



## **Participant information sheet and consent**

### **Staff in roles that support healthcare professionals**

We would like you to take part in our research about healthcare professionals working in primary or community care who have experienced domestic abuse/coercive control. You are eligible to take part if you are a member of staff with a role supporting healthcare professionals in primary or community care, for example, a role in HR, in occupational health, or as a line manager. You can take part whether or not you have actually supported staff who have experienced domestic abuse/coercive control.

Alison Gregory and Sandi Dheensa at the University of Bristol, and June Keeling at Keele University are leading this research, with research partners from University of Oxford, Queen Mary University of London, University College London, and University of the West of England.

### **What is the purpose of this research?**

We want to improve services and support for healthcare professionals who have experienced domestic abuse/coercive control.

### **What is domestic abuse/coercive control?**

People often think of domestic abuse as being from one partner towards another, but the term also applies to abuse from other family members, for example from adult children to their parents, from parents to adult children, from adult siblings, and from in-laws.

It involves an abusive person using a pattern of assaults, threats, manipulation, humiliation, intimidation, or other abuse to harm, punish, or frighten the other person.

Coercive control is a particular form, or aspect, of domestic abuse. It is an ongoing pattern of behaviour. An abusive person uses coercive control to limit the other person's freedom. They might isolate them from support, exploit them, deprive them of independence, or regulate their everyday behaviour. Coercive control can create a sense of fear that affects all parts of the person's life.

Domestic abuse sometimes involves physical and sexual violence, but not always. It can be psychological, emotional, and/or financial. It also includes 'honour'-based abuse, female genital mutilation (FGM), forced marriage, and online abuse.

Abuse and control can make the person feel they need to change their behaviour to prevent the abusive person from getting angry, putting them down, or hurting them. Some people describe this experience as 'walking on eggshells'.

## **What does participation in this research involve?**

It will involve a survey that asks about your workplace or organisational response to staff affected by domestic abuse/coercive control. We will ask about your workplace domestic abuse policy, if you have one. The survey has free-text questions and 'tick all that apply' type questions. We estimate that reading this information and completing the survey will take up to 20 minutes, depending on how much detail you give in your free-text answers. You can take a break from the survey by clicking 'Save & Return Later' at the bottom of the screen. On-screen instructions will tell you how to return to your survey.

At the end of the survey, you can state whether you would like to be interviewed by Alison Gregory or Sandi Dheensa. The interview will involve more in-depth questions about your experiences.

If you do not want to complete this survey, but you would like to be interviewed, please contact Alison or Sandi (contact details are at the end of this section).

## **Do I have to take part?**

No. It is completely up to you whether you take part.

What are the possible disadvantages and risks of taking part? You may find it difficult or upsetting to answer these questions, but you can skip questions you feel uncomfortable answering. You can take a break by clicking 'Save & Return Later'. We provide details of support agencies at the start and end of the survey if you feel you, or someone else, would like support.

Please note, we are not asking the survey questions to test your knowledge or to audit your practice, but to understand more about what responses to domestic abuse/coercive control are available in workplaces.

## **What are the possible benefits of taking part?**

Your participation may help us to develop support for healthcare professionals and to ensure that any support is shaped by the experiences of people who might support staff affected by domestic abuse/coercive control.

## **Will my participation in this study be kept confidential?**

This study is completely independent of the NHS and other bodies such as healthcare regulators, unions, and Royal Colleges. Your involvement will remain confidential. The only exception would be if you share your name and contact details and you disclose information that suggests a serious risk of safety to any person including yourself, or risk to a child. In these cases, the University of Bristol researchers (Alison Gregory or Sandi Dheensa) will share information with relevant agencies. They would discuss this sharing with you first, if possible. Please do not tell us any names or identifying information about the staff you have supported, in the survey.

## What will happen to my data?

The REDCap survey web application is General Data Protection Regulation (GDPR)-compliant and secure. We will download survey data to our study folder, in a secure drive on University of Bristol's servers. Only the University of Bristol researchers (Alison Gregory and Sandi Dheensa) have access to the study folder.

We will also store the data in University of Bristol's Research Data Storage Facility during the study and for a minimum of 20 years afterwards. The data will then be destroyed. Only the lead researchers (Alison, Sandi, and June Keeling) will have access to this facility.

We will delete all survey data from REDCap at the end of the research period.

The legal basis we are applying to process your personal data is that 'processing is necessary for the performance of a task carried out in the public interest' (Article 6(1)(e)).

## What will happen to the results of the research?

We will write research papers and share the findings at events and meetings. We will not present anyone's individual survey responses: instead, we will pool together everyone's responses as percentages. We may present quotations from your free-text answers but will remove any specific details that could reveal your identity. We may use data in a report to our funder. We may also use the data to answer related questions for related studies.

If you would like a summary of the research findings, please check our study's webpage: <https://www.bristol.ac.uk/primaryhealthcare/researchthemes/pressure-study/>

## Will you share my information with anyone?

We will combine all the responses to this survey into an anonymised dataset showing the overall findings, and share the dataset through the University of Bristol's data repository, data.bris. Other researchers would be able to request access to the data. Your individual responses would not be shared. You can choose whether to contribute your survey data to this dataset on a later page of the survey.

## What if I take part and then want to withdraw my data?

You are free to withdraw your data from the research, without reason or consequence, before we conduct our final data analysis. Whether you completed all the survey questions, or whether you clicked 'Save & Return Later', please contact Alison Gregory or Sandi Dheensa if you wish to withdraw. We will then permanently delete your survey response.

If you wish to withdraw your data after we have begun our final analysis, we will use the anonymised data we have collected up to that point (i.e., in reporting percentages in reports) but not your free-text responses.

Please note, to withdraw your data, we would need a way to identify your survey (for example, by your name if you stated an interest in a follow-up interview, or by you telling us one of your free-text answers).

## Has anyone checked that the study is well-designed and ethical?

University of Bristol's Faculty Ethics Committee has assessed whether the study protects your safety, rights, well-being, and dignity and has approved the study.

## Who has funded the study?

The National Institute of Health and Care Research School for Primary Care Research has funded this study.

## What if there is a problem?

If you have concerns, please contact Alison Gregory or Sandi Dheensa. If you do not wish to speak to the researchers directly, or if you want to make a complaint, please contact Professor Gene Feder (0117 455 5897, [gene.feder@bristol.ac.uk](mailto:gene.feder@bristol.ac.uk)). You may contact University of Bristol's Research Governance Team ([research-governance@bristol.ac.uk](mailto:research-governance@bristol.ac.uk)) as an independent contact. University of Bristol also holds insurance policies that apply to this study.

## What if I have accessibility needs?

If you need this survey in a different format or support completing it, please contact Alison Gregory or Sandi Dheensa.

## Contacts for further information

Dr Alison Gregory [alison.gregory@bristol.ac.uk](mailto:alison.gregory@bristol.ac.uk) 07874 700 852 / 0117 456 0133

Dr Sandi Dheensa [sandi.dheensa@bristol.ac.uk](mailto:sandi.dheensa@bristol.ac.uk) 07812 397 705 / 0117 455 4514

## Consent

- I confirm that I have read and understood all the information presented on the information pages, and understand that completing this online survey means that I consent to participate in this research study.
- [OPTIONAL] I opt in to have my anonymous survey data made available to other researchers through data.bris.

If you choose to opt in, we will remove anything that could identify you from your free-text responses. The dataset would be shared and treated as 'controlled data', which has the strictest access restrictions: only legitimate researchers can request access and requests would be referred to a Data Access Committee for approval.