

TSS GROUP NEWS



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May News Highlights

Anne P. DePrince, Ph.D., TSS Group Director

The April snows made it even harder to believe that spring is almost here and gone...at least according to the academic calendar. Our spring quarter wraps up in May, at which time we will say a fond and bittersweet farewell to two graduating seniors: **Amber Morse** and **Leah Getchell**. A research team member for three years, Amber Morse is completing her honor's thesis with our group. Her thesis focuses on analyzing data with Project Pave to better understand their clients' abuse histories and treatment outcomes. Leah has also worked in our group for three years, contributing to numerous projects. They will both be missed.

Though frequent goodbyes are the nature of the beast in academia, we also get to say lots of hellos. We are delighted to welcome **Michelle Lee** this summer as an incoming student in our Child Clinical PhD Program. Michelle will be moving to the great state of Colorado from the great state of Texas where she has been working for a domestic violence shelter. Stay tuned in the fall to meet Michelle through this newsletter.

Alongside the hellos and goodbyes, we're also wrapping up and starting up projects. Here are a few highlights:

Getting the Word Out: Study of Older Adult Resources and Stress (SOARS). In collaboration with Dr. Leslie Hasche (Graduate School of Social Work, DU) and partnership with Denver's innovative Justice for Older Adults (an interdisciplinary coalition of legal, adult protective services, intimate partner violence, and senior service agencies), this new

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The TSS Team discusses preliminary results of new research.

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project assesses risk factors for and consequences of elder maltreatment (i.e., abuse, neglect, or financial exploitation). A flyer for this study is available at the end of this newsletter.

Data Collection Complete: Denver Justice Project. With the help of many friends here in Denver, we completed data collection for a small study assessing the trauma histories and trauma-related needs of women who have experienced sex trafficking. This project, developed in partnership with the **Denver District Attorney's Office** and Denver Police Department's **Victim Assistance Unit** and funded by the **Colorado Campus Compact**, seeks to provide information to service providers in Denver about women's trauma-related needs following trafficking cases.

Though we're just digging into analyzing data, a few things stand out from the interviews. First, women in the study reported near-universal exposure to experiences of being hit in the head. For many women, they reported ongoing symptoms, such as distraction, problems with concentration, and headaches. This pattern is all-too-consistent with what we observed in the Denver Triage Project, a study of women exposed to domestic violence that was reported to law enforcement. More than 70% of women in that sample also reported being struck in the head at some point in their lives. These findings may have important implications for health care and rehabilitation needs for women following trafficking.

Second, women who interacted with law enforcement around attempts to investigate and/or arrest traffickers impressed upon us the importance and value of these interactions. Women talked about the reassurance and respect that officers conveyed as being key to their support of the criminal justice process. Stay tuned for additional findings as we dig further into the data.

Data Collection Complete: Healthy Adolescent Relationship Project (HARP). We are pleased to report that data collection is complete for this community-based, revictimization prevention program with a high-risk and hard-to-reach population of adolescent girls who came to the attention of the child welfare system. An initial report on our data analyses is currently under review at the National Institute of Justice. After we receive feedback and respond to those reviews, we look forward to sharing detailed findings with you.

As always, thank you for all you do to make this research possible...and for all that you do on behalf of victims and survivors.



TSS Group Accomplishments

We are pleased to announce that two new TSS group papers are available at <http://mysite.du.edu/~adeprinc/pub.html>.

- DePrince, A.P. & Shirk, S.R. (2013). Adapting cognitive-behavioral therapy for depressed adolescents exposed to interpersonal trauma. *Cognitive and Behavioral Practice, 20*, 189-201.
- Gover, A., Welton-Mitchell, C., DePrince, A., & Belknap, J. (in press). Understanding why women initially engaged with the criminal justice system don't report additional incidents of intimate partner abuse. *Journal of Women and Criminal Justice*.

Congratulations to TSS Group members for the following University of Denver awards for 2013-2014:

- Becca Babcock: Dissertation Fellowship; Graduate Studies Doctoral Fellowship for Inclusive Engagement
- Kerry Gagnon: Graduate Studies Doctoral Fellowship for Inclusive Engagement
- Tejas Srinivas: Graduate Studies Doctoral Fellowship for Inclusive Engagement





Youth Perceptions of Being Asked About Trauma: Implications for Service Providers

Ann T. Chu, PhD

Screening for and/or explicitly discussing traumatic experiences has become a key component in many forms of trauma-informed clinical interventions (e.g., Amaya-Jackson et al., 2003; Cohen, Mannarino, Murray, & Igelman, 2006) and in the treatment of serious problems such as substance use among trauma-exposed individuals (e.g., Najavits, Weiss, Shaw, & Muenz, 1998). Data also show that interpersonal trauma exposure moderates treatment for prevalent problems such as depression. (Nemeroff, Heim, Thase, Klein et al., 2003; Barbe, Bridge, Birmaher, Kolko, & Brent, 2004; Lewis et al., 2010; Shirk, Kaplinski, & Gudmundsen, 2009).

Though a growing body of empirical findings suggests that people who disclose their trauma histories as part of research studies generally report positive perceptions of their research experiences (e.g., Chu, DePrince, & Weinzierl, 2008; DePrince & Chu, 2008), it remains unclear whether this pattern translates from the research to service context. Beginning to address such issues, the TSS Group (Hebenstreit & DePrince, 2012) recently demonstrated that adult women recruited from public records reported favorable benefit-to-cost ratios for participation in a study focused on intimate partner abuse, despite participants not knowing the explicit trauma focus of the study when the research interview was scheduled. Unfortunately, we know relatively little about how *youth* perceive trauma-specific questions in research studies or as part of ongoing mental/physical health services due to a lack of empirical research and longitudinal designs.

Data from our Healthy Adolescent Relationship Project (HARP) are helping us to begin addressing these questions. HARP focused on testing a 12-week prevention group with girls ages 12-19 who came to the attention of the child welfare system. We interviewed the girls at four time points (pre-, immediately post-, 2 months post-, and 6 months post-prevention groups). After each interview we asked the girls their perceptions of the benefits and costs of participating in the interview using the Response to Research Participation Questionnaire (RRPQ; Newman & Kaloupek, 2001, 2004).

These post-interview data contribute to existing research in several important ways. First, our sample comprised youth who did not self-select into the study based on the topic of trauma or interpersonal violence. The materials and information the girls received mentioned that the project involved participating in a 12-week group that focused on how to build healthy relationships, including decreasing aggression; however, recruiting materials did not explicitly state that girls would be asked to report on their own experiences of violence/trauma. At the point of consent/assent, girls were told that they would be asked about their own experiences of interpersonal trauma at each interview. Thus, the study mimicked common practice where service providers try to engage at-risk youth in services (in this case around healthy relationships) and screen for trauma exposure at intake prior to the start of services and over time as services continue.

Second, the longitudinal design allowed us to examine potential changes in cost-to-benefit ratios over time and whether asking about trauma affects youths' engagement with services. Service providers who see youth relatively infrequently may worry about a lack of stable alliance with youth when asking about trauma exposure. Providers may be deterred from asking about trauma out of fear that adolescents will not return for follow-up appointments. The HARP study design mimicked common practice in that the pre/post-treatment assessor, much like an intake clinician, did not provide the weekly intervention. Further, following the 12-week intervention, we had no contact with participants outside of the 2 month and 6 month follow-up interviews. Infrequent contact between the research team and participants (four assessment appointments spread out over one year) approximates scenarios where there is not a consistent provider-client relationship. By examining whether the benefits and costs of trauma research participation affects participants' willingness to return for additional appointments, we can begin to better understand the impact of asking about trauma on youth engagement with service providers.

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None of the teens declined to participate after learning that they would be interviewed about their experiences of interpersonal trauma exposure. Importantly, teens reported positive cost–benefit ratios after the research session, meaning that they viewed the positive aspects of participation as greater than the negative aspects. Thus, these data demonstrate that the benefits of trauma–focused research can outweigh the costs among adolescent girls from the child welfare system who have faced considerable adversity and maltreatment in their young lives.

We found that participants reported stable and favorable benefit–to–cost ratios across four time points; those interviews occurred over an average of one year. Retention rates also remained consistent at each interview time point. These patterns suggest that participants’ perceptions of participating in research did not become more negative over time, and that participants did not decide to drop out of the study despite reporting positive benefit–to–cost ratios.

Additionally, we also examined whether perceptions of participation and symptom severity had an impact on self–selection for follow–up interviews. For example, some people might worry that participants who experience more severe PTSD symptoms will find discussing their trauma histories more difficult than their peers; this could lead to negative perceptions of participation and attrition. In the current study, PTSD symptoms and perceptions of research participation did not predict retention at any follow–up time points.

Implications for service providers seeking to engage high–risk youth in services. Increasingly, service providers are encouraged/expected to assess trauma exposure as part of routine health care (e.g., Allen, Lehrner, Mattison, Miles, & Russel, 2007). Based on the HARP results, assessing for interpersonal trauma histories does not appear to exacerbate distress or negatively impact engagement with youth facing multiple forms of adversity. In fact, many survivors report a sense of empowerment in personal benefits and helping others (e.g., Schwerdtfeger, 2009). Youth can be asked about trauma in a careful and compassionate manner, even when they may not expect to discuss their trauma experiences and outside of a strong therapeutic alliance.

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SOARS

Study of Older Adult Resources and Stress

University of Denver

If you are age 60 or above, you are invited to participate in the *Study of Older Adult Resources & Stress (SOARS)*. The goal is to learn more about:

- (1) Older adults' experiences of stress, and
- (2) The impact of stress on health, well-being, and service needs.

Participation in SOARS involves:

- A **voluntary** and **confidential** interview, at a time and place of your choice. Cab vouchers may be provided.
- The interview may take up to 2 hours, and can be split into two meetings.
- A trained interviewer will ask about your health, experiences of past and current stress, service use, and service needs.
- You will be paid \$20/hour for up to 2 hours of your time.

Leslie Hasche, Ph.D., M.S.W. and Anne DePrince, Ph.D., are conducting the study. Results will help improve services offered by agencies involved in the Justice Program for Older Adults of Denver. Your choice to participate or not has no effect on your access to services.

For more information, please contact:

(303) 871-7407 or soars@du.edu