

Legacy Project: The Survivor Resource Center

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Introduction

The Survivor Resource Center provides counseling, legal and medical advocacy, case management, and awareness/prevention programs for community members and professionals in order to assist child, teen, and adult sexual assault victims as well as their loved ones. The services are offered 24/7, fully free of charge, and in a discreet manner. A 24-hour local hotline run by the Survivor Resource Center is fully staffed with trained locals and volunteers who are prepared to offer assistance and respond to inquiries. The SRC is a nonprofit organization dedicated to eradicating sexual abuse in the community. It is funded by grants and community donations. In Illinois, Vermilion, Edgar, and Clark counties are served by SRC. The main purpose of the Survivor Resource Center is to assist sexual assault victims by offering counseling and advocacy services, as well as to raise awareness and prevent sexual assault through specialized education programs. The ultimate goal is to put an end to sexual assault in the community. The articles the nursing students have researched relates to The Survivor Research Center by focusing care on the victims of sexual abuse.

Student Name: Jakarra Dandridge

Article Name: Perceived Stress and Mental Health: The Mediating Roles of Social Support and Resilience Among Black Women Exposed to Sexual Violence

Review 1:

Violence against women of color and the effect on their mental health is disproportionately severe. Depression and post-traumatic stress disorder symptoms are correlated with higher perceived stress levels (PTSD) (Catabay et al., 2019). Social support and resilience may mitigate the detrimental effects of perceived stress on women's mental health. This study compares Black women's mental health results to their perceptions of stress. This study also

examines resilience and social support as moderators of the relationship between perceived stress and mental health. According to this study, it is possible to lessen the detrimental consequences of sexual violence on Black women's mental health by utilizing social support and resilience (Catabay et al., 2019). Both are social determinants that may be targeted, and our research shows that social support and resilience are much lower among women who have experienced sexual violence. It is imperative to create therapies that aim to lessen the adverse effects of stress on mental health.

Student Name: Jakarra Dandridge

Article Name: Post-Traumatic Stress Disorder in Victims of Sexual Assault With Pre-Assault Substance Consumption: A Systematic Review

Review 2:

Post-traumatic stress disorder (PTSD) and substance abuse are common co-occurring disorders in sexual assault victims (Gong et al., 2019). Substance abuse can occur before and after an assault. Pre-assault substance use may influence the development of PTSD later on. This review aims to provide an overview of current knowledge about the effects of acute substance intoxication and chronic pre-assault problematic substance use on PTSD symptoms in sexual assault victims. Overall, the review of papers supported our hypothesis that acute and chronic pre-assault problematic substance use is associated with fewer initial PTSD symptoms but a slower improvement over time, resulting in slower overall PTSD recovery (Gong et al., 2019). Acute substance intoxication and chronic pre-assault problematic substance use appear to influence the development of PTSD symptoms in sexual assault victims. They emphasize the importance of developing early interventions and routine screening and assessment for PTSD and pre-assault substance consumption.

Student Name: Mariah Flores

Article Name: Intimate Partner Violence

Review 1:

Women of all ages are susceptible to the widespread and potentially fatal issue of intimate partner violence (IPV). Intimate partner violence (IPV) is physical or sexual assault, stalking, or psychological aggression (Kyle, 2023). In the US, one in four women will encounter IPV at some point in their lives (Kyle, 2023). Compared to people who have never experienced violence, people who experience IPV have higher rates of adverse physical and mental health consequences (Kyle, 2023). Regardless of gender, sexual orientation, age, ethnicity, or socioeconomic status, IPV impacts all groups. Understanding IPV risks, such as young age, heavy drug/alcohol use, low education or income, low self-esteem, and aggressive or angry behavior, helps identify which patients may require further care, attention, and prevention measures (Kyle, 2023). Patient satisfaction and outcomes may be enhanced if physicians educate themselves on the impact, risks, treatments, and patient preferences around IPV talks.

Student Name: Mariah Flores

Article Name: Domestic Violence and Its Effects on Women, Children, and Families

Review 2:

Despite having similarities in their dynamics and effects, domestic violence (DV) and intimate partner violence (IPV) are distinct. DV is, by definition, a domestic incident involving a parent and kid, siblings, or even roommates (Walker-Descartes et al., 2021). Between amorous couples who may or may not be in the same household, IPV occurs. It encompasses aggressive or threatening behavior or abuse between adults in heterosexual or same-sex relationships. It is "physical, sexual, or psychological injury by a current or former partner or spouse (Walker-

Descartes et al., 2021)." IPV also includes emotional abuse, such as intimidation or controlling actions with the desired endpoint of isolation from family and friends or financial control, whereas DV does not (Walker-Descartes et al., 2021). Neither IPV nor DV is limited to physical aggression, such as striking, kicking, and beating.

Before the age of 25, 71.4% of women and 58.2% of men experience their first episode of IPV (Walker-Descartes et al., 2021). 23.2% of women and 14.1% of men experience the episode before 18.5 years old (Walker-Descartes et al., 2021). Although in the United States, 13.8% of males have also experienced severe intimate relationship abuse at some point, women are at least three times more likely than men to sustain injuries from partner violence (Walker-Descartes et al., 2021). Children are often involved in these instances of violence, whether because of watching or being brought into the situations. Children need nurturing in a secure setting that guards against the psychological, cognitive, behavioral, and physical issues linked to experiencing violence. Healthcare providers can screen, detect, and manage this disorder in impacted families by educating communities on the harmful impacts of exposure to violence along the DV/IPV continuum.

Student Name: Marianna Craighead

Article Name 1: Who Helps the Helpers? Social Support for Rape Crisis Advocates

Review 1:

The staff who helped survivors experienced trauma. Secondary exposure to trauma may adversely affect rape victim advocates' well-being (Houston-Kolnik et al., 2019). Self-care can help to mitigate these adverse effects on advocates' well-being, and prior research suggests that social support is a crucial aspect of advocates' self-care (Houston-Kolnik et al., 2019).

Advocates also experienced a variety of barriers to obtaining positive support from informal

support providers, including fear of burdening providers and a reluctance or lack of preparedness of their support providers to speak about the issue (Houston-Kolnik et al., 2019). This highlights the importance of social support systems for advocates and potential barriers that may be addressed to reduce service provider burnout and vicarious trauma (Houston-Kolnik et al., 2019).

Student Name: Marianna Craighead

Article Name 2: Community Approaches to Sexual Assault: VAWA's Role and Survivors' Experiences

Review 2:

Rape and sexual assault have been and remain ubiquitous social problems. The national Intimate Partner and Sexual Violence Survey, 44% (one in five) of women and 25% of men experience some form of contact with sexual violence (Zweig et al., 2021). Over the past five decades, the focus on crime and the support of victims has grown (Zweig et al., 2021). A sexual assault victim decides to seek medical care immediately, contact a hotline, seek services from a sexual assault service provider, or report the incident to the police (Zweig et al., 2021). Most choose not to reach out to any formal sources of help (Zweig et al., 2021). Victims reported to police only 25% of rapes and sexual assaults disclosed during the 2018 National Crime Victimization Survey, and only 14% of those cases get prosecuted through the court (Zweig et al., 2021). Reporting sexual assault to the police triggers processes that may have both positive and negative impacts on victims' lives, so victims are often reluctant to take this step without serious consideration; in addition, a survivor's doubt that reporting will result in justice may contribute to low reporting rates (Zweig et al., 2021). Over-polling communities, predominantly low-income and communities of color, and distrust in the police can prevent people from

reporting victimization (Zweig et al., 2021). Advocates and other service providers have reported that police bias toward these communities influences their clients' willingness to report assaults to the police (Zweig et al., 2021).

Student Name: Paiton Frerichs

Article Name: Women's Advocates and Shelter Residents: Describing Experiences of Working and Living in Domestic Violence Shelters

Review 1:

Domestic abuse for women who have endured violence and abuse from intimate partners rely on shelters as an essential service. This study focuses on domestic violence abuse towards women and used data from qualitative interviews with six women's advocates and six shelter residents. These women's rights activists explain how they give women residents time to settle in, give them the freedom to choose their own goals and actions, and then assist them in making connections with other community resources (Hughes, 2020). These shelters also focus on providing peace and comfort to women that have gone through abuse with their partners. The women residents report in these interviews that the primary interventions they find helpful in their stay are to have a place where they feel cared for, safe, respected, and not judged on their situation (Hughes, 2020). The results also show that not only is the environment necessary to these women residents, but it is the relationship with the advocates for them as well. These shelters are an essential part of our communities as they improve not only the victims' quality of life but can also improve their mental health and prevent further harm.

Student Name: Paiton Frerichs

Article Name: Housing Interventions for Women Experiencing Intimate Partner Violence: A Systematic Review

Review 2:

Abuse or hostility in a romantic relationship is known as intimate partner violence. It can be from a single violent incident that might have long-lasting effects to repeated severe incidents that endure for an extended period; the frequency and severity can differ. There are many types of this abuse, such as physical violence, sexual violence, stalking, or psychological aggression. Frequently when women are in an abusive intimate relationship, they are homeless, which is the leading cause of women's homelessness. In this study, Lancet Public Health did a systematic review of housing interventions for when experiencing intimate partner violence. It revealed that with any intimate partner housing interventions, there was no accumulated evidence of drawbacks. Instead, there were many advantages, including mental health outcomes, partner separation intent, safety, and decreased stress in housing and partner-related stress (Yakubovich et al., 2022).

Student Name: Christina Oakley

Article Name: An Integrative Review of Safety Strategies for Women Experiencing Intimate Partner Violence in Low-and-Middle-Income Countries

Review 1:

Intimate partner violence is prevalent and a significant source of morbidity and mortality for women across the globe. Safety planning is a cornerstone of harm reduction and violence support in many upper-income countries (Wood et al., 2019). In this study, there is a review of literature emphasizing safety strategies in low-and-middle-income countries. Four distinct strategies emerged: engaging informal networks, removing the stressor/avoidance, minimizing the damage through enduring violence, and building personal resources. Women utilize many strategies to reduce harm and maximize safety; however, little evidence supports the

effectiveness of reducing further violence and mitigating health consequences within these settings (Wood et al., 2019). Women may be unable to leave the confines of their marriage or relationship. However, they are able and interested in employing tactics that can help shift the power balance within their relationship and enhance safety and healing (Wood et al., 2019).

Student Name: Christina Oakley

Article Name: Intimate Partner Violence and Women's Health

Review 2:

Intimate partner violence (IPV) affects 15-71% of women over their lifetime (Lutfendord, 2019). IPV can result in stress, anger, hostility, and other negative emotions. IPV includes physical and sexual abuse, psychological abuse, and controlling behaviors such as reproductive coercion or stalking (Lutfendord, 2019). Intimate partner violence varies in frequency and severity, occurring as occasional incidents or cycles over many years. Interventions involving support services with empowerment, home visitation, mentoring, and counseling are more effective in reducing violence, abuse, and harm to women (Lutfendord, 2019). IPV partner violence can also exert adverse health effects on the family, with children experiencing physical, psychological, and social effects related to exposure to violence (Lutfendord, 2019). Intimate partner violence is a fundamental problem in women's health, and there should be continued vigilance and support for these victims to stop this epidemic. Women's health practitioners are fully equipped professionals with the knowledge and tools to make a lasting difference.

Student Name: Anthony Morgan

Article Name: Toward Affirming Care: An Initial Evaluation of a Sexual Violence Treatment Network's Capacity for Addressing the Needs of Trans Sexual Assault Survivors

Review 1:

The transgender community has many obstacles to acceptance, and healthcare is no exception. Some providers lack the cultural competence that trans individuals of sexual assault require. Examples of incompetence include victim blaming and miss gendering. These survivors also experience discrimination due to postponement and even denial of care (Du Mont et al., 2021). The study evaluates the readiness of thirty-five healthcare facilities and their providers for transgender survivors of sexual violence in Ontario. Approximately 70.4% of those facilities have policies that support survivors (Du Mont et al., 2021). Despite most hospitals and clinics supporting victims, providers that promote programs at those establishments voice the need for further education for all their healthcare workers (Du Mont et al., 2021). Further education is necessary to decrease discrimination and provide survivors with adequate support.

Student Name: Anthony Morgan

Article Name: A Needs Assessment and Educational Intervention Addressing the Care of Sexual Assault Patients in the Emergency Department

Review 2:

Emergency department (ED) nurses are usually the first providers that victims of sexual violence see. Care for victims is difficult because most ED nurses are not sexual assault nurse examiners (SANEs) (Chandramani et al., 2020). SANEs can conduct forensic analysis, trauma-related care, and medical management and understand laws and hospital policies for sexual violence (Chandramani et al., 2020). Untrained nurses can retraumatize patients and conduct improper forensic exams; medical management was the only consistent factor between SANE and non-SANE nurses (Chandramani et al., 2020). The study implements SANE-led education for ED nurses and compares the quality of care for sensual assault victims before and after the intervention. Only 29% of ED nurses in the study were comfortable doing a forensic exam, and

55-60% of ED nurses had an increased chance of retraumatizing survivors of sexual violence (Chandramani et al., 2020). After the implementation, patients rarely experienced retraumatization, and forensic exams were completed correctly. Quality of care for sexual assault victims increased significantly.

Student Name: Marianna Kalembasa

Article Name: Knowledge, Information Needs and Risk Perception About HIV and Sexually Transmitted Disease After an Education Intervention on Italian High School and University Students

Review 1:

Sexually transmitted diseases (STDs) are becoming more prevalent among adolescents. This increase in prevalence is believed to be linked to the lack of education about STDs and safe sex to adolescents. This study evaluated how knowledge, information needs, and risk perception about HIV and STDs can change after targeted education interventions for students aged 15-24 (Zizza et al., 2021). Results showed that an improvement in knowledge was found in all groups, with statistically significant knowledge score differences between the four groups in 60% of the items (Zizza et al., 2021). More than 94% of the students consider promoting information on these issues worthwhile. Receiving this information generated awareness and safety in more than 85% of high-school students and 93% of university students (Zizza et al., 2021). This study provides insights into the design of future targeted education programs.

Student Name: Marianna Kalembasa

Article Name: Nurses' Perception of Helpful and Unhelpful Communication with Rape Victim Advocates

Review 2:

Nurse advocacy for victims of rape has been shown to provide support for these victims. This study explored sexual assault nurse examiners (SANEs) and non-SANEs' perceptions of helpful and unhelpful communication with advocates, and the impact these perceptions have on the nurse, the nurse–advocate relationship, and the nurse–patient relationship (Hoffman et al., 2023). Data were collected via semi structured interviews, and Inductive thematic analysis were used to identify themes relevant to nurses' perceptions of communication with advocates (Hoffman et al., 2023). Results showed that nurses perceived advocates communicating with them throughout a patient's stay as helpful, while unhelpful strategies interrupted nurses' work and hindered nurse-advocate and nurse–patient relationships. Nurses suggested tangible communication strategies advocates can employ to improve nurse–advocacy relationships and patient care. However, some strategies named as unhelpful may be a necessary part of an advocate's role in service to survivors (Hoffman et al., 2023). More research and intervention are needed to promote nurse-advocacy collaboration.

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