



Article Intersections of Women as Survivors: Disclosures of Violence and Global Research Standards in Guyana and Trinidad and Tobago

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Abstract: Global guidelines on VAWG research prioritize safety-first approaches to discuss experiences of violence with survivors. Guidelines recommend that survivors only be interviewed in confidential and private interviews. However, little is known about why and how women choose to disclose experiences of violence in focus group settings. Utilizing survivor quotes and reflexive notes from the qualitative components of the first national prevalence surveys on VAWG in Guyana and Trinidad and Tobago, we reflect on women's decisions to disclose experiences of violence in focus groups. Our results illustrate that women's choice to speak out about previous experiences of violence and in some cases, irrespective of the guidelines provided for focus group discussions, aligns with the unapologetic nature of Caribbean feminist organizing in the region. Identifying as a survivor of gender-based violence holds different meanings for women based on when the relationship occurred and the sense of insight and empowerment they gained and therefore guides which information and where women feel comfortable disclosing. Researchers should ensure safety-first approaches are followed and also support women who choose to disclose experiences of violence outside of confidential interviews. Focus groups can be areas where women disclose violence and should be addressed through preparation rather than as an error in ethical research practices.

Keywords: violence against women; survivors disclosure; feminist research methodologies; Caribbean; qualitative research; focus groups

1. Introduction

Violence against women and girls (VAWG) is a unique substantive research area that must always prioritize the safety and protection of women who previously or currently have experienced violence (WHO 2016). Re-traumatization of participants, emotional distress, and increased risk of violence by perpetrators are some of the factors considered for survivors who participate in VAWG research (Btoush and Campbell 2009; Ellsberg and Heise 2005; WHO 2016). In response, global standards have been developed to prioritize safety and minimize harm to both VAWG survivors and researchers throughout the research process. The World Health Organization (WHO) has led the development of standards, ensuring recommendations and guidelines for VAWG research are available (Ellsberg et al. 2001; WHO 2016) with the most recent safety guidelines expanded to focus on violence prevention interventions (WHO 2016).

In the current guidelines, survivors are defined as ever-partnered women who experienced violence in the 12 months prior to the Women's Health and Life Experiences Survey (WHLES), which can include an ongoing or recently ended relationship (Ellsberg et al. 2001; Ellsberg and Heise 2005; WHO 2016). Ever-partnered women represent those



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Copyright: © 2022 by the authors. Licensee MDPI, Basel, Switzerland. This article is an open access article distributed under the terms and conditions of the Creative Commons Attribution (CC BY) license (https:// creativecommons.org/licenses/by/ 4.0/). who have ever had a male partner, regardless of how the union is defined (Ellsberg et al. 2001; Ellsberg and Heise 2005; WHO 2016). However, this does not account for women who have experienced an abusive relationship in their past and identify as a survivor for the rest of their lives, even though the WHLES definition of lifetime violence requires only one experience to have occurred between women aged 15 and 64 (Ellsberg et al. 2001; Ellsberg and Heise 2005; WHO 2016).

To ensure the safety and protection of participants in VAWG research, the guidelines indicate that the discreteness of research participant recruitment, survivor participation through confidential interviews, research team training and protection of research data are four central areas that researchers must address (Ellsberg et al. 2001; Ellsberg and Heise 2005; WHO 2016). Researchers seeking to recruit survivors are advised to promote studies as women's health projects/surveys, avoiding language that incorporates domestic violence or gender-based violence in the title or recruitment materials (Ellsberg et al. 2001; Ellsberg and Heise 2005; WHO 2016). This recruitment strategy adopts a safety-first approach, providing some assurance to women that their perpetrators will not be alerted to the nature of the study, thereby potentially avoiding any retaliation or violence directed towards them. For these reasons, this guideline has been a widely adopted strategy for VAWG research (Contreras-Urbina et al. 2019; Navarro-Mantas and Ozemela 2019; Nicholson and DeShong 2020; Pemberton and Joseph 2018; Watson Williams 2018).

Confidential interviews are recommended as a data collection method to safely include survivors in VAWG research, protect the survivors' identity and decrease the risk of their information being shared (Ellsberg et al. 2001; Ellsberg and Heise 2005; WHO 2016). Only one woman from a household should be included in a study, and if interviews are occurring in a woman's home, interviewers are trained to change the subject if someone enters the space during the interview (Ellsberg et al. 2001; Ellsberg and Heise 2005; WHO 2016). Given the concerns for women's safety, focus groups as a data collection method are not used to interview survivors, but can be used to engage with community members, activists, practitioners, and other key informants. While there is limited information on focus groups as a data collection method for survivors in VAWG research, Ellsberg and Heise (2005) note that it is a powerful data collection tool in their practical guide for researchers and activists researching violence against women. Additionally, the 2016 WHO guidelines for intervention research on VAWG includes focus group discussions as a research method with partners, families, and community members (WHO 2016). In these circumstances, the guidelines specify that participants should not disclose information about other focus group members, which is a common data collection practice, irrespective of the research topic (Krueger and Casey 2014).

In terms of the research team, training of researchers and research assistants, including community members who can become data collectors, are integral to ensuring data is collected in a manner that does not expose survivors or researchers to further trauma or violence (Btoush and Campbell 2009; Ellsberg et al. 2001; Ellsberg and Heise 2005; WHO 2016). Some of the most cited areas researchers address in training team members include ensuring basic concepts about VAWG are understood, including assessing for attitudes that would condone violence, understanding potential risks during data collection and how to minimize them for women and interviewers, and ensuring research team members are aware of how mandatory reporting can limit confidentiality for participants (Ellsberg et al. 2001; Ellsberg and Heise 2005; Watson Williams 2020; WHO 2016). The protection of research data follows ethical standards for all research studies including human participants as data is anonymized and stored securely to ensure the identity of participants are not revealed (Ellsberg et al. 2001; Ellsberg and Heise 2005; WHO 2016). Only research team members have access to the data and these members are bound by ethical standards of data collection (Ellsberg et al. 2001; Ellsberg and Heise 2005; WHO 2016).

To date, global standards have provided clear guidelines to ensure the safety of women who engage in VAWG research. The guidelines and subsequent research data have contributed to improving community awareness and understanding of violence (Chakraborty et al. 2020; Das et al. 2015; Haylock et al. 2016; Read-Hamilton and Marsh 2016), enhanced social supports and service delivery (Kamimura et al. 2013; Silva et al. 2012), as well as more efficient health and legal services (McCloskey et al. 2006; Murshid and Bowen 2018; Nicolaidis et al. 2013; Silva et al. 2012; Wright and Johnson 2012).

However, the current global guidelines and research studies presume that those in focus groups will not disclose their experiences of violence but speak only as, for example, advocates, service providers or community members about perceptions, attitudes, and responses, as they are guided. These guidelines also presume that survivors in confidential interviews will focus on their experience of violence in VAWG research rather than also speak on the basis of their intersecting identities and roles, perhaps as advocates, service providers, community members, and even researchers.

While these global guidelines and standards are important, our recent experience working with communities in Guyana and Trinidad and Tobago brings into question their fit/applicability to diverse global contexts. This paper offers an analysis of these standards by examining the ethical implications of disclosures of violence in VAWG focus groups conducted in a Caribbean context. Drawing on data and reflexive field notes from the qualitative components of the women's health and life experiences studies in Guyana and Trinidad and Tobago, we argue that dominant ethical guidelines intended to guide VAWG research methodologies may potentially, even if inadvertently, silence VAWG survivors and limit their agency in the Caribbean region. Based on the pattern of disclosures across these two studies, we illustrate why and how women chose to disclose experiences of VAWG despite researchers applying global standards and adhering to ethical practices in research. We suggest that global standards may not always align with ways of relating in small societies and Caribbean culture. Therefore, applying global standards to VAWG research while working within local Caribbean contexts can create tensions for researchers. We conclude by offering considerations on how to address women's disclosures in focus group settings based on our experiences in these two countries.

2. Background

VAWG researchers can utilize various research methodologies to examine the complexity of systemic, structural, and interpersonal factors that contribute to violence. While quantitative research methodologies are useful in determining cause and effect relationships or to predict the possibility of similar future events, qualitative research methodologies utilize research with text to uncover the meanings people attribute to experiences, situations, and/or texts (Merriam and Tisdell 2016; Stahlke and Thirsk 2022). In this sense, qualitative methodologies are useful in VAWG research as it provides survivors and communities an opportunity to speak for themselves. Moreover, the open-ended nature of qualitative research allows space to examine the contradictions and complications of everyday life, which can lead to uncovering new findings on longstanding issues, such as VAWG (Bhattacharya 2017; Merriam and Tisdell 2016).

Approaches to qualitative research are also dependent on the ontology and epistemology of the researcher (Bhattacharya 2017; Merriam and Tisdell 2016). However, most researchers who engage in qualitative methodologies are grounded in the belief that multiple realities exist and that reality is socially constructed, with meanings being context-driven (Bhattacharya 2017; Merriam and Tisdell 2016). Therefore, the nature and field of qualitative research has provided space for scholars situated within decolonial epistemologies to formulate ways of collecting data that decenters Western methodologies and brings to the fore their ancestral and cultural knowledges that are grounded in the community (Conyers 2016; Kempadoo and DeShong 2021; Santana et al. 2019; Smith 2021; Toliver 2021).

For example, Santana et al.'s (2019) work on a Caribbean qualitative research methodology, titled 'Liming and Ole Talk', underscores that liming (i.e., hanging out) and ole talk (i.e., chatting) are ways of communicating between community members that is distinct to the Caribbean region. Santana et al. (2019) described liming as important to community building and networking and occurs in community spaces such as the street, rum shops, or beaches where group activities occur. The act of liming creates the environment for ole talk to occur, which can focus on important topics such as VAWG (Santana et al. 2019). Notably, Santana et al. (2019) indicates that, "Ole Talk transcends differences in ethnicity, class and religion as in the Caribbean, people from diverse origins lime to relax and relief stress through the means of talking, eating and drinking or just doing nothing" (p. 107). Inherent to the practice of ole talk is taking turns and negotiation, iterative listening, overlapping and interruption, and humor (Santana et al. 2019, p.112). This way of communicating differs from standard research methods, where, for example, interruption and overlapping may be viewed as disruptive particularly in data collection methods where multiple people are expected to speak (i.e., focus groups). However, this way of communicating may be difficult to 'turn off' simply because of participation in a research study. Rather, this methodology embraces ways of communicating as particular to the region and may be less intimidating for some community members to engage in as it replicates a familiar practice.

2.1. Focus Groups as a Data Collection Method in VAWG Research

Focus groups are a type of data collection method that bring together people who possess similar characteristics to engage in group discussion with the goal of understanding knowledge, perspectives, and attitudes on a particular phenomenon (Krueger and Casey 2014). Kamberelis and Dimitriadis (2020) and Krueger and Casey (2014) to a lesser extent detail the theoretical and historical development of focus groups as a data collection method. While it is beyond the scope of this paper to detail the complete history of focus groups, sociologist Robert Merton is credited as developing group interviews (Krueger and Casey 2014; Wilkinson 1998) Additionally, there are several theoretical points that are useful to highlight as literature on focus groups often provide a 'how to' guide without grounding it in theory (Kamberelis and Dimitriadis 2020; Wilkinson 1998). Kamberelis and Dimitriadis (2020) noted that focus groups can function as inquiry (research), teaching and learning (pedagogy), social activism (political action) or a combination of all three. Research often incorporates or leads to some form of teaching and learning and depending on the phenomenon of inquiry the focus group can also be a political act. Arguably, the fact that qualitative research centers the voices and lived experiences of participants means that it is inherently political.

Secondly, focus groups have been important for feminist traditions in terms of legitimating and bringing women's issues, including violence, to the forefront of social and political conversations (Kamberelis and Dimitriadis 2020; Madriz 2000; Wilkinson 1998). In her analysis of second-wave feminism, Madriz (2000) indicated that focus groups in qualitative research became safe spaces where women felt empowered to share their stories and experiences while building connections with other women in a manner that allowed them to "reclaim their humanity" (p. 843). In some cases, it was noted that women took over the focus group discussions, which Kamberelis and Dimitriadis (2020) indicate can occur depending on the structure of the focus group. Wilkinson (1998) also noted that focus groups allow the shifting of power differentials between researchers and participants more so than one-on-one interviews, as the collective power of women within the group can steer the focus group in the way most suitable for them without direction from the researcher.

A review of research on domestic violence in health care settings also highlighted the importance of qualitative research in understanding the experiences of survivors and noted focus groups as a research method that may be used in these areas for survivors who do not feel comfortable in one-on-one interviews (McGarry and Ali 2016). Madriz (1997) also noted in her own work on the fear of crime in women's lives that it can be difficult for women to speak about sensitive topics in self-directed surveys or in a private interview with a researcher whereas focus groups are not challenged with the same issue. VAWG studies have also used focus groups as a data collection method to discuss societal gender norms and explore perceptions of violence against women, which aligns with WHO

recommendations (Alvarado et al. 2018; DeShong 2020; Hosein 2018; Rodney and Bobbili 2019; Sabri et al. 2018).

However, VAWG studies often provide minimal information on the experience of using focus groups as a data collection method. For example, while Alvarado et al. (2018) provided some information on the sampling strategy used to create their focus groups, there was no information on the process of conducting their focus groups and if any methodological challenges arose. Similarly, Sabri et al. (2018) indicated that focus groups were used to discuss risk and protective factors in relation to protective planning for IPV with practitioners but only identified scheduling issues that impacted participation for some practitioners. In addition, Bender's (2017) review on methods and ethics in VAWG research focused extensively on quantitative scales and measures and less on qualitative data collection methods. While there are overarching considerations that cross all methods of data collection, specific methodological considerations for focus groups were not included (Bender 2017).

2.2. Focus Groups Ethics

Given the collective nature of focus groups, limits to confidentiality exist which is a heightened risk for survivors in VAWG research (Ellsberg et al. 2001; WHO 2016). A researcher cannot guarantee that discussions within focus groups will remain with participants once members leave. Ensuring informed consent is obtained, using pseudonyms, and establishing group dynamics that explicitly discourage discussion of personal information are some of the steps researchers are advised to carry out to ensure the confidentiality of participants (Ellsberg et al. 2001; Sim and Waterfield 2019). However, the perspective of what maintains confidentiality and anonymity, and is therefore considered more ethical, limits the possibility of disclosures in focus groups, particularly for women who may identify as survivors from one or more incidents of lifetime violence, however long ago. Consequently, current guidelines on focus groups in VAWG research only stipulate instructions for community members, key informants from civil society organizations (CSOs) and state agencies that respond to gender-based violence or those in the social networks of survivors (Ellsberg et al. 2001; WHO 2016).

3. Theoretical Underpinning

As Caribbean and diasporic and South Asian diasporic critical qualitative feminist researchers we enter this work by centering ourselves, which means accounting for the history that has birthed our existence. Diverse colonial histories in the region have created complex social relations of gender, race, and class in the Caribbean (Barriteau 2001; Barrow 1996; Beckles 1989; Higman 2011). It is this post-colonial context, in part, that sets stage for data collection in research, as well as our engagement as researchers in the field. Further, these complexities, must be considered necessary to frame our analysis of global research standards and Caribbean women's disclosures in focus groups.

Specifically, intersectionality becomes particularly important for Caribbean women as the inception of colonial entry to this region marked the beginning of an ethnically diverse Caribbean population (Bahadur 2014; Barriteau 2001; Higman 2011). Thus, Caribbean women embody a multiplicity of histories and roles that cannot be separated out to fit neatly into research definitions (Barrow 1996; Crenshaw 1990). Intersectionality also points us to the reality of multiple sources of knowing, for example, women who work or volunteer in organizations focused on violence, may have also entered such work from experiences of violence themselves.

Considering these post-colonial legacies, the specific histories of the Caribbean, and the exclusion of Caribbean women's voices from dominant Westernized approaches to research, we suggest that centering regional women's experience is critical to theorizing research about their lives. Thus, the way that women negotiate disclosures of violence in their everyday lives are starting points for theorization, particularly when those disclosures are public and challenge stereotypical beliefs of violence occurring in certain segments of the

population. There are several examples in newspaper articles or social media campaigns where survivors have chosen to speak out. Women may choose to discuss their past experiences to warn other women, reduce stigma of being a survivor and/or to reclaim their own stories. For example, in 2009 the former first lady of Guyana, Varshnie Singh, recounted her experiences of domestic violence with her then husband and President of Guyana, Bharat Jagdeo (Guyana's first lady 2009). She chose to speak publicly to make visible the reality of domestic violence occurring in the upper echelons of Guyanese society. In 2020, Trinidad and Tobago's Guardian newspaper interviewed a survivor, Rachel Edmund, who is now a pastor running an organization that assists single mothers (Rampersad 2020). Even though she had multiple abusive partners in the past, she felt it was important to tell her story and offer her organization as support for other women. These examples illustrate that survivors, having managed daily risks of violence—some for many years and at extreme levels—can determine the potential risk of violence or retaliation when speaking publicly and without anonymity. For these women and the countless others who speak out publicly, they do so because they feel safe and empowered enough to share. Women may also speak out in desperation to ask for help, thus giving up confidentiality and anonymity, especially when they cannot access services (Pitt 2017).

4. Methods

The data for this research arose from a larger mixed methods national prevalence survey (WHLES) in Guyana and Trinidad and Tobago. The purpose of the WHLES was to provide a comprehensive analysis of VAWG, including societal factors that may have contributed to violence in both countries. Each country's study had a quantitative component which included a household survey, and a qualitative component that utilized a combination of interviews and focus group discussions.

The data that informed this paper emerged from three data sources within the qualitative component of the research studies for both countries. First, the focus groups that occurred with community members and professionals (i.e., health, judicial and religious leaders) in Guyana and Trinidad and Tobago. Secondly, the debriefing sessions that occurred after each focus group in both countries, and lastly, the reflexive field notes that were recorded by research assistants in relation to the focus group and debriefing sessions.

4.1. Focus Group Discussion

Focus groups with community members and professionals were each facilitated by a moderator and observer and focused on women's experiences of physical, sexual, psychological, and economic forms of violence, community risk and protective factors, and opportunities for prevention. These discussions were guided by ice-breaker activities and semi-structured interview guides that utilized hypothetical scenarios and guided cases studies (Hosein 2018; Rodney and Bobbili 2019).

4.2. Debriefing Sessions

Each country's research team incorporated debriefing sessions and reflexive practice throughout the duration of the data collection phase that included interviews of survivors and focus group discussions with various community members (Dowling 2006). These practices were incorporated to account for potential vicarious trauma that may have been experienced by research assistants when interviewing survivors, as well as to assess and adapt interview or focus group guides and processes as needed (Coles et al. 2014).

In terms of focus groups, each country's research team had scheduled debriefing sessions directly after each focus group. In these sessions, the moderator and observer, and at times a third research assistant in Guyana's team, would discuss (a) interesting comments or insights from participants that stood out from the discussion to each researcher, (b) how well the ice-breaker exercises worked to begin the discussion, (c) the flow of conversation based on the focus group guide and if there were any questions that needed to be reworded for better understanding by participants, (d) group dynamics and how participants engaged

with each other and the questions, (e) nonverbal body language of participants within the group, and (f) how the moderator and observer felt in their roles and if there was anything they wanted to change in their facilitation moving forward.

4.3. Reflexive Field Notes

Reflexivity in the form of field notes occurred at all points throughout the research process including the data collection, analysis, and write-up phase by the principal investigators and research assistants (Finlay 2002; Phillippi and Lauderdale 2018). These recorded notes were used to explore in greater depth any perspectives or curiosities that arose from further reflection of focus group discussions and the debriefing sessions. Research assistants were also asked to record their emotions and reflections on the successes and challenges of the research process, given that these studies were the first national prevalence surveys for both countries that included qualitative methodologies.

Following our initial questions about women's disclosures across country sites, we went back to these three sources of data with specific questions. The first question we asked was, why did women choose to disclose personal experiences of violence in focus group settings? We were particularly interested in this question given our instructions to focus group participants not to disclose personal experiences of violence given the limits to confidentiality. Secondly, once women chose to disclose, we wanted to have a better understanding of what they chose to disclose and why. Lastly, it was important to know how research assistants described their experience of women disclosing and if their perspectives could alert us to factors within the focus group environment that were not captured in written transcriptions of group recordings (i.e., body language). We organized the data initially with these three questions and used our theoretical framing of intersectionality and post-colonial feminism to read for similarities across the three questions which became the main themes of our analysis.

Given that the WHLES were the first national prevalence surveys that included qualitative methodologies, we were committed to regional collaborations that would lend to a better understanding of qualitative VAWG research methodologies and methods in the Anglophone Caribbean. Therefore, once the three questions were used to review each country's data, the principal investigators reached out to the qualitative researchers for Jamaica and Grenada's WHLES study to see if any disclosures occurred in their studies.

Through these reflexive discussions, we found that women disclosed violence in focus group discussions in Guyana, Trinidad and Tobago, and Jamaica. Although disclosures happened in three countries, this paper draws on data and reflexive field notes from Guyana and Trinidad and Tobago.

5. Results

5.1. Women's Disclosures: Survivors and Researchers Perspectives

There were two overarching themes that emerged from participant comments in focus groups and our reflexive field notes that can contribute to our understanding of why Caribbean women may choose to disclose experiences of violence in focus group settings. First, women may disclose experiences of violence as a form of advocacy and advice, and secondly, women may disclose as a form of storytelling when relating to the focus group questions or scenarios.

5.2. Women's Disclosures as Advocacy and Advice

Some women disclosed their personal experiences as a way of imparting knowledge to other women in Guyana. In these instances, women had reclaimed their stories and felt empowered to discuss past experiences to support other women who may currently be involved in abusive relationships.

I had a few people that I speak with, even share my experience with them, because you know, I'm bold about it, I'm not afraid. I have been ... I am my own counsellor and have other people counselled like me before. But I always tend

to give this counselling so I [laughs] I love to share my experience and to just motivate people, young people. (Participant 6, Health care professionals focus group, Guyana)

The word choices for this Guyanese health care professional are important. She described herself as 'bold' and 'not afraid', illustrating that she assessed her safety and felt secure enough to share her story. Her comments also revealed that she had previously spoken about her experience with several other people, perhaps when it was disclosed by women or when she may have heard about or witnessed it in her community. Therefore women, such as this participant, may have previously discussed their experiences publicly, while other women may speak out for the first time in private or in focus group settings.

I take this opportunity to, I think, I've never been to one of these forums, but I take this opportunity to just get a basic feel about what it's all about. (Participant 3, Community Focus Group, Guyana)

I was never a part of a Domestic Violence Program so I'm very grateful to be a part of this. So, I intend in the future, should I have to deal with anything like this, I would be capable of dealing with it. Thank you. (Participant 14, Police Focus Group, Guyana)

These quotes illustrate that other participants valued the discussion in each group and while some participants had spoken about their experiences prior to the group, others may have attended the focus group to discuss these issues in a safe space where discussion was encouraged. Similarly, in Trinidad and Tobago, a research assistant (RA) described the importance of the space and the energy created in conversation with women during focus groups. She wrote:

A safe environment for the opportunity to share makes it easier to disclose, particularly if women want to talk about it and didn't have that space before. People are also at different stages in their disclosure process, and some are ready to disclose and, even if we are doing focus groups, we cannot tell them not to after they have disclosed because we also have to support women's agency, and that women can make their own decisions in their own life, especially given the environment of secrecy and silence. (Primary Research Assistant, Reflexive Note, Trinidad and Tobago)

In this quote, the RA's epistemology speaks to a gendered critical worldview when working within the field of VAWG and conducting focus groups. She entered the research from a position that women who agreed to participate in this research and are also survivors need the space to 'show up' in research in a manner most comfortable for them. Thus, supporting women's agency meant recognizing that if some women wanted to disclose, they would do so irrespective of the guidelines if they felt safe. Additionally, this RA indicated that some women disclosed being survivors of VAWG without ever saying a word. Their body language and expressions alerted her to the fact that those women had experienced violence. She also stated that even though she did not share her own experience, she felt survivors sensed her empathy and empathy from others in the room. This level of awareness and attention to detail while interacting with participants may not have been as evident to an inexperienced RA.

Another research assistant from Trinidad and Tobago described how, in her experience of conducting focus groups, survivors who have separated from perpetrators and dealt with their experience of violence a long time ago were more likely to disclose as part of their efforts to connect with and guide other women and pursue healing. She wrote:

I feel like the women who disclose want to disclose or are already in a place to disclose and so may be in some way seeking an opportunity to talk about what they are going through. I don't know how you would stop that and perhaps its cathartic for them to do that as well as other women who don't disclose but are going through it, may find some solace in knowing that I'm not the only person in this type of group who is a professional and going through this. I hear the confidentiality issue, but women who disclose have weighed that risk and they decide to and those who don't want to, don't. (Second Research Assistant, Reflexive Note, Trinidad and Tobago)

Notably, all focus group participants in Guyana and Trinidad and Tobago were provided guidelines at the beginning of every session regarding not disclosing personal information in focus group settings, as indicated by global guidelines.

5.3. Women's Disclosures: Using Storytelling as a Way of Relating to Focus Group Questions

In other instances, women used the focus groups as an opportunity to share their story or process the information being asked in the group. In these cases, women revealed themselves as survivors, even though participants were instructed not to talk about personal information and focus group questions did not ask for personal experiences but focused on perceptions, attitudes, and responses in relation to fictional scenarios.

My marriage was like good for the first four years and after that my husband became an alcoholic, many nights I slept outside. I had one kid, a daughter, and many nights we slept outside on the veranda or in the cow pen or in the hammock sleeping, many days and many nights no food to eat, abused by him beating me. I started working and he said I finding men for me, ill-treat me and my daughter and then he died. (Participant 2, Community Focus Group, Guyana)

This community focus group was held in a private space in Guyana. Participants indicated to researchers this was the first opportunity to share their thoughts about VAWG. In this specific group, members were familiar with one another and, given the group dynamics, participants wanted other's opinions about their experiences and shared their story to warn other women. We also presumed this participant felt safe to share her story because her abuser was deceased.

In some instances, women acknowledged the instructions provided by researchers while still choosing to disclose their own experiences. In a community focus group in Guyana, one woman spoke about a hypothetical situation presented by the researchers and then related it to her own experience. In the quote below she reflects on women seeking help and whether a woman could determine if having family or police intervene would result in further violence.

Like my husband is violent against me ... How possible is it for you to know if [they -i.e., family member or police] could go talk to the man without him getting more violent? Um...I know you said we shouldn't, you know, I had personal experience with this, you know. (Participant 6, Community Focus Group, Guyana)

The six participants' comments revealed that she understood the directions for participating in the focus group discussion; however, to substantiate her point about whether a woman could determine if a man would become more violent, she revealed that she had experienced a similar situation. Her comments illustrated that she could not separate her experience from the topic being discussed and therefore determined it reasonable to forego the instructions provided by researchers. In Trinidad and Tobago, women regularly disclosed in similar ways to women in Guyana. One research assistant's reflexive note indicated

I interviewed groups of women from political groups and organizations for professional women, and there were disclosures in all. Women would say that 'it happened to me' and it was related to help-seeking, the limited access to services, and why women felt that others do not disclose or seek help. In many instances, women felt comfortable disclosing in those sessions, whether because of the other persons in the group, the setting or, perhaps, the interviewer. (Primary Research Assistant, Trinidad and Tobago, Reflexive note)

The RA pointed out that women's disclosures occurred when relating to the topics discussed. In this sense, participants disclosed to provide further credibility to women's

choices and experiences when experiencing gendered violence. Her reflection also illustrates that the focus groups were able to engage professional women (who disclosed they were survivors throughout the course of the discussion) but otherwise would not identify themselves to be recruited as survivors for interviews. As this RA indicated, the decision to disclose for these women could have been a combination of factors that included an assessment of the safety of the space, and comfort with the participants and moderator of the group as well as the single-sex gathering of women. She also reflected on her own positionality and the fact that her personal experiences of family violence and being an experienced facilitator with over 25 years of working on women's empowerment issues contributed to her ability to relate to participants.

Lastly, while the WHLES focuses on women as survivors and men as perpetrators, men have experienced violence in relationships. In Guyana, participants indicated there is greater stigmatization towards men who are victims. However, in two separate focus groups, men disclosed being victims of domestic violence in past relationships and in Trinidad and Tobago where focus groups with men were used to explore men's perceptions and attitudes regarding violence against women, men also disclosed experiences of violence by women, irrespective of the guidelines and stigma regarding men being victims of domestic violence.

6. Discussion: Further Reflections

Women's disclosures in Guyana and Trinidad and Tobago, revealed that the intersections of women's lives must be accounted for in guidelines for VAWG research. In each country, women participated in the research studies in several roles, for example, as healthcare providers, police officers, general laborers, community members—and were also survivors of VAW. While gender-based violence research documents survivor experiences with regard to employment, for example, with abusers controlling money earned or keeping track of women's movements regarding workplaces, these accounts centralize the experience of being a survivor and situate the other roles women embody (i.e., professional) in relation to being in an abusive relationship. However, our analysis of participant voices and reflexive notes illustrate that being a survivor is not a fixed identity. For women who participated in these countries' studies, the role of survivor, while still important, did not evoke the same concerns for safety in focus groups, because their abusive relationships were in the past. Identifying as a survivor of gender-based violence holds different meanings for women based on when the relationship occurred, and the sense of insight and empowerment they gained, and therefore guides which information and where women feel comfortable disclosing.

It is understandable and ethical to conduct research with survivors through a safetyfirst approach. Particularly because the aim is to protect women from further violence and prevent their stories from being retold in troubling ways, especially in contexts where women are blamed or shamed for violence and/or their experiences are minimized. However, it is also important that these efforts do not underestimate or incapacitate women from being the experts of their own lived realities, inadvertently holding them in spaces of powerlessness. Guidelines regarding nondisclosure may alienate some women from the multiplicity of their lived realities, although they also empower women to speak about their perceptions, explanations and attitudes in ways that can honor their knowledge, insight, and experience, without increasing their vulnerability. That said, in close-quartered or close-knit communities, where anonymity and confidentiality do not accompany everyday realities of violence, this may have less significance and inadvertently result in focus groups being spaces that silence some aspects of women's knowledge and narrative, thus offering containment rather than protection from possible ethical breaches of respect and trust.

Tuck (2009) indicated that when communities have been defined by struggle or suffering, the starting point for research can often be from a damage perspective. However, these communities have the power to shift the discourse from struggle to that of survival (Tuck 2009). We identify women often a 'survivors' of gender-based violence but engage

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with them as 'victims' in research. We recognize that in some cases there may be a fine line between knowing when a woman has 'transitioned' from being a victim to a survivor for a researcher in a focus group setting. Through our experiences of interviewing survivors and speaking with community members in focus groups who were also survivors, it was important for researchers to make space for women to participate in research in multiple capacities. This meant ensuring safety-first protocols were followed and also supporting women who chose to disclose in spaces other than interviews. In this sense, we recognized that vulnerability is not static and that survivors have different needs and perspectives, all of which should be accounted for in research (DuBois et al. 2012; Peters 2021), particularly when the prevalence of violence against women is high, and surveys suggest that, even among the numbers of women in a typical focus group, there are likely to be survivors.

Focus groups are spaces where women can choose to disclose past experiences of gender-based violence, having understood the potential risks of disclosure and being able to face these without fear of potential violation. Rather, women viewed disclosure in these contexts as an act of power and a basis for legitimating their perspective, recommendations, and authority based on their experience. This may have a cultural context that is particular to the Caribbean region. When comparing the WHLES surveys in the Caribbean to other countries that had conducted the same survey, Caribbean women disclosed violence at higher rates than any other country (Contreras-Urbina et al. 2019; Fiji Women's Crisis Centre 2013; National Commission for the Advancement of Women 2015; National Commission for Women and Children 2017; Pemberton and Joseph 2018; Watson Williams 2018). For instance, in Cambodia, Fiji, Bhutan, and Lao between 43.2% to 49% of women did not disclose experiences of violence to anyone, compared to 18.4% to 29% for Jamaica, Guyana, and Trinidad and Tobago respectively (Contreras-Urbina et al. 2019; Fiji Women's Crisis Centre 2013; National Commission for the Advancement of Women 2015; National Commission for Women and Children 2017; Pemberton and Joseph 2018; Watson Williams 2018). Additionally, Caribbean women were more likely to disclose to a community member than an institutional actor such as a police officer or health care worker (Contreras-Urbina et al. 2019; Pemberton and Joseph 2018; Watson Williams 2018). Arguably, focus group discussions may feel more familiar and replicate a conversation within a community, and among women, especially if group dynamics are managed to ensure an open and safe environment.

As Peters (2021) indicated, being ethical is not only about following regulations and guidelines, but also critically questioning those guidelines and engaging with participants in thoughtful and sensitive ways. Further, Santana et al. (2019) state, "research frameworks that employ Western modes while working with Caribbean populations leave out culturally specific interactions which are an organic part of Caribbean life experiences as well as important strategies to express, negotiate and crystalize perspectives and knowledge" (p. 105). This does not mean that if there are no disclosures in focus groups, researchers have not been ethical. For example, in Grenada there were no disclosures of violence in focus group settings even though women had similar rates of disclosure compared to other Caribbean countries who participated in the WHLES (DeShong 2020; Nicholson and DeShong 2020). However, based on our experiences in these two countries, it is possible that women may disclose, and it does not mean that researchers have forgone their ethical and moral responsibilities, rather it may point toward a meshing of Caribbean culture and Western research practices, where Caribbean culture cannot be superseded by commonly used approaches to research. In addition, from a cultural perspective, telling Caribbean women not to speak about personal experiences after they have chosen to disclose may change group dynamics as the researchers may be perceived as disrespectful by participants. Caribbean women have been vocal about acts of violence against women, notably with women's organizations being at the forefront of calling attention to and demanding justice for VAWG (Andaiye 2020; Trotz 2007).

It must also be said that five decades of activism and advocacy by Caribbean feminists to create greater awareness of and response to VAWG has meant that there are fewer social barriers to disclosing, greater public recognition for women's stories of survival, and an increased sense of connection to a community of diverse women speaking out as part of their own personal empowerment and contribution to a broader movement aiming to end VAWG. As noted earlier, the former first lady of Guyana and a local Trinidadian woman felt compelled to share their stories. Thus, women's choice to speak out about previous experiences of violence and in some cases, irrespective of the guidelines provided for focus group discussions, aligns with the unapologetic nature of Caribbean feminist organizing in the region against VAWG and encourages us to think about how qualitative methodologies such as Liming and Ole Talk, developed in the Caribbean, along with the kinds of common-knowledge about VAWG that occurs in small societies, can be used to re-think and facilitate health research in contexts such as the Caribbean (Andaiye 2020; Santana et al. 2019; Trotz 2007).

Given the high prevalence of VAWG (García-Moreno et al. 2013), the possibility exists that women can choose to participate in VAWG research as professionals or community members and also be survivors of violence. This is not only a fact for research participants but also for members of research teams who, by nature of research protocols and safety-first approaches, must be women. The open-ended nature of qualitative research means that sometimes it may be difficult to fully anticipate what participants may say and how the research will unfold (McGarry and Ali 2016; Peters 2021). Additionally, if participants engage with the research somewhat as a 'lime', the conversation may shift and alter as participants feel comfortable (Santana et al. 2019). Participants may speak about topics they never intended, including disclosures that go beyond the scope of the focus group objectives (McGarry and Ali 2016). As some participants indicated in Guyana, this may be the first-time survivors and community members have openly discussed VAWG because it is highly stigmatized. In this sense, focus groups may have an unintended therapeutic benefit of offering support for survivors, family members, professionals, and others within the community as we saw reflected in the RAs reflexive notes from Trinidad and Tobago. Therefore, responding to women who disclose in focus group settings should be approached as a matter of preparedness rather than assuming that safety-first protocols have been breached. If disclosures continue to be treated as a breach of safety-first protocols, it can result in the loss of important contextual information of women's experiences in local contexts

For VAWG researchers engaging with communities, it is important to begin from the perspective that survivors are the experts of their own lives and therefore research is a co-creation of knowledge between participants and researchers. Beginning from this standpoint shifts away from a paternalistic approach to research participants and shifts towards collaborative engagement with survivors and communities. It also aligns with our positionalities as women who are critical feminist qualitative researchers to prioritize and situate our theory and action by responding to the needs of the community, especially when it does not align with global standards (Nixon and King 2013). Thus, we consider that, in future research, disclosures in focus groups should be approached as a pivotal moment where women, being able to gauge the context, other participants, and the researcher, may choose to break silences and share experiences in ways that should be considered a priority in feminist research, particularly with women, and especially in relation to issues of violence. Moreover, researchers should ensure that research teams are equipped to deal with disclosures, particularly to non-verbal cues such as those realized by the Trinidad and Tobago team that may alert researchers to other dynamics at play in focus group settings. Researchers must also continue to make certain that participants are adequately informed to make their own decisions, rather than deciding what types of experiences or spaces are safe for survivors to disclose.

7. Conclusions

Caribbean VAWG research participants may disclose past experiences of violence in focus group settings because survivors are women whose experiences of violence are not

a monolith. Caribbean women can identify as a survivor and also be a professional or community member or may identify as a professional and later disclose their experiences of violence in research studies. Making space for women to participate in VAWG research as primarily professionals or community members, while also accounting for the possibility of past experiences of violence will equip researchers to anticipate and attend to disclosures of violence in focus groups meaningfully. Global standards of VAWG research are instrumental in providing safety-first approaches to data collection, expanding these guidelines to account for the intersections of women as survivors will provide greater opportunities to include women's experiences in research, and ensure their multiple positionalities are included and their voices are not silenced.

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References

Alvarado, Gina, Amy P. Fenny, Samuel Dakey, Jennifer L. Mueller, Lila O'Brien-Milne, Aba O. Crentsil, Nata Duvvury, Stacey Scriver, and Chole Schwenke. 2018. The health-related impacts and costs of violence against women and girls on survivors, households and communities in Ghana. *Journal of Public Health in Africa* 9: 860. [CrossRef] [PubMed]

Andaiye. 2020. The Point is to Change the World: Selected Writings of Andaiye. London: Pluto Press. [CrossRef]

- Rodney, Ruth, and Sireesha Bobbili. 2019. Womens Health and Life Experiences: A Qualitative Research Report on Violence against Women in Guyana. UN Women | Caribbean. Available online: https://caribbean.unwomen.org//materials/publications/2019/1 1/womens-health-and-life-experiences-a-qualitative-research-report-on-violence-against-women-in-guyana (accessed on 2 February 2021).
- Hosein, Gabrielle. 2018. Gender-Based Violence in Trinidad and Tobago: A Qualitative Report. UN Women Caribbean. Available online: https://caribbean.unwomen.org//materials/publications/2018/11/gender-based-violence-in-trinidad-and-tobago (accessed on 2 February 2021).
- Bahadur, Gaiutra. 2014. Coolie Woman: The Odyssey of Indenture. Chicago: University of Chicago Press.
- Barriteau, Violet Eudine. 2001. Political Economy of Gender in the Twentieth-Century Caribbean. In *The Political. Economy of Gender in the Twentieth-Century Caribbean.* London: Palgrave Macmillan Limited, pp. xvi–xvi. [CrossRef]
- Barrow, Christine. 1996. Family in the Caribbean: Themes and Perspectives. Kingston: Ian Randle Publishers.
- Beckles, Hilary. 1989. Natural Rebels: A Social History of Enslaved Black Women in Barbados. New Brunswick: Rutgers University Press.
- Bender, Annah K. 2017. Ethics, methods, and measures in intimate partner violence research: The current state of the field. *Violence Against Women* 23: 1382–413. [CrossRef]
- Bhattacharya, Kaklia. 2017. Fundamentals of Qualitative Research: A Practical Guide. London: Routledge. [CrossRef]
- Btoush, Rula, and Jacquelyn C. Campbell. 2009. Ethical conduct in intimate partner violence research: Challenges and strategies. Nursing Outlook 57: 210–16. [CrossRef] [PubMed]
- Chakraborty, Proshant, David Osrin, and Nayreen Daruwalla. 2020. "We Learn How to Become Good Men": Working with male allies to prevent violence against women and girls in urban informal settlements in Mumbai, India. *Men and Masculinities* 23: 749–71. [CrossRef]
- Coles, Jan, Jill Astbury, Elizabeth Dartnall, and Shazneen Limjerwala. 2014. A Qualitative Exploration of Researcher Trauma and Researchers' Responses to Investigating Sexual Violence. *Violence Against Women* 20: 95–117. [CrossRef]
- Contreras-Urbina, Manuel, Angela Bourassa, Roxanne Myers, Junior Ovince, Ruth Rodney, and Sireesha Bobbili. 2019. Guyana Women's Health and Life Experiences Survey Report. UN Women | Caribbean. Available online: https://caribbean.unwomen.org//materials/ publications/2019/11/guyana-womens-health-and-life-experiences-survey-report (accessed on 2 February 2021).
- Conyers, James. 2016. *Qualitative Methods in Africana Studies: An Interdisciplinary Approach to Examining Africana Phenomena*. Edited by Conyers. Lanham: University Press of America.
- Crenshaw, Kimberlé. 1990. Mapping the Margins: Intersectionality, Identity Politics, and Violence against Women of Color. *Stanford Law Review* 43: 1241–300. [CrossRef]
- Das, Madhumita, Ravi Verma, Sancheeta Ghosh, Samantha Ciaravino, Kelley Jones, Brian O'Connor, and Elizabeth Miller. 2015. Community mentors as coaches: Transforming gender norms through cricket among adolescent males in urban India. *Gender & Development* 23: 61–75. [CrossRef]
- DeShong, Halimah. 2020. Women's Health and Life Experiences: A Qualitative Research Report on Violence Against Women in Grenada, 2018. UN Women | Caribbean. Available online: https://caribbean.unwomen.org//materials/publications/2020/8 /womens-health-and-life-experiences-a-qualitative-research-report-on-vaw-in-grenada-2018 (accessed on 4 February 2021).
- Dowling, Maura. 2006. Approaches to reflexivity in qualitative research. *Nurse Researcher* 13: 7–21. Available online: https: //link.gale.com/apps/doc/A212034172/AONE?u=anon~{}79af9381&sid=googleScholar&xid=4d479cf4 (accessed on 26 January 2022). [CrossRef] [PubMed]
- DuBois, James M., Laura Beskow, Jean Campbell, Karen Dugosh, David Festinger, Sarah Hartz, Rosalina James, and Charles Lidz. 2012. Restoring balance: A consensus statement on the protection of vulnerable research participants. *American Journal of Public Health* 102: 2220–25. [CrossRef]
- Ellsberg, Mary, and Lori Heise. 2005. *Researching Violence against Women: A Practical Guide for Researchers and Activists*. Washington, DC: World Health Organization, Program for Appropriate Technology in Health (PATH).
- Ellsberg, Mary, Lori Heise, Rodolfo Peña, Sonia Agurto, and Anna Winkvist. 2001. Researching Domestic Violence Against Women: Methodological and Ethical Considerations. *Studies in Family Planning* 32: 1–16. [CrossRef]
- Fiji Women's Crisis Centre. 2013. Somebody's Life, Everybody's Business! Available online: https://pacificwomen.org/wp-content/ uploads/2017/09/FWCC-National-Research-on-Womens-Health-Fiji.pdf (accessed on 5 July 2021).
- Finlay, Linda. 2002. "Outing" the Researcher: The Provenance, Process, and Practice of Reflexivity. *Qualitative Health Research* 12: 531–45. [CrossRef] [PubMed]
- García-Moreno, Claudia, Christina Pallitto, Karen Devries, Heidi Stöckl, Charlotte Watts, and Naeema Abrahams. 2013. *Global and Regional Estimates of Violence against Women: Prevalence and Health Effects of Intimate Partner Violence and Non-Partner Sexual Violence.* Geneva: World Health Organization.
- Haylock, Laura, Rukia Cornelius, Anthony Malunga, and Kwezilomso Mbandazayo. 2016. Shifting negative social norms rooted in unequal gender and power relationships to prevent violence against women and girls. *Gender & Development* 24: 231–44. [CrossRef]
- Higman, Barry W. 2011. A Concise History of the Caribbean. Cambridge: Cambridge University Press.
- Kamberelis, George, and Greg Dimitriadis. 2020. Focus Group Research: Retrospect and Prospect. In *The Oxford Handbook of Qualitative Research*. New York: Oxford University Press. [CrossRef]

- Kamimura, Akiko, Asha Parekh, and Lenora M. Olson. 2013. Health Indicators, Social Support, and Intimate Partner Violence Among Women Utilizing Services at a Community Organization. *Women's Health Issues* 23: e179–e185. [CrossRef] [PubMed]
- Kempadoo, Kamala, and Halimah A. F. DeShong, eds. 2021. Methodologies in Caribbean Research on Gender and Sexuality. Kingston: Ian Randle Publishers.
- Krueger, Richard A., and Mary Anne Casey. 2014. *Focus Groups: A Practical Guide for Applied Research*. Thousand Oaks: SAGE Publications.
- Madriz, Esther. 1997. Nothing Bad Happens to Good Girls: Fear of Crime in Women's Lives. Berkeley: University of California Press.
- Madriz, Esther. 2000. Focus groups in feminist research. In *Handbook of Qualitative Research*, 2nd ed. Edited by Norman K. Denzin and Yvonna S. Lincoln. Thousand Oaks: Sage, pp. 835–50.
- McCloskey, Laura A., Erika Lichter, Corrie Williams, Megan Gerber, Eve Wittenberg, and Michael Ganz. 2006. Assessing intimate partner violence in health care settings leads to women's receipt of interventions and improved health. *Public Health Reports* 121: 435–44. [CrossRef]
- McGarry, Julie, and Parveen Ali. 2016. Researching domestic violence and abuse in healthcare settings: Challenges and issues. *Journal* of Research in Nursing 21: 465–76. [CrossRef]
- Merriam, Sharan B., and Elizabeth J. Tisdell. 2016. *Qualitative Research: A Guide to Design and Implementation*, 4th ed. San Francisco: Jossey-Bass.
- Murshid, Nadeen Shanta, and Elizabeth A. Bowen. 2018. A Trauma-Informed Analysis of the Violence Against Women Act's Provisions for Undocumented Immigrant Women. *Violence Against Women* 24: 1540–56. [CrossRef]
- National Commission for Women and Children. 2017. National Survey on Women's Health and Life Experiences 2017 in Bhutan. UNFPA Asiapacific. Available online: https://asiapacific.unfpa.org/en/publications/national-survey-womens-health-and-lifeexperiences-2017-bhutan (accessed on 5 July 2021).
- National Commission for the Advancement of Women. 2015. Lao National Survey on Women's Health and Life Experiences 2014: A Study on Violence against Women. UN Women | Asia and the Pacific. Available online: https://asiapacific.unwomen.org/en/digital-library/publications/2016/03/lao-a-study-on-violence-against-women (accessed on 14 July 2021).
- Navarro-Mantas, Laura, and Luana Marquis-Garcia Ozemela. 2019. Violence Against the Indigenous Women: Methodological and Ethical Recommendations for Research. *Journal of Interpersonal Violence* 36: 13–14. [CrossRef]
- Nicholson, Claudia, and Halimah DeShong. 2020. Grenada Womens Health and Life Experiences Study 2018 Report. UN Women | Caribbean. Available online: https://caribbean.unwomen.org//materials/publications/2020/8/grenada-womens-health-and-life-experiences-study-2018-report (accessed on 4 February 2021).
- Nicolaidis, Christina, Stéphanie Wahab, Jammie Trimble, Angie Mejia, S. Renee Mitchell, Dora Raymaker, Mary Jo Thomas, Timmons Vanessa, and A. Star Waters. 2013. The interconnections project: Development and evaluation of a community-based depression program for African American violence survivors. *Journal of General Internal Medicine* 28: 530–38. [CrossRef]
- Nixon, Angelique V., and Rosamond S. King. 2013. Embodied Theories: Local Knowledge(s), Community Organizing, and Feminist Methodologies in Caribbean Sexuality Studies. Caribbean Review of Gender Studies 7: 1–15.
- Pemberton, Cecile, and Joel Joseph. 2018. National Women's Health Survey for Trinidad and Tobago. Washington, DC: Inter-American Development Bank. [CrossRef]
- Peters, Elizabeth. 2021. Qualitative health research ethics: Reflections on potential impacts and vulnerabilities. In [Advanced Topics in Qualitative Health Research: Theoretical-Methodological Foundations]. Tópicos Avançados em Pesquisa Qualitativa em Saúde: Fundamentos Teórico-Metodológicos. Edited by Lúcia Maria, Bosi Magalhães and Gastaldo Denise. Vozes: Petropolis, in press.
- Phillippi, Julia, and Jana Lauderdale. 2018. A Guide to Field Notes for Qualitative Research: Context and Conversation. *Qualitative Health Research* 28: 381–88. [CrossRef]
- Pitt, Kendra-Ann. 2017. Exploring Domestic Violence Social Support Work in Postcolonial Trinidad and Tobago: Old Talk, New Conversations. Ph.D. dissertation, University of Toronto, TSpace, Toronto, ON, Canada. Available online: https://tspace.library.utoronto.ca/handle/1807/123594 (accessed on 5 March 2022).
- Rampersad, Sharlene. 2020. Domestic violence survivor, now pastor speaks out—Trinidad Guardian. *Trinidad and Tobago Guardian*. June 11. Available online: https://www.guardian.co.tt/news/domestic-violence-survivor-now-pastor-speaks-out-6.2.1027176. 802d39ee01 (accessed on 10 July 2021).
- Read-Hamilton, Sophie, and Mendy Marsh. 2016. The communities care programme: Changing social norms to end violence against women and girls in conflict-affected communities. *Gender & Development* 24: 261–76. [CrossRef]
- Sabri, Bushra, Nkiru Nnawulezi, Veronica P. S. Njie-Carr, Jill Messing, Allison Ward-Lasher, Carmen Alvarez, and Jacqelyn C. Campbell. 2018. Multilevel Risk and Protective Factors for Intimate Partner Violence Among African, Asian, and Latina Immigrant and Refugee Women: Perceptions of Effective Safety Planning Interventions. *Race and Social Problems* 10: 348–65. [CrossRef] [PubMed]
- Santana, Anabel Fernández, Camille Nakhid, Margaret Y. Nakhid-Chatoor, and Shakeisha Wilson-Scott. 2019. Liming and Ole Talk: Foundations for and Characteristics of a Culturally Relevant Caribbean Methodology. *Caribbean Studies* 47: 99–124. [CrossRef]
- Silva, Raquel De Aquino, Thália V. Barreto de Araújo, Sandra Valongueiro, and Ana Bernarda Ludermir. 2012. Facing violence by intimate partner: The experience of women in an urban area of Northeastern Brazil. *Revista de Saude Publica* 46: 1014–22. [CrossRef] [PubMed]
- Sim, Julius, and Jackie Waterfield. 2019. Focus group methodology: Some ethical challenges. *Quality & Quantity* 53: 3003–22. [CrossRef] Smith, Linda Tuiwai. 2021. *Decolonizing Methodologies: Research and Indigenous Peoples*, 3rd ed. London: Zed Books.

- Stahlke, Sarah, and Lorraine Thirsk. 2022. Chapter 8: Qualitative Research. In LoBiondo-Wood and Haber's Nursing Research in Canada: Methods, Critical Appraisal, and Utilization, 5th ed. Edited by Mina Singh, Lorraine Thirsk, Judith Haber and Geri LoBiondo-Wood. North York, ON: Elsevier Canada, pp. 168–85.
- Toliver, Stephanie R. 2021. *Recovering Black Storytelling in Qualitative Research: Endarkened Storywork*, 1st ed. London: Routledge. Available online: https://doi-org.ezproxy.library.yorku.ca/10.4324/9781003159285 (accessed on 15 September 2022).

Trotz, Alissa. 2007. Red Thread: The politics of hope in Guyana. Race & Class 49: 71–79. [CrossRef]

Tuck, Eve. 2009. Suspending damage: A letter to communities. Harvard Educational Review 79: 409-27. [CrossRef]

- Watson Williams, Carol. 2018. Women's Health Survey 2016: Jamaica: Final Report. Washington, DC: Inter-American Development Bank. [CrossRef]
- Watson Williams, Carol. 2020. Caribbean Experiences with Collecting Data on Violence against Women and Girls. UN Women Caribbean. Available online: https://caribbean.unwomen.org//materials/publications/2020/3/caribbean-experiences-with-collecting-data-on-violence-against-women-and-girls (accessed on 21 July 2021).
- WHO. 2016. Ethical and Safety Recommendations for Intervention Research on Violence against Women: Building on Lessons from the WHO Publication Putting Women First: Ethical and Safety Recommendations for Research on Domestic Violence against Women. Available online: https://apps.who.int/iris/bitstream/handle/10665/251759/9789241510189-eng.pdf (accessed on 12 November 2018).
- Wilkinson, Sue. 1998. Focus groups in feminist research: Power, interaction, and the co-construction of meaning. *Women's Studies International Forum* 21: 111–25. [CrossRef]
- Wright, Caroline Vaile, and Dawn M. Johnson. 2012. Encouraging legal help seeking for victims of intimate partner violence: The therapeutic effects of the civil protection order. *Journal of Traumatic Stress* 25: 675–81. [CrossRef]

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