

Women's experience of meaningful change following domestic abuse: a longitudinal qualitative study nested in a trial of a specialist psychological advocacy intervention (the PATH trial)



Dr. Maggie Evans

Futures Without Violence conference March 2015: Washington DC

School of
SOCIAL AND COMMUNITY MEDICINE





A pragmatic randomised controlled trial of a psychological intervention delivered to women by Specialist Psychological Advocates (SPAs) in two domestic violence agencies in the UK

PATH Trial

Significant and clinically relevant difference between groups at one year for psychological distress (CORE-OM) and depression (PHQ9)











Up to 3 semistructured interviews at a safe location

Comparing accounts: 21 intervention & 10 control 12 'completer' & 9 'non-completers'

Qualitative gr study

Interpretivist perspective: narrative thematic analysis, grounded in the data

Women's accounts of 'meaningful change'

What 'worked' or did not 'work' in PATH





Filled a gap in the availability of psychological – emotional support, highlighted as a significant lack in usual advocacy group Importance of delivery by DVA specialist advocates with a specific focus on DVA in tandem with practical support

PATH Intervention Women's narratives

Evidence of integration into life at one year





Benefits of PATH

<u>Relationship with</u>
<u>SPA</u>
Trusted friend but confidential
Really understood DVA
Challenging ingrained automatic responses eg: self-blame
Modelling



Educational and cognitive •Learning about DVA •PATH techniques and choices Emotional • First disclosure of current and historic abuse • Exploring longrepressed emotions • Intense and emotionally painful but worth it







PATH completer (2nd Interview)

- 'A (advocate) is brilliant, she's absolutely brilliant, I can talk about I can talk about stuff and it's okay.....
- You feel like you've done something wrong, that's why he hurt me because I did something really bad, so therefore I must be a bad person in some way. The realisation of actually you're not bad, it wasn't your fault it happened. It's like to just come to that point ... we've had quite a lot of intense sessions and stuff, um, but to get to that point where you feel good about yourself is just amazing'





More resilient, improved concentration, better sleep More able to express emotions > suppression, alcohol Better communication and improved relationships with family

More comfortable talking about themselves> prioritising others

Markers of Change

Practising new behaviours eg: not answering texts from perpetrator

Use of handouts, techniques, recommending to others Increased confidence to go out into the world socially or return to work





Reasons for stopping PATH

Emotional

 Too overwhelming, feeling too vulnerable
 Too many other issues to cope with
 Lack of support between sessions



Psychological

Desire to move on
Desire to focus on the future NOT the

past

Lack of continuity of SPA

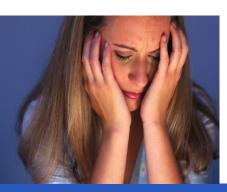
Maternity leave, sickness, changing jobs
Moving house, loss of mobile phone
Poor communication





Non-completer (2nd interview)

'I found it really traumatic, really hard to deal with... I found it very erm, depressing, I didn't find it uplifting, I found it a real downer... I know that some people really like to dwell and talk about what's made them sad. I like to talk about it, get it done, shut the envelope, goodbye, post it, gone.'







Mediating Factors for positive adherence and outcomes from PATH



- Exposure to abuse
- Demographic: Age, parenting status

Psycho-social 'readiness'

Preferred level of engagement

• Assessment / Tailoring / optimum no. of sessions

Continuity of advocate





K Ending sessions



'She said to me, um, we're going to say goodbye to each other ... think about something that you'd like to bring to me and I'm going to bring something to you... So, um, I brought her, I brought a big bar of chocolate and some Red Bull ... she said to me "Okay" so I said "well, the chocolate is for the feel good and the Red Bull is because you've given me back energy, I've got myself back". So for me, that was it, what the sessions gave me ... it was good, I bought her a couple of cans of Red Bull and a big bar of chocolate'





PATH Team (funded by NIHR 'PROVIDE' programme grant)

- Gene Feder
- Sandra Hollinghurst
- Alice Malpass
- Jayne Bailey
- Maggie Evans
- Emma Howarth
- Lynn-Marie Sardinha
- Fayeza Saeed
- Giulia Ferrari
- Tim Peters
- Debbie Sharp
- Roxane Agnew Davies DV Training Ltd
- Carol Metters NextLink, Bristol
- Morgan Fackrell Cardiff Women's Aid
- Louise Howard Kings College London







School of SOCIAL AND COMMUNITY MEDICINE

This article/paper/report presents independent research funded by the National Institute for Health Research (NIHR). The views expressed are those of the author(s) and not necessarily those of the NHS, the NIHR or the Department of Health.

m.a.evans@bristol.ac.uk



