



Interview Guide for the Indiana Move to End Violence Cohort

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Interview Resources/Information

Interview Guide Format

Interviewer Notes: Sections labeled blue text are directions for the interviewer. Please do not say these phrases or sentences out loud to the interviewee.

Interview Narrative/Question: Sections labeled with purple text are directions/narrative/questions for the interviewee. Each of these sections should be read aloud to the interviewee.

Sometimes interviewee might ask for clarification about a question. Ways that you can clarify the questions are indicated with the word: Clarifier

An interviewee's answer might not mention some of the specific issues we would like them to address. In such cases, please follow up by asking the question that is indicated by the phrase: Specific Probe

Sample Probes to Encourage More Detail

If an interviewee doesn't give an in-depth response to a question, you can probe for more detail. We are particularly interested in understanding how experiences of abuse affect the whole family, so we encourage you to use probes to collect more information when respondents mention their children and/or other family members. However, probes wouldn't be appropriate if the interviewee seems to be uncomfortable and you think continuing to discuss that topic would be hurtful to them.

General probes:

- Would you tell me more about that?
- Would you talk about that a bit further?
- Would you speak some more about that?
- Ah, I see. I'd like to hear more about that.
- Would you provide a bit more detail about that?
- Thank you for sharing that. I'm interested in hearing more about that.
- Uh-huh.
- Ah.
- *{Pause and wait for the interviewee to fill the silence}*

Example probes for particular questions:

| | |
|--------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Question 1: | Thank you for sharing that. What else might safety look like in your life? |
| Question 2a: | Thank you for sharing that. What else in your life helps you feel safe? |
| Question 2b: | Thank you for sharing that. What else would make you feel safe? |
| Question 3: | Thank you for sharing that. What else could organizations in your community do? |
| Question 4: | Thank you for sharing that. What else about your community could be changed to help you have a more satisfying and happy life? |
| Question 5: | Thank you for sharing that. What other resources would you design? |
| Question 6: | Thank you for sharing that. What else about them was helpful? |
| Question 6c: | <i>Say something like "I'm sorry to hear that..." then:</i> Were there other things about them that were unhelpful? |
| Question 7: | Thank you for sharing that. What other reasons made them not feel like a good resource for you? |
| Question 8: | Thank you for sharing that. What other additional assistance would have been helpful to you? Thank you for sharing that. Do you have any other advice about assistance that would have been helpful for your children? |
| Question 9a: | <i>Say something kind to them, then:</i> Have there been other things you felt you needed to change or hide? |

Interview Introduction

Interviewer Notes: Introduce yourselves as you naturally would. Spend some time making small talk as a way to build rapport with the interviewee. After the introductions and small talk, read the following statement:

Interview Narrative/Question: Thank you very much for coming here today to share your thoughts and experiences with us. We're part of a group of service providers in Indiana who want to make domestic violence services better. Our group is talking with individuals from across Indiana who have experienced abuse in order to find out how we can provide better services and resources. In our discussion today, there are no right or wrong answers to any of these questions. You are the expert, and we are here to learn from you.

When we share your answers with our group and with other people who are interested in our work, we won't be using your name. In that way, we'll do our best to keep your answers confidential. However, it is possible that even though we won't be using your name, someone might be able to link your identity to your answers if they are familiar with your story, or if the background information you choose to provide later on in our interview is unique enough to allow them to connect your answers back to you. In addition, we won't be able to keep confidential anything you report to us about intending to harm yourself or others, or if you indicate that one or more children may have been abused or neglected or are continuing to be abused or neglected. Do you have any questions about that?

Interview Narrative/Question: In our discussion today with you, and in discussions with other people across Indiana who have experienced abuse, we seek to focus on solutions to the problem of violence in our community. But we recognize that in thinking about solutions, we're also asking you to reflect on your past experiences of violence. It's possible that this reflection and our conversation today could trigger unexpected emotions, or emotions you have not felt in a long time. With that, we want you to know that we can pause, if you need to take a break, we can skip any questions that you would prefer not to answer, and we can stop the interview if the conversation isn't working for you.

Interview Narrative/Question: *The following section can be said in your own words, or you can say this section as written:* {Name of note taker} and I are working together today because we want to make sure we're capturing the experiences and expertise you share with us during our conversation. It can be difficult to be fully present and ask questions and take notes at the same time, so if it's okay with you, our plan is for me to be the one to ask you questions and {name of note taker} will be taking notes about the conversation. At the conclusion of the interview you are welcome to review the notes to make sure we have it right. How does that sound to you?

Interview Narrative/Question: Because taking notes during our conversation may not allow us to capture the exact words that you say, another way that we could potentially document today's interview is to make an audio recording our conversation. Recording the conversation is completely optional. Having an audio recording of the interview could allow us to listen to the conversation again later and improve the notes that we take during the interview. However, we want you to know that taking notes during today's interview without audio recording the conversation can also give us valuable information. Therefore, you are welcome to participate in today's interview with or without the conversation being audio recorded. Your decision about whether we audio record our conversation or not does not impact how we see you or what we think about you. Which would you be most comfortable with: having our interview audio recorded or not audio recorded?

If the interviewee indicates the interview **can** be audio recorded, say:

Interview Narrative/Question: Okay, before we start audio recording today, we'd like to go through a form with you that gives you the opportunity to tell us how we can use the audio recording and the written elements that are made from the recording.

Interviewer(s) Notes: Explain that you each have a copy of the form and that you'll read the form out loud and they can sign their copy of the form if they agree with the statements as they are read.

Hand the interviewee their copy of the **Audio Recording and Use of Written Material Agreement Form (Form A)**.

If the interviewee indicates that the interview **cannot** be audio recorded, say:

Interview Narrative/Question: Okay, before we start the interview, we'd like to go through a form that gives you the opportunity to tell us how we can use the notes that we take during today's interview.

Interviewer(s) Notes: Explain that you each have a copy of the form and that you'll read the form out loud and they can sign their copy of the form if they agree with the statements as they are read.

Hand the interviewee their copy of the **Use of Written Material Agreement Form (Form B)**.

Interviewer(s) Notes: After completing one of the two forms, ask: Do you have any questions about the interview before we begin?

Part 1 – Safety

Interview Narrative/Question: The first part of our interview today will focus on learning from you about what safety means to you and what can help support your safety. We are asking these questions because we are interested in helping people who have experienced abuse be safe in the ways that matter most to them.

1. If you could paint a picture of a safe life, what would that look like? *Clarifier (if needed):* In this question, we're interested in how you define safety. What does safety mean to you?
2. Do you currently feel safe?
 - 2a. *If the interviewee's answer is "Yes" then ask:* What things help you feel safe?
 - 2b. *If the interviewee's answer is "No" then ask:* What would make you feel safe?
3. What things could community organizations do to support your safety and needs?
4. Thank you for sharing your perspective on safety. In addition to helping people who have experienced abuse be safe in the ways that matter most to them, we also want to support them in having a satisfying and happy life. That's why we're asking this next question: What changes within your local community would help you have a **more** satisfying and happy life?

Part 2 – Designing Resources

Interview Narrative/Question: Thank you for sharing your perspectives about safety, satisfaction, and happiness with me. The next section of our interview will focus on your perspective about how best to help people who have experienced abuse.

5. If you were designing resources for people who have experienced abuse, what would those resources be or look like? By “resources” we mean anything that would help a person who had experienced abuse and/or their family. For instance, these resources might be things that help someone be safe or these resources might be things that would help someone have satisfying, happy lives, or these resources might be other things that you think someone would need as they deal with the abuse they’ve experienced and plan for their future.

Specific Probe: If the interviewee hasn’t addressed resources for children, then ask: What would those resources be or look like for the children of someone who had experienced abuse?

Specific Probe: If the interviewee hasn’t addressed resources for the perpetrator, then ask: What would those resources be or look like for the person who committed the abuse in the relationship?

Part 3 – Connectedness

Interview Narrative/Question: Thank you for your insights into what would be helpful in supporting people who have been in an abusive relationship. In the next section of our interview, we’ll transition into focusing on your experiences of seeking out support related to the abuse you experienced. We’re asking these questions because we want to identify ways that we could better prepare the community to be supportive of people who have experienced abuse.

6. Who, if anyone, did you seek out for support related to the abuse you experienced in your relationship?

6a. If the interviewee *did not* seek out supports then skip to question 7.

6b. If the interviewee *did* seek out supports then ask: What about them, if anything, was helpful?

6c. If the interviewee *did* seek out supports then ask: What about them, if anything, was unhelpful?

7. Were there people or organizations you would have preferred to seek out for support, but for some reason they did not feel like a good resource for you?

7a. Why did they not feel like a good resource for you?

Interviewer(s) Notes: Try to find out whether those people were friends, family members, etc. If the interviewee hasn’t mentioned people, ask them about people. If the interviewee hasn’t mentioned organizations, ask about organizations.

Part 4 – Unmet Needs

Interviewer(s) Notes: In your own words, thank the interviewee for answering the previous section of the interview.

Interview Narrative/Question: We're asking this next question because we want to identify other supports we could create or make more available when people who have experienced abuse reach out to us or other organizations in the community.

8. What needs were unmet in your experience?

9. Have you ever felt you needed to change or hide something about yourself in order to get the help you wanted from an organization or a service provider?

Specific probe: If the interviewee says "yes" but does not give examples, ask: What were some of those things you felt you needed to change or hide about yourself?

9a. If the interviewee says "yes" or if they list specific things that they had to change or hide, ask: What was it about the organization or service provider that made you feel you had to change or hide this about yourself?

5 – Community Response and Consequences

Interview Narrative/Question: Thank you for sharing information about your experiences in seeking support. Now we want to shift to focus on the community's response to abuse. By community's response, we mean accountability from agencies like law enforcement and the courts for the person who used abuse, but also the response from the other significant people in your life like your family, friends, workplace, faith community or school, etc.

10. What would you like for me to know about the response the person who committed the abuse in the relationship experienced?

Specific Probe: What type of response did you hope for?

Specific Probe: What type of response did you get?

Specific Probe: How did the response affect you?

11. If you could paint a picture of responses for people who use abuse, what would that look like?

Part 6 – Next Steps

Interview Narrative/Question: We've come to the last official interview question we have today, before we move onto the final section where we'll ask you about some of your background information and discuss some optional ways you could continue to be involved in this project. This last question is:

12. What else would you like me to know about your experience or about how Indiana can better serve people who have experienced abuse?

Interviewer(s) Notes: If the interview was being recorded, ***turn off the audio recording at this time.*** The sections about demographic information and staying involved in the project do not need to be recorded

Part 7- Background Information

Interview Narrative/Question: Now that we're done with the main conversational part of our interview, we'd like to give you the opportunity to tell us some more about your background, if you feel comfortable giving us this information. For

instance, we have a form where you can tell us about your age, housing situation, military history, sexual orientation, gender, race or ethnicity, struggles with addictions, etc.

We're interested in this information because your answers to these questions can help us to know whether we are getting a response from a diverse range of people in Indiana who have experienced abuse. We want to know that because we are committed to creating supports that meet the needs of all of our community members—across our similarities and our differences. This section is completely optional.

Which would you be most comfortable with: sharing this information with us or not sharing this information with us?

If the interviewee **wants** to provide their background information:



Interview Narrative/Question: The background information form we have asks questions about you when you were experiencing abuse and also asks questions about you now.

The form has questions on the front and the back. Would you like me to go through the form out loud with you or would you prefer to fill out the form on your own?

Interviewer(s) Notes: Either hand the interviewee the two-sided “**Attachment 1: Background Information Form**” or **read the form out loud.**

If the interviewee **does not want** to provide their background information:



Interviewer(s) Notes: Since the interviewee has not indicated they are okay with us collecting this information, do not record any information about their demographics on the Background Information Form after the interview is completed.

Thank them again for their participation and move on to section 8.

Part 8- Participation Information

Interviewer(s) Notes: If the interviewee completed the Background Information form: In your own words, thank the interviewee for completing the form.

Interview Narrative/Question: We also want you to know that we view you as a partner in our efforts to make domestic violence services better for people in Indiana who have experienced abuse.

We welcome your continued involvement with us in this process. Some ways you could continue to be involved include contacting our group with questions you have about our work or contacting us with ideas you have about how to better serve people who have experienced abuse.

Would you like to have a list of contact information for me and {insert name of notetaker} and for two of my colleagues at the Indiana Coalition Against Domestic Violence? If they would like to have the contact information, hands the interviewee the “Attachment 2: Contact Information Form”

Interviewer(s) Notes: In your own words, let them know that the list does have “Indiana Coalition Against Domestic Violence” written on it. You should discuss with them whether it’s safe for them to take such a list with them.

Interview Narrative/Question: We also have another form here that describes a couple of other ways you could continue to be involved with this project. Would you like me to go through the form out loud with you or would you prefer to fill out the form on your own?

Interviewer(s) Notes: Either hand the interviewee the “Attachment 3: Participation Information Form” or read the form out loud. If the interviewee provides their contact information for any of the items on this form, please verify with the interviewee that the contact methods they have provided are safe methods to reach them.

Part 9- Final Participation Check-in and Conclusion

Interview Narrative/Question: Before we leave today, I want to check in with you about the permissions that you gave us on the Agreement form that you completed at the start of our interview today.

Given the specific things that we talked about today, do you want to make any changes to the permissions you gave us about {if the session was recorded: who can listen to today’s recording or} how we can use the written elements that we generate based on our notes {if the session was recorded: and the recording}?

{Offer to read the form and their decisions to them again if they’d like}

If the interviewee wants to make changes, please have them initial the changes they want to make on the form.

Interviewer(s) Notes: In your own words, thank the interviewee for talking with you. You may want to discuss some self-care strategies and offer any relevant resources. Make natural small talk as you wrap up your time together.

Audio Recording and Use of Written Material Agreement (Form A)

Interviewee Copy

If you would like us to create an audio recording of today's interview, we would do our best to make sure that the recording stays secure. For instance, we would upload the audio recording files to a secure electronic location and then the audio recording would be deleted from the digital recording device. Additionally, any names that you use during the conversation will be redacted (permanently erased) from the recording. However, it is important to understand that creating an audio recording of your voice increases the risk of someone being able to link your answers back to you if somehow the recording device is lost or stolen, or if the files are accidentally uploaded to an unintended location, or if someone hacks the server on which the files are stored.

Please read the following statements. If you agree to a statement, please sign your name. You have the option of agreeing to none of the statements, some of the statements, or all of the statements. You are welcome to participate in today's interview regardless of whether you agree to these statements or not.

- **I give my permission for today's interview to be audio recorded.**

Signature

Date

- **I give my permission for the following people to listen to the audio recording of today's conversation in order to add detail to the notes that will be taken during today's interview:**

The interviewer and notetaker who were present for the interview

One or more other members of Indiana's Move to End Violence (a group of service providers in Indiana who want to make domestic violence services better) who are responsible for reviewing the conversations from my interview and the interviews of other people in Indiana who have experienced abuse.

Signature

Date

- **I give my permission for staff members of a professional transcription service to listen to the audio recording and to type the conversation into a readable format.**

Signature

Date

- **I give my permission for specific quotes and summaries of what I say during today’s conversation to be shared with others in the following ways:**

- At Indiana Move to End Violence meetings related to this project
- In presentations based upon the results of this project that are given to the domestic violence service community, to other service providers, to government agencies, or to the general public
- In printed or electronic (online) documents that describe the results of this project to the domestic violence service community, other service providers, government agencies, or the general public

Signature

Date

- **I understand that the audio recording files will be maintained until the people I listed on Page 1 of this form have had a chance to take notes from the recording and/or write out the conversation in a readable format. I understand that once these activities are done, the audio recording files will be deleted.**

Signature

Date

Audio Recording and Use of Written Material Agreement (Form A)

Interviewer Copy

If you would like us to create an audio recording of today's interview, we would do our best to make sure that the recording stays secure. For instance, we would upload the audio recording files to a secure electronic location and then the audio recording would be deleted from the digital recording device. Additionally, any names that you use during the conversation will be redacted (permanently erased) from the recording. However, it is important to understand that creating an audio recording of your voice increases the risk of someone being able to link your answers back to you if somehow the recording device is lost or stolen, or if the files are accidentally uploaded to an unintended location, or if someone hacks the server on which the files are stored.

Please read the following statements. If you agree to a statement, please sign your name. You have the option of agreeing to none of the statements, some of the statements, or all of the statements. You are welcome to participate in today's interview regardless of whether you agree to these statements or not.

1. I give my permission for today's interview to be audio recorded.

Signature

Date

2. I give my permission for the following people to listen to the audio recording of today's conversation in order to add detail to the notes that will be taken during today's interview:

- The interviewer and notetaker who were present for the interview
- One or more other members of Indiana's Move to End Violence (a group of service providers in Indiana who want to make domestic violence services better) who are responsible for reviewing the conversations from my interview and the interviews of other people in Indiana who have experienced abuse.

Signature

Date

3. I give my permission for staff members of a professional transcription service to listen to the audio recording and to type the conversation into a readable format.

Signature

Date

4. I give my permission for specific quotes and summaries of what I say during today's conversation to be shared with others in the following ways:

- At Indiana Move to End Violence meetings related to this project
- In presentations based upon the results of this project that are given to the domestic violence service community, to other service providers, to government agencies, or to the general public
- In printed or electronic (online) documents that describe the results of this project to the domestic violence service community, other service providers, government agencies, or the general public

Signature

Date

5. I understand that the audio recording files will be maintained until the people I listed on Page 1 of this form have had a chance to take notes from the recording and/or write out the conversation in a readable format. I understand that once these activities are done, the audio recording files will be deleted.

Signature

Date

Use of Written Material Agreement (Form B)

Interviewee Copy

Please read the following statements. If you agree to a statement, please sign your name. You have the option of agreeing to none of the statements, one of the statements, or both statements. You are welcome to participate in today's interview regardless of whether you agree to these statements or not.

1. I give my permission for the following people to read the written notes that will be taken during today's conversation:

- The interviewer and notetaker who were present for the interview
- One or more other members of Indiana's Move to End Violence (a group of service providers in Indiana who want to make domestic violence services better) who are responsible for review the conversations from my interview and the interviews of other people in Indiana who have experienced abuse

Signature

Date

2. I give my permission for specific quotes and summaries of what I say during today's conversation to be shared with others in the following ways:

- At Indiana Move to End Violence meetings related to this project
- In presentations based upon the results of this project that are given to the domestic violence service community, to other service providers, to government agencies, or to the general public
- In printed or electronic (online) documents that describe the results of this project to the domestic violence service community, other service providers, government agencies, or the general public

Signature

Date

Use of Written Material Agreement (Form B)

Interviewer Copy

Please read the following statements. If you agree to a statement, please sign your name. You have the option of agreeing to none of the statements, one of the statements, or both statements. You are welcome to participate in today's interview regardless of whether you agree to these statements or not.

1. I give my permission for the following people to read the written notes that will be taken during today's conversation:

- The interviewer and notetaker who were present for the interview
- One or more other members of Indiana's Move to End Violence (a group of service providers in Indiana who want to make domestic violence services better) who are responsible for review the conversations from my interview and the interviews of other people in Indiana who have experienced abuse

Signature

Date

2. I give my permission for specific quotes and summaries of what I say during today's conversation to be shared with others in the following ways:

- At Indiana Move to End Violence meetings related to this project
- In presentations based upon the results of this project that are given to the domestic violence service community, to other service providers, to government agencies, or to the general public
- In printed or electronic (online) documents that describe the results of this project to the domestic violence service community, other service providers, government agencies, or the general public

Signature

Date

Attachment 1: Background Information Form (Page 1 of 2)

We ask about your identities and living circumstances because we want to be sure that we're hearing from a diverse range of survivors. We ask for this information about your life during the experience of abuse, and also, now, because some of these things can change over time. If you are currently experiencing abuse, you can just fill out the first column (While you were experiencing abuse in your relationship). We also recognize that for lots of us, our experience of abuse lasts for many years, and some of us experience abuse in more than one relationship. If this is true for you, we ask you to fill out the information around the experience of abuse that was the most significant for you.

| | While you were experiencing abuse in your relationship(s) | Now |
|----------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Your age (range) | | |
| Number of people in your household | | |
| Your geographic setting | <p><i>Please check one of these boxes:</i></p> <input type="checkbox"/> I was living in a large city <input type="checkbox"/> I was living in a large or medium-sized town but I wouldn't call the town a "city" <input type="checkbox"/> I was living in a small town <input type="checkbox"/> I was living in the "country" outside of a town or city | <p><i>Please check one of these boxes:</i></p> <input type="checkbox"/> I am living in a large city <input type="checkbox"/> I am living in a large or medium-sized town but I wouldn't call the town a "city" <input type="checkbox"/> I am living in a small town <input type="checkbox"/> I am living in the "country" outside of a town or city |
| Your gender | | |
| Your race or ethnicity | | |
| Your language preference | | |
| Your military status | <p><i>Please check all that apply:</i></p> <input type="checkbox"/> I was serving in the military <input type="checkbox"/> I had served in the military in the past | <p><i>Please check all that apply:</i></p> <input type="checkbox"/> I am serving in the military <input type="checkbox"/> I have served in the military in the past |
| Do/did you identify with a religion? | <p><i>Please check one of these boxes:</i></p> <input type="checkbox"/> Yes <input type="checkbox"/> No <p><i>If yes, what religion?</i></p> | <p><i>Please check one of these boxes:</i></p> <input type="checkbox"/> Yes <input type="checkbox"/> No <p><i>If yes, what religion?</i></p> |
| Do/did you identify as a person with a | <p><i>Please check one of these boxes:</i></p> <input type="checkbox"/> Yes | <p><i>Please check one of these boxes:</i></p> <input type="checkbox"/> Yes |

| | | |
|-------------|----------------------------------------------------|----------------------------------------------------|
| disability? | <input type="checkbox"/> No | <input type="checkbox"/> No |
| | <i>Would you like to describe your disability?</i> | <i>Would you like to describe your disability?</i> |

Attachment 1: Background Information Form (Page 2 of 2)

| | While you were experiencing abuse in your relationship(s) | Now |
|-------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Your sexual orientation | | |
| Your household's average yearly income | <i>Please check one of these boxes:</i> <input type="checkbox"/> Low income <input type="checkbox"/> Middle income <input type="checkbox"/> High income <input type="checkbox"/> Other _____ | <i>Please check one of these boxes:</i> <input type="checkbox"/> Low income <input type="checkbox"/> Middle income <input type="checkbox"/> High income <input type="checkbox"/> Other _____ |
| Have you ever been in jail or in prison? | <i>Please check all that apply:</i> <input type="checkbox"/> I was in jail or prison at the time <input type="checkbox"/> I had been in jail or prison in the past | <i>Please check all that apply:</i> <input type="checkbox"/> I am currently in jail or prison <input type="checkbox"/> I have been in jail or prison in the past |
| Your housing status | <i>Please check one of these boxes:</i> <input type="checkbox"/> I was homeless at the time <input type="checkbox"/> I had a place to stay but it was not very stable <input type="checkbox"/> I had a stable place to stay | <i>Please check one of these boxes:</i> <input type="checkbox"/> I am currently homeless <input type="checkbox"/> I have a place to stay but it is not very stable <input type="checkbox"/> I have a stable place to stay |
| Do/did you have any experience with substance abuse/misuse? | <i>Please check one of these boxes:</i> <input type="checkbox"/> Yes <input type="checkbox"/> No | <i>Please check one of these boxes:</i> <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are/were you pregnant? | <i>Please check one of these boxes:</i> <input type="checkbox"/> Yes <input type="checkbox"/> No | <i>Please check one of these boxes:</i> <input type="checkbox"/> Yes <input type="checkbox"/> No |

Do/did you witness domestic violence as a child?

- Yes
 No

Do/did you witness other forms of violence in your community as a child?

- Yes
 No

Were you/are you part of a community that has experienced a long history of violence or trauma (i.e., African American and Indigenous communities)?

- Yes
- No

In what country were you born? _____

If you were born outside the United States, did you enter the country as a refugee?

- Yes
- No

When you were experiencing abuse, did you receive services from a domestic violence program?

- Yes
- No

If not, were you denied services by a domestic violence program?

- Yes
- No

Attachment 2 –Contact Information Form

Colleen Yeakle of the Indiana Coalition Against Domestic Violence can be reached at:

Email: cyeakle@icadvinc.org

Office phone: 317-917-3685

ICADV Move to End Violence Monthly and Final Report – www.icadvinc.org

Attachment 3 –Participation Information Form

1. One of the ways you could be involved in this process is that we could send you updates on our group's work along the way. Would you like us to receive updates from:

_____ Indiana Coalition Against Domestic Violence, Inc.

_____ <program>

_____ Not at all

2. Would you like to receive a copy of the final report?

_____ Yes _____ No

3. If we have follow-up questions related to the topics we talked about today, or related to other topics we end up investigating in the future, would it be okay if we contacted you again sometime?

_____ Yes _____ No

4. What is the best way to contact you?

Phone Number (s): _____

Email: _____

Address: _____
