

A Study of the Effectiveness of an Internet Based Decision Aid for Abused Women

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What Is The IRIS Project?

Nancy Glass, PhD, MPH, RN, FAAN

Internet Resource for Intervention and Safety (IRIS)

- NIMH 5-year Randomized Controlled Trial
- Evaluating the effectiveness of an internet-based safety decision aid for abused women
- Outcomes: decisional conflict, safety seeking behaviors, ongoing exposure to violence, mental health

Multi-Site Partners

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What is a Decision Aid?

- Used by healthcare practitioners to facilitate decisionmaking when the best course of action is unclear
- Guides patients through available options, potential harms and benefits
- Clarifies personal values allowing patients to determine which factors are most important to them.
- Complements, rather than replaces, counseling from a health practitioner or advocate

Decisional Conflict

- A state of uncertainty about the course of action to take
- Occurs when outcomes are not clear and value tradeoffs are required



Sounds like what we hear from IPV survivors....

Making Difficult Safety Decisions

- Abused women's decisions about safety seeking actions are complex and multifaceted (Dutton et al, 2004).
- Women planning to leave or have already left an abusive relationship need different safety strategies from those who are planning to stay.
- Women's safety decisions are not linear, but dynamic and change over time (Dienemann et al., 2002, 2003).
- Decision involves consideration of complex individual, family, community and social (Campbell et al., 1998).

Safety Planning Works

Increased empowerment and increased safety behaviors, which leads to...

Decreased exposure to IPV, and thus...

Better outcomes for women and children

Our Challenge as Practitioners, Advocates and Researchers

To assist abused women to develop an <u>individualized</u> safety action plan for themselves and their children based on their <u>priorities</u> and <u>level of</u> <u>danger</u>...



and to help her adapt her plan when her situation changes

Developed a Safety Decision Aid

- To help woman in abusive relationships plan for their and their children's safety.
- To gain understanding of safety priorities
- Evaluate impact of an internet based decision aid on safety decision-making process, mental health outcomes, and violence exposure
- Includes a danger assessment, a priority setting activity, tailored safety plan and local resources

Development of a Safety Decision Aid

Reviewed the evidence on safety and preferences

Developed evidence-based decision safety decision aid

Evaluated decision aid with advocates

Evaluated decision aid with survivors who have already made the decision

Currently testing decision aid with survivors ready to make a decision

The IRIS Project

- 720 women in AZ, MD, MO, OR
- English and Spanish speaking, over 18
- Currently in an abusive relationship
- Have access to a safe computer



Randomized to Control or Intervention Site

What Does The Safety Decision Aid Look Like?

Nancy Glass, PhD, MPH, RN, FAAN

http://safetydecisionaid.com/



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The IRIS Project - v5.18 www.theirisproject.org

Invitation to Participate and Instructions



Demographic Questions

Background

I'm going to start by asking you some questions about yourself and your relationship.



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Decisional Conflict Measure

Your Decision

This next section will ask you questions about making decisions for your safety and your children's safety while in a violent relationship.





START



Example of Decisional Conflict Question

he RIS project		1-888-822		
Emergency Exit Area				
t	27%	Finish		
of 13. Do you know yo ▶ Hear Question ▶ Hear An	our options for keeping yourself (and your children) safe?	the RIS project		
NoYes				
Unsure				
	NEXT	Play Instructions		

Example of Decisional Conflict Question

3 the RIS project		1-888-822-5799
	Emergency Exit Area	
Start 27%		Finish
8 of 13. Do you know the risks of (or re ► Hear Question ► Hear Answer	easons for) ending the relationship?	the RIS project
 No Yes Unsure 	IS NEXT	Play Instructions Description

Abuse Measures

Abuse Questions



Next are a number of statements that women have used to describe their lives with their partners. Please read each statement, and then indicate how much you agree or disagree in general with each one as a description of your relationship. There are no right or wrong answers: just indicate how much you agree or disagree with each statement.

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Mental Health Measures

Additional Mental Health Questions

Next is a series of questions about problems and complaints that people sometimes have in response to stressful life experiences. Please read each one carefully, and then indicate how much you have been bothered by that problem in the past month.







Safety Seeking Behavior Measure

Safety Check

I'm going to ask you about the kinds of things you have done to stay safe. I will also ask you about types of community resources you may have used.







X

Safety Seeking Behaviors Example Question

Remembering over the last year...

1 of 35. Have you talked with a professional (such as a victim advocate, hotline worker, clergy, doctor/nurse, counselor, case worker) about your partner hurting you physically, sexually, or emotionally?

NEXT

Hear Question

NoYes



📫 Logout

Example of Safety Seeking Behavior Question

Remembering over the last year...

20 of 35. Have you made an escape plan so that you would know how to quickly get away from your abusive partner if you needed to?

Hear Question

- No
- Yes, but have not used it yet
- Yes, used it and it was not helpful
- Yes, used it and it was helpful





No Yes







Play Instructions

D

out

Set Priorities (Intervention Only)

Priorities

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This next section will ask you questions about making decisions for your safety and your children's safety while in a violent relationship.







Priorities

Having resources

Having a job, home, and health insurance.

Keeping my privacy

Issues in my relationship are not something I share with others.

My child's well-being

Concerns for custody of my children and concerns for safety of my children.

Feelings for my partner

Love and concern for my partner.

My concern for safety

Safety of myself, friends, and family.

Example Priority Setting Question

Thinking about your relationship, which of these two factors is more important to you?

Hear Question



Example Priority Setting Question

Thinking about your relationship, which of these two factors is more important to you?

Hear Question



Feedback on Priorities for Safety

the RISpraject		1-888-822-5799 🔶
Start	Emergency Exit Area	Finish
Please review ea your results. ▶ Hear Question Viewed ✓ Your Da ✓ Your Da	Your Priorities Based on your selections so far, it appears that you consider your child's well-being to be most important. My child's well-being My concern for safety Having resources 13% Keeping my privacy 12% Feelings for my partner	the IRIS project
	CLOSE	
<		

Feedback on Danger (Intervention Only)



Emergency Safety Plan

Your Emergency Safety Plan Contents

- 1. Identify a safe place you can go if your partner becomes dangerous.
- Pack an emergency escape bag with basic necessities.
 - 3. Put aside a copy of important papers, phone numbers, extra house and car keys, and cash.
 - 4. Develop a code word or signal to share with others to let them know when you are in danger.
 - 5. Discuss your emergency plan with a trusted family member or friend.
 - 6. Remove or hide weapons, such as a gun or ammunition for a gun, from your home.
- 1. If you choose or are forced to leave your partner, do not tell your partner that you are planning to leave
 - 8. If you are thinking about hurting yourself, talk with someone at a confidential suicide hotline.
- 9. Learn more about confidential resources for women in unsafe relationships.
 - A √ indicates that you have completed this strategy.



Emergency Safety Plan Strategy Example

3 of 9 Put aside a copy of important papers, phone numbers, extra house and car keys, and cash.

Hear Strategy

There are things you may want to put in a place that will be easy for you to get to if you need to leave quickly. These should include important papers like:

- · birth certificates
- social security cards
- driver's license
- · lease agreements or mortgage papers
- · car title and insurance information
- · school and health records
- · welfare or immigration papers
- protective or restraining orders
- · prescriptions
- · marriage license and divorce papers.

You also may want to keep in a safe place you can get to quickly, things like:

- cash
- · your bank account number and savings account information
- credit/ATM cards



Other things to include are important phone numbers and addresses for family, friends, and service providers, extra keys, and things that mean a lot to you like photos.

Tailored Safety Plan (Intervention Only)

Action Plan



Your answers to many of the questions in the previous sections were used to provide a list of safety suggestions unique to your situation to create your Action Plan.







Action Plan

ON

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To add a suggested topic to your Action Plan, simply check the box next to the topic. This will move it to your Action Plan. You can also remove it from your Action Plan by unchecking the box.




Tailored Safety Plan

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Your Tailored Action Plan Contents

- 1. Talk with someone at a confidential domestic violence hotline.
- 2. Get suggestions on what to do in an emergency if you don't have a car.
- 3. Get information about safe and affordable housing.
- 4. Get help looking for work.
- 5. Learn more about stalking
- 6. Learn more about how your partner's unemployment affects your safety.
- 7. Get help for drug use.
- 8. Learn more about how your partner's threats affect your safety.



Tailored Plan Strategy Example Based on Danger Level

Learn more about how your partner's gun ownership affects your safety.

Hear Strategy

Based on your answers in this program, you are in the highest risk category for severe or deadly violence. We want you to know that your partner's gun puts you in danger of being killed.

- Women who live with an abusive partner are more likely to be killed with a gun than with any other weapon
- If your partner has a gun (handgun, rifle, shotgun, hunting weapon), this puts you in danger
- In most states a restraining order or order of protection can order a gun to be removed
- Please talk to a domestic violence hotline for more information about getting a protective order
- If you don't think that is a safe option for you, it is important to at least take steps to remove the bullets or lock them up if you know how to do this safely
- If you have a child or children who visit your home, you can use a gun safety pamphlet to talk to your partner about why it's important to lock up guns and bullets

Tailored Plan Strategy Example with Local Resources

Learn about shelters in your area.

Hear Strategy

LINKS

Leaving your partner can be dangerous, even if you are only leaving for a little while. Shelters can provide a safe and confidential location for you to stay temporarily.

- Shelters are often full, and you may have to call many times over several days before a space opens up.
- If you live in a small town, you may be safer if you leave the area and stay in a shelter in another community.

To learn more about shelters in your area, please visit the following:

Oregon Guide to Domestic Violence Services https://apps.state.or.us/cf1/DomesticViolence/ 1-800-622-3782

To take a virtual tour of a shelter, visit the following:

Virtual Shelter Tour http://web.multco.us/dv/shelter-information Multnomah County Resource

Oregon Resource

Child Safety Plan

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Your Child Safety Plan Contents

- 1. Introduction
- 2. Plan to get children to a safe place.
- 3. Planning how to call for help.
- 4. Other safety steps to consider with children.



Example of Child Safety Plan Strategy

3 of 4 Planning how to call for help.

Hear Strategy

Teach your children that 9-1-1 is the number to call to get help in a police, fire, or medical emergency.

- Some domestic violence agencies will give out emergency 911 phones for you and your children to have in a secret place.
- If calling the police is not a safe option for you, tell your children who to call in an emergency. This could be a trusted friend or family member. Write down the telephone number and put it in your safe place. Help your children memorize the phone number if they can.

Practice what your children will say when they call for help.

- Explain that they will need to tell the person they talk to their full names, the full names of their parents, their phone number (including area code), and address.
- Children in rural areas may also need to know and share Concession and Lot Number.

Teach your children that they should never use a phone to call for help in front of your partner. This puts them at risk.

- If possible, they should use the phone in their "safe room."
- . If they can't use a phone at home, teach them to go to a pay phone or a neighbor's house.
- Teach your children a secret word to use when calling a friend or family member to tell them that you are in danger and need help. Be sure to tell this person what the secret word is and what you want them to do.
- Tell your children to leave the phone off the hook after they are done talking. If they hang up, the police may call back which could put you and your children in more danger.

Help younger children become familiar with talking on the phone by allowing them to speak with friends or relatives. You can make practicing fun by asking them to dial phone numbers whenever you need to call someone.

Decisional Conflict Post Measure

Your Decision Now





We would like to find out if the feelings you expressed earlier about your relationship have changed or stayed the same. Please answer a few last questions about your safety decision in your relationship. It is important that you complete these questions.





Summary

Your Schedule and Summary

Hear Question

Done	Interview	Incentive	Date Window
1	Baseline	\$20	Dec 22 - Jan 19
E	arned	Rer	maining
\$20		\$0	

Click t	







EXIT

How Are Participants Recruited and Retained in an Internet Based IPV Project?

Tina Bloom, PhD, MPH, RN

IRIS Participants Are....

- English- and Spanish-speaking women
- 18 years of age and older
- Currently in a relationship
- Report current physical or sexual IPV, threats from partner to harm physically, or feeling unsafe in their relationship
- Comfortable using a computer and internet
- Able to access a computer safely and have a safe email address

IRIS Recruitment Strategies

- Majority of IPV studies recruit abused women from formal violence resources
- Many abused women never access formal resources (Goodman et al, 2003; Ansara & Hindin, 2010)
- Our strategy is to reach beyond these formal services to engage women currently in an abusive relationship

IRIS Recruitment Strategies

Online

Craigslist Facebook pages Listservs University websites Clinicaltrials.gov Low cost classifieds

Flyers

Welfare offices
Health dept/WIC
Clinics
Daycares
Housing programs
Colleges
DV support groups
Culturally specific services
Coffee shops



ARE YOU CURRENTLY IN AN UNSAFE INTIMATE RELATIONSHIP?

DO YOU HAVE ACCESS TO A SAFE COMPUTER WITH INTERNET?

BE A PART OF A VOLUNTARY, CONFIDENTIAL STUDY ON AN INTERNET-BASED SAFETY PLANNING TOOL FOR WOMEN!

- You will be reimbursed for your time (up to \$180 in gift cards)
- The study involves four different internet-based survey sessions (no in-person meetings required), over a period of one year



FOR MORE INFORMATION, PLEASE CALL OUR CONFIDENTIAL RECRUITMENT LINE AT

1-888-822-5799

OR EMAIL MARYLAND@WOMENSINTERNETSTUDY.ORG

The IRIS Project #NA_00034644 PI Nancy Glass PhD and Karen Eden PhD

IRIS Enrollment

- Women call toll-free study # or email
- RA screens for eligibility by phone; obtains informed consent; collects randomization data (language, children) and safe contact info
- RA enters participant information into database
- Participant is auto-emailed information re: login, RA contact, and computer safety
- RA sent auto-email when baseline completed
- RA thanks woman, sends incentive

Follow-up Visits and Midpoint Contacts

- Women may access study website anytime
- Women repeat survey @ 3, 6, and 12 months
- Receive auto-emails @ -2 weeks; RA begins follow-up contacts @-1 week
- \$10 added incentive for on-time completion
- Women are thanked/sent incentive after each survey
- RA initiates midpoint contacts over the year
- All contacts follow safety protocol, women's instructions

IRIS Study Database

- Database logs interview completion automatically
- Database "dashboard" displays upcoming midpoint contacts and interviews
- RAs maintain contact and safety information within the database
- Information updated with every contact

Dashboard	-	Sc	reenings	Part	icipants	Recruitment
Amber Clough		lata for: er Clough		arch on first, last	, id, or email:	
Action Items (5)						
Subject ID	Name	Contact	Point	Late(D) ▼	Safe Email	Contacted
📄 📄 Interviews (1)					
JHU <u>02-765</u>	###		M3-Int	-12	<u>#@##</u>	<u>View (0)</u>
🔧 Mid-Points ((2)					
<u>ASU</u> <u>05-423</u>	###	٩.,	🛉 <u>M8-Mid</u>	11	<u>#@##</u>	🛉 <u>View (2)</u>
JHU <u>02-261</u>	###	٩.,	H10-Mid	2	<u>#@##</u>	View (2)
Missed Inter	rviews (1))				
JHU <u>02-353</u>	###		HG-Int	102	<u>#@##</u>	View (8)
\$ Pending Inc	entives (1	I)				
JHU <u>02-768</u>	###		M3-Int	1	<u>#@##</u>	🛉 <u>View (0)</u>
Upcoming Conta	acts (16))				
Subject ID	Name	Conta	ct Point	Schedul	ed Date 🔺	Safe Contact
Interviews (3)						
JHU <u>02-765</u>	###	Į.	M3-Int	02/21/20	12	<u>#@##</u>
JHU <u>02-653</u>	###	ų.	M6-Int	02/29/20	12	<u>#@##</u>
OHSU 01-580	###	ų.	M6-Int	02/29/20	12	<u>#@##</u>
🔹 🐛 Mid-Points (13)					

Longitudinal Retention As of 2-28-2012

	3 MONTH INTERVIEWS			6 MONTH INTERVIEWS		
	Complete	Missed	Retention	Complete	Missed	Retention
Arizona	91	6	94%	67	6	92%
Maryland	93	6	94%	62	5	93%
Missouri	85	4	96%	66	3	96%
Oregon	104	4	96%	67	3	96%

How Do You Address Computer and Internet Safety in The IRIS Project?

Jill Messing, PhD, MSW

Safety Protocols: Recruitment

"The IRIS Project"

- Not mentioned in initial communications to minimize traceability
- Email contact info: e.g., arizona@womensinternetstudy.org
- What happens when you Google the IRIS Project?
- What information is available on our webpage?

Safety Protocols: Participant Eligibility

Safe Computer Access:

From the recruitment script...

- Do you have access to a computer with internet where you would feel safe receiving information about domestic violence?
- Do you use email? Do you have an email address that belongs only to you and that only you know the password for? If no, would you feel comfortable with us helping you set up an email address?

Safety Protocols: Participant Eligibility

Where Are Women Accessing The Survey?

Accessed the decision aid at (N=443)	Percent
Home	52.6%
Work	13.5%
Family's	8.8%
Friend's	8.4%
Library	11.1%
Other	5.6%

Safety Protocols: Computer Safety

Safety Question

From recruitment script...

If you misplace your username and password, the study staff will ask you a security question that you choose so that we make sure your log in information stays safe. What question would you like me to ask you that only you know the answer to? (could be childhood pet's name, mother's maiden name, favorite movie, etc.)

Safety Protocols: Computer Safety

Computer Safety Information

From the enrollment email...

- Anyone may be able to monitor what you do on your computer. Web browsers automatically save information (called "history" and "cache") about the websites you visit. For your safety, you should delete this information EVERY time you visit the study website. It is easy to do, but how you do it depends on your browser. Find the browser you use and follow the instructions below. If your browser is not listed, open your browser, find the Help Menu, and search for "cache" and "history" for instructions.
- Instructions for protecting your internet browser: <u>http://www.theirisproject.org/browsers.php</u>

Safety Protocols: Contacting Participants

Gathering Safe Contact Information

From the recruitment script...

It is possible your partner may become angry if he or she finds out about you taking part in this study. We will take all steps to make sure that we don't put you in any danger. We will only contact you in the ways that you tell us are safe. We will not tell anyone else who answers the phone who we are or what we are calling about.

Safety Protocols: Suicidality

Suicidality Measures

3 questions to assess risk of suicide...

Center for Epidemiologic Studies Scale, Revised

- 1. I wished I were dead.
- 2. I wanted to hurt myself.

Danger Assessment / Danger Assessment Revised

3. Have you ever threatened or tried to commit suicide?

Safety Protocols: Suicidality

Current Suicide Protocol

For women responding "yes" to at least 1 question...

- Identified at risk for suicide
- Asked (via pop window during survey) if they would like a research assistant to contact them
- All participants are provided with the National Suicide Hotline Number
- For women with no telephone access: <u>www.crisischat.org/chat</u> OR www.imalive.org

Collaborations with International Colleagues to Implement the Safety Decision Aid with Diverse Communities: the NZ **isafe** trial

- An Internet-based Intervention to Improve Mental Health Outcomes for Abused Women
- A collaborative concurrent replication of IRIS (n=340)
- 5-year study with funding by the New Zealand Health Research Council
- Team: Jane Koziol McLain; Alain Vandal; Shyamala Nada-Raja; Denise Wilson; Karen Eden; Nancy Glass; Amanda Young-Hauser (post-doc); Julia Smith (BHSc student); Halina Kalaga; Terry Dobbs





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On the shoulder of giants...



the project

• IRIS trial

About 12 months behind



- NZ web-based self-help programme for depression
- Shyamala Nada-Raja; U of Otago
- 2 year follow-up completed in December
- People wanted ALL on-line
- Most successful recruitment: Health TV

NZ Feasibility



- Internet Access
- Community Advisors (Service providers, Maori, Pacific Island, Disabilities)
- Cross cultural equivalence Focus Groups
 - Amanda Young-Hauser (Community Psych post-doc)
 - Service providers and women who have experienced abuse
 - IRIS demo site: decision aid criteria, content, design
- Findings *"It makes you reflect on everything you have done, and everything that is happening. It's like a light bulb doing this"*
 - Lacked validation of some of the women's experiences
 - Needed contextualising to NZ: design, language and idioms
 - Could provoke emotional reactions, including the realisation that they had under-estimated their danger

Innovations



- All on-line; No human contact necessary
 - On-line auto registration (mimics future application)
- Smart-phone ready
- NZ korero
 - Apart from guns, household items and tools can be used to harm women. You can reduce the danger by moving some items, for example, move a block of knives from the kitchen bench into a drawer.

What We've Learned So Far....

Nancy Glass, PhD, MPH, RN, FAAN

Study Enrollment by Site

Site	Enrolled	Accrued*
Arizona	134	107 (79.85%)
Maryland	137	115 (83.94%)
Missouri	121	102 (84.30%)
Oregon	132	123 (93.18%)
Total	524	447 (85.31%)

* Completed baseline

Race/Ethnicity

Race (N=447)	Percent	
White	60.6%	
African American	22.8%	
Other	16.1%	
Not reported	0.5%	
Ethnicity (N=447)		
Hispanic	9.8%	

Education

Education (N=445)	Percent
Less than high school	5.6%
High school diploma	14.2%
Some college	40.9%
Associates degree	14.2%
Bachelors degree	17.7%
Post Bachelors	7.4%

Other Demographics

Age (N=447)			
Average age	33.6		
Age range	XX-XX		
Children (N=447)			
Percent with children	58.4%		
Average number of children	1.53		
Employment (N=447)			
Percent employed	40.7%		

"The info from the survey has giving the courage, will, and resources I needed to get out of that abusive relationship with my husband." "Very empowering questions that raise awareness - did for me"

"The website may have saved my life, I never thought of putting together a safety plan before"

"I used a lot of the resources from the site" "Once I finally understood exactly how deadly the situation actually was; I left. Had I not gotten the info from your study we would likely still be living in fear at the house"

Study Collaborators

Johns Hopkins University: Nancy Glass, PhD, MPH, RN Jacquelyn Campbell, PhD, RN Andrea Gielen, ScD James Case, MBI

Oregon Health & Science University Karen Eden, PhD

Kaiser Center for Health Research Nancy Perrin, PhD Ginger Hanson, MS

Study Collaborators

Arizona State University: Jill Messing, MSW, PhD

University of Missouri, Columbia: Tina Bloom, PhD, MPH, RN

Consultant: Mary Ann Dutton, PhD

Recruitment & Retention Team

Amber Clough, MSW (Study Coordinator)

Jamie Barnes, MS Jocelyn Anderson, MSN, RN Jonel Thaller, MSW Andrea Winberg, BSN, RN Courtney Wright, BA Kelsey Egbert, BSN, RN Mervyn Christian, MPH