

Supplementary Table 1: Study Characteristics

Authors	Year (Country)	Aim(s)	Qualitative Method (Analysis)	HCP Studied	Sample (Age)
Almqvist et al. ⁶⁶	2018 (Sweden)	To explore mothers' experiences of and thoughts on being asked about exposure to IPA at a child healthcare centre and to investigate prevalence rates.	Interviews (Thematic analysis)	Nurses	n = 128 (Age not specified)
An et al. ³²	2019 (USA)	To explore the experiences of domestic violence victims with their Temporary Assistance for Needy Families (TANF) applications, focusing on the conditions related to their disclosure of abuse and their post-disclosure experiences.	Interviews (Thematic analysis)	Social workers	n = 5 (Age not specified)
Bacchus et al. ^{37 41}	2016 (USA)	This study was reported in two papers, one with the aim to explore perinatal home visitors' and women's experiences of screening for IPV and receiving Domestic Violence Enhanced Home Visitation Program (DOVE) in the form of either mHealth technology (ie, a computer tablet) or a home visitor-led method. The second paper aimed to explore (i) women's views and experiences of being screened for IPV during perinatal home visits in rural and urban contexts in the USA and (ii) their perceptions of how the DOVE intervention helped them.	Interviews (Thematic analysis)	Perinatal home visitors	n = 26 (16-35)
Bradbury-Jones et al. ⁵³	2016 (UK)	To report the findings of a qualitative case study that investigated abused women's experiences of an identification and referral intervention and to discuss the implications for nurses, specifically those working in primary and community care.	Interviews (Thematic analysis)	Nurses	n = 10 (21-72)

Burry et al. ⁶⁰	2020 (New Zealand)	To understand the experiences of victims of reproductive coercion in Aotearoa New Zealand.	Survey and interviews (Categorisation)	HCP not specified	n = 111 for the survey and n = 5 for interviews (16+)
Childress et al. ⁵⁸	2017 (Kyrgyzstan)	To use women's own experiences to shed light on the barriers to and motivations for seeking help from the criminal justice and public health systems, and to inform possible refinements.	Interviews (Comparative analysis)	HCP not specified	n = 16 (20-49)
Correa et al. ⁴²	2020 (USA)	To qualitatively describe experiences of survivors of intimate partner violence (IPV) in being screened for IPV and to identify opportunities to improve screening and response by health care providers.	Focus groups (Constant comparative method)	HCP not specified	n = 17 (22-70)
Decker et al. ³⁸	2017 (USA)	To describe the uptake and impact of a brief, trauma informed, universal IPV/RC assessment and education intervention.	Interviews (Thematic analysis)	Family planning clinics	n = 26 (18-35)
Dichter et al. ⁴³	2020 (USA)	To examine the perspectives of middle-aged women who had experienced past-year IPV regarding IPV screening and disclosure in the healthcare setting.	Interviews (Thematic analysis)	Veterans' Health Administration service providers	n = 27 (45-64)
Fawole et al. ⁶¹	2019 (Nigeria)	To gather the perceptions of victims of IPA on the relevance of raising the topic at healthcare facilities and to determine specific categories of women to target for screening.	Interviews (Thematic analysis)	Doctors	n = 33 (Mean age of 35.9)
Garnweider-Holme et al. ⁶²	2017 (Norway)	To explore how women from different ethnic backgrounds experienced IPV and what their recommendations were about how midwives should communicate about IPV in antenatal care.	Interviews (Thematic analysis)	Midwives	n = 8 (Age not specified)

Grillo et al. ³³	2019 (USA)	To elucidate patient-centred outcomes identified by women veterans' who have experienced IPA.	Focus groups (Content analysis)	HCP not specified	n = 25 (29-70)
Hatcher et al. ⁶⁴	2016 (South Africa)	To explore the views of patients, HCPs, and community members around assessing and addressing IPA in urban antenatal care.	Interviews (Thematic analysis)	Antenatal HCPs	n = 5 (Age not specified)
Hester et al. ⁵²	2017 (UK)	To assess referrals, victim/survivor needs and agency responses.	Interviews (Thematic analysis)	Specialist sexual violence workers	n = 15 (Age not specified)
Jack et al. ³⁹	2017 (USA)	To develop strategies for the identification and assessment of intimate partner violence in a nurse home visitation programme.	Interviews (Conventional content analysis)	Nurses	n = 26 (Age not specified)
Kataoka et al. ⁵⁷	2018 (Japan)	To investigate women's experiences of reading and completing an IPA screening questionnaire during pregnancy.	Descriptive survey and interviews (Content analysis)	HCP not specified	n = 43 (Majority in their 30s)
Liao ⁶⁷	2017 (Taiwan)	To investigate the types of help-seeking services sought by abused Taiwanese women and their experiences of using them.	Interviews (Thematic analysis)	HCP not specified	n = 15 (30-59)
Mackenzie et al. ⁵	2019 (UK)	To elicit women's stories of disclosing or withholding information about their abuse to general practitioners and of how disclosures, if made, were responded to.	Interviews (Thematic analysis)	General practitioners	n = 20 (20-69)
Manor-Binyamini et al. ⁵⁶	2021 (Israel)	To examine how Bedouin women perceived and interpreted seeing a doctor for help in the aftermath of intimate partner violence.	Interview (Thematic analysis)	Doctors	n = 19 (26-55)

Miller et al. ⁴⁰	2017 (USA)	To explore how patients and providers perceived the intervention and to elucidate how the intervention [Addressing Reproductive Coercion in Health Settings] was actually delivered, as a step toward refining implementation of such interventions.	Interviews (Consensus coding approach)	Nurse practitioners, medical assistants, and health educators at family planning clinics	n = 49 (18-30)
O'Doherty et al. ⁴⁷	2016 (Australia)	To elucidate factors involved in women's uptake of a counselling intervention delivered by family doctors in the weave primary care trial.	Interviews (Theory of planned behaviour)	Family doctors	n = 20 (age not specified)
Reeves et al. ³⁴	2017 (USA)	To develop knowledge on women survivors' healthcare experiences and strategies.	Interviews (Thematic analysis)	HCP not specified	n = 14 (22-63)
Ruiz-Perez et al. ⁶⁵	2017 (Spain)	To understand the experiences of women with disabilities who are or have been abused by their partners and to explore the knowledge, views, and training requirements of primary care professionals.	Interviews (Thematic analysis)	Primary HCPs	n = 14 (34-66)
Sabina et al. ⁵⁴	2019 (Ecuador)	To understand the availability, accessibility, adaptability, and appropriateness of IPA services from the perspective of victims.	Focus groups (Thematic analysis)	HCP not specified	n = 21 (Mean age of 38)
Shaheen et al. ⁶³	2020 (Palestine)	To articulate Palestinian survivors' of DV attitudes towards and experiences of disclosure in a health setting.	Interviews (Thematic analysis)	HCP not specified	n = 20 (20-59)

Sorrentino et al. ⁴⁴	2020 (USA)	To explore what constitutes client-centered mental health care in the context of recent/ongoing IPV with women IPV survivors who receive health care through the Veterans Health Administration.	Interviews (Inductive approach)	Veterans' Health Administration service providers	n = 50 (22-64)
Spangaro et al. ^{46,48}	2019 and 2016 (Australia)	This study was reported in two papers, one with the aim to explore Aboriginal women's perceptions of the impact of IPA enquiry on themselves or their family, and the conditions associated with positive or negative impact. The second paper aimed to test, among Indigenous women, a model for decisions on whether to disclose intimate partner violence in the context of antenatal routine screening.	Interviews (Comparative analysis)	Antenatal HCPs	n = 12 (20-36)
Spangaro et al. ^{49,50}	2019 and 2016 (Australia)	This study was reported in two papers, one with the aim to understand the pathways leading to perceptions of positive impact of screening and, equally, pathways leading to perceptions of neutral or negative impact. The second paper aimed to test a model for women's decisions to disclose IPV in response to routine inquiry as part of antenatal assessment.	Interviews (Qualitative configurational approach and thematic analysis)	Antenatal service providers	n = 32 (17-41)
Srinivasan et al. ⁵¹	2019 (Australia)	To understand the expectations of women in Australia when encountering healthcare providers in the context of reproductive abuse.	Interviews (Thematic analysis)	HCP not specified	n = 13 (18-44)
Vranda et al. ⁵⁵	2018 (India)	To explore barriers in disclosing IPV to mental health professionals (MHPs) of multidisciplinary team (such as psychiatrists, psychiatric social workers, and clinical psychologists) by women with mental illness experiencing IPV at a tertiary care psychiatric hospital.	Interviews (Frequency analysis)	Psychiatric service providers	n = 100 (18-56)

Wadsworth et al. ³⁵	2018 (USA)	To offer suggestions from women for nurse practitioners and other HCPs on improving care for women experiencing IPA during the perinatal period.	Interviews (Thematic analysis)	Perinatal HCPs	n = 20 (22-37)
Wallin Lundell et al. ⁵⁹	2017 (Mexico)	To describe how women in Mexico who have suffered from gender-based violence experience their encounters with HCPs.	Interviews (Content analysis)	HCP not specified	n = 7 (21-49)
Williams et al. ⁴⁵	2020 (USA)	To better understand victims' perspectives regarding decisions to disclose gender-based violence, namely, intimate partner violence (IPV) and human trafficking, to health care providers and what outcomes matter to them when discussing these issues with their provider.	Interviews (Qualitative content analysis)	HCP not specified	n = 25 (28-43)
Zelazny et al. ³⁶	2019 (USA)	To learn more about adolescent and young adult women's preferences in IPA assessment delivery in family planning clinics.	Interviews (Thematic analysis)	Doctors and nurses	n = 44 (18-29)