



# RESEARCH BYTES



ISSUE 9

## REPRESENTING THE UNDERREPRESENTED: VOICES OF HISTORICALLY SILENCED PERSONS Pt. 1

Volume 2: Spring 2022

### A MESSAGE FROM THE ASSOCIATE DEAN FOR RESEARCH

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Uncovering and amplifying the voices of persons who have historically been silenced are at the forefront of Kent School's work. Studies in this issue feature work surrounding underrepresented and marginalized populations, including people living with HIV, older immigrants, caregivers, and justice-involved women.

#### "I Shall Live and Not Die": Using Monologues Based on the Experiences of Older African Americans Living with HIV to Address HIV-Related Stigma Among African Americans in Louisville, KY


J. Kerr, L. Harris, E. Glass, T. Golden, & T. Crawford  
*Family & Community Health* 43(4) | DOI: 10.1097/FCH.0000000000000268

This project utilized arts- and media-based approaches to develop an intervention for educating the community about HIV and reducing HIV-related stigma through lived experiences of living with HIV as an older African American in Louisville. The team utilized interviews and focus groups to describe participants' experiences and explore social processes impacting HIV engagement. Themes from the interviews included the impact of life stress and HIV stress. The team employed dramatized monologues portraying lived experiences of older African Americans living with HIV. The monologues were integrated into an annual event to raise HIV awareness in African American communities and was also recorded after the live performance. Audience members reported enjoying the performance and finding it to be effective in reducing HIV-related stigma and helping to understand stressors of people living with HIV.

#### Gender-Based Pathways to Cognitive Aging in the Mexican-Origin Population in the United States: The Significance of Work and Family

S.M. Rote & J.L. Angel  
*The Journals of Gerontology: Series B* 76(4), pp. e165-e175 | DOI: 10.1093/geronb/gbaa189

This study draws from a life course perspective to identify the role of midlife factors which may bridge earlier educational attainment to late-life cognitive impairment in older Mexican-origin adults. The study pays attention to gender and nativity differences given the role of gender inequality and migration in shaping occupational attainment and family formation. Findings suggest improving educational and occupational opportunities earlier in the life course can aid in decreasing cognitive impairment inequities that disproportionately affect the Mexican-origin population. Women who were employed in occupations characterized by high levels of autonomy and complexity were at the lowest risk for late-life cognitive impairment. Conversely, those employed in agricultural occupations experience the greatest risk for cognitive impairment later in life, regardless of educational attainment. For Mexican American older men, lifetime employment in professional, operator, technical, and sales occupations were at a lower risk for cognitive impairment later in life. Authors recommend increasing access to educational and occupational opportunities for Mexican American immigrants early in the life course. In midlife, increased income, health coverage, and autonomy in the workplace and home are especially important. In later life, LatinX communities and families need better community-based long-term care services.



Of audience members surveyed:

- 94% found the performance effective in reducing HIV-related stigma
- 98% said the monologues helped them understand the stressors of those living with HIV
- 99% enjoyed the performances

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LatinX families and communities need better community-based long-term care services.



Caregivers of foreign-born older adults report more care burden than do caregivers of US-born older adults.



### Caregiver Well-Being and Burden: Variations by Race/Ethnicity and Care Recipient Nativity Status

H. Moon, W.E. Haley, S.M. Rote, & J.S. Sears  
*Innovation in Aging 4(6)* | DOI: 10.1093/geroni/igaa045

This study examined the role of care recipient nativity status on caregiver outcomes, including caregiver burden, psychological wellbeing, and self-rated health using nationally representative data. The aim was to identify the extent to which these factors varied by care recipient's nativity status and caregiver's race/ethnicity. Findings suggest that caregivers of foreign-born older adults report more care burden than do caregivers of US-born older adults. Even after adjusting for primary stressors, secondary stressors, resources, and demographics, caregiver of foreign-born care recipients still displayed significantly higher levels of care burden. Authors recommend development and evaluation of culturally appropriate assessments and interventions for diverse caregiving groups. Ongoing advocacy is needed to address the systemic barriers that create and reinforce disadvantages for diverse families of foreign-born care recipients.

Rates of disability among victimized women on probation and parole were **11% higher** than general rates in Kentucky and **4x higher** than national prevalence.



### Prevalence and Correlates of Disability Among a Sample of Victimized Women on Probation and Parole

K.E. Smith, A.M. Bunting, S. Golder, M.T. Hall, G.E. Higgins, & T.K. Logan  
*Journal of Correctional Health Care 25(2)*, pp. 143-161 | DOI: 10.1177/1078345819833387

This study investigated factors associated with disability in a sample of victimized women on probation and parole, which is a population with high rates of socioeconomic disadvantage, mental and physical illness, substance use disorder, and victimization. The purpose of this exploratory study was to establish the prevalence of disability status among the sample using receipt of Social Security Disability Insurance (SSDI) and to compare women receiving SSDI to those not receiving SSDI across multiple variables. More than 1/5 of the sample were receiving SSDI. Women receiving SSDI were more likely to be older, have higher past-month income, to live alone, and to be White. The rates of disability in this sample were 11% higher than the prevalence in Kentucky and 4x higher than disability in the general population of the U.S. Shifting health care to a trauma-informed service model could improve the lives of criminal justice-involved women by preventing some health problems and by addressing issues that may be exacerbating health issues.

Incorporating elements of *trauma-informed care* into all levels of the justice system can help reduce the detrimental impact of trauma on incarcerated women's quality of life.

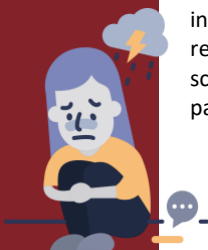


### Not All Traumas Are Equal: Post-Traumatic Stress and Quality of Life among Women in Prison

S.G. Prost, A. McDonald, M. Plassmeyer, J. Middleton, & S. Golder  
*Women & Criminal Justice* | DOI: 10.1080/08974454.2020.1871160

This study aimed to identify and describe differences in post-traumatic stress (PTS) and quality of life (QOL) among a sample of incarcerated women and to examine relationships between specific traumatic experiences (having been held captive, surviving sexual assault, or having other unwanted sexual experiences), PTS, and QOL to identify potential opportunities for intervention in correctional and community settings. The entire sample met or exceeded the clinical cutoff for Post-Traumatic Stress Disorder. Most of the women in the study reported having experienced sexual assault and many had been held captive. PTS was highest among women who had been held captive. QOL was rated lowest regarding the environment and highest regarding physical health. The authors strongly recommend incorporating elements of trauma-informed care into all levels of the justice system to reduce the detrimental impact of trauma on incarcerated women's wellbeing and quality of life.

Supervising officers are encouraged to refer women in need of services to accessible, evidence-informed programs and services for managing symptoms of PTSD.



### Correlates of Post-Traumatic Stress Among Victimized Women on Probation and Parole

S.G. Prost, S. Golder, G.E. Higgins, C. Pettus-Davis, T. Renn, T. Edmond, & T.K. Logan  
*Probation Journal* | DOI: 10.1177/02645505211032171

This study sought to identify factors related to post-traumatic stress (PTS) among a sample of women with a history of victimization who are on probation or parole. Driven by a complex multidimensional framework, authors examined correlates of PTS symptoms and factors linked to coping and help seeking. Correlates in this study were either static (historical or unchangeable) and dynamic (amenable to change). Static factors related to PTS included childhood psychological and sexual abuse and any lifetime experience of physical or sexual non-intimate partner violence. Dynamic factors, which are key to focus on because they are potential areas of intervention, included any stay in jail or prison, physical/psychological intimate partner violence in the past year, regular use of sedatives and methamphetamine, and material loss. Findings point to the need for regular screening and assessment for PTS and for supportive substance use programming for women on probation and parole.