

# **Beyond Trauma: A Healing Journey for Women**

Curriculum written by  
Stephanie S. Covington, Ph.D., LCSW

Training provided by  
Carol Ackley, LADC

**Crisis=Danger & Opportunity**

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# Levels of Violence

- Childhood
- Adolescence
- Adult
- Street (workplace and community)
- Consumer Culture
- Media
- War
- Planet

# Two Kinds of Suffering

- Natural
- Created

# Definition of Trauma

The diagnostic manual used by mental health providers (DSM IV-TR) defines trauma as, “involving direct personal experience of an event that involves actual or threatened death or serious injury, or other threat to one’s physical integrity; or a threat to the physical integrity of another person; or learning about unexpected or violent death, serious harm, or threat of death or injury experienced by a family member or other close associate.”

(American Psychiatric Assoc. [APA] 2000, pg. 463).



# Definition of Trauma (cont.)

“The person’s response to the event must involve intense fear, helplessness or horror (or in children, the response must involve disorganized or agitated behavior).”

(American Psychiatric Assoc. [APA] 2000, pg. 463).

# Violence Against Women

Violence against women is so pervasive that the United Nations has addressed and defined violence against women as “any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivations of liberty, whether occurring in public or private life.”

(United Nations General Assembly, 1993).

# Gender-Responsive Services

## Gender-Responsiveness

Creating an environment through site selection, staff selection, program development, content, and material that reflects an understanding of the realities of the lives of women and girls and that addresses and responds to their strengths and challenges.

(Covington & Bloom)



# Theoretical Foundation

The theories related to gender and substance abuse (and any other relevant treatment services) that create the framework of thought for program development. This is the knowledge base that creates the foundation upon which the program is developed.

# Treatment Strategies

The approaches used in the program that create the therapeutic process. These are the ways in which theory is operationalized (how theory is applied).

# **Women's Issues: An International Perspective**

- **Shame and Stigma**
- **Physical and Sexual Abuse**
- **Relationship Issues**
  - fear of losing children
  - fear of losing partner
  - needing partner's permission to obtain treatment

# **Women's Issues: An International Perspective**

- **Treatment Issues**
  - lack of services for women
  - not understanding treatment
  - long waiting lists
  - lack of childcare services
- **Systemic Issues**
  - lack of financial resources
  - lack of clean/sober housing
  - poorly coordinated services

# THE ATMOSPHERE OF THE INSTITUTION THE SPIRIT OF THE “GOOD FAMILY” ENVIRONMENTAL THERAPY



Lotta Länne, Sweden, 2006



# ***Helping Women Recover: A Comprehensive Integrated Approach***

- **Theory of Addiction**
  - Holistic health model
  - Chronic neglect of self in favor of something or someone else
- **Theory of Women's Psychological Development**
  - Relational–Cultural Model (Stone Center)
- **Theory of Trauma**
  - Three Stage Model (Herman)
  - Upward Spiral – A Transformational Model (Covington)

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# ***Voices: A Program of Self-discovery and Empowerment for Girls***

## **Theory of Girls' Psychological Development**

- Relational–Cultural Model (Stone Center, Gilligan, Brown)

## **Theory of Attachment**

- Ainsworth, Bowlby, Harlow, Stern

## **Theory of Trauma**

- Three Stage Model (Herman)
- Transformational Spiral (Covington)

## **Theory of Resilience**

- Biscoe, Wolin & Wolin

## **Theory of Addiction**

- Holistic Health Model

# ***Beyond Trauma: A Healing Journey for Women***

## Trauma Theory

Sandra Bloom, M.D.

Mary Harvey, Ph.D.

Judith Herman, M.D.

Peter Levine, Ph.D.

et al.

Integrates cognitive-behavioral, expressive arts, guided imagery, and relational therapy.

# “Therapeutic culture” has these elements

- *Attachment*: a culture of belonging
- *Containment*: a culture of safety
- *Communication*: a culture of openness
- *Involvement*: a culture of participation and citizenship
- *Agency*: a culture of empowerment

(Haigh)

# Three Critical and Interrelated Issues

- Substance Abuse
- Mental Health
- Trauma



# Relational-Cultural Theory

Some women use drugs:

- To maintain a relationship
- To fill in the void of what's missing in a relationship
- To self-medicate the pain of abuse in relationships

(Covington & Surrey, 1997)

# Trauma-informed Services

- These are services that are provided for problems other than trauma but require knowledge about violence against women and the impact of trauma thereby increasing their effectiveness.

# Trauma-informed Services

Trauma-informed services:

1. Take the trauma into account.
2. Avoid triggering trauma reactions and/or traumatizing the individual.
3. Adjust the behavior of counselors, other staff and the organization to support the individual's coping capacity.
4. Allow survivors to manage their trauma symptoms successfully so that they are able to access, retain and benefit from the services.

(Harris & Fallot)

# Ten Principles of Trauma-Informed Services

## Principle 1.

*Trauma-Informed Services Recognize the Impact of  
Violence and Victimization on Development and  
Coping Strategies*

# Ten Principles of Trauma-Informed Services (cont.)

## Principle 2.

*Trauma-Informed Services Identify Recovery from Trauma as a Primary Goal*



# Ten Principles of Trauma-Informed Services (cont.)

## Principle 3.

*Trauma-Informed Services Employ an Empowerment Model*

# Ten Principles of Trauma-Informed Services (cont.)

## Principle 4.

*Trauma-Informed Services Strive to Maximize a  
Woman's Choices and Control Over Her Recovery*

# Ten Principles of Trauma-Informed Services (cont.)

## Principle 5.

*Trauma-Informed Services Are Based in a Relational  
Collaboration*

# Ten Principles of Trauma-Informed Services (cont.)

## Principle 6.

*Trauma-Informed Services Create an Atmosphere  
That Is Respectful of Survivor's Need for Safety,  
Respect, and Acceptance*

# Ten Principles of Trauma-Informed Services (cont.)

## Principle 7.

*Trauma-Informed Services Emphasize Women's Strengths, Highlighting Adaptation Over Symptoms and Resilience Over Pathology*



# Ten Principles of Trauma-Informed Services (cont.)

## Principle 8.

*The Goal of Trauma-Informed Services Is to Minimize  
the Possibilities of Retraumatization*

# Ten Principles of Trauma-Informed Services (cont.)

## Principle 9.

*Trauma-Informed Services Strive to Be Culturally Competent and to Understand Each Woman in the Context of Her Life Experiences and Cultural Background*

# Ten Principles of Trauma-Informed Services (cont.)

## Principle 10.

*Trauma-Informed Agencies Solicit Consumer Input and Invite Consumers in Designing and Evaluating Services*

Elliot, D.E.; Bjelajac, P.; FalLOT, R.D.; Markoff, L.S.; Reed, B.G. *Trauma-Informed or Trauma-Denied: Principles and Implementation of Trauma-Informed Services for Women*. Journal of Community Psychology, July, 2005., 33(4): 461-477.

# Trauma Specific Services

Services designed specifically to address violence, trauma, and related symptoms and reactions. The intent of the activities is to increase skills and strategies that allow survivors to manage their symptoms and reactions with minimal disruption to their daily obligations and to their quality of life; and eventually to reduce or eliminate debilitating symptoms and to prevent further traumatization and violence.

# Statistics

**The following statistics illustrate how pervasive interpersonal violence is in the lives of women and girls.**

- The strongest risk factor for being a victim of partner violence is being female. (APA, 1996)
- Approximately 1.5 million women are raped or physically assaulted by an intimate partner each year in the US. (Bureau of Justice Statistics [BJS], 2000).



# Statistics

- Violence against the woman occurs in approximately 20 percent of dating couples (APA, 1996).
- Women age 16-24 experience the highest per capita rates of intimate violence (19.6 victimizations per 1,000 women)(BJS, 2002).
- Violence within the family is traumatizing to most women. (APA, 1996).

# Statistics

- While both male and female children are at risk for abuse, females continue to be at risk for interpersonal violence in their adolescence and adult lives. (Covington & Surrey).
- In 1998, over 1,800 murders in the US were attributed to intimate partners. Three quarters of the victims were women, accounting for 33% of all murders of women and 4% of all murders of men. (BJS, 2000a).

# Statistics

- More female than male adolescents have been sexually assaulted. (Commonwealth Fund, 1997).
- An estimated 67 of every 100,000 females in the United States were reported rape victims in 1998. Despite a decline in the nation's crime rate, over the past decade, reported rates of rape and sexual assault did not decline.(FBI, 1999).

# Statistics

- Only 22 percent of rapes are committed by someone the victim does not know. (Kilpatrick, Acierno, Saunders, Resnick, Best, & Schnurr, 1998).
- While relationship violence happens to women of every race and ethnic background, African-American women are physically assaulted at a rate that is 35% higher than Caucasian women, and about 2-1/2 times the rate of women of other races. (National Coalition Against Domestic Violence, 2000).

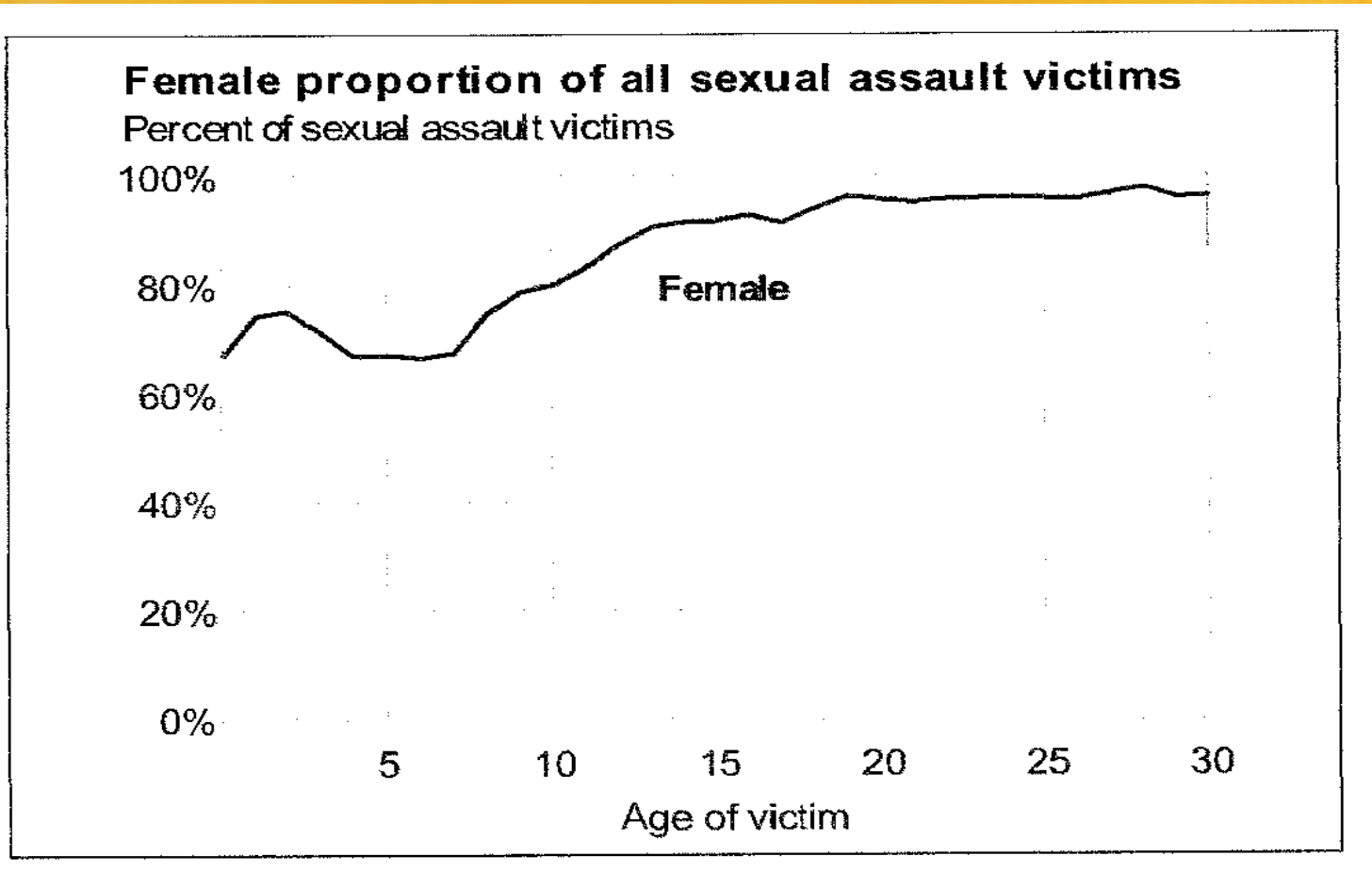


# Statistics

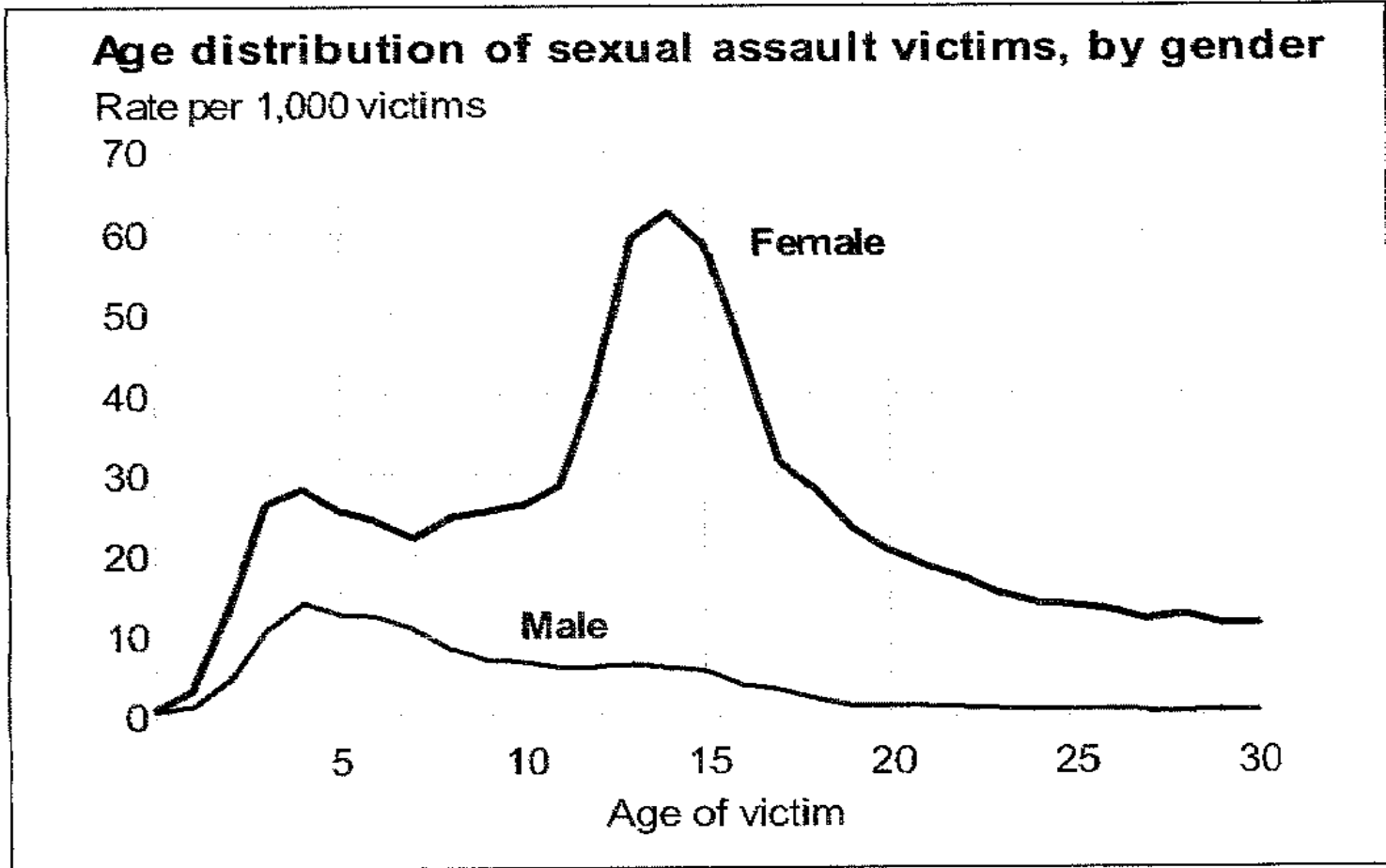
- 1/3 of women in state prison and 1/4 in jails said they had been raped (BJS, 1999).
- Women in prison reported childhood abuse at a rate almost twice that of men; abuse of women as adults was eight times higher than the rate for men (Messina et. al., 2001).
- Between 23-37% of female offenders reported that they had been physical or sexually abused before the age of 18 (BJS, 1999).



# Sexual Assault Graph



# Sexual Assault Graph



# Process of Trauma

## TRAUMATIC EVENT

Overwhelms the Physical & Psychological Systems  
Intense Fear, Helplessness or Horror

## RESPONSE TO TRAUMA

Fight or Flight, Freeze, Altered State of Consciousness, Body Sensations, Numbing,  
Hyper-vigilance, Hyper-arousal

## SENSITIZED NERVOUS SYSTEM CHANGES IN BRAIN

## CURRENT STRESS

Reminders of Trauma, Life Events, Lifestyle

## PAINFUL EMOTIONAL STATE

### RETREAT

ISOLATION  
DISSOCIATION  
DEPRESSION  
ANXIETY

### SELF-DESTRUCTIVE ACTION

SUBSTANCE ABUSE  
EATING DISORDER  
DELIBERATE SELF-HARM  
SUICIDAL ACTIONS

### DESTRUCTIVE ACTION

AGGRESSION  
VIOLENCE  
RAGES

# Brain



## Left Side of Brain

- Analytic
- Logical

## Right Side of Brain

- Intuitive
- Emotional

# ACE Study

## (Adverse Childhood Experiences)

- Recurrent and severe emotional abuse
- Recurrent and severe physical abuse
- Contact sexual abuse

### Growing up in a household with:

- An alcoholic or drug-user
- A member being imprisoned
- A mentally ill, chronically depressed, or institutionalized member
- The mother being treated violently
- Both biological parents *not* being present

(N=17,000)



# ACE Study (Adverse Childhood Experiences)

## Results

ACEs still have a profound effect 50 years later, although now transformed from psychosocial experience into organic disease, social malfunction, and mental illness.

- Smoking
- Alcoholism
- Injection of illegal drugs
- Obesity

# Childhood Traumatic Events Women in CJ System

CJ	21%	→	5+ (before age 16)
HMO	13%	→	5+ (before age 18)

Greater exposure to CTE's increased likelihood of 14 out of 20 health-related outcomes.

(Messina & Grella, 2005)

# Childhood Traumatic Events

## CJ Women

### More:

- Problems in adolescence
- Homelessness
- Substance abuse
- Involvement with crime
- Prostitution
- Eating disorders
- Hepatitis & STD's
- Gynecological problems
- Asthma

(Messina & Grella, 2005)

# Childhood Traumatic Events

## Largest Effect-Mental Health

- Psychotropic medication
- Mental health treatment
- Attempted suicide
- Traumatic stress

(Messina & Grella, 2005)

# Childhood Traumatic Events

## Largest Effect-Mental Health

- 980% increase in odds if exposure to 7 CTE's

(Messina & Grella, 2005)



# Implications – CJ System

- Management
- Health Care
- Mental Health Issues

# ***Beyond Trauma: A Healing Journey for Women***

Three Modules:

Violence, Abuse and Trauma

The Impact of Trauma on Women's Lives

Healing from Trauma

Integrates cognitive-behavioral, expressive arts, guided imagery, and relational therapy.

# **Key Elements (Staff and Clients)**

- Learn what trauma/abuse is
- Understand typical responses
- Develop coping skills

# Disorders Related to Trauma and Substance Abuse in Women's Lives

Disorders Related to Trauma and Substance Abuse:

•Depressive Disorders NOS	22.9%
•Major Depressive Disorders	17.5%
•Post traumatic Stress Disorders	16.3%
•Neurotic Anxiety Disorders	13.8%
•Bipolar Disorders	13.7%
•Mood or Dysthymic Disorders	5.3%
•Psychotic Disorders	4.8%
•Personality and Misc. Disorders	5.8%

Source: Patterns of Comorbidity among Women with Childhood Interpersonal Trauma, Mental Health Disorders, and Substance Related Disorders. *Journal of Behavioral Health Services & Research* (in press)

# Post-traumatic Stress Disorder

- Re-experiencing the event through nightmares and flashbacks.
- Avoidance of stimuli associated with the event (for example, if a woman was raped in a park, she may avoid parks, or if she was assaulted by a blonde man, she may avoid men with blonde hair).
- Estrangement (the inability to be emotionally close to anyone)



# Post-traumatic Stress Disorder (cont.)

- Numbing of general responsiveness (feeling nothing most of the time)
- Hyper-vigilance (constantly scanning one's environment for danger, whether physical or emotional)
- Exaggerated startle response (a tendency to jump at loud noises or unexpected touch) (DSM – IV)

# Post-traumatic Stress Disorder (cont.)

Three Symptom Clusters:

- Re-experiencing
- Numbing and Avoidance
- Hyperarousal

# Disorders Related to Post-traumatic Stress Disorder

- Depression
- Anxiety
- Panic disorder
- Phobic disorder
- Substance abuse
- Physical disorders

Source: Davidson, J. (1993) "Issues in the diagnosis of posttraumatic stress disorder."  
In *American Psychiatric Review of Psychiatry*, Vol. 12

# Trauma: Stages of Recovery

<u>Syndrome</u>	<u>Stage One</u>	<u>Stage Two</u>	<u>Stage Three</u>
Hysteria (Janet 1889)	Stabilization, Symptom- oriented treatment	Exploration of traumatic memories	Personality reintegration, rehabilitation
Combat trauma Scurfield (1985)	Trust, stress- management education	Re-experiencing trauma	Integration of trauma

Source: Herman, 1992, 1997

# Trauma: Stages of Recovery

<u>Syndrome</u>	<u>Stage One</u>	<u>Stage Two</u>	<u>Stage Three</u>
Complicated post-traumatic stress disorders	Stabilization	Integration of memories	Development of self, drive integration

Source: Herman, 1992, 1997



# Trauma: Stages of Recovery

<u>Syndrome</u>	<u>Stage One</u>	<u>Stage Two</u>	<u>Stage Three</u>
Multiple personality disorder (Putnam 1989)	Diagnosis, stabilization, communication cooperation	Metabolism of trauma	Resolution, integration, development of post-resolution coping skills
Traumatic disorders (Herman 1992)	Safety	Remembrance and mourning	Reconnection

Source: Herman, 1992, 1997

# Trauma

## Three Group Models

<u>Group</u>	<u>Recovery Stage One</u>	<u>Recovery Stage Two</u>	<u>Recovery Stage Three</u>
Therapeutic task	Safety	Remembrance and mourning	Reconnection
Time orientation	Present	Past	Present, future
Focus	Self-care	Trauma	Interpersonal relationships

Source: Herman, 1992, 1997

# Trauma

## Three Group Models

<u>Group</u>	<u>Recovery Stage One</u>	<u>Recovery Stage Two</u>	<u>Recovery Stage Three</u>
Membership	Homogeneous	Homogeneous	Heterogeneous
Boundaries	Flexible, inclusive	Closed	Stable, slow turnover
Cohesion	Moderate	Very high	High

# Trauma

## Three Group Models

<u>Group</u>	<u>Recovery Stage One</u>	<u>Recovery Stage Two</u>	<u>Recovery Stage Three</u>
Conflict tolerance	Low	Low	High
Time limit	Open-ended or repeating	Fixed Limit	Open-ended
Structure	Didactic	Goal-directed	Unstructured
Example	<b>Twelve-step programs</b>	<b>Survivor group</b>	<b>Interpersonal psychotherapy group</b>

Source: Herman, 1992, 1997

# Upward Spiral





# Triggers

A trigger is something that is an external stimulus that sets off a physical or emotional reaction in a person. The stimulus can be a sound, another person, a place, a smell, a behavior... almost anything that consciously or subconsciously reminds the woman of the past trauma.

# Grounding

Grounding techniques are strategies to help a person who is dissociating (“losing time”, emotionally absent) “come back” into current reality and feelings.

Grounding techniques can help women realize that they are in the here and now and that what they are experiencing is in the past and it is not happening now.

# When is a Woman Ready for Trauma Processing?

- She is able to use some safe coping skills
- She has no major current crises or instability (e.g., homelessness or domestic violence)
- She *is willing* to do this type of work
- She can reach out for help when in danger
- She is not using substances to such a severe degree that emotionally upsetting work may increase her use

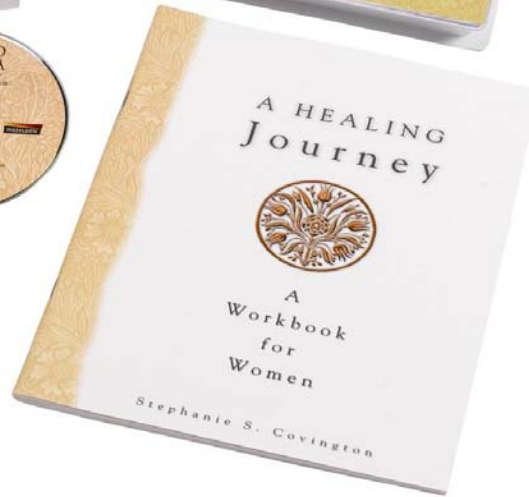
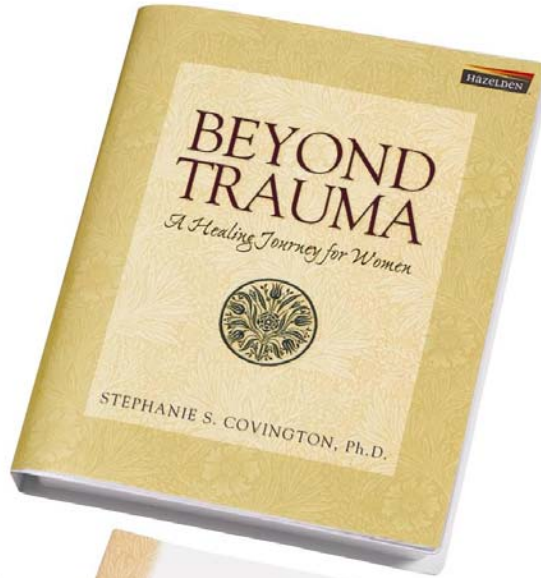
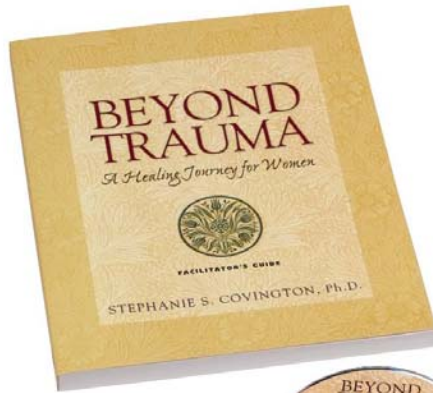
# When is a Woman Ready for Trauma Processing?

- Her suicidality has been evaluated and taken into account
- She is in an ongoing system of care that is stable and consistent, with no immediate planned changes (e.g., discharge from inpatient unit or residential program)

# Secondary Traumatic Stress (STS)

- Compassion fatigue
- Burnout
- Vicarious traumatization





# Beyond Trauma Themes

- Safety
- Empowerment
- Connection (Aloneness)
- Normal reactions (Shame)
- Mind-body connection
- Substance abuse
- Woman-centered

# What Makes a Good Facilitator?

The following qualities in a facilitator will help to ensure a positive group experience:

- Trustworthy
- Credible
- Available
- Reliable, consistent
- Hopeful
- Warm, compassionate
- Emotionally mature

# **What Makes a Good Facilitator?**

## **(cont.)**

- Healthy boundaries, respects confidentiality
- Committed to and interested in women's issues
- Multi-cultural sensitivity and responsiveness
- Appropriate gender - a female should facilitate the all-female groups



# What Makes a Good Facilitator? (cont.)

- If trauma survivor, she needs to feel confident that she is at a place in her own recovery that will allow for healthy and positive outcomes for herself and the women in the group.
- Content expertise, if possible
- Skills as a facilitator



# Role of the Facilitator

- Begin and end on time
- Maintain structure of the group
- Move the group through the content of each session
- Lead by example by having appropriate boundaries and containing your feelings
- Allow each woman to have her own experience of the group

# **Module A: Violence, Abuse, and Trauma**

**Session 1**     *Connections between Violence,  
Abuse & Trauma*

**Session 2**     *Power and Abuse*

(10 activities)

***Beyond Trauma***  
**Module A**  
**Session 1**

**Connections between Violence,  
Abuse & Trauma**

# Inner Self & Outer Self

- Impacts Inner Self – It can impact our inner life... our thoughts, feelings, beliefs, values. For example, some women believe that “you can’t trust anyone”, and “the world is a very unsafe place.”

# Inner Self & Outer Self (cont.)

- Impacts Outer Self – It can impact our outer life... our outer life consists of our relationships and our behavior. Many women who have experienced trauma struggle with their relationships – families, friends, sexual relationships.



# Traumatic Events

**Trauma can take many forms:**

- Emotional, sexual or physical abuse,
- Extremely painful and frightening medical procedures
- Catastrophic injuries and illnesses
- Rape or assault
- Muggings
- Domestic violence
- Burglary

# Traumatic Events (cont.)

- Witnessing murder
- Automobile accidents
- Immigration
- Natural disasters (hurricanes, earthquakes, tornadoes, fires, floods, volcanoes)
- Abandonment (especially for small children)
- Terrorism such as September 11, 2001
- Witnessing violence such as a parent harming another parent

# Traumatic Events (cont.)

- Loss of a loved one and severe bereavements (even of a pet)
- Combat/war
- Torture
- Kidnapping
- Intergenerational (cultural) trauma

Of all these forms of trauma, women are at greater risk of interpersonal abuse than men.

# Trauma & Abuse

- Sexual abuse
- Physical abuse
- Emotional abuse
- Domestic violence
- Witnessing abuse/violence
- Stigmatization
  - Incarcerated women
  - Women of color
  - Poor women
  - Lesbian, transgendered
  - Mental illness
  - Physically challenged

# Safety

- Internal

Internal safety is how we take care of our emotions and feelings. If we feel overwhelmed, sad, angry, lonely or frightened, we need to have ways to take care of ourselves when we are stressed.



# Safety

- External

External safety issues involve actions we take in our surroundings. We may lock our doors, choose not to go out alone at night, or un-list our telephone number. We do things to try and keep ourselves physically safe in our environment.

***Beyond Trauma***  
**Module A**  
**Session 2**

**Power and Abuse**



From the manual *In Our Best Interest: A Process for Personal and Social Change*.  
Available through Domestic Abuse Intervention Project, 206 W. 4th St., Duluth, MN 55806

# VIOLENCE

## USING COERCION AND THREATS

- Making and/or carrying out threats to hurt her
- Threatening to: leave her commit suicide report her to welfare
  - Making her drop charges
  - Make her do illegal things

## USING INTIMIDATION

- Making her afraid by using:
- looks, actions, gestures
  - smashing things
  - destroying her property
  - abusing pets
  - displaying weapons

## USING ECONOMIC ABUSE

- Preventing her from getting a job
- Making her ask for money
- Giving her an allowance
- taking her money
- Letting her know about or have access to family income

## USING EMOTIONAL ABUSE

- Putting her down
- Making her feel bad
- Making her think she's crazy
- Playing mind games
- Humiliating her
- Making her feel guilty

# POWER AND CONTROL

## USING MALE PRIVILEGE

- Treating her like a servant
- Making all the big decisions
- Acting like the "master of the castle"
- Being the one to define men's and women's roles

## USING ISOLATION

- Controlling what she does, who she sees & talks to, what she reads and where she goes
- Limiting her outside involvement
- Using jealousy to justify actions

## USING CHILDREN

- Making her guilty about children
- Using children to relay messages
- Using visitation to harass her
- Threatening to take the children away

## MINIMIZING DENYING AND BLAMING

- Making light of abuse and not taking her concerns about it seriously
- Saying abuse didn't occur
- Shifting responsibility for abusive behavior
- Saying she caused it

# VIOLENCE



# **Module B: The Impact of Trauma on Women's Lives**

**Session 3**     *Reactions to Trauma*

**Session 4**     *How Trauma Impacts our Lives*

(7 activities)



***Beyond Trauma***  
**Module B**  
**Session 3**

**Reactions to Trauma**

# Biological Reactions to Trauma

- Fight
- Flight
- Freeze

# Symptoms of Trauma

- Hyper-arousal – this is the most common reaction. It includes difficulty breathing (panting, shallow, rapid), increased heart rate, cold sweats, muscular tension, tingling, racing thoughts, worry.
- Constriction – this alters breathing, muscle tone and posture. It constricts blood vessels in the skin, arms, legs, and internal organs, and tenses muscles.

Hyper-arousal and constriction describe a physical response.

# Symptoms of Trauma (cont.)

- Dissociation – your mind disconnects from the event or physical reality of what is happening. This is a mind-body split. This feels like “losing time” and can include loss of memory.
- Denial – this is like dissociation only not as severe. A woman ignores or fails to acknowledge a feeling or situation or acts as though it is unimportant.

Dissociation and denial are part of the psychological response.

# Trauma and the Brain

- Exposure to trauma can create a PTSD response in the limbic system
- The PTSD response can become complex and chronic.



# Trauma and the Brain

- Trauma disrupts the chemistry of the brain and can predispose a women to alcohol and drug use, eating disorders, self-injuring behavior and mental health problems.
- When trauma occurs in childhood, it can have lasting effects on brain development.

# Reactions

- Physical reactions are automatic and are not controlled by us.
- Brain reactions are also automatic.
- The body stores reactions. Then the body reacts as though it is back re-living the traumatic events of the past

# Trauma History

	Child	Adolescence	Adult
Event			
Life before the event			
Life after the event			

Overall impact  
of the event:

***Beyond Trauma***

**Module B**

**Session 4**

**How Trauma Impacts**

**Our Lives**

# Trauma and its aftermath

Women report the following:

- “Losing control” of life
- Re-experiencing – can’t concentrate
- Self-image changes
- Depression
- Relationship problems
- Sexuality issues



# **Relationship Problems might include:**

- Idealizing or overvaluing relationships
- Fear of commitment
- Self-imposed isolation
- Triangulating with others
- Humiliating interactions

# **Relationship Problems might include:**

- Involvement in abusive or criticizing relationships
- Difficulty trusting self/others with intimacy
- Tolerating abusive or excessive neediness patterns
- Emotional and physical care-taking of others at expense of self

# **Sexual Issues might include:**

- Avoidance/fear of sex
- Approaching sex as obligation
- Negative feelings with touch
- Difficulty with arousal, sensation
- Vaginal pain
- Emotional distance during sex (spacing out)
- Disturbing sexual thoughts and images
- Compulsive or inappropriate sexual behavior
- Difficulty in intimate relationships

# Module C: Healing from Trauma

- Session 5** *The Addiction and Trauma Connection: Spirals of Recovery and Healing*
- Session 6** *Grounding and Self-Soothing*
- Session 7** *Abuse and the Family*
- Session 8** *Mind and Body Connection*
- Session 9** *The World of Feelings*
- Session 10** *Healthy Relationships: Wheel of Love*
- Session 11** *Endings and Beginnings*

(29 activities)

***Beyond Trauma***  
**Module C**  
**Session 5**

**Spirals of Recovery and Healing**



# Women , Substance Abuse and Trauma

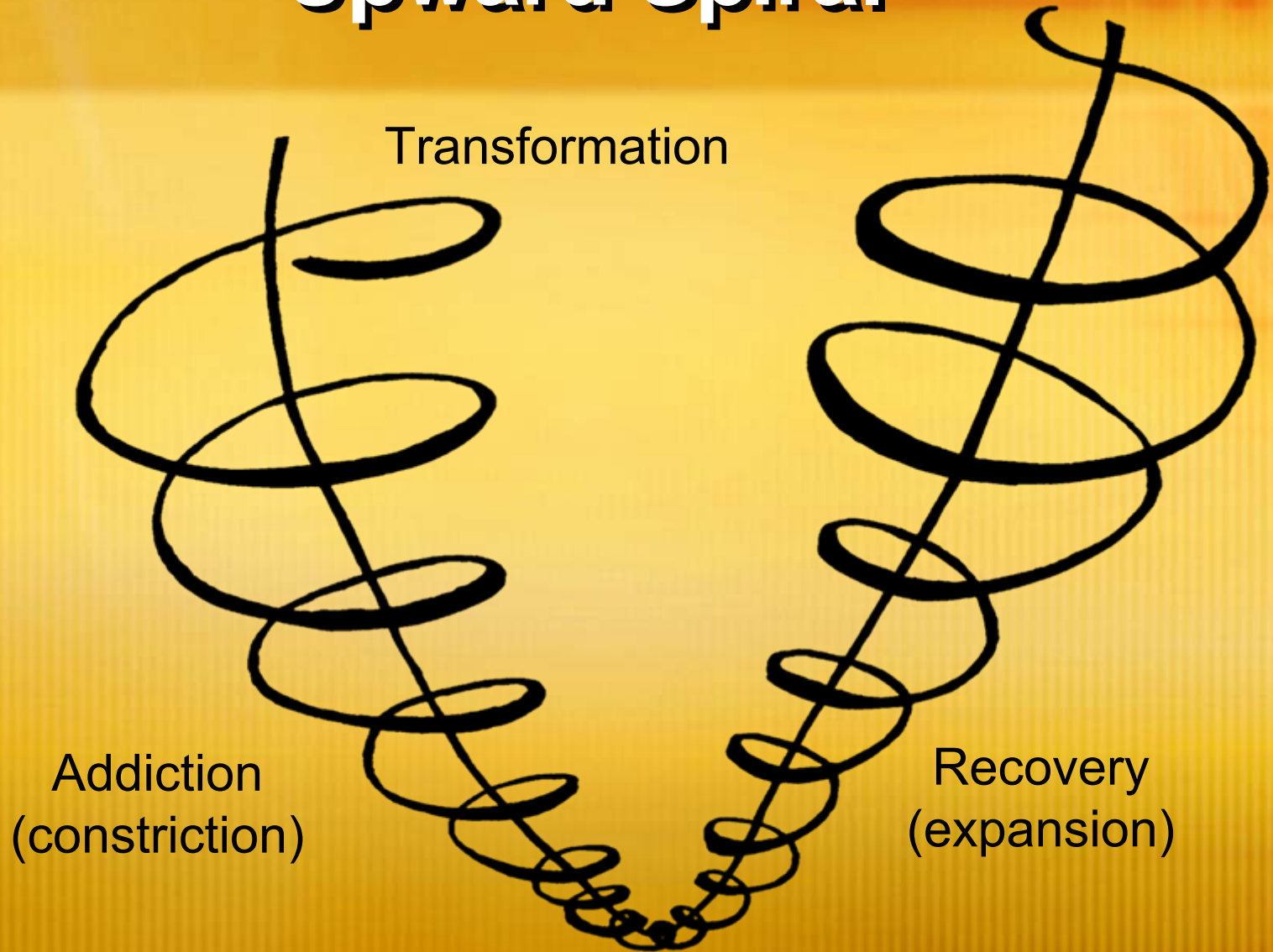
Often women believe that alcohol and other drugs help them in a variety of ways to:

- Make connections with others
- Comfort themselves
- Manage or avoid feelings
- Escape physical pain
- Ease social withdrawal
- Feel comfortable with sexual intimacy
- Create distance

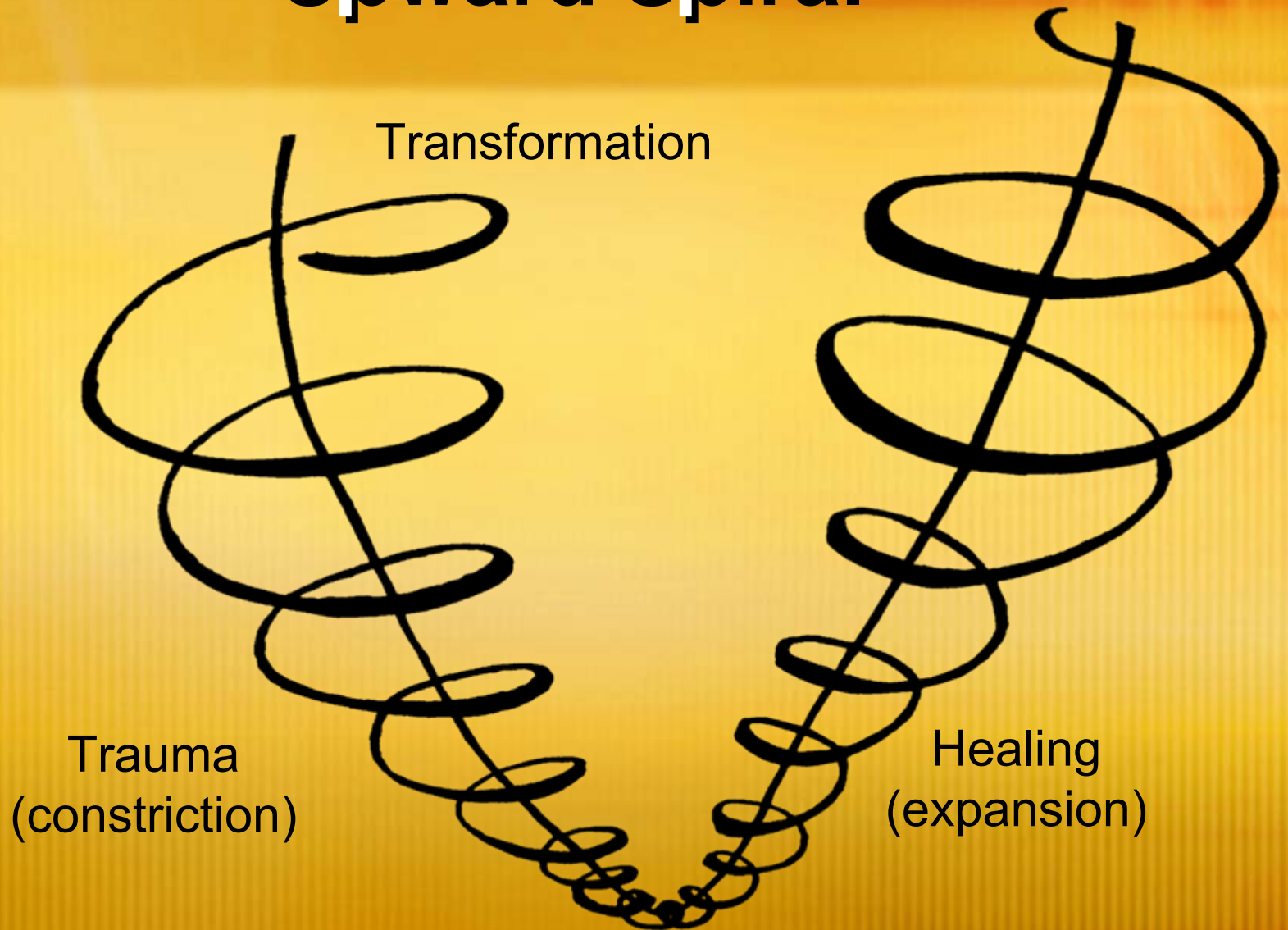
# Women , Substance Abuse and Trauma

- Build courage
- Increase hope, the world seems better
- Forget the past
- Increase a sense of vitality
- Deal with a violent partner
- Dissociate (altered state)
- Feel numb
- Rewire the brain
- Maintain the status quo

# Upward Spiral



# Upward Spiral





# Self-Care Scale

	<b>Not at all</b>	<b>Just a little</b>	<b>Pretty much</b>	<b>Very much</b>
I keep up my physical appearance (nails, hair, bathing, clean clothes)				
I exercise regularly				
I eat healthy meals				
I get restful sleep				
I go to work/school (or complete tasks)				
I can adapt to change				
I keep up my living space				



# Self-Care Scale

	<b>Not at all</b>	<b>Just a little</b>	<b>Pretty much</b>	<b>Very much</b>
I take constructive criticism well				
I can accept praise				
I laugh at funny things				
I acknowledge my needs and feelings				
I engage in new interests				
I can relax without drugs and alcohol				
I value myself				
I live a clean and sober life				

***Beyond Trauma***  
**Module C**  
**Session 6**

**Grounding and Self-Soothing**

# Grounding

Grounding techniques are strategies to help a person who is dissociating (“losing time”, emotionally absent) “come back” into current reality and feelings.

Grounding techniques help the person become aware of the here and now. Grounding techniques can help women realize that they are in the here and now and what they are experiencing is in the past and it is not happening now.

# Self - Soothing

	Alone	With Others
Daytime		
Night Time		

***Beyond Trauma***  
**Module C**  
**Session 7**

**Abuse in the Family**



# Sexual Abuse in Families



## Psychological Abuse

- Sexual Jokes
- Verbal harassment
- Violating boundaries
- Telling child inappropriate sexual information

## Covert Abuse

- Inappropriate touching
- Voyeurism
- Ridicule of bodies
- Sexual Hugs
- Pornography

## Overt Abuse

- Exhibitionism
- French kissing
- Fondling
- Oral Sex
- Penetration

# Reparenting

The single most powerful and effective way to step safely out of rigid childhood roles and heal the wounds of the past is to reparent yourself. It is a critical part of self-healing that will allow you to know and love yourself and have healthy intimate relationships in the future.

# Reparenting (cont.)

- To do this you must be attuned to your inner child's feelings and needs.
- Attunement to your inner child can be the first step toward love and healing.
- Be empathetic, understanding and gentle; validate the child's feelings and address them openly.

# Reparenting (cont.)

- You may feel comfortable reaching out to a close friend or partner, with whom you can be open and vulnerable, to allow this inner child to be held, loved and nurtured.
- Without meeting the needs of your inner child, it can be difficult to meet your adult needs and the needs of those around you.

***Beyond Trauma***  
**Module C**  
**Session 8**

**Mind and Body Connection**



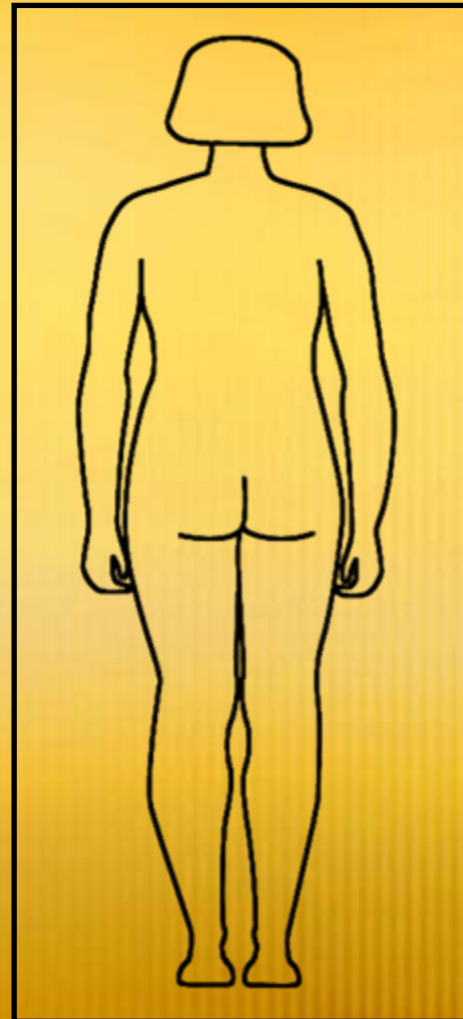
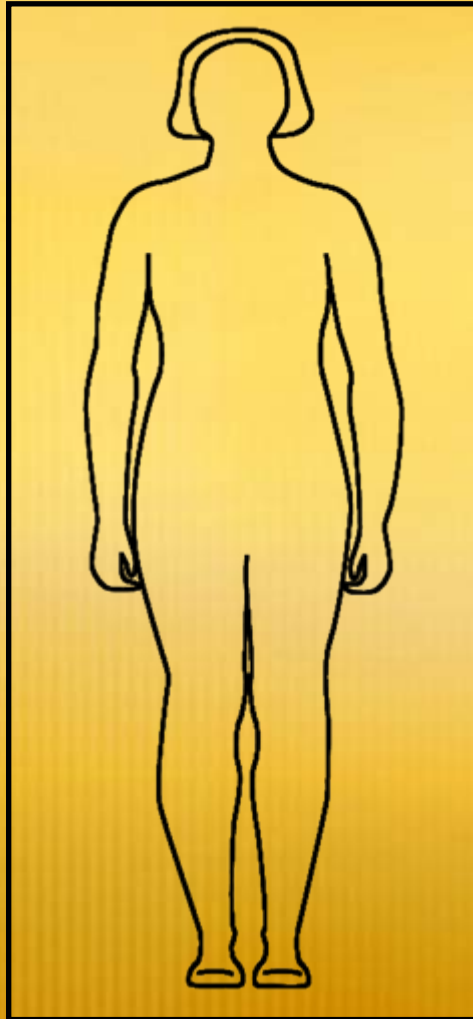
# Emotional Wellness

1. Sense having a feeling.
2. Locate feeling in the body.
3. Name the feeling.
4. Express feeling appropriately
5. Ability to contain feeling.

# Emotional Wellness

- Slow Down. Stop.
- What am I feeling?
- Does the intensity of the feeling match the situation?
- How old am I... as I have this feeling?

# Body-Mind Connection



***Beyond Trauma***  
**Module C**  
**Session 9**

**The World of Feelings**

# Common Feelings

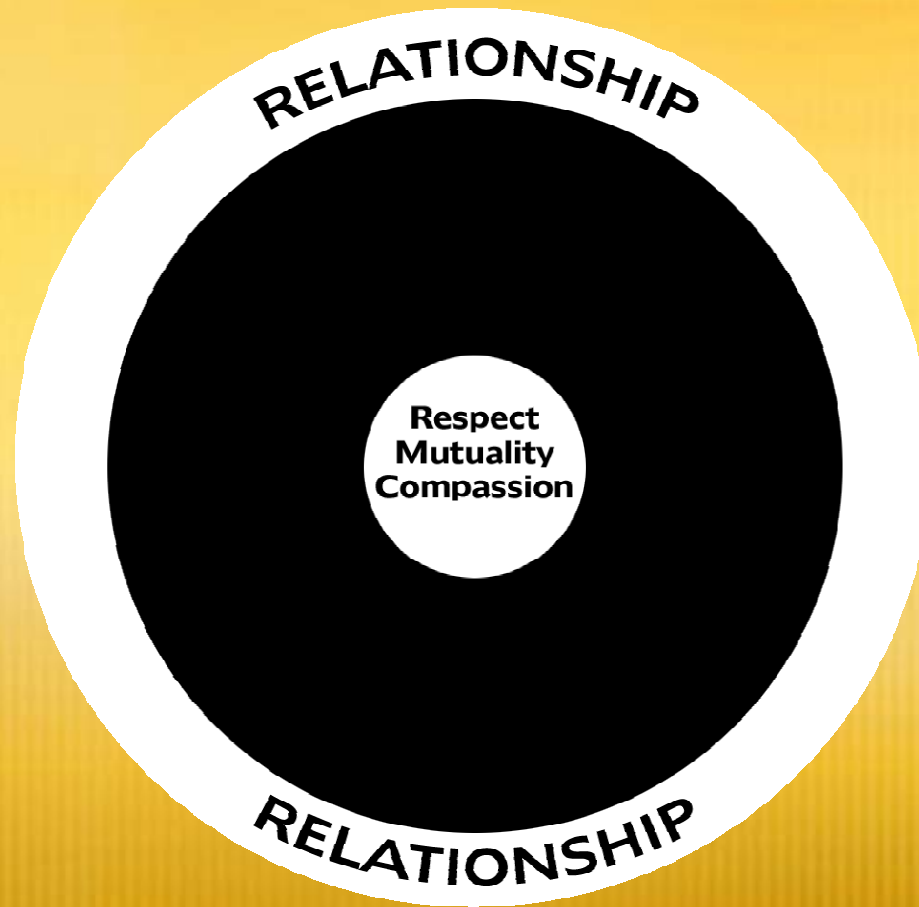
- Anger
- Loss
- Shame



***Beyond Trauma***  
**Module C**  
**Session 10**

**Healthy Relationships:  
Wheel of Love**

# Relationship Wheel



# Respect, Mutuality, Compassion

## Respect

Respect is the appreciation of someone's values and it begins to happen when we see their integrity. We often earn respect when we are willing to do the right thing or take the "right action," particularly when the choice is difficult.

# Respect, Mutuality, Compassion

## Mutuality

Mutuality means there is an equal investment in the relationship. Each person has a willingness and desire to see the other, as well as being seen; to hear the other, as well as being heard; and to be vulnerable, as well as respecting the other's vulnerability. Mutuality also means that there is an awareness of the "we," not a sole focus on two "I"s.

# Respect, Mutuality, Compassion

## Compassion

Compassion is similar to empathy but it occurs on a deeper level. Empathy is understanding another's feeling and being able to feel with them. Compassion means that we go a step further and join with them in their struggle or pain. When we are compassionate we lend our selves to another's process – we give of ourselves in order to be with them emotionally.



# Steps to a Healthy Relationship

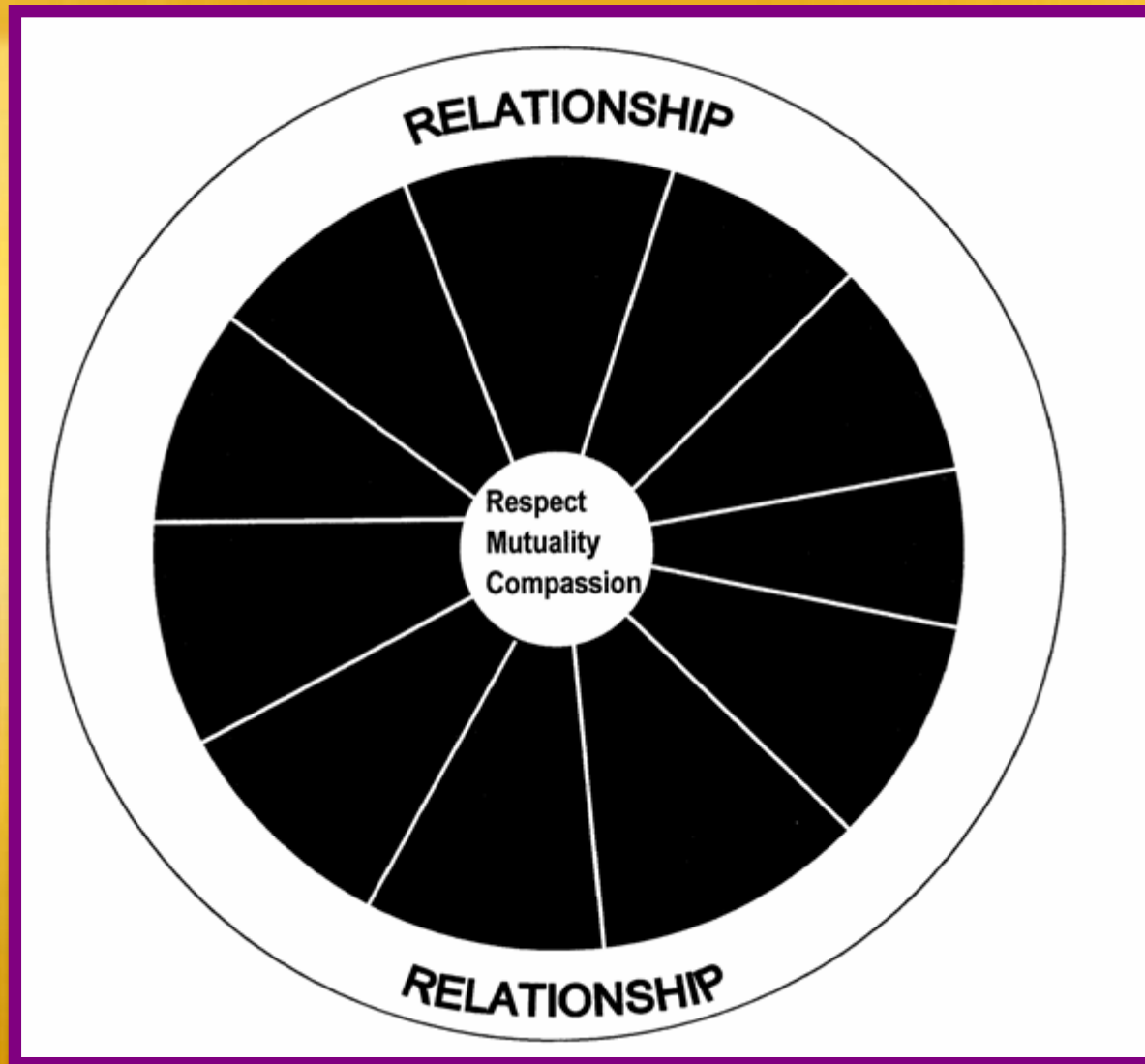
- Similarities
- Ability to Deal with Change
- Compatible Values
- Effective, Open Communication
- Effective Conflict/Anger Resolution
- Effective Negotiation
- Firm Personal Boundaries
- Healthy Sexual Expression
- Shared Quality Time
- Friendship

(Covington & Beckett, 1998)



From the manual *In Our Best Interest: A Process for Personal and Social Change*.  
Available through Domestic Abuse Intervention Project, 206 W. 4th St., Duluth, MN 55806

# Relationship Wheel



# Wheel of Love



***Beyond Trauma***  
**Module C**  
**Session 11**

**Endings and Beginnings**



# Appreciation

- What I appreciate about the other women in the group.
- What I appreciate about the group.

# Spirituality

One definition of spirituality is oneness, wholeness, connection to the universe; belief in something greater than yourself, trust in a higher or deeper part of yourself.

# Spiritual Practices

- Quiet time
- Prayer
- Meditation
- Centering activities such as singing, music
- Being out in nature
- Keeping a journal

# Spiritual Practices (cont.)

- Attending church, synagogue, mosque, temple
- Helping others in need
- Creating personal altars..
- Learning from others.
- Celebrations!

# Beyond Trauma Themes

- Safety
- Empowerment
- Connection (Aloneness)
- Normal reactions (Shame)
- Mind-body connection
- Substance abuse
- Woman-centered



# Women Healing

Working on multiple levels:

- Individual
- Political
- Spiritual

# For More Information

- Stephanie S Covington, Ph.D, LCSW

Email: [Sc@stephaniecovington.com](mailto:Sc@stephaniecovington.com)

Websites: [www.stephaniecovington.com](http://www.stephaniecovington.com)

[www.centerforgenderandjustice.org](http://www.centerforgenderandjustice.org)

- Carol Ackley, LADC

Email: [Ackley@riverridgetreatmentcenter.com](mailto:Ackley@riverridgetreatmentcenter.com)