



# *SUPPORTING SURVIVORS OF PARTNER VIOLENCE*

## RESEARCH STUDIES HOW TO EQUIP SURVIVORS TO IMPROVE THEIR SEXUAL HEALTH



Meredith Bagwell-Gray has seen the magic happen. When women who have experienced sexual abuse and intimate partner violence have a safe place to address their sexual trauma, they often begin to feel more empowered and in control of their sexuality. As a result, they are more likely to embrace positive sexual behaviors that have a profound impact on their health, like getting Pap tests and HPV vaccines, and seeing sexual health providers.

That's really important, says Bagwell-Gray, Ph.D., MSSW, assistant professor at the University of Kansas School of Social Welfare, because women who have experienced sexual trauma and intimate partner violence are ten times more likely to develop cervical cancer than women who do not have a history of victimization. One reason is that their partner's sexual risk-taking puts them at risk for sexually transmitted diseases, including HPV, which can cause cervical cancer. Another is that they are less likely to engage in preventative sexual health care.

Bagwell-Gray wants to change these statistics and see women not only heal from their sexual trauma, but also prevent them from getting cervical cancer. So she is conducting two research studies that explore the best way to reach women before and after they experience partner violence in order to equip them with the knowledge, resources, and support they need to reduce their health risks.

*“They were wondering how their lives could have been different if they had access to this information at an earlier age,” Bagwell-Gray says.*



## TRAUMA INFORMED SEXUAL SAFETY PLANNING: A PROMISING PILOT

Bagwell-Gray’s first intervention, the Trauma Informed Sexual Safety Planning program, launched in 2019. In this unique pilot, 30 women staying at two domestic violence centers signed up to participate in the first of two eight-week courses. The program was designed to empower survivors to reduce their chances of developing cancer by engaging in preventive sexual health care, such as getting pap tests or HPV immunizations. It was supported, in part, by an American Cancer Society grant (IRG-16-194-07) awarded to the University of Kansas Medical Center.

The program’s first session showed some promising results. “One woman said, ‘I finally got my check up and had a pap test and a mammogram,’” Bagwell-Gray says. “Another said she was dealing with residual trauma or older abuse. She was in a new relationship that was healthier.”

Bagwell-Gray was recruiting participants for the second session of the pilot when the COVID-19 pandemic hit, and the in-person class format had to be put on hold. Even though the pilot was interrupted, Bagwell-Gray learned some powerful things from the intervention.

First, the women were hungry for the information shared during the eight classes. They told Bagwell-Gray that they wished they could had taken this course when they were younger, before their abuse occurred.

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Second, she learned that women wanted the coursework to be more accessible, so they would never have to miss a class because of scheduling conflicts or difficulty getting to the location where class was held.

## THE IDEA FOR A NEW INTERVENTION IS

The feedback from the participants in the first pilot sparked the idea for Bagwell-Gray’s second research project: Cervical Cancer Prevention Among Survivors of Partner Violence: Technological Innovations for a Trauma-Informed Approach. Her new intervention will use a mobile app to reach younger women, aged 18 to 24, and allow them to access materials anywhere at any time.

Bagwell-Gray received a new faculty grant from the KU Office of Research to develop and test a web-based intervention module, which will allow her to broaden the focus of her intervention beyond a small-group, in-person setting. Through the app, women in rural areas, such as western Kansas, will also be able to participate in the pilot.

In the first phase of the intervention, Bagwell-Gray will recruit a community advisory panel made up of domestic violence survivors, advocates, health providers, and tech intervention experts. The advisory panel will assist her in transitioning the in-person intervention into a virtual form that can be delivered via an app.

Her goal is to have 40 women participate in the pilot. The project launches in spring of 2021 and concludes in summer of 2022.

“In the end, we will have two versions of the curriculum – one face-to-face and the second an online, modified version to increase accessibility for those who cannot meet face to face,” Bagwell-Gray says. “I really see this as being shaped and informed by survivors themselves, so it works for them because it is, in part, created by them. That’s a central aspect of this study.”





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