

Dr. Stephanie Kennedy, Assistant Professor, *The Relationship between Childhood Polyvictimization and Subsequent Interpersonal and Behavioral Health Outcomes for Incarcerated Women*

Incarcerated women report much higher rates of victimization than women in the community, with estimates suggesting that more than two-thirds of incarcerated women have experienced either physical or sexual abuse in childhood. However, there is evidence that victimization events are rarely mutually exclusive, but rather that victimization tends to cluster for some individuals and in some environments. The current project defines childhood abuse using the polyvictimization construct, defined as multiple, cumulative forms of direct and indirect interpersonal violence. Although robust relationships between polyvictimization and a variety of criminal offending, re-victimization, mental health, and substance misuse outcomes are reported using samples of youth, our understanding of how polyvictimization relates to these outcomes for incarcerated adult women is less clear. Understanding experiences of polyvictimization for incarcerated women, and how polyvictimization relates to subsequent interpersonal and behavioral health outcomes, is of particular importance to the social work profession, as social workers provide the majority of behavioral health services in the US. Social work is well positioned to lead community-based prevention efforts which address how experiences of violence and victimization can influence a woman's sense of herself in relationships and can serve to alienate her from family, school, and employment. If drugs and alcohol are used to cope with experiences of violence, social work prevention and intervention can highlight how substance misuse perpetuates experiences of victimization for at-risk women and girls, increasing risk for arrest and incarceration. Further, over the past decade, comprehensive mental health services have become increasingly available in women's prisons across the country. Social work professionals are well equipped to take a leadership role in therapeutic service delivery and re-entry planning. Data collection has already concluded at two Southern prisons; funds from this award will expand data collection to two additional prisons in the South and Northeast. Data will be gathered via self-report during face-to-face interviews.



Dr. Lisa Werkmeister Rozas, Associate Professor, *The Manualization of an Innovative Church-based Diabetes Prevention and Self-Care Management Program*

We are requesting funds to develop a manual for an innovative community-based, combined Type II Diabetes (T2D) prevention and self-management intervention. Development of this manual has significant implications for translational research and dissemination and it is directly linked with the PI's research agenda. T2D is one of the country's most pressing health needs, with an estimated 1 in 3 Americans to be diagnosed with T2D by 2050. In response to this public health crisis, our research team has developed a unique, church-based diabetes prevention and self-management intervention. Our team's formative qualitative research demonstrated that community members preferred a combined intervention approach which leverages critical multigenerational family and community support. This finding is corroborated by literature which highlights that lifestyle behavioral change occurs most effectively in social and familial contexts wherein opportunities for support and reinforcement of newly acquired behavioral skills across those with or at-risk for T2D are abundant. Our combined intervention model leverages such opportunities with inclusion of family and church members with or at-risk for T2D; such an approach has not been previously done. Our combined T2D intervention has been piloted in several church communities and has demonstrated preliminary efficacy, with significant reductions in participant weight and A1C. Our current and ongoing research builds upon this pilot work by incorporating the Information-Motivation-Behavioral Skills (IMB) model of behavior change (citations). Developed by Dr. Jeffrey Fisher, co-investigator and senior research mentor of our team, the IMB model has consistently predicted T2D-related outcomes (e.g., A1C and lipids) across diverse populations. Current T2D education interventions lack such grounding in behavioral theory. Our theory-based, combined T2D prevention and self-management intervention will be tested for efficacy with Latino church groups using funds from an InCHIP Seed Grant (FY16). The findings from this grant study will be the basis an NIH R01 grant proposal to be submitted in Spring 2017. The intervention is also the central component of a large proposed study with African American congregations in Hartford, CT. This study is currently under review as a proposed U01 grant at the National Institute of Minority Health and Health Disparities (U01 MD010628-01). Our intervention demonstrates considerable promise, however, researchers have increasingly pointed to intervention fidelity as a major potential impediment to effective translation and implementation of efficacious interventions across community-based settings (Breitenstein, Gross, Garvey, Hill & Resnick, 2010; Kerner, Rimer & Emmons, 2005). Groundwork for rigorous fidelity assessment must therefore be built into the foundational stages intervention development and testing (Breitenstein et al, 2010). To that end, we propose to use the Office of the Vice President for Research Scholarship Facilitations funds to develop a manual to standardize our combined prevention and self-management intervention. This manual will be used for our current InCHIP funded study as well as our proposed and future work promoting intervention fidelity and efficiency. As the evidence base for our combined T2D diabetes prevention and self-management intervention grows, plans to publish the manualized intervention for widespread dissemination will be pursued.



Dr. Cristina Wilson, Associate Professor, *Understanding the Role of Teachers in Buffering the Relationship between Stress and Self-regulation in Hispanic and African American Preschoolers*

About a quarter of preschool aged children have experienced at least one potentially traumatic event, including interpersonal violence and non-interpersonal events such as car accidents or medical traumas. Previous research has found a relationship between trauma exposure in early childhood and internalizing and externalizing problems in preschoolers. Early stress exposure has also been linked to increased problems with social-emotional skills in preschool, which have been linked to school readiness and longitudinal pathways of mental health. Research is limited on the risk and resiliency factors among Hispanic and African American preschoolers. The purpose of this project is to explore the link between trauma exposure and self-regulation among African American and Hispanic preschoolers and to understand the role of teachers in potentially buffering this relationship. This project aims to use an innovative method of measurement, the Head-Toes-Knees-Shoulders task (HTKS), in exploring behavioral self-regulation in preschool age children. Results from this study will point to individual and contextual factors that may influence self-regulation skills among preschoolers exposed to PTEs.

