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Effects of an Occupation-Based Social and Life Skills Session on the Strength of Intimate Partner Violence Victims' Generalized Self-Efficacy Beliefs

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Effects of an Occupation-Based Social and Life Skills Session on the Strength of Intimate Partner Violence Victims' Generalized Self-Efficacy Beliefs

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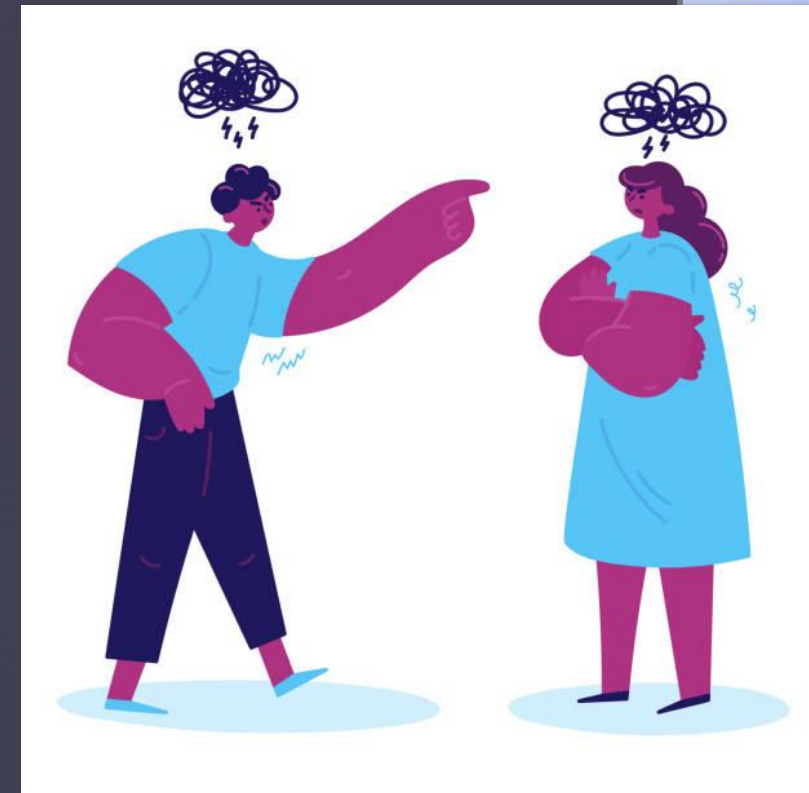
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Definitions

- Intimate Partner Violence (IPV)
 - IPV is a form of domestic violence that occurs when an intimate partner attempts to gain power and control over their current or former romantic partner using a systematic pattern of intimidating and coercive behaviors, intentionally inflicting physical, emotional, or psychological harm to the victim
- Self-Efficacy Beliefs
 - Generalized beliefs about one's ability to perform a specific action and respond to or control environmental demands and challenges.
- Occupations
 - Everyday activities people need, want, or must do



About Me

- Experienced IPV for 7 years
- Certified Domestic Violence Advocate
- Observed occupational deficits during and after in areas such as:
 - Social Participation
 - Leisure Activities
 - Educational Pursuits
 - Rest And Sleep
 - Health Management
 - Self-care ADLS
 - Financial Management
- Expanding social support and occupational participation crucial part of my recovery.
- New Occupations
 - Hapkido (Self-Defense)
 - Hiking
 - Reading
 - Mountain Biking
 - Indoor Gardening
 - Volunteering
 - Painting



Introduction



- In recent years, the national and global prevalence of intimate partner violence (IPV) has increased and affected the health of women in all demographics
- Occupational therapy (OT) has begun to contribute its skill set to IPV cases in settings such as:
 - Crisis Lines
 - Domestic Shelters
 - Sexual Assault Crisis Centers
 - Hospitals
 - Victim Advocacy Programs
 - Individual/Group Counseling
 - Legal Services
 - Parenting Classes
 - Multilingual Services
- OT interventions enable recovery from the effects of psychological IPV in a broad range of areas including
 - Leisure Activities
 - Educational Participation
 - Social Support
 - Work Performance
 - Child-rearing
 - Health Management Tasks
- Interventions targeting social support and self-efficacy improve IPV victims' mental health outcomes for recovery from the abuse.

IPV Effects and Interventions

Many U.S. women have experienced some form of IPV...



Source: Centers for Disease Control and Prevention.

- Lifetime prevalence of psychological abuse for American women estimated to be as high as 48—51%
- One in three (28.8%) women will experience some form of IPV, including physical abuse, stalking, and sexual abuse
- In the United States, data from national surveys suggest IPV is associated with an increased risk of chronic conditions among women including:
 - Asthma
 - Arthritis
 - Stroke
 - Cardiovascular Disease
- Psychological and physical abuse each contribute independently to development of mental health concerns such as:
 - PTSD Symptoms,
 - Depressive Symptoms
 - States Of Anxiety
 - Suicidal Ideations
 - Lower Self-esteem
- Even after leaving the abusive relationship, victims will continue to struggle in their daily routines in nearly every category of occupation, including
 - Activities Of Daily Living
 - Work
 - Health Management
 - Education
 - Home Management
 - Child Rearing
 - Community Mobility
 - Financial Management
 - Social Participation
 - Sleep
 - Leisure Participation
- At the individual and community levels, primary intervention targets for IPV victims tend to focus on fostering well-being, such as:
 - Enhancing Physical Health
 - Stabilizing Mental Health Symptoms
 - Reducing Re-victimization Rates
- Program development involves OTs offering indirect community services, such as providing in-service presentations to staff for training on continuing IPV programming without a staffed OT.

“Retrospective reports, longitudinal research, and treatment dropout research all provide evidence that psychological abuse can exact a *negative effect* on relationships that is as great as that of physical abuse. Finally, psychological abuse almost always precedes physical abuse, so that prevention and treatment efforts clearly *need to address psychological abuse*”

(O'Leary, 1999, p. 4)

Theoretical Framing

Guiding Theory

Model of Human Occupation (MOHO)

- Effective occupation-based model that guided the assessment and intervention of victims of IPV.



Theoretical Framing

Supporting Theories & Approaches



Traumatic Bonding Theory

- Used to describe the formation of a strong emotional attachment for the abuser, referred to as traumatic bonding.

Trauma-informed Care Approach

- Informed the OT project's intervention approaches to address potential trauma that victims have experienced.

The Duluth Model

- Used to depict the power and control wheel, a visual diagram of abuse patterns used to conceptualize abuse tactics for victims and professionals.

*Actually,
I Can*

The Project's Evolution



▸ Project Plan: Community Site

Autumn House Emergency Crisis Shelter, A New Leaf Program

- Accepts IPV victims 24 hours a day, seven days per week throughout Arizona.
- Offers 120 days of housing for up to 20 victims and their children, regardless of their gender or sexual orientation.

The Autumn House Emergency Crisis Shelter provides:

- Lay Legal Advocacy Services
- Case Management Support Services

The Autumn House Emergency Crisis Shelter Staffs:

- Program Managers, Social Workers, and Shelter Advocates.
- The Autumn House Emergency Crisis Shelter does not currently employ an OT for their program and had not previously had an OT intern prior to this project.



a new leaf
helping families, changing lives

Project Plan: Group Format

- Depending on resident availability and willingness to attend the sessions, the group or individual sessions may have 1—8 individuals.
- Engage in various life skill activities and participate socially with other members during sessions.
- Session materials include a group leader guide and a participant packet.

Session Topics	Sub-Topics
Self-Awareness and Professional Behaviors	<ul style="list-style-type: none"> Strategies for Practicing Self-awareness Professionally and Personally Self-Awareness Self-Assessment Cognitive Reframing Identifying Stressors and Using The Circle of Control
Mindfulness, Meditation, and Spirituality	<ul style="list-style-type: none"> Diaphragmatic/Belly Breathing Deep Breathing Body Scan The Five Senses Exercise Mindful Eating: The Raisin Exercise
Self-Care and Leisure Activities	<ul style="list-style-type: none"> Self-Care Inventory Fill Your Own Cup (Exploring Self-care Practices) Creating a Self-Care and Leisure Plan Leisure and Hobby Exploration
Healthy Relationships and Communication Skills	<ul style="list-style-type: none"> Negotiating relationships Becoming a Healthy Communicator with Active Listening Social Support Self-Evaluation Identifying A Social Support System Healthy Versus Unhealthy Relationships
Sense of Purpose, Routines, and Habits	<ul style="list-style-type: none"> Evaluating Current Habits and Routines Setting an Implementation Intention Prioritizing Tasks Developing a Habit and Routine Plan



Methods



Program Development

- Conducted weekly sessions with IPV victims at Autumn House Emergency Crisis Shelter to influence positive changes in:
 - Self-efficacy Beliefs
 - Social Skills
 - Life Skills

Outcome Measure

- The Generalized Self-Efficacy Scale (GSES)
 - Quantitatively measured the strength of IPV victims' generalized self-efficacy beliefs pre- and post-session to determine the effectiveness of the OT project's sessions (Schwarzer & Jerusalem, 1995).

Inclusion Requirements Included:

- Autumn House Emergency Crisis Shelter Resident
- English-speaking
- Sufficient Cognition To Independently Complete Forms And Activities
- Able To Communicate With Others.

Data

- Survey answers collected via a paper form, scored, and input into a Microsoft excel sheet.



► Preliminary Results and Discussion

- The Generalized Self-Efficacy Scale (GSES) administered pre- and post-session was used to determine if participants made improvements in their self-efficacy beliefs during the session (Schwarzer & Jerusalem, 1995).
- The preliminary results tentatively suggest that the OT project has improved self-efficacy beliefs post-session.
- The improvement in self-efficacy beliefs indicates that a program focused on developing IPV victims social and life skills may promote recovery through enhancing functional independence.
- The remainder of the capstone will be spent providing the remaining group sessions and then educating case managers on how to perform these groups with the updated materials.

Client	Session	GSES: Pre-test	Pre-test Perceived Self-efficacy	GSES: Post-test	Post-test Perceived Self-efficacy	Change in Self-efficacy
1	1	17/24	70.00%	18/24	75.00%	5.00%
2	1	30/40	75.00%	31/40	78.00%	3.00%
1	2	33/40	82.50%	34/40	85.00%	2.50%
2	2	28/40	70.00%	29/40	73.00%	3.00%
1	3	39/40	98.00%	39/40	98.00%	0.00%
2	3	32/40	80.00%	35/40	88.00%	8.00%

Preliminary Takeaways, Project Limitations, and Sustainability

Takeaways

- Increased group participation and attendance.
- Residents share understanding of topics during case management meetings.
- Group materials provided opportunities to practice the skills discussed in group.

Limitations

- Limited number of participants due to COVID-19 restrictions.
- Unable to provide groups during unit renovations.
- Results only indicate if change was made and not if the change persisted.
- Results only applicable to autumn house residents and cannot be generalized to other populations.

Sustainability

- Site does not presently employ an OT but materials are reviewed, observed, and approved by case manager who typically acts as the group leader.
- Site appreciated OT lens to address areas of life skills and include activities to practice these skills within the offered groups.
- All sessions are uploaded onto the Site's hard drive and printed copies are available within the group binder, for reference.



Questions?



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