

Brief Psychotherapeutic Cognitive-Behavioral Program for IPV Survivors

Crespo, M & Arinero, M. (2010)

<p>Description of intervention</p>	<p>Crespo and Arinero evaluated the long-term efficacy of two versions of a brief psychotherapeutic cognitive-behavioral program for women who were victims of intimate partner violence. Women were randomized into one of two groups - one that included a module on exposure techniques and the other, a module on communication skills training.</p> <p>The program is comprised of seven modules; six common modules and one specific module involving either exposure techniques or communication skills. The six common modules cover the following: (a) diaphragmatic breathing exercises to control arousal; (b) improving mood by planning to increase pleasant activities; (c) improving self-esteem; (d) restructuring of biased cognitions; (e) increasing problem-solving skills for an independent life; and (f) psychoeducation about violence in intimate relationships. In between sessions women received written materials with homework exercises. Exposure therapy addressed the posttraumatic symptoms of re-experiencing and avoidance. Communication skills training targeted feelings of anger and the ability to express and communicate.</p> <p>The program involved eight 90-minute weekly sessions plus a final relapse prevention session. A group format was used. Each group was composed of 3-5 women and was led by a female therapist.</p> <p>The first session focused on introductions, group rules, information about IPV, and information about the intervention format. Subsequent sessions started with a check-in and review of previous session homework, followed by discussion and practice of new cognitive-behavioral skills, and ended with a diaphragmatic breathing exercise.</p>
<p>What was the intervention designed to do?</p>	<p>The program was designed to reduce posttraumatic symptoms and reduce symptoms of depression and anxiety in women who were survivors of IPV.</p>
<p>Underlying conceptual or theoretical model(s) (did any theory motivate the creation of this program?)</p>	<p>The content of the program drew from the empirical evidence of effective psychological treatments to improve the emotional status of survivors of other traumatic events (e.g. rape) as well as from The Dual Representation Theory of Posttraumatic Stress Disorder by Brewin, Dalgleish & Joseph (1996).</p>

Rationale for developing the intervention	The researchers sought to examine the efficacy of treatment programs for female survivors of IPV who had symptoms of posttraumatic stress but who did not meet diagnostic criteria for PTSD. Communication skills training was evaluated as an alternative approach to exposure techniques given that some women reject or are unable to complete exposure therapy.
How did you involve survivors and/or advocates in the development of the intervention?	A pilot study was completed evaluating the treatment program, materials, and instruments. Lessons learned from this pilot were used to revise the program implemented in the 2010 study.
Who is the intervention designed to help?	IPV survivors
What are the eligibility criteria for the intervention study?	<p>Inclusion Criteria:</p> <ul style="list-style-type: none"> • Being a woman, 18 years of age or older • Experience of IPV by a male intimate partner • Presenting posttraumatic symptoms without meeting all diagnostic criteria for PTSD <p>Exclusion criteria</p> <ul style="list-style-type: none"> • Concurrent psychotherapy • Diagnosis of PTSD according to DSM-IV
Rationale for specific eligibility (vs. inclusion/exclusion criteria)	Women who met all diagnostic criteria for PTSD according to DSM-IV were referred to a parallel treatment study specifically designed for survivors of IPV with PTSD. Women excluded for other reasons were referred to specific services based on her circumstances.
Study Design	<ul style="list-style-type: none"> • Two-group, randomized pre-posttest design • Assessments were administered before treatment, at posttreatment, and at four follow-ups (1, 3, 6, and 12 months), in individual 90-minute sessions.

<p>Outcome variables and Measures</p>	<ul style="list-style-type: none"> • Sociodemographic data (Record of personal antecedents) • History of IPV (Interview Guideline for Victims of Domestic Maltreatment) • Posttraumatic stress symptoms (Severity of Posttraumatic Stress Disorder Symptoms Scale) • Depression (Beck Depression Inventory, BDI-II) • Anxiety (Beck Anxiety Inventory) • Alcohol consumption (CAGE Questionnaire) • Self-esteem (Rosenberg’s Self-Esteem Scale) • Expression of anger (Anger Expression Subscale from the State-Trait Anger Expression)
<p>Level of scientific rigor</p>	<p>Quasi-experimental design Randomized: Yes but differences between groups Appropriate outcome measures: Yes Active Control Group: Not for the overall intervention Effect size: Large for PTSS and Depression</p>
<p>What adaptations were made specifically for IPV survivors?</p>	<ul style="list-style-type: none"> ○ Team consulted with experts with knowledge specific to trauma and IPV ○ Psychoeducation was provided on IPV and the potential effects of experiencing IPV ○ The intervention was adapted to participants’ specific circumstances and was made shorter to allow women to resume their daily activities as soon as possible
<p>Considerations and/or adaptations related to culture and identity</p>	<p>This study was carried out in Madrid, Spain and was completed in Spanish. All the women in the study were Spanish. Specific therapeutic materials were designed for women with literacy difficulties in Spanish</p>
<p>Considerations and/or adaptations related to experiencing multiple types of trauma (individual and collective)</p>	<p>This program could be adapted for survivors of other traumas (both individual and collective). Specific content about IPV can be modified (e.g. psychoeducation); also the emphasis on particular components can be changed (e.g. improving self-esteem could be less relevant in natural disasters). Moreover, individual or group applications should be decided according to the type of trauma and its circumstances.</p>
<p>What is the mode of delivery?</p>	<p>Group therapy</p>

<p>What were the key findings?</p>	<ul style="list-style-type: none"> • Posttraumatic symptoms and symptoms of depression and anxiety decreased from pre- to post-treatment for both groups. These decreases were more pronounced in the exposure group as compared to the communication skills group. <ul style="list-style-type: none"> ○ These results were maintained at all follow-up points for both conditions • Significant within-group differences were achieved for posttraumatic symptoms at 1-month follow-up ($p < .05$); at post-treatment for symptoms of depression ($p < .01$); at post-treatment for symptoms of anxiety ($p < .05$); and at post-treatment for anger expression ($p < .05$). These differences reflected more pronounced decreases for the exposure group • No significant differences on self-esteem scores were recorded
<p>Author's reflection on study results/ findings</p>	<ul style="list-style-type: none"> • Though results showed more pronounced decreases in symptoms for the exposure group, differences between treatments, tended to diminish at 6- and 12-month follow-up. • The study shows the need for psychological treatment for IPV survivors who do not fulfill diagnostic criteria for PTSD but who nonetheless experienced symptoms that impacted their functioning and caused them distress. It is important that this group of women not be excluded from therapy; their inclusion in therapeutic programs must be guided by an in-depth assessment of their needs and psychological status.
<p>Implementation challenges and strategies for addressing those challenges</p>	<ul style="list-style-type: none"> • High percentage of dropouts (26% before treatment completion) <ul style="list-style-type: none"> ○ Although similar to that of other studies, a high dropout rate is an important challenge in providing treatment for survivors of IPV. This may be related to the specific circumstances women find themselves in (undergoing a transition period) and/or not viewing this as a priority • Moreover, a group format does offer the type of scheduling flexibility that women might require at this time in their lives. The authors therefore developed an individual format of the program to make it more flexible.
<p>What, if any, professional qualifications are required to deliver the intervention?</p>	<ul style="list-style-type: none"> • Interventions were delivered by a therapist previously trained in the program

What intervention-specific training is required to use this model?	Clinical psychology training and specific knowledge about IPV
In what settings has the intervention been delivered?	Women were recruited from several organizations and institutions in Madrid. These organizations offered programs for women who had experienced IPV.
Ongoing research regarding this intervention	Comparison of the program with the exposure therapy module in group vs. individual format (publication in preparation).
Author's recommendations and reflections	Besides treating psychological symptoms and increasing well-being among IPV survivors, it is also necessary to facilitate processes of change to support women in leaving an abusive partner and overcoming the effects of violence. This should be a fundamental therapeutic goal when working with this group of women. Nevertheless, interventions specifically addressing these issues are very scarce and very often lack enough empirical support. Thus, research on this topic needs to expand therapeutic goals. Research is also needed to support the development and evaluation of theoretically and empirically grounded interventions.
Citations – article of intervention	<p>Crespo, M., & Arinero, M. (2010). Assessment of the efficacy of a psychological treatment for women victims of violence by their intimate male partner. <i>The Spanish Journal of Psychology</i>, 13(2), 849.</p> <p>Additional information (pilot study): Arinero, M., & Crespo, M. (2004). Evaluación de la eficacia de un programa de tratamiento psicológico para mujeres víctimas de maltrato doméstico: estudio piloto [Assessment of the efficacy of a psychological program for female victims of domestic violence: Pilot study]. <i>Psicología Conductual/Behavioral Psychology</i>, 12, 233-249.</p>
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