

Hope for Healing

Recovery and Empowerment for Women Consumers/Survivors with Abuse Histories

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Cover Illustration

The cover illustration is an African symbol meaning,
"The Sun Will Always Rise Tomorrow, Bringing Hope for a Better Day."

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○ Purposes, Method, and Structure of Hope for Healing Curriculum ○

○ *Welcome!*

You are about to embark upon a very fulfilling journey. Although it will be difficult at times, helping women to take their first steps toward recovery from their abuse histories is an experience like no other. You undoubtedly will feel both joy and fear as you start out and as the group process unfolds. Do your best to stay in touch with these feelings and to discuss them with experienced peers, supervisors, and/or coworkers. Also, as you're working through these feelings, it is good to build your library of resources about working with trauma survivors. To help you get started, a list of websites and references is found at the end of this curriculum.

○ *Getting Started*

Why is this Curriculum Important? Studies have shown that between 36-85% of women mental health consumers in the public system have a history of traumatic abuse (Read & Fraser, 1998). Until recently, the effects of this trauma -- and how they compound the difficulties these women already face -- often were overlooked in service and advocacy systems. For instance, symptomatology among women consumers who have been abused consistently has been found to be higher than that of non-abused women consumers (Bryer, et al., 1987). It also has been shown that women abuse survivors have greater difficulties than their non-abused counterparts in overcoming addictions to mood-altering substances, since survivors often use chemicals and alcohol to numb the pain and effects of abuse (Brier & Zaidi, 1989).

This curriculum was designed to help meet the needs of women survivors who also have psychiatric diagnoses. It emphasizes the development of personal strengths and coping strategies, while providing a basic understanding of abuse and its impact on current functioning and feelings. The ultimate goal is to assist women in taking their first steps toward owning their lives and moving beyond their pain.

Who Should Attend? *Hope for Healing* was developed to meet the needs of women consumers **who are just starting to cope with their past (or current) abuse histories**. Therefore, out of respect for women who are new to this process, the group structure does not provide a forum for personal testimonials (Herman, 1992). Novices to abuse recovery tend to drop out of survivor support groups because they become re-traumatized by hearing other people's stories before they have dealt with their own (Talbot et al., 1998). Thus, it is important for you to re-direct personal testimonials throughout the group process because by so doing you will demonstrate to all of the women -- even the ones you are re-directing -- that you are in control of the group process and are concerned about keeping everyone safe. This is a technique that we

also have used very successfully in workshops regarding abuse and crises. We consistently have received very positive feedback from consumers who feel that this technique allows facilitators to address painful topics without overwhelming or upsetting the participants.

Of course, all participants in this curriculum are actively encouraged to share their personal stories in individual counseling or therapy to avoid making it seem as though silence about the past is being promoted (it certainly is not!). Also, if you have the skills and resources, you may decide to convene a special *Testimonial Forum* for the members of your group (at a different time than your normal group). As described in more detail on page 163, this Forum would be for those women who are ready to share and hear personal stories. You and the women should give careful consideration to your internal and external resources prior to holding such an event. If the conditions are right, however, this can be a very powerful healing tool.

Is Individual Therapy Necessary? Which brings us to the next important point. All participants in this curriculum also *must* attend individual counseling or therapy during the group process. The counseling can be given by a peer or a professional (or both), but it is a requirement of group membership that each woman be in or arrange for (with your help, if necessary) individualized support or therapy. Every survivor needs a place to share her life and experiences that is all her own, without having to share the floor with anyone else. A one-on-one therapeutic relationship is the most appropriate place for her to explore in-depth exactly what happened to her and how it made her feel.

What Happens and Where? This curriculum has been designed to provide women with the basic tools to set off on their own recovery journeys. They are given information about different types of abuse, they are offered education about the connection between past abuse and current symptoms or functional difficulties, they work on developing positive and healthy coping skills to better manage their emotions and crises, and they tackle ways to increase self-esteem, personal strength, and assertiveness.

Hope for Healing is intended for use any place where women consumers with abuse histories are living, working, and seeking to move forward in their healing. It can be offered through existing self-help groups, psychosocial rehabilitation programs, clubhouses, community mental health centers, residential facilities, and drop-in centers. Privacy and comfort are of utmost importance to the group process. Thus, you must hold the sessions in a location/room that is private, with a door that closes it off from the rest of the space (if relevant). If you're running the group out of your home, then you should ensure that nobody else is around during that time to protect the women's confidentiality. The room should be large enough for the women to have a fair amount of personal space, with comfortable chairs and work-space, if possible.

What Should I Call My Group? If you are running this curriculum within a mental health or social service agency, give some serious thought to what you will call your group. Some women will not want to be identified as an "abuse survivor" to the entire agency, especially if they are just starting to deal with their past and its effect on their lives. Thus, if you use words such as "abuse," "survivor," "trauma," or the like in the group title, these women may decide not to attend. Try something more generic, such as "Women's Group" or "Hope for Healing Group," so that they can feel safe in joining.

How Many Women Can Join? Group size should not exceed more than 10 women at a time. Since many difficult topics and concepts are addressed, maintaining safety and cohesiveness is of central importance. The more people in the group, the more difficult these will be to maintain.

○ Leadership

Experience Matters! Because of the sensitive nature of this group, and the intense emotions that may arise, it is **strongly** recommended that only women with experience in running groups -- particularly groups that tackle difficult, therapeutic content -- facilitate the curriculum. If you are a qualified yet inexperienced woman who would like to run this group, you need to work with an experienced co-facilitator. Given the sensitive and powerful nature of the curricular content, the importance of having experience in group treatment and trauma support cannot be over-emphasized, in order to protect and best serve the women participants.

Don't "Go It Alone!" Equally important, this group should **not** be run by a sole facilitator. It is crucial that it be co-led by two women for a variety of reasons. First, it is important for you to have someone to back you up should you become ill, go on vacation or a business trip, or otherwise need time off from the group. Given concerns about trust, comfort, consistency, and safety among survivors, it is best for them to **start out** with two co-leaders rather than be faced with the use of a "substitute" facilitator or the cancellation of group sessions. Additionally, in the event that one of the participants becomes overly distressed or goes into crisis during the group, the presence of another facilitator to help her work through the process without disrupting the rest of the group is key to keeping everyone safe and on-track. Use of two co-leaders also is important for the facilitators themselves. This way, you will have another person who is equally invested in the group with whom to process difficult issues and to creatively problem-solve and develop new strategies if one or more of the women seem to be struggling or stagnating.

Does Gender Matter? The use of female co-facilitators is advisable, although not required. Some women have been abused by other women, and thus, it should not

be taken as a given that all female survivors are most comfortable with other women. This often is the case, since perpetrators are more likely to be male than female, but any such assumptions should be avoided. If you are a man or are considering a male co-leader, then you should openly discuss with potential participants feelings they have about this (or ask their therapists or caseworkers to do so to facilitate comfort). A good place to do this is during the Needs Assessment process conducted prior to starting this group, which is presented in a later section. If any of the women object to a male facilitator, then you will need to either re-consider your decision or ask the woman to join the group another time when two women are available to co-lead it.

What About Peers? This curriculum has been designed so that it can be facilitated by women consumers with abuse histories, who also are far enough along in their own recovery to feel comfortable and confident in discussing abuse issues. Running a group like this should *not* be considered a therapeutic way to further the facilitator's own recovery process. While this may indeed be a secondary benefit of running such a group, it is in no way appropriate to use the leadership process as part of one's own treatment. The women who participate in this group, by definition, will just be starting out in facing their pasts and will require someone who is sufficiently recovered herself to serve as a guide, leader, source of support, confidante, and expert. Women consumers who are considering co-leading a group like this should discuss it openly and honestly with their therapists, counselors, peers, and others who know them well enough to help them decide whether or not they're ready for something like this. Of course, co-facilitators who are sufficiently recovered will bring much to a group for survivors because of their personal knowledge of what it's like to be abused and to struggle to heal from the consequences. They can serve as role models and hope for the other women that recovery is indeed a reasonable, attainable goal.

○ **Methods**

How is the Group Structured? *Hope for Healing* uses information-sharing, structured discussions and exercises, story-telling, art, music, reading, writing, meal-sharing, informal socializing, and positive affirmations as tools for reclaiming one's life. Each session begins with a list of goals and materials needed for that particular meeting. There also are specific guidelines to help you understand the purposes of each group activity or exercise, how to conduct the session, and tips or hints on how to handle certain reactions that some women may have to difficult content, such as crises, negative memories or behaviors, and confusion.

You will note that several of the sessions can be split into two separate sessions, depending upon the needs of your group. If the women have not given thought to or worked on certain issues in the past, then some of the exercises may take more time or

effort than is allotted for the typical session. Throughout the curriculum, therefore, you will find a statement guiding you as to where to split certain sessions, to continue the following week, depending upon the needs of your group (see Session 4, page 33, for an example). This is done with the belief that it's better to provide an additional session than to skip content or exercises, or rush the women through group activities.

How Do I Meet the Needs of All Women? Some women will have difficulty with activities and exercises that involve reading and writing. Therefore, we suggest that you read all handouts aloud as a matter of course, to save any women with reading problems from embarrassment. For women who have trouble with writing, we suggest that you provide them with an inexpensive tape recorder into which they can talk, as a substitute for writing, in a number of the exercises. Again, to save them from possible humiliation, you should offer this option to all of the women, letting them know that some women learn and respond better to verbal versus written activities, which is perfectly normal and acceptable. For exercises where women need to make lists and they do not wish to use their tape recorders, you should find a non-obtrusive way to help them write out their answers or ideas (perhaps working with them on the written parts of the activity after the group adjourns, so they don't feel singled out). At the end of many sessions, we provide optional activities that involve drawing or painting for women who have trouble with or do not wish to write.

○ **Structure**

How Much Time is Involved? This curriculum is made up of 31 sessions, meeting once per week, for ninety minutes. Basically, this means that women participants (and you!) need to commit to attending the group weekly for about 7 to 8 months. You may find this a bit overwhelming, although it is comparable to other group treatment modules for women survivors (Harris et al., 1998). This length is quite purposeful on our part – as this is more a therapeutic process than a strictly rehabilitative one. Recovery from traumatic abuse takes commitment and willingness to change one's life. This does not happen overnight – it takes time and effort. If someone is not able to make this time commitment, then she is probably not yet ready or in the right life circumstances to go through this particular group. You may want to find some brief treatment options for her in the meantime to help her manage, but you both should be aware that this will not take the place of the long-term work of recovery. This is okay, however – nobody should be expected to face her past before she is ready, willing, and in the right physical and mental space.

What Else Do I Need to Know? The sessions are designed to build upon one another. They start out with introductory information, slowly working their way up to directly addressing information about abuse and its effect on current functioning and

feelings. Thus, it is best to run them in the order that they are presented. For example, Session 3 (*Safety in Group*) and Session 4 (*Coping with Crises*) are offered early on in the process to give women the skills and comfort they need to stick with the group. If you were to offer these too much later in the process, women might find it difficult to feel safe and protected, or you may come to find that you don't have the foundation to help them manage crises that might arise during your time together.

Note that the first four sessions are open to new members. The content is basic and introductory, although enjoyable and informative. This structure allows new members to "try the group on for size" and to see how well they get along with one another. Even if someone decides to drop out after the first several sessions, she will leave with basic safety and coping skills. Closing the group after the fourth session facilitates safety and trust as the group progresses into more difficult and personal content. Each session builds on the last and introducing new people into the mix could be very threatening for some women and impede their recovery. This is why it can be helpful, if resources allow, to start another group about one month after the first one, so that women new to your agency or self-help group can benefit from this curriculum. If you are able to do this, it would be best to have another two facilitators in charge of the second group, so that you don't increase your chances of burn-out and exhaustion.

The first 15 sessions of this curriculum are designed to provide the women with basic coping strategies, safety skills, and an understanding of themselves as women -- over and above their personal histories. These first sessions are devised to provide a foundation or base set of skills upon which the women can draw as they move forward in dealing with their past abuse. The second 16 sessions deal more directly with understanding and addressing the trauma in their lives. Frequently during these sessions, the skills and strategies developed during the first half of the curriculum are drawn upon to help the women cope with grief, loss, sadness, anger, and the host of other emotions attendant to abuse.

Some time shortly after the 15th session, you should meet with each woman (and her counselor if that is comfortable) to discuss whether she is ready to move on to the trauma content found in the next 16 sessions. As stated above, this is recommended with the belief that no person should be forced to address trauma or any other painful life experience until she is ready. You can review her Needs Assessment with her, and have an honest, non-judgmental conversation about her internal and external resources, and whether she feels these are adequate to help her move on in the healing process. If she is not ready to move on, do NOT deal with it as problematic or negative, but rather, as a healthy life decision based on the need to take care of herself. Emphasize that participation in the first 15 sessions helped her to develop fundamental coping and safety skills, which will hold her in good stead until she is ready to move into the next phases of abuse recovery.

If, at a later date, this woman feels ready to tackle the last 16 sessions of the curriculum, she will need to start over with the first 15 sessions because, as discussed previously, it would not feel safe to the rest of the participants – and would compromise group cohesion – to introduce a new person half-way through the process. Not to worry, however! Because most of the content and exercises tap into complex issues and needs, going through them a second time will be beneficial to many women. If you eventually can convene a group of women who went through the first 15 sessions, took a break, and then decided they'd like to tackle the last 16 sessions, you can form a special group just for them. Before diving into Session 16, however, you would need to start this new group with 3-4 introductory sessions to remind them of group rules and structure, methods for maintaining safety, and crisis coping strategies.

Give the Women and Yourself a Break! In order to make sure that the group process does not become too stressful, overwhelming, or deeply uncomfortable for the women, there also are periodic “*check-in*” sessions where food is served and informal discussions on positive topics take place. In these sessions, you will “check-in” to see how the women are faring, to learn their feelings about the group process, and to instill hope for the future. For these same reasons, there are self-esteem and self-soothing sessions throughout the group process as well. While this adds to the overall length of the curriculum, these sessions are used to provide a break from those that directly address abuse and trauma in the women’s lives. These breaks are **very** important so that women can see that recovery is not always a painful or difficult process, but can be inspiring and fun as well.

What Resources Will I Need? As is true with most treatment or support groups, you will need resources for the supplies used in many of the exercises throughout the curriculum. You also will need resources to provide the light meals for each of the “check-in” sessions. Altogether, depending upon your community, you will need approximately \$200 to \$250 to run this group. If you are running it out of an agency, this should be a pretty standard treatment cost. If you are running it out of your home, a place of worship, a school, or someplace similar, then you will need to come up with ways to raise this money. In accomplishing similar goals, many volunteers and advocates have raised money by sponsoring yard sales (which will provide you with a good excuse to clean out your apartment, basement, or garage of old stuff!), bake sales, walk-a-thons, or raffles (with local organizations donating the prizes). You also can approach local mental health associations, state/local NAMI affiliates, other mental health organizations, or a local philanthropist to request donations.

○ Special Facilitator Considerations ○

Don't Skip this Section! The following section reviews a number of important points to keep in mind as you prepare to run a group of this nature. If you've facilitated trauma groups or have clinical/rehabilitation experience, you already know your personal and ethical responsibilities. Even the best of us, though, need a review sometimes, especially before taking on a new clinical, treatment, or supportive endeavor. So, please avoid your temptation to skip this section – rather, use it as a reminder and confirmation of what you already know. In the throes of working with vulnerable and recovering individuals, it is all too easy for most of us to forget our own needs and limitations, which can lead at best to burn-out and at worst to poor decision-making.

How Do I Keep Members Safe? Safety and trust are extremely important for abuse survivors. Thus, it is highly important to maintain a safe environment in the group. This involves many things, including allowing the women to express their opinions and respecting different viewpoints in a non-judgmental atmosphere. To accomplish this, you should co-establish ground rules about conduct in the first meeting and review them for the first several sessions.

During Session 3, you also will work with the women to define safe and unsafe behaviors in the group, which you will need to monitor (unsafe behaviors) and encourage (safe behaviors) throughout the rest of the curriculum. Additionally during this session, each woman will be given a card (which you will make in advance) with local crisis hotlines and programs in the event that she needs extra support after group. As discussed above, you also must maintain boundaries by asking that personal abuse stories not be told in detail during regular group time.

Finally, you should give some thought to how you will record important details about the women and their lives that does not compromise their feelings of safety. Some women may feel very uncomfortable with note-taking during the group, especially if they are uncertain about how you will keep the notes confidential. Early on in group, initiate a discussion about the fact that you would like to jot down general notes about their life experiences to help you offer the best support. Reassure them that you will not use names, only initials, and that you will not record anything they ask you not to write down. Offer to show them the notes you make at any time, and let them know that you store them in a locked drawer to which only you have the keys. In these notes, avoid making clinical or other types of judgments about the women that you otherwise wouldn't share with them. Keep in mind that you are not their therapist.

What if I Don't Know Something? Be sure to know your OWN limitations as a facilitator. There will be times when group members have questions that you can't answer. It is best to recognize that this happens to even the most experienced of facilitators. A simple solution to this difficulty is to ask the entire group their opinions on the question, and open the topic for discussion. In addition, you may tell the group that you will research the question or ask it of other professionals or experienced facilitators and get back to them as soon as possible.

Am I a Therapist, Group Leader, or Both? If you've been working with vulnerable people for any length of time, you know that there will be occasions when someone in group will want you to be her personal counselor. It's tough, but you will need to respond by setting some strong limits. It is important to let group members know early on that you are not their therapist and cannot function as one. This may be very difficult for you, especially if someone is in crisis. We are not suggesting that you harden your heart or allow someone to spiral out of control. You certainly should help struggling group members to access their therapists or other crisis service providers, but you should try your best to avoid offering that care or treatment directly. You need to protect yourself and stay strong so that you can continue to offer the group the best possible experience. It is your responsibility to do all you can to help and support the women during group time, but at some point you also need to release people to their own lives. To do otherwise not only will lead you to compromise your own well-being, but will send a message to the women that you don't think they are strong enough to deal with their own lives and issues.

What Will I Feel? Secondary trauma or "compassion stress" is a common experience among facilitators of groups such as this one. If we're not careful, even the most seasoned among us can begin to experience symptoms of post-traumatic stress disorder as a result of working with and supporting vulnerable people and abuse survivors over the long-term. We can begin to feel intense exhaustion, frequent irritability, anger, depression, hostility, and confusion. We may even have nightmares, startle responses, or the need to withdraw from others. These are very common experiences when helping people who are working through damaging pasts. This is why it is **crucial** for you to take very seriously **the self-care tips** that we have included at the end of each session. These tips are not offered just for informational purposes, but with the strong encouragement that you, as a facilitator, carve time out of your busy life for self-care to avoid burn-out, over-investment, or your own crises. You also should consider finding some type of clinical support, either from a supervisor, coworker, or peer. Some people who run groups like ours start up their own support groups so they can process what they are hearing and how they are responding to it. If this is possible, it's an excellent source of support and will allow you to release tension.

How Do I Deal with My Own Triggers? Similarly, if you are an abuse survivor yourself, certain sessions or group members may set off flashbacks, intrusive images,

nightmares, and the like. This is why it is so important to read through the entire curriculum before you decide if you are ready to be a co-facilitator. Ask your therapist or counselor, or a supportive friend, to read this curriculum and discuss with you whether or not you're up for this challenge.

If you decide that you are ready, then you should prepare for what you will do if you are triggered during a session. Try to develop some kind of sign that you can give to your co-leader in the event that you are triggered or overwhelmed during group, and leave as soon as you can. Try to get immediate support from a friend, family member, or therapist. Have a crisis hotline number and a crisis program address with you at all times, so that you can quickly access this type of support should you need it as a result of group leadership. If you find over time that you are continually triggered by the group content and participants, then you will need to discuss with your co-leader finding a replacement for you. You should never try to "grin and bear it." This won't do you or the group members any good.

What If I Can't Connect with Someone? You will find at some point that you cannot connect with or relate to a certain woman in your group. She may remind you of someone you don't much like or who has hurt you in the past. She may remind you of yourself, making boundary issues a particular struggle. She may frustrate or confuse you, leading you to react with anger instead of compassion. All of these feelings are quite common, but do need to be worked through with an experienced supervisor, coworker, or peer. In several of the self-care tips, we suggest ways to help get over this problem, such as making a list of two positive things about each woman early on in the group process which you can periodically review to keep hope and positive energy alive. Of course, you will need to put your personal feelings aside and concentrate on helping the women in your group to grow and heal. If you simply can't do this for a given woman, then you will need to ask your co-leader to assume most interactions with her in the future.

Prepare in Advance! It goes without saying that you should read each session in advance so that you will be prepared for the exercises and discussions that will occur that day (or evening). In the following section, we have prepared a check-list for you to use in deciding whether or not you have fully prepared to run the curriculum and each session. Although in some ways these items seem like common sense, it's not out of the ordinary for many of us to rush through our preparations and miss something, especially when we're extremely busy or distracted. Allow yourself to slow down and give careful thought to group preparation **every** week.

○ **Conclusion**

In spite of all of these complexities, it is possible to relax and enjoy taking part in all aspects of this group, especially after things get going. Once you start reading through this curriculum, we're confident that you'll find many exciting and interesting activities that will inspire you to overcome your hesitations and jump right in! Remember, the group process will be safer and closer when everyone – including you – takes part in the exercises and discussions. This is why the group can prove to be a tremendously rewarding experience for you, too. Take advantage of it!

HOPE FOR HEALING NEEDS ASSESSMENT INTERVIEW

Before joining the group, it is best for each potential participant to learn exactly what is expected of her and what will occur during the group. It also is important to discuss with her whether or not she has the necessary internal and external resources to fully participate in the group. Not all survivors are at a place in their lives – emotionally and/or materially – where they are willing and able to begin the recovery process. Conducting a needs assessment interview is one way to help women decide at which level they feel comfortable participating in a trauma support group of this nature. Specific items can help the women and you decide the effects her abuse history is having on her current functioning, how far along she is in the recovery process, her current coping skills, and her ability to participate in a group of this nature for a relatively long time period (weekly for 7 to 8 months).

You'll see from the assessment that getting the most out of this group requires that a woman has acknowledged and begun work on her abuse history, which includes having a therapist or counselor (who can be a peer, professional, or both). It also is easier on the woman herself and the other group members if the potential participant is not currently experiencing ongoing psychosis, is not prone to aggression or harmful acts when upset, and can speak enough English to participate in group activities (unless you have a bilingual co-facilitator, which would be ideal). Of course, these are NEVER reasons to exclude a woman from the group, but they should be kept in mind as you assess how well the women will work together as a whole.

A woman's current substance abuse and dependence also is a consideration in group participation, particularly if she is currently using. Again, we do not recommend excluding women on the basis of their substance abuse history, particularly because many survivors use substances as a coping mechanism. However, if a woman's daily functioning is impeded by severe, active substance use at the time the group begins, then she should be linked with substance abuse treatment. She also should be reassured that she is welcome to join in a future start-up of the group. If a woman comes to a session under the influence of drugs or alcohol, she should be excused from that particular day (or evening). If this occurs more than 3 times, then you might want to discuss with her (and her counselor, if appropriate) joining the group at a time when she has her substance use more under control.

As a result of the needs assessment process, women may decide to participate in a limited number of group sessions, which is perfectly acceptable. Some will take the first four sessions only, where they will learn basic safety skills. Others will decide to participate in the first 15 sessions, where they will learn more indepth coping skills to manage intrusive emotions and crises. Still others will decide to participate in the entire curriculum, obtaining and discussing information about specific forms of traumatic abuse, in addition to learning coping and safety skills.

The needs assessment helps guide these important decisions, so that no woman is forced into services or support before she is ready and willing. If done sensitively, it also is a good way for you to get to know each of the women, what has happened to them in their lives, how they view themselves, and their perspectives on their strengths and needs.

You should begin the needs assessment interview with an overview of the purposes and activities of the *Hope for Healing* curriculum. Draw from the introduction, letting potential participants know that the group is for women just starting out in their abuse recovery journeys, what happens and where, and the types of exercises and activities that will occur in group. Also let them know that the full curriculum meets weekly for about 7 or 8 months (or 31 sessions), and that they may opt to take part only in the first 3 to 4 months if they don't feel ready for the entire experience.

CONFIDENTIAL: NEEDS ASSESSMENT INTERVIEW

The purposes of the following questions are to help both of us decide whether or not you are ready to join the trauma support group that I've described to you. It also will help us learn how you view your own strengths and needs. Since participating in this trauma support group requires commitment and dedication, it is very important to us that we have as much information about you as possible, in order to keep you and the other group members safe and secure. You don't have to answer anything you don't want to. All of this information will be kept strictly confidential, which means that we won't share it with anyone. However, if you are currently suicidal or homicidal, we may be required by law to act upon this information.

Your Name:	Phone:
Your therapist/ counselor: If you don't have one, we will help you find someone, as this is crucial to support group participation.	Phone:
A trusted family member or friend:	Phone:
Your psychiatrist, if relevant:	Phone:

Check one:	YES	NO	Don't Know
Do you have a history of sexual abuse? Sexual abuse includes being repeatedly forced to have sex or perform sexual acts when you don't want to, with strangers or with people you know.			
Do you have a history of physical abuse? Physical abuse includes being kicked, repeatedly hit, choked, burned, or otherwise injured by a stranger or someone you know.			
Do you have a history of emotional abuse? Emotional abuse includes being regularly shamed, humiliated, criticized, or taken advantage of by people you know.			
Have you ever been raped? Rape means being forced to have sex or perform sexual acts against your will, with strangers, dates, or other people you know.			

	YES	NO	Don't Know
Have you ever been sexually harassed? Sexual harassment means receiving unwanted sexual advances or requests for sexual favors, typically by bosses, coworkers, teachers, service providers, or professors in exchange for promotions, good reviews, good grades, services, etc.			
Have you ever been abused in a psychiatric hospital? This type of abuse includes being sexually or physically abused by doctors, nurses, technicians, or other patients.			
Are you currently in an abusive relationship?			
Have you ever told a family member or close friend about your abuse history?			
Have you talked about your abuse history with your current primary therapist?			
If you're seeing a psychiatrist, have you told him/her about your abuse history?			
Have you ever told any other service provider about your abuse history? If yes, whom?			
Are you currently in any other support or educational group that deals with your abuse history?			
Have you ever been part of any other support or educational group that dealt with your abuse history?			
Are you at a point in your recovery where you feel able to discuss abuse-related issues in a group?			
Do you feel ready to join a support group to address your abuse history?			
Are you currently using substances on a regular basis?			
Do you feel that your substance abuse interferes with your ability to do such things as work, go to school, or be a parent?			
If you are using substances, do you think that it will interfere with your participation in the group?			
Are you willing to make a commitment to attending and participating in this group for the full 31 weeks?			
If you can't commit to 31 weeks, would you be willing to take part in the first 15 sessions, which would help you to develop coping and safety skills, but wouldn't directly address different types of abuse?			

Have you recently (in the past few weeks) experienced any of the following?

	YES	NO		YES	NO
Suicidal thoughts?			Sleep problems?		
Homicidal thoughts?			Memory loss?		
Aggressive acting out?			Depression?		
Self-abuse/self-mutilation?			Delusions?		
Dissociation/splitting?			Flashbacks?		
"Spacing out"?			Excessive crying?		
Eating problems/disorders?			Hallucinations?		
Intimacy avoidance?			Isolation?		
Relationship difficulties?			Mania?		
Low self-esteem?			Panic Attacks?		
Compulsive sex-seeking?			Addiction?		

What is your psychiatric diagnosis?

What, if any, medications are you taking?

What do you do to cope with your emotional problems or distress?

What are your major strengths, especially those that we can draw upon in your recovery?

Why do you want to join this group?

Signature of Co-Leader: _____ Date: _____

Signature of Potential Participant: _____ Date: _____

Adequate English: Yes___ No___
 Able to complete full interview: Yes___ No___
 Able to discuss abuse history openly: Yes___ No___
 Recommended for group: Yes___ No___ Possibly at a later date___

SESSION 1: GETTING ACQUAINTED

"You talk to another survivor and what takes you two years to explain to your therapist, you can say in two minutes to another survivor." – In Their Own Words

- Purposes/goals of session:**
1. Introductions;
 2. Clarify purpose, format, and what will be covered in this group;
 3. Define guidelines of group;
 4. Define language of group;
 5. Begin to create an open and safe atmosphere.

- Materials needed:**
- ✎ Something to write on (flip-chart or chalkboard) and write with (markers or chalk);
 - ✎ Tent cards and markers;
 - ✎ Folders for keeping materials;
 - ✎ Handouts 1, 2.

Getting Started:

- ① Welcome each woman as she arrives and thank her for coming. Provide her with a tent card.

- ② When everyone arrives, welcome the group. Remind them of how courageous they are for trying out this first session. As a way to ease some natural fears or anxiety among the women, let them know that, while sometimes the topics might be sad or painful, you also will be doing things in group that are hope-inspiring and creative. Ask them to write their names on their tent cards and face them towards the group (you make one, too!).

TRY THIS

Since the facilitator tends to be looked upon as an authority, and women consumers are likely to have had negative experiences with authority figures in the mental health services system, it is important to try to break down those barriers and become part of the group as more of a guide and member. Take part in the activities of the group!

- ③ Introduce yourself, something you would like to share about yourself, and what you hope to get out of this group.
- ④ Ask each member to introduce herself, tell the group something she would like to share about herself, and what she hopes to get out of the group.

HINT

Remind the women that this exercise is for introductions only, and to keep their answers brief and simple. Too much detail or self-disclosure right now could be overwhelming for some women, so is to be discouraged.

Group information and activities:

- ✓ Now that everyone has a basic idea of what each woman would like to get out of the group, you should present information about the purpose, format, and goals of your group.
- ✓ Review with the women *Handout 1, Our Group Schedule*.
- ✓ Explain that the purpose of this group is to promote personal strength and growth in women's lives. It also will provide a basic understanding of trauma and its impact on current functioning. Through strength, growth, and knowledge will come enhanced functioning and empowerment for the women.

It's a fact!

Studies have shown that between 55-70% of women mental health consumers have a trauma history.

- ✓ Explain that you will be using information-sharing, structured discussions and exercises, story-telling, art, music, reading, writing, positive affirmations, and cooperative learning to move forward as a group.

TRY THIS

Be positive! You want those women who are ready for this experience to come back to the group, so look for overwhelmed faces and make sure you address any concerns.

- ✓ Present *Handout 2, Our Group Guidelines*. Go over each guideline, and ask if there are any questions. It is important to review this list thoroughly so the women will know that there won't be any surprises in group, something that is key for many women survivors to feel safe.
- ✓ Ask the group if there are any other guidelines that everyone can agree upon to add to the list. Ask each woman if she has something to add.

- ✓ Once there is agreement on the additional items, ask everyone to add the new ones to their individual lists. Each woman should sign and date it.

HINT

Remind them that all guidelines must be followed in order to honor the group. Everyone must understand and agree with these ideas in order to move forward respectfully and safely. Ask the women what they would like to do if one of them does not follow one or more of the guidelines. You might develop in group a short list of consequences that women also sign.

Wrapping Up:

- ➡ Thank the women for their strength, which they showed today by coming to this first session. Because many are likely to still be nervous, remind them that you will work together to make sure that this is a safe and caring group. Also help them to remember that you will be doing activities that can be fun and can provide them with even more courage and hope.
- ➡ Let them know that you will be available after group if anyone has any questions or concerns that they did not want to bring up in group. Make it clear, though, that you will not discuss any of the other women outside of group, nor will you be able to provide individual counseling. Offer referrals for counseling, if needed.

- ➡ Tell them that the next session is about what it means to be a woman.
- ➡ Ask them to put their handouts in their folders. If they are worried that they might lose them, or that having this kind of information with them could put them at risk (e.g., they currently live in an abusive situation or with family members who do not know about their trauma histories), offer to hold the folders for them until the next session.

SELF-CARE TIP: Congratulations to you, too! Before starting your next group or other work, try to take a walk outside, even if only for a few minutes. Imagine each woman's face from group, and then, gently release her from your mind. Getting in this habit early on can help you avoid "bringing your work home with you." This does not mean that you are uncaring, but that you value your own well-being.

HANDOUT 1: OUR GROUP SCHEDULE

Session 1:	Getting Acquainted
Session 2:	Being a Woman
Session 3:	Safety in the Group
Session 4:	Coping with Crises
Session 5:	Safety Outside of Group
Session 6:	Positive Self-Soothing and Relaxation
Session 7:	We can Choose to Heal
Session 8:	Facing Fears in the Healing Process
Session 9:	Checking In and Hope
Session 10:	Trusting and Believing in Oneself
Session 11:	Understanding Limit Setting
Session 12:	Getting Comfortable with Setting Limits
Session 13:	Physical Boundaries
Session 14:	Developing Positive Self-Esteem
Session 15:	Affirmations and Realizing our Dreams
Session 16:	Honoring Survival Techniques
Session 17:	Checking In and Hope
Session 18:	Intimacy and Trust
Session 19:	Understanding Physical Abuse
Session 20:	Understanding Emotional Abuse
Session 21:	Reviewing Personal Strength and Self-Esteem
Session 22:	Understanding Institutional Abuse
Session 23:	Understanding Sexual Abuse
Session 24:	It's Not Your Fault!
Session 25:	Checking In and Spirituality and Inspiration
Session 26:	Emotions Management, Part I: Dealing with Triggers
Session 27:	Emotions Management, Part II: Dealing with Flashbacks
Session 28:	Emotions Management, Part III: Understanding Self-Harm & Self-Injury
Session 29:	Emotions Management, Part III: Alternatives to Self-Injury
Session 30:	Where I Am and Where I'm Going
Session 31:	Closing Ceremony

HANDOUT 2: OUR GROUP GUIDELINES

The purpose of these rules is to keep everyone safe and comfortable.

1. REGULAR ATTENDANCE

You must attend one of the first three sessions, and no new members will be accepted after the fourth session. If you cannot make one of the group sessions, please let the group leader know beforehand.

2. PUNCTUALITY

The group will begin and end on time. If you are going to be late, please tell the group leader in advance.

3. COMMITMENT

Please make a commitment to the group before the end of the third session. If you want to drop out of the group, please try to let everyone know before that session. You are always welcome to try the group again (from the beginning) at another time.

4. CONFIDENTIALITY

EVERYTHING that is talked about in the group will remain in the group. Nobody will share other people's stories or ideas with ANYONE else, not even with family members or spouses/partners.

HANDOUT 2: OUR GROUP GUIDELINES, continued

The only exceptions to confidentiality include:

- You inform the group of your intention to hurt or kill yourself or someone else;
- You inform the group of a child or minor currently being abused.

5. NO VIOLENCE OR AGGRESSION will be tolerated.

6. RESPECT AND EMPATHY

Everyone will **respect** one another's feelings, opinions, and views. Even if you do not agree with others, or like the things they have done in their lives, you will not openly judge anyone else. Everyone will **listen** while others speak.

7. PHYSICAL CONTACT

Hugs, supportive gestures, or any touching is allowed **ONLY** if permission is given.

8. SUBSTANCE USE

If you have been drinking alcohol or doing drugs, please do not come to the group that day. If you would like a referral for treatment, please let the group leader know.

HANDOUT 2: *OUR GROUP GUIDELINES*, continued

9. NO OBSERVERS ALLOWED

Do not bring anyone with you to the group, since the group is for members only.

10. RIGHT TO REFUSE TO PARTICIPATE

Everyone has the right to refuse to participate in any activity in the group.

ADDITIONAL IDEAS FROM GROUP MEMBERS:

11.

12.

13.

14.

Signature of Group Member

Date

SESSION 2: BEING A WOMAN

*"...I say, It's the fire in my eyes,
And the flash of my teeth,
The swing of my waist,
And the joy of my feet.
I'm a woman
Phenomenally.
Phenomenal woman,
That's me...." -- Maya Angelou*

- Purposes/goals of session:**
1. Welcome new members;
 2. Answer any questions and address comments from previous session;
 3. Begin to form a group identity and a "woman-centered or feminist context," by exploring similarities and differences among members' experiences as **women**, not as trauma survivors or consumers of mental health services;
 4. Begin to explore how being a woman affects their daily lives.

Materials needed:

- ✍ Flip-chart or chalkboard, markers or chalk;
- ✍ Tent cards and markers;
- ✍ Lots of magazines, especially those for women (make sure they are multicultural!), scissors, glue, large sheets of paper for collages.

TIP

Not all women, perhaps even yourself, are comfortable with the word "feminist" or feminist ideas, so you may need to use this concept carefully. The point is to help group members see that they have things in common as women, and as women they can help one another to grow and heal. You might prefer the phrase, "woman-centered" instead.

TIP

Getting Started:

- ① Welcome the women back from the previous session, and greet new members. Ask women to take out their tent cards. If there are new members, have everyone introduce themselves again briefly.

HINT

If a new woman has been referred to the group, try to go over the Group Schedule and Group Guidelines from Session 1 with her individually, preferably before her first session.

- ② Ask each woman if she has any questions, comments, or reflections about the last session.

☞ Because creating safety and comfort is especially important in the first few sessions, you may need to take longer with this exercise than you normally would. It is important for the women to get the sense early on that they can share their concerns and questions without being cut off. At the same time, you don't want this to use up too much of the session, so try your best to limit discussion to no more than 15 minutes, unless you feel that the women have concerns that will keep them from moving forward if they go unanswered.

- ③ Tell the women that this session is about being a woman. Explain that it is important to explore how being a woman has affected our lives because it helps us to see the many experiences that women share. Of course, this doesn't mean that women do not have unique experiences, based on their culture, upbringing, personal beliefs, etc., but that certain things about being a woman cut across all cultures and viewpoints. Knowing this can help us come to a greater understanding of what it means to be a woman.

Group information and activities:

Exercise #1:

- ✂ Ask each woman what she thinks it means to be a woman, and specific words that come to mind when she thinks about being a woman. Give a

few minutes of silent time for them to consider this. Ask the women to call out their responses -- one at a time! -- and write their responses on the flip chart or board. These words might include caretaker, strong, leader, mother, compassionate, caring, matriarch, victim, weak, catty/petty, silly, and passive. Give them some hints to get started, if necessary.

☞ If it seems there are too many negative answers, ask them about positive aspects, and vice-versa. Continue to question the women until a sizeable list is generated.

Check it out!

*This exercise is adapted from one found in an excellent book by Maxine Harris and her colleagues, **Trauma Recovery and Empowerment: A Clinician's Guide for Working with Women In Groups**, published by The Free Press, New York, 1998.*

✂ Ask the women to point out the positive, then the negative, images from their list. In red marker, put a plus sign next to the positive ones, and a minus sign next to the negative ones.

☞ If there are some responses that are neither positive or negative, put a circle next to those so that they are acknowledged.

✂ Count the negative answers out loud, and point out that they all are valid. Let them know that these are many of the very issues that make it difficult

to be a woman or to feel connected to other women. These issues usually cut across cultures and personal beliefs. Remind them that this group is going to focus on accepting such negative experiences and features while, at the same time, focusing on ways to deal positively with them.

✂ Ask the women what can be done to change negative responses into positive ones, and write these new responses on another sheet of paper or section of the board. Cross out the negative responses from the original list each time you transform one. For example, victim might become survivor, passive might become calm or accommodating, silly might become fun-loving, and weak might become gentle.

✂ Request that they list all of the positive responses, including the ones that you transformed, on a sheet of paper to keep in their folders. If they are taking their folders home with them after the session, they can read this list whenever they feel badly about themselves and need to remember the good things about being a woman.

☞ Point out, again, that this transition toward the positive is the aim of this group.

HINT

If the women want to take the whole session to complete the first exercise, that is fine. Let them work on it as long as it makes sense and they are learning from it. The second exercise can be used if they move through the first one quickly, or it can be used the following week as a continuation of this session. Whether you split this session into two will depend upon the needs of your group.

Throughout the rest of the curriculum, you will notice a statement guiding you as to where to split certain sessions, to continue the following week, depending upon the needs of your group.

Exercise #2:

- ✂ Give each woman two or three of the magazines that you have brought to the session. Also provide each one with a pair of scissors, a bottle of glue, and a large sheet of paper, such as poster board.
- ✂ Ask them to cut out images of women in magazines and glue them to their paper. They should choose pictures that they like and those that they do not like. Tell them they will have approximately 20-30 minutes to complete their collage. You make one, too!
- ✂ Ask each woman how she thinks that these cultural images of women affect the way she sees herself as a woman, and the way that she is

treated as a woman. Write these answers down on the board, and again, have them note the positive and negative ones.

☞ Typically, women's more negative responses to this exercise will include such things as women models often are incredibly thin, blond, blue-eyed, and very young, with entirely unblemished skin. These portrayals of beauty rarely match how most women look, so we come to feel that we are not beautiful or are inadequate. Positive responses about these images often include that the models are beautiful, inspiring, healthy, and happy. These images can help women to feel inspired to go on healthier diets or to try out "new looks."

✂ Ask them how they feel about these images, and have them write down their feelings somewhere on their collages. When they are done, ask each one to read her feelings aloud. Many times, women will use words such as "inspired to lose weight, good ideas for nice clothes or make-up tips, I feel angry because I'll never look like this, it's unfair, I'm pissed off, the pictures make me feel ugly, these images are racist or sexist, I feel discouraged, or I don't care."

✂ Tell the group that even though there isn't much that can be done to change the negative stereotypes and images as they are right now (although trying to only buy magazines that accurately reflect women of all cultures would be a good start!), they can work on changing their perceptions of these images.

TIP

Be prepared to explain this concept! Basically, it means that we can recognize inside of ourselves that these images of women are NOT real. In fact, most times, photographs like these are "touched up" by magazine staff, to remove blemishes, lighten skin color, and make hips or waist-lines smaller. Rejecting these made-up images as unhealthy can help us to better accept our bodies and faces as they are, but this does take some time!

TIP

- ✂ Tell the women that their collages can be used as symbols of these stereotypes and images. What they do to their collages could be symbolic of what they would like to do to the stereotypes. In other words, they might like to destroy their collages by ripping them up and throwing them away, they might want to draw on them some more, they might like to hang them up at home, or they might just want to keep them in their folders. Try to accommodate whatever they would like to do with their collages (within reason, of course). Tell them that, if they would like, they could keep a small piece of their collages in their folders as a reminder of this exercise.

- ✂ Ask the women to take several deep breaths. Then, request that each of them describes how what she did to her collage made her feel, and point out how this symbolically represents a response to the stereotypes about women.

TRY THIS

It is often helpful to use deep breathing in order to release some of the physical (e.g., clenched teeth, tense shoulders, etc.) and mental (e.g., racing thoughts, nervousness, etc.) tension that may have built up from difficult or stressful situations.

Throughout this group, there will be many times in which the women will be asked to face challenges, and therefore, short, tension relieving breaks are highly recommended. Always try to be aware of the tension level in each individual woman, as well as the group as a whole.

☞ Congratulate them on another step in the direction of personal power!

Wrapping Up:

- ☞ Thank the women for coming to group and acknowledge again their strength and courage. If there is time, you may ask each of them to say aloud, "I am a strong and beautiful person." The group should clap or otherwise express agreement as a whole. Some women may feel uncomfortable with this affirmation, because it seems immodest, but helping them to make positive statements about themselves like this can be empowering over time.
- ☞ Let them know that the next session will deal with ways to keep safe outside of the group.

- ➡ Tell them that you will be available after group if anyone has any questions or concerns that they did not want to bring up in group. Again, make it clear that you will not discuss any of the other women outside of group, nor will you be able to provide individual counseling. Offer referrals for counseling, if needed.

SELF-CARE TIP: Remember the strategy of taking a walk outside and gently releasing each woman from your mind.

You also might want to discuss with an experienced peer/friend, your supervisor, or a colleague how these discussions about being a woman worked. Sometimes, women in public systems have not developed a gender-identity, making these exercises difficult for them. This can make you feel frustrated, angry or sad for them, or uncertain about how well this group is going to run. Try to get some ideas and support from others to help you deal with this, if need be.

SESSION 3: SAFETY IN THE GROUP

*"We need a strong woman's group,
where we feel safe and are accepted." -- In Their Own Words*

- Purposes/goals of session:**
1. Welcome new members;
 2. Answer questions and address comments from previous session;
 3. Begin to create safety and trust in the group;
 4. Explore and clarify issues of safety, security, and comfort in their lives;
 5. Review places they can call for extra support.

- Materials needed:**
- ✎ Flip-chart or chalkboard, and markers or chalk;
 - ✎ Tent cards and markers;
 - ✎ Handout 3.

Getting Started:

- ① Welcome women back from the previous session, and greet new members. Have everyone take out their tent cards. If there are new members, have everyone introduce themselves briefly.

- ② Ask each woman if she has any questions, comments, or reflections about the last session.

☞ Remember that it is important to address concerns, but keep the time limit shorter than the last session, so that, over time, the review can take less group time. Of course, if you think that there are crucial, unaddressed concerns, then take as much time as you think appropriate.

Group information and activities:

- ✓ Let the women know that you would like to start with a detailed discussion of ways they will continue to feel safe *inside of the group*. Feeling safer with one another is an important first step in feeling safer outside of the group as well.
- ✓ One way that they can feel safer together is to discuss things that make them feel safe in groups and things that make them feel unsafe. Most women in public systems have had plenty of experience in group settings, so this exercise should not be too difficult for them!

Exercise #1:

- ✂ Let them know that you would like each woman to say aloud one thing that

will make her feel safe in group and one thing that will make her feel unsafe. To help them get started, share one of each yourself.

☞ For example, on an emotional level, women might state that safety will be created by always believing one another, not judging one another, not blaming or questioning each other, keeping everything said and done in group confidential, not having to hear or share too many specific details about what happened to them, and going slowly with the whole recovery process. On a more concrete level, women may say that they will feel safer if “memory triggers” are avoided, such as certain types of music, scents/perfumes, loud noises, yelling, candles/flames, physical contact, surprises in group, or objects that may have been involved in abuse.

✂ As women are sharing these ideas, write them down on large pieces of paper, with one labeled ***Safe Behaviors In Group*** and the other ***Unsafe Behaviors in Group***. Let the women know that these sheets will be posted each time you meet to help everyone remember your guidelines for feeling safe in group.

✂ Ask each woman to agree not to do the things that make other women feel unsafe (within reason, of course).

TRY THIS

It's helpful to remind the women at this point that we're all only human and that sometimes they might forget to follow these guidelines, but that it is important for everyone to try their hardest to respect these requests.

Exercise #2:

- ✓ Next, initiate a discussion about how women would like you and the others in group to proceed if one of them begins to feel threatened or unsafe, and thus, becomes distressed.
- ✂ Read aloud each of the suggestions that women had regarding unsafe behaviors in the group. After each item, ask the group to brainstorm ideas for how they might respond if one of the women feels that the unsafe behavior is occurring and becomes distressed or goes into a crisis during the group.
- ✂ Write these suggestions on another large sheet of paper, labeling it ***Feeling Better in Group***. The following is a list of the types of options that women might suggest or that you might need to provide to get them started. Having these options spelled out in advance should help everyone respond more effectively when someone becomes overly-distressed or out of control in group.

Take time with this exercise because it should help everyone, including you, to feel that they have safe and sensible options for helping one another through hard times in group. Do not, however, make the list too long because it needs to be feasible and easy to follow. After you are done, it would be a good idea to practice or run through each suggestion on the new list, to see how it actually would work during a typical group.

Feeling Better in Group

- Voluntary time out in corner of meeting room to gather oneself;
- Voluntary time out in another room (preferably one that is near to the meeting room);
- Voluntary time out in either place with a counselor, case manager, or peer;
- Distressed woman allowed to take a walk, pace the halls, etc., until ready to return;
- Someone allowed to hold the hand of distressed woman, speaking soothingly to her and reminding her that she is safe;
- Whole group takes a break and goes through a deep breathing exercise;
- Whole group takes a break and reads a calming or inspirational poem, prayer, or story.



Finally, ask the women to discuss what they would like to do if one of them ***repeatedly*** becomes distressed in group, and appears to not be ready to

participate. They should together decide **how** many times each of them will be supported through distress in group, **what** behaviors will let the group know that someone regularly becomes greatly or overly distressed (versus normally distressed) when talking about painful subjects, and **when** a woman will be asked to try the group another time (from the beginning) because she cannot regularly maintain control in the group. You need not write these on a large sheet of paper, but you should record their ideas and make copies for everyone for their folders.

HINT

Other group leaders have found that women are much harder on one another than you might be in terms of setting limits. Within reason, this is acceptable, as this is a group decision and the group needs to live by its own rules.

If you feel, however, that they have not set strong enough limits, you may want to revisit this exercise in a few weeks to see if they would like to change or revise their guidelines and the consequences (the same is true if you feel that they have been overly hard on one another).



Remind the women that deciding when they are ready to cope with their pasts is a very personal decision, as well as the fact that not everyone prefers or responds well to group treatment. Many survivors find that receiving individual counseling prior

to, or concurrently with, group treatment is a more effective course of healing. Women should not be made to feel like failures if they are not ready to deal with their pasts or if this group experience is not right for them.

Exercise #3:

- ✓ Pass out *Handout 3: Places to Call for Extra Support*. Discuss with the women the local resources that you have found, and when would be appropriate times to call each for extra support or help. If there is not enough time to go over this handout thoroughly in group, make sure that you do so during the next session. Remind them to keep this handout in their folders for the next session.

TIP

Revise Handout 3 to reflect services, groups, and programs available in your local area PRIOR to group.

TIP

Wrapping Up:

- ➡ Thank the women for coming to group and acknowledge again their strength and courage.

- ➡ Let them know that the next session will address ways to cope with personal crises. Pass out a sheet of paper listing the phone numbers that you would like them to bring to the next session (see *Handout 4*).
- ➡ Tell them that you will be available after group if anyone has any questions or concerns that they did not want to bring up in group.

SELF-CARE TIP: You might want to discuss with an experienced peer/friend, your supervisor, or a colleague ways in which this group might make you feel unsafe or frightened. Many staff and peers have not been well-trained to help women cope with safety and abuse, so you may wish to talk about your uncertainties with an understanding support person.

If funding permits, try to purchase some books on trauma and recovery, so that you can empower and educate yourself. If you have access to the Internet, a list of educational resources/Web Sites is in the Appendix of this curriculum.

HANDOUT 3: *PLACES TO CALL FOR EXTRA SUPPORT*

(Example List of Chicago-based Services and National Hotlines)

Services Referrals:

Columbia Behavioral Health
For mental health and other services
1.800.888.0560 (24-hour line)

United Way Community Referral Information Hotline
For mental health and other social services
1.800.725.5314 (24-hour line)

Peer Support Services/Groups:

Grow, Support Groups-Metro West Network
773.488.7551

National Depressive & Manic Depressive Association (NDMDA) Support Groups
1.800.826.3632

Recovery, Inc. Support Groups
312.337.5661

Crisis Support Services:

Voices in America
For Survivors of Abuse and Domestic Violence
1.800.7VOICE8

National Domestic Violence Hotline
1.800.799.7233 (24-hour line)



Crisis Hotline
1.800.866.9600 (24-hour line)

National Survivors of Child Abuse Program
1.800.422.4453 (24-hour line)

SESSION 4: COPING WITH CRISES

*"Strength does not come from physical capacity.
It comes from an indomitable will." -- Mahatma Gandhi*

- Purposes/goals of session:**
1. Answer questions and address comments from previous session;
 2. Continue to explore and clarify issues of safety, security, and comfort in their lives;
 3. Make Safety Plans and Safety Bags;

- Materials needed:**
-  Small zippered bags, such as cloth or nylon cosmetic cases, for each of the women;
 -  Handouts 4, 5, 6, and 7.

Getting Started:

- ① Welcome women back from the previous session. Have everyone take out their tent cards. Remind the group that this is the last week that new members will be allowed to join. If there are new members, have everyone introduce themselves briefly.
- ② Ask each woman if she has any questions, comments, or reflections about the last session.

 Remember the time-limit.

Group information and activities:

- ✓ Tell the women that one of the most important things they can do to create feelings of safety and deal with crises **outside of the group** is to make a **Safety Plan**. This is a Plan which includes places to call when they are having a hard time, need extra support, or are feeling suicidal. For women who currently are in unsafe or abusive situations, they also can benefit from developing Safety Plans outlining exactly what they will do and how they will do it when they are ready to leave or escape to a shelter.

TIP

It is important for you as group leader to role model a non-judgmental approach to women consumers who currently are in abusive relationships. Decisions about whether to stay or leave often are far more complex than others realize, including that a woman might feel her life or her kids' lives would be in danger if she left, or that the perpetrator is providing her and her family with needed shelter, food, and clothing.

TIP

Exercise #1:

- ✓ Pass out *Handouts 4, 5, 6, and 7: Phone List for Hard Times, Things I Can Do When I'm Overwhelmed, My Suicide Prevention Plan, and My Personal Escape Plan*. Remember to review *Handout 3*, if necessary.

✂ Help the women to fill out *Handouts 4, 5, 6, and 7*, one at a time. Answer questions and give directions accordingly. Ask women to share their strategies with one another, which will be important for those who have never before considered these questions. Of course, not all women will need to complete *Handout 7*, so you may want to complete it individually with women who currently live in abusive situations (but do it soon!).

☞ Remind them that if they do not have all of the information they need with them, they can bring it for the next session to complete the handouts.

TRY THIS

Many women really like it when information such as that found in Handouts 3-7 is printed on cards no bigger than 4"X5" so that they can carry them in their purses or pockets.

Thus, you might want to print up the information on these cards, rather than using copies of the handouts found at the end of this session. Most office supply companies carry this type of card, which can be run through a computer printer or produced at a local photocopy shop, to save printing expenses.

✂ Even though this exercise often is quite empowering to women, because it helps them to remember that they have options, it also can be overwhelming for some. Thus, once every woman has completed her set of handouts, lead the group through a deep breathing and relaxation exercise.

☞ Ask the women to push their chairs back slightly from the table and to plant both feet firmly on the floor. If it feels safe, they should close their eyes; if it doesn't feel safe to do this, instruct them to focus on your face, something outside of a window, a candle you light (unless this is on your new list of "memory triggering" objects), or a spot on the wall. Demonstrate for them how to slowly and fully breathe in and out, making sure that they expand their lungs with air and expel it with some force. While they are breathing in, they should imagine that they are taking in peaceful and positive energy; while they are breathing out they should imagine that they are releasing scary and negative energy. It is better for most women if you make these statements aloud while everyone breathes in and out.

You also should remind them aloud that they are adult women, and that they are safe within your group on the current date (state the full date), just in case they are experiencing flashbacks. Ask them to hold on to something that helps ground them in the present day.

**Depending upon the needs of your group,
this is a good place to split the session.**

Exercise #2:

- ✓ Hand out the zippered bags. Explain that with these you will be creating personal "Safety Bags." The purpose of these Bags is to help them store things that will make them feel safer, grounded, and more prepared if unexpected, difficult, or crisis situations arise. Tell them the cards (or handouts) that you just completed are the first things that they can put in their Safety Bags.

It's a fact!

This Safety Bag exercise was created by the late Diane Farrell, M.S., former Director of the Thresholds Loren Juhl Young Adult Program. Ms. Farrell was one of the first professionals in the psychiatric rehabilitation system to formally recognize the crucial importance of helping women consumers overcome histories of abuse and trauma.

- ✂ Ask the women to come up with additional comfort items that they would like to put into their Safety Bags.

☞ If they need some ideas, suggest that they might include the telephone number of a trusted friend, case manager, or therapist, the telephone number of a shelter (but not the address, as it may fall into the hands of a perpetrator!) or crisis-hotline, pictures of loved ones, small stones or shells to remind them of nature, religious or spiritual objects, and readings or poems that help calm and ground them.

☞ For women who currently live in abusive situations, they might wish to put into their Safety Bags bus or train tokens to give them the means to escape a dangerous situation, money for a train or bus ticket to another city or state, the telephone number of a taxicab company to get to the bus or train station, an extra set of car keys that the perpetrator doesn't know about, etc. Again, you might want to brainstorm these ideas with women who are currently being abused after the group ends or at a different time (again, make it soon!).

TIP

Making a Safety Plan with a woman who is currently in an abusive situation should not convey that she is making a poor decision by staying in the relationship, but that she has options when she is ready to escape. Conversations about whether she is making the right decision should be had with her individual counselor or therapist, unless you are well-trained to handle this complex process.

TIP

☞ Encourage the women to get these items as soon as possible and put them into their Safety Bags. Ask them to bring their Safety Bags to group with them from now on, and try to periodically discuss or use the Bags in sessions when women seem to be feeling unsafe or threatened. You could add going through the Bags to the list you generated last session, **Feeling Better in Group**.

- ✓ Ask the women if they would like to keep their Bags with you until they are finished, or until they think of somewhere to keep them safe.

☞ Remind them that they may want to think of ways of keeping their Safety Bags hidden or private, in case they either live in an abusive situation or with family members who still do not know about their trauma histories. This could be a topic for discussion, with you providing ideas for safe places they can keep their Bags (e.g., with a friend, with you, in a hidden area of their residences, etc.).

FACILITATORS' NOTE:

You make a Safety Bag, too! Whether or not you have experienced trauma, helping others recover from abuse can be emotionally difficult for group leaders and counselors, so your Safety Bag might include ways that you can comfort yourself when experiencing "secondary trauma."

☞ Secondary trauma or victimization is experiencing symptoms of post-traumatic stress disorder (PTSD) such as intrusive reactions (e.g., intense fear, startle responses, hyperalertness, nightmares, and night terrors) and denying responses (e.g., withdrawal, avoidance, distancing, exhaustion) in reaction to hearing the stories of and working with trauma survivors (Courtois, 1988).

Wrapping Up:

- ➡ Thank the women for coming to group and acknowledge again their strength and courage. If there is time, you may ask each of them to say aloud, "I know ways to keep myself safe when I feel scared or alone." The group should clap or otherwise express agreement as a whole.
- ➡ Remind them that this is the last week that new members will be allowed to join the group.
- ➡ Let them know that the next session will continue to deal with ways to be safe outside of the group.
- ➡ Tell them that you will be available after group if anyone has any questions or concerns that they did not want to bring up in group.

SELF-CARE TIP: Remember the strategy of taking a walk outside and gently releasing each woman from your mind. At home, you might try lighting some candles and taking yourself through some deep breathing and relaxation exercises.

Also take the time at home to put things in your in your own Safety Bag that will help you to maintain your serenity and well-being.

HANDOUT 4: *PHONE LIST FOR HARD TIMES*

(Davis, 1990)

This is a person or people I can call, day or night, when I'm having a hard time.

Name(s)

Phone Number(s)

1.

2.

3.

HANDOUT 5: *THINGS I CAN DO WHEN I'M OVERWHELMED*

(Davis, 1990)

Next time you feel overwhelmed, take out this sheet and do whatever you wrote down. Start with the things on the top of this list, and work your way down. If you run out of things to do, start at the top again. Keep breathing, call for help, breath some more!

REMEMBER: THE FEELINGS WILL PASS.

1.

2.

3.

4.

5.

HANDOUT 6: *MY SUICIDE PREVENTION PLAN*

(Davis, 1990)

When I am feeling suicidal, I will do these things so I won't feel that way anymore:

When I am feeling suicidal, I will not do these things, which make me feel worse:

When I am feeling suicidal, I will call these people:

HANDOUT 6: *MY SUICIDE PREVENTION PLAN*, continued

(Davis, 1990)

If I can't get through to these people, I will call this person or program:

The crisis hotline phone number for suicide prevention is:

I deserve to live because (If you can't think of anything, ask the group to help!):

HANDOUT 7: MY PERSONAL ESCAPE PLAN

Together with your case worker, counselor, and supportive others, you should work out an escape plan for what to do when you're ready to leave your relationship. You first should decide if it is safe to write down your answers. It's usually safer **NOT** to write these things down, but if you want to, then ask someone else to keep your plan for you. Add to this list of questions if something is missing.

1. What do you most need in order to leave your relationship?
2. How will you know when you're ready?
3. How much money will you need to escape? What else do you need (e.g., bus tokens, extra set of car keys, address of shelter or friend, etc.)?
4. Where can you get what you need?
5. Who can be most helpful to you in escaping?
6. Where will you go? What is the address?
7. How will you get there?
8. What time of day will you go?
In the morning, who is the best person to turn to?
In the afternoon or evening, who is the best person to turn to?
At night, who is the best person to turn to?
9. If you have kids, what are your plans for them?

SESSION 5: PERSONAL SAFETY OUTSIDE OF GROUP

"Teach us self-help skills so that, in a crisis, we would not need to continue the dependency mode on hospitalization." -- In Their Own Words

- Purposes/goals of session:**
1. Answer questions and address comments from previous session;
 2. Continue to explore and clarify issues of safety, security, and comfort in the women's lives;
 3. Review safety tips and teach the women how to present themselves in a less vulnerable way;

Materials needed:

✎ Flip-chart or chalkboard, markers or chalk;

✎ Tent cards and markers;

✎ Large lined cards with "SKILLS CARD" written across the top;

✎ Handout 8.

Getting Started:

- ① Welcome women back from the previous session. Have everyone take out their tent cards.
- ② Ask each woman if she has any questions, comments, or reflections about the last session.

 Remember the time-limit.


- ③ Let the women know that this session will focus on personal and neighborhood safety. Remind them that it is important to talk about community safety because it is an issue that affects everyone, especially women. This is true because socialization (or the way we are raised) often encourages women to be passive, and can prevent us from taking steps to deal with potentially dangerous situations.

It's a fact!

You might mention that women consumers tend not to have had adequate safety training because, due to other pressing rehabilitation needs, this one is given a low priority in most mental health programs (Jonikas & Cook, 1993).

Group information and activities:

Exercise #1:

-  Begin by asking the women what they think constitutes a potentially dangerous situation, and what sorts of things frighten them. Write down their responses on the flip chart or board, under the heading, **Lack of Safety Means. . .**

☞ Make sure you validate everyone's responses. In other words, not everyone feels safe and/or unsafe in the same ways, and this should be acknowledged.

✂ Ask the women what they do in their lives to help themselves feel safer, and to protect themselves in dangerous situations. Write down their responses on the flip chart or board, under the heading, **Safety Means. . .**

TIP

Women may want to share some stories at this point. This should be encouraged because success stories are empowering and can help alleviate some of the anxiety that this session may trigger.

TIP

Exercise #2:

✓ Pass out Handout 8, *Neighborhood Safety Tips*. Tell the women that these are some more ways that they can increase their awareness about safety. Go over each tip, and ask from time to time if anyone has any questions.

✂ After reading through the list, ask each woman to share at least one idea about how their personal or neighborhood safety does not match this list of tips. Also ask the group to brainstorm together how each one might improve an unsafe situation, and write these on the flip chart or board.

- ✂ Then, go back to "Tip 2," under *General Safety Tips*, and demonstrate what it means to assume a confident, purposeful air.

👉 Ask each woman to get up and practice this walk. Use constructive feedback from group members to help each woman learn what "walking assertively" **looks** and **feels** like for her. Be prepared for some laughter as the women do this and comment on each others' appearance. Then request that they practice this assertive walk in their neighborhoods, or in your program if that is easier, at least once before the next session. Tell them that you'll talk about how they felt about it next time. Request that they put their tips in their folders.

HINT

Remember to ask the women to review your guidelines for Feeling Better in Group, if they start to become overwhelmed by all of this information. You may want to take a time out or go through a deep breathing exercise

Exercise #3:

- ✓ Pass out the cards that say "SKILLS CARD" across the top. Explain to the women that they can use these cards to log all of the skills they gain in

group. This will give them something to refer to when practicing what they have learned.

- ✂ To begin, request that the women write down the new skill of “assertive walking” on their skills cards. Then, ask them to record on their cards one additional skill from the handouts of this session that they will agree to practice during the next week.

Wrapping Up:

- ➡ Thank the women for coming to group. If there is time, you may ask each of them to say aloud again, “I know ways to keep myself safe when I feel scared or alone.” The group should clap or otherwise express agreement as a whole.
- ➡ Remind the women to practice their confident walk and one other safety skill for the next session.
- ➡ Let them know that the next session will deal with their making the decision to heal.
- ➡ Tell them that you will be available after group if anyone has any questions or concerns that they did not want to bring up in group.

Optional writing/drawing exercise:

If you have some time left at the end of group, ask the women to free write or draw for 15 minutes about how they make themselves feel better when they are afraid. Ask them to think of this in terms of how they can use these comforting techniques along with their new safety tips. They should write or draw the ways that they comfort themselves and keep this in their folders.

SELF-CARE TIP: As a woman, you also can be at personal risk in your community. Sometimes, women grow complacent, thinking that they are fully safe in their communities, and thus, neglect to use safety skills. Therefore, as you have asked the group to do, during the next week, you should take note of your surroundings and whether you feel safe in your neighborhood and apartment/residence. Practice walking assertively in your neighborhood or program, and note how it feels to share in the next session.

HANDOUT 8: *NEIGHBORHOOD SAFETY TIPS*

(Adapted from Jonikas & Cook, 1993)

General Safety Tips

1. Stay alert! Carefully observe your surroundings at all times.
2. Assume a confident and purposeful air, even when you're uncertain. Do not look lost, and walk briskly with your head up, no matter what you're thinking about.
3. Carry a whistle to alert others if you are seriously frightened by someone, bothered, or attacked.
4. Only carry defenses, such as mace, that you aren't afraid to use. You don't want it to end up in an assailant's hands, and then be used against you. Think about carrying your keys such that each key is placed outwards between each knuckle for safety.
5. Avoid talking to strangers, even if they look friendly. Answer any questions quickly and firmly, with certainty.
6. Avoid being led into alleys, doorways, or cars.
7. If someone makes you nervous, take action. Change directions, cross the street, and go towards areas with more people. If you are followed, look the person in the eye and say loudly, "Leave me alone," or "Go away." Try not to sound distraught or upset. Use your whistle if you feel threatened.
8. Always call the police if you are a victim of crime or a witness to a crime.
9. If you are attacked, try to remember what the criminal looks like in order to help the police in their search.
10. Pay attention to police flyers and signs posted in your neighborhood, so that you can recognize and avoid criminals in your neighborhood.
11. Consider joining a neighborhood watch in your area.

Pick pocketing and purse snatching

1. If possible, do not carry a purse, bag, or wallet at all. Think about whether you need it when you go out.
2. If you must carry a wallet, try to carry it so that it can't be seen or stolen easily.
3. If you must carry a bag, make sure it's closed securely, and wear it against your body.
4. Don't carry a bag wrapped around your wrist because that makes it easier for an offender to pull you to the ground.
5. If you can, wear your bag under an outer garment, like your coat or a sweater.
6. Never carry around more with you than you can afford to lose.
7. Don't take your wallet out in public because a potential thief may see it.
8. While waiting for public transportation, keep your bag in front of you, holding it close with both hands.
9. If someone tries to take your bag, whether or not you would like to fight back is up to you, but be aware that resistance has led others to be hurt or killed.
10. Try not to become loaded down with packages while shopping because this makes you an easier target.
11. Be aware of someone bumping into you, blocking your path, or arguing.
These may be ploys to distract you while another person steals your wallet, purse, bag, etc.

Riding public transportation

1. Stay alert! Observe the people around you, especially anyone who comes closer to you than necessary.
2. Don't fall asleep on public transportation because it makes you an easier target for thieves.

3. Don't let someone or something distract you from guarding your property. Try to hold everything you are carrying on your lap.
4. Know your routes ahead of time. Looking confused makes you seem more vulnerable.
5. Put the exact change for fare in your pocket before you leave home.

Safety in automobiles

1. Lock all doors while you're in a car, and when leaving.
2. Have your keys ready when you approach your car, and check to be sure no one is crouched beside or inside.
3. Be careful if you see someone hanging around your car. If the person seems threatening, leave immediately, and come back with another person or wait until the threatening person leaves. Call the police if you are or feel threatened.
4. Before getting into the car, look through windows into the front and back seats to make sure no one has broken into the car.
5. Always make sure that your car's dome/ceiling lights are working.
6. Always keep purses, bags, or packages out of sight, under the car seats or in the trunk.
7. If someone bumps or hits your car from behind, be careful! Stay in your car and wait for the other person to get out of his or her car. If the other driver seems suspicious, either memorize or write down the license plate number and other details about the car. Drive away if you feel afraid.
8. Do not park too closely to cars in front of you so that there is enough space to walk between the cars if you need to get away.
9. Park your car near a light in a parking lot or near street lights.

Safety in elevators

1. Stay in front of the elevator, near the side control panel.
2. Never enter an elevator if you feel afraid of the person(s) already in it, especially if you are alone.
3. If you find someone's behavior suspicious once on the elevator, push the "alarm button" or ALL of the other buttons so it will stop on all floors. Get off immediately and wait for another elevator, or try to find other people.
4. If you are grabbed or threatened on the elevator, make sure you push the alarm button or pick up the emergency phone, and push all the buttons.

Walking, jogging, or biking

1. Be aware of your surroundings! When planning your route, use major streets with heavy traffic whenever possible.
2. Never accept rides from strangers, even if they seem friendly or you are tired.
3. Do not use short cuts through alleys, deserted streets, and parks, even during the day.
4. In the evening, avoid walking, jogging, or biking alone. Stay near street lights, even when you're with friends.
5. Walk, jog, or ride along the parks, rivers, or lakefronts only during the day, in groups, and with caution.

Safety in your apartment or room

1. Always make sure your windows and doors are locked, even when you are at home.
2. Always lock your door when you take out your trash, bring your laundry to the basement in an apartment building, visit a neighboring apartment, etc. (remember to take your keys, though!).

3. All of your outer doors should have deadbolt locks. Ask this of your building manager before you move in to an apartment. You should also have window locks on all the windows.
4. On your way home, always have your key ready before you get to the door.
5. Think about buying an automatic timer for one of the lights in your apartment. They cost less than \$10, and can be set so that a light goes on after dark. If you can't buy a timer, consider turning on a light or the TV before you leave if you know you will be returning after dark.
6. Never open the door to strangers, even if they say they're from a utility company (e.g., gas or electric) or building repair. Always ask for photo identification to be slipped under the door or held up to your peephole.
7. If you live in an apartment, make sure the hallways or common areas are well lit. This is legally required in most cities/states, so let your building manager know if common areas are too dark.
8. Make sure the smoke detector(s) in your room or apartment is in working order every few months. If you do not have one, ask your building manager to install one or buy one yourself.
9. If you have a fire extinguisher in your apartment, make sure you know how to use it in case of a fire.
10. Never smoke in bed.
11. Keep electrical appliances in good working order. Don't use appliances with frayed or damaged cords.
12. Always unplug irons and curling irons after use.
13. Try to have your telephone near your bed so that you can call the police at night, if necessary. Keep emergency numbers by the phone, including your doctor and social worker.

SESSION 6: POSITIVE SELF-SOOTHING AND RELAXATION

*"When you close your eyes does your mind go blank,
or do you think of all your troubles of the day?
Can you find peace in the raindrops or tranquility in the sun?
Are you so busy that you can't just be?
Life is too short not to enjoy the rain." — Amber Saunders*

- Purposes/goals of session:**
1. Answer questions and address comments from the previous session, including the way the women felt about their assignment to walk confidently in their neighborhoods;
 2. Explore what makes them upset, and how they can calm and soothe themselves;
 3. Focus on ways to **positively** soothe and comfort themselves, and distinguish those ways from any **negative** ways they may be using;
 4. Begin to understand that learning to take care of themselves is crucial in the healing process.

Materials needed:

- ✍ Flip-chart or chalkboard, markers or chalk;
- ✍ Index cards with "WAYS TO SOOTHE AND COMFORT MYSELF" written across the top and pens;
- ✍ Optional: a CD or tape player, soothing music, and a scented candle.

Getting Started:

- ① Welcome the women back, and ask them if there are questions, comments, or reflections about the last session. Ask each woman how she felt walking

more confidently through her neighborhood or practicing one of the safety skills from last session. Be encouraging and allow stories to be briefly told. You tell one, too!

☞ Remember the time-limit.

- ② Tell the women that this session will be about positive self-soothing and relaxation. Explain that while they may not know it, learning to soothe and comfort themselves when upset or stressed out is crucial in the process of their recovery. *Self-soothing* does not always come naturally to people, and may have to be learned or re-learned.

Let them know that, because healing is a series of small steps forward (and sometimes a few steps back), it is important for us to have time between these steps to rest and get used to the changes we've made in our lives. Without self-soothing and quiet time, our stress levels can go up to a point where the healing process itself can actually be traumatizing or overly painful. Positive self-soothing also allows us to gather strength. Allow them to consider this and to make comments or ask questions.

Group information and activities:

Exercise #1:

- ✓ Start by explaining that plenty of times in life we feel upset or angry, but do not need to go through a process of soothing ourselves because the bad

feelings pass pretty quickly. For example, if a stranger on the street is rude to us, a friend is irritable with us one day, or painful thoughts from the past come up, we may not become overly upset because we expect this sort of thing to happen sometimes. Bad or upsetting things happen to all of us, but many times we can handle them without too much trouble or effort.

However, when someone is feeling vulnerable or experiencing symptoms of her psychiatric disability, it may be much harder for her to respond to upsetting actions from others or painful thoughts she is having without becoming very distressed, over-reacting, getting out of control, or going into a crisis. Sometimes, these are called "prodromal symptoms," or feelings that let people know they are about to go into a crisis. At these times, most of us rely on coping strategies -- good and bad -- that we have developed or learned throughout our lifetimes to help calm us down.

✂ Let them know that before you talk about developing positive coping strategies, you'd like them to share with the group what feelings or situations are most likely to trigger crises for them. You want to do this because, in order to help them deal with these feelings better, they need to first name them.

👉 Ask the women to name some of their worst **feelings**, including feeling unloved, afraid, embarrassed, inadequate, worthless, ugly, stupid, and angry or sad about the things that have happened to them in the past. Also ask them to name some of the worst **experiences** that may trigger crises in their present lives, such as someone yelling at them, making fun of them, repeatedly hurting

their feelings, questioning their judgement, or making them feel like they'll never amount to anything.

HINT

Obviously, talking about these things can be painful for many women. At the same time, though, it can help them to realize that they are not alone in their bad feelings about themselves or in their vulnerabilities to what other people think or say about them. Many women struggle with low self-esteem and with feeling badly when they are not liked or appreciated. Often, this is because women have not been raised to love themselves, regardless of what others think of them.

You should make these points to help women understand that, while it's hard to think about what makes us feel badly, it's good to realize that we are not alone in our feelings. Remind them that this gets back to what you discussed in Session 2 regarding the experiences that many women have in common, regardless of their cultures, backgrounds, or beliefs.

Exercise #2:

- ✓ Tell the women that we all do things -- big or small -- to ease the pain when we are feeling badly. Sometimes, these coping strategies can be self-enhancing and self-improving. Others times, though, the ways that we've learned to soothe ourselves may actually turn out to be harmful or self-destructive.

- ✂ Ask the women to think quietly for a minute about some things that they do to feel better when they are stressed out, upset, or feel badly about themselves. When they are ready, ask them to share their thoughts, while you write their answers on the flip chart or board. You should offer a couple of your own ideas to get them started, making sure to say one positive and one negative strategy that you've used in the past to self-soothe (try to avoid anything **too** negative, though, because at this point they still need to see you as a very strong presence in their healing process).
- ✂ As they are talking, try to get them to elaborate upon and expand the list by asking them to include things they do -- even negative things -- when they are stressed out and *there is no one around to help them*. Try to get every woman to describe at least one positive and one negative coping mechanism.

TIP

Most likely, the women will give a mixture of both positive and negative answers, which is good. You should encourage them to think of all possibilities, and to be explicit in their answers. These could range from going to the movies, to praying or meditating, to exercising, to over-eating, to drinking or doing drugs. Remind the women not to put one another down during this exercise.

TIP

- ☞ This activity can help the women to see that they already have some positive strategies to deal with stress and tension, and this is

empowering. It also can help them to realize that we **all** do negative things to make ourselves feel better. This is a very human tendency!

- ✂ Once a sizeable list has been made, focus briefly on the self-destructive approaches towards nurturing themselves. Ask the women to point out which of the answers might be negative ways to deal with stress, and write a minus sign next to them.

☞ Again, some examples of these may be using drugs or alcohol, over-eating, having unprotected sex or sex with strangers, and self-mutilating.

TRY THIS

The women might not spontaneously mention self-destructive coping strategies, because they may be too ashamed and uncertain to mention their worst habits, which is understandable. Thus, you may need to come up with these for them, but make sure you clarify that they are unhealthy ways of dealing with difficult situations, although not entirely uncommon among many people, especially those with trauma histories.

- ✂ Ask the women to come up with some negative consequences of using the destructive self-soothing strategies.

☞ It is important to point out that while these acts may help them

feel better at the moment, they most likely will hurt them in the long-run, especially with repeated use.



Now, ask the women to point out which of the answers on the chart or board are constructive ways of nurturing themselves, and put a plus sign next to those answers.

☞ Acknowledge that the women already have some positive ways to self-soothe, and these are the things on which this group will focus. Notice also that most of these things are either free or cost a minimal amount of money (i.e., walking, calling a friend, praying or meditating, deep breathing, reading, looking at stars, etc.).

HINT

You may need to ask women to use their Safety Bags or run through a deep breathing exercise to help them feel calmer and more in control.

☞ Clearly, using the constructive, positive strategies is more effective than using the negative ones over time. Unfortunately, sometimes it can be hard to re-train ourselves to use positive instead of negative strategies. The first step in this process is to make a commitment together in group (as well as in their individual therapy or counseling sessions) to use positive strategies more often than negative ones, and to support one another through the difficult times.

Depending upon the needs of your group,
this is a good place to split the session.

Exercise #3:

- ✓ Pass out the index cards with "WAYS TO SOOTHE AND COMFORT MYSELF" written across the top and the pens.
- ✂ Instruct them to write out as many positive ways they can think of to soothe and nurture themselves on this card. Walk around the room and help each one to do this, if necessary.
 - ✎ Tell them to stick to realistic, feasible approaches. Also, encourage the women to use some of the positive examples written on the chart or board. Allow approximately 5-10 minutes for this exercise.
- ✂ When they are all done, ask each woman to read her list out loud. After each woman has finished reading, ask her if she will try to consciously use at least two of these positive strategies some time between now and the next session, and report on her experience next time. You should write down what each woman says she will try before the next session, so they can see that you are taking it seriously and would really like them to try out positive strategies.

- ✂ Tell them that they can put this card in their Safety Bags to use whenever they feel they need a break, or when they are stressed out. Eventually, however, these approaches will become second nature, and they will not need their cards anymore.

Wrapping Up:

- ➡ Thank the women for coming to group. If there is time, you may ask each of them to say aloud, "I know ways to calm myself when I feel upset, scared, or alone." The group should express agreement as a whole.
- ➡ Let them know that the next session will deal with making the decision to heal.
- ➡ Tell them that you will be available after group if anyone has any questions or concerns that they did not want to bring up in group.

SELF-CARE TIP: You, too, should consider your positive and negative coping strategies, and commit to using at least two positive approaches each week. The farther along you go in this group, the more likely you are to experience "secondary trauma" or "compassion stress," which will require self-soothing.

Many counselors, therapists, and group leaders who help others deal with trauma find that over time they are more and more easily distracted and stressed out by events in their daily lives. Fights with partners, disagreements with coworkers, or other frustrations become much harder to deal with than they once were. This is **NORMAL**, and thus, you should be developing positive coping strategies early on to deal with it. Part of avoiding secondary trauma is to admit what is going on and to develop healthy ways to respond to it.

SESSION 7: WE CAN CHOOSE TO HEAL

*...Don't let your life slip through your fingers
By living in the past or for the future...
By living your life one day at a time,
You live all the days of your life
Don't give up when you have something to give,
Nothing is really over until the moment you stop trying
Don't be afraid to admit that you are less perfect,
It is this fragile thread that binds us to each other... -- Nancye Sims*

- Purposes/goals of session:**
1. Answer questions and address comments from the previous session;
 2. Begin to examine things the women will stand to gain and lose in deciding to heal;
 3. Instill in the women a belief that they can decide to heal and that it is an attainable goal.

Materials needed:

- ✎ Flip-chart or chalkboard, and markers or chalk;
- ✎ Name tags and markers, if still necessary;
- ✎ Handout 9.

Getting Started:

- ① Welcome the women back. Ask them if there are any questions, comments, or reflections about the last session. Request that they briefly share whether or not they tried some positive coping strategies, and what happened. You share your experiences, too.

☞ Remember the time-limit.

- ② Tell the women that this session will be about deciding to heal. Basically, this involves making a commitment to changing their lives, to healing, and to facing their fears.

☞ Explain that deciding to heal can be empowering because they will feel better in the long-run and because it takes courage to make this commitment. At the same time, though, deciding to heal also can be a scary decision because it means that they must begin to give up old habits and make some first steps into the unknown.

TRY THIS

Tell them that being a little scared is a natural reaction to change, and they are not alone! Remind them of all of the positive changes that they have made -- big and small -- in their rehabilitation process, to give them hope. You may ask each of them to share one change in their lives that they thought they would never be able to make, but had the courage to do.

Also, reassure them that change is a slow process and nobody, least of all you, is expecting miracles overnight. Rather, you all will work towards change as quickly or as slowly as is comfortable.

- ④ Some of the key issues involved in making the decision to heal will be explored in this session, including identifying what will change and what will

be given up, examining fears and resources, and the roles of willingness and courage in healing.

☞ Explain that they have already taken the first steps in healing by joining this group.

Group information and activities:

✓ Tell the women that willingness and courage are two important aspects of deciding to heal.


✓ In this case, **willingness** means that we agree to try something new or different. It gives us the power to make choices and to begin the journey towards wellness. Willingness means that you are letting yourself and the world know that you ***want to do what it takes to change*** your life for the better.

☞ In explaining this, you may write on the chart or board,


“Willingness = Just say YES!”

✓ **Courage** comes after you express your willingness or desire to change. Because almost all humans are afraid of change, courage is needed to face those fears. Courage and change aren't things that come naturally to most people, especially because in our culture women often aren't

expected to be courageous, even though we all are courageous in many ways -- big and small -- in our everyday lives.


 Tell the women that they have already proven themselves to be courageous by getting through all of the difficult, painful, and frightening situations in their lives. Through this group, their individual counseling, and their faith, they truly can start to look at themselves as HEROES in their own life stories!

Exercise #1:

 Present *Handout 9: Changes as I Heal* (adapted from Davis, 1990).

Explain that while healing is a positive goal that leads to a better, less stressful life, it also will change the way their lives have been led up to this point. Their beliefs, feelings, habits, patterns, and relationships all may change. That's why, while they think about making this life-changing decision to heal, it's a good idea to examine the changes they may face.

Handout 9 is a worksheet to help them map out these changes so that they can be ready for and not surprised by what may come.

 Go through the handout as a group, sharing ideas for answers to each question aloud as a group (but allow each woman to fill in her own with her own personal answers). As you go through each section, give examples of possible answers, and be prepared to answer questions as they arise.

TIP

Remember that some women have difficulty with writing, so you may need to help them to complete this handout.

TIP

- ✂ Once they are done, ask them to look at their answers and put a positive sign next to the things on their lists that they think would be **good changes** in their lives, as well as the things that they are **willing** to change right away. Ask the group to share some of these responses.

Exercise #2:

- ✂ Ask the women to now consider which of the changes on their list they would find it hard to make or that would be losses for them, and to share these with the group (they also should put negative signs next to them).

HINT

This may be difficult because when thinking of healing, the general tendency is to consider only things that may be gained. Yet, whenever there is change, however big or small, something must be given up. Looking at what they may lose can help them understand their fears, as well as develop ways to deal with them.

☞ It might be helpful to suggest some examples such as by starting to heal and to change their lives, they may have to give up: friends who support unhealthy lifestyles, unhealthy recreational activities, certain people in their families, a current partner, the need to have someone else to blame for all their problems, the desire to take control in all situations, the tendency to push others away or to not get better, the benefits of having people feel sorry for them, etc.

✂ Open a short discussion on how giving up each of these things eventually can be a positive experience in their lives. Give examples.

TRY THIS

This may be the first time that the women have considered these possible losses. Look for overwhelmed faces and be encouraging!

✂ Lead the discussion into asking what surprised them most about their responses, what seemed easiest to give up, what they are most afraid to give up, and if any of these fears are holding them back from the healing process, and why (Davis, 1990).

☞ Make sure you give every woman a chance to express herself, and address any concerns or confusion accordingly. This is a very important discussion, as it is a chance for all of the women to

formulate and express their fears, and therefore potential barriers, in their individual healing.

TIP

Encourage the women to tell their individual counselors, therapists, or supportive peers about this group exercise, as it will require continued effort and commitment from each woman.

TIP

- ✂ Lead the women through a deep breathing exercise. Instruct that they breathe out their fears and anxiety. Remind them that the changes you've discussed do not have to happen over night, but rather, that they simply need to express their willingness to work on changing their lives and to embrace their courage to do what it takes. These are first steps in the recovery process, and nobody is expecting them to overturn their lives and what they know in just one day!

Wrapping Up:

- ➡ Thank the women for coming to group. If there is time, you may ask each of them to say aloud, "I am willing to take the first step towards changing my life and healing. I know that it won't be easy, but I have support and people who care."

- ➡ Let them know that the next session will continue the discussion regarding their decision to heal.
- ➡ Tell them that you will be available after group if anyone has any questions or concerns that they did not want to bring up in group.

SELF-CARE TIP: Make a plan to have dinner with a supportive friend or knowledgeable coworker to discuss how this group is going. In particular, talk about how ready the women seem to change, and how that might affect the progress of this group. Try to get ideas for how to support them in dealing with their fears of change and healing.

HANDOUT 9: *CHANGES AS I HEAL*
(Davis, 1990)

If I stick to the commitment to heal, some of the following things will probably change:

Inside myself (feelings, attitudes, beliefs, self-image):

In my lifestyle (habits, patterns, leisure-time activities, types of friends):

With my family:

HANDOUT 9: *CHANGES AS I HEAL* (continued)

With my coworkers or boss:

With my spouse/partner:

HANDOUT 9: *CHANGES AS I HEAL* (continued)

With my children:

Other things that might change:

SESSION 8: FACING FEARS IN THE HEALING PROCESS

"It helps to have someone that will understand your pain and anguish and be supportive that you will be all right." -- In Their Own Words

- Purposes/goals of session:**
1. Answer questions and address comments from the previous session;
 2. Continue to discuss what the women will stand to gain and lose in deciding to heal;
 3. Examine fears and resources to work with this decision;
 4. Continue to convey that they can decide to heal and that it is an attainable goal.

Materials needed:

- ✍ Flip-chart or chalkboard, and markers or chalk;
- ✍ Name tags and markers, if still necessary;
- ✍ Handout 10.

Getting Started:

- ① Welcome the women back. Ask them if there are any questions, comments, or reflections about the last session.
- ② Let them know that you will be continuing to discuss the types of changes that they are willing to make in their lives as they begin to heal, as well as the fears that they may naturally have about this process.

Exercise #1:

- ✂ Ask them to take out their copies of *Handout 9* and to continue the discussion of the changes they are facing in deciding to heal. As they have thought about these changes since the last session, or have discussed them in individual counseling sessions, they may have more ideas or questions to share with the group. As mentioned previously, this is a very important step in the process of recovery, so time and care should be taken.

- ✓ Once everyone has had the chance to discuss the process of change, explain to the women that everyone has faced fear and uncertainty at various times in their lives, and they are no exception. These fears and uncertainties range from beginning one's first menstrual cycle, to being alone/lonely in life, to meeting with a new doctor, to starting a new program or job or medication. And now, as they are making the commitment to heal, they again may be facing fear and anxiety about what it all means. And, if they aren't feeling this way right now, they most likely will as the group progresses. As is true of change itself, the best way to deal with fears is to directly acknowledge and confront them.

- ✓ Present *Handout 10: Facing Fear and Uncertainty*. Explain that this worksheet is going to help them assess their individual approaches toward dealing with fear and uncertainty. It also will help them to see that, while they may not consciously realize it, they already have developed some strategies for dealing with these issues.

- ✂ Go through the handout as a group, sharing ideas for answers to each question aloud as a group (but allow each woman to fill in her own personal answers). Remember that some women have difficulty with writing, so you may need to help them work with this handout.

☞ As you go through each section, give examples of possible answers, and be prepared to answer questions as they arise.

TRY THIS

If the women seem overwhelmed, you should ask each of them to share with the group one time when she was most successful in handling the unknown or a life change. Praise and congratulate each woman in her success.

Remember to review the list Feeling Better in Group if anyone is feeling too anxious as a consequence of the group discussion or activities.

Exercise #2:

- ✂ Ask the women either to free write or to discuss in smaller groups how their fears may potentially affect their ability to heal as they continue in their recovery. For example, they may be worried that they won't be successful in recovering, that they will continue to engage in unhealthy or unsafe behaviors, that they will disappoint group members or their therapists, that they aren't strong enough to handle change, etc. Then, ask them to write about or discuss in smaller groups how they can overcome these fears.

Go around the room and help them with the writing or the small group discussions, if necessary.

☞ For most people, the more they talk about their fears -- and see that others share them or are not shocked by them -- the better and stronger they will feel. So, even though these exercises may seem a bit repetitive, most of us need to think and talk a lot about changes and fears before we're able to deal with them effectively. You might make this point to the women, if you feel that it would help them to open up or continue with the discussions and exercises.

Wrapping Up:

- ➡ Thank the women for coming to group. If there is time, you may ask each of them to say aloud, "I am courageous. I can face changes and my fears." Tell everyone to take several deep breaths, and say together, "I deserve to be happy!"
- ➡ Congratulate the women on their willingness and courage. Tell them that, even if they are doubtful, you believe in them and their ability to make the decision to heal and to recover.
- ➡ Let them know that the next session will be a fun one, with food and a chance to relax together and enjoy one another's company.

SELF-CARE TIP: You, too, should consider your fears of change, as well as fears about whether or not this group will be successful. Try making a list of these fears and ways that you will commit to dealing with them. The degree to which you are in touch with your own fears, weaknesses, and issues is the degree to which you can help others overcome their own problems. This process also will give you added empathy for how hard it is for most of us not only to change, but to face our fears about the process. It would help if you could discuss your list with someone else in your life, as sharing our fears often helps us to deal with them and to heighten our empathy about how hard it can be to grow as a person.

HANDOUT 10: *FACING FEAR AND UNCERTAINTY*

When I face uncertainty or something unknown to me, I feel:

When I face the unknown, I usually cope with it by:

The time I was most successful in handling the unknown was when:

SESSION 9: CHECKING IN AND HOPE

"I want to learn how to enjoy myself, experience pleasure." – In Their Own Words

- Purposes/goals of session:**
1. Relax and have some fun, in order to show the women that your work together and the process of recovery don't always have to be structured, but also can be informal and relaxed;
 2. Increase their levels of hope and belief that healing is possible.

Materials needed:

📖 A light and healthy meal that is low in fat, high in vitamins and minerals, affordable, easy to make, and filling (e.g., fresh vegetable sandwiches on whole wheat bread with a piece of fruit; or bean dip, salsa, and guacamole with baked tortilla chips, etc.), and a healthy beverage (e.g., herbal tea or iced water with lemon);

📖 Small cards with the recipe for the meal you've made (both of which are to be prepared prior to the session);

📖 Plates, cups, napkins, forks, knives, etc.;

📖 Inspirational reading found at end of session;

📖 *Optional:* tablecloth, flowers, inspirational music, candles, etc.

Pre-session:

Prior to the session, prepare and lay out the food, plates, cups, and other utensils on a table in the meeting room. It would be nice, if you have the resources, to make the room look more inviting by using tablecloths, flowers, decorative napkins, and candles.

Getting Started:

- ① Welcome the women back. Let them know that you would like to complete a couple of exercises before you share this meal, so that they can fully enjoy the food and informal discussions while eating.
- ② Explain that the check-in sessions -- as outlined in their group schedules from the first session -- will be offered periodically during your time together. They will involve a light, healthy meal and an uplifting exercise.

Tell the women that there are three reasons for these check-in sessions. First, you want to show them that recovery and healing do not always have to involve a completely structured set of activities and can be enjoyable. Second, you believe it is important to reward them for all of the hard work that they have done so far, as well as to give them a break. Finally, you want to show how healthy eating and moderation in their lives is attainable, and can make them feel better about themselves in the long-run.

Exercise #1:

- ✓ Start by thanking the women for the dedication that they have each demonstrated in the group so far.

- ✂ Then, take the group through the following relaxation exercise. If you have it, put on the soothing music and light the candles (so long as they are not crisis triggers for anyone). Tell them that when they do relaxation exercises themselves at home, they can incorporate things that they find soothing, such as turning down the lights, lighting incense, or putting a warm washcloth over their eyes.

- ✂ Instruct the women to try to sit as comfortably in their chairs as possible. Ask them to close their eyes, if they feel comfortable doing so; otherwise, they can leave their eyes open, and instead, focus on the candle flame, something outside a window, your face, or whatever helps to calm them **and keep them in the present.**

Ask the women to take a few deep, slow breaths, allowing themselves to begin to experience a sense of calming. As they breathe out, ask that they imagine themselves cleansing out tension, letting go of any troubling, confusing, or cluttered thoughts.

Now, ask that, as they take a deep breath inward, they tense the muscles in their arms and hands, and when they exhale, that they release this tension. Instruct them to do this twice. Tell them to imagine themselves releasing any feelings of heaviness as they release the tension.

Next, ask that, as they deeply inhale, they tense the muscles in their legs and feet, and as they exhale, that they release the tension. They should repeat this exercise twice, as well. Tell them to imagine themselves letting go of emotional stress as they let go of the stress in their muscles.

Now, as they inhale, ask that they tense the muscles in their stomachs, and then, release them as they exhale, and to repeat this twice. Tell them to try to be completely relaxed as they exhale.

Next, ask that they inhale and tense the muscles in their necks and faces, and then, to release them as they exhale, and repeat twice.

Finally, ask that, as they take two final inhalations, to tense their entire bodies, and relax them as they exhale. Tell them to imagine all of the stress leaving their bodies as they exhale, and to completely relax.

Ask them to take a few more deep, slow breaths, allowing themselves to savor this sense of calm, and then, ask them to open their eyes and sit back upright in their chairs.

- ✓ Tell them that they can use this relaxation technique whenever they would like to relax, or at times when they feel particularly stressed out. They also can use a mini-version of this technique for a quicker “pick-me-up.”

☞ In the mini-version, the women would tense all of their muscles as they inhale deeply, and release as them they exhale. They can repeat this once or twice as they savor the

feeling of calm as they release the tension. They then should take a few long, deep, relaxing breaths.

Exercise #2:

- ✓ Ask the women what they are hopeful about in their lives right now, allowing them to say anything that comes to their minds. Now, ask them to pick out one or two (realistic!) hopes that they just mentioned, and talk about what they can do to make these hopes a reality. Explain that once they make this type of plan, their hopes can one day turn into realistic goals.

It's a fact!

Most people say that a key component to their recovery is having at least one person who believed in them, even when they did not believe in themselves. Your ability to convey hope and your belief in the women's strengths is one of the most important roles you'll play in their lives.

Exercise #3:

- ✓ Invite the women to help themselves to the food, and you do the same. Allow the women to talk about whatever they would like to for the remainder of the session. They can tell jokes, share stories, encourage one another, or talk about what they have liked and disliked about the

group to date. The point is to keep things basically informal and relaxed, so that you all can enjoy your meal and time together. You don't want to take away any sense of relaxation that they have gained from the deep breathing exercise or from enjoying a good meal.

Wrapping Up:

- ➡ End the session by sharing the inspirational reading found at the end of the session. If they are comfortable with touching, ask the women to join hands and to state aloud, "Together we can heal and find happiness in our lives!"

- ➡ Let them know that the next session will deal with having trust in themselves.

Inspirational Reading

New Bones

By Lucille Clifton

we will wear
new bones again.

we will leave
these rainy days,
break out through
another mouth
into sun and honey time.

worlds buzz over us like bees
we be splendid in new bones.

other people think they know
how long life is
how strong life is

we know.

*Taken from *Black Women's Mental Health*, Evelyn White (Ed.)

SESSION 10: TRUSTING AND BELIEVING IN ONESELF

*"Don't be afraid to encounter risks. It is by taking chances that we learn to be brave."
-Nancye Sims."*

- Purposes/goals of session:**
1. Begin to learn why women often do not listen to their instincts or trust their feelings;
 2. Start to understand the importance of listening to their instincts and trusting their feelings;
 3. Review strategies for trusting and believing in themselves; and
 4. Discuss times when they feel that they need help in sorting out what is best for them, especially when they are distressed or in crisis.

- Materials needed:**
- ✎ Flip-chart or chalkboard, and markers or chalk;
 - ✎ Handout 11.

Getting Started:

- ① Welcome the women back. Ask them if there are any questions, comments, or reflections about the check-in session.
- ② Tell the women that so far this group has discussed being a woman, ways to keep safe, deciding to heal, and ways to self-soothe. These all are crucial steps towards healing, and now, they are ready to think about ways to develop the ability to trust and believe in themselves.

- ③ Tell them that through this discussion they will explore ways in which to listen to their own instincts, thoughts, and beliefs.

Exercise #1:

- ✓ Start by telling the group that often times women, especially abuse survivors, have trouble trusting and believing in themselves (Bass & Davis, 1988). This problem tends to rise from self-doubts --often learned from others in their childhood -- about their own feelings, beliefs, instincts, and intuitions.

☞ These self-doubts arise because too often women don't learn to trust their own feelings and thoughts when they are children. Many times, women are taught that their thoughts and feelings are not valuable, are not real, or are silly. Others are told (verbally and nonverbally) that to speak their minds truthfully is to be immodest, arrogant, or unladylike. This lack of trust in oneself is heightened when women experience childhood abuse because perpetrators tell the victims that their feelings or instincts are wrong, and may punish, threaten, or abuse them further for speaking their minds or telling the truth.

- ✓ Many women, particularly survivors, learn at a very young age to ignore their own thoughts and feelings, to pretend that they do not have feelings or emotions, and to believe that others know what is best for them. Unfortunately, this belief system often gets perpetuated in mental health

programs and institutions, particularly if others regularly proceed as though women do not know what is best for them or what they need.

- ✓ Ask the women if they know what it means to ignore their own thoughts, to pretend that they don't feel certain things, or to be afraid to speak up. Give them time to think about this and to offer examples.

HINT

Be prepared for women to express a lot of anger and resentment when they discuss this topic. This is to be expected.

Try not to let the session veer off into detailed stories of how women have not been believed or trusted, especially if the stories involve other staff in your program. Of course, you do NOT want to convey that you don't believe them or that they are wrong; however, this is not the place to discuss this problem in great detail. Rather, this session is focused on whether or not they've experienced a lack of trust in self, and how they can deal with this better in the future.

Exercise #2:

- ✓ Next, explain that, understandably, some women who have been abused take the tendency to ignore their own thoughts and feelings to a very serious level by "spacing out" or disconnecting entirely from reality on a regular basis (Davis, 1990).

☞ Let them know that by “spacing out” or disconnecting from reality you mean such things as:

1. regular and intensive fantasizing or daydreaming, even when they should be paying attention, working, parenting, or otherwise focused on the task at hand;
2. believing that they are someone else or that more than one person exists inside of them;
3. floating away to other places mentally for long periods and/or to the point of distraction; and
4. regularly not looking at or making eye contact with others, and ignoring everything that is going on around them, even if they are directly involved in what’s happening (adapted from Davis, 1990).

TIP

Spacing out, or “dissociation,” often is an effective and necessary coping mechanism for many abuse survivors, so you don’t want to convey negative judgements about this or suggest that they have to give up any of their personal coping mechanisms before they are ready to do so.

Rather, this discussion simply is to point out the importance of paying attention and being present in current situations (as much as possible), so they can learn how to identify their own feelings, instincts, and intuitions.

TIP

☞ Ask the women if they feel that they dissociate or space out regularly.

Explain to them that in order to begin to trust their intuitions, they

must begin to pay attention to what's going on inside themselves, as well as around them (Davis, 1990).

✂ Ask the women if there are things that they can do in order to less regularly dissociate or space out. Let them know that, because this is a personal, often quite painful process, these are strategies that they should talk about in their individual counseling sessions or with trusted peers/family, if they haven't already.

☞ If they don't mention them, be sure to give some examples, such as requesting or making to themselves a verbal reminder that they are indeed in the present; tensing and releasing the muscles in their arms, legs, stomachs, and jaws several times; taking several deep and cleansing breaths; vigorously shaking their heads; stomping their feet; taking a walk; or asking for safe physical touch.

☞ Suggest that there are certain times that they won't be able to or don't want to catch themselves from spacing out, and that this is okay. At this point, you want to discuss the times that they **would** like to be present or to not space out (e.g., when at work/school, when with their children, when socializing, etc.). This is a slow learning process for most people, so tell them not to expect drastic changes right away.

HINT

Addressing dissociation is typically the work of individual counseling or therapy. Unless you are well-trained or have a lot of experience in this area, you don't want to convey that you will work on this in your group. Again, the point of the session is to help women see that they may not trust themselves and how they might learn to deal with this over time.

Depending upon the needs of your group,
this is a good place to split the session.

Exercise #3:

- ✓ Start the next exercise by letting the women know that one of the best ways to learn to trust themselves is to learn to be in the present, to understand and believe in their own feelings and thoughts, and to listen to their own instincts.

☞ Let them know that instincts tell us when we are in danger, and guide us when we aren't sure of what to do. For example, instincts tell us to be careful when we don't feel comfortable with someone or when we are walking down the street alone. Most of the time, it's important for women to listen to "funny feelings" and "hunches," even though they may not have paid

attention to those feelings for years. These feelings can include:

- headaches,
- stomach aches,
- rapid heart beats,
- the sensation of one's throat closing up or eyes welling with tears,
- the body or parts of the body (e.g., neck, stomach, jaw) involuntarily tensing up,
- craving sugar,
- insomnia, and
- confusion.

These are examples of instinctual cues that can tell us how we truly feel in different situations (Bass and Davis, 1988).



Ask the women how they usually feel when something is wrong. Then, ask them how they feel when they are in danger versus when they are doing something that feels good to them. Tell them that all of these feelings are actually *instinct and intuition* at work, and that by paying attention to how they feel in more mundane daily situations, which are less scary and difficult, they can use their instincts to make healthier life decisions.

This is a slow learning process, but tell them not to give up! It takes a good deal of practice for many women, especially abuse survivors, to be able to do this. Many survivors have become so used to being hurt, in pain, or in danger that they may have difficulty recognizing these feelings. This is where trusted others can help women to sort out what they *are and are not* feeling, as well as what they *should be* feeling in certain situations (e.g.,

they actually should feel a sense of danger when walking alone in an alley at night, when being yelled at or pushed around by a loved one, etc.)

The instincts are there, even if they've been buried for years -- they just need to be listened to and trusted. Ask the women to try to pay more attention to this process during the next week, so you can discuss it in the following session.

- ✓ Trusting one's instincts can be complicated by the symptoms of many psychiatric disorders, in which people can come to believe things that are not true, due to hallucinations, delusions, paranoia, depression, overwhelming helplessness, etc. These belief systems can be so strong that people with psychiatric disabilities also can experience physical signs and reactions that their false beliefs are true.

☞ Thus, this is a good time to discuss in a frank, nonjudgmental manner that the women need to think carefully about when they need help from others in deciding what is real and what is not real. Trusted loved ones, friends, therapists, and other group members all are good sources of help in deciding when something is intuition and when it is simply false belief. If someone they truly trust tells them that they are behaving or thinking in ways based on false belief, they need to try their best to take it seriously, as hard as this can be. A helpful rule is that if at least three other people do not hold their belief or perception, then it may be time to consider with a

therapist, peer, spouse/romantic partner, or group member whether or not it's reality-based.

TIP

Remind them that while it may be upsetting at first to have someone challenge their beliefs, it's also true that learning whether or not a feeling is reality-based is part of developing self-trust. Nobody is right all the time about their intuitions, so it's okay to admit that we might need help sorting these things out.

TIP

- ✂ Present *Handout 11: Trusting Myself*, and ask the women to complete this handout as a group (Chew, 1998). If there are items that are too private, they certainly don't have to share them with others, but should make note of them on their handouts. Remember that some women have trouble with writing, and may need your help to complete this handout.

Wrapping Up:

- ➡ Thank the women for coming to group. If there is time, you may ask each of them to say aloud, "I am courageous. I can learn to know and trust myself."
- ➡ Let them know that the next session will address their ability to comfortably set limits.

SELF-CARE TIP: When helping women to distinguish real from false beliefs, you must remember, and discuss in supervision or with experienced peers, that you are likely to be seen by the women as an authority figure. Often times, abuse survivors see authority figures as infallible or incapable of making mistakes (and can become resentful of them). Also, because they have had their trust severely compromised in the past, once survivors give their trust, they can have false expectations about the other person always "being there," saying the right thing, or knowing what to do to "fix things." Thus, when the authority figure makes mistakes or doesn't know something -- inevitably! -- survivors can become enraged or deeply depressed, sometimes responding with aggressive or passive aggressive acts.

Therefore, in taking care of yourself, you should remember that you will sometimes be wrong, inconsistent, and may even misguide the women (and you probably would benefit from reminding the women of this as well). You should be ready for them to be disappointed when this happens, and to use the experience to talk about the fallibility of all human beings and how this relates to their feelings about authority figures.

HANDOUT 11: *TRUSTING MYSELF*

(Chew, 1998)

Complete the following sentences:

I trust my intuition for...

Trust means...

My sense of worth in a relationship improves when...

I trust myself when...

I can trust people who...

SESSION 11: UNDERSTANDING LIMIT SETTING

"If you have a great ambition, take as big a step as possible in the direction of fulfilling it. The step may only be a tiny one, but trust that it may be the largest one possible for now.

-- Mildred McAfee

- Purposes/goals of session:**
1. Answer questions from the previous session, including whether they paid more attention to instinctual cues since the last session;
 2. Introduce the concept of limit setting, and review their effective and ineffective strategies for saying no to others.
 3. Teach the women that they have a right to say no to others, especially when they have needs of their own to address;

Materials needed:

✎ Flip chart or chalkboard, markers or chalk;

✎ Handouts 12,13.

Getting Started:

- ① Welcome the women back, and ask them if they have questions, comments, or reflections about the last session. Ask the women if the last session helped them to pay more attention to their instincts, and encourage them to share brief stories. Then, ask them if they used any of their self-soothing techniques during the past week.

☞ Give sufficient time for discussion of these issues, since part of building skills is getting feedback and advice about what works and what doesn't work over time.

- ② Tell the women that this session will build on their skills of trusting themselves and listening to their instincts, by helping them to become comfortable with limit setting. Learning to set limits builds on the previous discussions because *instincts* tell us when to set limits, which can require *self-trust* and *courage*.
- ③ Tell the women that this session will help them understand that an important aspect of limit setting means being able **to say no effectively**, which requires that they believe they have a right to get what they need and want out of life.

TIP

Often, abuse survivors have a hard time saying no to others because their refusals and needs were not respected when they were children. As adults, they may fear abandonment or violence if they refuse a request. Thus, most of the women will need to learn when their needs legitimately come first. This can be tricky because sometimes others' needs -- such as those of children, elderly relatives, or spouses -- must be put first, especially when caretaking. However, it is important to help the women see that others' needs should not always be put before their own, and it is not necessarily selfish to feel this way.

TIP

Group information and activities:

Exercise #1:

- ✓ Pass out *Handout 12: Reasons Why it is Hard to Set Limits or Say No.*

Begin by telling the women that while it may seem like an easy thing to do, saying no -- which can be thought of as "setting limits" on others' behaviors, requests, or actions -- can be difficult and scary. Most of the women are likely to relate to this feeling. There are many reasons why it can be hard to say no or to set limits. First of all, many people, especially women, are raised to believe that putting oneself first is selfish and/or sinful, while pleasing others above all else is unselfish and/or moral.

TIP

Handle this notion with care, as many women will have strong beliefs -- typically religious or cultural -- about the importance of being "self-less," as a way to lead a decent, spiritual life. Reassure them that you are not trying to call these beliefs into question, as they do have value, but are trying to help them see that there are times when it is not only acceptable, but of paramount importance, that they put their own needs first. By NOT doing so, they may actually do more harm than good, should they become resentful of others, or even physically or emotionally ill, because they haven't met their own needs.

TIP

Secondly, it can be difficult to accept that it is truly okay for us to refuse others' requests, especially during those times when we have our own needs to consider. Thirdly, saying no can be hard because it takes an

understanding that we will not always be able to give others what they want. It is hard for all of us to disappoint loved ones, friends/peers, coworkers, bosses, etc., but sometimes putting oneself first may involve just that. Finally, setting limits can be scary because it may make some people angry, but conversely, others will come to respect us more for being strong and decisive.

- ✓ Ask the women to brainstorm situations and conditions in which they *have had a hard time setting limits* (or saying no) and the reasons why (Harris, et al., 1998). Write their responses on the flip chart or board, and discuss the similarities and differences in their answers.
- ✓ Ask the women in what situations they *have set limits* on others, why it was necessary to do so, and how it made them feel (Harris, et al., 1998). Write their responses on the board. Praise and encourage the women for their achievements, and point out that they survived the consequences that may have arisen from limit setting, even with loved ones.

HINT

Look for a trend in the situations women mention, such as when saying no involved money or sex, and point out that, by refusing others in these situations, they actually set limits. In other words, they already have been able to set some limits in their lives, which is good. Yet, the goal here is to become more comfortable with setting limits through making conscious choices, which takes practice for most of us.

Exercise #2:

✂ Present *Handout 13: Effective and Ineffective Ways to Say No*. Ask the women to think about the effective and ineffective strategies that they use to set limits on or say no to others, and to write their answers on *Handout 13* (adapted from Harris et al., 1998). Remember that some women may need help with writing their answers down.

☞ If they have a hard time coming up with **effective** ways to say no or set limits, give some examples, such as:

- calmly explaining why she cannot do what the other person wants;
- looking someone in the eye and simply stating no;
- consistently responding to certain requests or situations by calmly stating that she cannot do what is expected;
- stating that she will meet the request, but that she would like to have one of her needs met as well;
- pushing someone away and clearly saying no, in situations when a person becomes physically threatening to her;
- requesting that the other person leave her alone if he/she cannot take no for an answer; and
- telling people that she needs a certain day each week just to take care of herself and her life;

If they have a hard time coming up with *ineffective* ways to say no or set limits, give some examples such as:

- rolling her eyes, getting “huffy,” or otherwise expressing displeasure with the request, and walking away;
- saying yes when she means no, but then, doing a poor job at what she was requested to do;
- cursing at the other person and aggressively refusing to do what was asked;
- threatening the other person who is making the request;
- crying so that the other person will feel badly and withdraw the request;
- trying to do so many things for other people that she becomes emotionally overwrought or physically ill; and
- repeatedly asking someone else to tell the other person that she cannot meet the request, rather than doing so herself.

TRY THIS

Remind the women that everyone uses ineffective ways of saying no or is unable to set limits sometimes. Also, in some cases, less effective ways of saying no -- such as asking that someone else intervene for her or simply walking away from the other person -- may be necessary if the woman is afraid of the person who is making requests (e.g., a threatening spouse or friend).

- ✂ Ask them to share with the group one of their ineffective and one of their effective ways to set limits or say no. Ask the group to comment on how the effective ways work better, and why. Tell them that they may add some of the group's comments and answers to their own lists.

Wrapping up:

- ➡ For discussion next time, ask them to use one of the effective strategies when setting limits or saying no to someone. If it works, tell them to record it on their Skills Cards.
- ➡ Let them know that the next session will address learning to believe that their needs and dreams are important, and using actual skills for setting limits.

SELF-CARE TIP: It is likely that during this session you were thinking about your own difficulties with setting limits or saying no. Therefore, you too should make a list of your effective and ineffective ways of limit setting. Try to discuss with a supportive colleague or peer how your ineffective strategies may interfere with your work and life. During the next week, practice saying no to one person in an effective manner. Try to choose someone whom you often find it difficult to refuse.

HANDOUT 12: REASONS WHY IT IS HARD TO SET LIMITS OR SAY NO

1. Many people, especially women, are raised to believe that putting oneself first is selfish and/or sinful, while pleasing others above all else is unselfish and/or moral. While these values certainly are important in life, it's also true that there are times when it is not only okay to put yourself first, but very important to do so. By NOT doing so, you may actually do more harm than good, if you become resentful of others, or even emotionally or physically ill, because you haven't met your own needs.
2. Saying no can be difficult because you will have to accept that it is truly okay to refuse others' requests, especially when you have your own needs to consider.
3. Saying no can be hard because it takes an understanding that you will not always be able to give others what they want. It will be hard for you to disappoint loved ones, friends/peers, coworkers, bosses, etc., but sometimes putting yourself first may involve just that.
4. Saying no can be scary because it may make some people angry, but conversely, others will come to respect you more for being strong and decisive.

REMEMBER: IT IS OKAY TO SAY NO AND TO TAKE CARE OF YOURSELF!

HANDOUT 13: *INEFFECTIVE AND EFFECTIVE WAYS TO SAY NO*

(adapted from Harris et al., 1998)

INEFFECTIVE WAYS TO SAY NO

1.

2.

3.

4.

5.

EFFECTIVE WAYS TO SAY NO

1.

2.

3.

4.

5.

SESSION 12: GETTING COMFORTABLE WITH SETTING LIMITS

"Optimism is the faith that leads to achievement. Nothing can be done without hope and confidence." -- Helen Keller

- Purposes/goals of session:**
1. Answer questions from the previous session, including how comfortable the women feel with putting their own needs first sometimes;
 2. Learn to believe that what they want is legitimate and worth striving for;
 3. Become empowered to begin setting limits;
 4. Understand the differences between assertive, aggressive, and passive aggressive ways to say no or set limits.

- Materials needed:**
- ✎ Flip chart or chalkboard, markers or chalk;
 - ✎ Handout 14, 15.

Getting Started:

- ① Welcome the women back, and ask them if they have questions, comments, or reflections about the last session. Ask the women how comfortable they are with the notion that they can put themselves first sometimes or say no to others, including loved ones. If some of them are worried or concerned about this concept, discuss why and how they might deal with this effectively.

☞ Remember that some women may have a hard time with this idea because it goes against their cultural or religious beliefs. Thus, try to focus on times when **they** believe it is acceptable for women to set limits, including when they have needs of their own to tackle (e.g., their histories of abuse).

- ② Let them know that this session will deal with **strategies** for setting limits, including further discussion of effective and ineffective ways to do so.

Group information and activities:

Exercise #1:

- ✓ Begin by telling the women that the first steps in getting more comfortable with setting limits are: understanding that we deserve to get what we want, deciding what we want, and making a conscious choice to pursue what we want.
- ✓ Ask the women to think about things that they want, while you write out their responses on the flipchart or board. Be sure to point out the responses that might be too difficult for them to achieve right now or are not concrete, and tell the women that while they are valid answers, the purpose of this exercise is to focus on more specific or attainable goals.

HINT

This exercise may be hard for some, as many women have seldom been asked this question. If so, offer some possible responses such as learning to cope with past abuse, to forgive oneself, to get more exercise, to tell one's partner no when he/she asks for something unreasonable, etc.

- ✓ Have the group brainstorm ways in which to accomplish some of the realistic "wants," and write the strategies on the board.
- ✎ Explain to them that they have a right to what they want. Also let them know that, by expressing what they want and making a plan of action, these wants can become attainable goals.

Exercise #2:

- ✂ Ask each woman to individually think of one person to whom they would like to say no or set a limit (adapted from Davis, 1990; Harris et al., 1998). One at a time, ask each woman to close her eyes and visualize this person, to say no aloud to him/her, and to repeat this. Next, ask the group to say no aloud together, while each visualizes her one person, and to repeat it again. Ask them to individually say no to the visualized person once more, this time with as much conviction and strength (but not aggression) as she can.



Distribute *Handout 14: Understanding Assertive Behaviors*. Before you review each technique on this handout, initiate a discussion regarding the differences between assertive, aggressive, and passive aggressive limit setting. Inform the women that they are **assertive** when they stand up for their rights; express personal beliefs, values, or needs; request to be treated with respect; say no when they don't want to be involved in something; accept compliments or criticisms comfortably; and disagree with others without losing their tempers (Jonikas & Cook, 1993). Being assertive does not mean that they must be angry, intolerant, selfish, or manipulative. These behaviors usually are associated with being aggressive or passive aggressive.

Make the point that mental health consumers often are not encouraged to see themselves as equal to others and, as a result, allow themselves to be exploited or mistreated. On top of that, women tend to be socialized to believe that the needs of other people should come before their own needs. Women often are taught that it is improper to be expressive or to articulate their personal needs and beliefs. Many women frequently feel that they have to offer excuses for why they are expressing either strongly held opinions or their own needs, in other words, to be passive. For example, women may claim to be upset or emotional rather than simply conveying something they believe in or need. When disagreeing with another person's idea, a woman may say, "Well, it just may be that I'm emotional about this, but..." rather than, "In my opinion..." or "I believe..."

☞ Reassure the women that learning to say no takes practice.

Also, when people first start saying no, they tend to think that they have to apologize or explain why they are saying no, when just saying no typically is enough.

- ✂ Also remind the women that there are times when setting limits or saying no -- even while being calm and assertive -- is not advisable. For instance, if someone's boss assigns a work-related task or a child is sick and in need of care, these would not be times to say no, even if the woman in her heart does not want to do what is being asked.

HINT

Making sacrifices is a part of adult life. Thus, as the group facilitator, you don't want to convey that the women should always say no to things they don't want to do or don't like. Rather, they would benefit from learning the difference between acceptable and unacceptable requests, and when it is okay to say no. If this difference does not seem clear to them, ask them to give examples of when it is and is not okay to say no.

- ✂ Ask the women to fill out *Handout 15* (adapted from Davis, 1990), and have them read their answers to the group (those who have trouble writing can answer the questions aloud, when everyone else does). Come up with

some examples if the women are struggling with how to respond. Ask that the group encourage each individual woman to follow through on her responses.

Wrapping up:

- ➡ Encourage the women to pursue one of their “wants” before the next session, as well as to practice saying no in appropriate situations. Remind them to practice at least one of the skills on their Skills Cards.
- ➡ Let them know that the next session will address physical boundaries, and how to preserve our safety by paying attention to our physical space.

Optional writing/drawing exercise:

Have the women choose a situation in which they would like to say no, and have them write for 15 minutes about all the different ways in which they could make this happen. If they have trouble writing, ask them to draw the ways they think they will feel when they are able to say no without feeling guilty or scared.

SELF-CARE TIP: You should give some honest, critical thought to how you will set limits with the group members. You may be struggling with this because you do not want to hurt, disappoint, or aggravate them any further than they have been in life. However, you also need to model what it means to set appropriate limits (e.g., restricting phone calls to your home, limiting number of times you'll meet to discuss their needs outside of group, calmly saying no to requests that you feel are unreasonable, etc.).

By your example, they will learn that they can care about others and still meet their own needs. Also, you will surely burn out if you do not set some firm limits with the group members early on (prior to tackling issues of trauma and violence directly). Again, this does not mean that you are selfish, but that you value your own well-being and continued strength.

HANDOUT 14: FOUR TECHNIQUES OF ASSERTIVE BEHAVIOR

(Adapted from Jonikas & Cook, 1993)

ASSERTIVE REFUSALS

1. Say "no" as clearly and plainly as you can, without being rude or mean;
2. Provide another course of action to the person making an unfair or undesirable request; and
3. Offer a reason that explains why you are refusing, but do not make excuses, as if your refusal is unreasonable.

ASSERTIVE REQUESTS

1. Clearly state what you want the other person either to do or say;
2. Try not to make it seem as though you are demanding or forcing this person to do something;
3. Be sure that you ask in a polite, firm, clear manner.

ASSERTIVE EXPRESSIONS

When assertively expressing *positive opinions* or feedback:

1. Tell the person exactly what behavior or attitude you are praising;
2. Compliment the behavior immediately after it occurs;
3. Give your praise in a genuine and enthusiastic way.

When assertively expressing feelings about *receiving* positive feedback:

1. Listen carefully to what is being said;
2. Thank the person before any other response;
3. Give the person some additional facts about the situation being complimented, if it seems appropriate;
4. Indicate, if you wish, how the positive feedback makes you feel. For instance, you can say, "Thank you, that makes me feel good."

When assertively expressing **negative opinions** or feedback:

1. Avoid starting out with a negative statement, which will most likely upset the person receiving the feedback. Rather, try first to say something more positive or neutral about their behavior.
2. State your understanding of the problem, but avoid anything that might seem like a personal attack on the other person.
3. Try to discuss ways to alter the situation in the future.

When assertively expressing feelings about **receiving** negative feedback:

1. Let the other person finish giving the negative feedback before you begin to respond;
2. Do not deny the problem or get defensive. Even if the person is wrong, the problem must be resolved. The best way to do resolve things is to avoid an argument or very angry feelings between you.
3. Ask for specifics -- such as what you did wrong or what you failed to do -- so that you can correct future behavior;
4. State, if appropriate, how the feedback makes you feel, and assure the person that you will do your best to remedy the situation if you are at fault;
5. If you are not at fault, work out a way that you both can feel more satisfied in the future.

DEFENSIVE TECHNIQUES

When using a "time out" in order to prevent an outburst of anger:

1. State that you are uncertain or angry about the issue, but that you need time to think about it before responding;
2. Say exactly how much time you need and exactly when you will give a response to the person.

When using a "negative assertion" to defend your actions:

1. Acknowledge that you made a mistake or, at least, that you **might** have made one;
2. Make a statement related to the behavior, such as, "It really seemed to me that you were being disrespectful of women, but I'm open to talking about it;"
3. Make sure that both people feel satisfied with the result of the interaction.

When using the "anger starvation technique" to defend your actions:

1. Acknowledge that the other person is angry or upset;
2. Do not accuse the person of having a problem with anger because he or she is expressing it at you;
3. Suggest that you are willing to talk about the situation that is making this person angry after everyone involved calms down.

When using the "broken record technique" to defend your actions:

1. Clearly state your position, idea, or belief;
2. Repeat your statement until the person understands what you are saying or what you believe. It is best to use this technique when you are finding it too difficult to reason with someone.

When using the "defensive clipping technique" to defend your actions:

1. Clearly state a simple yes or no to the person's questions or statements;
2. Do not add any ideas or beliefs, so that the person will get to the point or leave you alone as soon as possible.

HANDOUT 15: NEXT TIME I HAVE A HARD TIME SAYING NO...

(Adapted from Davis, 1990)

Complete the following sentences.

The next time I have a hard time saying no, I will:

If someone gets mad at me for saying no, I will:

SESSION 13: PHYSICAL BOUNDARIES

*"To let go is not to try to change or blame another, it's to make the most of myself."
-- Author unknown*

- Purposes/goals of session:**
1. Answer questions and address comments from the previous session, including whether or not they practiced saying no or pursued one of their wants;
 2. Begin to develop an understanding of the importance of personal space;
 3. Begin to become aware of their own personal physical boundaries.

- Materials needed:**
- ✎ Flip chart or chalkboard, markers or chalk;
 - ✎ Masking tape.

Pre-Session: *Prepare the room for the boundaries exercise by moving any furniture to the side, and creating large square, triangular, and rectangular shapes with masking tape on the floor of the group room. Make these shapes large enough to stand or sit in, with some closer together and some farther apart. Make approximately five more boxes on the floor than there are group members. This should take about twenty minutes for you to complete prior to group.*

Getting Started:

- ① Welcome the women back, and ask them if they have questions, comments, or reflections about the last session. Also ask them if they had a chance to practice saying no or to pursue a want, and let each woman briefly share what happened with the group. If they haven't done these things, ask them which of their new skills they did use, and how it felt.
- ② Tell the women that this session will be about boundaries, and developing an understanding of personal, physical space and boundaries.

It's a fact!

Abuse survivors have had their personal, physical space violated as children, and thus, often have a hard time understanding what constitutes safe personal space. When boundaries are unclear, difficulties with self-definition and self-regulation result (Courtois, 1988).

Group information and activities:

Exercise #1:

- ✂ Ask the women what they think the word **boundary** means, and allow for a brief discussion of the word.

- ✂ Tell the women that the shapes on the floor represent boundaries. Ask the women to choose one shape, inside of which they would feel safest and most comfortable. Then, ask them to stand or sit in this shape in whatever way makes them feel most comfortable or safest. Give them about 5 minutes to choose and to sit/stand comfortably in their chosen shape.

Check it out!

*This exercise is adapted from one found in an excellent book by Maxine Harris and her colleagues, **Trauma Recovery and Empowerment: A Clinician's Guide for Working with Women In Groups**, published by The Free Press, New York, 1998.*

- ✂ Once all the women have done this, ask each one why she thinks she chose that particular shape, what is the location of the shape, how far or near it is to someone else's shape, whether she is facing or turned away from others, and which other shape she would choose if she had a chance.

TIP

This is an opportunity for you to be creative and point out the ways individual women chose their shapes. Make the connection that this is symbolic of the different needs of different women. Also point out the importance of respecting others' physical space, and how we all have different needs in this area. You may ask them to practice saying no assertively to others who try to step into their space with them.

TIP

✂ After this exercise is done, ask the women to help move the furniture back, and have a seat.

✓ Ask the women how much **physical space** they need in their relationships, as well as in different situations, such as on a bus or in a waiting room.

☞ Be sure to point out the inherent differences in need for space depending on the situation (e.g., being at home versus a public place) and familiarity with others (e.g., being with loved ones versus strangers).

✓ Ask the women what they do when someone does not respect their physical boundaries and write those responses on the board. Since many survivors have a hard time understanding personal boundaries, you may need to give some examples of what it means to violate someone's space. Mention such things as someone they don't know well touching their arms or backs during conversation; a partner or family member not allowing them to be alone in their rooms when they want to be; and someone sitting or standing too close to them in a waiting room or a health care setting.

✓ Open the discussion to the group to explore the effectiveness of the different reactions to someone violating their physical space, as well as the practicality of these reactions. Remind them of the differences between assertive, aggressive, or passive aggressive responses.

☞ Ask the women what they can do to maintain a comfortable amount of personal space, and write those answers on the board. If they have trouble, point out such things as standing with at least 3-4 feet between them and people with whom they interact; moving to another chair if someone on a bus or in a waiting room sits too close to them; or requesting of relatives or roommates that they be allowed to have some time alone. Ask the women to put the ideas they would like to try on their Skills Cards.

Exercise #2:

- ✂ Tell the women that the way they hold their bodies, or their **body language**, has a significant effect on the distance that people will keep from them. There are postures that may invite people to be closer to them, as well as postures that may discourage it.
- ✂ Have the women demonstrate ways in which they can hold their bodies in order to non-verbally tell people to come closer, and then, demonstrate ways to tell people to keep their distance. You join in by demonstrating your own ways. Typically, a more inviting posture would be standing very close to someone, with a slightly arched back, with a hand on that person's arm. A less inviting posture would be standing about 4 feet from the other person, with arms folded across the chest. Be prepared for some giggling

and discomfort among the women with this exercise, which is natural. Ask the women to practice this skill, and put it on their Skills Cards.

☞ Point out that there may be people who won't pay attention to their body language, and choose to violate their physical space anyway, but this exercise is to show ways to take control over what **they** personally want in terms of space.

Wrapping Up:

- ➡ Ask the women if they will practice some of the approaches you discussed today, including body language postures. Ask them to observe the reactions they get from others, so that you can talk about it during the next session.
- ➡ Let them know that the next session will address self-esteem.

Optional writing/drawing exercise:

Ask the women to write for 15 minutes on what they think is good about maintaining physical boundaries between themselves and others. If they have trouble with writing, ask them to draw pictures of a comfortable amount of space they would like between themselves and strangers, as well as between themselves and loved ones.

SELF-CARE TIP: Remember the strategy of taking a walk outside and gently releasing each woman from your mind.

Sometimes, upon getting close to the women in your group, you will lose sight of the boundaries between you. In order to avoid this and the pain/exhaustion it entails, try the following visualization exercise (adapted from Bass & Davis, 1988). During group, imagine the outline of your body and remember that it is separate from the women in group. Imagine that nothing can pass through this outline and that it allows your being to be completely separate from others. With this awareness, you can listen to stories with compassion, but others' pain and anger will not go through this boundary into your body. As you inhale, think of yourself breathing in energy and as you exhale, imagine letting go of others' pain and anger. This self-care strategy will help you to stay positive, focused, energetic and, in turn, to become a more effective group leader.

SESSION 14: DEVELOPING POSITIVE SELF-ESTEEM

*You are strong
when you take your grief and teach it to smile.
You are brave
when you overcome your fear and help others to do the same.
You are happy
when you see a flower and give it your blessing.
You are loving
when your own pain does not blind you to the pain of others... — Nancye Sims*

- Purposes/goals of session:**
1. Answer questions and address comments from the previous session;
 2. Help the women to nurture a positive sense of self and their personal strengths;
 3. Help the women to see that they have the power to change how they feel about themselves;
 4. Remind them that efforts to increase self-esteem are made throughout the recovery process.

- Materials needed:**
- ✍ Flip chart or chalkboard, markers or chalk;
 - ✍ Index cards with "MY STRENGTHS AND ACHIEVEMENTS" written across the top, and pens;
 - ✍ Handout 16.

Getting Started:

- ① Welcome the women back, and ask them if they have questions, comments, or reflections about the last session. Ask each woman to briefly (no longer than 3-4 minutes each) share whether she noticed how others respected or disrespected her "personal space" since the last session. If they don't have anything to share about this, ask them to discuss how they tried to respect others' personal space as a result of your last meeting.
- ② Tell the women that this session will be about self-esteem. Remind them that self-esteem generally refers to **positive** feelings that people have about themselves. People who do not feel very good about themselves are considered to have lower self-esteem.

Explain that many people in American society struggle to develop positive self-esteem, since our larger culture and media tend to focus on unrealistic ways women (and men) are supposed to look, feel, and act. Often, feelings of personal inadequacy and self-doubt occur when people cannot reach these ideals in one way or another. On the other hand, individuals with higher self-esteem generally have developed strategies for feeling good about themselves and what they do or don't do, regardless of messages from the larger culture, media, or those in their daily lives.

☞ Remind them of the activity in *Session 2* in which they made collages of the positive and negative media images of women, and

how these relate to self-esteem. This would be a good time to convey your hope and faith in the women, since they are likely to feel doubtful about ever feeling good about themselves.

It's a fact!

Many abuse survivors struggle with lower self-esteem, since they were devalued as children and not given the chance to feel good about themselves on a regular basis. This is further complicated by having a diagnosis of mental illness, due to the stigma and misconceptions surrounding it among the public. Thus, developing positive self-esteem will take effort and faith.

Group information and activities:

Exercise #1:

- ✓ Present *Handout 16: Autobiography in Five Short Chapters*, by Portia Nelson. Read the poem to the group, and ask them what they think it means (read it twice, if that will help them to better understand it or retain the messages conveyed).

☞ Make sure to emphasize these important points: learning from your own mistakes, changing behaviors that lead to problems or pain, and positively overcoming life's obstacles.

Tell the women to put this poem into their Safety Bags, if they would like.

Exercise #2:

- ✓ Ask the women what they think it means to have a positive, healthy sense of self, and write their answers on the flipchart or board (adapted from Chew, 1998). Next, ask the women what it means to have low self-esteem, and write out those answers as well.

☞ Point out and discuss the differences between the two. Also explain that they will work on self-esteem throughout the course of this group, and that it's something on which they already have been working. For example, they have been exploring how increasing personal safety, deciding to heal, self-soothing, setting limits, saying no, and understanding physical boundaries all are part of nurturing a positive sense of self.

☞ Congratulate the women on all the work they have done so far, and ask them to take a deep, cleansing breath.

Exercise #3:

- ✂ Pass out the index cards with "MY STRENGTHS AND ACHIEVEMENTS" written across the top, and the pens. Explain to the women that they

should write their personal strengths and achievements on these cards (you should help those who have difficulty writing). Allow approximately 15 minutes for the women to complete their cards.

☞ Tell them to only use sentences that start with "I" such as "I survived," or "I am courageous," or "I have a good sense of humor."

✂ While the women are working, write the following sentences on the flipchart or board (if you know that some women in group will need help with writing during this exercise, then you should write these on the chart or board prior to group):

I'm determined; when I set my mind to something, I persist;

I won't let anyone abuse me anymore;

I have a good sense of humor;

I have understanding for other people in pain;

I was able to get a job;

I was able to go back to school;

If I lived through the abuse, I can live through anything;

I don't have many illusions about the world; I see things as they are;

I can take care of myself;

I joined this group to help me cope;

I joined a mental health program to get help;

I am a good friend to people;

I care about people, and can figure out what's going on with them;

☞ Tell them that you are writing out some examples of possible strengths and achievements they may want to add to their lists (examples adapted from Davis, 1990).

✂ Ask each woman to get up in front of the group and read her favorite self-statement from her card. Remind them that doing this does not mean they are vain or stuck-up, but that they recognize their own strengths and achievements. Most will probably giggle or laugh when making the statement, but still will be able to do it with enough encouragement.

☞ If someone doesn't want to participate in the activity, she should not be forced.

✂ After each woman speaks, ask the rest of the group to validate her statement by either repeating what she said about herself or adding another positive thing about her, or both. Then, ask them to clap for the woman. Repeat this with every woman in the group. You join in, too!

✓ Point out that this exercise is to help them learn that they have positive characteristics. Then, ask them to try to say something positive about themselves in the mirror **every** morning and evening. Ask them to note how hard or easy it is to do this, and why, to discuss in the next session.

HINT

Be sure to tell the women that it is natural for us to feel like giving up when things do not come naturally. This tendency is even more true for survivors who struggle with perfectionism and needing to be a "good girl," as carried over from childhood. We all have good intentions when trying something new, but many of us will give up after 3 to 5 days, once the initial excitement of the new activity or thought pattern wears off (Grabowski, 1999).

Thus, remind the women that it typically takes about 21 days to make or break a habit (with the exception of addictions, which can take longer). Keeping this in mind may help them to continue trying the strategies to improve their lives that you've been discussing in group (Grabowski, 1999). Some of the women may be more successful if they focus on one positive change at a time, rather than trying to alter all of their thoughts and activities at once. THIS IS OKAY, AND SHOULD BE ENCOURAGED BY YOU. You may even want to repeat certain sessions for this very reason.

- ✓ Ask the women to take a deep, cleansing breath. Congratulate them on yet another step toward healing and feeling better about themselves. Tell them they deserve it!

Wrapping Up:

- ➡ Remind them to say something positive about themselves at least once or twice a day in the mirror, and to bring their Strengths and Achievements Cards to the next session (offer to hold the Cards if they're worried about

losing them). If you see them during the week, remind them to repeat their affirmations twice per day in the mirror.

➡ Let them know that the next session will address positive affirmations.

Optional exercise:

*If there is time, ask the women what things **other people** do or say to them to help them feel better about themselves, and write these answers on the chart or board. Point out that, while it's an important part of life to draw strength and praise from others, by taking the responsibility to feel better upon themselves, they will have more control over how they feel in the long-run. Depending solely on other people to make them feel good about themselves can lead to disappointment and not having their needs met at critical points in time. Let them know that it also is important to try to spend more time with people who make them feel good about themselves, as opposed to those who are critical or involved in destructive activities.*

SELF-CARE TIP: Like many women, you also may struggle with positive self-esteem or tend to focus more on your weaknesses than strengths. Thus, you also should make a list of your top five strengths. The evening after the group, try telling your spouse/partner, roommate, or a friend one of your strengths, using an "I" statement (explaining why you're doing so, if it makes you more comfortable). Note how easy or difficult it is for you to say positive things about yourself aloud, in order to develop empathy for the women in your group.

Also during the week after this session, make your own list of two things that you like about each woman (you can use their initials, if you aren't comfortable using their full names), to help you keep your hope for their recovery in the forefront. This is an especially important exercise for you in helping women you are having a hard time connecting to or liking. It is only human to dislike some people, but you still must react to them with optimism and hope, so writing down a couple of their positive characteristics might be helpful. Also, at some point along the way, you're likely to have a hard time with all of the women in one way or another, and this list can help you reconnect with their strengths during those rough times.

HANDOUT 16: AUTOBIOGRAPHY IN FIVE SHORT CHAPTERS,
BY PORTIA NELSON

I

I walk down the street.
There is a deep hole in the sidewalk.
I fall in
I am lost...I am helpless
It isn't my fault.
It takes forever to find a way out.

II

I walk down the same street
There is a deep hole in the sidewalk.
I pretend I don't see it.
I fall in again.
I can't believe I am in the same place.
But it isn't my fault.
It still takes a long time to get out.

III

I walk down the same street
There is a deep hole in the sidewalk.
I see it is there.
I still fall in...it's a habit.
My eyes are open.
I know where I am.
It is my fault.
I get out immediately.

IV

I walk down the same street.
There is a deep hole in the sidewalk.
I walk around it.

V

I walk down another street.

SESSION 15: AFFIRMATIONS AND REALIZING OUR DREAMS

*Most of all...
remember to use your dreams as a
way of knowing yourself better,
and as an inspiration to reach
for your star. -- Nancye Sims*

- Purposes/goals of session:**
1. Answer questions and address comments from the previous session, including whether the women said something positive about themselves each day;
 2. Begin to understand the power of positive affirmations in improving self-esteem;
 3. Learn that visualizing those things they hope to achieve or become in life is the first step in realizing their dreams.

Materials needed:

📌 Flip chart or chalkboard, markers or chalk;

📌 Extra paper and pens/pencils;

📌 Women's "STRENGTHS AND ACHIEVEMENTS" cards;

📌 Handouts 17, 18;

📌 *Optional:* small tape recorders (with audiotapes and headphones) for women who do not wish to write.

Getting Started:

- ① Welcome the women back and ask them if they have questions, comments, or reflections about the last session. Also, ask them to share how it felt to say positive things about themselves aloud. Give them time to discuss this and to offer each other advice and encouragement. If anyone said that she just could not do this, then state something aloud that you like about her and request that she repeat this statement to herself in the mirror twice per day.

TIP

Be encouraging! Tell the women that this activity gets easier with time, and increases in meaning with practice.

TIP

- ② Let them know that this session will be about affirmations. **Affirmations** are encouraging or constructive statements used to increase positive feelings about ourselves, and to take the first steps towards achieving what we would like to become. Give an example of an affirmation such as, "I have the strength to get through whatever life may bring." As they can see, affirmations can be empowering, especially because the more they repeat them, the more they will come to believe them.

Group information and activities:

Exercise #1:

- ✓ Present *Handout 17: Positive Affirmations*. Explain to the women that this list will help them see how powerful affirmations can be in their lives. Most importantly, these affirmations are true for each woman in the group.

- ✂ As a group, ask that the women read the first affirmation aloud and look up, directly meeting the eyes of the woman across from them, while repeating the affirmation. They should continue down the list until they are done. You should read and repeat with them. For women who have trouble reading, they can participate in the second part of the exercise, repeating what they have heard the group say. When finished, have everyone take a deep, cleansing breath.

- ✂ Tell the women that repeating statements like this can lead to a more positive self-image. Then, ask each woman how this exercise made her feel and why.

Exercise #2:

- ✂ Inform the women that making affirmations can help them to achieve their goals and dreams. Using affirmations or “visualizations” of what they hope

to become can actually create and strengthen their self-image, and help to eventually bring about their wishes. For example, if someone would like to be more powerful in her life, she may make the daily affirmation, "I am the source of my own power," and over time start to actually feel more powerful.



Present Handout 18: What I Will Become: My Dreams and Hopes

(adapted from Davis, 1990). Ask them to write statements of what they would like to achieve or become in life. Allow approximately 15 minutes for this exercise. Remember to assist those who have difficulty with writing (or they can make these statements into a small tape recorder, which you provide).

☞ If necessary, write some examples on the chart or board such as, I would like to quit smoking; I would like to exercise more; I would like to eat healthier foods; I would like to return to school/work; I would like to have a good relationship; I would like to be alone without fear; I would like to recover from my history and have a happy life; I would like to be more assertive; and I would like to be more spiritual or artistic.

To take this list of dreams and hopes to the next level, request that they turn these statements into affirmations by changing the "I would like to..." statements into, "I will..." or "I am..." statements, and repeat these new affirmations aloud.

- ✓ Suggest to the women that they try to regularly take this list out and read it (or to listen to their audiotape). What they have written can give them hope and reasons to keep trying despite pain and frustration.

Exercise #3:

- ✓ Tell the group that people who write about this process of “creative visualization” believe that, besides repeating affirmations (in the mirror) every day and imagining ourselves reaching our goals during meditation or prayer, it’s crucial that we clear negativity from our lives. Granted, this can take a long time, but there are a couple of activities that women can try to get started.
- ✂ First, ask the women to write out all the things in their lives that they feel bad, sad, guilty, angry, or regretful about (on a clean piece of paper that you provide). It can be anything from saying something really dumb that hurt a loved one’s feelings to not getting good grades in school to being abused by a relative. Reassure them that nobody will see this list, so they can be completely honest, even if it makes their skin crawl a bit to see these things in writing. Again, women who have trouble writing or don’t want to see these things on paper can sit in a corner, whispering these things into a small recorder (you should have head phones available for this recorder).

Allow the women ample time for this exercise so that they can move beyond more "superficial" hurts to those that are deeper and even more painful (and thus more likely to hinder their recovery efforts). They should be given enough quiet time during this exercise to really think about, internally explore, and purge some long-held negative or harmful feelings. Rather than restricting the time, allow them to keep going until they feel finished.



Now, ask them to take a few deep breaths, read the list silently to themselves, and to rip it up into small pieces (the women who taped them should listen to the tape, and then, destroy it by pulling out and cutting the ribbons). Then, ask them to say aloud the following statements (which you should put on the chart or board): "These things I've done or others have done are over. I forgive myself and can put them behind me now."

TRY THIS

Remind the women of your discussion from last session that all important life changes take time and practice. This exercise is not to imply that they should suddenly be free from their pasts, but to give them a glimpse of a future free from these bad feelings and thoughts. It is to help them see, if only for a moment, that a better life is possible for them.

- ✓ Reassure the women that even if they have doubts you believe that they can achieve their goals and have a life free from their pasts. Although it will be hard and take time, you believe in them and have seen plenty of other women achieve a good life, even against all odds. They may not reach their goals overnight -- few people do -- but it is their right to dream and to strive, just like anyone else.

TIP

Some therapists and counselors make audiotapes of positive affirmations and soothing thoughts for their clients. This can be very helpful for those women who are so scarred by their pasts that they are unable to think or say good things about themselves, even with encouragement. For those who are able to make affirmations themselves, the tape is a nice supplement when they are especially scared or blue. Thus, you should consider making an audiotape of the positive affirmations handout for each woman in group. If some women do not have tape recorders, offer to help them buy one from a second-hand or "dollar" store.

TIP

Wrapping Up:

- ➡ Ask the women to read the positive affirmations every day in the mirror (and to listen to their audiotapes, if you have recorded one), as well as read their Skills Cards and Strengths and Achievements Cards. Let them know that repetition of affirmations is an important part of their effectiveness -- reading or listening to them every day helps them to become part of our consciousness.

- ➡ Inform them that the next session will address honoring what they did to survive. It is **very important** for you to tell them that the next session and those that follow will be dealing more directly with recovery from histories of abuse. Reassure them that you will not be sharing detailed stories about abuse in this group, as that is the work of their individual therapy/counseling. Rather, you will focus on helping them to develop positive coping strategies and to build a better life. Feelings, concerns, and problems that arise from being abused will be discussed, but you will keep the group safe by discouraging anyone from sharing detailed abuse histories in this group. Offer to stay after group to discuss any worries or fears that the women may have about this next phase of the group.

Optional exercise:

If you have time, ask the women to take out their Strengths and Achievements Cards from the last session. Point out that all of the strengths on their cards can be used as personal affirmations, in addition to those from Handout 17. Tell them that these may be even more meaningful because the women came up with them on their own, and they pertain specifically to each woman. Ask each woman to read two of her favorite strengths, and then, ask the group to validate her affirmations by rephrasing her "I" statements into "You" statements (e.g., if the woman states, "I am strong," have the group say, "You are strong," in response).

SELF-CARE TIP: As you know, mental health affects physical health, and vice versa. Thus, it is important for you to take care of your physical health, especially during the course of this group. The upcoming sessions will deal more directly with women's abuse histories, and you want to be sure to have the physical, and thereby, mental health to cope and remain strong. Pay more attention to eating well (cut out as much caffeine, sugar, fat, and salt as you can), getting enough exercise, and limiting smoking or drinking alcohol. See your health care provider if you've been experiencing any aches, pains, or other worrisome symptoms that you've been ignoring or putting off. The better you treat your body, the easier you will find your work and your play.

HANDOUT 17: POSITIVE AFFIRMATIONS

(Chew, 1998, Chicagoland Area Sexual Abuse Resource Guide, 1997; Polin, 1996)

I have the strength to heal.

I can break the silence about what happened to me.

I have a voice.

My experiences of the past are valid.

I forgive myself for the things I have done to cope with the abuse or pain.

I can protect myself and be strong.

My body belongs to me, and me alone.

I can reject unhealthy relationships.

I am not to blame for what happened to me when I was young -- grownups are responsible for that.

I can experience intimacy and enjoy my sexuality.

I can respect myself.

I can say "No."

I can learn new ways of coping.

I can reach my dreams of a better life.

I can make life-affirming choices.

My present and future belong to me.

I can go beyond survival.

I am lovable and capable.

I am a valuable and important person, worthy of the respect of others.

I am kind, compassionate, and gentle with myself.

I can ask for the things I want and need.

I am a total success in all that I do.

I accept compliments easily, and share my successes with others who have contributed to them.

I am a radiant being filled with light and love.

HANDOUT 18: *WHAT I WILL BECOME: MY DREAMS AND HOPES*

(adapted from Davis, 1990)

Write out the top five things that you dream about doing or becoming. Try to come up with some little and some big dreams.

1.

2.

3.

4.

5.

SPECIAL FACILITATOR'S NOTE

As you move into the next phase of this curriculum, you should be aware of several things. First, as previously noted, the sessions dealing with abuse discourage the sharing of personal stories, as this curriculum was designed mostly with the novice in mind. This is why we recommend that all group members also participate in some type of individual counseling/therapy (see the introduction), which will provide them with a safe place to share their own stories. If you have the skills and inner resources, you can consider convening a special ***Testimonial Forum*** for those women who are ready to share and hear personal stories. If you plan such a forum, you should make sure that each woman understands that she not only will give testimonial, but will be asked to listen to others' stories as well. You also should ask the women to discuss with their individual counselors whether or not they are ready to participate in such a forum, and give them some confidential way to let you know whether they want to participate (to avoid peer pressure on those who aren't ready). Finally, you should be sure that you are equipped to facilitate an event like this. If all of these conditions exist, then a ***Testimonial Forum*** can be a very powerful healing tool. Of course, if your group is comprised of people who are farther along in their recovery, you might decide to encourage discussions *during group* in which women "name" their abuse and give testimonial (assuming you have the skills and resources to facilitate sessions of this nature).

Also note that we have designed several "review" sessions, which are interspersed between those pertaining to abuse and trauma. This was done to give the women a break, as well as some emotional/mental space when learning about different types of abuse and its consequences. Offering a few sessions in which women review their positive coping skills and affirmations will help them maintain their faith in themselves and their strength to move forward. Too much information about abuse without some mechanism to focus on the good parts of life will likely lead your group to go quite poorly. These review sessions do not have to run for the full 90 minutes, but are a good way to offer encouragement and hope along the way.

SESSION 16: HONORING SURVIVAL TECHNIQUES

*"When I am in crisis, I need (people) who will
acknowledge my pain without trying to fix it." -- In Their Own Words*

- Purposes/goals of session:**
1. Answer questions and address comments from the previous session, including whether the women practiced using daily affirmations and regularly read their dreams/hopes lists.
 2. Understand the concept of "survivor" as opposed to "victim;"
 3. Learn coping mechanisms that are common for many survivors;
 4. Begin to accept that they need not criticize themselves for what they have done to survive, and start to forgive themselves for necessary coping mechanisms.

Materials needed:

✍ Flip chart or chalkboard, markers or chalk;

✍ Index cards with "POSITIVE COPING STRATEGIES" written across the top;


✍ Extra pencils, pens, and paper;

✍ Handout 19;

✍ List from Session 3, ***Feeling Better in Group***.

Getting Started:

- ① Welcome the women back, and ask them if they have questions, comments, or reflections about the last session. Also, ask them if they practiced their affirmations since the last session.

 Continue to encourage the women to practice at least one of their new skills each week (remember, many women will only be able to handle one change at a time) and commend them for all of their hard work.
- ② Tell the women that this session will be about honoring what they have done to survive. As such, you will be discussing what it means to be a survivor versus a victim, as well as strategies that many women have used to cope with past abuse.

TIP

Before you begin, it is very important to remind the women that you will not be sharing personal stories of abuse histories in this group, in order to respect other members' personal journeys of recovery and to avoid triggering crises. This cannot be over-emphasized, since some women will forget it and others will fear it happening to the point of shutting down.

TIP

Group information and activities:

Exercise #1:

- ✓ Let the group know that part of recovery from abuse and mental illness is to take control of how we see ourselves, the way we think about our experiences, and the words we use about ourselves and what has happened to us (Chew, 1998). Recovery often means changing negative self-definitions to positive self-definitions.

- ✂ Write the word "victim" on one side of the flip chart or board, and say it aloud (exercise adapted from Chew, 1998). Ask the women what adjectives come to their minds when they hear this word, and write their responses under the word. Try to help them generate a list of about 10 words or phrases (some examples are, "hurt," "pain," "helpless," "out of control," "uninformed," "broken").

Write the word "survivor" down on the other side of the chart or board. Ask them what adjectives come to their minds when they hear this word and write them down, again trying to generate about 10 words or phrases (examples include, "moving on," "strong," "living through great adversity or pain," "someone who made it," "a fighter").

- ☞ Tell them that the term "survivor" is used for people who have lived through past sexual and physical abuse, to acknowledge that

they are strong and can go on living in spite of the experience. The term "survivor" also is used to refer to people who lived through concentration or POW camps during WWII and other, more recent wars/ethnic conflicts, as well as to people who have lived through abuses in the mental health system.

✂ Ask each of the women to comment on what she thinks the differences are between being called a "survivor" and a "victim." Explain that in this group you will use the word "survivor" because of your commitment to promoting personal strength and growth. If any woman is uncomfortable with the term, find out why and see if you can come to a compromise. For example, in some Asian cultures, the word "survivor" has negative connotations because it singles out people who have been hurt, abused, or tortured in a way that is quite shameful to them. For women who are uncertain about the term, perhaps you could use something they like better just as often as you use "survivor."

✂ Tell each woman individually that she is a survivor (or the word she likes better), and ask her to repeat this aloud. When done, ask everyone to take a deep, cleansing breath. Request that, upon inhaling, they imagine light and positive energy flowing into their bodies, and upon exhaling, they imagine negative words and experiences floating out of them. Repeat this several times, saying aloud what they should do when inhaling and exhaling.

Exercise #2:

✂ Present *Handout 19: Common Ways of Coping* (adapted from Bass & Davis, 1988). Go through and explain each of the coping mechanisms on the handout. It is crucial to point out the **functionality** or **usefulness** of these mechanisms (rather than the shamefulness of them) in surviving abuse (Bass & Davis, 1988). As you read the handout, ask the women to put a check by the coping mechanisms that they have used at any time in their lives. Reassure them that they will not be asked to share their answers with the group. Also ask them to respect each other's privacy, by keeping their eyes on their own papers for this exercise (some people might not check coping mechanisms if they think that others will see them doing so). Allow approximately 15-20 minutes for this exercise. Upon completion, ask the women to take a deep, cleansing breath.

☞ Tell the women that if anyone checked that they abuse or hurt others, especially children, they should seek immediate help from a trained professional. Legally, you also need to remind them that abuse of children is illegal, that you are legally required to report it if you know about it, and that it could result in custody loss. Also, tell the group that if anyone feels suicidal right now, to please see you right after group or to talk to a therapist, case worker, or trusted loved one to get help **immediately**. Remind the whole group that they are important and have reasons to go on living.

HINT

If they seem overwhelmed or distressed, take a time-out to run through one of the strategies from the list you generated in Session 3, Feeling Better in Group. You may need to read an inspirational poem, lead a relaxation exercise, or allow someone to gather herself before proceeding.

Exercise #3:

- ✓ Now, ask them each to pick one coping mechanism from this list that she would like to change, which need not be shared with the group. Ask her to put two stars by this item on the handout, or to hold it in mind, if they don't feel like marking it.

Explain that people usually do the things on this list to meet deeply held needs that aren't being met in other ways. Ask them to think about what **need** the thing they starred is meeting for them, not sharing it unless they are comfortable doing so. You should give some examples, such as over-eating to fill a void of loneliness; drinking or drugging to numb the pain of what has happened to them; denying or forgetting whole parts of their childhood because it hurts to remember; and gambling or stealing to get thrills or feel alive again.

- ✓ Ask the women to brainstorm some more positive and healthier ways to meet these needs, and write these on the chart or board. Try to help them

stick to realistic coping strategies. These might include calling a friend from this group when lonely; sticking with this group to start facing the past and to let go of it; icing and snapping a rubber band on their wrists rather than seriously injuring themselves; over-eating something healthy like vegetables or fruit; or pounding a pillow or clay so the anger can come out safely. Pass out the Skills Cards and pens, and ask them to copy these to their Cards, helping those who need it.

- ✓ Finally, ask the women to say aloud as a group, "I forgive myself for the things I do or have done." Ask them to repeat this several times.

☞ There is some possibility that a woman in group will not believe she has anything to forgive herself for. Thus, before asking them to repeat the affirmation, you should acknowledge that some women may not feel that they need to forgive themselves for anything, large or small, and that this is okay, too. However, it is good for them to remember that, should they ever do something they regret, they can forgive themselves, try to make it right if appropriate, and move on with their lives and recovery.

TRY THIS

Point out that it may be difficult for them to believe that they can fully forgive themselves, but that's ok. In this group, you are

working on opening doors to forgiveness. Ask them to think about whether they would forgive a friend who has been through the same experiences and developed the same coping mechanisms to survive. Tell the women that a good way to forgive oneself and begin healing is to develop healthier ways of coping, as they are doing in this group.

Wrapping Up:

- ➡ Ask the women to try one of the healthier coping strategies that you discussed between now and the next session. Remind them that if they are not ready to do this, then to keep repeating their positive affirmations every day, especially the one about forgiving themselves. Also ask them to recall that new habits can take at least 21 days to create, so they shouldn't be discouraged by set-backs.
- ➡ Tell the women to take a deep, cleansing breath, commend them for getting through another difficult step towards healing, and congratulate them for their strength.
- ➡ Let them know that the next session will be a check-in session, to talk about what has happened thus far in group and hope for the future. Remind them that you will be providing a light meal for the session, as you did last time.

SELF-CARE TIP: In reviewing the list of unhealthy coping mechanisms, you might have recognized some of your own ways of dealing with (or avoiding) pain, difficulties, and the struggles of your life. If you have never used any of these unhealthier strategies, take a moment to acknowledge something rare in yourself! If you have, close your eyes and state aloud that you forgive yourself for the things that you do or have done. You, too, should commit to replacing a negative coping strategy with a positive one, or to recognize the ways in which you already have replaced unhealthier behaviors with healthy ones. This should help you have more empathy for the women in group who will struggle, just as you probably did or do, to break bad habits.

HANDOUT 19: COMMON WAYS OF COPING

(Adapted from Bass & Davis, 1988)

_____ **Minimizing:** pretending what happened to you wasn't really that bad in order to feel normal

_____ **Denying:** pretending what happened to you did not happen, or is not happening, in order to avoid the truth

_____ **Forgetting:** not remembering the painful past to avoid the bad and hurtful feelings

_____ **Splitting:** either dividing into more than one person (a person with a "good" life on the outside, but very troubled on the inside), or numbing your body while abuse occurs to avoid the pain

_____ **Chaos:** drawing attention/caring you crave by becoming out of control in your behaviors and actions; creating crises to feel alive and because it feels "normal"

_____ **Spacing Out or Dissociation:** not being in the present in order to distance yourself from pain and your past

_____ **Super-alert:** maintaining constant awareness of your surroundings, and trying to constantly anticipate what others need or will do to avoid potential trouble or their becoming angry or displeased

_____ **Humor:** keeping others laughing to stop yourself from crying or feeling pain

_____ **Rationalizing:** explaining your own poor behavior by keeping the focus on the person who abused you, or other difficult people in your life, rather than taking responsibility for yourself

_____ **Busyness:** keeping overly busy in order to avoid your true feelings

_____ **Escape:** avoiding reality through running away, sleeping, books, television, fantasy, etc., to the point of having a hard time functioning in daily life

_____ **Losing touch with reality:** blurring the line between fantasy and reality in order to escape difficulties in present life

HANDOUT 19: COMMON WAYS OF COPING

(continued)

_____ **Self-mutilation:** hurting yourself so that you can feel something and remind yourself that you're in the present

_____ **Suicide attempts:** feeling that you have no other way out than death

_____ **Addiction to drugs and/or alcohol:** numbing the pain from the past through addiction

_____ **Eating difficulties:** using weight fluctuations as an attempt to say no, have control over how your body appears/feels, or take attention off what's really going on with you

_____ **Stealing:** taking things that don't belong to you to forget, defy authority, create excitement, or take attention off what's really going on with you

_____ **Gambling:** taking risks with the unrealistic hope that you will hit it big, change your luck, get your due, get your thrills, or take attention off what's really going on with you

_____ **Workaholism:** needing to achieve and overcome the badness you feel inside, as well as to avoid your true inner life

_____ **Avoiding intimacy:** not allowing anyone to get close to you so you won't be hurt

_____ **Compulsively seeking sex:** trying to get close to someone else in the only way you've been taught, to escape reality through sex, or to take attention off what's really going on with you

_____ **Compulsively avoiding sex:** avoiding sex altogether so you won't have to think about the abuse or possibly being hurt again

REMEMBER THAT YOU DO OR DID THESE THINGS TO SURVIVE THE PAIN OF BEING ABUSED. THIS IS COMMON FOR MANY SURVIVORS.

FORGIVE YOURSELF. YOU'RE WORTH IT.

SESSION 17: CHECKING IN AND HOPE

*"Leaving behind nights of terror and fear
I rise
Into a daybreak that's wondrously clear
I rise
Bringing the gifts that my ancestors gave,
I am the dream and the hope of the slave.
I rise
I rise
I rise."
-- Maya Angelou*

- Purposes/goals of session:**
1. Answer questions and address comments from the previous session;
 2. Review the group process thus far, and what women feel they have learned by the experience;
 3. Continue to increase their hope in the future, while emphasizing that life can be enjoyable.

Materials needed:

- ✎ A simple, healthy, affordable meal (consider a pot of vegetarian or chicken chili and a green salad);
- ✎ Index cards with the recipe for this meal;
- ✎ Plates, cups, napkins, forks, etc.
- ✎ *Optional:* tablecloth, decorative napkins, flowers, inspirational music, etc.

Pre-session:

Prior to the session, prepare and lay out the food, plates, cups, and other utensils on a table in the meeting room. It would be nice, if you have the resources, to make the room look more inviting by using tablecloths, flowers, decorative napkins, and candles.

Getting Started:

- ① Welcome the women back, and thank them for the dedication they have shown so far in group. Remind them how important they are in this process of recovering their own lives.
- ② Tell the women that the reason for this session is three-fold. First, it is to remind them that recovery and healing do not always involve structured activities and can be enjoyable. Second, you want to reward them for all of the hard work that they have done so far, as well as to give them a break. Finally, you wish to demonstrate how important healthy eating and moderation are in their lives, and how these can make them feel better about themselves in the long-run.
- ③ Tell the women that you would like to briefly review their feelings about this group and any suggestions they have for improving things in the future. Let them know that you'd like to do this before eating, at which time you will just enjoy your meal and hang out together.

Group information and activities:

Exercise #1:

- ✓ Start by asking the women for their opinions about the group so far. Tell them that they can be honest and it won't hurt your feelings, since you want to be sure that this is working for them. They may bring up things that are beyond your control to change; if so, acknowledge the concern and briefly explain why you cannot do what they are suggesting. They also may bring up things that actually do hurt your feelings! If so, you should discuss this with an experienced peer or colleague, and try to sort out if the criticism was constructive or personal. If it was personal, try to forgive the woman and move on. Remember that the women are likely to see you as an authority figure and may hold some ambivalence about your role in their lives.

☞ If the woman (or women) continues to criticize you in a personal way, then you will need to speak to her privately, tell her that it hurts your feelings, and try to come to some resolution. Although as the facilitator you are to be as understanding as possible, the women are adults and they may need to be reminded of the consequences of their behaviors or statements.

- ✓ Ask each woman to briefly share (no more than 3-4 minutes) how they think their beliefs, skills, or attitudes have changed since the first session because of all the work you've done together.

- ✓ End this part of the session by telling each woman individually that she is strong enough to handle whatever life may bring and that you believe in her, even when she doubts herself. Look her in the eyes and state it with conviction. Then, ask the women to join hands and state, "We deserve to be happy and are worthwhile human beings!"

Exercise #2:

- ✓ Invite the women to help themselves to the food, and you do the same. Allow the women to talk about whatever they would like to for the remainder of the session. They can tell jokes, encourage one another, or talk about movies, music, books, or whatever interests them. Try to discourage negative gossiping about other people they may know, as this will create negative energy in group. But, do keep things informal and relaxed, so that you all can enjoy your meal and time together.

Wrapping Up:

- ➡ Let them know that the next session will address intimacy and trust in relationships.

SESSION 18: INTIMACY AND TRUST

"I need friends who know about my situation and can give me positive input in my life. That's important." -Having Our Say

- Purposes/goals of session:**
1. Answer questions and address comments from the previous session;
 2. Begin to understand the meaning of intimacy, as opposed to sex;
 3. Examine issues of trust in others;
 4. Explore what is necessary in a relationship in order to have intimacy and trust.

- Materials needed:**
- ✎ Flip chart or chalkboard, markers or chalk;
 - ✎ Extra pencils, pens, and paper;
 - ✎ Handouts 20, 21, 22.

<u>Pre-session:</u>	Depending upon your group, you may need more than one session to address trust and intimacy in relationships. For those who have been in counseling regarding their abuse histories for a longer time, this subject should not be new to them, and they will benefit from simple review. For those who are just starting to face their histories, these concepts may be harder to deal with, and may require an extra session.
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Getting Started:

- ① Welcome the women back, and ask if they have questions, comments, or reflections about the last session. Ask them which one of the skills from their Cards they've been practicing the most, and how it's going.

☞ Make sure you tell them that the more they practice, the more these skills will be integrated into their everyday lives, and the further they'll move in their recovery.

- ② Tell the women that this session will be about intimacy and trust in relationships. You will talk about how trust in others can be jeopardized due to past trauma and abuse, as well as how to begin to trust others again.

It's a fact!

Many survivors have difficulties with intimacy and trust because of their abuse histories. In general, these difficulties are a direct result of being betrayed when they were young by people to whom they were close and trusted. This betrayal left them with poor examples of intimate, trusting relationships.

Group information and activities:

Exercise #1:

- ✓ Start by making the point that healthy, intimate relationships typically are

defined by the presence of trust, safety, and being able to give and to take (Harris et al., 1998). These types of relationships usually take time to develop, and most of us need to assess whether or not this kind of safety and trust exist, before giving ourselves fully to the relationship. Contrary to what many people think -- and often incorrectly reinforced by media and popular music -- intimate, trusting relationships develop over time and take work on the part of both people. If trust isn't present at first, this doesn't mean that it never will be, but that it takes effort, commitment, and the right conditions.

✂ Ask the women to share their ideas of what intimacy means, and write their responses on the chart or board. You may need to give examples, such as being as close to someone as possible; trusting someone else fully; safely sharing your true feelings and thoughts with someone; loving someone else in spite of their flaws; safely asking for your needs to be met and meeting the other person's needs; and feeling free and good about yourself with someone else.

✂ Next, ask the women what they think is necessary in a relationship for intimacy to occur, and write those responses on the chart or board. Some possible ideas include trust, self-love, acceptance, love of other, safety, and comfort.

HINT

Pay attention to whether the women interchange intimacy and sex. Be sure to point out that sex is not the same thing as intimacy, a fact that confuses many sexual abuse survivors. Some people who are intimate have sex, but some people who are intimate never have sex, such as best friends. Sex is not necessary for intimacy to occur. This important point needs to be understood by all of the women before going any further, so be sure to fully explain.

Exercise #2:

✂ Present *Handout 20: People I Feel Close To* (adapted from Bass & Davis, 1988). Ask the women to write the names of one to five people whom they trust or feel close to, including family members, friends, spouses/lovers, or their case workers/therapists (i.e., you don't just mean spouses/lovers). Allow approximately 5 minutes for this exercise. Reassure them that it's okay if they have only one name to share, as this is the case for many people.

✂ When they are finished, pass out *Handout 21*, and tell the women that you are going to ask them these questions about the people on their lists. The purpose of these questions is to help them learn about whether they trust and feel intimate with the people they have named (adapted from Bass & Davis, 1988). Tell them that you will run through the list of questions twice, so that they can think about the first two people they named, in order to

give them an idea of how the exercise works. They can answer the questions about the rest of the people on their own after group.

READ THESE QUESTIONS SLOWLY TO THE WOMEN.

Start by saying, "In thinking about the first person on your list, how would you answer the following questions? Please do not share your answers aloud, but just answer in your head." Repeat the same thing for the second person.

1. Do I respect this person?
2. Does this person respect me?
3. Can I really talk to this person and show my true feelings?
4. Do I work out disagreements and problems well with this person?
5. Is there give and take in this relationship?
6. Do both of us take responsibility for the good and bad in this relationship?
7. Could I talk to this person about my abuse history?
8. Would this person support me in my decision to heal?
9. Can I grow and reach my own goals in this relationship?

✓ Tell the women that if they answered "yes" or "usually" to most of these questions, then they **probably** have a strong level of trust and intimacy in the relationship. If they aren't sure of the answers, they probably have not yet fully explored the relationship. If they answered "no" to most of the questions, then they probably do not feel as intimate or trusting with the person as they might.

TIP

Be sure to point out that not all relationships in our lives must be intimate or have a deep level of trust. Having friends and acquaintances who are not as intimate as these questions imply is not negative, and it doesn't mean they should end the friendship or relationship. However, if they are in a loving or sexual relationship with someone, or consider the person to be a "best" friend, then they should be able to answer "yes" to most of the questions.

TIP

- ✂ Ask the women to discuss why they have problems trusting or being intimate with some (or most) people. They might point out such things as fear of being hurt or abandoned; not being able to believe that other people have good intentions; not feeling good enough about themselves to love others this way; being suspicious or afraid of others; and feeling unsafe or vulnerable with others.

Be sure to point out that many abuse survivors feel this way, and that they have to learn slowly to trust others again. Many survivors first learn true trust in relationships with their therapists/counselors or other women who also have been abused, which may be true for them as well. Reassure them that they are not alone in this feeling and that, with time and practice, they can develop trusting relationships.

Exercise #3:

- ✓ Once you've sufficiently discussed barriers to trust and intimacy, let the women know that maintaining their own safety and self-love partly comes

from forming relationships over time that involve at least some trust and intimacy. Again, this doesn't mean that they have to end any relationship right now that they are not ready to let go of, but that recovery from trauma often involves developing new, healthier relationships with others.

- ✓ Tell them that in general they should be careful about giving their trust to others, remembering that it grows with time and getting to know someone. Since there always will be people who are not trustworthy in life, it is in our best interest to consciously make assessments of trustworthiness before giving totally of ourselves. If we give all our trust before we fully know the other person -- even if that person seems caring -- we run the risk of being disappointed in their inability to reciprocate or respect our needs. At the same time, we do sometimes have to take risks in getting to know and love other people, and we cannot close ourselves off totally for fear of being hurt. Thus, it is best to try to develop connections with others, but to move slowly and not to give too much of ourselves all at once. Make sure they understand these points.

HINT

It is important to note that, due to their past abuse, survivors tend to see trust as "all or nothing," and may bounce between the two. It is important for them to understand that trust varies, and must be assessed periodically as relationships progress.

- ✓ Pass out *Handout 22*. Inform them that there are basic steps to assessing whether someone will be trustworthy (adapted from Matsakis, 1998).

These steps are as follows:

1. *Gather information* about the person. This information includes what **others** know about the person; whether friends or family like the person; and your gut reaction (or “sixth sense”) to the person.
2. *Form an opinion or guess* about the person’s trustworthiness.
3. *Hold off from sharing/giving* too much of yourself before you’ve had a chance to test your opinion or guesses about the other person.
4. *Test opinions or guesses* by watching to see whether they match the person’s behavior in real life.
5. *Revise your opinion* as a result of the new information.
6. *Give your trust*, if the person seems willing and able to respect your trust, treat you well, and take your love/respect.
7. *Repeat* the process as necessary.

- ✓ Answer any questions about this process, and how/when it should be used. Remind them that human beings do make mistakes sometimes and disappoint people they love. Thus, they should be looking for **patterns** of

repeated violations of their trust or behaviors that indicate the person does not have the women's best interests at heart. When in doubt, they should discuss their concerns with their therapists, case workers, or trusted peers.

Wrapping Up:

- ➡ Congratulate the women on another productive session, as well as their strength and honesty that made progress possible. Ask them to take a deep, cleansing breath.
- ➡ Let them know that the next session will address understanding physical abuse and its effects.

Optional exercise:

Ask the women to comment on what people can do in order to violate trust in relationships, and write their answers on the chart or board. Conversely, ask the women to comment on things people can do in order to create trust in relationships, and write those answers on the chart or board. Briefly discuss the differences between the two.

SELF-CARE TIP: Some group leaders and counselors form monthly or bi-monthly support groups of their own to discuss issues that come up in group, ways to respond effectively, and strategies for managing compassion stress. To find such a group for yourself, start by calling local social service or mental health agencies, battered women's shelters, rape victim programs and similar organizations to find out if they sponsor such groups, or have staff there who would be willing to meet monthly to discuss therapeutic work with survivors. You also might surf the Web to see whether there are existing chat groups of counselors or group leaders, or consider starting your own Web-based chat group to get extra support and advice as your group proceeds.

HANDOUT 20: *PEOPLE I FEEL CLOSE TO*

(Adapted from Bass & Davis, 1988)

These are the people in my life with whom I have a close, intimate relationship. In these relationships, there is trust, safety, and give and take.

1.

2.

3.

4.

5.

HANDOUT 21: CONSIDERING INTIMACY AND TRUST IN RELATIONSHIPS

(Adapted from Bass & Davis, 1988)

When deciding whether you fully trust and feel intimate with another person, ask yourself the following questions. You should answer "yes" to most of the questions for people whom you deeply trust. Remember, you don't have to feel intimate at this level with every person in your life. It's not a problem if you can't answer "yes" to these questions about every relationship you have. However, you should be able to answer "yes" to most of the questions when it comes to your spouse, lover, or best friends.

1. Do I respect this person?
2. Does this person respect me?
3. Can I really talk to this person and show my true feelings?
4. Do I work out disagreements and problems well with this person?
5. Is there give and take in this relationship?
6. Do both of us take responsibility for the good and bad in this relationship?
7. Could I talk to this person about my abuse history?
8. Would this person support me in my decision to heal?
9. Can I grow and reach my own goals in this relationship?

HANDOUT 22: ASSESSING SOMEONE'S TRUSTWORTHINESS

(Adapted from Matsakis, 1998)

The following are basic steps you can use to assess whether someone will or will not be trustworthy.

1. *Gather information* about the person. This information includes what **others** know about the person; whether friends or family like the person; and your gut reaction (or "sixth sense") to the person.
2. *Form an opinion or guess* about the person's trustworthiness.
3. *Hold off from sharing/giving* too much of yourself before you've had a chance to test your opinion or guesses about the other person.
4. *Test opinions or guesses* by watching to see whether they match the person's behavior in real life.
5. *Revise your opinion* as a result of the new information.
6. *Give your trust*, if the person seems willing and able to respect your trust, treat you well, and take your love/respect.
7. *Repeat the process* as necessary.

SESSION 19: UNDERSTANDING PHYSICAL ABUSE

*"Don't let life slip through your fingers by living in the past or for the future. By living your life one day at a time, you live all the days of your life.
Don't give up when you still have something to give. Nothing is really over until the moment you stop trying." -- Nancy Sims*

- Purposes/goals of session:**
1. Answer questions and address comments from the previous session;
 2. Understand what constitutes physical abuse;
 3. Begin to understand how physical abuse can affect life and relationships.

Materials needed:

- ✎ Flip chart or chalkboard, markers or chalk;
- ✎ Positive affirmations from *Handout 17*, Session 15;
- ✎ Construction or drawing paper; pens, colored markers, crayons, or paint;
- ✎ Cards with domestic violence hotline numbers, community resources, and colleague referrals (see Session 3 for a description), which you will prepare in advance;
- ✎ *Handouts 23, 24.*

NOTE: Remember to use the boundary visualization exercise, described in the self-care tip of *Session 13*, to keep yourself focused and energized during this session.

Getting Started:

- ① Welcome the women back, and ask them if they have questions, comments, or reflections about the last session.
- ② Tell the women that this session will focus specifically on **physical** abuse. Even though it can occur along with other types of abuse, such as sexual or emotional, this session will focus directly on physical abuse to help them completely understand what it entails. Remember that it often is easier for people to disclose physical abuse than more stigmatizing sexual abuse or less clearly understood emotional abuse.

TRY THIS

Start this session with a series of positive affirmations (see Handout 17 from Session 15), following each one with several deep, cleansing breaths. Remind the women that they are safe right now, and that part of recovering their lives is to understand what has happened to them.

Group information and activities:

Exercise #1:

- ✓ Ask the women to define and give examples of different kinds of physical

abuse, and write their answers on the board. This discussion may prompt some women to share their own stories of childhood or adult physical abuse, which you need to handle with care. While you are asking for examples of physical abuse, you do not want anyone to share so many details that they traumatize the other women. If they start to tell long, personal stories, you will need to gently intervene, stating something like, "Right, being hit by your father with a belt is a form of physical abuse. Other examples?" It will feel awkward at first to cut off stories like this, but remember that most survivors drop out of survivor support groups because they become traumatized by hearing other people's stories before they have dealt with their own (Talbot et al., 1998). By gently intervening in this way, you will demonstrate to all of the women -- even the one who you are stopping from sharing -- that you are in control of the group process and are concerned about keeping everyone safe. You should encourage the woman who was sharing her story to be sure to discuss it in her individual counseling or therapy.

It's a fact!

According to a nationwide Gallup poll, 3 million children are victims of physical abuse annually (Chicago Tribune, December 7, 1995).



Present Handout 23: Profile of a Physical Abuser (adapted from 1997-Chicagoland Area Sexual Abuse Resource Guide). Read the handout aloud. Ask each woman if she knows of anyone from her past or present with these traits, by simply answering "yes" or "no."

TIP

Remind the women that nobody deserves to be physically abused, nor is anyone at fault for having been abused. While the abuser may try to blame his or her victim, it is in fact not the survivor's fault. It may take them a long time to believe this, so you cannot repeat it enough.

TIP

Exercise #2:

- ✂ Present *Handout 24: Profile of a Physically Abused Adult* (adapted from 1997-Chicagoland Area Sexual Abuse Resource Guide). Read the handout aloud. Ask the women to brainstorm ideas on what the physically abused person can do to change these traits into more positive ones, and to write their ideas down in the spaces provided after each. You should simultaneously write their ideas on the chart or board. Allow approximately 20-30 minutes for this exercise.

HINT

These can be very strong, empowering statements that reflect meaningful changes in the way women think about themselves (or those who have been physically abused). Encourage this transformation of thought -- or help them to make it, if they do not seem to be doing so on their own. The women also should be praised for their efforts in this difficult exercise. Ask them to take a deep, cleansing breath.

Exercise #3:

- ✂ Pass out pieces of drawing or construction paper and markers. Ask the women to draw a picture of the effects that adult or child physical abuse has had on their lives. Remind them that the quality of the artwork is not important -- they can even draw stick figures or abstract forms. If they have not been physically abused, ask them to draw a picture of the effect it has had on someone they know or the effect they think it might have on someone, especially a child.
- ✂ When the women are done with their drawings, ask them to share their pictures with the group (if they are comfortable doing so), and to give a short explanation of their work.

TIP

Remember that some of the women currently may be in abusive relationships. Without identifying them, tell the group that you are willing to meet after group with anyone being abused who would like to review personal escape plans. Recall that you should avoid appearing judgmental, rather helping them to see that there are options when they are ready to escape. Help them to remember that they are not to blame and do not need to feel ashamed for what is happening or for needing help. Deal with them in a factual, straightforward way, to convey that shame is not necessary. If they refuse to leave their abuser right now, let them know that you are available to help if they change their minds.

TIP

- ✓ End by passing out a card with hotlines, resources, and referrals (similar to the one you prepared for Session 3). Because many women live transitory lives, have things stolen from them, or lose track of paperwork given to

them, it is a good idea to offer them another card with the resources listed. If they have not lost theirs, then encourage them to share it with someone else who may need it. Explain that they are to use these numbers if they are feeling upset or overwhelmed after group. Remind them that they also should talk to their therapists/counselors or trusted peers/family, if they are feeling upset because of the information from group. Tell the women that you will be around afterwards to help them access resources, if necessary.

Wrapping Up:

- ➡ Thank the women for their work on this session. Ask the women to bring their Strengths and Achievements Skills Cards to the next session (or you bring them, if you're holding on to these for the women). Also ask them to be sure to bring their safety bags as well.

- ➡ Let them know that the next session will address understanding emotional abuse.

SELF-CARE TIP: Congratulations! You completed the first session that deals directly with abuse histories.

It is important for you to develop a few easy methods for letting go of the pain and anger that are revealed during group. Try the following. As you leave the group (or for the work day, if you're employed at an agency), imagine all the problems, people, and pain from the group streaming out behind you, blowing into the wind. This visualization should work whether you are walking, biking, or driving. If you feel particularly stressed out or upset, try taking a long walk, bike ride, or drive to really let go of these feelings through visualization. Imagine dark clouds of pain streaming out of you and into the clouds. Also imagine sunshine and lightness flowing back into you. Repeat an affirmation that works for you, such as "I am letting go of pain and anger. I have the right for personal time and space."

HANDOUT 23: *PROFILE OF A PHYSICAL ABUSER*

(Adapted from 1997-Chicagoland Area Sexual Abuse Resource Guide)

1. Has a "Jekyll and Hyde" personality (alternating quickly between being sweet or charming and cruel or critical)
2. Has an explosive temper, becoming very angry at small things
3. Expects too much of children (or other adults), becoming very angry and abusive when they are not perfect
4. Often uses verbal abuse along with physical abuse, including name calling, insults, degrading comments, etc.
5. Tends to deny, minimize, or forget the abuse
6. Blames his/her victim for the abuse (e.g., saying things like, "If you weren't so bad, I wouldn't have to do this" or "You asked for it, you made me so mad")
7. After an attack, often cries and apologizes, promising or giving gifts, only to attack again
8. Is jealous, imagining bad things about his/her victim
9. Tries to isolate or keep victim away from others
10. Tries to control victim
11. Tends to be more abusive when drinking or drugging
12. May have problems with the law
13. May be more violent when victim is pregnant
14. Often comes from an abusive family him/herself

HANDOUT 24: *PROFILE OF A PHYSICALLY ABUSED ADULT*

(Adapted from 1997- Chicagoland Area Sexual Abuse Resource Guide)

1. Passive and easily dominated; accepts the myth that dominance is the same thing as superiority
2. Is often intimidated by aggressive people
3. Feels that she has no basic human rights, including the right not to be hit
4. Accepts guilt even when she hasn't done anything wrong
5. Has low self-esteem; feels the need to apologize for herself; is easily deflated
6. Is easily convinced that she is worthless or incapable of achieving life goals
7. Often doubts her own sanity

8. Feels strongly that her worth is determined by being "perfect" and needed by men, even the "wrong" man

9. Feels sorry for the abuser, thinking she must help him; accepts the abuser's reality rather than her own

10. May equate dominance with masculinity and/or love (i.e., thinks that men abuse to prove that they are "men" and to demonstrate their love)

11. May act as a buffer between the abuser and the world (i.e., excusing his behavior to others)

12. Downplays dangerousness of the abusive situation (i.e., telling people that it really isn't so bad, he just hits her sometimes when he's really angry)

13. Even when being abused, truly believes that the abuser won't do it again and will "get better"

14. Believes that there is nothing she can do about the situation

SESSION 20: UNDERSTANDING EMOTIONAL ABUSE

"Threats from the past are still present (in our hearts and minds)." -In Their Own Words

- Purposes/goals of session:**
1. Answer questions and address comments from the previous session;
 2. Understand what constitutes emotional abuse;
 3. Begin to understand the impact that emotional abuse often has on life and relationships.

Materials needed:

- ✎ Flip chart or chalkboard, markers or chalk;
- ✎ Construction or drawing paper; colored markers, crayons, or paint;
- ✎ A helium balloon for each woman and several permanent markers.

Getting Started:

- ① Welcome the women back, and ask them if they have questions, comments, or reflections about the last session. Also, ask them which of the skills from their Cards they have found most useful during the past week, and why.
- ② Tell the women that this session will focus specifically on ***emotional*** abuse. Even though it can occur along with other types of abuse, such as sexual

or physical, this session will focus directly on emotional abuse to help them completely understand what it entails.

It's a fact!

The concept of emotional abuse can be very difficult for some women, especially if verbal/emotional abuse has been (or is) a part of everyday life. For women who were raised in conditions of emotional abuse or currently live in them, they may not see what was done (or is done) to them as a form of abuse, but rather, "what women can expect out of life" or their "cross to bear." In this session, you will begin to challenge these deeply held notions.

Group information and activities:

Exercise #1:

- ✓ Ask the women to define and give examples of emotional abuse, and write their answers on the chart or board. Again, this discussion may prompt the women to share their own stories of childhood or adult emotional abuse, which must be handled with care. Refer to the previous session on physical abuse for advice about how to discourage the sharing of too many details.

If necessary, give the following examples of emotional abuse (Harris et al., 1998):

- being neglected (i.e., not fed, not nurtured, left alone too long, etc.)

- being abandoned
- being deprived of attention and love
- being frequently isolated from other kids, people, or the family
- experiencing ongoing role-reversal (in which the child is expected to function as a parent or an adult),
- being regularly and severely criticized for appearance, feelings, behaviors, school work, etc.
- being regularly shamed about appearance, feelings, behaviors, school work
- being frequently manipulated into doing/saying things against one's will
- being controlled in all that one does, says, or wants
- witnessing the abuse of others

✓ Tell the women that there are several conditions necessary for emotional abuse to occur. These are (Harris et al., 1998):

- dependence upon the abuser for nurturing, affection, and basic life necessities (money, food, clothing, shelter)
- feeling trapped in the relationship (due to fear or helplessness), and
- experiencing the abuser as wielding power, authority, and control.

✓ Ask the women to identify in what kind of relationships these power and abusive dynamics may occur, and list their answers on the chart or board.

Be sure that they note that parents, adult children, spouses/lovers, and bosses can all fit into these categories.

TRY THIS

Ask the women to take out one of their favorite objects from their Safety Bags. Request that they hold the object, close their eyes (if comfortable), and remember why it is that they love the object and take comfort from it. Run through several deep breathing exercises, repeating that they are safe right now and are strong enough to face life's pain and difficulties.

Exercise #2:

- ✂ Ask the women to call out the effects that emotional abuse as children or adults may have on a person's life. If they need help, point out such things as helplessness, depression, low self-esteem, self-hatred, oversensitivity to criticism, outbursts of anger, fear, lack of motivation, and difficulty trusting self or others.

- ✂ Pass out pieces of drawing or construction paper and colored markers. Ask the women to draw a picture of how they think being emotionally abused as a child could affect a person's adulthood. Again, remind them that the quality of the artwork is not important, but rather, the feelings they are trying to express. When the women have finished, ask them to share

their drawings with the group, and briefly explain the meaning of their drawings.

Exercise #3:

- ✂ Ask the women to think about two or three hurtful, abusive comments that someone in their lives directed towards them that made them feel horrible. This could be something that was said when they were children, teens, or adults. Pass out the helium balloons and permanent markers, and tell the women to write these abusive comments on their balloons (adapted from Davis, 1990). You make one, too!

TRY THIS

Make sure you point out the irrationality and sheer meanness of these comments. This is also a good time to reinforce that there isn't anything anyone can do to deserve being emotionally abused. The abuser may try to blame his or her target, but the fact is that it is not the target's fault.

- ✂ Take the women outside and ask them to let go of their balloons to symbolically let go of the pain associated with the emotional abuse. As the women watch the balloons float away, ask them to give themselves a hand! When back inside the group room, ask the women to talk about the meaning that this exercise had for each of them individually.

Wrapping Up:

- ➡ Thank the women for yet another step forward in their journey of recovery.
- ➡ Let them know that the next session will review personal power and self-esteem, to offer them encouragement and hope. Ask them to bring their Strengths Cards with them to the next session.

Optional exercises:

Ask the women to discuss how current responses to criticism may be a response to previous emotional abuse (if the women have never been emotionally abused, ask them to think about how they think that someone who has been emotionally abused would respond to current criticism).

SELF-CARE TIP: Work with survivors of abuse, by its very nature, focuses on aspects of humanity that are sad, ugly, and hateful. In order to counteract the effects of these feelings, try to pursue some specific activities that deal directly with people or experiences that reflect joy, goodness, love, and beauty. Some examples include visiting an art museum, going to a place of worship, gardening, playing with a child or pet (or someone else's), visiting supportive friends, singing along to your favorite music, and reading inspiring poetry (adapted from Chew, 1998). Make a list of the five most beautiful things in your daily life, and draw or paint a picture of your favorite one.

SESSION 21: REVIEWING PERSONAL STRENGTH AND SELF-ESTEEM

"I've learned how to stand up for myself and get the kind of care I need. You need to be adamant and learn how to present yourself." -- Having Our Say

- Purposes/goals of session:**
1. Answer questions and address comments from the previous session;
 2. Continue to focus on nurturing a positive sense of self and personal strength;
 3. Review the power of positive affirmations in improving self-esteem.

- Materials needed:**
- ✎ Flip chart or chalkboard, markers or chalk;
 - ✎ Small tape recorders and tapes for women who cannot write well or wish to speak rather than write;
 - ✎ Handouts 25, 26.

Getting Started:

- ① Welcome the women back, and ask them if they have questions, comments, or reflections about the last session. Also ask the women if they have been practicing and using any of their new skills from their Skills Cards.

✂ Encourage them to practice at least one of the skills they have listed on a regular basis. Remind them that the best way to change their lives is to try to take these small steps forward.

- ② Let the women know that this session will review self-esteem and personal strength, as these are two critically important parts of recovery and healing.

TIP

Remind the women that recovery and healing are not just about stress and pain, even though it sometimes may feel that way. Healing from trauma also involves learning to love and respect themselves, while moving from feeling low to feeling strong. Recovery and healing also can be about hope, pride, and gaining the strength to move forward.

TIP

Group information and activities:

Exercise #1:

- ✂ Present *Handout 25: How I Can Create a Positive Sense of Self* (adapted from Bass & Davis, 1988). Explain that each of the five headings are things they can do to increase their self-image. Ask them to take 15 minutes to write out examples they can think of under each heading. Distribute the small tape recorders to women who do not wish to write and/or help those who have trouble to write down their answers. While the women are working, write each of the headings on the chart or board (or do

so prior to session if you know that some women will need help during this exercise).

- ✂ When they are finished, ask the women to share 1 or 2 of their answers under each heading, which you should write on the chart or board. Tell the women to write on their handouts anything that is shared which they didn't think of (or to tape record them, in a non-distracting manner if possible).

Exercise #2:

- ✂ Present *Handout 26: Things I am Willing to do to Raise My Self-Esteem*. Ask the women to think about the ideas that were just discussed regarding their self-esteem. Ask them to choose one or two new things that they would be willing to try prior to the next session, and to write these on the *Handout* (or tape record them, if necessary). Then, ask them to share their ideas with the group.

☞ Be encouraging! Remind the women that no step is too small, and change is defined differently by every individual. Help them to remember that willingness and belief in themselves are the first steps towards starting or resuming anything in their lives. Willingness is a step-by-step, moment-to-moment commitment to action, which is an essential concept in recovery and healing.

Exercise #3:

✂ Ask the women to take out their Strengths Cards. Request that each woman state aloud one personal strength that she doesn't often acknowledge in herself. If the women have forgotten their Cards, or if they do not know how to respond, give them some ideas of what they could say, such as "I'm pretty clever or smart sometimes," "I have a good head for figures and numbers," "I am handy around the house," "I am a leader in most groups," "I am good at solving problems," or "I stay calm and clear-headed in a crisis." Allow a woman to pass if she needs time to think, but be sure to come back to her at some point. You share one of these strengths as well!

☞ Remind them that women often don't acknowledge these types of self-strengths because they find it hard to compliment themselves or to admit to having strengths that others, particularly those in positions of authority, may find threatening.

TIP

If someone cannot come up with a strength like this, help out by telling her something that you have observed about her (especially something that may not be obvious) or ask the group to do so. Avoid putting her in a situation, however, in which nobody is able to come up with something positive to say. Prior to this session, review the list you made of positive characteristics of the women, just in case you need to come up with something quickly (see the self-care tip from Session 14).

TIP

- ✂ After each woman speaks, have the rest of the group validate her strength by repeating it as a “You...” statement, such as “You have a good head for figures.”

Wrapping Up:

- ➡ Ask the women to try using the approach they identified to improving their self-esteem prior to the next session, and to note what happens.
- ➡ Let them know that the next session will focus on understanding institutional abuse or mistreatment at the hands of service providers.

Optional exercise:

Ask the women to draw a picture of how they think it feels to have positive self-esteem and to feel good about oneself.

SELF-CARE TIP: Remember the strategy of taking a walk outside and gently releasing each woman from your mind.

Be sure to tell a close friend, a colleague, or your supervisor that you are trying to do positive things each week to counteract some of the negativity that comes up in group. Ask this person if she/he would be willing to regularly check in with you to ensure that you are doing things to take care of yourself. In the hectic pace of the daily world, you may need some encouragement of your own to use positive coping techniques and to take care of yourself via fun and inspiring activities!

HANDOUT 25: *HOW I CAN CREATE A POSITIVE SENSE OF SELF*

(Adapted from Bass & Davis, 1988)

1. DO THINGS I'M PROUD OF...

Example: Help out someone who is having a hard time.

2. VISUALIZE HOW I WANT TO BE...

Example: Free from fears and anger.

3. ACCENTUATE THE POSITIVE...

Example: Even though recovery is hard work, I know it will help me feel better.

4. FIND A TASK/ACTIVITY I LIKE DOING...

Example: Paint or draw something once a week.

5. TAKE BREAKS FROM WORK, PARENTING, OR THE DAILY WORLD...

Example: Take a long walk alone after dinner.

HANDOUT 26: *THINGS I AM WILLING TO DO TO RAISE MY SELF-ESTEEM*

To help me feel better about myself, I am willing to try the following things:

1.

2.

SESSION 22: UNDERSTANDING INSTITUTIONAL ABUSE

"I cannot be restrained in the hospital. My father used to tie me up and leave me alone for hours, so restraint makes me feel very unsafe." – Having Our Say

- Purposes/goals of session:**
1. Answer questions and address comments from the previous session;
 2. Identify the types of abuse or harassment that may occur in hospitals, outpatient programs, or other mental health settings;
 3. Discuss what to do if this type of abuse or harassment occurs.

- Materials needed:**
- ✎ Flip chart or chalkboard, markers or chalk;
 - ✎ Blank 3X5" cards for each woman and pens.

Getting Started:

- ① Welcome the women back and ask them if they have questions, comments, or reflections about the previous session. Ask them to share brief stories about what happened when they tried something from their lists to improve their self-esteem. If none of them tried a strategy, try to find out why not. Sometimes, we can learn about how to improve a strategy by exploring exactly why we didn't feel comfortable or interested in using it. Be encouraging and remind them that practice makes perfect.

- ② Tell the women that this session will be about institutional abuse. Explain that “institutional abuse” refers to being harassed or hurt by therapists, doctors, case managers, and other service providers. Of course, this topic can invoke a wide range of angry and painful emotions, since these are the very people who are supposed to help us, not hurt us.

TRY THIS

It is important to acknowledge that this session may be painful because it deals with times when helpers are actually hurtful. However, it is important for the women to talk about this issue with their peers in order to acknowledge that this kind of abuse does sometimes occur, that it is always wrong, and that they have rights when it happens.

If necessary, remember to run through deep breathing exercises during this session, or to try other tips from the Handout regarding Feeling Better in Group, found in Session 3.

Group information and activities:

Exercise #1:

- ✓ Start by reminding the women that, during this group, you will not be sharing personal stories about abuse or harassment at the hands of providers. Rather, you want to help the group understand what this type of abuse is, what forms it may take, and what they should do if it ever

happens to them. Let them know that you will have to re-direct them if they start to share too many personal details, in order to maintain group safety and comfort levels.

- ✓ Also let the women know that direct abuse and harassment at the hands of treatment professionals are pretty rare. Most professions and organizations have Codes of Ethics which outline strict consequences for any type of abusive, harassing, or sexual relationships between providers and clients. Therefore, as discussed in the session on trust (Session 18), the women needn't be fearful of trusting providers as a result of this discussion because the vast majority of professionals will not be directly abusive or otherwise improper. Most are quite dedicated and are aware of the types of abuses that women and men clients often have faced in their lives. However, in those instances in which abuse or maltreatment at the hands of providers does occur, they do have rights which you will be reminding them of today.

- ✂ Tell the women that you'd like to start the discussion with a focus on **direct** abuse at the hands of providers. Ask the women to call out examples of this type of abuse or mistreatment, and write these on the chart or board, under the heading of *Directly Abusive Behaviors*. If they have trouble coming up with ideas, start the list with the following examples, "Being shoved by a case worker," "Being hit by a provider," "Being sexually touched by a hospital technician."

✎ If they come up with ideas which actually represent harassment, write these on a separate sheet (or section of the board) under the heading, *Harassment or Indirectly Abusive Behaviors*.

Exercise #2:

✂ Now ask the women to complete the list which you have started of ***harassing or indirectly abusive*** behaviors that may occur at the hands of providers. This list might contain examples such as, "Use of sexist language," "Sexual jokes made by staff," or "Limiting my opportunities because I'm a woman," or "Being laughed at or ridiculed because I'm female."

✎ Note that women may experience other sorts of harassment or gender-based discomfort in rehabilitation or community-based mental health programs, such as being romantically pursued by male clients even when they say they aren't interested, feeling outnumbered or overshadowed by male clients in a program, or feeling that staff are not interested in their unique treatment needs as women.

✎ Point out that it may be hard for some women, especially those who do not have a lot of experience with men, to interpret the difference between an appropriately friendly comment or touch and

an inappropriately sexual comment or touch (Jonikas & Cook, 1993). For example, it is perfectly reasonable for a male provider to remark that he likes a woman's new outfit or hairstyle. However, this same remark may be construed as sexual harassment if the male uses certain voice tones and body language. If this man casually compliments her dress as they pass each other in the hall, she probably can assume it was a friendly remark. If he says it while staring at her body in a seductive fashion, or while trying to rub her back and whisper in her ear, then she probably can construe this as a sexual advance.

Exercise #3:

✂ Now ask the women what they think a person should do if any of these things were to happen to her. Write their responses on the chart or board, making a separate column for their correct or most appropriate answers. Although you obviously don't want to label this column as such, you do want to make a separate "short-list" of their rights as clients/patients for them to copy (eventually) onto a 3X5" card.

☞ If they have trouble coming up with ideas, be sure to highlight the following:

- Start by talking to a trusted family member, peer, or case worker about what happened as soon as possible;

- With the trusted person's help, document exactly what happened (include dates, times, all people involved, witnesses, events that led up to the incident, etc.);
- If in the hospital, contact the Patient Advocate as soon as possible (ask your trusted person to help you with this, if necessary); If in an outpatient program, contact the Clinical or Program Director (with the help of the trusted person, if needed);
- Request a meeting to discuss the incident;
- Request an investigation (including legal personnel, if necessary); If appropriate, the staff person or client under investigation should be suspended pending the findings;
- If unsatisfied with the response, again discuss the situation with a trusted person; Contact the local Protection & Advocacy Office, a lawyer, and other relevant representatives.

TIP

Some of the women may point out times when, even though they knew their rights, they were not respected. Acknowledge this and point it out as abusive in and of itself. Discuss what else they could have tried in those situations, including asking their case workers or therapists to advocate for them (assuming they weren't the ones violating the women's rights), or calling the local Protection & Advocacy Office for advice.

TIP

- ✂ Pass out the 3X5" cards and pens. After you've had sufficient conversation regarding their rights as clients and patients, ask them to write the short-list on their cards. Help those who have trouble writing to complete this task.

Ask the women to keep these cards some place easily accessible (e.g., wallets or purses), in case they ever find themselves in need of a reminder of their rights.

- ✓ Be sure to point out that accusing a provider -- or anyone -- of abusive or harassing treatment is a very serious matter, not to be taken lightly. Such accusations only should be made when the women have evidence to support their claims. Using threats of abuse or harassment to scare or "get back at" providers or other clients is unethical and wrong.

☞ Because it can sometimes be difficult to sort out harassment from appropriately friendly behaviors, women should discuss these sorts of issues fully with a trusted peer, colleague, therapist, or family member before taking any action. Pursuing claims of abuse at the hands of providers (or anyone else) can be very painful for the women involved. Depending upon how far the accusations go, she may find that the details of her past sexual experiences, her current behaviors, and her emotional state or psychiatric history will be used against her, even in court. This doesn't mean that she shouldn't take action if her rights are violated, but that she should be made aware of how difficult the process may be. This is yet another reason why having supportive advocates involved can be so important.

☞ If a woman intends to take official or legal action, then she also will need to fully document what has happened to her -- be it direct

abuse or harassment. Here, too, trusted case workers, peers, or advocates can guide the women in how to define and document such incidents, and how to guarantee their rights.

Wrapping up:

- ➡ Ask the women to take a series of deep, cleansing breaths. Ask them to repeat the following statement, "We have the right to ethical, non-abusive treatment."
- ➡ Let them know that the next session will focus on understanding sexual abuse. Ask them to bring in a comfort object for self-soothing during this session, such as a teddy bear, items from their Safety Bags, a special pillow or blanket, or a religious object. The day before the next session, make a point to check in with each woman to remind her to bring this object to the group. If a woman has a history of forgetting to bring things to your sessions, you also may want to ask another group member or her therapist/case worker to help her remember to do this.

SELF-CARE TIP: Sometimes the stories we hear from survivors bring up so much anger and rage within ourselves that we cannot let go of these feelings after a session. A good way to release some of this outrage is to acknowledge what is happening. This can be hard for some women to do, since we often are socialized not to express deep anger or rage. Thus, it can be helpful to discuss your rage with someone you trust and to allow yourself to truly vent. You also might try punching pillows, screaming, jumping up and down until you're out of breath, or doing any other form of hard physical activity that allows you to expend that negative energy. Even though it may make you feel uncomfortable or slightly scared to rage in this way, it is very important for you to make room for it right now: holding intense anger inside may lead to inappropriate displays of rage towards others/self or to physical illness. If you cannot shake the feelings of rage, it may be time to talk with a counselor yourself.

SESSION 23: UNDERSTANDING SEXUAL ABUSE

"After I was raped at 5 years old, I wasn't the same anymore. When you are raped, you never forget about it." -- Having Our Say

- Purposes/goals of session:**
1. Answer questions and address comments from the previous session;
 2. Define sexual abuse and coercive actions that often accompany it;
 3. Allow their voices to be heard through The Banner Project in Wisconsin.

Materials needed:

✍ Flip chart or chalkboard, markers or chalk;

✂ Pieces of cotton cloth 8.5" X 11" in size; arts and crafts supplies to design banner panels, such as paint, markers, glue, and scissors for **fabrics**; thread; yarn; needles; sequins; fancy piping or borders; lace; felt; and other scraps of material.

TIP

If you have relatives or friends who sew, ask them for any extra scraps of material or supplies that they would be willing to donate for this group project. Fabric stores often sell the ends of bolts at reduced prices (try to get cotton or cotton/poly mixes, as they are best for quilts), as well as thread, piping, and other materials that haven't been best-sellers. They also should be consulted for the best types of paint, markers, glue, or other craft supplies to decorate fabric.

TIP

Getting Started:

- ① Welcome the women back, and ask if they have questions, comments, or reflections about the previous session. Ask if anyone has used a skill from her Skills Card to deal with a current stressor or crisis. Ask her if using the skill worked, and why or why not.
- ② Tell the women that this session will be about understanding sexual abuse. Let them know that you want to discuss this because many women aren't entirely sure of what sexual abuse means, due to the incorrect or incomplete information they receive from friends, family, popular books/novels, television, newspapers, and radio.

☞ Inform the group that one of the first steps in recovery from sexual abuse is the ability to correctly identify and label their experiences, so that they can understand them in a broader social context.

It's a fact!

Recent studies have shown that between 36-85% of women who use public mental health services have a history of sexual abuse (Read & Fraser, 1998). Among women with psychiatric disability who are homeless, self-reported rates are even higher with one study documenting that 97% of the sample had been abused in childhood (Goodman et al., 1995).

NOTE: Remember to use the boundary visualization exercise, described in the self-care tip of *Session 13*, to keep yourself focused and energized during this session.

Group information and activities:

Exercise #1:

- ✂ Ask the women to call out any acts which are considered to be sexual abuse, and write their answers on the chart or board. Remember to gently re-direct personal stories.
- ✂ Ask the women to take out their comfort objects and to hold them for the next two exercises, just in case they need to self-soothe. Look for overwhelmed faces or pending crises, and rely on tips for Feeling Better in Group from the Handout in Session 3.
- ✓ If the women name other forms of abuse that were discussed in previous sessions (i.e., physical or emotional abuse) or that actually constitute harassment or discrimination, acknowledge them as the form of abuse they are, but don't write them on this new list (Harris et al., 1998).

Exercise #2:

- ✂ Now, ask the women to look over this list and to name ways that

perpetrators coerce or intimidate adult women so that they can abuse them sexually, and write their answers on the chart or board. If they are unsure, give some examples such as partners: withholding psychiatric medications unless they are given sex; giving women "the silent treatment" if they won't have sex with them; telling women they are "frigid" or "not real women" when they don't want to have sex; threatening to have women's children removed from the home as a way to get sex; hurting pets or children as a way to get sex from the women; and threatening to kill the women unless they give into sex.

Tell the group that you are identifying these forms of coercion and intimidation because sometimes women don't realize that giving into sex under these conditions is sexual victimization. If we live with something long enough -- even if it's very painful -- we may forget that it actually is abusive. Discussing these forms of coercion, even with women whose sexual abuse was well in the past, also helps survivors to see that they are/were not responsible for "giving in" to sex under these conditions. This is/was the safest thing to do to preserve their own lives or the lives of others around them.

☞ Lead the women through a series of deep, cleansing breaths (at least three). Remind them that they are safe right now.

✂ Ask each woman to name aloud to the group one positive coping strategy she has developed to overcome her pain associated with past or ongoing sexual abuse. Give an example, if necessary. Without naming them,

remind women who currently are being sexually abused that help is available when they are ready to leave the situation, and to see you any time for resources and advocates.

Exercise #3:

✂ Tell the women that survivors of sexual abuse often feel invisible and their voices unheard. Because what has happened to them is so painful and upsetting for most people to hear or acknowledge, survivors may have found that their experiences have gone unrecognized. It is for this reason that the Incest Survivors Anonymous support group in Madison, Wisconsin decided to start *The Banner Project* in 1989. The Banner is a collection of cloth panels made by survivors of sexual abuse which is displayed at rallies, public programs, and survivors' gatherings. Each panel is an individual handprint of a sexual abuse survivor. The handprint is a symbol of the strength and courage found in each survivor. All panels are sewn together to represent that survivors are united and not alone. The Banner also calls attention to the enormous number of survivors in the U.S. and the need to develop more services for them.

✂ Lay out all of the materials for making banner panels. Tell the women that you would like each of them to make a panel representing her own personal strength and courage via her handprint. Although not all of them are sexual abuse survivors, the act of making a panel is still a way to

express their feelings about being abused in some way and to show their unity with other survivors (Davis, 1990).

Instruct each woman to make a representation of her handprint. She can make it out of cloth, trace it with markers, or stamp it on the panel with fabric paint (dipping her whole palm in paint and pressing it on the cloth). She should add anything else she would like to personalize her panel, leaving a half-inch margin around the entire outside for sewing it to other panels. If you are an abuse survivor, you should make a panel as well. When the women are done, arrange the panels on the table to look like a quilt or banner.

- ✓ Ask the women if they would like you to sew the panels together to make your own banner (remember the relative or friend mentioned earlier, if you are not an expert at sewing!) to display during the rest of your group sessions. For women who actually are sexual abuse survivors, they may wish to send their panels (or to make another one) to *The Banner Project* to become part of the national banner. Of course, they may send their panels anonymously, if they wish. If any sexual abuse survivor wants to do this, the address of The Banner Project is P.O. Box 989, Madison, WI, 53701-0989. (The Project appreciates donations, if possible). Please try to ensure that women who are not sexual abuse survivors do not send their panels to this Project, out of respect for its mission.

Wrapping Up:

- ➡ Congratulate the women for making it through another tough session. Praise the beauty and symbolism of the panels you made together.
- ➡ Let them know that the next session will focus on helping them to remember and to accept that the abuse in their lives is/was not their fault. Although some women may have come to accept this, many times on a very deep level, the shame of abuse continues. Thus, it's important in recovery to take time out to remember that they are not at fault, even if their coping mechanisms are not as healthy as they might one day be.
- ➡ If the women agreed, try to sew together your banner prior to the next session.

SELF-CARE TIP: If you are a sexual abuse survivor, you probably found this session to be very difficult. Remember that taking care of your own well-being is as important as that of your group members. Consider requesting a couple of days off from work, if relevant, to give yourself some space and time away from it all.

If possible, take a shower or bath directly after this session (or as soon as you can). Imagine that the water is washing everything away. Briefly picture your own abuse experiences washing free from your body. Then, imagine each woman from group, how you feel about her, what you hope for her, and then, release her to her own life. If there is someone you are having trouble releasing, think about what's holding you and reassure yourself that you are doing all you can to help her. If there is something that you would like to say to her, make note of it (after your shower!) and say it to her at the next session. When you are done, rinse with clean water, dry yourself slowly and soothingly, put on clean clothes, brush your teeth, pamper your skin and/or hair, and allow yourself to go freshly on your way, free from guilt or worry (Bass & Davis, 1988).

SESSION 24: IT'S NOT YOUR FAULT!

*"...To "let go" is not to deny, but to accept...
To "let go" is not to regret the past, but to grow and live for the future.
To "let go" is to fear less, and love more." – Author Unknown*

- Purposes/goals of session:**
1. Answer questions and address comments from the previous session;
 2. Understand that no matter what they did or how they responded as children, abuse was never their fault;
 3. Realize and begin to let go of the shame attached to the abuse.

Materials needed:

- ✎ Flip chart or chalkboard, markers or chalk;
- ✎ Pictures from magazines of female children at different ages (i.e., 1, 3, 5, 7, 9, 11, 13, 15, 17); remember to gather pictures of children and teens from a variety of ethnic and racial backgrounds;
- ✎ The women's Skills Cards.

Getting Started:

- ① Welcome the women back, and ask them if they have questions, comments, or reflections about the previous session. Encourage them to continue practicing the skills from their Skills Cards. Remind them that if

they need extra support, feel hopeless, or are overwhelmed to speak to a counselor, therapist, or other qualified person as soon as possible.

- ② Tell the women that this session is to emphasize that the abuse was not their fault. In spite of all the work you've been doing together and they've done in individual counseling, many survivors continue to believe deep down inside that they are somehow at fault for what happened or is happening to them. This feeling of being somehow at fault or the cause of what happened can leave them feeling worthless and easily shattered in adulthood.

HINT

While this may seem obvious, or the woman may say they know it, most survivors of abuse continue to struggle with deep shame that they somehow caused the abuse. Many wonder if only something had been different about them whether that would've stopped the abuse. There are many reasons for this such as the abuser telling them that it was their fault, the women (then children) never saying "no" to the abuser, or the natural physical responses their bodies had to certain stimulations.

Exercise #1:

- ✓ Tell the women that a large part of recovery is to let go of deep shame or guilt, as well as the **self-stigma** that they may be harboring. Explain that

self-stigma means that they think less of themselves as human beings -- often without even realizing it -- because they were abused or because of their psychiatric symptoms or both. Often, people who are labeled as "mentally ill" or as having "emotional problems" come to believe that there is something deeply and fundamentally wrong with them, which hinders their ability to have hope and to recover.

☞ Remind them that many people struggle with shame and self-stigma, and that they are not alone.

✂ Ask the women to name reasons why abuse survivors, especially those with a label of mental illness, come to believe that they are at fault for what has happened to them. Write their answers in column form on the left-side of the chart or board.

This can be a very sensitive, difficult question for the women to answer, and they may not be able to do so immediately. Allow them time to think about it, and be open and accepting of their answers. If they need some help, give examples such as the abuser told her it was her fault, certain family members wouldn't see what was happening, certain treatment providers dismiss her stories as delusional, and the media erroneously portray people with mental illness as damaged and violent.

✂ Now ask the women to call out reasons why abuse and the accompanying psychiatric and emotional symptoms are **not** the fault of survivors. Write these rebuttals in column form on the right-side of the chart or board,

alongside the first answers. If they need help, remind them that children are not responsible for the behaviors of adults, that forcing sex on or beating children is never acceptable no matter what the child has done, that they were lied to when they were told it is their fault, and that the symptoms and problems they now have often are natural reactions to painful and terrible events.

- ✂ After this discussion, lead the group through a series of deep, cleansing breaths.

Exercise #2:

- ✂ Let the women know that, while they may believe they should've done something to prevent the abuse when they were children or teens, they may not realize how vulnerable children really are, and therefore, how little children realistically can do to protect themselves. Make the point that the same often is true of adult women (who are vulnerable to the violence of their perpetrators), particularly those with mental illnesses, so that women who currently are in abusive situations will not feel left out or further blamed.
- ✂ Ask the women to think about how old they were when their abuse began/happened. Then, one at a time, hold up each picture of the children, starting with the youngest age and working your way up, and ask for each one:

1. How mature do you think this child is?
2. How easily would he/she be manipulated?
3. How much does she count on adults to take care of her and tell her how to behave?
4. Does this child want sex with adults?
5. What would you tell this child if she were being abused? (adapted from Davis, 1990)



Be sure to make the point that children and teens -- even if they look mature physically -- are typically unsure of themselves, immature, easily manipulated, overly trusting, and vulnerable. They do not have the life experience or strength at such young ages to protect themselves from powerful adults or to know what to do to put an end to the painful, abusive behaviors. At the same time, children are resilient, they do survive, and they learn to be strong because of the things that happen to them. Similarly, adult women who are being abused often do not have the resources or are too afraid for their lives (or those of their children) to make the break from their abusers. These women, too, are resilient, they survive, and they learn to be strong no matter what. Whether children or adults, survivors are never to blame for being abused. ***Abuse is always the fault of the perpetrator.***

Exercise #3:



Let the women know that you are going to do an exercise that requires

them to break into pairs. Ask them to pair up with someone with whom they are particularly comfortable. If you have an uneven number in your group, pair up with somebody yourself. If you usually sit around a table either ask them to move away from it or move the table to the side of the room.

- ✂ Tell the women to remain standing and to join hands, if they are comfortable touching. Then, ask one of the women to start by looking her partner straight in the eyes and stating, "It is not your fault." They should repeat this strongly and clearly about ten to twelve times. They should keep on repeating it, even if the other woman says she knows it, seems a bit uncomfortable, or starts to cry. The message must be conveyed, and it helps to have it conveyed by someone who's been there. Ask them to switch and repeat the exercise.
- ✂ Let the women know that they can hug one another if they want and it feels safe. Then, ask them to return to their seats and to take several deep, cleansing breaths.

Wrapping Up:

- ➡ Request that the women to make the affirmation, "The abuse was not my fault," together as a group for as many times as they would like, until they feel finished. Then, ask them to make the affirmation, "We will recover our lives," until they feel finished.

- ➡ Tell the women to add, "The abuse was not my fault" and "I will recover my life," to their Skills Cards. Congratulate them on another step towards healing and recovery.
- ➡ Let the group know that during the next session you will share spiritual or inspirational poems and stories. Ask them to bring such a story or poem to the group next time. Remind the women that we all don't share the same beliefs, so their sensitivity in choosing stories or poems that are more universal (i.e., focusing on God versus Jesus) would be appreciated. Also suggest that people can bring in stories or poems about nature or about inspirational figures, just in case someone in group is atheist or agnostic.

Optional exercise:

Ask the women to free write for 15 minutes on what they would tell a child who is being abused about why she is not to blame for her abuse.

SELF-CARE TIP: Take about 15 minutes tonight and re-read the Introduction to this curriculum, especially the section on tips for facilitators. It is good to remind yourself about the value of your own well-being as well as your limitations as group facilitator.

It can be hard sometimes to find a place to escape from pain and suffering. We often are bombarded with stories of human suffering over the radio, on TV, and in newspapers. For the remainder of this group, try to minimize your exposure to these stories in the news. Turn off the radio or TV or put down your newspaper to tend to yourself. Engage in an enjoyable or healthy activity instead. Of course, you don't want to completely ignore local or world events, but you do want to give yourself space from any more suffering than you already are dealing with in group. The news will be there when your group is done.

SESSION 25: CHECKING IN AND SPIRITUALITY AND INSPIRATION

"We must accept finite disappointment, but never lose infinite hope." -- Martin Luther King, Jr.

- Purposes/goals of session:**
1. Answer questions and address comments from the previous session;
 2. Explore and encourage spirituality or inspirational readings as a contribution to continued growth, healing, and recovery;
 3. Continue to increase their hope in the future, while emphasizing that life can be enjoyable.

Materials needed:

- ✍ A simple, healthy, affordable meal (consider a pot of spaghetti with marinara sauce, a simple spinach salad, and a loaf of bread);
- ✍ Index cards with the recipe for this meal; plates, cups, napkins, forks, etc.;
- ✍ One purple stone (or large bead or marble) for each woman; A collection of spiritual or inspirational poems and stories;
- ✍ *Optional:* tablecloth, decorative napkins, flowers, inspirational music, etc.

Pre-session:

Prior to the session, prepare and lay out the food, as in the previous check-in sessions. If the women agreed, hang the banner you made for everyone to admire. You can purchase purple stones, large beads, or marbles relatively cheaply at "new age" book stores, craft or bead stores, or larger drugstores.

Getting Started:

- ① Welcome each woman back and thank the group for its dedication and hard work so far.
- ② Tell the women that the reason for this session is three-fold. First, it is to remind them that recovery and healing do not always involve structured activities and can be enjoyable. Second, you want to reward them for all of the hard work that they have done so far, as well as to give them a break. Finally, you wish to demonstrate how important healthy eating and moderation are in their lives, and how these can make them feel better about themselves in the long-run.
- ③ Tell the women that, before you eat, you want to spend some time discussing spiritual or inspirational feelings, and how these can enhance recovery and healing.

Group information and activities:

Exercise #1:

- ✓ Ask the women to brainstorm ideas about what they think the words “spirituality” and “inspirational” mean. Some examples to get them started include serenity, faith, belief in God or a higher power, divinity, peace, joy, compassion, purpose, and wholeness.
- ✓ Ask the women to comment on how they think spirituality or inspiration could contribute to their growth, healing, and recovery. Remind them that everyone’s spiritual journey is different, but all are valid and must be honored, respected, and supported.
- ✂ Now, inquire as to whether anyone would like to read one of their spiritual or inspirational poems or stories to the group. If only a few women (or none) remembered to bring in such poems or stories, then be sure to have a few ready to read yourself (or use the readings at the end of this Session).

Exercise #2:

- ✂ Give each woman a purple stone (or large bead or marble), and explain

that the color purple symbolizes dignity, healing, renewal, and rebirth (adapted from Chew, 1998).

- ✂ While holding their stone, ask the women to think about any aspect of their lives that is/was a negative influence on their spirituality or ability to feel inspired. Ask them to specifically identify in their minds who or what this negative influence is/was, and to let it go or say goodbye to it.
- ✂ Then, while still holding their stones, ask the women to think about who or what they would like to welcome into their lives to encourage spirituality, inspiration, dignity, healing, renewal, and rebirth. Tell them to mentally welcome this new person or force into their lives.

Exercise #3:

- ✓ Invite the women to help themselves to the food, and you do the same. Allow the women to talk about whatever they would like to for the remainder of the session. They can tell jokes, encourage one another, or talk about movies, music, books, or whatever interests them. Try to discourage negative gossiping about other people they may know, as this will create negative energy in group. But, do keep things informal and relaxed, so that you all can enjoy your meal and time together.

Wrapping Up:

- ➡ Let the women know that the purple stones are a gift to them, to help them remember the value of spirituality, inspiration, dignity, healing, renewal, and rebirth.
- ➡ Commend and thank the women for sticking with the group and their personal recovery journeys. Tell them that *they* are inspirational as this is not an easy thing to do.
- ➡ Let them know that the next session will address helping women manage their emotions through understanding their personal triggers.

INSPIRATIONAL/SPIRITUAL POEMS

International Prayers For Peace

from the book *Emissaries of Light*
by James F. Twyman

The Prayer of Saint Frances

Lord, make me an instrument of your peace.
Where is hatred . . . let me sow love
Where there is injury . . . pardon
Where there is doubt . . . faith
Where there is despair . . . hope
Where there is darkness . . . light
Where there is sadness . . . joy
O Divine Master,
grant that I may not so much seek
To be consoled . . . as to console
To be understood . . . as to understand,
To be loved . . . as to love
For it is in giving . . . that we receive,
It is in pardoning, that we are pardoned,
It is in dying . . . that we are born to eternal life.

Christian Prayer for Peace

Blessed are the PEACEMAKERS,
for they shall be known as
the Children of God.
But I say to you that hear, love your enemies,
do good to those who hate you,
bless those who curse you
pray for those who abuse you
To those that strike you on the cheek,
offer the other one also,
and from those who take away your cloak,
do not withhold your coat as well.
Give to everyone who begs from you,
and of those who take away your goods,
do not ask for them again.
And as you wish that others would do to you,
do so to them.

Jewish Prayer for Peace

Come, let us go up to the mountain of
the Lord, that we may walk the
paths of the Most High.

And we shall beat our swords into ploughshares,
and our spears into pruning hooks.
Nation shall not lift up sword against nation-
neither shall they learn war any more.
And none shall be afraid, for the mouth of the
Lord of Hosts has spoken.

Muslim Prayer for Peace

In the name of Allah,
the beneficent, the merciful.
Praise be to the Lord of the
Universe who has created us and
made us into tribes and nations
That we may know each other, not that
we may despise each other.
If the enemy incline towards peace, do
thou also incline towards peace, and
trust God, for the Lord is the one that
heareth and knoweth all things.
And the servants of God,
Most gracious are those who walk on
the Earth in humility, and when we
address them, we say "PEACE."

Sikh Prayer for Peace

God adjudges us according
to our deeds,
not the coat that we wear:
that Truth is above everything,
but higher still is truthful living.
Know that we attaineth God when we loveth,
and only victory
endures in consequences of which no
one is defeated.

Native African Prayer for Peace

Almighty God, the Great
Thumb we cannot evade to
tie any knot;
the Roaring Thunder that splits mighty trees:
the all-seeing Lord up on high who sees
even the footprints of an antelope on
a rock mass here on Earth.
You are the one who does
not hesitate to respond to our call.
You are the cornerstone of peace.

Buddhist Prayer for Peace

May all beings everywhere plagued
with sufferings of body and mind
quickly be freed from their illnesses.
May those frightened cease to be afraid,
and may those bound be free.
May the powerless find power,
and may people think of befriending
one another.
May those who find themselves in trackless,
fearful wilderness---
the children, the aged, the unprotected--
be guarded by beneficial celestials,
and may they swiftly attain Buddhahood.

Hindu Prayer for Peace

Oh God, lead us from the
unreal to the Real.
Oh God, lead us from darkness to light.
Oh God, lead us from death to immortality.
Shanti, Shanti, Shanti unto all.
Oh Lord God almighty, may there be peace in celestial regions.
May there be peace on Earth.
May the waters be appeasing.
May herbs be wholesome, and may trees
plants bring peace to all. May all beneficent
beings bring peace to us.
May thy Vedic Law propagate peace all
through the world.
May all things be a source of peace to us.
And may thy peace itself, bestow peace on all
and may that peace come to me also.

Baha'i Prayer for Peace

Be generous in prosperity,
and thankful in adversity.
Be fair in judgement,
and guarded in thy speech,
Be a lamp unto those who walk
in darkness, and a home
to the stranger.
Be eyes to the blind, and a guiding light
unto the feet of the erring
Be a breath of life to the body of
humankind, a dew to the soil of
the human heart,
and a fruit upon the tree of humility.

Jainist Prayer for Peace

Peace and Universal Love is the essence
of the Gospel preached by all
Enlightened Ones.

The Lord has preached that equanimity
is the Dharma

Forgive do I creatures all,
and let all creatures forgive me.

Unto all have I amity, and unto none enmity.
Know that violence is the root cause of
all miseries in the world.

Violence, in fact, is the knot of bondage.

"Do not injure any living being."

This is the eternal, perennial, and unalterable
way of spiritual life.

A weapon, howsoever powerful it may be,
can always be superseded by a superior one;
but no weapon can, however,
be superior to non-violence and love

Shinto Prayer for Peace

Although the people living
across the ocean
surrounding us, I believe
are all our brothers and sisters,
why are there constant troubles in
this world?

Why do winds and waves rise in the
oceans surrounding us?

I only earnestly wish that the wind will
soon puff away all the clouds which are
hanging over the tops of mountains.

Zoroastrian Prayer for Peace

We pray to God to eradicate all the
misery in the world:

that understanding triumph
over ignorance,

that generosity triumph over indifference,

that trust triumph over contempt, and

that truth triumph over falsehood.

SESSION 26: EMOTIONS MANAGEMENT PART I: DEALING WITH TRIGGERS

*"It is important that provider(s) give as much control as is safe to the client.
Decisions should be made together." -- In Their Own Words*

- Purposes/goals of session:**
1. Answer questions and address comments from the previous session;
 2. Learn about their personal triggers to distress and crises;
 3. Develop tools that outline what triggers distress or crises for them, and how they would like others to respond when they begin to escalate.

- Materials needed:**
- ✎ Flip chart or chalkboard, markers or chalk;
 - ✎ Handout 27, 28.

Getting Started:

- ① Welcome the women back and ask them if they have questions, comments, or reflections about the previous session.
- ② Let the group know that this session will be the first of several focusing on skills they can develop to better manage their emotions and crises. This particular session also will emphasize ways to help inpatient staff and other

providers to de-escalate crises without having to resort to coercive or abusive approaches.

Group information and activities:

Exercise #1:

- ✓ Start by explaining that many humans struggle with handling their most intense or frightening emotions. Many people also have a hard time handling their own crises in effective, safe ways. This type of poor crisis management often occurs because individuals have not identified in advance those things that will **trigger** distress for them and how they would like others to respond when this happens. Thus, one of the best ways that women can deal with their own crises is to learn to identify what “sets them off,” as well as what they and others can do to best respond when this occurs.

- ✓ Explain to the group that a trigger is anything that reminds a person of her past trauma, which then causes *current* emotional or physical stress reactions. Sometimes, we don’t know why specific triggers remind us of our trauma and cause us to have these strong reactions, but this is a very common occurrence among abuse survivors of all kinds.

- ✓ Inform the women that their triggers may be either external or internal (adapted from Matsakis, 1998). Write the following definitions on the chart or board (preferably prior to the session, if possible).

External triggers include any perceptions of danger or distress that arise **outside** of the woman herself because she is reminded of her past trauma. These perceptions often involve any one or all five of the senses (sight, sound, smell, touch, and taste).

Examples of external triggers include: specific smells (such as cologne, laundry detergent, or food); the tone or feeling of a person's voice; certain conversations, words, or phrases; a certain song; a particular gesture; the look on a person's face; or crowded places.

Internal triggers are feelings or perceptions that arise within the woman herself. These types of triggers include both bodily and emotional states.

Examples of internal triggers include: aches and pains (back pain or stomach aches); PMS (including cramps); hunger or thirst; anxiety (including nervousness and fright); nausea; sadness; happiness; exhaustion; and sexual arousal. When a woman experiences any of these things internally, it may remind her of a time when she was abused, and trigger intense emotions and possibly crises.

HINT

Although a trigger may not appear dangerous to outside observers, it can feel extremely threatening to the person experiencing it. This incongruence is part of why others often do not know how to respond to a survivor's crisis escalation – if you don't understand how something seemingly harmless can set off a memory, then it will be hard for you to know how to take it seriously and quickly respond.

✂ Present *Handout 27: My Trigger Management Chart* (adapted from Matsakis, 1998). Explain to the women that you would like them to complete this chart, which identifies the sorts of things that may “set them off,” how it makes them feel, and what they or others can do to help them calm down. This requires a level of insight that the women may not have yet developed, given that they are just starting out on their recovery journeys. So, give them some examples and reassure them that understanding personal triggers is a process that takes time. Let them know that you will work on this chart again during your next session, and ask them to bring it to their individual counseling sessions to ask their therapists to assist in completing it as well. Help women who need it to complete their charts.

👉 Use the examples of *triggers* given above, if necessary. Possible *reactions* include uncontrollable crying, rage, self-harming, intense fear, running away, or dissociation (spacing out). Things that they

can do are discussed further in coming sessions, and include calling a friend or therapist, punching something soft like a pillow, writing a letter to a loved one, or hard physical exercise.

- ✂ Now present *Handout 28: My Personal Safety Tool* (adapted from Carmen et al., 1996). Tell the women that this sheet is designed for them to give to **treatment providers**, particularly in mental hospitals, to guide them in how to best respond to a woman's crises. Allow plenty of time for the women to fill out this form, and offer help whenever needed.

☞ If you have a history of hospitalization yourself, then you should complete a *Personal Safety Tool* as well, and share it with friends, family, or your own therapist or counselor. If you're not comfortable completing it during the group or are busy helping others, then be sure to complete the Tool as soon after the group as possible.

- ✂ Explain to the women that they should keep these Tools with them at all times, in their Safety Bags, wallets, pockets, or backpacks. This way, they can refer to the Tools whenever they feel themselves beginning to get upset or go into crisis. Ask them to share the *Personal Safety Tool* with their family members, friends, case workers, and/or therapists. These individuals can act as advocates should a woman need to be hospitalized, by requesting that the inpatient staff at least read, if not make use of, the Tool. While not a guarantee that hospital staff will use it, the women may

feel more empowered by having such a plan outlined and it may be easier for others to advocate for her rights if they have such strategies in writing.

If you work in a mental health setting, and only with **each** woman's permission, you should make a plan to discuss each woman's *Safety Tool* in a team meeting (or two) as well. Your own program staff may not know particular things that trigger crises in women, nor how to help effectively manage these crises, and thus, may find these self-directed suggestions quite useful.

Wrapping up:

- ➡ Ask the women to take a series of deep, cleansing breaths.
- ➡ Ask them to think of things during the week that they would like to add to their Trigger Management Charts. Request that they bring these Charts to the next Session to work on further.
- ➡ Let them know that the next session will focus on effective ways for managing flashbacks and other intensive memories of their abuse.

SELF-CARE TIP: Often times we suffer from the effects of burnout (being overwhelmed, unrewarded, depressed, exhausted) without even knowing it. Listen to the people around you. If they are telling you that you seem “out of sorts,” “too tired,” “forgetful,” or “grumpy” a lot lately, don’t brush it off. They may be pointing out something of which you aren’t fully aware. Honestly evaluate whether or not what they are telling you is true, even if it is painful to admit (you may need to talk it through with a peer, colleague, or supervisor). If it is true, you need to think about ways to help revive your energy and health. There are plenty of suggestions throughout this manual for self-care. Pick one immediately and commit to using it!

HANDOUT 27: MY TRIGGER MANAGEMENT CHART

(adapted from Matsakis, 1998)

Trigger	My Reactions	What I Can Do To Feel Better	What Others Can Do To Help
Example: I smell the cologne my father used to wear on my case worker	Example: I become terribly frightened and try to hit him to protect myself	Example: I take a series of deep breaths, I say to myself that he is not my father, I state the day, month, and year	Example: Not wear cologne around me, Move away from me to give me space, Allow me to come back later

HANDOUT 28: MY PERSONAL SAFETY TOOL

(Adapted from Carmen et al., 1996)

This Tool will help you figure out what really upsets you and how to manage these feelings. Try to keep this Tool in an easily accessible place so that you can find it in times of crisis (your wallet or purse). Share copies of this Tool with your family, friends, case worker, or therapist. Ask them to try the strategies themselves, and to give the Tool to inpatient staff if you have to be hospitalized.

1. What are some things that make you angry, upset, frustrated, or feel out of control (check or list all that apply)?

- | | | |
|--|---|--|
| <input type="checkbox"/> being touched | <input type="checkbox"/> being alone/isolated | <input type="checkbox"/> others yelling |
| <input type="checkbox"/> lack of privacy | <input type="checkbox"/> people in uniform | <input type="checkbox"/> being ignored |
| <input type="checkbox"/> loud noises | <input type="checkbox"/> time of day _____ | <input type="checkbox"/> no personal space |
| <input type="checkbox"/> lack of control | <input type="checkbox"/> time of year _____ | <input type="checkbox"/> changes in staff |

2. What are some things that help you calm down when you feel yourself getting upset? (Keep in mind that many of these options may NOT be available to you at all times.)

- | | |
|--|--|
| <input type="checkbox"/> being alone in room/quiet room | <input type="checkbox"/> calling your therapist or case worker |
| <input type="checkbox"/> comfort wrap with blanket | <input type="checkbox"/> reading a newspaper/book |
| <input type="checkbox"/> one-to-one or being near staff | <input type="checkbox"/> watching TV |
| <input type="checkbox"/> snapping rubber band on wrist | <input type="checkbox"/> pacing the halls/in quiet room |
| <input type="checkbox"/> talking with staff | <input type="checkbox"/> calling a friend or family member |
| <input type="checkbox"/> listening to music | <input type="checkbox"/> pounding some clay |
| <input type="checkbox"/> punching a pillow | <input type="checkbox"/> exercise |
| <input type="checkbox"/> writing in a diary/journal | <input type="checkbox"/> using ice on your body |
| <input type="checkbox"/> deep breathing/relaxation exercises | <input type="checkbox"/> putting hands under cold water |
| <input type="checkbox"/> art: drawing or coloring | <input type="checkbox"/> talking to yourself in a positive way |
| <input type="checkbox"/> medication, name _____ | <input type="checkbox"/> Other- please list on back |


SESSION 27: EMOTIONS MANAGEMENT PART II: DEALING WITH FLASHBACKS & OTHER SYMPTOMS

"(It's helpful to) see symptoms as a search for wholeness, as (our) coping skills developed to deal with the abuse." -- In Their Own Words

- Purposes/goals of session:**
1. Answer questions and address comments from the previous session;
 2. Understand the link between past trauma or abuse experiences and current psychological symptoms;
 3. Learn to recognize and manage flashbacks;
 4. Understand that many psychological symptoms from trauma can be understood as coping mechanisms.

Materials needed:

 Flip chart or chalkboard, markers or chalk;

 Handouts 29, 30 (if possible, this information should be pre-printed on 3X5" cards for the women, so that they can carry it easily in their purses, wallets, pockets, or Safety Bags).

Getting Started:

- ① Welcome the women back, and ask them if they have questions, comments, or reflections about the last session. Ask them to take out their Trigger Management Charts and to add anything they've thought of or experienced during the week. Also inquire as to whether they've shared

their Personal Safety Tools with at least one other person. (Have you done so yet, if relevant?) If not, ask them to try to do so before the next session.

- ② Tell the women that this session will be about the psychological symptoms often associated with trauma and abuse. Explain that many of their psychological symptoms could have a direct link to the abuse that they suffered. Also, women who have been abused have taught us that these symptoms can be viewed as ***cop*ing mechanisms for survival**. In other words, rather than being something negative -- as symptoms often are defined -- these particular symptoms may be what women did in order to survive and to cope with what was being done to them.

☞ This can be a rather difficult concept for some women, so make sure that the group fully understands what you mean by this.

It's a fact!

If certain psychological symptoms are reframed as coping mechanisms or natural responses to conditions of abuse, the women may feel less "damaged" and more empowered to move towards recovery. Many consumers are disempowered by a label of mental illness because they come to be seen by others and by themselves as being their symptoms, rather than a whole person who sometimes experiences symptoms or intense reactions to stressors.

Group information and activities:

Exercise #1:

- ✓ Ask the women to call out major psychiatric symptoms they have experienced during their lives, and list these in column form on the far left-side of the chart or board (leaving enough room for two more columns next to it).
- ✂ When finished, read each symptom aloud and ask the women how it might be directly related to having been abused. Write this answer in the second column on the chart or board. Now, ask the women how each of the symptoms could be reframed as a coping mechanism or natural response to conditions of trauma or abuse. Write this reframed mechanism in a column next to the symptoms column (Harris et al., 1998). Your three lists might look like the following:

<u>Symptom</u>	<u>Connection to Abuse</u>	<u>How the Symptom Helped</u>
dissociation; splitting into more than one person	my father having sex with me	I had to escape mentally to survive; I needed to feel like I was somewhere else during the abuse
paranoia	my family always protecting and covering up for my abuser	I had to be on the look-out to protect myself because I couldn't count on anyone else to help me;
anxiety	waiting for my mother to get home and beat me	I had to be hyperalert so I could brace myself for the inevitable pain
insomnia	waiting for my grandfather to come in at night to abuse me	I had to be superalert so I could prepare myself for the nightly abuse

depression	being told I was stupid again and again	I had to feel that nothing was worth doing since I never learned to cope with my own mistakes
substance abuse	watching my father beat my mother	I had to numb myself from the fear and pain of witnessing abuse

Make the point that, just because these symptoms can be seen as directly connected to conditions of abuse and as natural coping mechanisms, doesn't mean that the women won't want to work on overcoming them over time. Many of these symptoms do interfere with daily functioning and, even though the women no longer have to view these symptoms as signs of being "damaged," they still may wish to work on replacing these mechanisms with healthier or more positive coping strategies over time.

End this exercise by reminding women that a person is much more than a diagnosis and that she has the power to work on changing her own life.

HINT

This will have been a tough exercise for most women, and probably for you. Take a time-out. Ask each woman to stand up, stretch her arms and legs, and to take a series of deep cleansing breaths. Ask the women to repeat together, "I am safe in this room." Remind the women that you are working on these painful topics so that they can start to release all of the pain and anger they've held inside for so long. Part of getting over pain is to walk straight through it.

Exercise #2:

- ✓ Pass out *Handout 29: What are Flashbacks?* Tell the women that many survivors, especially those who have been sexually abused, experience what are known as "flashbacks" (adapted from Dolan, 1991).

Flashbacks are the vivid re-experiencing of sensations and feelings associated with abuse that do not constitute hallucinations or delusions (since they are based on experiences that did happen directly to the women). Flashbacks often are triggered when something happens that reminds the person of the abuse (a sound, a smell, an anniversary of a certain date, a threatening gesture). Flashbacks are similar to many types of triggers discussed during the last session, but often are even more intense. They lead to acute feelings, including rage, fear, severe helplessness, vulnerability, or being overwhelmed. They also can lead to acute visions or dream states. Flashbacks can vary between women -- and even within the same woman -- in terms of frequency, length, and degree of discomfort (Dolan, 1991). Sometimes flashbacks can last just for a moment, but sometimes they can last for hours, or on and off for days. Again, they are not the same thing as hallucinations or delusions.

- ✓ Make the point that dealing with flashbacks -- and many of the other uncomfortable and distressing symptoms and responses to abuse -- ***should be dealt with in a one-on-one counseling session with a qualified professional or peer.***



Present *Handout 30 Coping with Flashbacks*. Let the women know that there are three things they can try when a flashback occurs (Maltz, 1991). Encourage them to bring this Handout to their individual counseling sessions for further discussion of how it fits into their own lives and experiences.

1. Try to stop whatever you are doing at the time of the flashback, if possible. For example, if you are listening to music, eating, or just heard a scary noise, stop yourself and try to think of what is triggering your feelings.
2. Try to help yourself calm down by remembering that you are in the present time. To help you do this, quickly move into a different room or location; take a deep, calming breath; shake your head or stamp your feet; and tell yourself aloud (if possible) that you are safe and in the present day. Try to hold something or look at something to remind you that you are in the present, not the past.
3. Take some sort of action as soon as possible to ground yourself in reality. Make a cup of tea, and concentrate hard on each of the steps. Call a friend or your counselor. Write a note to a friend or safe family member, describing something that is happening outside of your window right now. Draw a picture of something in the room with you, concentrating on getting the details on paper. Whatever you do, concentrate on the present to remove yourself from the trigger and the feelings it brings up.

- ✓ Suggest to the women that they keep these Handouts in their Safety Bags.

Exercise #3:

- ✂ Ask the women to imagine that they have grown to be wise, elderly women, who are looking back upon this time in their lives (Chew, 1998). Ask them to share with the group what this older, wiser woman might tell them about how to get through this time in their lives, and what she would suggest as most helpful in their healing and recovery. What other comfort or advice might she provide to them? If they have a hard time imaging themselves as elderly, ask them to imagine a kind and caring grandmother talking to them in this way.
- ✂ Open a discussion among the women about how they can use what they imagine this older, wiser woman telling them in their recovery process right now. Encourage them to broaden their ideas and their thinking about this.

Wrapping Up:

- ➡ Acknowledge to the group that quite a bit of material was covered during this session. Encourage them to continue discussing the material with each other after group and with their individual counselors or therapists.

- ➡ Let them know that the next session will address self-injury and self-harming behaviors.

SELF-CARE TIP: Remember the strategy of taking a walk outside and gently releasing each woman from your mind.

Sometimes, trauma support group leaders find that they need to process some of the pain and frustration that arises during group with people experienced in serving vulnerable women. Thus, ask your co-leader (if you have one) and your supervisor or an experienced peer/colleague to meet with you for 15-20 minutes sometime during the day or evening after this particular session. Talk with these people about what has been happening during group lately, how everyone seems to be feeling about it, and how you are personally faring. This will help you to get some of these feelings out in the open with people who can sympathize, fostering your ability to let go of things you cannot control. This technique also helps to foster an open relationship among the co-leaders and their supervisors, when relevant (Harris et al., 1998).

HANDOUT 29: WHAT ARE FLASHBACKS?

(Adapted from Dolan, 1991)

FLASHBACKS are the vivid re-experiencing of sensations and feelings associated with abuse. They are not hallucinations or delusions, since they are based on experiences that did happen directly to the survivor.

FLASHBACKS often are triggered when something happens that reminds the person of the abuse (a sound, a smell, an anniversary of a certain date, a threatening gesture).

FLASHBACKS can involve any or all of a person's senses. They often lead to intense feelings, including rage, fear, severe helplessness, vulnerability, or being overwhelmed. They also can lead to acute visions or dream states.

FLASHBACKS can vary between women -- and even within the same woman -- in terms of frequency, length, and degree of discomfort. Sometimes flashbacks can last just for a moment, but sometimes they can last for hours, or on and off for days.

HANDOUT 30: COPING WITH FLASHBACKS

(Adapted from Maltz, 1991)

These are three things you can try when a flashback occurs.

1. Try to stop whatever you are doing at the time of the flashback, if possible.

For example, if you are listening to music, eating, or just heard a scary noise, stop yourself and try to think of what is triggering your feelings.

2. Try to help yourself calm down by remembering that you are in the present time. To help you do this, quickly move into a different room or location; take a deep, calming breath; shake your head or stamp your feet; and tell yourself aloud (if possible) that you are safe and in the present day. Try to hold something or look at something to remind you that you are in the present, not the past.

3. Take some sort of action as soon as possible to ground yourself in reality. Make a cup of tea, and concentrate hard on each of the steps. Call a friend or your counselor. Write a note to a friend or safe family member, describing something that is happening outside of your window right now. Draw a picture of something in the room with you, concentrating on getting the details on paper. Whatever you do, concentrate on the present to remove yourself from the trigger and the feelings it brings up.

SESSION 28: EMOTIONS MANAGEMENT PART III: UNDERSTANDING SELF-HARMING AND SELF-INJURY

*...(Know) that unhappiness doesn't come from
not having something you want,
but from the lack of something
inside that you need.
That there are things to hold
and things to let go,
and letting go doesn't mean you lose,
but that you acquire that which
has been waiting around the corner. -- Nancye Sims*

Purpose/goals of session:

1. Answer questions and address comments from the previous session;
2. Describe and explain the nature and purposes of self-injury.

Materials needed:

- ✎ Flip-chart or chalkboard, markers or chalk;
- ✎ Unlined paper, multi-colored markers, and one red marker for each woman;
- ✎ Handout 31.

Getting Started:

- ① Welcome the women back, and ask them if they have questions, comments, or reflections about the last session. Remind them that the concepts presented in the last group session regarding psychological

symptoms related to trauma are complex and it's okay to need more time to understand them. Review and clarify information as necessary.

- ② Tell the women that this session is about violence that women direct at themselves, or what is called "self-injury," self-harming," or "self-inflicted violence."

It's a fact!

A study conducted by Sarah Romans and her colleagues (1995) demonstrated that there is a direct association between childhood sexual abuse and later incidents of deliberate self-harm.

Group information and activities:

Exercise #1:

- ✓ Explain that there are four major kinds of body-altering or self-injurious behaviors (Connors, 1996):

1. Body alterations are direct changes to the body in order to conform to cultural or group norms.

Examples -- cosmetic surgery, tattoos, ear- or body-piercing, eyebrow plucking, initiation scarring;

2. Indirect self-harm is indirectly and apparently unintentionally causing harm to one's physical or psychological well-being.

Examples -- substance abuse, overeating, poor nutrition, extreme dieting, smoking, staying in damaging relationships;

3. Failure to care for self is not caring for or protecting oneself.

Examples -- excessive risk-taking, accident proneness, not eating well, not getting necessary medical or psychiatric care;

4. Self-injury is direct action that injures the body and seems to go beyond the category of body alteration.

Examples -- deliberately cutting, burning, hitting, picking at, choking, or deeply scratching oneself; excessive head-banging or hair-pulling; self-induced blood drawing; inserting large or dangerous objects into vaginas or rectums; purposely tearing one's skin.

- ✓ This session will focus on the fourth category, ***self-injury***, since recent research has found that these behaviors often are directly related to childhood trauma or abuse.

☞ It is important to note, however, that *indirect self-harm* and *failure to care for self* also may be related to histories of abuse for some women.

Check it out!

Understanding Self-Injury, A Workbook for Adults, by Kristy Trautmann and Robin Connors, published by Pittsburgh Action Against Rape in 1994, is an excellent workbook for women who want to explore and alter their self-injurious behaviors. It also is a wonderful tool for providers and peers who are working with these women.

- ✓ The connection between childhood trauma and self-harming behaviors is different for different people. Sometimes, the way a survivor self-injures mirrors the abuse that she suffered as a child. For example, a survivor whose head was banged against a door as a child may self-injure by banging her head against a door. Other times, the form of self-injury is a symbolic act, representing inner pain or rage. For instance, a survivor who was forced to sexually touch an abuser as a child may self-injure her hands as an adult.
- ✓ Present *Handout 31* (adapted from Trautmann & Connors, 1994). Discuss with the group the reasons why women with abuse histories sometimes hurt themselves. Make sure they fully understand each point. Specifically, self-injury can serve as:
 - ✓ a way to get people to see what happened by re-enacting past abusive behaviors or experiences; similarly, a reminder to oneself about what happened in the past by re-enacting painful experiences;

- ✓ a way to forget the abuse by distracting attention from the need to examine and confront painful and scary feelings about the past;
- ✓ a way to express feelings of anger, rage, guilt, frustration, and shame about the abuse;
- ✓ a way to respond to stressful or difficult situations, since they learned from adults early on in life to cope with stressors and everyday life via violent means;
- ✓ as a way to avoid dissociation by using the pain as an anchor to the present, as a way to avoid flashbacks, or as a method to “bring them back” from frightening flashbacks;
- ✓ as a way to facilitate dissociation by using self-injury as a “switch” to disconnect oneself from present distress.

TIP

While these are the most prominent purposes of self-injury, they are by no means the only ones. As mentioned earlier, each woman's experience is different.

TIP

- ✓ Explain to the group that, when viewed in these ways, self-harming behaviors can be seen as strategies for coping. Remind them of the

discussion you had in *Session 16* about Honoring Survival Techniques. Many times, survivors use coping mechanisms that may seem harmful or negative to other people, but make more sense when seen in light of the violence they have experienced. Children and teens are left confused and overwhelmed by abuse, since there is little way for them to understand or justify why it occurs. In this context, self-injury is used as a way to deal with these overwhelming experiences, even long after they happened.

Remind them that this doesn't mean they shouldn't work to replace some of these self-injurious behaviors with healthier coping strategies, when they are ready to do so. But, it does give them a more empowering way to view these behaviors.

Exercise #2:

- ✂ Pass out the sheets of unlined paper and different colored markers. Also, give each woman one red marker.

- ✂ Ask the women to draw a figure that looks like the outline of their bodies using whatever colors they most like, except red. Tell them to try to fill the page with the figure. Then, ask them to use the red marker to draw pictures of where on their bodies they self-injure, and how they do it (adapted from Trautmann & Connors, 1994).

HINT

Obviously, not every woman in the group will have used the forms of self-injury you've just been discussing. Thus, to ensure that these women can participate in the exercise, ask them to draw on the figures other self-harming behaviors, including those that are indirect or those that involve not taking care of self. This can include smoking, drinking, drug use, poor nutrition, overeating, self-starving, and so forth. This way, the women who directly self-injure will not feel singled out, and those who don't will get something from the exercise.

✂ When everyone has finished, ask those women who feel comfortable to present their pictures to the group, and to describe their experiences. They might discuss when they are most likely to self-harm, how often they do it, the most recent time they self-injured, and how they think it relates to their abuse experiences.

👉 Ask the women to remember that we should not judge other survivors for their personal coping strategies. Thank the women who shared them, as this most likely was not an easy thing to do.

👉 If nobody wants to share their pictures, do not force them to. Simply make the point that self-harming often occurs when women have flashbacks or experience other triggers, and that it often is a direct result of having been abused.

- ✓ Inform the group that two forms of self-harming behaviors in particular -- unsafe sex and sharing needles -- can lead to the contraction of HIV, the virus that causes AIDS. As this is a very serious, potentially life-threatening illness, they need to ensure that they engage in safe sex and safe drug-related activities. They should never have vaginal, anal, or oral sex with a man or a woman without using condoms (rubbers) or dental dams (one of the "rubbers" for women which fully covers the genitalia during oral sex). They also should never share or exchange needles with anyone for any reason. Some women may giggle or become uncomfortable during this discussion, but you should remain serious and firm. HIV and AIDS are too prevalent a risk among mental health consumers not to be openly addressed.

TRY THIS

You should arrange for an expert from an HIV/AIDS service agency or advocacy organization in your area to give a guest lecture to the women regarding HIV/AIDS risks and prevention.

Wrapping Up:

- ➡ Take the women through a series of deep breathing exercises. Remind them that the point of your support group is to help them understand better why they do the things they do, and to give them better ways to cope.

- ➡ Reassure them that the next session will discuss possible alternatives to self-harming behaviors. Also remind them to use their crisis hotline numbers or to call their therapists whenever they feel like hurting themselves. It is okay to ask for help.

SELF-CARE TIP: As care or support providers, we sometimes forget the importance of savoring our leisure time. There is nothing selfish about enjoying your free time, and it is perfectly okay to use that time to do absolutely nothing! Sometimes, the best medicine really is to sit still and simply stare out the window, or listen to music, or watch an old movie. We can easily get caught in the trap that our “free time” should be devoted to chores or errands or seeing friends, leaving us little time to truly and deeply rest. While getting stuff done around the house and hanging out with friends is key to your well-being, so is spending some time alone doing NOTHING! Enjoy it without guilt because you deserve it.

HANDOUT 31: WHY DO WOMEN SELF-INJURE?

(Adapted from Trautmann & Connors, 1994)

There are many reasons why women with abuse histories hurt themselves.

Specifically, self-injury can serve as:

- ✓ a way to get people to see what happened by re-enacting past abusive behaviors or experiences; similarly, a reminder to oneself about what happened in the past by re-enacting painful experiences;
- ✓ a way to forget the abuse by distracting attention from the need to examine and confront painful and scary feelings about the past;
- ✓ a way to express feelings of anger, rage, guilt, frustration, and shame about the abuse;
- ✓ a way to respond to stressful or difficult situations, since the survivor learned from adults early on in life to cope with stressors and everyday life via violent means;
- ✓ as a way to avoid dissociation by using the pain as an anchor to the present, as a way to avoid flashbacks, or as a method to "bring them back" from frightening flashbacks;
- ✓ as a way to facilitate dissociation by using self-injury as a "switch" to disconnect oneself from present distress.

SESSION 29: EMOTIONS MANAGEMENT PART III: ALTERNATIVES TO SELF-INJURY

*...Your success in anything is connected with action.
Keep moving towards your goal.
You'll make mistakes but don't quit.
You may even have to hang on after others have let go.*

*Persistence means taking pains
to overcome every obstacle,
to do all that's necessary to reach your goal... -- Max Stein*

- Purposes/goals of session:**
1. Answer questions and address comments from the previous session;
 2. Continue to explore the purposes of self-injury;
 3. Begin to work on alternatives to self-injury.

- Materials needed:**
- ✎ Flip-chart or chalkboard, markers or chalk;
 - ✎ Handouts 32, 33, 34.

Getting Started:

- ① Welcome the women back, and ask them if they have questions, comments, or reflections about the last session.
- ② Tell the women that this session will build on the previous one with further discussion about their personal reasons for self-harming behaviors -- including ***direct self-injury*** (cutting, burning, choking themselves, etc.) as

well as ***indirect self-injury*** (drinking, drugging, smoking, or other activities that compromise health and longevity).

☞ Reassure them that you will not be asking them to give up certain behaviors or activities before they are ready. However, you do want to help them take an honest look at why they may do certain things, and how these can have a negative effect on their lives over the long-run.

Group information and activities:

Exercise #1:

✂ Present *Handout 32: What is Important to Me About Self-Harming* (Trautmann & Connors, 1994). Read each item on the list, and ask the women to put a check next to ones that ring true for them. Out of respect for the privacy of this exercise, ask the women to keep their eyes on their own papers.

Before you begin, let the women know that the purpose of this Handout is to help them personally explore different feelings and reasons for why they self-injure. This is a very sensitive and personal process. It may involve putting into words sensations and feelings that they weren't able to fully understand or express before now. Thus, also make sure they know that they will not be expected to share this information with the group.

☞ Also remind them that these aren't the only reasons for self-injury, but are some that other survivors have identified.

Give the women time to fill in their own reasons in the blank space on the paper, if relevant.

✂ Ask the women to take a series of deep, cleansing breaths. Request that they stand up and stretch their arms and legs, while you state aloud, "Don't be too hard on yourselves. You are only human and you are learning to recover your lives."

Exercise #2:

✓ Inform the women that in order to develop alternatives to direct and indirect self-injurious behaviors, they must understand the specific needs that the harmful behaviors are fulfilling. This is important because the alternatives that they develop also will need to meet these particular needs.

HINT

Take a moment to remind the women that trying to find alternatives to self-injurious behaviors is not an "all or nothing" proposition. There will be times when women start self-injuring again, after

having quit for awhile, and this is to be expected as it's natural to resort to old coping mechanisms when under duress. The point of this session is to help them find ways either to reduce self-harming behaviors or to manage them when they occur. Providers or peers familiar with substance abuse treatment will recognize this philosophy as similar to "harm reduction," in which relapses are expected and not punished.

- ✂ Present *Handout 33: Alternatives to Self-Injury* (Connors, 1996). Read each category aloud, and ask for other examples as you go through the list. Again, point out that these aren't the only alternatives, just ones that other survivors have successfully used.

- ✎ Also remind the women that their personal self-soothing techniques from *Session 6* can be alternatives to self-injury, including taking a walk, calling a friend, praying or meditating, deep breathing, reading, painting, or looking at the stars.

- ✂ Present *Handout 34: My Personal Alternatives to Self-Injury* (Trautmann & Connors, 1994). Ask the women to use two items that they identified in *Handout 32* to complete the sentence, "I want to directly or indirectly hurt myself because..." Then, ask them to complete the sentence, "When I feel this way, instead of hurting myself, I will try..." with two items that they identified in *Handout 33*.

- ✎ This exercise is relatively complicated, so be sure that the women understand the directions and help anyone who needs it.

They should be clear that the purpose of the exercise is to help them find alternatives they really will try the next time they want to self-injure, which is why precision is important.

☞ Also ask the women to fill in the names of three people they can call for support when they feel like self-injuring.

- ✓ After they have finished, tell the women that they may put this sheet in their Safety Bags or, if it is safe, on their refrigerators or near the place where they are most likely to self-injure.

Wrapping Up:

- ➡ Remind the women that habits take at least 21 days to alter, if not longer depending upon whether addiction is involved. If they become discouraged or find that the alternatives to self-harming they have identified don't work, they should try to develop another approach or try the same one again another time.
- ➡ Let them know that the next session will focus on their hopes and dreams for the future. Remind them that the next session will be the second to last time that you all will meet as a group. Help them to remember that endings like this may naturally make them feel sad, scared, or anxious about the future, so they should be discussing how to manage this in their individual

counseling sessions. If you are in touch with these providers or supporters, you should remind them that your group is drawing to a close, so that they can be on the look-out for possible crises or difficult to manage emotions. However, be sure to point out that there is nothing wrong with or unnatural about being sad when something ends. This is a normal human response, and you just want to be sure that the women feel supported while they experience it (rather than trying to arrange for them not to feel the loss).

FACILITATORS' NOTE: For next session, prepare a list of one thing you think each woman has accomplished during the course of your group. For example, you might say that a woman has a better understanding of the different types of abuse, that she has good ideas in place for managing her emotions, that she was able to reach out to and support other group members, or that she has started on the journey to healing and recovery. It's okay if more than one woman has accomplished the same thing, but try to frame it a bit differently for each person.

SELF-CARE TIP: To balance out the spiritual damage that often accompanies the pain and exhaustion of trauma work, you might find it helpful to build a sense of connection with something beyond yourself (Chew, 1998). Try connecting with a higher power or nature through prayer, meditation, yoga, t'ai chi, or some other spiritual practice. Plenty of people have had their doubts about the value of these spiritual practices, only to learn that they are among the most effective ways we know of to re-energize and re-connect with the purpose and meaning of our lives. Give one of these practices a try for at least one month to see for yourself!

HANDOUT 32: WHAT IS IMPORTANT TO ME ABOUT SELF-INJURING?

(Trautmann & Connors, 1994)

- | | |
|---|-------------------------------------|
| I need to feel pain _____ | It makes everything more real _____ |
| It helps me feel sensation _____ | It makes everything less real _____ |
| Injuring stops feelings _____ | I release my frustrations _____ |
| It lets me know I'm alive _____ | I feel like I'm supposed to _____ |
| It helps me space out _____ | It helps me know my edges _____ |
| It helps me feel grounded _____ | |
| I need to feel punished _____ | Add more, if you would like: |
| It's how I ask for help _____ | |
| It helps me forget _____ | |
| I don't know, I just have to _____ | |
| It just happens _____ | |
| I feel more in control then _____ | |
| I can't be angry any other way _____ | |
| It helps me cry _____ | |
| It's soothing & comforting _____ | |
| It releases tension _____ | |
| It's the only way I can feel sexual _____ | |
| It's familiar _____ | |
| I need to see the blood/marks _____ | |
| It helps me "go away" _____ | |
| I can't remember _____ | |
| It helps me remember _____ | |
| I get more focused _____ | |
| It's mine and no one else's _____ | |

HANDOUT 33: ALTERNATIVES TO SELF-INJURY

(Connors, 1996)

_____ ***Non-harmful but similar acts.*** Instead of cutting yourself,

draw the "blood" or "marks" on paper with a red marker,
"injure" a toy or stuffed animal,
cut a box,
make marks with red marker or ink on your skin

_____ ***Physical awareness/sensation.*** When you want to injure yourself,

Take a deep breath and do a "body scan," focusing mentally on each part of your body,
Stroke your arm or leg,
Stomp your feet,
Drink hot water,
Brush your hair,
Take a bath,
Place ice on your skin, or
Snap a rubberband on your wrist.

_____ ***Distraction.*** Instead of harming yourself, try to

Read a book,
Watch a video,
Go to a movie,
Walk around the mall,
Promise yourself to wait 5-10 minutes before self-injuring,
Look at a favorite object of beauty.

HANDOUT 33: ALTERNATIVES TO SELF-INJURY (continued)

(Connors, 1996)

_____ ***Interpersonal contact.*** When you feel like hurting yourself,

Call a friend and talk out the impulse toward self-injury,
Listen to tapes of a friend or therapist talking to soothe you,
Call a support group member.

_____ ***Imagery.*** When you're overwhelmed and all you can think of to do is harm yourself,

Imagine the self-injury instead of doing it,
Imagine (don't do it) directing the impulse elsewhere, on another person or
object
Fantasize sexualized self-injury, rather than doing it.

_____ ***Physical activity/tension reduction.*** When thinking about self-harming,

Exercise, do yardwork, or dance,
Use a hammer on something (try not to destroy anything valuable),
Play a physical game with a friend (frisbee, tag, toss a ball)
Shred tissue or other paper,
Play drums or other percussion instruments,
Use exercise putty (or hand-held "stress" ball),
Take a long walk.

HANDOUT 33: ALTERNATIVES TO SELF-INJURY (continued)

(Connors, 1996)

_____ ***Art and writing approaches.*** When the need to hurt yourself comes up,

Draw the feeling or need or memory instead,

Write about your internal experience,

Sing along to your favorite CD or tape at the top of your lungs,

Write a letter to your abuser or your parent(s) or another significant person.

_____ ***Expressive anger activities.*** When you feel inner rage that could become explosive,

Hit or pound something like a pillow or sofa (try to be safe when hitting, and never hit children or pets)

Break old crockery or glass in safe ways,

Throw ice cubes,

Smash aluminum cans,

Scream,

Rip up old phone books.

_____ ***Grounding and re-orienting.*** Instead of hurting yourself try to,

Use self-soothing such as rocking or wrapping up in a blanket,

Visually scan your environment and describe the surroundings out loud,

Use notecards with reminders about how to stay in the present,

Hold objects that make you feel safe or grounded.

HANDOUT 34: MY PERSONAL ALTERNATIVES TO SELF-INJURY

(Trautmann & Connors, 1994)

1. I want to directly or indirectly hurt myself because...

When I feel this way, instead of hurting myself, I will...

2. I want to directly or indirectly hurt myself because...

When I feel this way, instead of hurting myself, I will...

Three people I can call when I feel like self-injuring:

- 1.

- 2.

- 3.

SESSION 30: WHERE I AM AND WHERE I'M GOING

*Don't dismiss your dreams
To be without dreams, is to be without hope
To be without hope is to be without purpose. --Nancye Sims*

- Purposes/goals of session:**
1. Answer questions and address comments about the previous session;
 2. Explore where they are in their healing process and where they would like to go from here.

- Materials needed:**
- ✎ Flip chart or chalkboard, markers or chalk;
 - ✎ A box of tissue in case anyone cries;
 - ✎ Handouts 35,36.

Getting Started:

- ① Welcome the women back and ask if they have questions, comments, or reflections about the last session. Find out if they would like to review any of the strategies that were discussed regarding managing triggers or self-harming behaviors.
- ② Remind the women that this is your second to last session together. You'd like to spend this session exploring how far they have come in their healing and recovery processes, and where they would like to go as they continue on their journeys.

Group information and activities:

Exercise #1:

- ✓ Ask the women to think back to the first several times that you met together. Request that they consider how they felt then and how they viewed themselves in relation to their histories of abuse and hope for the future. Now, ask them to consider how far they have come, all the things that they have learned, and the ways in which they have changed or grown stronger. Help them to remember that the healing and changing process is different for everyone, and no step is too small to count. They should share their feelings and ideas with the group.

✎ Allow all women to express themselves fully and to explore all possibilities. Congratulate them on all they have accomplished!

- ✓ Now, ask the women to share why they think this difficult process was worth the effort. Of course, they may think that certain things *weren't* worth the effort, but right now you want to focus on those things that were. Let them know that you want to explore this topic because, in the future when they are facing something that is very difficult for them, it may help them to remember that good things do grow out of hard and painful effort.

☞ You may find that their answers are tangible or abstract, but all possibilities should be encouraged. Any sort of understanding as to why this has been worthwhile for them is empowering!

Exercise #2:

- ✂ Present *Handout 35: Things of Which I am Proud* (Davis, 1990). Ask the women to list things that made them proud about themselves during the course of this group. Right now, you don't want them to focus on things that were true before the group began, but rather, on what they've accomplished because they took part in the sessions. Remind them that it is not bragging to acknowledge strong and positive things about themselves and their experiences. Ask them to share their answers with the group, and have the group affirm and validate their responses by clapping.

- ✂ End this exercise by telling each woman something that you think she accomplished during the group. Look her in the eyes while you speak, and focus on an area where you saw growth, increased understanding, or improved positive energy.

Exercise #3:

- ✂ Present *Handout 36: Things I Would Like to do in My Life* (Davis, 1990). For this exercise, ask the women to think about what are the things they would like to do or try next in life. This may include (hopefully) continuing to work on healing from past abuse, but also might include trying something new, going back to school, or finding a job or better job. Tell them that the sky is the limit with this exercise, as it is about their dreams and hopes. Part of accomplishing anything in life is to dream that it may one day be true.

Exercise #4:

- ✂ Ask each woman to share with the group one thing that she is going to do to reward herself for her dedication and hard work during this group. You start by sharing something that you will do.

Wrapping Up:

- ➡ Remind the women that the last session will be your closing ceremony. Encourage them to discuss any sadness or anxiety they may have about this group ending with each other and with other supportive people in their lives.

SELF-CARE TIP: While you are likely to feel at least some level of relief, you also may experience some sadness or anxiety as this group draws to a close. Be sure to talk about this with the supportive people in your life, fully expressing what you have gained from the group yourself and what you will miss about it. Allow yourself to grieve or experience the loss, as you will be encouraging the women to do the same.

Take a few minutes right now to pat yourself on the back. You have taken yourself and the women through an incredible journey of self-discovery and change.

You made a difference in this world -- that is not something to take lightly. **CONGRATULATIONS!!**

HANDOUT 35: *THINGS OF WHICH I AM PROUD*

(Davis, 1990)

Write down some things you did during this group that made you proud of yourself.

HANDOUT 36: *THINGS I WOULD LIKE TO DO IN MY LIFE*

(Davis, 1990)

Write down some things you would like to do next, now that this group is drawing to a close.

SESSION 31: CLOSING CEREMONY

...You are a child of the universe; no less than the trees and the stars you have a right to be here. And whether or not it is clear to you, no doubt the universe is unfolding as it should.

Therefore, be at peace with God, whatever you perceive him to be, and whatever your aspirations in the noisy confusion of life, keep peace with your soul.

With all of its sham, drudgery and broken dreams, it is still a beautiful world. Be careful. Strive to be happy. -- Max Ehrmann

- Purposes/goals of session:**
1. Answer questions and address comments from the previous session;
 2. Perform a closing ceremony to honor one another, and say goodbye to the group.

Materials needed:

- ✎ A simple, healthy, affordable meal (consider making a large pot of hardy vegetarian soup, with a green or fruit salad and bread);
- ✎ Index cards with the recipe for this meal; plates, cups, napkins, spoons, etc.;
- ✎ 5 or 6 small decorative stones, crystals, and beads for each of the women, and cards that define each symbol;
- ✎ A pretty cloth bag for each member to use as an adornment to hang around her neck;
- ✎ A box of tissue in case anyone cries;
- ✎ Optional: tablecloth, decorative napkins, flowers, inspirational music, etc.

Pre-session:

Prior to the session, prepare and lay out the food, as in the previous check-in sessions. Also, lay out the stones, symbols, and beads on a table, and put the cards that define each symbol in front of the particular stones. The stones, symbols, and bags may be found at craft or bead stores, New Age shops, and better card/gift boutiques. See *Handout 37* for example stones and their meanings/symbolic representation.

Getting Started:

- ① Welcome each woman back, and ask that she help herself to some food. You take some as well.
- ② After everyone is seated, thank the women for their dedication and hard work. Tell them that because this is your last group session and you'd like to take some time to talk about the experience and to say goodbye.

Group information and activities:

Exercise #1:

- ✓ During the meal, allow the women to express their feelings about the group and the effect it had on them individually. Encourage them to talk about what they liked and did not like about the group process, and take some

type of notes to remember their suggestions for the future. Allow everyone to process and honor the group as they see fit.

☞ Feel free to express your own personal views about the group experience and the effect it had on you as a facilitator and as a human being.

Exercise #2:

✓ After the meal, read the opening quote from this Session aloud to the group. Then, give one of the small decorative bags to each woman (Harris et al., 1998). Tell them to choose 5-6 stones or beads that they would like to put in their bags and wear around their necks to remind them of this group. Tell them that they may choose any combination in order to symbolize their new strengths and goals. Encourage the women to help each other choose their symbols, just as they helped each other during the group process.

☞ Explain to the women that these can be used like American Indian medicine bags, which often are worn by Native Americans as a protection against negative powers. People put herbs, stones, seeds, earth, and other symbols into the bags to encourage healing of the mind, body, and spirit. Tell the women that they can wear their "medicine bags" to help them in their emotional and spiritual recovery from traumatic abuse.

☞ Remind them to put their purple stones (from *Session 25*) symbolizing dignity, healing, renewal, and rebirth from the spirituality session in their medicine bags if they'd like.

Wrapping Up:

- ☞ Say goodbye to each woman individually, thank her for her dedication and participation, and wish her luck and strength in her continued journey.
- ☞ Allow each woman to say goodbye to you, and to thank you if she'd like to. If anyone cries, don't discourage it but note it as a normal human response when something ends.
- ☞ Pass out *Handout 38*, and ask each woman to take 5-10 minutes to complete the group evaluation. You may wish to read it aloud so those who have trouble reading can more easily complete it.

HANDOUT 37: SYMBOLIC MEANINGS OF VARIOUS STONES/CRYSTALS

(Chew, 1998; Harris et al., 1998)

Emerald: The energy of Venus, bringing love, good luck, and richness

Cowrie shell: Remembrance of one's heritage and a connection to one's roots, and is also a female symbol

Rose quartz: Brings healing to the inner child and promotes an increase in self-esteem

Feather: Energy to endure, gentle strength, trust to bend with life's changes

Azulite: Helps the owner receive and share messages from spiritual guides

Garnet: According to Native American Indian legend, this stone heals and protects its owner

White quartz: Promotes healing and works as an energizer

Jade: Brings peace and calm and intensifies expressive ability

Seashell: Reminds its owner of her power, her ability to go on, and her beauty

Green pine cone: The capability to create herself anew

Brown pine cone: Security for reflection, and the ability to learn from past mistakes and to see one's successes

Green tourmaline: Brings healing to the heart, and inspires balance, joy, and creativity

Smokey quartz: Positive energy to be fully in the here and now, strength for reaching for goals

Orange calcite: Reminds one to keep a sense of humor and facilitates change

HANDOUT 38: HOPE FOR HEALING GROUP EVALUATION

Circle **True** (T) or **False** (F) for the following statements.

1. T F The information covered in this group helped me better understand abuse and trauma issues.
2. T F The topics covered in this group helped me better understand how abuse and trauma have affected MY life.
3. T F I will use what I learned in this group in my everyday life.
4. T F Participation in this group helped me feel more confident about myself.
5. T F The information I gained from this group helped me feel more comfortable saying no and setting limits with other people in my life.
6. T F This group taught me that I deserve to take time to soothe and nurture myself.
7. T F Because of this group, I understand that many of the emotional difficulties I have had in my life are related to having been abused.
8. T F I felt comfortable talking with other women in this group because they have had experiences similar to mine.
9. T F The topic areas covered in this group were relevant to my needs.
10. T F The group activities were valuable in helping me to learn.
11. T F I would recommend this group to a friend in a similar situation.
12. T F The facilitator was able to clearly communicate the subject matter in this group.

HANDOUT 38: LIVING WELL SUPPORT GROUP EVALUATION

(continued)

13. In order to change or improve this group, I would suggest:

14. Additional comments or suggestions:

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Supplemental Inspirational Readings

Desiderata, author unknown

Go placidly amid the noise and haste, and remember what peace there may be in silence. As far as possible without surrender be on good terms with all persons. Speak your truth quietly and clearly; and listen to others, even the dull and ignorant; they too have their story.

Avoid loud and aggressive persons; they are vexations to the spirit. If you compare yourself with others, you may become vain and bitter; for always there will be greater and lesser persons than yourself. Enjoy achievements as well as your plans.

Keep interested in your own career, however humble; it is a real possession in the changing fortunes of time. Exercise caution in your business affairs; the world is full of trickery. But let this not blind you to what virtue there is; many persons strive for high ideals; and everywhere life is full of heroism.

Be yourself. Especially, do not feign affection. Neither be cynical about love; for in the face of all aridity and disenchantment it is perennial as the grass.

Take kindly the counsel of the years, gracefully surrendering the things of youth. Nurture strength of spirit to shield you in sudden misfortune. But do not distress yourself with imaginings. Many fears are born of fatigue and loneliness. Beyond a wholesome discipline, be gentle with yourself.

You are a child of the universe, no less than the trees and the stars; you have a right to be here. And whether or not it is clear to you, no doubt the universe is unfolding as it should.

Therefore be at peace with God, whatever you conceive Him to be, and whatever your labors and aspirations, in the noisy confusion of life keep peace with your soul.

With all its sham, drudgery and broken dreams, it is still a beautiful world. Be careful. Strive to be happy.

Symptoms of Inner Peace by: Saskia Davis

Be on the lookout for symptoms of inner peace. The hearts of a great many have already been exposed to inner peace and it is possible that people everywhere could come down with it in epidemic proportions. This could pose a serious threat to what has, up to now, been a fairly stable condition of conflict in the world.

Some signs and symptoms of inner peace:

A tendency to think and act spontaneously rather than on fears based on past experiences.

An unmistakable ability to enjoy each moment.

A loss of interest in judging other people.

A loss of interest in judging self.

A loss of interest in interpreting the actions of others.

A loss of interest in conflict.

A loss of the ability to worry. (This is a very serious symptom.)

Frequent, overwhelming episodes of appreciation.

Contented feelings of connectedness with others and nature.

Frequent attacks of smiling.

An increasing tendency to let things happen rather than make them happen.

An increased susceptibility to the love extended by others as well as the uncontrollable urge to extend it.

WARNING:

If you have some or all of the above symptoms, please be advised that your condition of inner peace may be so far advanced as to not be curable. If you are exposed to anyone exhibiting any of these symptoms, remain exposed only at your own risk.

Still I Rise by: Maya Angelou

You may write me down in history
You may trod me in the very dirt
But still, like dust, I'll rise.

Does my sassiness upset you?
Why are you beset with gloom?
'Cause I walk like I've got oil wells
Pumping in my living room.

Just like moons and like suns,
With the certainty of tides,
Just like hopes springing high,
Still I'll rise.

Did you want to see me broken?
Bowed head and lowered eyes?
Shoulders falling down like teardrops.
Weakened by my soulful cries.

Does my haughtiness offend you?
Don't you take it awful hard
'Cause I laugh like I've got gold mines
Diggin' in my own back yard.

You may shoot me with your words,
You may cut me with your eyes,
You may kill me with your hatefulness,
But still, like air, I'll rise.

Does my sexiness upset you?
Does it come as a surprise
That I dance like I've got diamonds
At the meeting of my thighs?
Out of the huts of history's shame I rise
Up from a past that's rooted in pain
I rise
I'm a black ocean, leaping and wide,
Welling and swelling I bear in the tide.

Leaving behind nights of terror and fear
I rise
Into a daybreak that's wondrously clear
I rise
Bringing the gifts that my ancestors gave,
I am the dream and the hope of the slave.
I rise
I rise
I rise.

Keep Believing in Yourself, author unknown

There may be days
when you get up in the morning
and things aren't the way
you had hoped they would be.

That's when you have to
tell yourself that things will get better.
There are times when people
disappoint you and let you down,

but those are the times
when you must remind yourself
to trust your own judgments and opinions,
to keep your life focused on believing in yourself

and all that you are capable of.
There will be challenges to face
and changes to make in your life,
and it is up to you to accept them.

Constantly keep yourself headed
in the right direction for you.
It may not be easy at times,
but in those times of struggle

you will find a stronger sense of who you are,
So when the days come that are filled
with frustration and unexpected responsibilities,
remember to believe in yourself

and all you want your life to be,
because the challenges and changes
will only help you to find the goals
that you know are meant to come true for you.

Wisdom From an Indian Elder by: Oriah Mountain Dreamer, Indian Elder

It doesn't interest me what you do for a living.
I want to know what you ache for,
and if you dare to dream of meeting your heart's longing.

It doesn't interest me how old you are.
I want to know if you will risk looking like a fool for love,
for your dreams, for the adventure of being alive.

It doesn't interest me what planets are squaring your moon.
I want to know if you have touched the center of your own sorrow,
if you have been opened by life's betrayals
or have become shriveled and closed from fear of further pain!
I want to know if you can sit with pain, mine or your own,
without moving to hide it or fade it or fix it.
I want to know if you can be with joy, mine or your own;
if you can dance with wildness
and let the ecstasy fill you to the tips of your fingers
and toes without cautioning us to be careful, be realistic,
or to remember the limitations of being human.

It doesn't interest me if the story you're telling me is true.
I want to know if you can disappoint another to be true to yourself;
if you can bear the accusation of betrayal and not betray your own soul.
I want to know if you can be faithful and therefore be trustworthy.
I want to know if you can see beauty even when it is not pretty every day,
and if can source your life from God's presence.
I want to know if you can live with failure, yours and mine,
and still stand on the edge of a lake
and shout to the silver of the full moon, "Yes!"

It doesn't interest me to know where you live or own much money you have.
I want to know if you can get up after the night of grief
and despair, weary and bruised the bone,
and do what needs to be done for the children.

It doesn't interest me who you are, how you came to be here.
I want to know if you will stand in the center of the fire with me
and not shrink back.

It doesn't interest me where or what or with whom you have studied.
I want to know what sustains you from the inside when all else falls away.
I want to know if you can be alone with yourself,
and if you truly like the company you keep in the empty moments.

Always Create Your Own Dreams and Live Life to the Fullest by: Susan Polis Schutz

Dreams can come true if you take the time to think about what you want in life.

Get to know yourself.

Find out who you are.

Choose your goals carefully.

Be honest with yourself.

Always believe in yourself.

Find many interests and pursue them.

Find out what is important to you.

Find out what you are good at.

Don't be afraid to make mistakes.

Work hard to achieve successes.

When things are not going right, don't give up - just try harder.

Give yourself freedom to try out new things.

Laugh and have a good time.

Open yourself up to love.

Take part in the beauty of nature.

Be appreciative of all that you have.

Help those less fortunate than you.

Work towards peace in the world.

Live life to the fullest.

Create your own dreams and follow them until they are a reality

DON'T YOU QUIT! by: Anonymous

When things go wrong as they sometimes will,
When the road you're trudging seems all up hill,
When the funds are low and the debts are high,
And you want to smile, but you have to sigh.
When care is pressing you down a bit,

Rest, if you must, but
DON'T YOU QUIT!

Life is queer with its twists and turns,
As every one of us sometimes learns,
And many a failure turns about
When he might have won had he stuck it out.

Often the struggler has given up
When she might have captured the victors cup;
And she learned too late when the night came down,
How close she was to the golden crown.

Don't give up though the pace seems slow,
You may succeed with another blow,
Success is failure turned inside out--
The silver lining of the clouds of doubt.

And you never can tell how close you are,
It may be near when it seems so far.
So stick to the fight when you're hardest hit...
It's when things seem worst that you
MUST NOT QUIT!

Courage, author unknown

Courage is the strength to stand up
When it's easier to fall down and lose hold.
It is the conviction to explore new horizons
When it's easier to believe what we've been told.

Courage is the desire to maintain our integrity
When it's easier to look the other way.
It is feeling happy and alive, and moving forward
When it's easier to feel sorry for ourselves and stay.

Courage is the will to shape our world
When it's easier to let someone else do it for us.
It is the recognition that none of us are perfect
When it's easier to criticize others and fuss.

Courage is the power to step forward and lead
When it's easier to follow the crowd; their pleasure sound.
It is the spirit that places you on top of a mountain
When it's easier to never leave the ground.

The foundation of courage is solid,
The rock that doesn't roll.
Courage is the freedom
Of our mind, body, and soul!

TRAUMA AND RECOVERY WEBSITES

The following are just a few of the wonderful websites we have found in our own research. All of them are filled with helpful information and resources for abuse survivors, as well as many links to other good websites that may respond more directly to your own needs and questions.

1. **"Wounded Healer Journal"** http://idealists.com/wounded_healer/
 - Intended for psychotherapists and other survivors of abuse and trauma
 - Includes articles, resources, a chatroom, and a great therapist database
 - Special sections include articles on spirituality, eating disorders, and more misc.

2. **"SARIAA: Serving Abuse Recovery in Action Always"** <http://www2.addr.com/~sariaa/>
 - Focuses on abuse, recovery, mental health, and spiritual growth articles, stories, links, and bibliographies
 - Separate sections for relationships, depression, inspirations, abuse and disabilities, and suicide issues
 - Includes a gay/lesbian/bisexual page
 - Has a place to post your own writings

3. **"TigerWolfCrew's Den: MPD and DID Resources and Insights"**
<http://www.2multiples.com/TWCrew/>
 - Information on sexual abuse, self-harm, depression, ritual abuse, multiple personality and dissociative identity disorders, insights, and resources
 - Written by abuse survivors for abuse survivors
 - Also includes safe sex tips, book reviews, biographies, poetry, experience sharing, wellness (eating, body image), and many links

4. **"Butterflies" (Magazine for Survivors)** <http://drwnet.com/bfly/>
 - Intended for survivors of incest, sexual abuse, and ritual abuse
 - Includes articles, an online support system, poetry, stories, books, Q& As, media reviews, links, submissions, resources, and more

5. **"Survivors Healing Home Page":** <http://www.geocities.com/HotSprings/1035/>
 - Written and compiled by an abuse survivor, for abuse survivors
 - Includes in-depth sections on creativity and healing, and using journaling as a healing tool
 - It also has sections on breaking the silence, speaking your truth, memory and remembering, anger, flashbacks, self-care, choosing a therapist, friendships, and short stories

TRAUMA AND RECOVERY WEBSITES (continued)

6. "Survivors": <http://www.soc-um.org/survivors/index.html/>

-This site provides links, a forum for discussing abuse issues, a chatroom, inspirational words, an e-mail support group, a place to tell your story, and more

7. "Abuse Recovery and Support for Survivors and Friends of Sexual Abuse":

<http://www.survivors-and-friends.org/entry.html/>

-This site provides support, encouragement, information, and a "voice" to survivors and their friends and loved ones

-Includes separate pages for women, men, parents, partners, and loved ones

-Also includes a chatroom, discussion forums, memorial, and links

8. "Magic Stream Journal...a guide to emotional wellness":

<http://fly.hiwaay.net/~garson/>

-This website is a self-help/mental health resource with extensive references for consumers, providers, family members, and individuals seeking self-help information

-It uses a holistic approach to health, nutrition, psychology, and emotional wellness

-Aside from its extensive database of information on a huge range of mental health issues, including trauma and abuse, it includes reviews, bulletin boards, stories, exercises, and news