

Executive Summary

Empowering Recovery: Restoring Psychological Wellbeing for Domestic Violence Survivors



Dayjha Hill, OTS, Carrie Miller OTD, OTR/L, Sheretta Willard, & Jamie Bergner OTD, OTR/L, COMT &



Abstract

Domestic violence (DV) claims more than 1,500 lives each year in the United States (Huecker et al., 2023). DV is defined as any pattern or incidents of controlling, threatening, violent, or abusive behavior between individuals who have been intimate partners or family members (Bedford et al., 2021). This capstone explores the impact of psychological abuse on DV survivors through program implementation and hands-on experience at a domestic violence shelter. Outcomes demonstrate the value of occupation-based programming in supporting survivors path to recovery and promoting participation in meaningful occupations.

Brief

Psychological abuse in domestic violence is strongly associated with mental-health symptoms and reduced self-esteem. This brief provides an overview of the capstone project and experience implemented to address barriers and learn more about this population.

Statement of Capstone Problem

Individuals who have experienced psychological abuse demonstrate occupational deprivation for social participation and have altered coping strategies, which result in decreased participation in valued social relationships (Chu et al, 2023; Griffiths, 2019; Njelesani et al, 2021).

Capstone Purpose Statement

The purpose of this *program development and evaluation* type capstone project is to increase social participation and coping strategies in individuals who have experienced psychological abuse. This capstone will result in improved social participation for groups of domestic abuse survivors in community-based environments. This capstone intends to improve valued relationships for survivors of psychological abuse through innovative program development and evaluation by training in coping strategies. This capstone intends to improve valued relationships for survivors of psychological abuse through innovative program development and evaluation by training in coping strategies. This capstone will serve as an evidence-based model for promoting occupational identity in survivors to develop effective coping strategies for establishing healthy social relationships.

Capstone project outcomes

To assess the program, the Generalized self-efficacy scale (GSE), the Multidimensional scale of perceived support (MSPSS), and satisfaction surveys were utilized (see **Table 1** & **Figure 1**).

Table 1

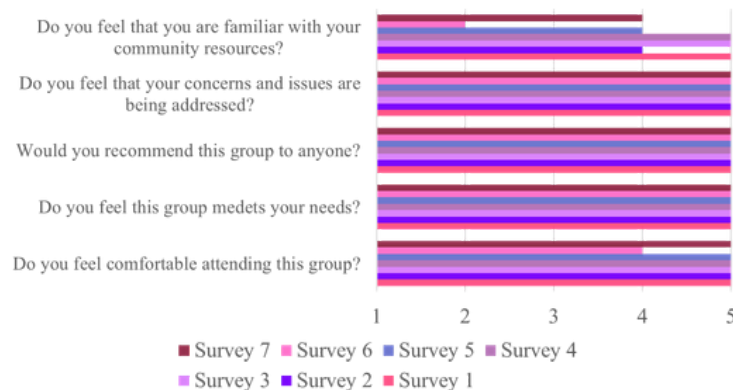
Pre- and Post- assessments

| Assessment | GSE Mean | MSPSS Mean |
|-----------------|----------|------------|
| Pre | 33.5 | 54 |
| Post | 32 | 38 |
| Question 1 pre | 3 | 5.5 |
| Question 1 post | 3 | 3.3 |
| Question 2 pre | 3.34 | 5.6 |
| Question 2 post | 3 | 4.3 |

Note. The specific questions listed in the table represent the questions that connection to the focus of the capstone program. The GSE is scored 1–4 across 10 items (total possible score: 40), and the MSPSS is scored 1–7 across 12 items (total possible score: 84). Data represented is based on the number of assessments/forms fully completed throughout the 8-week program. Post-assessments were completed by those who attended two or more sessions, not all post-assessments were completed as Survivor are able.

Figure 1

Post satisfaction surveys



Note. Surveys were handout out to complete after the group session was over to evaluate the effectiveness of the group and provide feedback.

Findings provided insight on how the path to recovery is not always linear; survivors of DV can experience difficulties at different points when learning to grow. This is consistent with existing research related to stages of change. The Transtheoretical Model of Change (TTM) suggests that changing behavior is nonlinear and instead a cyclical process (Prochaska et al., 1992). An individual can cycle back through each stage as many times as necessary.

Capstone experience outcomes

This capstone experience provided in-depth knowledge of the power of occupation, emphasized the need for advocacy for this population, and highlighted opportunities for occupational therapy to lead in providing support and services. It provided a look into the court process, the implications of hotline calls, the impact of the social networking system in the shelter, and how non-profit organizations obtain resources for their survivors.

Key findings

- Survivors benefit from occupation-based and trauma-informed program implementation.
- Abuse and/or trauma can cause a decrease in occupational identity.
- Occupational therapy has an important role in DV survivors' path to recovery.
- Change is dependent on the person.

Limitations

Participation retention was influenced by daily turnover among DV survivors and fluctuating shelter occupancy. Data reflected the perspectives of individuals within a single shelter; thus, findings may be transferable but are not generalizable. Survivors often experience multiple forms of abuse beyond psychological abuse. Despite limitations, the project offers valuable insight into occupation-based approaches to supporting domestic abuse survivors.

Critical bottom line

This capstone experience provided in-depth knowledge of the power of occupation, emphasized the need for advocacy for this population, and highlighted opportunities for occupational therapy to lead in providing support and services.

Implications for Occupational Therapy

1. Engaging in meaningful occupations supports the restoration of occupational identity to promote a healthy path to recovery.
2. This capstone demonstrates how Occupational Therapy contributes to mental health settings by integrating occupation-based advocacy within a DV shelter.
3. Occupational therapy practitioners (OTP) can implement trauma-informed, client-centered, and occupation-based group sessions to promote safety and empowerment.
4. Findings highlight that social participation can be strengthened by OTPs by addressing environmental and personal barriers that limit survivors' engagement.
5. OTP can take leadership roles in administration and program & evaluation development within an interdisciplinary team.

Scan this QR code for the capstone defense video



SCAN ME



References

- Allen, A. B., Robertson, E., & Patin, G. A. (2017). Improving emotional and cognitive outcomes for domestic violence survivors: The impact of Shelter Stay and Self-Compassion Support groups. *Journal of Interpersonal Violence, 36*(1–2), NP598–NP624. <https://doi.org/10.1177/0886260517734858>
- Ballan, M. S., & Freyer, M. (2020). Occupational deprivation among female survivors of intimate partner violence who have physical disabilities. *American Journal of Occupational Therapy, 74*(4), 7404345010p1-7404345010p7. <https://doi.org/10.5014/ajot.2020.038398>
- Bedford, H., Boole, L., Bradley, S., Chung, E., Elliman, D., Entwistle, F., Filer, L., Hamilton, H., Harris, M., Hicks, S., Hodge, P., Hunt, R., Kendall, N., Luchmun, A., Miller, S., Millward, K., Molloy, S., Richardson, P., Robinson, A., & Rogers, M. (2021). Chapter 9: Service users with extra needs: Domestic violence. *Oxford Handbook of Primary Care & Community Nursing (9780198831822)*, 3rd Edition, 450–451.
- Cuevas, C. A., Bell, K. A., & Sabina, C. (2014). Victimization, psychological distress, and help-seeking: Disentangling the relationship for Latina victims. *Psychology of Violence, 4*(2), 196–209. <https://doi.org/10.1037/a0035819>
- Griffiths, A. (2019). Domestic violence in teenage intimate relationships: Young people's views on awareness, prevention, intervention and regaining one's sense of wellbeing. *Educational and Child Psychology, 36*(1), 9–26. <https://doi.org/10.53841/bpsecp.2019.36.1.9>
- Hamel, J., Cannon, C. E. B., & Graham-Kevan, N. (2023). The consequences of psychological abuse and control in intimate partner relationships. *Traumatology an International Journal, 31*(1), 1–17. <https://doi.org/10.1037/trm0000449>
- Njelesani, J., Teachman, G., & Bangura, I. R. (2021). "The Strength to Leave": Women with disabilities navigating violent relationships and occupational identities. *American Journal of Occupational Therapy, 75*(4). <https://doi.org/10.5014/ajot.2021.045542>
- Prochaska, J.O., DiClemente, C.C., & Norcross, J.C. (1992). In search of how people change: Applications to addictive behaviors. *American Psychologist, 47*, 1102–1114. PMID: 1329589.
- Spencer, C., Mallory, A. B., Cafferky, B. M., Kimmes, J. G., Beck, A. R., & Stith, S. M. (2019). Mental health factors and intimate partner violence perpetration and victimization: A meta-analysis. *Psychology of Violence, 9*(1), 1–17. <https://doi.org/10.1037/vio0000156>
- Yastrbas-Kaçar, C., Çınar, P., Üzümcüker, E., & Yılmaz-Karaman, İ. G. (2023). Exposure to psychological intimate partner violence: Resilience to depression is related to social support and learned resourcefulness. *Journal of Interpersonal Violence, 39*(9–10), 1999–2016. <https://doi.org/10.1177/08862605231213401>