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Cover page (not anonymised)

Title:

Exploring the experiences of domestic abuse survivors working in the field of domestic abuse

support: Recovery or Re-victimisation Revisited?

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Abstract:

Women's domestic abuse support services have developed over the past decades with the

inclusion of women surviving abuse as practitioners themselves (Mullender and Hague,

2001; Slattery and Goodman, 2009; Bemiller and Williams, 2011). This group of women,

'survivor support workers,' or 'peer support/mentors,' have rarely been given the opportunity

to articulate what it is that they are gaining personally and the impact in undertaking this

emotionally challenging work. This small-scale study considers the voice of women

survivors working in the field of domestic abuse support work, affording them the

opportunity to explore the benefits and the costs to them as survivors of domestic abuse when

working in this emotionally challenging practice area. Twelve women 'survivor-support

workers' from five distinct English organisations took part in this research. Qualitative

interviews were then analysed thematically within a feminist paradigm. Findings indicate that

there are both highly positive aspects for survivors of abuse working in the domestic abuse

sector, and equally, there are areas of risk where revictimization and vicarious trauma could

occur.

Key words: domestic abuse; survivor; peer support; revictimization; women

Word count: 6990

Exploring the experiences of domestic abuse survivors working in the field of domestic abuse support: Assisting recovery or re-victimization revisited?

Women's domestic abuse support services have developed over the past decades with the inclusion of women surviving abuse as practitioners themselves (Mullender and Hague, 2001; Slattery and Goodman, 2009; Bemiller and Williams, 2011). Following a literature review of this area, women 'survivor support workers,' or 'peer support/mentors,' have rarely been given the opportunity to articulate what it is that they are gaining personally and the impact in undertaking this emotionally challenging work. This small-scale study considers the voice of women survivors working in the field of domestic abuse support work, affording them the opportunity to explore the benefits and the costs to them as survivors of domestic abuse when working in this practice area. Twelve women 'survivor-support workers' from five distinct English organisations took part in this research. Qualitative interviews were then analysed thematically within a feminist paradigm. Findings indicate that there are both highly positive aspects for survivors of abuse working in the domestic abuse sector, and equally, there are areas of risk where re-victimization and vicarious trauma could occur.

Key words: domestic abuse; survivor; peer mentor; peer support; re-victimization; women **Key Messages:**

- The benefits to both survivor support work and to the women client can be powerful within the domestic violence support sector. Survivor support workers can gain a sense of self actualisation, esteem and belonging when in working in the domestic abuse support sector
- There can be a risk of re-victimisation to the support worker, particularly where appropriate clinical supervisory support is not provided. However, in using their own lived experience as a source of knowledge, a survivor support worker can enhance her own sense of self-worth, using her past experience positively to add to her own process of recovery and self-actualisation.

Introduction

Domestic abuse organisations and women's groups provide spaces where mutual understanding and shared experiences can help women recover from abusive relationships (Tutty et al, 2017). A commonality in practice since women's organisations started forming in the 1970s onwards is women working as practitioners with lived experience of abuse (Pence, 2001). Survivor practitioners are estimated to constitute in excess of 50% of organisations' staff (Slattery and Goodman, 2009; Bemiller and Williams, 2011). This study considers the experience of women who act as domestic abuse support workers or mentors. That is, a peer worker, someone who has 'walked in the same shoes' as the service user. The term 'survivor' is used rather than the term 'victim' within this article as it is considered by the author as more appropriate when considering those working to assist and to empower other women. This emphasises an active, recovering, and forward looking response to the abuse experienced.

The incorporation of survivors when delivering domestic abuse services provides positive role models demonstrating the ability to survive and to thrive after experiencing abuse. There is a suggestion that the healing ability of the survivor comes from the healer's own experience of being harmed (Sedgwick, 1994). The term used to describe this form of support within psychotherapy is known as the 'Wounded Healer paradigm,' originating 2000 years ago in Greek mythology and Shamanistic traditions (Kirmayer, 2003). This suggests that the potential to support another is generated via the process of self-recovery and that our own experience allow us to appreciate that experienced by others (Jackson, 2001). Some argue that the more the survivor has progressed along her own recovery, the greater the support she can offer to others (Zerubavel and Wright, 2012). Based on their own lived experiences, peer support workers are considered to have a high credibility regarding the empathy afforded to their clients (White, 2000; Jackson, 2001).

The focus of this study was on interviewees' thoughts, feelings and experiences about their career choice and how this had affected them in terms of the positive and negative impact. The questions were responded to in various ways, and the explanations given were personal and individualised. Whilst there are positive aspects to having a shared experience of domestic abuse, there can be negative implications connected with survivors working in the domestic abuse support sector. These may appear as poorly managed over-identification or personal projection issues. There may be an individualised agenda regarding the survivors' own recovery process or service user's preferred personal choices in overcoming and recovering from domestic abuse. These issues themselves are likely to be varied and individual for that survivor-support worker and therefore of interest within research, not least to allow the voice of the survivor to be heard in relation to the vital work she is undertaking in the community to assist other women.

The quality of the relationship between service user and support worker is considered to be the most significant factor in reaching successful outcomes (Ragins. et al, 2000). When looking at these types of role, research indicates that for those actually in the role of support worker, the helping experience enables them to gain a deeper understanding of their own past experience through supporting others positively through their own current difficulties (Philip and Hendry, 2000). Survivor involvement can have a positive impact on the individuals involved by boosting their own growth in confidence and skill development. There is potential to further the goal of recovery through inclusion, developing life skills and enhancing self-esteem. This being vitally important where stripped away through an abusive relationship. Additionally, and importantly it is a way of bringing people together to achieve mutually desirable outcomes. (Clinks, 2013).

Methods and Methodology

The voice of the woman is of primary interest within this study to fully understand the narrative of those women interviewed as support workers (Brannan, 1992: 22). A fundamentally important aspect of undertaking feminist research is doing so with women for women and that it has been grounded in the experiences of women. In doing so, researchers are empowering their involvement as co-producers of knowledge regarding the experiences of women and rectifying a power imbalance of inequality. The emotive nature of enquiry and the complexity of individualised responses lends itself best to a qualitative approach to research. Interview data from 12 respondents was collected from 5 different organisations, including women from both statutory provision and third sector, charitable organisations. Organisations were located in England: one in the North West, two from the Midlands, one from the South East and one based in the South West region. Women's roles varied from volunteer support worker, peer mentor, paid support worker, to the top level of some organisations. Women voluntarily self-selected to be involved in this research through organisational gatekeepers after access to participant information and providing written informed consent. Given the small number of interviewees, the researcher has taken the decision not to identify roles or organisations as this may serve to identify the individual interviewees. Interview participants were predominantly white British in ethnicity, with one Asian and one Black woman interview participant. The women in this study were diverse in terms of age, the mean age of participants being 38 years at the time of data collection.

The in-depth, semi structured interview was used with each participant to consider the depth of the respondents' accounts and experiences. The interviews were tape-recorded, and all women's interviews were identified with a numerical code, maximising the anonymity of the women interviewed. The interview recordings were transcribed, coded and have been analysed thematically, recording patterns within the data and helping to interpret various aspects of the research topic (Braun and Clarke, 2006). This research comes from a feminist paradigm, as the researcher affirms the identity of a feminist writer for the purposes of research undertaken. As such, there is an acknowledgement that the researcher acts as a 'central active ingredient of the research process' (Edwards and Mauthner, 2002), and may influence the outcomes when looking at it from one theoretical perspective. It is acknowledged that as women we all have differing social, experiential and cultural locations, producing different knowledge of our own realities. The researcher in this study was committed to treat the interview participants respectfully, allowing them the time they needed to respond fully. The researcher is considered as an insider when connected with women's peer mentoring activity having founded a women's peer mentoring and support organisation herself. That experience and knowledge was carefully reflected upon to prevent undue influence on the research conducted. It was the researcher's wish to undertake research in a way that was not exploitative, and where each woman was not merely a source of data but considered as an expert in her own experiences and explanation of knowledge and understanding.

This study takes a feminist epistemological position valuing the variety of women's experience when working with other women (Anderson, 2000). A fundamentally important aspect of undertaking feminist research is doing so with women for women and that it has been grounded in the experiences of women. In doing so, researchers are empowering their involvement as co-producers of knowledge regarding the experiences of women and rectifying a power

imbalance of inequality. As such, qualitative research methods are considered essential for this study. Feminist commentators indicate attachment and relationships with others as one of the most significant and distinctive characteristics in the nature of being a woman (Miller, 1976; Jordan et al., 1991); relevant when examining women supporting other women. Interview responses were coded into themes specifically connected to the women's responses to the interview questions. Once participants' views were divided into clearly articulated themes, it became apparent that they correlated closely with the upper range of Maslow's Hierarchy of Human Need: self-actualisation, esteem, and belonging (1954). As Maslow argued, as well as the essential physiological needs to survive, human beings have levels of personal and emotional needs that should be satisfied; a sense of belonging, a connection to others, selfworth, and respect (Maslow, 1954). Being part of a community and to connect with others is important and for women who have had this structure damaged, the need to rebuild confidence and purpose is vital for continued survival and personal recovery (Abrahams, 2010:23). Whilst the universality of Maslow's model is not without critique regarding issues of intersectionality (Bouzenita and Boulanouar, 2016; Gamberel and Cianci, 2003), it is not the first time Maslow's model has been used when writing about domestic abuse. Abrahams does so when considering the overall effects of domestic violence on victims (Abrahams, 2007: 22). Whilst the Maslow model is not from a feminist paradigm, it fitted well in terms of the themes women participants articulated as the key areas of benefit for them in undertaking support work in the domestic violence sector.

The number of women interviewed is relatively small in quantitative terms, so cannot be said to be representative of all women survivor support workers. However, twelve is acceptable in terms of qualitative studies (Marshall & Rossman, 2006). Larger scale research is required to understand more about the diversity of experience in this area and to ensure the recognition and the well-being of survivors who work in this sector.

Research Findings

Positive Aspects of Survivors working in Women Support Organisations

Through the thematic analysis of the data, the positive responses were mapped into key themes, and subsequently interpreted using the highest three sections of Maslow's Hierarchy of Need; Self Actualisation, Esteem and Belonging (Maslow, 1954). The women within this study outlined the benefits of peer support work for them as practitioners. They also discussed what was problematic for them when undertaking these roles specific to being a survivor of domestic abuse.

Maslow's 1st Layer - Self Actualisation

Self-actualisation is considered to be a central level of need connected to creating meaning in life (Masten 2001; Huss and Magos, 2014). Self-Actualisation is interpreted within this study as women being able to use their own lived experience for the benefit of other women, to develop self-identity, a sense of purpose and to become fully functioning as an individual. Thereby creating something that they consider to be positive after the pain of their own lived personal experiences of domestic abuse. This in turn allows women to make some sense of their past experience, to increase their sense of actualisation and to enable themselves as survivors to develop a sense of ongoing purpose.

In some ways you can look back on the abuse and think, well actually, I've used that experience to the good of others and that can sometimes make you at peace with yourself.

Interviewee 5

I suppose it's a silver thread that can be pulled from the trauma of what I went through. I can pull one positive aspect from the experience of abuse and use it for something good, something honourable – helping other women to move from victim to survivor, like I was able to, with the help of other women survivors.

All 12 women interview participants indicated that within their role they were able to create something positive from a past traumatic episode in life, gaining some sense of closure on the period where abuse was experienced and being able to create a meaningful distinction (Thomsen, 2009; Peetz and Wilson, 2014). From this study, assisting other women appears be a powerful mechanism of moving on from painful past experiences. It appears to help survivor support workers make sense of them, and using that experience for the power to do good is positive from a very traumatic past experience. It is helpful to develop meaning from negative life experiences (Kross and Ayduk, 2011:187), and employment in the domestic abuse support field may for some women be the mechanism to achieve this. Abrahams considers the Maslow model when discussing the way women make sense of the abuse experience. After safety and freedom from fear has been established, a sense of belonging is necessary and a connection to part of a community. Domestic abuse can destroy women's personal identity and selfconfidence (Abrahams, 2010:23). The physical, emotional control and psychologically coercive trauma can serve to isolate the women survivor from community (Stark, 2007) or space for action (Kelly et al., 2014). Thereby becoming totally isolated from the mechanism to assist them or to help them leave the controlled life they lead (Madhok et al., 2013).

Working in this area has given me kind of professional standing, I'm taking control back in my life. I feel like I am starting a career where I know so much. I am doing a lot of training too, helping me to become really knowledgeable in an area that can make such a difference. Life or death in some cases.

Interviewee 7

All survivor support workers interviewed for this study had a strong natural empathy and understanding of other women's experiences. They had a desire to use their own personal lived history to offer support and a sense of hope to others. Hope is a powerful aspiration and goal,

and this echoes research by Davis (2002), who found that survivors' 'inner resources are critical to adaptive responses to stressful life events' (p: 1250).

So I've managed to move my life on, so for me it definitely was, I want to be able to say to women, you know, you, you'll get there and if I can do anything I'll help. I was there, I've been there.

Interviewee 4

Women spoke of a sense of 'giving something back,' after they themselves had sought support.

10 of the 12 interview participants articulated a need to help other women,

I just want, I want to save everybody, I know that sounds [pause, shrugs] doesn't it?

Interviewee 5

Interviewee 5 spoke about a desire to use her own experience to minimise the harm to other women and their children. She herself had valued the support afforded to her when making the decision to leave an abusive relationship. She recognised the indecision and fear facing women leaving their homes and really wanted to make a positive, supportive difference to them when they entered refuge. Another woman spoke about the inspiration of another support worker who had helped her during her experience as a victim of domestic abuse. This then motivated her to work in the support sector to create something good from something so awful, and to create a sense of self actualisation.

I had a brilliant support worker and through doing what she was doing, I became, so, what's the word? I wanted to then go on and help other people, if that makes sense? She definitely inspired me from what she showed me, like when I met her I had no confidence, no, and I was like really low on the floor and then like she didn't do stuff for me, she showed me how to kind of do it, so that empowered me to do it and I just thought God, if one person can do that for someone else, could you imagine if people go on to that for other people, how much inspired other people will become from that. I became really passionate about this.

Interviewee 3

There appeared to be a high sense of the significance of their professional support role and an

emphasis of the importance of, 'getting it right' and of being 'passionate', a word that was

repeated by many of the interviewees.

I'm really, really passionate about my job. I really love working with them [women] to

get them to where they need to be.

Interviewee 3

I like to make a difference. I know I'm making a difference.

Interviewee 5

A way of coping with supporting victims of abuse is to recognise that one plays an important

part in the recovery and healing processes of a service user, and to know that you are helping

both the individual and the wider community is helpful (Schauben and Frazier, 1995). Whilst

these positive aspects of work in the field of domestic abuse support work cannot be said to be

exclusive to support workers who have been survivors, it does seem to be a recurring theme

for women within this piece of research.

The domestic abuse agenda's probably taken over my life a bit, because I am so passionate about getting better services, best quality services possible. I don't think there's anything not good enough, you know, it needs to be the best, because we only get one shot sometimes and that one shot needs to make a difference, even if it's somebody just phoning up for one advice, that advice needs to be tiptop and it needs to be the right advice so, it, it's taken over my life a little bit because I'm so passionate about it.

Interviewee 5

Maslow's 2nd Layer - Esteem

In terms of this study, esteem is understood as women being able to develop a sense of

confidence, self-worth and feeling of empowerment. This is arguably more important for

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women surviving domestic abuse since the complex and repeated nature of abuse diminishes all of these areas of being, decimating esteem whereby recovery can be lengthy and nonlinear.

I had very low self-esteem, very low confidence, you know, just looked at the floor, didn't look up. One of my friends said that I was like a little mouse and every time, I cried. I still haven't got loads of confidence, but I can actually stand up in front of people I never thought I'd be able to do that and actually talk to people, you know, and I love talking anyway.

Interviewee 4

All women interviewed for this research spoke about loss as a result of their own experiences of domestic abuse, whether that was loss of home, employment, financial stability and belongings, to the more profound losses of their sense of worth, self-confidence and well-being. Most considered the multiple losses for both themselves and for their children.

When you've gone through domestic abuse, everything's kind of taken away from you. You become kind of like, I call it a shell of myself, or what I used to be. Actually, you know, you can get back to that person, to who you were and to be helped to be moved along that way, not only to that person, become someone better as well. To show to other women and be able to help them along that route was really good. I mean the kind of thing is that when you're going through DV I see it that you, you just accept crumbs, so why have the crumbs when you can have the whole loaf?

Interviewee 3

Interviewee 1 still felt that as a survivor of domestic abuse she was still considered as lesser than a woman who had not experienced abuse, certainly in terms of finding employment and in developing a career structure.

Maslow's 3rd Layer - Belonging

Belonging is understood as women being able to enjoy an environment of feeling comfortable, at ease, of both understanding and of knowledge. One way of achieving a sense of belonging may be for women survivors to become peer supporters to other women. Peer mentoring, or peer support, was initially conceptualised and explored within the field of mental health within a human rights movement. It is also well known in substance addiction recovery or assisting desistance within criminal justice arenas. The rationale of peer support being that if the mentor

or support worker has overcome a similar struggle themselves, they have the most impact as they know what recovery or change involves (Jackson, 2001; Mead et al., 2001). This approach is often considered to have a far greater credibility and authenticity, with deeper empathetic connections to those they seek to support (White, 2000). It is clear from interviewing survivor support workers within this study that all 12 felt that there is strength from having experienced domestic abuse themselves, and terms such as 'authenticity' and 'authority' are used by interviewees to differentiate between support workers without personal lived histories of domestic abuse. One woman spoke about the 'essence' of what she knows being in her heart and head based on her own experience of abuse. She described this as being like 'gold dust' in terms of knowledge and ability to assist other women. She felt that this was something no one could learn from a book or from a training day, it was something learnt as part of the journey of being a survivor (Interviewee 1). Women within this study felt that their own survival was beneficial as an internal reference point for understanding the pain and experience of another, that this was something unique to the position of survivor (Zerubavel and O'Dougherty Wright, 2012). Another woman described advantages of being a survivor in terms of ability to engage with women,

The advantages of being an ex-victim of domestic abuse gave me a deeper understanding or the women that I was talking to, the women would see me on the same level as one of them, not that I talked about my own experience because I didn't, but they saw me as somebody they could actually talk to and they would tell me a lot more than they'd tell support workers. I knew the women that were talking to me; I knew what they'd been through themselves, you know, and having that understanding, it gave me, it gives you a lot of patience with victims as well.

Interviewee 5

The authenticity women spoke about appeared to be important to them in terms of fully understanding the nature of domestic abuse and the experience of women they support. They felt that without that shared understanding, there was something lacking in terms of the capacity of support offered by the non-survivor support workers.

Women are very intuitive, they can tell when somebody really gets it and I think by going through domestic abuse and being able to really know what they've gone through, see their, like their internal battles they're having with themselves, they can tell. Within my experience of working here, where we've had younger women

coming through who haven't experienced domestic abuse, it all, isn't always a good fit with all the women, it's like they can tell, you know.

Interviewee 5

This notion of authenticity seems connected with a sense of empowerment, of knowing something through experiencing it. There was a strong sense from all interview participants that this knowledge and understanding can only be understood by personal experience.

I understand the issues the women are facing because I have faced – and overcome such issues myself. This gives me belief that it is possible to overcome adverse experiences eventually (with support), and gives me insight into the nuances of abusive relationships that I think can't be learnt from a book, or from a training session at work.

Interviewee 9

As power is arguably something a victim of domestic abuse does not have, it may be that survivor support workers see for themselves the power that peer mentoring/support has, and the authenticity of support offered.

Negative Aspects of Survivors working in Women Support Organisations

There are issues connected with the negative aspects of survivors working in women support organisations (Slattery and Goodman, 2009). As with the positive aspects, the responses of the interview participant were coded into themes and are shown below.

Triggering, Vicarious Trauma and Burnout

It's not buried, it never will be buried, it will never be forgotten.

Interviewee 1

The comment above was made by one interviewee whilst recollecting her own experiences of being the victim of an abusive ex-partner. She was clear in how this remains an issue for her personally. She found it difficult not to recall events in her own lived experience when working with women service users, especially if their narratives contained similarities to those of her own experience. Vicarious trauma is a potential risk for all support workers of victims of domestic abuse, so too burnout or countertransference (Iliffe and Steed, 2000), and is the direct result of support workers hearing the emotionally shocking lived experiences of their service users (Shauben and Frazier, 1995). Feelings can include intense helplessness, despair, over identification, vulnerability and fear. These emotional responses can impact negatively on the core beliefs of support workers, on their own relationships and on their worldview in general. This can then lead to disruptions to levels of trust, safety and personal agency (Morran, 2008:139). Responses by women professionals within research undertaken by Morran (2008) found that they had become 'hyper aware' about issues of power, control and abuse, becoming watchful for abuse or disrespect towards women in everyday life. This further saturation in the domestic abuse field, over and above the survivors' own lived experience of abuse may potentially cause long lasting harm to intimate relationships and on the woman support workers view of life.

I know when I first started in this role; I found it really difficult to separate my life and their lives. I've related so much to it all I was taking it home with me and then going through pictures and remembering a lot of stuff and I had to very quickly I managed to actually learn to go, okay, that's work, this is home.

Interviewee 4

One woman spoke about the lack of supervisory support to maintain emotional safety. This lack of clinical or supervisory support for most interviewees was a significant critique of the organisations they worked for.

You don't want to relive anything that you can't handle, and you don't want your client to know that that's affected you. We used to have clinical supervision, we don't now, just group supervision.

Interviewee 3

I've raised this here before actually, but there's no one for us to talk to, we just talk as workers and I think Head Office obviously will come down and speak to us, but there's no one for us to talk about that to. No one.

Interviewee 4

Survivors of abuse working in support work can be supported in a variety of ways, including being part of a professional, reflective team. Also, by participating in regular peer consultation groups, in continuing education opportunities for staff relevant to practice and when engaging in ongoing personal counselling. It can be helpful when the employing organisation creates an environment where thoughtful discussion and self-disclosures during supervision are encouraged and that any issues that occur in terms of re-victimization, triggered memories or difficulties are supported in a positive way (Cushway, 1996). Eleven respondents within this study did not feel that they had adequate supervisory or clinical support, but one organisation appeared to have robust processes in terms of supervisory staff care,

We check in with our own peer support mentors weekly and also whenever we feel stress or emotionally drained. I get more support here than I ever had in statutory roles in the community. That supervision was just about tick boxes, this supervision is about me. My Manager says I can't support other women if I don't look after myself.

Interviewee 7

Being able to de-brief and reflect on practice after a particularly difficult meeting with clients was considered the most important strategy in the research conducted by Iliffe and Steed (2000: 407). Identifying the resilience and strengths of women clients, as well as reaffirming boundaries was also found to be helpful in minimizing the potential for vicarious trauma or burnout (ibid.).

Another woman interviewed in this study discussed how difficult support work had been for her after domestic abuse. She felt that over time she had developed resilience to work in that area. Yet conversely, she discussed that the smallest of occurrences still triggered a flashback for her,

When I first started I had to keep on reminding myself that these things weren't happening to me anymore, because I was waking up in the middle of the night, but that passed quite quickly, and every now and again something touches me that can actually bring the past back to me and reminds me of my own past. It might be somebody's wearing the same perfume as I wore when I was, when it happened to me. Sometimes things touch you and you're only human.

Interviewee 5

Self-blame, frustration and failure to help women

From the participant interviews, a theme emerged connected with self-blame and failure to 'rescue' women service users from both their situation and from their own decisions and choices.

I think that's where at the beginning when I first started was probably a drawback because you wanted so much to prevent them and I think again, when you know they've gone back, I think my first failure when I went back, I went, oh, what I have I done wrong? You blame yourself.

Interviewee 2

This can be interpreted as being the fine line between really caring about the role of assisting and supporting women victims, and taking responsibility for any subsequent harm that the women faces,

I just want, I want to save everybody, I know that sounds...[pause, shrugs] doesn't it?

Interviewee 4

These comments and the wider discussion around it indicated that the support worker was apportioning some personal responsibility for the actions of the woman she was supporting. This resulted in self-blame, personal failure and a desire to 'rescue' the service user from the decisions she was making for herself. Self-blame has been considered as being significantly important following experience of domestic abuse (Weaver and Clum, 1995; Barnett, Martinez, and Keyson, 1996; Reich et al., 2015). Defined as being the process of attributing the cause of an awful event to oneself or taking personal responsibility for the actions of another. Support workers cannot ensure clients make choices that they feel are safe or healthy. The client will make her own informed choices based on what she feels will work for her at that time, including potentially returning to the abuser. This theme may well occur for support workers who had not experienced domestic abuse within their lives. However, given the issues of loss of power and of perceptions of failure associated with domestic abuse victimisation, it may resonate more strongly, or have more significance when considering the experiences of survivor support workers. Survivor support workers may over connect with their clients and struggle to maintain a boundary in terms of responsibility and as says this could go on to create 'heartache.' (Wood, 2017: 319).

Too close to own experience of victimisation

The time between victimization and support work varied enormously within the cohort of this research study, from 2 years to 20 years, but it was generally recognised to be a disadvantage to come into support work too near to a woman's own experience of abuse. It is widely recognised that a period of recovery is essential to sufficiently prevent survivor support workers from actually impairing the efficacy of the support offered (Gelso and Hayes, 2007).

However, that period of space and recovery process will differ from woman to woman as no two experiences or the reactions to experience will be the same.

Sometimes I just have enough of domestic abuse, I don't want to hear about it, read about it or meet another person going through it. Sometimes I wish I worked with animals or nice things rather than with distress, horror and pain.

Interviewee 8

Each interview participant within this study advised that there was an emotional reaction to supporting clients and that supportive supervision processes are vital. However, within this study, clinical support supervision was mostly absent for these practitioners.

Discussion

This small-scale study considered the voice of women survivor support workers, or peer mentors, working in the field of domestic abuse support work. Interview participants have been invited to articulate both the benefits and difficulties of such work for them personally given their own experience of domestic abuse. In its broadest sense, the study has asked if support work serves to act as a reinforcement of recovery or could it be considered as re-victimising process? The 12 participants for this study entered their employment sector in domestic violence support work following experiencing abuse as adults themselves. The findings from this study indicate that the experience of working as survivor support workers/peer mentors impacts on women survivors in both positive and negative ways. The responses revealed distinctly personal views, yet there was a significant consensus in terms of key themes. When considering the personal benefits women survivor support workers expressed in undertaking their professional role, the responses coincided with the upper three tiers of Maslow's Hierarchy of Need: self-actualisation, esteem and belonging. Overwhelmingly, a key benefit

for interviewees was the notion of self-actualisation. For women survivors who chose to work in domestic abuse support work, this vocation could be the mechanism for many to achieve self-actualisation. In addition to this, women spoke of the rise in their sense of self-esteem and feelings of a sense of belonging. In being able to work as a professional in domestic abuse support work, this enabled them to rebuild their sense of confidence and created a sense of empowerment by enabling them to create a professional life. Women interview participants identified an environment of understanding, a sense of feeling comfortable, and to have had a sense of unique connection with service users. The notion of having 'walked in the same shoes', enabled survivor support workers to feel able to provide an authenticity of support to other women experiencing abuse and violence.

Conversely, there were personal costs to being involved in support work as a survivor. The main issue appeared to be triggering painful memories or feelings, irrespective of time passing. Some women survivors found it difficult not to recall events in their own lived experience when working with women service users, especially if their personal accounts resonated with their own experiences. Vicarious trauma is a potential risk for all support workers of victims of domestic abuse, so too burnout or countertransference (Iliffe and Steed, 2000). This research does not assess whether this is a general issue when working in domestic abuse support work, or if it is more acute for women who have lived experiences themselves. There are significant issues surrounding clinical or supervisory support that are essential to keep survivor practitioners safe whilst working in distressing or potentially re-victimising environments. Ethically, clinical support to all staff working within the domestic and sexual abuse support sector should be provided, but particularly so where support workers have their own lived histories of abuse. Given the input survivor support workers provide in the sector, it is absolutely critical that agencies do more to help this highly motivated staff group to work safely

in their roles (Wood, 2017). For 11 out of 12 women interview participants' supportive supervision was not provided adequately in their opinion and according to their needs. The further saturation of hearing about domestic abuse, vicariously experiencing the distress of the service users over and above the survivor's own lived experience is likely to be damaging to survivor support workers without such clinical support.

Conclusion

This research has implications for practice and research beyond this study. The benefits to both women survivor support workers and women survivors when working together to reinforce recovery can be powerful. However, as a survivor of domestic abuse, individual lived experiences often stay with a woman irrespective of time passing between the experience and the professional role undertaken. There can be a risk of re-victimisation as service users' own traumatic stories and circumstances have an impact on the support worker, particularly where appropriate clinical supervisory support is not provided. However, as these interview participants articulate, in being able to use their own lived experience positively, a survivor can reinforce her own sense of worth, bringing meaning to the abuse previous experienced and in effect, adding to the process of recovery and self-actualisation.

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