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Starting anything new usually produces mixed feelings—often both anxiety (or fear) and excitement. As you begin the *Beyond Trauma: A Healing Journey for Women* program, this may be your first experience in looking at trauma in your life. Or this may be a journey you’ve started and stopped at different periods in your life. Either way, we know that awareness and knowledge are the first steps toward change and growth.

In the *Beyond Trauma* program, women’s ways of “knowing” are valued and central to developing a deeper understanding of trauma. Your group will give you a place to explore and try new things in a safe, nurturing, and supportive environment.

There are activities you will do as a group and activities in this workbook that you can do on your own (or with another group member). You may also want to take notes as you discuss topics in the group. Feel free to write down questions that arise, observations, and new thoughts and feelings that emerge.

In your group, you’ll go through a process of:

- learning more about what trauma is and how widespread it is in women’s lives
- exploring how trauma and abuse have affected you
- developing coping skills, doing activities to help you feel grounded, and focusing on safety

You have space in this workbook to explore your life experiences and the world around you. This is your own personal journal, where you can write down your feelings, thoughts, and ideas and have an opportunity to try out new ways of coping with the impact of trauma on your life.
In using this kind of workbook, you will see the strengths you have and increase the skills that move you further along in your life journey. Remember, you are not alone. The connections you make with women in this group, combined with your courage to explore the trauma you have experienced, can bring you a greater sense of empowerment and energy to continue the path toward healing. Many women before you have walked the road to recovery and healing, and they will be with you in spirit.

Wishing you the best,

Stephanie S. Covington
Violence, Abuse, and Trauma
The Process of Trauma and Reactions to Trauma

There are many kinds of traumatic events, and there are many different responses to trauma. One form of trauma is interpersonal violence, or abuse. There also are different kinds of abuse; emotional, physical, and sexual abuse are some common types. Women, more than men, are at risk for this kind of trauma.

Responses to trauma in women’s lives can also be very different. There are emotional responses, which happen internally, in the inner self. There are responses that are external and show up in behavior, or the outer self. And there are physical reactions that show up in the body.

Types of Abuse

*Emotional abuse* includes name-calling, continual criticism, withholding approval or affection as punishment, using silence as punishment, isolating, depriving someone of money needed for necessities, humiliating someone publicly or privately, playing “mind games,” trying to coerce someone to do something she doesn’t want to do, blaming, belittling, embarrassing, breaking promises, being inconsistent or unpredictable, threatening, threatening or abusing children or pets, manipulating by using children, deliberately intimidating, and breaking things.

*Physical abuse* includes pushing; shaking; spitting; slapping; kicking; biting; pinching; choking; burning; restraining; locking someone out of the house; threatening with a weapon; shooting, stabbing, teasing, or using another type of weapon on someone; harassing someone to the point of physical illness; depriving someone of sleep or food; leaving someone alone or withholding treatment or medication when she is sick; and deliberately giving someone a sexually transmitted disease.
Sexual abuse includes rape, coercion, unwanted sexual photographing or recording, unwanted or inappropriate touching, sexual harassment (including unwanted sexual comments), demanding sex after a beating or an illness, sexual criticism, forcing sex in front of others, treating others as sex objects, and nonconsensual sadistic sexual acts.

You may want to add to these lists.

The Process of Trauma

The illustration of the Process of Trauma on the next page shows how the events in our lives affect our emotional, psychological, and physical selves and our behaviors. It also reminds us of the relationships between how we think, feel, and behave and our physical and mental health.

Trauma results from an experience that overwhelms a person’s normal coping abilities. The first response a person has when threatened or frightened is to either fight, run away, or freeze. These reactions are called the “fight-or-flight” response. Freezing is when a person becomes immobile, and this may help prevent further harm. Then there are other physical and psychological reactions, including the following:

Altered consciousness is like being in a daze. Some body sensations are tingling or getting hot or cold. Numbing can happen physically in the body and also in feeling mentally numb. Hypervigilance is always scanning the environment; feeling a sense of constant threat, like living in a war zone; and always being on guard.

Hyperarousal is when the body is agitated and a person feels like she is on edge. Some women have difficulty breathing, an increased heart rate, cold sweats, tense muscles, racing thoughts, and worry. Sometimes a person experiences both hyperarousal and freezing, along with a feeling of overwhelming helplessness and powerlessness. Remember, these are normal responses to abnormal or extreme situations.

Some stressors are normal, and others can be overwhelming and toxic, creating traumatic stress. When stress occurs too often or for too long, it creates wear and tear on the body.
The Process of Trauma

**Traumatic Event**
Overwhelms our physical and psychological coping skills

**Response to Trauma**
Fight, flight, or freeze
Altered state of consciousness, Body sensations, Numbing
Hypervigilance, Hyperarousal, Collapse

**Sensitized Nervous System**
Changes in the Brain
Brain-Body Connection

**Psychological and Physical Distress**
Current stressors, Reminders of trauma (triggers)
Sensations, Images, Behavior, Affect (emotions), Memory

**Emotional and/or Physical Responses**

- **Retreat**
  - Isolation
  - Dissociation
  - Depression
  - Anxiety

- **Harmful Behavior to Self**
  - Substance use disorders
  - Eating disorders
  - Deliberate self-harm
  - Suicidal actions

- **Harmful Behavior to Others**
  - Aggression
  - Violence
  - Rages
  - Threats

- **Physical Health Issues**
  - Lung disease
  - Heart disease
  - Autoimmune disorders
  - Obesity

Trigger list adapted from *In an Unspoken Voice: How the Body Releases Trauma and Restores Goodness* by Peter Levine (Berkeley, CA: North Atlantic Books, 2010).
Trauma also can cause changes in a person’s brain chemistry and how the brain functions. Your brain can influence how your body works and can affect your physical health. Flashbacks (including fear and terror) and confusion (such as racing or jumbled thoughts) both may stem from the effect of trauma on the brain. Many women talk about frightening thoughts “invading” their minds. Some victims of trauma have nightmares or “night terrors,” from which they wake up screaming and sweating, even though they cannot remember their dreams. This can create the feeling that they’re never safe. Sometimes these things make a person feel like she’s going crazy or losing control of her mind.

“In my dreams I’d see and feel the past as though it were happening now. I’d wake up afraid and wanting to run away as fast as I could. I just thought I was going crazy.”

Our bodies also respond to the ways in which we think, feel, and act. This is called the brain-body connection. When a person is stressed, anxious, or upset, her body may react with aches, pains, and even symptoms of illness. Keeping the feelings inside can make things even worse. This is why it’s important to learn grounding and self-soothing activities.

The fourth section of the Process of Trauma chart mentions current stressors. These can be from life events, such as being arrested; from one’s lifestyle, such as living on the streets or using; and from triggers. A woman may be triggered in her current life by reminders of a traumatic event that happened in the past. These triggers may come from sensations in the body, images, behaviors that she does or someone else does, feelings, and/or memories. There may be nightmares and flashbacks to the earlier experience.

Retreat responses include isolation, dissociation, depression, and anxiety. Although we all need some alone time, isolation occurs when a woman keeps to herself and avoids interacting with others. In group settings, she’ll rarely share her feelings or experiences.

Dissociation occurs when your mind disconnects from what is happening. It is like physical or psychological numbing. You can lose time and/or memories. With dissociation, a woman ignores or fails to acknowledge the abuse.
The third retreat response is *depression*. When women turn their anger inward, they’re at risk of becoming depressed: feeling persistently sad, having difficulty sleeping and having little energy, having no hope or joy, having trouble concentrating, experiencing changes in appetite, and/or having thoughts of suicide.

Another retreat response is *anxiety*. The most common anxiety disorders for women are panic and phobia (which means intense fear). Another common trauma- and stress-related diagnosis for women is posttraumatic stress disorder (PTSD). We discussed this in session 2 (see page 23).

*Harmful behaviors to oneself* include alcohol and other drug abuse; eating disorders; cutting, burning, and other self-injury; and suicidal actions. Women are more likely to turn their feelings inward and retreat or hurt themselves, although some women’s responses to trauma are *aggression and violence*. There is another program for women by Stephanie Covington that deals with these issues; it’s called *Beyond Anger and Violence: A Program for Women*.

Finally, *physical health issues* may result from trauma, especially from repeated trauma since childhood. You will learn more about this in session 5.

*Have you experienced any of these symptoms of trauma? Is there something new you have learned about yourself?*

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Listing Calming Strategies
If you’ve experienced trauma, you need a toolbox filled with techniques for calming, soothing, and grounding yourself, especially if you experience triggers. Not all calming strategies are exercises such as deep breathing or the Five Senses activity. There are many things you can do to calm and soothe yourself. Some of them work better for different people. Here are a few examples:

- reading a book
- listening to music
- dancing
- pacing
- hugging a stuffed animal or toy
- coloring
- taking a bubble bath
- deep breathing
- exercising
- writing in a journal
- doing a craft or creative activity
- eating
- taking a shower
- doing yoga or tai chi
- watching television
- talking to friends or relatives
- going for a walk in a garden or park

What other strategies did you come up with as a group? Write them here.

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**Mindful Breathing**

When we pay attention to our breathing, our minds become calmer. Slowly take a breath in through your nose. Notice how the breath moves into your lungs, how it feels in your belly, ribs, chest, and shoulders. Notice your belly filling up like a balloon. Exhale slowly. Let the breath move out of your lungs slowly, like a balloon losing air, until they’re empty. Repeat this three times.

**Responses Associated with Trauma**

Traumatic events can overwhelm a woman physically and psychologically. Here are some of the reactions that women often have if they’ve experienced a traumatic event. Some of them happen right after the event, and some show up later.

*As you look at these lists, think about which responses you have experienced. Place a check mark next to them.*

<table>
<thead>
<tr>
<th>TYPICAL EARLY RESPONSES TO TRAUMA</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Disturbed sleep and/or nightmares</td>
</tr>
<tr>
<td>☐ Exaggerated emotional and startled reactions to noises, quick movements, etc.</td>
</tr>
<tr>
<td>☐ Restlessness</td>
</tr>
<tr>
<td>☐ Hyperactivity</td>
</tr>
<tr>
<td>☐ Hypervigilance</td>
</tr>
<tr>
<td>☐ Fear of losing control</td>
</tr>
<tr>
<td>☐ Abrupt mood swings</td>
</tr>
<tr>
<td>☐ Flashbacks</td>
</tr>
<tr>
<td>☐ Sensitivity to sound, light, smell, taste, and touch</td>
</tr>
<tr>
<td>☐ Fear of going crazy</td>
</tr>
<tr>
<td>☐ Desire for alcohol or other drugs</td>
</tr>
</tbody>
</table>
TYPICAL LATER RESPONSES TO TRAUMA

- Panic attacks, anxiety, and phobias
- Mental blankness or being “spacey”
- Avoidance behaviors (avoidance of people, places, and things that are reminders of the traumatic event; isolating oneself from people; avoiding talking to others)
- Attraction to dangerous situations
- Frequent anger or crying
- Exaggerated or diminished sexual activity
- Amnesia and forgetfulness
- Diminished emotional responses
- Inability to love, nurture, or bond with other individuals
- Fear of dying or having a shortened life
- Self-harming behavior
- Cravings (particularly if the person has a substance use disorder)
- Fatigue or low energy
- Physical health problems, such as a depleted immune system or thyroid dysfunction
- Other illnesses, such as neck and back problems, asthma, digestive distress, spastic colon, and severe premenstrual syndrome
- Eating disorders
- Inability to make commitments
- Depression
- Feelings of isolation, detachment
- Reduced ability to make decisions, formulate plans, and carry them out
The Effects of Trauma on the Brain

Trauma affects how the brain functions. People under extreme stress often process and organize information differently. For example, child abuse can cause serious damage to the structure and functioning of the developing brain. The effect of trauma on the brain can result in brain changes and behaviors that are adaptations to stress, including dissociation, fearful flashbacks, and racing or jumbled thoughts. Extreme stress can cause a person to exhibit antisocial behaviors. Many women think they are crazy and don’t realize that what’s going on in their brains may be the result of earlier trauma.

Sometimes this information on the brain can be frightening because we are afraid we can’t “fix it.” However, one neuroscientist who studies the impact of trauma on the brain has developed the concept of SEEDS (Arden 2014). These are the five factors that can help heal the brain and help all of us stay vital, productive, and happy for a lifetime:

- **S**—social connectivity—being in connection and relationship with others.
- **E**—exercise—thirty minutes a day can make a big difference.
- **E**—education—learn something new each day.
- **D**—diet—the food we eat either nourishes or starves our brain.
- **S**—sleep—our brains and our bodies need to rest and regenerate each day.
These things can help you reduce your risk of having physical and mental health problems.

Think about how to begin to plant these SEEDS in your life.

Trauma can also cause problems with addiction. Understanding that trauma can change brain chemistry—just as substance abuse can change brain chemistry—can help you see the connection between trauma and what is going on physically and emotionally.

One of the first steps in the healing process is sharing your story and having other people listen who can understand and show empathy.

If you have experienced any of these effects of trauma, what was this like for you?
What information about the brain has been useful or important to you?
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Reconnection with the Body
This is one of the activities you did in group to help you explore your connection to your body. Periodically try to practice this so it becomes easier for you to focus on the four basic sensations: temperature, pressure, texture, and moisture. You can also use this as a grounding technique (with your eyes open).

First, close your eyes or lower your eyelids. Then slowly touch your face, arm, or hand. See if you can focus mentally on each body part’s temperature. Is it warm or cold? Then focus on the pressure of your touch. Is it light or firm? Then focus on the texture of your skin. Is it smooth or rough? Finally, focus on the presence or absence of moisture. Is it absolutely dry, or is there some moisture? Just try to relax into the sensations that you are feeling. Open your eyes when you are ready.
What was your experience like of connecting with your body? Was it difficult? Was it easy?

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What feelings did you have as you did this activity?

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Reflection

What was the most meaningful or important part of today's session for you?

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Between-Sessions Activity

1. For your Between-Sessions Activity, you’ll have an opportunity to look back at your history of trauma at different points in your life. If it’s too uncomfortable for you, you don’t need to fill in Part A, the square with the event(s). You can focus on the other sections of the chart (B, C, and D). You may want to practice one or more grounding techniques when you do this.

<table>
<thead>
<tr>
<th>History of Trauma</th>
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<tbody>
<tr>
<td><strong>A. Event(s)</strong></td>
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<tr>
<td><strong>B. Life before the event(s)</strong></td>
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<tr>
<td><strong>C. Life after the event(s)</strong></td>
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<tr>
<td><strong>D. Overall impact of the event(s)</strong></td>
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<tr>
<th>CHILD</th>
<th>ADOLESCENT</th>
<th>ADULT</th>
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</tbody>
</table>
In the boxes, list each event if you feel comfortable doing that. Then describe how your life was before the event, how your life was after the event, and the overall impact of these traumas on your life. If you’re questioning whether an event was traumatic, think about the questions to ask yourself that were discussed in the last session:

- Was there full consent?
- Was there an element of betrayal or loss of trust?
- Have you ever feared for your physical safety in your relationship?
- Have you felt afraid in other ways?
- Have you ever been forced to do things against your will?
- Have you ever been hit or threatened?
- Have you ever been kicked or choked?
- Have you ever sustained bodily injuries such as bruises, cuts, or broken bones?
- Have your children been hit or threatened?
- Was there violence, pain, restriction, force, or bodily harm?
- Have you been verbally put down?
- Have you been harassed, stalked, or monitored?
- Did it feel like abuse to you?

Although you won’t be asked to share any specific events within the group, there’s power in naming. We may think we can control our grief, terror, or shame by staying silent, but naming offers the possibility of a different kind of control. So if you don’t want to share with the group, please consider talking to someone individually and naming the traumatic events in your past and present to yourself.

It is important to remember that any memories you visit are in the past. Any feelings you have are part of the process of healing, and right now you’re safe. You can use your safety symbol and your grounding and calming activities to help you, if you need them.
2. Second, finish filling out the list of calming strategies on page 46. Then mark the ones you think will work best for you.

3. If possible, bring a couple of magazines with you to the next session. Old magazines are fine, as you’ll be taking things out of them.