August News Highlights

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

As we gear up for the return of undergraduate students to the University of Denver campus in the coming weeks, we take a moment to pause and reflect on the summer’s activities. In June, we turned over manuscripts authored by undergraduates in a Research Methods class to community partners from the Denver District Attorney’s Office and SafeHouse Denver. The Research Method students spent Spring Quarter working on proposals designed to answer research questions posed by our partners.

In the August heat, we moved our offices to a brand new building on the DU campus: Nagel Hall. Our new space offers a truly warm and welcoming atmosphere for all. Please let us know if you are in the neighborhood for a tour!

The summer also included fast-paced research efforts in our NIJ-funded collaboration with system- and community-based agencies who serve women exposed to domestic violence. From January to July, we enrolled 225 women in a study that we hope will help us better understand the challenges faced and resources needed by women after domestic violence.

We hope you enjoy our other updates and new findings listed in this newsletter! On behalf of the TSS Group, we look forward to finding new ways to work with you and thank you for all you do on behalf of victims and survivors.

Anne P. DePrince, Ph.D.
Director, TSS Group
University of Denver

Trauma and Depression: Exploring Connections

by Claire Hebenstreit, 2nd year Graduate Student

Over the past several decades, an expanding body of research has established that people exposed to a traumatic event have a substantially higher lifetime rate of depression than do people who have not been exposed to trauma. (Blanchard, Buckley, Hickling, & Taylor, 1998)

Not only do trauma survivors have a greater likelihood of developing depressive symptoms following exposure, but research also suggests that their depressive symptoms are more severe, and the course of their depression more persistent, in comparison to psychiatric control groups without trauma histories (Brown, Harris, et al., 1994). That is to say, people who have experienced trauma are not only more likely to develop symptoms of depression, but the symptoms that they do develop may be worse, and may last longer.

The relationship between trauma and depression
seems to exist regardless of whether people who have been exposed to trauma meet full criteria for PTSD. There is also an association between increased severity of depressive symptoms and increased severity of PTSD symptoms, as well as severity of the traumatic event itself (Nixon, Resick, & Nisith, 2004). This means that people who have experienced more severe traumas are likely to have more symptoms of depression as well as PTSD. Furthermore, the association between depression and exposure to violence exists in veteran as well as civilian populations (Campbell, Sullivan, & Davidson, 1995; Campbell, 2002; O’Campo et al, 2006).

The type of trauma that a person experiences may also influence the development of depressive symptoms. Some studies have found that the occurrence of psychological forms of aggression predicts the severity symptoms of depression in women who have experienced interpersonal violence (Arias and Paper, 1999), which is defined by the World Health Organization as “violence between family members and intimate partners and violence between acquaintances and strangers that is not intended to further the aims of any formally defined group or cause” (WHO, 2004). IPV and “assaultive trauma” (versus non-assaultive trauma) may be associated with a greater degree of depressive symptoms over time (Zlotnick, Johnson, & Kohn, 2006).

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Given the relationship between trauma exposure and symptoms of depression, do people who develop these symptoms following trauma represent a unique clinical group? Research has already suggested that trauma–related depression in patients may warrant specialized treatment effort. Therapeutic efforts may be more effective at reducing current depressive symptoms, and preventing future recurrence of symptoms, if a specific type of treatment is developed to target the unique aspects of depressive symptoms that develop in the wake of trauma exposure.

We are tackling questions about depression and trauma exposure in the TSS Group. Watch for updates on this research in the coming year! 💆

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**TSS Group Achievements**

Ann Chu received the Harry Gollob Award from the University of Denver Psychology Department “for the best first author publication describing work done at the University of Denver”. Full text of the publication, “Children’s perception of research participation: Examining trauma exposure and distress” is available on our website: [http://mysite.du.edu/~adeprinc/pub.html](http://mysite.du.edu/~adeprinc/pub.html). This article was co-authored with Anne DePrince and Kristin Weinzierl.

Undergraduate Research Assistant, Katie Hauschildt, and Dr. Anne DePrince received a University of Denver Partners in Scholarship Grant. This grant funded Katie to work almost full time in the lab this summer to examine domestic violence and gender identity.

Dr. Aimee Reichmann–Decker (Ph.D. ’06) has been appointed a Lecturer in Arts, Humanities and Social Sciences at the University of Denver.

Effective September 1, Dr. Anne P. DePrince will be tenured and promoted to Associate Professor. 🎓
Revictimization and Relationship Processing

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

Women exposed to violence early in life are at risk of revictimization. The interpersonal schema hypothesis of revictimization proposes that revictimized women will be more likely to hold negative expectations about intimate relationships, including expectations that relationships involve harm, relative to singly or non-victimized women.

We recently tested the interpersonal schema using a laboratory task called the implicit lexical decision task. In this task, participants are asked to look at computer screen where words appear two at a time. They are told that their job is to press a button to indicate whether the words are “real” or not.

The word pairs that we showed women varied in how related they were. For example, some pairs were highly related, such as cat–dog. Still other pairs were unrelated, such as cat–nail. Past research shows that people are faster to decide that “cat” and “dog” are both words when paired together than “cat” and “nail” (two unrelated words).

To whether women with histories of multiple victimizations by close others (e.g., caregivers or intimate partners) showed evidence of automatic associations between relationships and violence, compared to their peers, we designed word pairs that involved relationship and violence terms, such as partner–assault.

Based on women’s self-reports of victimization history, we assigned them to one of three groups: no–, single–, or multiple types of interpersonal trauma involving close others (e.g., family member, partner). Women exposed to multiple types of interpersonal trauma involving close others showed stronger relationship–to–harm associations than singly– or non–exposed women. That is, the multiply victimized women showed a speed–up compared to other word pairs when relationship–violence pairs; the other two groups did not show this speed–up.

The current study is the first to demonstrate alterations in the relationship schema of women exposed to multiple victimizations using an implicit task; previous studies have relied on explicit self–reports of relationship beliefs. The findings suggest that women exposed to multiple victimizations by close others differ from their peers in their expectations or beliefs about relationships at an automatic, non–conscious level.

Specifically, the multiply–victimized women performed in a way that suggests that when they encounter information about relationships, concepts of harm are automatically activated. Such a relational schema (or automatic, non–conscious associations) is likely to have an impact on thoughts about and behaviors in relationships (e.g., Bargh et al., 1995; Lindgren et al., 2007); therefore, these findings are important to our growing understanding of revictimization.

A manuscript describing this research will appear in an upcoming issue of the journal Psychology of Women Quarterly, co–authored by Anne DePrince, Melody Combs, and Michelle Shanahan.