

A quarterly newsletter for our community partners

Research Notes



UNIVERSITY of
DENVER

ARTS, HUMANITIES
& SOCIAL SCIENCES
Department of Psychology

Fall 2015 | Volume 12 | Issue 3
www.du.edu/tssgroup
303.871.7407



Traumatic Stress Studies (TSS) Group



Obtaining Resources after IPV: The Impact of Attention

Michelle Lee, 3rd year graduate student

Intimate partner violence (IPV) affects approximately 25-30% of women in the United States (Black, 2011; Campbell, 2002). Following IPV, women often experience challenges related to resources needed to meet basic needs (housing, material goods, finances). For instance, women frequently report housing concerns such as eviction, homelessness, and difficulty securing affordable housing (Baker, Cook, & Norris, 2003). Women often experience material hardships such as food insufficiency and may lose financial security by loss of work, lowered work performance, or losing their source of financial stability by leaving the abusive partner (Moe & Bell, 2004). Obtaining resources is critical for psychological and physical well-being (Bybee & Sullivan, 2002, 2005) – however, little is known about factors that may link efficacy obtaining resources among women who experienced IPV.

Using data from Denver Triage Project, we examined executive function (EF) as a potential link between IPV and later efficacy obtaining resources. EFs include attention skills, such as planning and organizing tasks and inhibiting distractions; these attention skills are critical to completing complex, goal-directed tasks. We were interested in EF as a variable because interpersonal and familial violence, including IPV, has been linked with poorer EF performance (DePrince, Weinzierl, & Combs, 2009; Stein, Kennedy, & Twamley, 2002). We also predicted that EF influences efficacy obtaining resources following IPV because obtaining resources involves multiple steps and tasks (e.g., going to various government or community offices, filling out different types of paperwork).

As predicted, we found that greater physical severity of a police-reported IPV incident is significantly, negatively associated with EF performance. EF is significantly, positively associated with efficacy obtaining resources a year following the IPV incident. Furthermore, EF has a significant indirect effect on efficacy obtaining resources following IPV. In other words, EF performance links the relationship between IPV and greater efficacy obtaining critical resources in the future. This finding has potential implications for how professionals support women following IPV. For instance, women may benefit when practitioners and advocates provide more external support to offset problems with EFs, such as help

In this Issue:

Obtaining Resources after IPV.....	1
Director's Notes.....	2
Meet Our New Team Member: Julie Olomi.....	3
TSS Group Accomplishments.....	3
Women's Health Project.....	4

women to plan, organize and prioritize tasks (e.g., going to appropriate offices, completing paperwork).

Research conducted by Bybee and Sullivan (2002, 2005) has demonstrated that obtaining resources is critical for well-being across multiple areas. For instance, obtaining resources is negatively associated with experiences of violence in the future – perpetrated by the initial offender or someone else. Successfully obtaining resources decreases the likelihood that women will engage in relationships with violent partners in order to secure their or their children's livelihoods. Obtaining resources is likely important in increasing the likelihood that women will pursue higher-order needs such as engaging in the criminal justice system. Only after securing the most basic needs are women able to attend to tasks such as finding legal assistance, engaging in prosecution tasks (if there is a criminal case), and going to court. Thus, with support services that target EF skills, women may be able to increase their efficacy in obtaining basic resources following IPV and improve outcomes across multiple areas over time.

References

- Baker, C. K., Cook, S. L., & Norris, F. H. (2003). Domestic violence and housing problems a contextual analysis of women's help-seeking, received informal support, and formal system response. *Violence Against Women, 9*(7), 754-783.
- Black, M. C. (2011). Intimate partner violence and adverse health consequences: implications for clinicians. *American Journal of Lifestyle Medicine, 15*59827611410265.
- Bybee, D.I., & Sullivan, C.M. (2002). The process through which an advocacy intervention resulted in positive change for battered women over time. *American Journal of Community Psychology, 30*(1), 103–132.
- Bybee, D., & Sullivan, C.M. (2005). Predicting re-victimization of battered women 3 years after exiting a shelter program. *American Journal of Community Psychology, 36*(1/2), 85–96.
- Campbell, J. C. (2002). Health consequences of intimate partner violence. *Lancet, 359*, 1331-1336.
- DePrince, A.P., Weinzierl, K.M., & Combs, M.D. (2009). Executive function performance and trauma exposure in a community sample of children. *Child Abuse and Neglect, 33*, 353-361.
- Moe, A. M., & Bell, M. P. (2004). Abject Economics The Effects of Battering and Violence on Women's Work and Employability. *Violence Against Women, 10*(1), 29-55.
- Stein, M. B., Kennedy, C. M., & Twamley, E. W. (2002). Neuropsychological function in female victims of intimate partner violence with and without posttraumatic stress disorder. *Biological Psychiatry, 52*(11), 1079-1088. doi:10.1016/S0006-3223(02)01414-2



Director's Notes

Anne P. DePrince, Ph.D.

Women's Health Project. To date, we have enrolled more than 220 women into a research project focused on understanding what kinds of social reactions women receive after sexual assault. Are responses more negative (e.g., victim blaming) or more positive (e.g., emotional support)? Do positive and negative response vary based who the responder is – friends and family or law enforcement? What impact do these responses have on women's health and decision making over the next nine months? The women who have generously shared their stories and perspectives with us are diverse in terms of age (ranging from 18 to early 60's), ethnicity, educational background, and sexual orientation. Nearly one-third of women report that the offender was someone very close (such as an intimate partner). We will continue inviting women into this research study until December 20, 2015 (please see the study flyer at the end of this newsletter to help get the word out). In 2016, we will focus on follow-up interviews with women to check in with them 3, 6, and 9 months after our initial interview. With the information that women have generously shared, this research is well-poised to provide critically important information that can inform best practices for working with women who have been sexually assaulted.

Legal Wrap Around Project. We are delighted to continue work with our collaborators at [Rocky Mountain Victim Law Center](#) (RMVLC) and the Steering Committee for the Denver Legal Wrap Around Project to research the impact of LINC, the Legal Information Network of Colorado.

Denver Older Adult Research (OAR) Project. Working closely with colleagues from the Denver Forensic Collaborative – particularly in the City Attorney's Office, District Attorney's Office, Denver Police Department, and

Adult Protective Services – we continue to invite older adults at risk for abuse, neglect, and/or exploitation to participate in the OAR Project. To date, we have interviewed 23 older adults who reported a broad range of stressful experiences. We have also collected information from more than 400 police reports involving incidents with an older adult victim to begin to understand the nature of crimes against older adults in our community. We hope this research will help identify resources and support that can help older adults.

We look forward to updating you on new findings in the next issue of this newsletter! As always, thank you for all you do to service victims and survivors as well as for the opportunity to collaborate.

Meeting Our Newest Team Member: Julie Olomi

Q: Welcome to the TSS Group, Julie! Tell us about yourself, please!

Hi there! I am originally from France and moved to the States as a teenager. I went to high school in San Francisco and then travelled around South America for a bit before completing my undergrad in Davis, California. I am entirely new to Colorado and love it already. I have never hiked so much as I have in the last month and am hooked! I am also enjoying the great food and parks Denver has to offer!

Q: As a first year graduate student in the Clinical Psychology program, what are your current research interests?

I am very interested in further understanding how violence and trauma can affect development and mental health. Both children and adults cope with traumatic experiences in different ways, some of which can sometimes lead to maladaptive coping behavior, further putting them at risk. I would like to understand what these coping behaviors are and to learn how to best respond to them to avoid further trauma or victimization. I am also very interested in how culture can affect the way people experience and respond to traumatic experience, and how we can best serve those from different cultural backgrounds, particularly when researching sensitive issues like trauma.

Q: What drew you to the TSS group?

The biggest initial draw was how committed the group is to being involved in the community and seeking a two way relationship with the populations they serve. I was very excited about how much they valued collaboration and how deeply invested they were in producing research that went beyond the academic field.

Q: What do you hope to accomplish in the TSS group?

I hope to learn as much as I can from this incredible team! I really look forward to gaining experience meeting and working with our community collaborators, and hopefully contributing to knowledge on how trauma affects development, and how these findings can be applied to provide appropriate and sensitive interventions.



TSS Group Accomplishments

Anne P. DePrince received the [2015 Thomas Ehrlich Civically Engaged Faculty Award](#), a prestigious national honor from Campus Compact that recognizes excellence in community engagement.

Kerry Gagnon (4th year), **Michelle Lee** (5th year), and **Claire Hebenstreit** (PhD Alum) presented research findings at the Annual Meeting of the International Society for Traumatic Stress Studies in New Orleans, LA.

Women's Health Project Information

Sure, we know lots of facts and figures about unwanted sexual experiences.



But, facts and figures don't tell the whole story.
Each woman's story is unique.

- ✓ Have you had an unwanted sexual experience in the last year?
- ✓ Did you tell someone (such as a counselor, advocate, police officer, health provider) about that experience?
- ✓ Are you 18 years of age or older?
- ✓

Women who answer yes to these questions are invited to participate in the Women's Health Project.

WHAT DOES THE PROJECT INVOLVE?

- 4 interviews over 9 months with a female interviewer.
- The first interview takes 3 hours; the others each take 2 hours.
- Everything in the interview is voluntary. You do not have to answer any questions you do not want to answer.
- We are trying to learn:
 - ... what can people say and do to help after an unwanted sexual experience?
 - ... what is it like to talk to counselors, health providers, advocates, lawyers, or the police?
 - ... what makes it easier or harder to cope?
 - ... what is it like to try to find services that can help?
-

WILL MY COUNSELOR OR THE POLICE KNOW THAT I AM IN THE STUDY?

No. We will not tell anyone you are in the study. We keep everything you tell us about your experiences private.

WILL I BE PAID FOR MY TIME?

Yes! To thank you for your time, you can receive up to \$230 total, as follows: \$50 for the first interview, \$55 for the second interview, \$60 for the third interview, \$65 for the fourth interview.

WHAT ABOUT GETTING TO THE INTERVIEW?

We can help with cab fare, bus tokens, or \$10 cash for transportation costs. You tell us which you prefer.

CONTACTING US

For more information, please contact us:

Private email: healthstudy@du.edu

Private phone: 303.871.4103

The Denver Women's Project is paid for by a grant from the National Institute of Justice. The research was approved by the University of Denver Institutional Review Board. Project Director: Anne P. DePrince, Ph.D.

Agency information for the project is available at <http://www.du.edu/tssgroup/womenshealth/agencyinfo>.