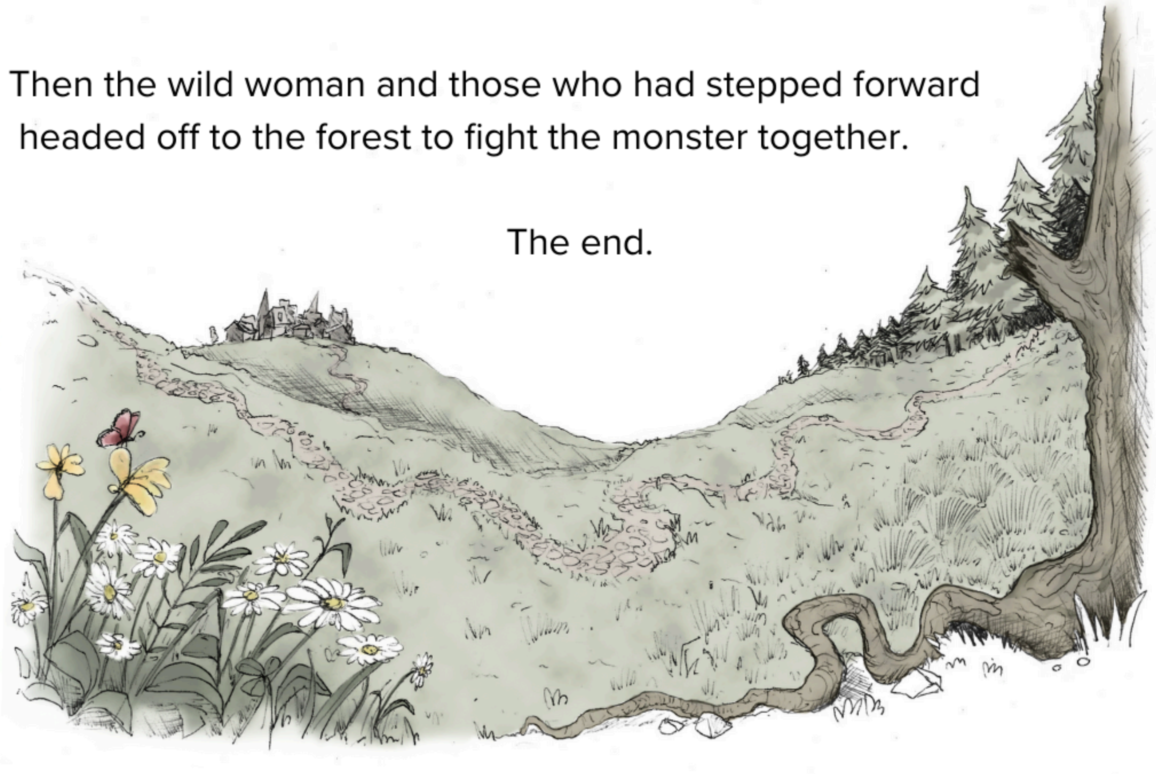
"I was once a child taken into the forest, but I found my way out again. I can help lead us through!"

Then a fourth, and a fifth, and a sixth voice called out, and slowly, other women stepped forward from the crowd to stand beside the wild woman as the villagers gazed on, amazed.

The wild woman looked at those who had stood beside her and recognised them as the friends she once knew who, like her, had been taken by the monster when they were children.

Then the wild woman and those who had stepped forward headed off to the forest to fight the monster together.

The end.



To break down the symbology, the winding forest and the stolen children within it act as a metaphor for the problem of VAWG and the challenging pathway out of trauma for its victims. The three villages represent the VAWG organisations that attempt to support victims out of danger or through the traumatic impacts of abuse. Goffman (1959) claims that people engage in performances, adopting a role or mask to influence how they are perceived by others, with the aim of being seen as authentic and credible in that particular identity. The wild woman tames her hair and washes her dress in the same way a survivor-professional may try to hide their survivor status and present as a credible professional without the 'emotional baggage' described in the first theme of Phase 1. Lastly, the village women who step forward at the end represent the survivor-professionals who can disclose their survivor status in support of others, creating a ripple effect that encourages disclosure. Participants shared that hearing others in their organisation, particularly senior staff members, speak about their own trauma or abuse experiences made them feel safe and able to share their own survivor status.

The final chapter of this thesis will offer a critical review of this study, its contribution to knowledge, and implications for further research and practice. It will end with my reflections on my doctoral studies overall.

Chapter 11 - Conclusion

11.1 Introduction

This final chapter brings the thesis to a close. I review my key findings in relation to the research questions and outline my original contributions to knowledge. I then discuss the research implications and recommendations, including recommendations from my research participants. I consider the limitations of this research in relation to my methods, and end with reflections on my journey to becoming a feminist researcher.

11.2 Summary of main findings

My interest in this research topic stemmed from a curiosity about the internal processes of people concealing a stigmatised identity and how they engage in impression management (Goffman, 1959), particularly in the workplace. I chose VAWG organisations as the field for my research because of my personal interest and fringe involvement in the sector. I was also curious about how the origins of many VAWG organisations might influence the culture around disclosure in these workplaces. The UK VAWG sector, being born out of feminist activism and often seen as a radical, by and for movement (Campbell et al., 1998) presents a distinct contrast to the more professionalised, medical-based environments of statutory mental health and social service organisations. These latter organisations have only recently begun proactively incorporating people with lived experience into the workplace as professional members of staff with designated lived experience roles (Roennfeldt & Byrne, 2021). Furthermore, as discussed in chapter 2, the subject of mental health professionals disclosing their own conditions in the workplace is already well-explored in existing literature. By studying survivor status disclosure in a VAWG context, I aimed to address a research gap and offer insights into how different stigmatised identities are managed in alternative work environments.

I began this study with a selection of theories around identity management and stigma (Goffman, 1956; 1963) and psychological models about the disclosure process (Ragins, 2008;

Chaudoir & Fisher, 2010). These starting point theories were selected using rational judgments of the social events under study (Archer et al., 1998). Through data collection and analysis, it became clear that the historical and cultural roots of VAWG organisations significantly impact how disclosures of survivor status are made and received. What began as a foray into the internal processes of individuals managing their identity and how others perceive them has later required me to consider the wider cultural and structural forces at play in VAWG organisations themselves. These personal, social, and structural aspects reflect an underpinning critical realist analysis of my topic within my overarching feminist approach.

The research questions I started with asked what informed survivor professionals' decisions to disclose or conceal their survivor status, what were the impacts of disclosing or concealing, and how those impacts were managed. I also asked how staff viewed disclosures from survivor-professionals to identify what sort of working environment that reflected. The phase of the research that investigated how staff viewed disclosures demonstrated a variety of conflicting responses. Staff showed a split responsibility of care towards colleagues, clients and service users, and the organisations they worked for. There were obvious concerns over survivor colleagues being a risk to the organisation, service users, or to themselves, but additionally there were responses that showed compassion, solidarity, and an eagerness to defend and support survivor-professionals. This suggests an uncertainty in such workplaces to how disclosures of survivor status will be and ought to be responded to. Critical realism provided a useful ontological and epistemological lens for navigating these contradictory responses. The framework has guided me to treat all explanations of reality as fallible, recognising that different participant accounts, like different theories, are all susceptible to error (Collier, 1994). In this context, the conflicting responses from participants can be understood as multiple, potentially partial, reflections of the complex realities in VAWG workplaces.

Through my interviews in Phase 2, I found that disclosures were made to build solidarity and friendships, practice authenticity, improve service delivery, and were also sometimes made as a political act. Survivor-professionals felt comfortable disclosing when other colleagues, particularly senior staff members, were open about their own survivor status or similar personal challenges. They also used methods such as indirect disclosures to manage risk, or shared their survivor status in informal, out of work settings, once closer friendships and bonds of trust had been established. Survivor-professionals were not immune to being stigmatised or discriminated against, however; some faced negative consequences after disclosing or refrained from disclosing altogether due to fear of those consequences. Those who felt the need to conceal their survivor status for these reasons struggled with feelings of inauthenticity and isolation, and the toll of the emotional labour involved in managing active concealment. Even those who disclosed and received supportive responses from colleagues engaged in ongoing impression management to ensure that any perceived vulnerability was not attributed to their survivor status. These findings highlight the complexity of navigating disclosure in VAWG organisations where the ideals of solidarity and empowerment may conflict with institutional concerns over professionalism and risk.

11.3 Original contribution to knowledge

This section highlights the original contributions of this thesis to several fields of study. Although this study was undertaken as part of a doctorate in social work, itself a vastly multidisciplinary field, its scope extends to contribute to a diverse range of disciplines, including gender-based violence and feminist studies, sociology and identity management, psychology, and organisational culture and management studies. As such, it offers insights that are transferable across multiple professional fields. While existing research has examined the disclosure of concealable, stigmatised identities in the workplace, this study uniquely focuses on the disclosure of survivor status within organisations addressing violence against women and girls, specifically exploring the individual decision-making processes and influences behind such disclosures.

11.3.1 New Insights into Disclosure of Survivor Status

One key contribution is the development of new insights into the motives, challenges, and strategies that survivor-professionals use when deciding whether to disclose or conceal their survivor status at work. While much of the existing literature primarily explores the psychological aspects of disclosure, such as individual decision-making processes or stigma management, this thesis employs a mixed constructionist and critical realist framework to expand on these themes by incorporating structural, cultural, and political influences that are specific to the VAWG sector. Thus, highlighting how existing (real) social structures and processes influence observable phenomena (Bhaskar, 1979) whilst valuing the central role of my partipicpant's knowledge (Parr, 2013). My findings help to explain how survivor-professionals navigate the tension between their personal motives, the feminist, activist roots of many VAWG services, and the increasing professionalisation and neoliberal pressures that shape the organisational environments they work in.

For example, survivor-professionals often feel conflicted between the feminist and anti-stigma principles that underpin their work and the need to avoid assumptions from colleagues that their survivor status may indicate an impairment. Secondly, managers and other staff members must navigate between their risk averse, gatekeeping roles which prioritise the immediate needs of the service users with their wish to support their survivor colleagues and reap the benefits of fostering open and trusting working environments. Thirdly, organisations overall are pressured to conform to formalised, institutional standards of professionalism from external stakeholders which can be in conflict with their feminist principles and ideals. This pressure can generate a culture which discourages disclosure, invoking a sense of incongruence for staff members. It is evident the workplace culture in VAWG organisations is shaped by this complex interaction of historic activism and current ideals with evolving professional norms. By highlighting these causal mechanisms at play, my research provides a more comprehensive understanding of how workplace culture, political motives, and institutional policies intersect to affect disclosure experiences and more generally, the wellbeing of the workforce.

11.3.2 Practical Implications for Survivor-Professionals and Organisations

The theoretical contributions of this study also have practical implications, both for survivor-professionals and the organisations in which they work. For survivor-professionals, the findings offer a clearer understanding of the factors influencing the decision to disclose their survivor status. By shedding light on the benefits, risks, and consequences of disclosure, and how others manage the challenges, this research may help survivor-professionals make more informed decisions based on their own specific contexts, values, motivations, and goals. The tension between personal identity and professional role, highlighted in this research, allows for a nuanced exploration of how survivor-professionals integrate their personal histories into their professional lives, while also managing their public identities in a way that feels safe and authentic to them.

For managers and external stakeholders, the research provides practical guidance on how to create a supportive working environment. Understanding the perspectives and experiences of survivor-professionals and other VAWG staff members may inform workplace policies and practices that not only acknowledge the unique needs of survivor-professionals but also aim to reduce stigma and facilitate an environment of trust and respect. This knowledge may be valuable in shaping human resource policies, developing staff training, and improving communication channels around issues of disclosure and identity in the workplace.

11.3.3 Methodological Contributions

This research also makes an important contribution by experimenting with new and underused methods of data collection, analysis, and dissemination. The integration of dummy Likert scales, typically a quantitative tool, within a qualitative questionnaire design is a notable innovation. These scales were not used for measuring responses, but for setting up the following qualitative questions along specific lines of enquiry. The experiment with dummy Likert scales is detailed further below.

Another methodological contribution was the incorporation of allegorical stories and illustrations based on ontological metaphors as part of the analysis and dissemination process. This helped me to engage with my data and concepts from the literature in creative ways, moving beyond traditional analysis techniques to work with my personal strengths and style to generate meaning from my findings. This method for offering an alternative approach to making sense of complex, sensitive topics and innovative possibilities for dissemination and impact will be further explored in future research outputs.

11.3.4 Concluding reflections on original contributions to knowledge

In sum, this thesis offers original contributions to both the theoretical and practical understanding of survivor-professionals working in VAWG organisations. It provides fresh insights into the dynamics of disclosure, particularly the complex decision-making processes that are influenced by personal, cultural, and structural factors. Additionally, the methodological innovations employed in this research, ranging from the creative use of traditional tools to the incorporation of visual and metaphorical analysis, demonstrate the potential for blending creativity with rigorous scholarship in ways that can enhance our understanding of complex social phenomena. This research not only adds to academic knowledge but also offers practical implications for improving workplace environments and supporting survivor-professionals in navigating the challenges of disclosure.

11.4 Implications and recommendations

In reflecting on the implications of this study, I have identified three key areas of relevance. These are the implications relating to disclosure in VAWG settings which lead into practical recommendations for both VAWG organisations and survivor-professionals, the implications for further research, and the methodological implications. To provide clarity through context, the implications and practical recommendations are woven together within the following section. These include the broad theoretical implications, implications for workplace culture and informal practices, implications for workplace policies, and implications for survivor-professionals. This section explores how the insights gained from the study may influence organisational practices, the experiences of survivor-professionals, and broader theoretical conversations. The methodological implications are covered in the following section, in combination with the research limitations.

These findings offer practical solutions and a deeper understanding of how identity management in the workplace intersects with power, politics, and lived experience. By examining the roles of leadership, team dynamics, disclosure practices, and structural and political forces, these implications shed light on how survivor-professionals may navigate the complexities of disclosure in a sensitive and politically charged field. Moreover, it covers how organisational structures, policies, and training can support survivor-professionals and create a culture of acceptance and belonging.

In Phase 2 of the research, I asked participants what advice they would give to other survivor-professionals or what they would recommend to organisations wishing to create a supportive working environment for staff managing disclosure decisions. These responses were incorporated into the analysis of the data and contribute to the implications of this research, however, I present them here explicitly to honour their direct insights and foreground my own.

11.4.1 Recommendations from participants

A common, ready response to my request for advice from the interview participants was directed at other survivor-professionals. This was usually the first piece of advice offered. They advised others to consider the decision to disclose very carefully because ‘once it’s out, you can’t take it back’. This highlighted how participants recognised the gravity of the decision and the importance of treating it seriously.

Considering recommendations for organisations, participants expressed a desire for a workplace culture where survivor status is normalised and accepted. To foster this environment, they recommended open conversations similar to consciousness-raising discussions, around violence against women and girls. They also identified the need for those in senior staff positions to lead by example when disclosing survivor status. Additionally, they emphasised the importance that this cultural shift is reflected in organisational policies, recruitment practices, and language, which needed to be anti-discriminatory and congruent with the organisations values around victim/survivor empowerment.

While some advocated for a return to a collective ‘we’ culture through the implementation of feminist principles and political discussions, others suggested more practical interventions such as training staff on how to appropriately support survivor-professional colleagues. They also offered suggestions to help survivors feel welcome and supported in the workplace more generally such as providing flexibility with potentially triggering caseloads and offering free counselling services for all staff. However, these suggestions primarily relate to managing personal trauma in the workplace rather than addressing the specific challenges of managing disclosure of one's survivor status or identity.

Ultimately, participants wanted to be trusted to manage their own experiences and navigate the impact of their trauma on their working practices independently. They highlighted that the most crucial step was to openly acknowledge and normalise survivor status in the workplace, ensuring it wasn’t treated as the ‘elephant in the room’. They believed that this would foster an environment where they could be trusted to perform their roles effectively without unnecessary scrutiny. Survivor-professionals wanted their lived experiences to be recognised as a valuable but common asset rather than a potential risk or something to be overvalued or exploited. Importantly, they also stressed that no one should feel pressured to disclose their survivor status if they did not wish to. It was acknowledged that personal choice is paramount and it is the pressure to conceal survivor status which is detrimental and which needs to be addressed.

Taking these suggestions along with other findings, I have identified the following implications of this research, leading into broader recommendations for VAWG services and survivor-professionals.

11.4.2 Broad theoretical Implications

This research shows the importance of not considering disclosure in a vacuum. There are many forces that influence disclosure experiences beyond the social relationship of the disclosing person and the receiver which has been the focus of most studies on disclosure. Workplace principles, political forces, and intersecting identities need to be considered when understanding stigma and impression management in different contexts.

11.4.2.1 Feminist Principles in the Workplace

Participants' desires to return to feminist political discussions and live feminist principles in the workplace suggests a need for VAWG organisations to realign their everyday practices with the feminist foundations on which they were built. Recognition of male violence as a social problem rooted in patriarchal structures rather than individual’s vulnerabilities may help combat victim blaming ideologies and create safer environments to disclose in (McDonald, 2010). Taken as a recommendation, this could reinvigorate the movement's core values, leading to deeper solidarity among staff and reducing or eliminating the gap between survivors and professionals.

11.4.2.2 Structural and political forces

By focusing on the structural and political forces within VAWG organisations, the findings challenge traditional psychological or individual-focused frameworks on workplace disclosure (Jones & King, 2014). This opens up a broader conversation on how organisations with a charitable or political mission can handle lived experience and the trauma histories of their workforce differently, compared to other professional environments.

11.4.2.3 Intersectionality in workplace studies

My research contributes to understanding how survivor status interacts with broader identity issues such as the values and political positions of the staff, job seniority, professional credentials, the specifics of staff members lived experience, and the influence of gender. This intersectionality has theoretical implications for workplace studies, particularly in understanding how power dynamics and hierarchies both inside organisations and amongst wider stakeholder organisations influence disclosure.

11.4.3 Implications for workplace culture and informal practices

This research indicates that workplace culture and peer relationships play a significant role in disclosure decisions and experiences. These in turn have significant implications for managers when considering developing workplace cultures, and for colleagues wishing to support survivor-professionals.

11.4.3.1 Role modelling from the top

Authentic leadership theory proposes that managers who display honest and ethical traits and behaviours are more likely to gain positive outcomes for their staff and their organisation (Jiang, 2020; Duarte et al., 2021). Authenticity enhances a leader's effectiveness, enabling them to better manage challenges and lead with purpose (Covelli, 2017). My research highlights the desire many survivor-professionals have to disclose for authenticity and the impact disclosure from managers and senior staff members has on supporting junior staff to feel comfortable with their survivor status at work. The research implies that senior staff working in VAWG have an important role to play in creating working environments where staff do not feel pressure to conceal. They also are likely to occupy a relatively secure position which may decrease the risk for them. Without gatekeepers above them assuming impairment, senior staff are afforded the ability to lead by example by disclosing or creating working environments that acknowledge and support the presence of survivors in the workforce. This may also bring the additional advantages of an authentic leadership style identified in the management literature.

11.4.3.2 Consciousness raising within staff teams

Participants spoke of the desire to encourage team conversations or group consciousness raising around the politics of male violence and its collective impact on women as a political class. It was recommended that organisations return to their origins and participate in group consciousness raising to foster a culture of awareness and solidarity and acceptance of survivor identities in the workplace. For the participants, organisations that engaged in open discussions around survivorhood felt like safe spaces to disclose in. These conversations normalised survivor status whilst also framing victimhood as part of a social system of oppression, moving away from the victim blaming logic of neoliberalism (Stringer, 2014). Workplaces openly incorporating political discussions and their staff's lived experiences into the workplace culture has implications for both professional development opportunities and workplace's approaches to staff wellbeing.

11.4.3.3 Trust and autonomy

The findings suggest organisations should be cautious not to undermine survivor-professionals by over-policing disclosures or assuming their lived experiences compromise their effectiveness. Instead, the emphasis should be on creating supportive environments where survivor-professionals feel empowered to make their own disclosure decisions. This should be with the recognition that disclosures are made with a purpose. The purpose may be to improve the effectiveness of their practices, to allow them to more fully engage in supervision, to combat stigma and lead by example, to develop close and supportive peer relationships, or to alleviate efforts spent on active concealment. This also has significant implications for staff wellbeing.

11.4.4 Implications for workplace policies

My findings suggest that there are tensions and uncertainties around how disclosure should be managed in the workplace, impacting both the survivor-professionals and their colleagues who take on responsibility to both police their colleagues or gatekeep and safeguard, and support each other in a job role they openly acknowledge to being challenging and emotionally demanding for all. Understanding the additional challenges faced by survivor-professionals can be used to inform specific workplace policies on disclosure, giving guidance to staff on how to manage survivor identities in the workplace.

11.4.4.1 Signalling acceptance and support through policy

Organisations should formally integrate guidelines around disclosure of survivor status, making it clear in HR policies that disclosure is voluntary and should be treated with respect, without fear of judgement or negative career consequences. Clear policies of welcoming survivor professionals in the recruitment phase and signposting to the specific support available for staff may signal an open acknowledgment of staff members' personal experiences of VAWG. Having this in the company policy may help to convey that the workplace acts as a supportive environment for survivor staff members rather than as gatekeepers. This could have benefits for recruitment and retention, and improve the psychological safety of staff.

11.4.4.2 Training for teams about how to support colleagues

Based on these findings, organisations could develop training that educates staff on trauma-informed approaches in relation to peer dynamics, and how to manage disclosure from peers appropriately. Training could also be offered to staff on how to utilise their own lived experiences in their work and how to manage the challenging impacts of the work and their lived experiences and survivor status.

11.4.5 Implications for survivor-professionals

It is clear from this research that navigating disclosure is often complex and multilayered. Survivor professionals do not only have to contend with their own comfort around sharing a stigmatised identity, they have to consider how others are going to respond to both the content and delivery of their disclosure, and the implications around their choice to disclose in and of itself. Additionally, they must consider that the recipients of their disclosure may be influenced by external stakeholders, wider structural forces, or the needs of their own or the organisation's professional reputation. Disclosure has implications on survivor-professionals' reputations and career trajectories as well as their peer relationships and personal sense of authenticity. This study, therefore, helps to identify many of the motivations present in disclosure decisions, and the potential outcomes for survivor-professionals wanting to disclose. It can also be utilised as a guide, informing survivor-professionals on what to consider when planning to conceal or reveal their survivor status.

11.4.5.1 Navigating disclosure to colleagues in a gatekeeping role

This research supports the theories of Zerubavel and Wright (2012) who propose that the social stigma surrounding the wounded healer intensifies when professionals, such as psychologists, shift from their usual guiding, therapeutic roles (supporting, validating, and accepting clients) to a gatekeeping role. In this gatekeeping capacity, they are responsible for maintaining the credibility of the profession and safeguarding service users from potentially impaired colleagues. As a result, survivor-professionals cannot assume they will receive the same support and acceptance from their peers that they see being offered to service users. The decision to disclose one's survivor status must be made with caution, carefully selecting the recipient and recognising that, while colleagues may advocate for and empower service users, this does not necessarily guarantee they will extend the same level of support and empowerment to fellow professionals.

11.4.5.2 The integration of survivor status into professional identity

An important finding of this research is the nuanced relationship that survivor-professionals in the VAWG sector have with their survivor status. Participants who reflected on this felt that working in VAWG was the right career path for them, acknowledging that their personal histories of abuse likely played a significant role in drawing them to this work. However, they also expressed a desire to ensure that their survivor status does not dominate their identity. Unlike specific lived experience designated roles which require survivors to use their personal experiences as a primary source of knowledge and insight, my participants' lived experiences underpinned their value base and passion for the work, but they preferred to integrate it as an equal or secondary, rather than primary, source of insight, allowing them to maintain a broader professional identity. This balance is critical for them as it allows them to contribute meaningfully to their work without allowing their abuse history to define their entire professional self. Instead, they seek a holistic professional identity where their survivor status is just one part of a larger constellation of characteristics, experiences, and expertise. This highlights the need for workplaces to recognise and respect the complexity of survivor-professionals' identities, ensuring they can engage their lived experience as a resource without it overshadowing their other skills and contributions. For survivor-professionals, balancing their personal abuse history with their professional identity is crucial in managing decisions around disclosure. While their lived experience enriches their work, they are cautious not to let it dominate their identity. This balance allows them to disclose strategically, drawing on their survivor status when it enhances their role but without being solely defined by it. By integrating their survivor status as one aspect of their professional identity, they can protect their emotional wellbeing and ensure their contributions are seen beyond the label of 'survivor'. It is important that colleagues recognise and respect the integration of insight from both lived and learned experiences and support survivor-professionals in maintaining this balance.

11.4.6 Implications for further research

Given the already narrow focus of this study, further research on this exact topic may run the risk of being too limited to produce meaningful generalisations. However, there are several opportunities for adjacent research that could expand our understanding of the complex interplay between managing a stigmatised identity and maintaining an overlapping professional identity. For example, a similar study could be conducted with professionals working in different sectors where a stigmatised lived experience relates to their work, such as children and family social workers who are care experienced or those working in homelessness services who have experienced homelessness. While there is existing research on mental health professionals with lived experience of mental illness managing disclosure at work, studies focused explicitly on professional-to-professional disclosure remain limited. Investigating disclosure across these different settings could offer valuable comparisons and insights into the shared and unique challenges of managing professional identities when they are informed by personal experiences.

Furthermore, future research could explore whether there are differences in stigma related to specific types of abuse, such as child sexual abuse or adult sexual exploitation through prostitution, and how these may influence the disclosure decisions of survivor-professionals. This research could also consider how stigma might vary based on different intersecting identities of survivors, including race, class, or disability, which will be touched upon below in the reflections of the study's limitations. Such research would help illuminate whether certain types of abuse or survivor identities are perceived as more or less stigmatised, influencing disclosure behavior and the potential risks or benefits that come with it.

Another potential avenue for further research could focus on how VAWG organisations support the wellbeing of their staff. This would include an examination of how support structures differ depending on the managerial framework (e.g., statutory vs. voluntary sectors) or the political ideologies that underpin the organisations. Further investigation into how the degree to which an organisation's political stance impacts how survivor-professionals are supported and how disclosures are handled would be a valuable contribution to understanding best practices for such organisations. This research could also further investigate how Miller's (1987) relational-cultural theory could be applied to understanding staff motivations in female dominated professional working environments.

11.4.7 Methodological implications

This research also has implications for the use of dummy Likert scales in qualitative questionnaires which is discussed above and covered in further detail in the following section. Additionally, this research highlights the potential of art and story based analysis and dissemination, particularly when one is exploring complex emotional topics and experiences such as those experienced by survivor-professionals. These methods allow for a more engaging and holistic representation of the data, moving beyond traditional textual analysis to communicate with audiences in new and impactful ways. Creative dissemination of the findings can resonate more strongly with varied audiences outside of academia, including survivors themselves, professionals in the field, and broader social movements (Preigo, 2016).

Lastly, I have explored the ethical considerations around befriending research participants beyond the boundaries of the research project - a topic seemingly unaddressed within current feminist literature. Though many academics have focused on interviewing friends and colleagues, creating a sense of friendship through rapport during interviews or ethnographic field work, and much is written on conducting research through an ethic of care, my study prompted me to navigate managing the ethics of forming long term friendships with formally unacquainted research participants, particularly around issues of continued anonymity and power. This unexplored ethical terrain calls for deeper discussion within feminist scholarship as the line between personal and professional can become easily blurred, yet the implications for ethical research practice are significant. Further theoretical and practical guidance for both research participants and researchers could be built from the experiences of this study.

11.4.8 Schrödinger's Survivor

As a final recommendation, I wish to introduce a concept I developed in my own feminist activist work, which has been strengthened over the course of undertaking this study. Drawing inspiration from Phaedra Starling's (2009) 'Schrödinger's Rapist' (itself an erroneous reference to the physicist's thought experiment Schrödinger's Cat), I have developed the concept of 'Schrödinger's Survivor'. In Starling's analogy, women must remain cautious and aware that any man could potentially be a rapist until an interaction reaches its conclusion, leading to a paradoxical state where every man is simultaneously both a rapist and not a rapist (Starling, 2009). This concept seeks to illustrate the complex reality women must navigate in assessing safety in their interactions with men.

Similarly, Schrödinger's Survivor posits that, until someone discloses their survivor status, we do not know if they are or are not a survivor of VAWG and must be cautious in our interactions with them not to make assumptions either way. In my experience, a lack of consideration of others' potential survivor status can lead to uncomfortable social situations, pushing survivors into a position where they must disclose to achieve identity congruence (Omarzu, 2000) or decide to actively conceal their survivor status which, based on my findings, can be experienced as invalidating and isolating. Further, such assumptions appear to increase the division between survivors and those without personal experience of VAWG, moving us further away from 'the we' (Kelly, 2018). Maintaining an awareness of 'Schrödinger's Survivor' in my interactions has helped me maintain a balance of sensitivity and neutrality with others, especially in VAWG related situations and environments.

In VAWG workplaces, this is particularly relevant given the high likelihood of survivors in the workforce. By applying Schrödinger's Survivor in their interactions with all colleagues, professionals could avoid the pitfalls of making assumptions, whether by treating colleagues with indifference when presuming they are not survivors, or as different when assuming that they are.

11.5 Methodological reflections and research limitations

I turn now to reflecting on the limitations of this research project. Here, I also discuss my learning and development as a researcher and justify the choices I made when designing my methods. It is often argued that generalisability and replicability are hard to achieve in qualitative studies with small sample sizes (Polit & Beck, 2010; Boddy, 2016; Carminati, 2018). Additionally, qualitative studies like my own are very context specific which limits their ability to be more broadly applied. However, generalisation is not the goal for most qualitative studies; their aim is to examine particular cases of human experiences to offer in-depth, contextualised understanding and infer meaning (Polit & Beck, 2010; Carminati, 2018). Therefore, sample sizes that offer theoretical saturation can be justified, particularly when sampling from a relatively homogenous group (Boddy, 2016). What is considered homogenous, however, can be difficult to answer.

11.5.1 Samples

One key limitation of my research relates to the range of workplaces represented by participants in the study which may have diluted homogeneity. In Phase 1, the questionnaire was specifically distributed to Violence Against Women and Girls specialist services such as domestic violence and sexual violence organisations. However, Phase 2 included participants who had experience working in a broader range of organisations that dealt with VAWG among other issues. Whilst many of the participants had worked in VAWG specific services and shared about these, they also shared about how they managed disclosure decisions in other roles such as statutory social work and working within universities in specialist sexual violence liaison services for students or as part of VAWG research groups. While this diversity of experience contributed to a richer and more varied dataset, it may have diluted the specificity of insights related solely to sexual and domestic violence services represented in Phase 1. Narrowing the focus to interview only workers from specialist VAWG services might have allowed for more targeted findings directly applicable to those particular settings, though at the potential cost of the broader perspectives and comparisons my participants were able to make across their workplaces.

Even though my participants came from a wide range of organisations, the study itself remains niche within the context of VAWG services. It was important not to make the research scope too narrow or exclusionary because I was uncertain whether disclosure decisions within VAWG services would be a significant enough issue for survivor-professionals to warrant a more narrowly focused study. This broader approach enabled me to capture a fuller picture of how survivor-professionals navigate disclosure in different organisational contexts while still centering the unique challenges and dynamics found within VAWG organisations. Thus, while the inclusion of diverse workplaces may have diluted the focus on purely VAWG-specific services, it also helped establish the relevance and pervasiveness of disclosure decisions for survivor-professionals across different fields, confirming that this issue transcends any one particular sector.

Along with the variety of organisations each interview participant offered, participants varied in age, race, and nationality, and in their abuse experiences and identities as survivors. For some, their abuse experiences were recent, whilst for others, their recognition of their own survivor status only came to them after they began working in the sector. Others identified as survivors before beginning to work in VAWG and had been clients of VAWG services themselves. These different abuse experiences and intersecting identities may have an impact on survivor-professionals' disclosure decisions. For example, participants in more senior roles did not report receiving negative responses to their disclosures, but this could also be due to them being older and disclosing abuse experiences that were a lot less recent. Additionally, the interviews focused on discussing how disclosures were made and responded to, not the details of the disclosure. It is possible that some abuse experiences are more stigmatised or likely to lead to victim blaming than others and this could have led to more negative consequences from disclosing. However, since the focus of my research was on the general disclosure of survivor status rather than the specifics of the abuse, this aspect was not fully explored. This represents an important gap in the literature and an opportunity for future research. Further investigation could look at whether survivors of certain forms of gender-based violence are more stigmatised and how this influences both the decision to disclose and the subsequent treatment of survivors by colleagues, managers, and institutional systems. Understanding these differences could help in tailoring workplace policies and support systems more effectively to address the specific challenges faced by survivor-professionals depending on the nature of their experience.

Volunteer bias is an important consideration in my research, as it is likely that the participants who volunteered to share their experiences were a select group of individuals who found the research question personally meaningful. The women who participated were not only willing to reflect on their own survivor status but were also likely comfortable and confident enough in their identities to engage with me on this sensitive topic. There are many women working in

VAWG who may have had personal experiences with sexual or domestic abuse but do not view their survivor status as relevant to their professional roles or personal identities. These individuals likely chose not to participate in my study and their voices are not captured here. However, that is acceptable, as the aim of this research is not to explore the broader impact of abuse on career motives or identities. Instead, this study focuses on those who feel that their survivor status is relevant to how they do their work or who they are as people, and particularly on their decisions to share or conceal this aspect of themselves in the workplace.

This selective participation reflects the phenomenon of volunteer bias where individuals who responded to surveys show significantly higher levels in conscientiousness, extroversion, and agreeableness in personality tests, compared to non-respondents (Lönnqvist et al., 2007). If these personality traits are common in volunteer participant pools, it may suggest that the participants in my study were more likely to be open, reflective, and socially engaged individuals compared to the general population. While this bias may limit the generalisability of studies that rely on volunteers, it does not diminish the value of the insights gained from those who view their survivor status as a meaningful aspect of their professional and personal lives.

11.5.2 Data collection tools and the fallibility of pilots

This doctoral project marks my first formal engagement with research and it has offered me countless opportunities to learn and acquire new skills, knowledge, and understanding. Naturally, a more experienced researcher might have anticipated and avoided some of the challenges I encountered along the way. Two notable challenges arose from the selection of pilot participants. Given our prior friendships, they were not fully representative of the target study participants and their enthusiasm to assist me may have influenced their responses, making them less reflective of anonymous survey respondents. Another challenge involved my own anxieties and self-doubt regarding participant recruitment, as discussed in Chapter 4, *design and methods*. Despite these hurdles, my inexperience as a researcher allowed me to approach the research design process with a level of openness and creativity that may not have been possible otherwise. This willingness to experiment with my data collection tools ultimately led to insights and methods that might not have emerged through a more conventional approach.

As discussed in Chapter 4, and above as a methodological implication, I experimented with using dummy Likert scales in my questionnaire. These scales were placed before text boxes asking participants to rate the acceptability, professionalism, or reasonableness of the actions of various characters within the fictional vignettes. This was designed to help participants organise their thoughts by first asking for a simple assessment, before offering participants the space to explore nuances. This approach worked well during the pilot phase as my volunteers were aware they were supporting me to assess the quality of my data collection tools so they were sure to spend time completing the full questionnaire. However, when I began collecting data, I encountered three responses where participants had only completed the Likert scales without providing any qualitative input. Since the Likert scales were not intended for analysis, these responses had to be discarded. Despite this, I was still able to successfully collect 42 usable responses to the questionnaire and the Likert scales appear to have worked well for the majority of the participants. This method, while promising, will require further testing and evaluation to assess its overall effectiveness and reliability as a qualitative research tool. To avoid issues like partial completion in future, there is the option of adjusting the settings in Qualtrics to make the qualitative response fields mandatory, ensuring more complete data collection. On reflection, I probably did not make any fields mandatory due to my own anxiety about not receiving any responses and due to wanting to give my participants choice and control over how much of the questionnaire they engaged with.

Another element of the questionnaire design that worked well in the pilot cases but not so well in practice was my third vignette. This vignette was not an example of a staff member disclosing, but of a staff member displaying a victim blaming attitude about a service user. My hopes were that this would encourage participants to reflect on the impact of this staff member's words on survivor-professional staff members who overhear it. The questions asked if there was any difference in the acceptability of making victim blaming statements in the presence of service users versus the presence of staff members. This was to identify if there was an ‘us and them’ separation between the two groups. Whilst this still generated some useful responses, my pilot participants responded more in the way I intended and expected them to than the participants in practice. Again, this may have been due to my volunteer pilot participants, being peers, having a deeper understanding and interest in my research topic so their answers stayed focused on the impact to survivor professionals. Whilst I was able to glean staff attitudes from what was not said by the participants, what was not present could not be easily coded and the vignette offered the least relevant data overall.

11.6 Final reflections on research

11.6.1 Doing reflexivity

Throughout the research process, I employed a variety of practices to facilitate my understanding and processing of the information I was both learning about and generating. Recognising the importance of reflexivity in qualitative research, I sought practical ways to incorporate it into my work. While many texts emphasise the need to be reflexive, indeed, there are several handbooks describing the importance and benefit of reflexivity in qualitative research (see May & Perry, 2014; Dean, 2017; Braun et al., 2023), I found limited practical guidance on how to formally practise it beyond the general advice of ‘keeping a diary’. To address this, I purchased a reflective journal for researchers, designed by VAWG scholar Dr. Jessica Taylor, which asks readers to critically examine the motives and choices around their research design and data analysis. However, I found that writing by hand did not suit my process as it limited my ability to revise or expand upon my thoughts in a coherent way. This experience reinforced the idea that reflexivity is a highly individual and iterative process.

From the beginning, I attempted to document my daily reflections and critically examine my own biases. I maintained an online blog where I engaged in free-flow writing, capturing my personal reflections on the research topic, my experiences as a student new to research and academia, and my thoughts on research methodologies and philosophies. The blog also served as a digital repository, housing email correspondences, grey literature, screenshots from social media (e.g., relevant Twitter posts), deleted writing drafts, and materials from online training sessions. In many ways, my online blog functioned as a 'silent supervisor', allowing me to articulate and evaluate my thinking. I frequently used it to write informal essays explaining theoretical concepts, which helped refine and cement my understanding. Toward the end of the thesis writing process, I also engaged with artificial intelligence tools like ChatGPT to discuss and clarify ideas, although these conversations often involved me identifying and correcting its limitations, which in itself proved beneficial. However, one limitation of my reflective practice was the lack of dialogue with other researchers working on similar topics. Beyond surface-level discussions about my research, I had few opportunities for deeper, critical conversations about my literature review or findings in relation to VAWG and the disclosure processes. I believe that engaging with peers or colleagues who could challenge my perspectives and offer alternative insights and recommendations may have enriched my analysis and interpretation of the data.

11.6.2 What is a PhD?

The following is an extract of free-flow writing from my blog where I grapple with questions around knowledge ownership and validity, and the function of academic research:

> *My participants are the people who said all the stuff, all I did was collect it and summarise it and point out how some other academics have said stuff relating to it. I haven't provided some great additional insight. My participants already knew this stuff, it's not MY contribution to research, it's theirs. I'm just the train it rode in on. With qualitative research, I cannot say that enough people felt a certain way or experienced a certain thing that we are able to generalise this to all. All I can say is 'for my participants, this was how X Y Z was experienced.' OK, cool… So all I'm doing is sharing my version of their stories. They could have written their own blogs, books, dissertations saying it all, but that would just be seen as their opinion - their subjective experience. Somehow, me doing it with a credible, formalised research hat on makes it valid… This whole thing is more like an art project. Sure, I've had thoughts about existence and society and*

> *knowledge and reality and meaning, but I always had those thoughts. Does that make me a social scientist? Or a philosopher? Is that all this is?*

Reading this back led me to ask the question, what is a PhD? If I reflect on my reasons for undertaking one, it was simply an opportunity that presented itself to me unexpectedly and I feared I would regret declining it. Though I never considered myself to be particularly academically skilled or inclined, I've always enjoyed learning and developing my own understanding of others' psychology and the social world, and I was up for a new challenge.

Morse and Field (1996) describe engaging in research as an intense and enriching experience that captures one's soul and intellect; it contributes to personal and professional growth and enhances one's understanding and appreciation of the world. Whilst this is an agreeably poetic portrayal of the profound nature of research, my initial attraction to research was somewhat more straightforward and is better encapsulated in the following quotes: American writer and anthropologist Zora Neale Hurston describes research as 'formalised curiosity. It is poking and prying with a purpose' (Hurston, 1942) and Dr Dalia Iskander, an anthropologist from University College London expressed 'I love being an anthropologist because it gives me a professional licence to be nosy' (UCL: no date). Conducting a formalised social research project was my way of obtaining one of those licences. I previously never harboured ambitions for a career in research so I have not viewed this project as a stepping stone in that direction. For me, it has been about the enjoyment of learning something new about something I previously knew nothing about. My curiosity has carried me through.

The term PhD comes from the Latin phrase 'philosophiae doctor', which literally translates to 'love of wisdom' (Sunny, 2021). By that definition, I can claim the title. However, loving knowledge is not enough to gain the official qualification; I need to find, create, or generate new knowledge, then evidence that I have done so. The PhD process is sometimes described as jumping through a series of hoops (Trotter, 2003), not just the bureaucratic procedural ones such as filling out forms, writing progress reports, completing compulsory training, attending annual reviews and check ins, strict data protection requirements, and the entire ethical approval process; there are also hoops to meet academic standards such as using the correct referencing style, writing in a formal scholarly manner, being sure to say that my themes were ‘generated’ and did not ‘emerge’ (Braun & Clarke, 2023), and even avoiding mentioning an actual number on how many participants said a certain thing so I’m not called up for suggesting some sort of quantitative finding from a qualitative study. Sometimes the rules felt like arbitrary barriers to achieving the true purpose of the research for me. I am surely not the first PhD student to express such grievances and I came into the role fully aware that I would be facing these expectations and willing to attempt to meet them, trusting they are there for a reason. I bring it up because I know research and the way it is done can, has, and does change.

Feminist researchers are credited with bringing personal reflexivity into research, introducing the first person voice in academic writing, and challenging researchers to acknowledge and make visible the influence of their own values and beliefs on their research (Etherington, 2004). The use of arts based research methods for social enquiry were formalised and spread by Eliott Eisner in 1993, going against the logical positivists whose research, done with mechanistic uniformity, was still the dominant paradigm at that time (Barone & Eisner, 2011). Research that is co-produced with the participants such as cooperative enquiry created by John Heron (1996), or auto-ethnographies conducted by the researcher themselves which was also developed as a research method in the 1970s (Adams et al., 2017) are other methodologies that challenged the standard research paradigms before them. Etherington (2004) writes that research methodologies in general are changed and influenced by the evolving trends and traditions of the society that they coincide with. With research, what is rejected as non academic, lacking in rigour, or an insult to the integrity of the institution today, may be praised as innovative tomorrow.

My questioning over who should take credit for contributing to knowledge leads me to wonder if an alternative methodological approach would better suit me as a researcher. An approach such as co-operative inquiry might offer an alternative to simply reproducing the insights of my participants through my own interpretation, allowing me to do research ‘with’ rather than ‘about’ others, thus sharing the power and ownership (Russ et al., 2024). The challenges with such a method are the time demands on the co-research participants and questions around fair payment for their contributions and credited authorship. However, I do not believe that a co-operative methodology would have been more appropriate for answering my research questions for this project any more than an ethnography would have been. The questionnaire and interview process was timely, efficient, and according to my participants, mutually stimulating, with one questionnaire participant writing that they were ‘really interested [as] so much of the research is on our service users ☺’. Further, after the interviews, several participants expressed that they were pleased to see someone was interested in their experiences as professionals because, as Kappa expressed, ‘it can almost be missed that actually, the professionals have the same shit.’

My question goes back to why is it that we place a greater value on knowledge once it receives the academic stamp of approval, over knowledge shared through informal spaces like on Twitter, blogs, self published zines, or even graffitied on the bathroom wall. My participants shared about how at work, they would pretend their insights from lived experience were actually from more reputable or objective sources in order to be taken seriously. I can’t help but reflect on how, through the process of reframing insights from their stories of disclosure into a thesis about disclosure stories, I am doing the same.

In my discussion chapter, I examined the debates surrounding the value of lived experience knowledge, drawing on Sara Ahmed’s (2004) concept of narratives of experience as a form of capital. In her essay ‘On Being Included’, Ahmed (2012) argues that while academic writing is useful for reflection and reorientation, the academic compulsion to translate all experience into written form can reduce its value, treating writing as merely a means to an end. She observes that this can lead to the loss of the richness and complexity inherent in those experiences. I felt this sense of loss while converting my participants’ words into an academic output, particularly when removing quotes from their contexts and having no way to fully capture the non linguistic information that was communicated during the interviews with my particular data analysis method. It has led me to reflect on whether my experimentation and growing interest in creating more imaginative and emotionally resonant research outputs discussed in Chapters 5 and 10 is, in part, an effort to reconcile with and compensate for that loss. By integrating the aesthetics of emotion into my work, I aim to restore the depth and nuance of these shared lived experiences, hoping to encourage greater emotional engagement with readers and potentially encouraging real-world action and impact.

Lustick (2021) introduced a framework called "emotion coding" for systematically incorporating thoughts and emotions into qualitative data analysis, which is used more commonly in content analysis and ethnography. Integrating this approach into my own analysis might have helped preserve the emotional depth of my participants' experiences. However, even with this method, the emotional content would ultimately be distilled into written form, once again serving as a ‘means to an end’ (Ahmed, 2012). This also would not address the sense of inauthenticity caused by the nature of social research being secondhand, reinterpreted knowledge. Nevertheless, I believe thematic analysis was an appropriate and sufficient method for addressing my research questions. Additionally, my own recollection of how each participant expressed themselves played a role in shaping my interpretation as I coded the transcripts.

Considering other alternative methodological approaches, such as co-operative inquiry (Heron, 1996), could have provided a more equitable way to share power and ownership with participants. This method embraces collaboration, treating participants not just as subjects but as co-researchers who contribute to every stage of the research process. Such an approach aligns with feminist principles of inclusivity and shared authority, as championed by feminist academics like Jenkins (2014), who emphasise dismantling hierarchies in research. However, as mentioned, there were practical barriers to this approach: my participants were busy professionals with limited time, and as a PhD researcher, I lacked the resources to compensate them fairly for the additional involvement. Furthermore, the data might have taken a different shape if I had only interviewed participants willing to forgo anonymity and be credited directly.

Here, I highlight a fundamental tension in qualitative research: the challenge of validating and giving due recognition to participants' lived experiences within the often rigid confines of academia. This mirrors Jenkins’ (2014) discussion of the double bind faced by feminist researchers caught between the demands for traditional academic objectivity and the need to acknowledge the situated, subjective nature of the knowledge they generate.

Ultimately, my concern is not simply about the need to credit participants as co-researchers; rather, it is about the broader question of why such processes are deemed necessary in the first place. Knowledge is often only valued and validated within certain circles when it passes through formal academic channels. The system has rules that are designed to ensure rigour until those rules become gatekeeping mechanisms that devalue other forms of knowing.

In my reflective journal entry, I express a growing frustration that my role as a researcher often feels more like that of a conduit, rather than a creator of knowledge. This resonates with Jenkins’ (2014) critique of the way feminist research is frequently marginalised and de-legitimised within mainstream academic disciplines and it highlights my own need to recognise my value as a researcher. This value lies not only in the data I collect but also in how I interpret, analyse and present my findings within academic frameworks, which is an act that can simultaneously feel validating and constraining.

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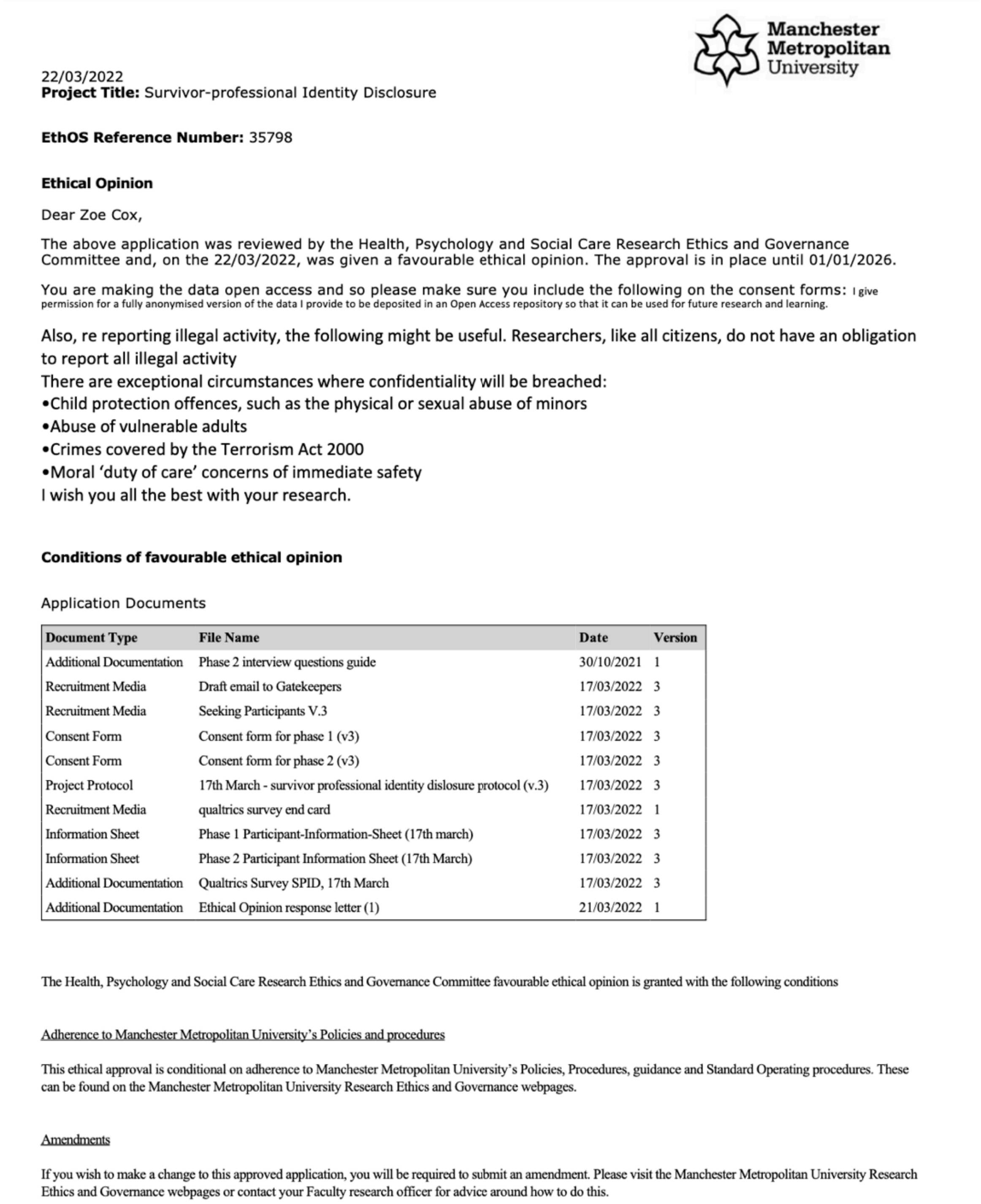
Appendices

Appendix 1: Favourable ethical approval letter



Manchester
Metropolitan
University

22/03/2022
Project Title: Survivor-professional Identity Disclosure

EthOS Reference Number: 35798

Ethical Opinion

Dear Zoe Cox,

The above application was reviewed by the Health, Psychology and Social Care Research Ethics and Governance Committee and, on the 22/03/2022, was given a favourable ethical opinion. The approval is in place until 01/01/2026.

You are making the data open access and so please make sure you include the following on the consent forms: I give permission for a fully anonymised version of the data I provide to be deposited in an Open Access repository so that it can be used for future research and learning.

Also, re reporting illegal activity, the following might be useful. Researchers, like all citizens, do not have an obligation to report all illegal activity
There are exceptional circumstances where confidentiality will be breached:
•Child protection offences, such as the physical or sexual abuse of minors
•Abuse of vulnerable adults
•Crimes covered by the Terrorism Act 2000
•Moral 'duty of care' concerns of immediate safety
I wish you all the best with your research.

Conditions of favourable ethical opinion

Application Documents

Document Type	File Name	Date	Version
Additional Documentation	Phase 2 interview questions guide	30/10/2021	1
Recruitment Media	Draft email to Gatekeepers	17/03/2022	3
Recruitment Media	Seeking Participants V.3	17/03/2022	3
Consent Form	Consent form for phase 1 (v3)	17/03/2022	3
Consent Form	Consent form for phase 2 (v3)	17/03/2022	3
Project Protocol	17th March - survivor professional identity dislosure protocol (v.3)	17/03/2022	3
Recruitment Media	qualtrics survey end card	17/03/2022	1
Information Sheet	Phase 1 Participant-Information-Sheet (17th march)	17/03/2022	3
Information Sheet	Phase 2 Participant Information Sheet (17th March)	17/03/2022	3
Additional Documentation	Qualtrics Survey SPID, 17th March	17/03/2022	3
Additional Documentation	Ethical Opinion response letter (1)	21/03/2022	1

The Health, Psychology and Social Care Research Ethics and Governance Committee favourable ethical opinion is granted with the following conditions

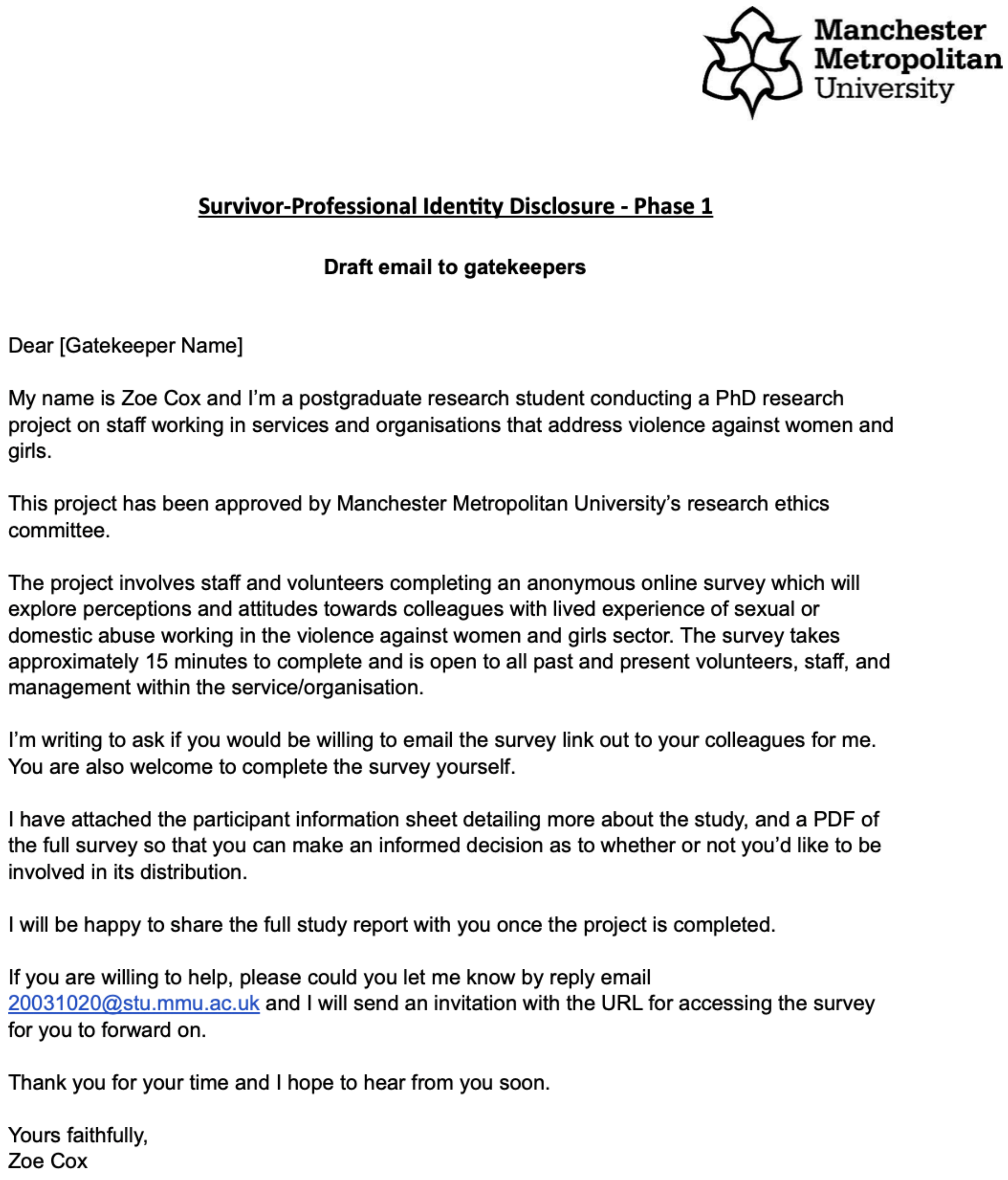
Adherence to Manchester Metropolitan University's Policies and procedures

This ethical approval is conditional on adherence to Manchester Metropolitan University's Policies, Procedures, guidance and Standard Operating procedures. These can be found on the Manchester Metropolitan University Research Ethics and Governance webpages.

Amendments

If you wish to make a change to this approved application, you will be required to submit an amendment. Please visit the Manchester Metropolitan University Research Ethics and Governance webpages or contact your Faculty research officer for advice around how to do this.

Appendix 2: Draft email to Phase 1 gatekeepers



Survivor-Professional Identity Disclosure - Phase 1

Draft email to gatekeepers

Dear [Gatekeeper Name]

My name is Zoe Cox and I'm a postgraduate research student conducting a PhD research project on staff working in services and organisations that address violence against women and girls.

This project has been approved by Manchester Metropolitan University's research ethics committee.

The project involves staff and volunteers completing an anonymous online survey which will explore perceptions and attitudes towards colleagues with lived experience of sexual or domestic abuse working in the violence against women and girls sector. The survey takes approximately 15 minutes to complete and is open to all past and present volunteers, staff, and management within the service/organisation.

I'm writing to ask if you would be willing to email the survey link out to your colleagues for me. You are also welcome to complete the survey yourself.

I have attached the participant information sheet detailing more about the study, and a PDF of the full survey so that you can make an informed decision as to whether or not you'd like to be involved in its distribution.

I will be happy to share the full study report with you once the project is completed.

If you are willing to help, please could you let me know by reply email 20031020@stu.mmu.ac.uk and I will send an invitation with the URL for accessing the survey for you to forward on.

Thank you for your time and I hope to hear from you soon.

Yours faithfully,
Zoe Cox

Appendix 3: Draft invitation email for gatekeeper to forward on to colleagues

Manchester
Metropolitan
University

Survivor-Professional Identity Disclosure - Phase 1

Draft invitation email for gatekeeper to forward on to colleagues

Hello,

You have been forwarded this email because you work or have previously worked in a service or organisation that addresses violence against women and girls.

I would like to invite you to participate in the first phase of my PhD research project which will involve completing a survey about staff perceptions and attitudes towards survivors of abuse working in the violence against women and girls sector.

The survey is completely anonymous and should take approximately 15 minutes to fill out.

I have attached the participant information sheet which explains the study in more detail. It is up to you if you wish to take part or not, and you can withdraw from completing the survey at any time by closing down your browser window, up until submission of your responses at the end of the survey.

You are welcome to ask any further questions about the study before making a decision.

The link to the survey is here *URL LINK TO survey*

Thank you for your time and consideration.

Yours sincerely,
Zoe Cox

Appendix 4: Phase 1 participant information sheet

Manchester
Metropolitan
University

Participant Information Sheet

Survivor-Professional Identity Disclosure - Phase 1

Disclosing survivor identity status amongst colleagues within services addressing violence against women and girls

1. Invitation to research

My name is Zoe Cox and I'm a PhD researcher at Manchester Metropolitan University. I would like to invite you to take part in my research about professionals and practitioners working in services or organisations that address violence against women and girls (VAWG).

The aim of the study is to establish how professionals and practitioners with lived experience of sexual abuse or intimate partner/domestic abuse manage decisions and outcomes around disclosure of their survivor-status to colleagues, and what factors influence these decisions.
The survey you are being asked to complete is for phase one of this study. You do not need to have experienced abuse or workplace disclosure to take part in this phase. The results of this survey will be used to inform the second phase and your responses may be used as part of my PhD thesis.

2. Why have I been invited?

You have been invited because of your work experience in the violence against women and girls sector. This survey is open to any person who currently, or previously (within the last 6 years) has worked in services or organisations that address sexual and/or domestic abuse against women and girls. The service or organisation does not need to be women and girls specific. For example, it could be an organisation focusing more broadly on research into child abuse which would include sexual abuse against girls, or on responding to victims of violent crime which would include domestic abuse against women.

3. Do I have to take part?

It is up to you to decide. You will have the opportunity to read through this participant information sheet which will describe the study. You will then be asked to submit a consent form to show you agreed to take part. You are free to withdraw from completing the survey at any time by closing the browser tab, without giving a reason, and you may ask any questions before you decide to take part.

4. What will I be asked to do?

You will be asked to complete an online survey. The survey will take approximately 15 minutes to complete. The survey asks you to read three short fictional vignettes which are imagined to take place in services or organisations that address violence against women and girls. You will be asked to answer a few questions about each scenario and to explain your reasoning. You will also be asked for your thoughts on what services or organisations can do to support staff who have experienced domestic or sexual abuse, and about your motivations for entering the sector. This survey is completely anonymous and there will be no questions aiming to collect your personal data or that could lead you to being identified.

5. Are there any risks if I participate?

As this is an anonymous online survey that participants will complete remotely, there is no immediate or significant risk of physical harm. However, as the research is exploring themes of abuse, stigma, and discrimination, there may be some risk of psychological distress due to the sensitive nature of the topic.

6. Are there any advantages if I participate?

There will be no direct reward for participants completing this survey. However, your participation will help add to ongoing research in this area which could later be used to improve the work experiences of professionals and practitioners with lived experience of abuse.

7. What will happen to the results of the research study?

The results of this survey will be used to inform further research in this study which will then make up part of my PhD thesis. Your answers may also be used anonymously in other research outputs such as in presentations or publications. The data from the study will be stored in the university's research repository, but any personal or identifiable data will not be made open access.

8. Who has reviewed this research project?

The research has been reviewed by Manchester Metropolitan University ethics committee and the National Institute for Health Research.

9. Who do I contact if I have concerns about this study or I wish to complain?

for general questions about the project, contact:

Researcher/principal investigator:
Zoe Cox, Department of social care and social work, Faculty of Health, Psychology and Social Care, Manchester Metropolitan University. Email address: zoe.cox@stu.mmu.ac.uk

for concerns/complaints about the project, contact:
Research Supervisor: Professor Sara Ryan, Department of social care and social work, Faculty of Health, Psychology and Social Care, Manchester Metropolitan University. Email address: s.ryan@mmu.ac.uk
or
The Faculty Head of Ethics: Dr Claire Fox, Head of Research Ethics and Governance for the Faculty of Health and Education, FOHE-ethics@mmu.ac.uk

If you have any concerns regarding the data collected from you, our Data Protection Officer can be contacted using the legal@mmu.ac.uk email address, by calling 0161 247 3331 or in writing to: Data Protection Officer, Legal Services, All Saints Building, Manchester Metropolitan University, Manchester, M15 6BH. You also have a right to lodge a complaint in respect of the processing of your personal data with the Information Commissioner's Office as the supervisory authority. Please see: https://ico.org.uk/global/contact-us/

If you find yourself upset or distressed after completing this survey, the below services can offer support and guidance.

Rape Crisis (For female survivors):

Website- rapecrisis.org.uk/get-help/

Contact Number- 0808 802 9999

Survivors UK (For Male survivors):

Website- survivorsuk.org

Contact Number: 02035 983 898

The Survivors Trust:

Website- thesurvivorstrust.org

Contact Number- 08088 010 818

Victim Support:

Website- victimsupport.org.uk

Contact Number- 08 08 16 89 111

Samaritans:

Website- samaritans.org

Contact Number- 116 023

THANK YOU FOR CONSIDERING PARTICIPATING IN THIS PROJECT

Survivor Professional Identity Disclosure, EthOS ID 35798, 17 March 2022

Appendix 5: Phase 1 consent form

Manchester
Metropolitan
University

Survivor-Professional Identity Disclosure

Disclosing survivor identity status amongst colleagues within services addressing violence against women and girls

CONSENT FORM

To be included at the start of the online survey

Name of Researcher: Zoe Cox

1. I confirm that I have read the information sheet dated................... (version...........) for the above study.

2. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.

3. I understand that my participation is voluntary and that I am free to withdraw at any time before submission without giving any reason, without my legal rights being affected.

4. I understand that the information collected will be used to support further research in this study, that it may be used as part of a PhD thesis and other publications or presentations, and that I will be anonymous throughout.

5. I understand and agree that data collected during the project will be shared with Manchester Metropolitan university. I understand that this includes the principal investigator, supervisor, and authorised representatives from the university for study related monitoring, audits, and inspections.

6. I understand and agree that my words may be quoted anonymously in research outputs.

7. I agree to participate in the study to the extent of the activities described to me in the participation information sheet.

Appendix 6: Phase 2 participant information sheet

Participant Information Sheet

Survivor-Professional Identity Disclosure

Disclosing survivor identity status amongst colleagues within services addressing violence against women and girls

1. Invitation to research

My name is Zoe Cox and I'm a PhD researcher at Manchester Metropolitan University. I would like to invite you to take part in my research about professionals and practitioners working in services or organisations that address violence against women and girls (VAWG).

The aim of the study is to establish how professionals and practitioners with lived experience of sexual abuse or intimate partner/domestic abuse manage decisions and outcomes around disclosure of their survivor-status to colleagues, and what factors influence these decisions.

This study focuses on female survivors of sexual violence or domestic abuse who also work, or have in the past 6 years worked in services or organisations in the UK that address violence against women and girls (survivor-professionals). I plan to use the findings of this study to create guidance for organisations on supporting survivor-professionals to feel more comfortable at work, whether they chose to share about their survivor-status or not.

2. Why have I been invited?

You have been invited because of your work experience in the violence against women and girls sector and because you have experienced sexual or domestic/intimate partner abuse at some point in your life. You do not need to have disclosed anything about these experiences at work or otherwise to professional colleagues for your input to be valuable to the study.

3. Do I have to take part?

It is up to you to decide. I will describe the study and go through this information sheet, which I will give to you. I will then ask you to sign a consent form to show you agreed to take part. You are free to withdraw at any time up until the start of the data analysis (scheduled to begin July 2023), without the need to give any reason.

4. What will I be asked to do?

The interview will take approximately an hour, depending on how much information you wish to share. In the interview, I will ask you about your feelings around being open about your survivor status to colleagues and about any experiences of disclosure (voluntary or involuntary) that you have had and what responses you received from colleagues. You will not be asked to share any information or details about your experiences of sexual or domestic abuse.

The interview will be recorded, pseudo-anonymised, transcribed, and analysed, and this will make up part of my PhD thesis.

5. Are there any risks if I participate?

There is no immediate or significant risk of physical harm. However, as the research is exploring themes of abuse, stigma, and discrimination, there may be some risk of psychological distress due to the sensitive nature of the topic.

6. Are there any advantages if I participate?

There will be no direct reward for participation in the interview. However, your participation will help add to knowledge in this area which could later be used to improve the work experiences of professionals and practitioners with lived experience of abuse.

7. What will happen to the results of the research study?

Your responses to this interview will make up part of my PhD thesis. Your answers may also be used anonymously in other research outputs such as in presentations or publications. The data from the study will be stored in the university's research repository, but any personal or identifiable data will not be made open access.

8. What will happen with the data I provide?

When you agree to participate in this research, we will collect from you personally-identifiable information.

The Manchester Metropolitan University ('the University') is the Data Controller in respect of this research and any personal data that you provide as a research participant.

The University is registered with the Information Commissioner's Office (ICO), and manages personal data in accordance with the General Data Protection Regulation (GDPR) and the University's Data Protection Policy.

We collect personal data as part of this research (such as name, telephone numbers or age). As a public authority acting in the public interest we rely upon the 'public task' lawful basis. When we collect special category data (such as medical information or ethnicity) we rely upon the research and archiving purposes in the public interest lawful basis.

Your rights to access, change or move your information are limited, as we need to manage your information in specific ways in order for the research to be reliable and accurate. If you withdraw from the study, we will keep the information about you that we have already obtained.

We will not share your personal data collected in this form with any third parties.

If your data is shared this will be under the terms of a Research Collaboration Agreement which defines use, and agrees confidentiality and information security provisions. It is the University's policy to only publish anonymised data unless you have given your explicit written consent to be identified in the research. **The University never sells personal data to third parties.**

We will only retain your personal data for as long as is necessary to achieve the research purpose. All data will be anonymous on collection by default. Active Project data will be kept in my password protected university OneDrive account. The data will not be shared or transferred outside of this. All essential data and documents such as content forms will be archived for a minimum of 10+ years after completion of the project, then securely destroyed.

For further information about use of your personal data and your data protection rights please see the University's Data Protection Pages.

9. Who has reviewed this research project?

The research has been reviewed by Manchester Metropolitan University ethics committee.

10. Who do I contact if I have concerns about this study or I wish to complain?

for general questions about the project, contact:

Researcher/principal investigator:
Zoe Cox, Department of social care and social work, Faculty of Health and Education Manchester Metropolitan University. Email address: zoe.cox@stu.mmu.ac.uk Phone: +44 (0)161 247

for concerns/complaints about the project, contact:

Research Supervisor: Professor Sara Ryan, Department of social care and social work, Faculty of Health and Education, Manchester Metropolitan University. Email address: s.ryan@mmu.ac.uk

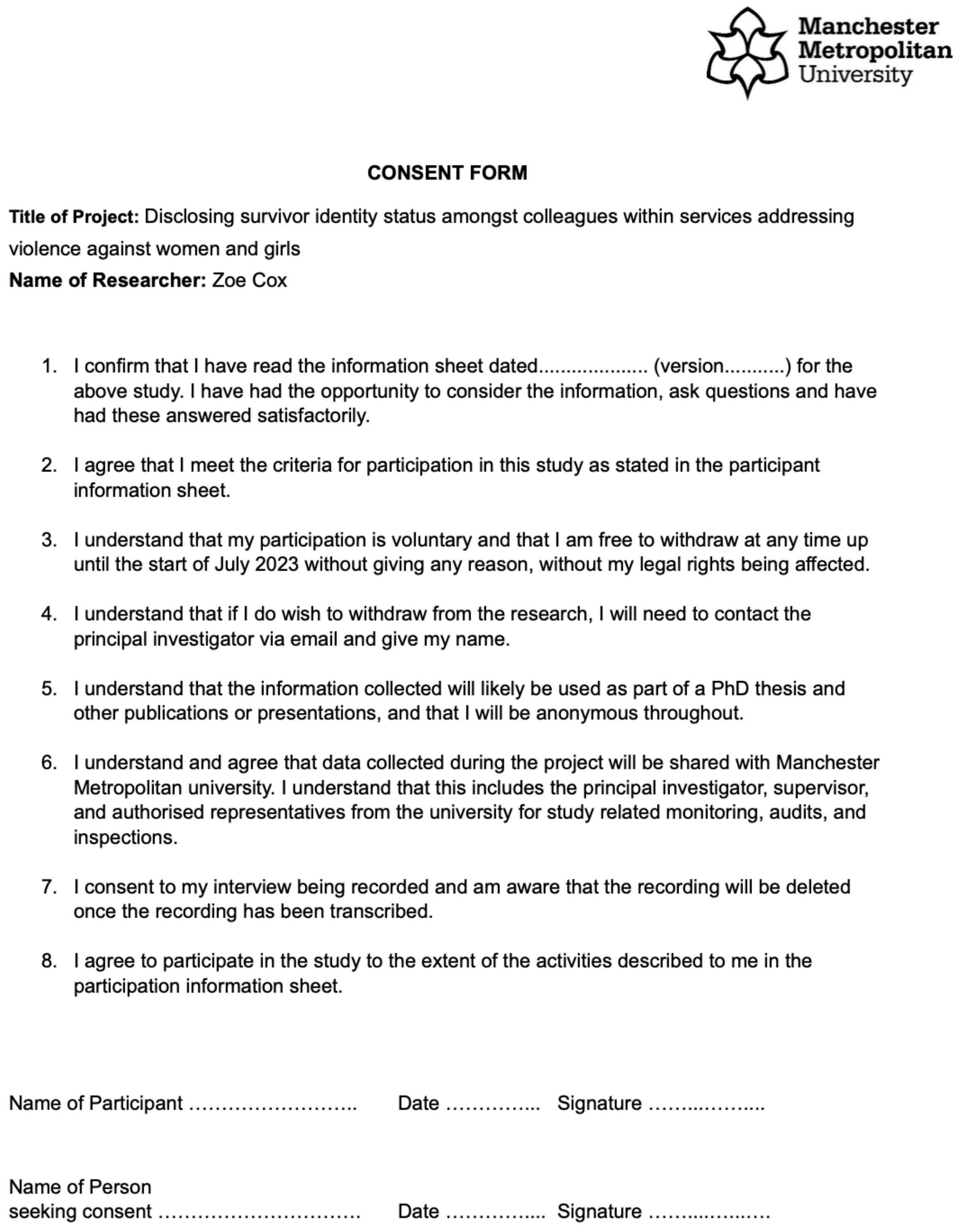
or

The Faculty Head of Ethics: Dr Claire Fox, Head of Research Ethics and Governance for the Faculty of Health and Education, FOHE-ethics@mmu.ac.uk
If you have any concerns regarding the personal data collected from you, our Data Protection Officer can be contacted using the legal@mmu.ac.uk email address, by calling 0161 247 3331 or in writing to: Data Protection Officer, Legal Services, All Saints Building, Manchester Metropolitan University, Manchester, M15 6BH. You also have a right to lodge a complaint in respect of the processing of your personal data with the Information Commissioner's Office as the supervisory authority. Please see: https://ico.org.uk/global/contact-us/

THANK YOU FOR CONSIDERING PARTICIPATING IN THIS PROJECT

For further information, contact:
Zoe Cox on zoe.cox@stu.mmu.ac.uk

Appendix 7: Phase 2 consent form



Manchester Metropolitan University

CONSENT FORM

Title of Project: Disclosing survivor identity status amongst colleagues within services addressing violence against women and girls
Name of Researcher: Zoe Cox

1. I confirm that I have read the information sheet dated.................... (version...........) for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.
2. I agree that I meet the criteria for participation in this study as stated in the participant information sheet.
3. I understand that my participation is voluntary and that I am free to withdraw at any time up until the start of July 2023 without giving any reason, without my legal rights being affected.
4. I understand that if I do wish to withdraw from the research, I will need to contact the principal investigator via email and give my name.
5. I understand that the information collected will likely be used as part of a PhD thesis and other publications or presentations, and that I will be anonymous throughout.
6. I understand and agree that data collected during the project will be shared with Manchester Metropolitan university. I understand that this includes the principal investigator, supervisor, and authorised representatives from the university for study related monitoring, audits, and inspections.
7. I consent to my interview being recorded and am aware that the recording will be deleted once the recording has been transcribed.
8. I agree to participate in the study to the extent of the activities described to me in the participation information sheet.

Name of Participant …………………….. Date ………….. Signature ……..……...

Name of Person
seeking consent …………………………. Date …………... Signature ……...…..….

Appendix 8: Phase 2 participant recruitment poster

SEEKING WOMEN PARTICIPANTS

Manchester
Metropolitan
University

Do you have work experience in services or organisations that address violence against women and girls?

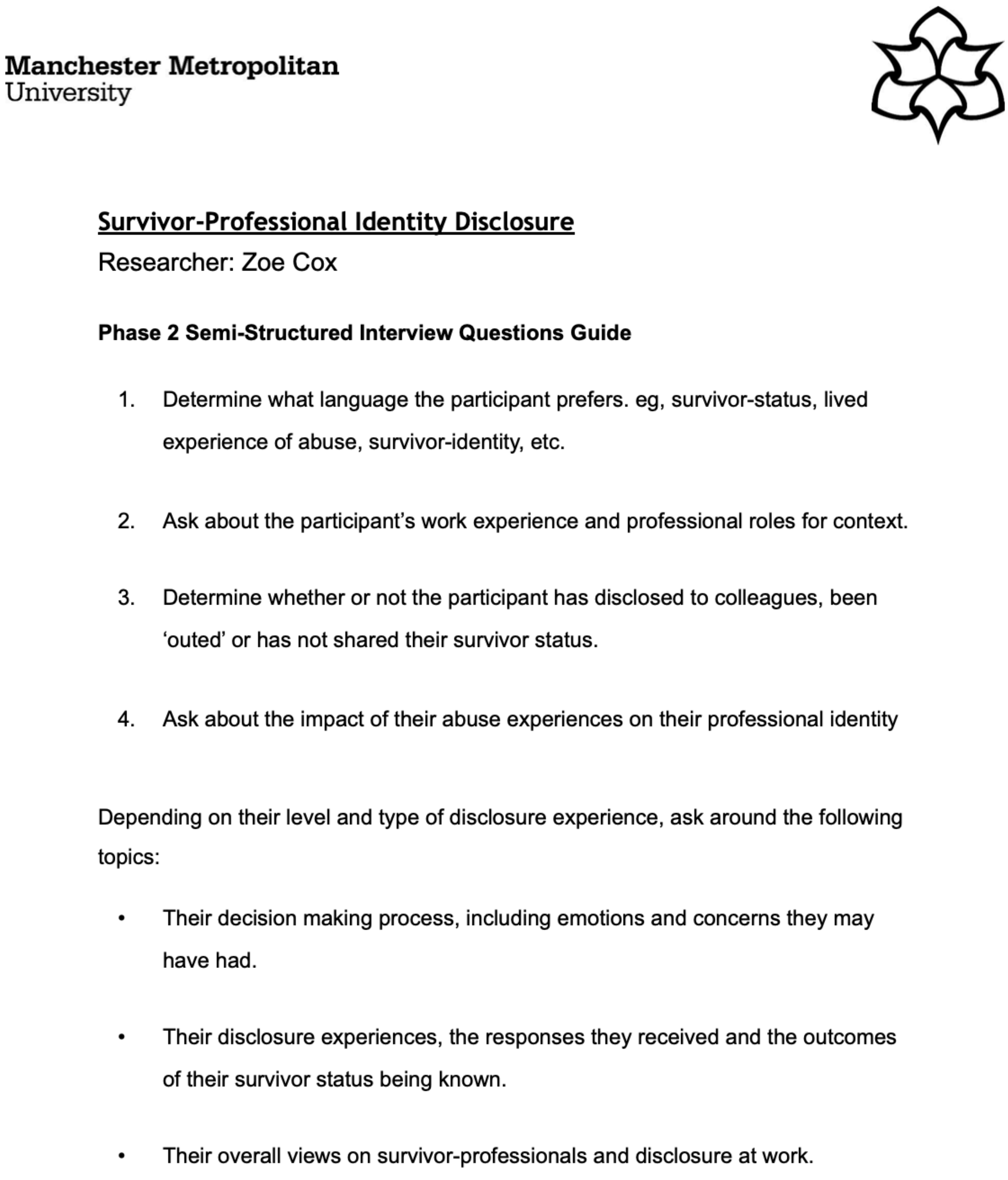
Have you **also** experienced domestic abuse or sexual violence yourself?

I am looking to interview women about their feelings, decisions, and experiences around being open about their survivor-status amongst professional colleagues.

I am also interested to hear from women whose survivor-status was shared without their consent or who have chosen not to disclose anything to colleagues or professional peers.

Please contact Zoe Cox - zoe.cox@stu.mmu.ac.uk to ask any questions or express an interest.

Appendix 9: Phase 2 interview schedule



Manchester Metropolitan
University

Survivor-Professional Identity Disclosure

Researcher: Zoe Cox

Phase 2 Semi-Structured Interview Questions Guide

1. Determine what language the participant prefers. eg, survivor-status, lived experience of abuse, survivor-identity, etc.
2. Ask about the participant's work experience and professional roles for context.
3. Determine whether or not the participant has disclosed to colleagues, been 'outed' or has not shared their survivor status.
4. Ask about the impact of their abuse experiences on their professional identity

Depending on their level and type of disclosure experience, ask around the following topics:

- Their decision making process, including emotions and concerns they may have had.
- Their disclosure experiences, the responses they received and the outcomes of their survivor status being known.
- Their overall views on survivor-professionals and disclosure at work.

Appendix 10: Questionnaire

The following 3 pages will each contain a short scenario that is imagined to take place in a service or organisation that address violence against women and girls. Please read through each scenario and answer the questions below on each page.

Scenario 1

> *A 26 year old youth worker is interviewed for a job in an outreach team working with young people at risk of sexual exploitation in a town that is known to have a high rate of child sexual exploitation. She is fully qualified for the role and has three years experience working in a similar service. When asked why she thinks she would be the best fit for this position, the interviewee explains that she had been sexually exploited herself as a child so has a personal insight into what the young people using the service might be going through. She says she has a lot of good ideas about what approaches might work best for supporting them.*

In your opinion, how professional was the response the interviewee gave to the question of why she would be the best fit for the position?

Very unprofessional
Somewhat unprofessional
Neither professional or unprofessional
Somewhat professional
Very professional

Please explain the reasons for your answer.

How do you think the interviewee's disclosure of her own lived experiences will affect the service's decision to hire her?

Very negatively
Somewhat Negatively
Neither negatively or positively
Somewhat positively
Very positively

Please explain the reasons for your answer.

Scenario 2

> *Cathleen is a forensic nurse working at a Sexual Assault Referral Centre. She appears noticeably shaken after undertaking an examination on a young child victim. When her colleagues ask her if she's alright she explains that the attack on the little girl was very similar to abuse she had experienced as a child at the same age. She lets her colleagues know that she needs to take her lunch break and go on a walk to clear her head and calm herself. Whilst Cathleen is out of the room, Ruth, one of Cathleen's colleagues, comments that she feels Cathleen isn't stable enough to perform her job appropriately and that she should take a break in her career and return once she has fully resolved her childhood trauma.*

Do you think Ruth's suggestion that Cathleen should take a break from her career until she has resolved her trauma is reasonable?

Very unreasonable
Somewhat unreasonable
Neither reasonable or unreasonable
Somewhat reasonable
Very reasonable

Please explain the reasons for your answer.

How might you respond to Ruth’s comment if you were one of the colleges in this scenario?

What would be your biggest concern, if any, regarding Cathleen in this situation?

Scenario 3

> *An experienced facilitator of a face-to-face group therapy programme for women recovering from abusive relationships expresses frustration about a returning participant who she says will forever attract violent men because she’s “addicted to abuse”. When another staff member questions what she means by that, the group facilitator explains that the participant only knows how to be a victim and wants to remain helpless. She says she has seen women like this participant time and time again and they are sadly beyond intervention.*

Imagine this conversation takes place in a private office in front of other staff members only. How acceptable is the facilitator's comment to her colleagues?

Very unacceptable
Somewhat unacceptable
Neither unacceptable or acceptable
Somewhat acceptable
Very acceptable

Imagine this conversation takes place in a space where some of the other group therapy participants can overhear. Is this more or less acceptable than when only staff members could hear?

Much more unacceptable
Slightly more unacceptable
Neither more or less acceptable
Slightly more acceptable
Much more acceptable

Please explain the reasons for both your answers above.

Additional questions

At a guess, what percentage of your colleagues (past or present) do you think have had similar abuse experiences to the women or girls that the service supports?

Less than 15%
15% - 40%
40% - 60%
60% - 80%
More than 80%

In your opinion, what can organisations addressing violence against women and girls do to support staff who have personal experiences of domestic or sexual abuse?

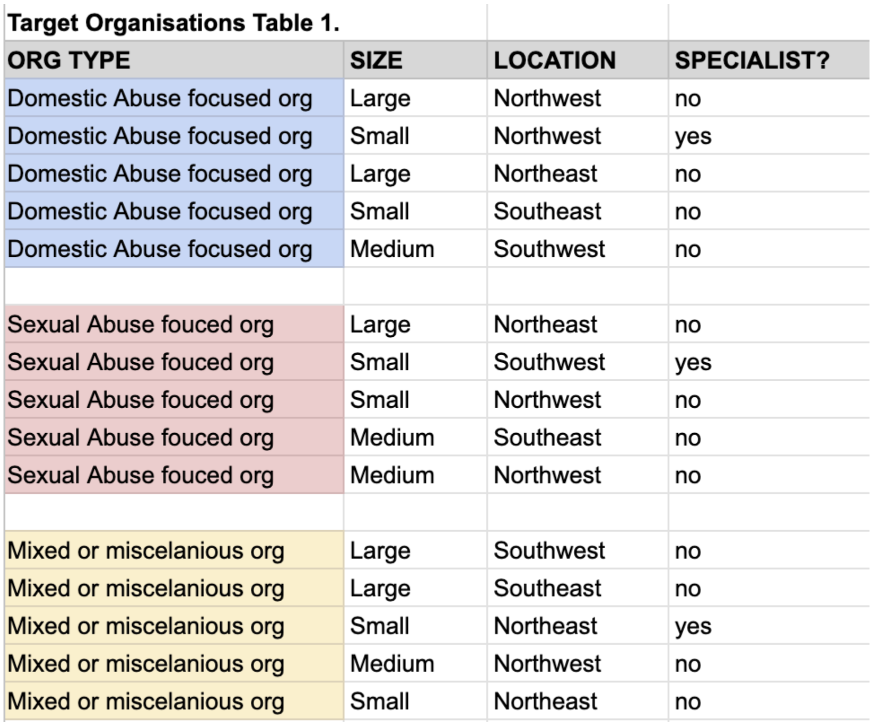
Please briefly describe your job role within your service or organisation. eg 'Counsellor working with victims/survivors of domestic violence'

What were your motivations for working in this sector? Please share as much or as little as you like.

Is there anything else around the topics covered in this questionnaire that you would like to share?

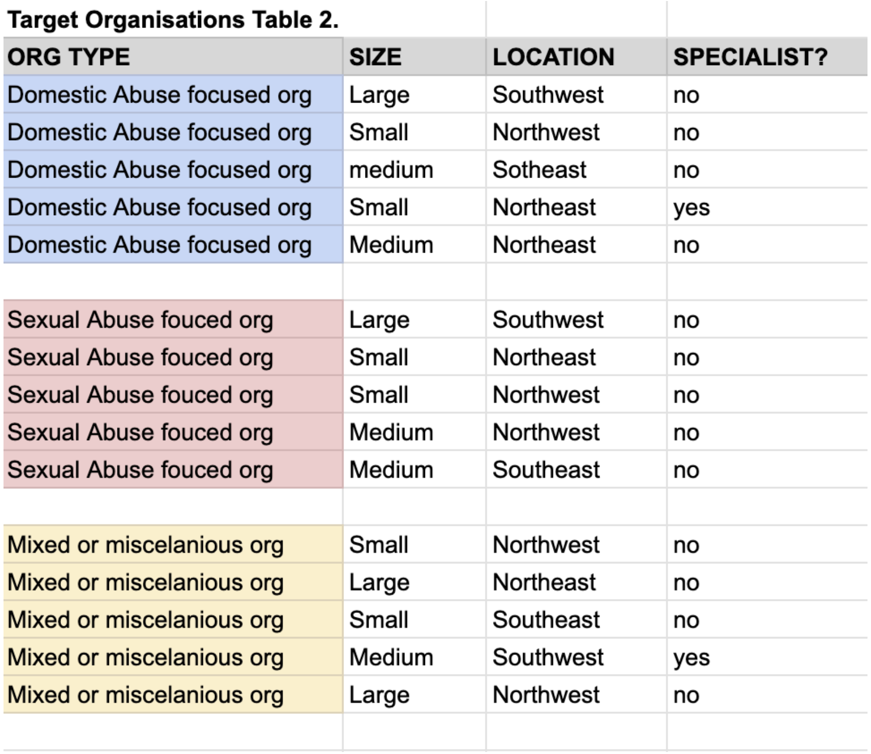
Thank you. You have reached the end of the questionnaire.
Please proceed to submit.

Appendix 11: Example of sampling categories for Phase 1 target organisations



Target Organisations Table 1.

ORG TYPE	SIZE	LOCATION	SPECIALIST?
Domestic Abuse focused org	Large	Northwest	no
Domestic Abuse focused org	Small	Northwest	yes
Domestic Abuse focused org	Large	Northeast	no
Domestic Abuse focused org	Small	Southeast	no
Domestic Abuse focused org	Medium	Southwest	no
Sexual Abuse fouced org	Large	Northeast	no
Sexual Abuse fouced org	Small	Southwest	yes
Sexual Abuse fouced org	Small	Northwest	no
Sexual Abuse fouced org	Medium	Southeast	no
Sexual Abuse fouced org	Medium	Northwest	no
Mixed or miscelanious org	Large	Southwest	no
Mixed or miscelanious org	Large	Southeast	no
Mixed or miscelanious org	Small	Northeast	yes
Mixed or miscelanious org	Medium	Northwest	no
Mixed or miscelanious org	Small	Northeast	no



Target Organisations Table 2.

ORG TYPE	SIZE	LOCATION	SPECIALIST?
Domestic Abuse focused org	Large	Southwest	no
Domestic Abuse focused org	Small	Northwest	no
Domestic Abuse focused org	medium	Sotheast	no
Domestic Abuse focused org	Small	Northeast	yes
Domestic Abuse focused org	Medium	Northeast	no
Sexual Abuse fouced org	Large	Southwest	no
Sexual Abuse fouced org	Small	Northeast	no
Sexual Abuse fouced org	Small	Northwest	no
Sexual Abuse fouced org	Medium	Northwest	no
Sexual Abuse fouced org	Medium	Southeast	no
Mixed or miscelanious org	Small	Northwest	no
Mixed or miscelanious org	Large	Northeast	no
Mixed or miscelanious org	Small	Southeast	no
Mixed or miscelanious org	Medium	Southwest	yes
Mixed or miscelanious org	Large	Northwest	no

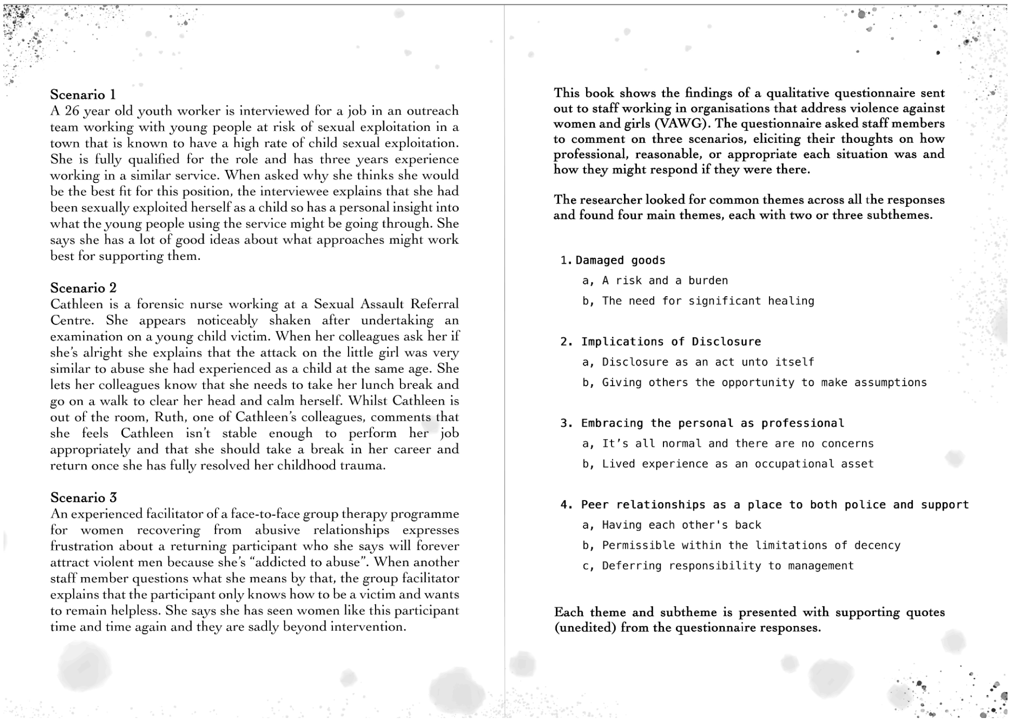
Appendix 12: Phase 1 findings comic design thumbnails

The four illustrated themes with quotes from the questionnaire are presented here in their double page spread format as thumbnails to show the cross-page design on some pages.

Disclosure of Survivor Status at Work

Views from staff working in organisations that address Violence Against Women and Girls (VAWG)

Findings from the first phase of a PhD research project by Zoe Cox, 2025, Manchester Metropolitan University



Scenario 1

A 26 year old youth worker is interviewed for a job in an outreach team working with young people at risk of sexual exploitation in a town that is known to have a high rate of child sexual exploitation. She is fully qualified for the role and has three years experience working in a similar service. When asked why she thinks she would be the best fit for this position, the interviewee explains that she had been sexually exploited herself as a child so has a personal insight into what the young people using the service might be going through. She says she has a lot of good ideas about what approaches might work best for supporting them.

Scenario 2

Cathleen is a forensic nurse working at a Sexual Assault Referral Centre. She appears noticeably shaken after undertaking an examination on a young child victim. When her colleagues ask her if she's alright she explains that the attack on the little girl was very similar to abuse she had experienced as a child at the same age. She lets her colleagues know that she needs to take her lunch break and go on a walk to clear her head and calm herself. Whilst Cathleen is out of the room, Ruth, one of Cathleen's colleagues, comments that she feels Cathleen isn't stable enough to perform her job appropriately and that she should take a break in her career and return once she has fully resolved her childhood trauma.

Scenario 3

An experienced facilitator of a face-to-face group therapy programme for women recovering from abusive relationships expresses frustration about a returning participant who she says will forever attract violent men because she's "addicted to abuse". When another staff member questions what she means by that, the group facilitator explains that the participant only knows how to be a victim and wants to remain helpless. She says she has seen women like this participant time and time again and they are sadly beyond intervention.

This book shows the findings of a qualitative questionnaire sent out to staff working in organisations that address violence against women and girls (VAWG). The questionnaire asked staff members to comment on three scenarios, eliciting their thoughts on how professional, reasonable, or appropriate each situation was and how they might respond if they were there.

The researcher looked for common themes across all the responses and found four main themes, each with two or three subthemes.

1. Damaged goods
    a, A risk and a burden
    b, The need for significant healing
2. Implications of Disclosure
    a, Disclosure as an act unto itself
    b, Giving others the opportunity to make assumptions
3. Embracing the personal as professional
    a, It's all normal and there are no concerns
    b, Lived experience as an occupational asset
4. Peer relationships as a place to both police and support
    a, Having each other's back
    b, Permissible within the limitations of decency
    c, Deferring responsibility to management

Each theme and subtheme is presented with supporting quotes (unedited) from the questionnaire responses.

1. DAMAGED GOODS
A Risk and a Burden

Participants were concerned about survivor professionals' abuse experiences having a negative impact on their work performance, professionalism, and judgement.

In many instances, professionals that have experienced abuse in their past are unable to heal from this and this affects their performance at work, as well as their general world view at work.

Some may think that she might still be carrying her own emotional baggage which might influence her behaviour.

The biggest concern was around the survivor-professionals' ability to be objective, detached, rational, and not project their own experiences onto their service users and clients.

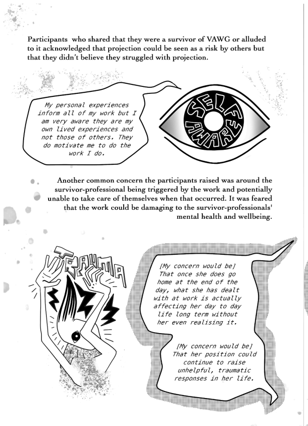
They seem to make comparisons all to often with their own experience and provide guidance/advice based on their experience which is not rational.

she may not be able to be unbiased and her service delivery could be clouded by her experiences.

Someone needs to be objective; not subjective

some places might believe she will impose her personal experience onto others.

Lived experience is very valuable but my only concern would be the impact of the work on her experiences ie could she remain professional and detached?



Participants who shared that they were a survivor of VAWG or alluded to it acknowledged that projection could be seen as a risk by others but that they didn't believe they struggled with projection.

My personal experiences inform all of my work but I am very aware they are my own lived experiences and not those of others. They do motivate me to do the work I do.

Another common concern the participants raised was around the survivor-professional being triggered by the work and potentially unable to take care of themselves when that occurred. It was feared that the work could be damaging to the survivor-professionals' mental health and wellbeing.

[My concern would be] That once she does go home at the end of the day, what she has dealt with at work is actually affecting her day to day life long term without her even realising it.

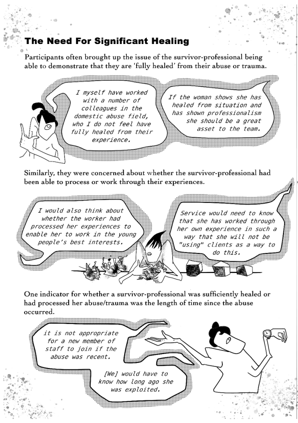
[My concern would be] That her position could continue to raise unhelpful, traumatic responses in her life.

Some participants implied that organisations would not want survivor-professionals working for them because they may become a burden on the organisation or they might lack professionalism.

The service is looking for a professional person: not damaged goods.

I would be concerned for [her] wellbeing and concerns she may have about her ability to do her job. Our jobs are not only about financial security but also identity and feeling those are at risk could be very damaging.

People don't want those who need extra help or care working for them, so showing they have been through trauma may come across as needed extra requirements.



The Need For Significant Healing

Participants often brought up the issue of the survivor-professional being able to demonstrate that they are 'fully healed' from their abuse or trauma.

I myself have worked with a number of colleagues in the domestic abuse field, who I do not feel have fully healed from their experience.

If the woman shows she has healed from situation and has shown professionalism she should be a great asset to the team.

Similarly, they were concerned about whether the survivor-professional had been able to process or work through their experiences.

I would also think about whether the worker had processed her experiences to enable her to work in the young people's best interests.

Service would need to know that she has worked through her own experience in such a way that she will not be "using" clients as a way to do this.

One indicator for whether a survivor-professional was sufficiently healed or had processed her abuse/trauma was the length of time since the abuse occurred.

it is not appropriate for a new member of staff to join if the abuse was recent.

[We] would have to know how long ago she was exploited.

The main thing to check is the time since the abuse and the possibility of the worker being triggered by working in the sector.

[The] nurse needs time to address her own issues.

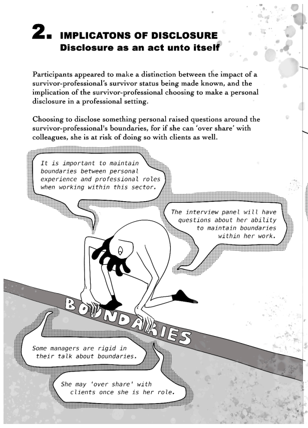
Again, survivor-professionals who responded to the survey shared that organisations might worry that survivors of abuse may not be ready to engage in this line of work.

From my own experience of raising a personal experience of being in an unhealthy relationship during my induction process I would worry she might be looked at as not being in the right 'place' to undertake this work.

I believe that an assessment of [her mental health] would be advisable and offer counselling.

I would also want to know if that person has had support and have moved on from the abuse that they have experienced before considering offering the job.

Besides time since the abuse occurred, another indicator of whether the servivor-professional was 'in the right place' to work in the sector was whether they had received any formal therapeutic support or intervention. Participants also talked about survivor-professionals receiving support whilst in work. This 'support' could be as simple as colleagues being supportive and reassuring, support as part of normal supervision arrangements, or as something additional such as formal counselling.



2. IMPLICATONS OF DISCLOSURE
Disclosure as an act unto itself

Participants appeared to make a distinction between the impact of a survivor-professional's survivor status being made known, and the implication of the survivor-professional choosing to make a personal disclosure in a professional setting.

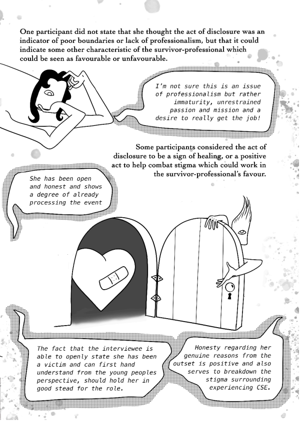
Choosing to disclose something personal raised questions around the survivor-professional's boundaries, for if she can 'over share' with colleagues, she is at risk of doing so with clients as well.

It is important to maintain boundaries between personal experience and professional roles when working within this sector.

The interview panel will have questions about her ability to maintain boundaries within her work.

Some managers are rigid in their talk about boundaries.

She may 'over share' with clients once she is her role.



One participant did not state that she thought the act of disclosure was an indicator of poor boundaries or lack of professionalism, but that it could indicate some other characteristic of the survivor-professional which could be seen as favourable or unfavourable.

I'm not sure this is an issue of professionalism but rather immaturity, unrestrained passion and mission and a desire to really get the job!

Some participants considered the act of disclosure to be a sign of healing, or a positive act to help combat stigma which could work in the survivor-professional's favour.

She has been open and honest and shows a degree of already processing the event

The fact that the interviewee is able to openly state she has been a victim and can first hand understand from the young peoples perspective, should hold her in good stead for the role.

Honesty regarding her genuine reasons from the outset is positive and also serves to breakdown the stigma surrounding experiencing CSE.

One participant expressed that the character who disclosed in her job interview in the first vignette displayed the right balance of disclosing when it was relevant, without oversharing.

The interviewee acknowledged she has personal experience in this sector which may have provided her an insight but did not overshare or indicate an unhealthy motivation such as wanting to 'get back at' the people who hurt her. It was honest but not unprofessional.

I believe her honesty is important when considering herself for the role.

The fact that making a disclosure demonstrates honesty was also thought to give a positive impression.

Giving others the opportunity to make assumptions

Along with how the act of disclosure is perceived, participants reflected on how being open about one's survivor status also gives others the opportunity to make judgements or assumptions, either positive or negative, about the survivor-professional.

I think they will be sympathetic to her which may make them want to hire her.

I think most staff will be uncomfortable discussing it with colleagues or management as it is very personal and they might feel it reflects poorly on their ability

It might be viewed that she was been congruent and ethical in disclosing her own history of abuse

I think it is professional for someone to be honest about their experience with sexual violence if they feel like it will inform their work.

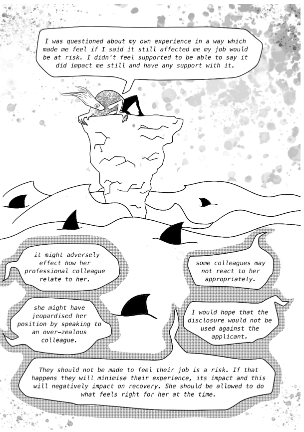
Whilst the act of disclosure could be seen as a demonstration of a person's honesty, being open and honest overall was considered to be a valuable attribute in this line of work for multiple reasons, for example, it may allow survivor-professionals to engage more fully in their clinical supervision and help to break down stigma.

Participants also said that knowing about staff members' backgrounds would be helpful to employers as they can make informed decisions when hiring and put support in place if it's needed.

It is always good to understand what staff have been through in order to make sure there is the right level of clinical supervision and oversight on difficult cases.

Her reasons may be valid and helpful. She has volunteered this information at the outset and allowed the interviewer to consider her application for employment with greater insight into her motives and background. It is for the interviewer to pursue any concerns.

However, several participants expressed concern that colleagues may not respond well to a professional making a personal disclosure, and receiving this reaction could be harmful to the survivor-professional.



I was questioned about my own experience in a way which made me feel if I said it still affected me my job would be at risk. I didn't feel supported to be able to say it did impact me still and have any support with it.

it might adversely effect how her professional colleague relate to her.

some colleagues may not react to her appropriately.

she might have jeopardised her position by speaking to an over-zealous colleague.

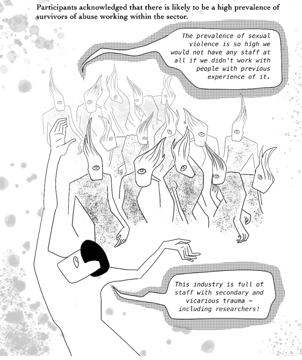
I would hope that the disclosure would not be used against the applicant.

They should not be made to feel their job is a risk. If that happens they will minimise their experience, its impact and this will negatively impact on recovery. She should be allowed to do what feels right for her at the time.

3. EMBRACING THE PERSONAL AS PROFESSIONAL

It's all normal and there are no concerns

Participants acknowledged that there is likely to be a high prevalence of survivors of abuse working within the sector.



Many expressed that it was very normal for staff working in VAWG to be emotionally impacted by their day to day work regardless of whether or not they had personally experienced abuse, and that compassion and support should be afforded to all staff.

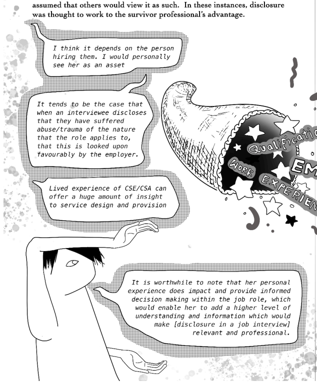
Trauma was normalised by the participants and the idea of a survivor being 'fully healed' was challenged as healing is often not linear or 'coherent'. Participants seemed to accept that ongoing support may be needed, and encouraged organisations to provide it and survivor-professionals to accept it.

Most of the participants prioritised respecting the choice and empowerment of survivor-professionals to work in their chosen role.

It was expressed that survivor-professionals can or should be trusted in managing their own wellbeing, which was presented as an important skill for anyone in that line of work.

Lived Experience as an occupational asset

Several participants viewed lived experience as an occupational asset or assumed that others would view it as such. In these instances, disclosure was thought to work to the survivor professional's advantage.



Greater insight, empathy, and drive or passion for the work were the main benefits to lived experience that the participants mentioned.

Participants also considered the question around how important having lived experience of abuse was compared to being a professional without it. Lived experience was seen as a valued addition to professional experience, training and qualifications, but not necessarily essential, though it was said that some people or organisations may see it as essential.

As touched on in theme one, participants also mentioned the importance of recognising that everyone's experiences of abuse and trauma are different and survivor-professionals should not assume that theirs is the same as others, putting limits on lived experience as an asset.

4. PEER RELATIONSHIPS AS A PLACE TO BOTH POLICE AND SUPPORT

Having eachother's back

In answer to the questions about the second vignette involving Cathleen and Ruth, most participants said that their greatest concern would be for Cathleen's wellbeing and that in this situation, they would offer their support to Cathleen and be led by her.

Participants also wrote about extending the same level of compassion and support to colleagues as they would to their clients.

They wrote about how being supportive to each other as colleagues was something that they all should do as a team.

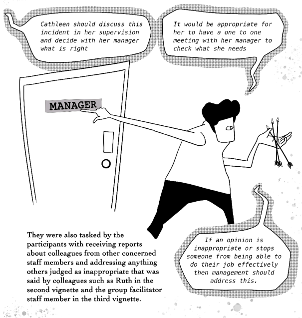
When prompted by the scenario, participants expressed that they would challenge Ruth on her comments about Cathleen. Some participants suggested doing this in a gentle, educating way, perhaps in private, or try to investigate what may lie behind Ruth's comments, others suggested they would take a more direct approach, informing Ruth that her comments were wrong or potentially harmful, and that they may indicate that Ruth herself needed reporting or given clearer support or guidance to understand trauma and what is and isn't appropriate to say.

Permissable within the limitations of decency

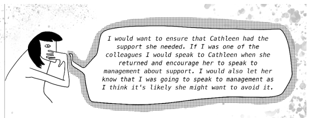
Participants acknowledged that working in sexual and domestic abuse can be extremely stressful and that it was reasonable and common for staff to let off steam by sharing and venting to each other. Collegial relationships were thought to be a safe place to air complicated or challenging thoughts and feelings, to explore, discuss, and work through them together. However, there was thought to be a line where some thoughts were inappropriate to share or could suggest that the staff member was unfit for their role as they did not reflect the core values of the VAWG sector. An acknowledged positive to staff sharing seemingly harmful or inappropriate opinions or attitudes was that at least they could be 'corrected' by fellow colleagues and it was better that they shared these thoughts with colleagues rather than clients, as colleagues will 'understand the full picture of abuse'.

Deffering responsibilty to management

The role of managers and supervisors were frequently mentioned by the majority of participants to also handle the policing and supporting of staff. Supervisors and managers were assigned the responsibility to arrange or provide support for staff who are emotionally impacted by the work such as Kathleen from the second vignette.



They were also tasked by the participants with receiving reports about colleagues from other concerned staff members and addressing anything others judged as inappropriate that was said by colleagues such as Ruth in the second vignette and the group facilitator staff member in the third vignette.



Providing clinical supervision and regular meetings with managers, along with broad and inclusive HR policies was suggested as a way to make sure VAWG organisations are meeting the needs of survivor-professionals at work.

These findings show us how staff members' views, attitudes, and responses vary towards colleagues disclosing survivor status in VAWG settings. Concerns for the safety and wellbeing of service users and the functioning of the service were often behind these views. Whilst care, support, empathy, and understanding towards team members with different experiences, identities, and perspectives help organisations run well, there can be limits on what is considered acceptable. Participants expressed a collective responsibility to look after eachother, acknowledging the challenging nature of the work, but ultimately, ensuring all staff members positively contributed to appropriately meeting service user needs was paramount. This study has helped contextualise the second phase of the research which explores survivor-professionals' views and experiences of disclosing their survivor status to colleagues.

harpieahouse@gmail.com