

A study on novel coronavirus infection and its ability to heal in secondary victims after sexual assault

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ABSTRACT

Many people report negative experiences with the justice system after being sexually assaulted (i.e. the COVID-19 pandemic has had a negative impact on individuals' lives and overall health.) For this project, I tested a predictive model that ranks resilience from positive experiences with the justice system, mediated by the weekly COVID-19 index case rate and number of vaccines. - ask for COVID-19 to be used. Participants were 18 years of age or older, identified themselves as transgender women and were clients of a local advocacy clinic (N=94) after being diagnosed with sexual assault Data were analyzed in R using the usual least squares (OLS) method. The results indicate that approximately 5.5% of the difference in resilience is explained by the positive experience model with the justice system through the COVID-19 metric case rates and vaccines used. use. There is a statistically significant direct effect between positive experience with the justice system and resilience ($B. = 0.191, p = 0.005$). There is an interesting insignificant shift in the direction of the relationship between positive experience with the justice system and resilience ratings when COVID-19 infection rates are high and vaccinations are low. or average. The results showed that the number of COVID-19 cases and vaccination rates did not significantly affect the level of resilience an individual reported. However, they did show that more individuals had a more positive

experience (ie. These results may be due to the relatively small sample size that does not allow for a small effect size to be detected. It would be beneficial to evaluate these variables in a larger sample to determine whether the change in direction in the relationship or the small portion of the slope is significantly replicated in the larger data set for better understanding. How law enforcement centers should respond to Massive Stress Events.

Keywords: Secondary Victims, Resilience, COVID-19, Sexual assault, Positive experiences

INTRODUCTION

Resilience acts as a buffer against stressful experiences and can mitigate the negative effects of stressful life events (Luthar, 2015). However, as the number and severity of stressors increases, resilience is negatively affected in each individual (Glass et al., 2007). My thesis looked at the impact of two stressors on resilience ratings (secondary victims and number of reported cases of COVID-19) in a sample of people who had been physically assaulted. sex workers and those receiving legal defense services. . People with higher resilience reported fewer mental health problems and fewer suicidal thoughts after stressful or traumatic experiences (Johnson, Gooding, Wood, & Tarrier, 2010)). People with greater resilience find meaning and purpose in traumatic experiences (Crete & Singh, 2015). Sexual assault is a significant stressor that affects an individual's physical and mental health, leading to a variety of negative consequences (Macy et al., 2011). Research has shown that sexual assault is one of the most harmful forms of traumatic experience due to the loss of control over the life associated with it (R. Campbell et al., 2001). Another stressor for people who have been sexually assaulted is the secondary victimization. Secondary victimization is best described as blaming the victim at the hands of systems (eg, legal and medical systems) that help the individual (R. Campbell, 2006). Secondary victimization is associated with poorer mental and physical health outcomes in those who have experienced sexual assault (R. Campbell, 2006). Legal protection programs have been created to address the negative consequences associated with sexual assault and secondary victimization, and to support individuals throughout the

legal process (Macy et al. events, 2011). The final stressor in this thesis is the activity of COVID-19 cases. COVID-19 has increased rates of depression and anxiety in large representative samples (Copeland et al., 2021; Shah et al., 2021; Twenge & Joiner, 2020). COVID-19 is also associated with higher rates of sexual assault and homicide, and difficulty accessing resources such as sexual assault support centers (Boman & Gallupe, 2020). The alternating relationship between resilience ratings and secondary victimization in the context of the COVID-19 pandemic has not been examined before. My thesis looked at resilience ratings and positive experiences with the justice system (ie. The first objective of the study was to explore the relationship between resilience ratings and experience The second objective of the study was to determine the impact that COVID-19 has had on the relationship between resilience ratings and positive experiences with the justice system. law in the same individual.

Sexual assault is an example of a major stressor. Sexual assault takes a toll on an individual's physical and mental health and continues to be a widespread problem (Macy et al., 2011). Sexual assault occurs when "the aggressor engages in a sexual act without the consent of the victim, or when the victim is unable to consent (e.g., due to age, illness) or refuses (e.g., due to age, illness) e.g. due to physical violence or intimidation)" Basile et al., 2014, p. 1) The National Sexual Violence Resource Center (2018) reported that in the United States, 1.4 % of men and 18.3% of women have experienced sexual assault in their life Report to the police (e.g., it is estimated that between 2006 and 2010, 65% of cases went unreported; Langton et al., 2012). Cases are likely underreported due to the many negative consequences associated with sexual assault (i.e. sexual assault is a deeply traumatic event and affects many people.

Sexual assault has a significant financial cost. Financial costs include medical costs, loss of personal productivity, criminal justice costs, and loss of property (Peterson et al., 2018). Private insurers in the United States report that they pay an average of \$5,780 per incident, while patients pay an average of \$948 per sexual assault (Tennessee et al., 2017)). The cost of sexual assault is greater than that of any other crime; per year, a sexual assault costs the United States nearly \$127 million, while each rape costs an estimated \$151,423

(DeLisi et al., 2010; Miller et al., 1996). In addition, 91% of women who reported being sexually assaulted while in college said serious health problems made it more difficult to finish college and achieve their career goals (Potter et al., 2018). Teenage sexual abuse is associated with lower income levels in adulthood (Macmillan, 2000). Sexual assault has both short-term and long-term financial impacts, which can have long-term effects on individuals' physical and mental health. There is a significant impact on mental health after being sexually assaulted. People who have experienced sexual assault have higher rates of suicidal ideation and suicide attempts in their lifetime than those who report that they have never been sexually assaulted (Dworkin et al., 2020). Black women who reported very serious sexual assaults had increased symptoms of PTSD, poorer physical health outcomes, and increased symptoms of depression (Pegram & Abbey, 2019). All persons who have experienced sexual assault are clinically twice as likely to develop depressive symptoms (McDougall et al., 2019). White women who report very serious sexual assault also have increased PTSD symptoms (Pegram & Abbey, 2019). In addition, many individuals who experienced sexual assault exhibited more severe psychopathology across all diagnoses, with increasing sociality and intent (Dworkin et al., 2017). Sexual assault increases the likelihood of depression, PTSD, and suicidal ideation over the lifetime of the victim. Sexual assault also affects physical health. Victims of sexual assault report increased health care use in adulthood and poorer physical health outcomes (National Coalition for the Prevention of Sexual Abuse and Exploitation). Child Education, 2012). In addition, there is an association between sexual assault and vaginal bleeding, chronic pelvic pain, sexually transmitted infections, vaginal and/or anal tears, urinary tract infections, pregnancy unintended pregnancy, stillbirth, miscarriage and sexual dysfunction (J.C. Campbell & Lewandowski, 1997; World Health Organization, 2013). Being sexually assaulted is also linked to migraines and headaches, chronic pain, cardiovascular disease, fractures, and irritable bowel syndrome (National Coalition Against Child Sexual Abuse and Exploitation, 2012; World Health Organization, 2013). Declining physical health continues to serve as a sign or reminder of sexual assault behavior, affecting mental health outcomes. main analysis

I used hierarchical regression to assess the impact of positive experience with the justice system, metric COVID-19 case rates, and administered COVID-19 vaccination rates on ratings and resilience class. All three predictors were assessed in Block 1. As shown in Table 1, positive experience with the justice system had a statistically significant impact on resilience rating ($B = 0.141$, $SE = 0.052$, $p = 0.009$), but the other predictors were insignificant. The model accounts for 7% of the variance. Two-way interactions were added to block 2. As shown in Table 2, the impact of positive experience with the justice system was still significant ($B = 0.182$, $SE = 0.064$, $p = 0.006$), but The remaining predictors, including the two one-way interactions, have negligible effects. This model explains 7% of the variance. The three-factor interaction of the three predictors was added to block 3. Similarly, the impact of positive experience with the justice system remained significant ($B = 0.191$, $SE = 0.066$, $p = 0.005$). , but other predictors, including three one-way interactions, had a negligible effect. This model explains 6% of the variance.

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Table: Regression analysis of Predictors of Resiliency Appraisals

Predictor Variables	Block 1			Block 2			Block 3		
	B	Error	p	B	Error	p	B	Error	p
The Positive Experiences / Legal System	0.141	0.052	0.009**	0.182	0.064	0.006**	0.191	0.066	0.005**
COVID-19 and Metric Case Rate	0.014	0.012	0.248	0.074	0.050	0.142	0.090	0.055	0.103
COVID-19’s Vaccines Administered	0.000	0.000	1.031	-0.000	0.000	0.787	0.000	0.000	0.637
Positive Experiences in Legal System of Metric Cases				-0.018	0.014	0.222	-0.022	0.015	0.162

Positive Experiences and Legal System in Vaccines				0.000	0.000	0.579	-0.000	0.000	0.545
Metric Cases in Vaccines							-0.000	0.000	0.369
Positive Experiences and Legal System: Metric Cases of Vaccines							0.000	0.000	0.364
Result R ²	0.102			0.118			0.126		
Adjusted the R ²	0.072			0.067			0.055		
R ² Changes				0.005			0.012		
Model p-values	0.021*			0.048*			0.103		

Note. *p<0.05 ** p<0.01

Although there are negligible interaction effects, I performed a simple slope test using the point selection method, investigating the effect of positive experience with the legal system in all combinations. The possible outcomes of COVID index cases and vaccination rates are the mean plus/minus one standard deviation . The results of these are shown in Tables 2 and Figure 3. Although still insignificant (B = 0.38, p = 0.11), the relationship between positive experience with the justice system and the resilience rating is most obvious when both infections and vaccinations are - 1 SD; this will be the pre-pandemic setting. An almost significant effect was found when the index cases were -1SD and the vaccine was moderate; this will be the backdrop to a return to a pre-pandemic (or at least quasi-normal) state.

DISCUSSIONS

In the current study, I examined the impact of COVID-19 case rates by data and COVID-19 vaccines used on the relationship between positive experiences with the justice system and ratings. Resilience ratings of women who have been sexually assaulted. The results

indicate that the strongest impact on resilience is positive experiences with the justice system. Case rates by COVID-19 metrics and number of vaccines used had no effect on positive experience with the justice system. This finding is consistent with previous research, which has demonstrated that positive interactions with law enforcement are associated with an individual feeling more in control of their life and recovery. higher (Cieslak et al., 2008). Previous research has emphasized the importance of environmental factors such as social support in dealing with sexual assault (Bryant-Davis et al., 2011; Ullman & Relyea, 2016). The COVID-19 pandemic has resulted in isolation and may have improved the relationship between positive experience with the justice system and resilience ratings due to lack of social support. However, neither the weekly COVID-19 case rate, the number of COVID-19 vaccinations administered, nor their combination adjusted for the relationship between positive experience and positive outcomes. Justice system and resilience. Although not significant, there is a notable difference in the direction of the relationship between positive experience with the justice system and resilience as the metric weekly rate of COVID-19 cases. the highest level and the lowest number of vaccines administered. slope is negative. The negative slope suggests that when individuals reported more negative experiences to law enforcement, they reported higher resilience ratings. In chronological order, peak case rates and below-average vaccination rates will occur relatively early in the pandemic, when stress levels are highest and courts are closed to the public. Research shows that a pandemic is an uncertain stressor, meaning that feelings or risks constantly change and evolve as the epidemic changes, leading to altered perceptions of stressors. other straight lines in life (Taylor, 2022). Although the results were not significant, I found the shift in direction interesting to look at because this relationship contrasts with the relationship described between positive experience with the justice system and resilience. . It is possible that a unified community-level response to a stressor will bring people together and lead to increased feelings of resilience and social support, which have been reported in recent years. other large-scale stressful community events (Bryant-Davis et al., 2011; Taylor, 2022; Ullman & Relyea, 2016).

Also notable is the tendency to have a significant single gradient that occurs with average vaccination and metric cases of -1SD. This period corresponds to the later phases of the pandemic, as COVID-19 cases are fewer and vaccination has begun on a larger scale. It is possible that with lower levels of COVID-19 activity, the relationship between positive experiences with the justice system and resilience ratings is stronger, so that people with better experiences with The rule of law also showed a higher resilience rating. Research that validates previous work shows that having a fair trial with fewer secondary victims improves outcomes after a sexual assault incident. Resilience tends to act as a buffer that can reduce the negative impact of stressful life events to some extent, although once the severity and number of factors stressors increase, resilience tends to decrease. Although there are few studies that specifically examine the relationship between secondary victimization and resilience ratings, secondary victimization is a significant stressor that affects mental, physical and emotional health. and feelings of a person. Therefore, one would expect that when someone reported more negative experiences with the justice system, they would also report a lower resilience rating. The COVID-19 pandemic caused courts to close early in the pandemic, and the stress of the virus and the pandemic may have overshadowed other stressors that led to a perception of high resilience. than. The change in direction at the start of the pandemic was remarkable and unexpected given the negative impact of being a secondary victim. There is also a positive slope where vaccine supply is moderate and COVID-19 cases are low with a larger estimate than the other segments. One theory is that the relationship may change direction initially due to the novelty of the pandemic and then, as it spreads through COVID-19, reinforcing the relationship between positive experience and the legal system. and resilience ratings.

CONCLUSION

In this study, I investigated how the rate of COVID-19 cases and the number of COVID-19 vaccines used affected the relationship between positive experience with the justice system and the ability to recovery after sexual assault. Previous research has shown that resilience mediates the relationship between stressful experiences and negative physical,

mental, and emotional health outcomes. Furthermore, the more secondary victims an individual reports, the weaker their resilience is. Individuals who reported more negative experiences with the justice system were also expected to report lower levels of recovery, and the rate of COVID-19 cases and vaccines used adjusted for the relationship. This. The results from my thesis show that those who report more negative experiences with law enforcement (i.e. higher rates of secondary victims) have lower resilience ratings and lower rates of injury. The COVID-19 index case rate as well as the vaccine used had no significant impact on this relationship. Although not statistically significant, at some levels of moderators the relationship between the two variables changed in a way that made a more negative experience with the justice system related to likelihood ratings. Higher recovery. Some of the limitations of the study were the possibility of selection bias, the relatively small sample size, the difficulty in reporting COVID cases and vaccines, and attrition. These findings, if replicated in a larger sample, could change the focus of legal protection services when the next pandemic or large-scale stressor begins. One idea is to focus services on more tangible issues at the start of another large-scale event, such as connecting customers to social support rather than navigating the justice system. Future research may help address these limitations and further improve the response of legal defense clinics to future large-scale stressful events.

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