Empowering Women in a Rural Setting:



The Survivor to Thriver Model

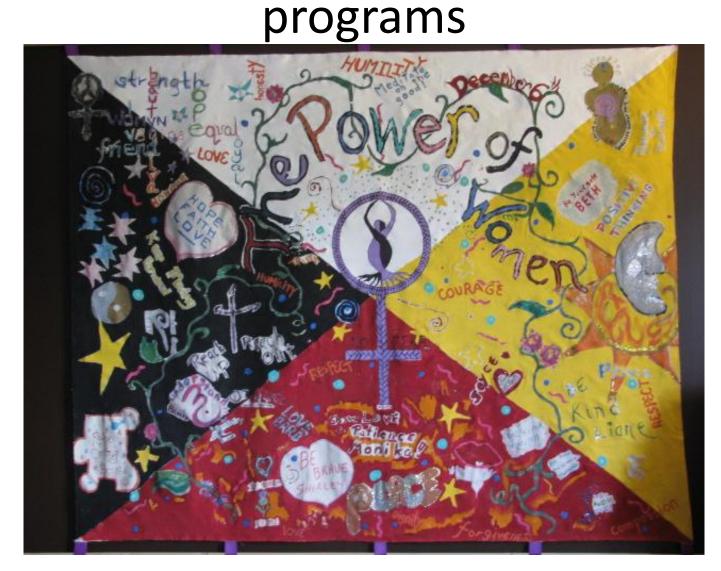
Lauren Power MSW RSW

Canadian Domestic Violence Conference 3

With thanks to artist Natalie Stokes



And all the women who share in our



Muskoka Parry Sound Sexual Assault Services (SAS)

- We are located in a primarily rural district (cottage country) 2-3 hours driving time north of Toronto. There are 6 towns, lots of villages...
- Our programs comprise both rape crisis centre funding (MAG) and long term mental health (abuse) treatment funding (Lhins - Health).
- Our mandated client group is women aged 16+.
- We have 5 full time and 2 part time staff. (7 FTE)

The Survivor to Thriver Model

- Our agency has been successful in raising public awareness regarding the issue of sexual assault in our communities, through:
- Public ed. campaigns including outreach
- Women's drop ins (one in each district at present)
- School programs (Peer Support model) and other creative methods including banners at local hockey arenas and a billboard campaign.
- We are now co-located with 'victim's' programs and have co-located also with the YWCA and shelters
- Further outreach is now accomplished by utilizing a nurse practitioner clinic – donated space

The Women's Drop Ins

- Part of our strategy is in embedding the possible experience of sexual assault into the wider context of women's lives. (1 in 3)
- Our women's drop in programs (2) provide a regular morning or afternoon out to experience a speaker or event with other women
- Education regarding numerous women's issues is possible in this framework
- We problem solve child care and transportation together.

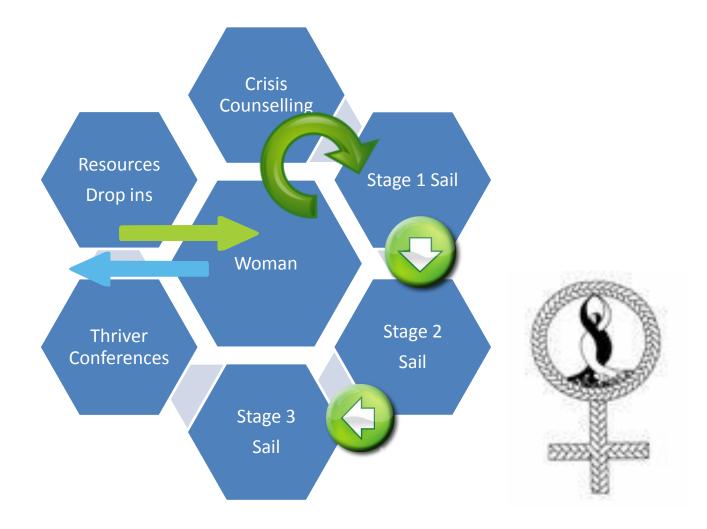
The Survivor to Thriver Model

- We know 1 in 3 women experience sexual assault and as a result of our outreach and need in our communities, referrals to the agency therapy program (Sexual Assault Intervention for Living -SAIL) climbed steadily to the point there was a *two year waiting list for the SAIL program.*
- After several years of struggling with the growing waiting list, and the problems it creates, we shifted to an *alternate model* of service.

The SAIL Program

- Our model is a *structured* intervention which supports most women to move directly into group programs and provides a quick assessment for all new referrals
- We utilize women's immediate *motivation, curiosity* and drive for wellness when they initially come to counselling for the first time to put them right into a 'group' with other women survivors
- Majority of women have or could have a diagnosis of PTSD or complex PTSD, ('borderline') and addictions (30-40%), eating disorders, (15%) *trauma spectrum

The Survivor to Thriver Model



The Survivor to Thriver Model

Trauma informed

- CBT, DBT, TT, group
- > Duration
- Attachment style

Feminist informed

- Analysis of VAW
- Advocacy + Empowerment

SAIL Therapy Program

- Stage One:
- *Four workshops* which engage women in learning about trauma and healing (all on conf. website)
- 1. You are Not Alone
- 2. Understanding Trauma
- 3. Trauma, Emotions and Memory
- 4. Increasing your Resiliency... then a certificate
- **No requirement for personal disclosure

Individual appointments

- After the workshop series, we meet individually with each woman to debrief her experiences and decide on what/if there will be a Stage 2
- Women typically begin sharing by the end of Workshop 1, but we help them with boundaries
- Most who complete the workshops will go on to stage 2 group, a few to stage 2 individual therapy, but some stop there...
- We don't offer everyone individual therapy
- Short term crisis counselling is always available

SAIL Program

- Stage Two
- Women in this stage are typically active in weekly group or weekly/bi-weekly individual therapy
- The group program runs mid Oct.-Feb. with a two week break, then again March-mid June.
- Women commit to a 4 month block, then reassess, can come multiple times.
- (usually 2 years is max, many come for 1)

Stage 2 Program

- Weekly group of 8-12 women, 2 facilitators, 2.5 hours
- *Pot luck lunch or dinner social time
- Clear 'draft' boundaries given in writing, verbally discussed and reinforced when needed by leaders and group members
- Women have input to topics, and some open groups, focus on issues related to sexual assault and VAW, with an aim to creating a safe discussion period in which women can share at their own pace and provide peer support, process emotions and learn and practice skills

Individual Counselling Model

- Most people feel more comfortable with individual counselling, but this can also maintain the sense of shame and secrecy regarding a sexual abuse history
- The therapist/client model has inherent power differentials, and can reinforce the sense of 'less power, less competence' for clients
- For some, individual intervention is still required, and these women are *quickly visible* in the workshop setting – severe dissociation + withdrawal, maybe active addictions
- Trauma and attachment informed
- Consulting psychiatric assessment through telemedicine is possible
- Encouragement/coaching to attend group if/when ready

SAIL Program

- Stage 3 (2 small groups at present 3, 2)
- Small groups with women with complex trauma challenges and present life difficulties who have gone through Stage 2 group
- DBT approach emphasis on maintaining self care and emotion regulation behaviours, learning and practicing relationship skills through peer and therapist support
- More goal focussed

The Survivor to Thriver Model: Our Staff

- Creating and maintaining good boundaries
- Awareness of trauma impacts and VT, need for diverse experiences, creativity, evolving journey
- Being able to say no, avoiding the 'rescuer' role with others and modelling this
- Using a business model for our economics, but using a humanistic feminist framework for our work with each other (always respect, less hierarchical)
- Creating and sharing resources, realizing the resources each woman brings (clients and staff)
- Not viewing our clients as 'different' from ourselves

Our own work – Self Care and awareness of Vicarious Trauma issues

- Flexibility, variety, creativity, advocacy, good communication and conflict resolution
- Management mindful of sensitivities to power dynamics, heightened in woman abuse work
- Self care seen as part of our work, which includes priority for our needs too
- Clinical consultation and awareness of T/CT
- Culture of abundance with scant resources

The 1st Survivor to Thriver Conference

- In 2009, we applied for a Trillium grant to host a conference for the women who use our programs. Shelter residents were also invited.
- We hosted 100 women at Hidden Valley Resort in Huntsville for a two day conference of wellness workshops, information about trauma and healing, and each woman received a half hour 'self care' treatment.

The 1st Survivor to Thriver Conference

- Two women provided keynote addresses, both of whom had come through the local shelter program for woman abuse, and the SAIL program as well.
- Their speeches (and a song) electrified the audience as did the knowledge that the entire room was packed with other women who had shared sexual assault.

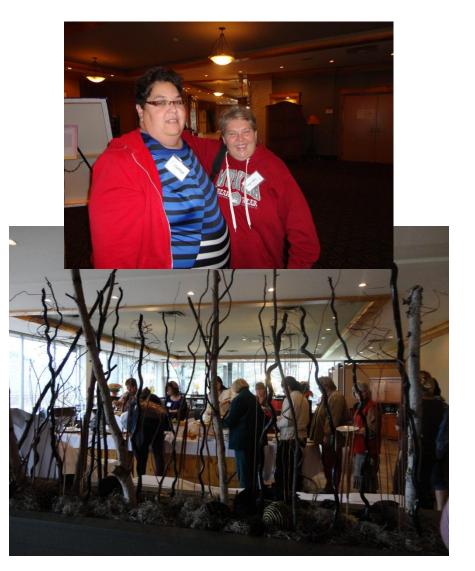
The Survivor to Thriver Conferences

- Response to the first conference was tremendous.
- We now have held two further conferences, and have four more planned over the next two years (day conferences, @ 50 women)
- The feedback continues to be highly positive. Women loved it, and the evaluations reflected the following: 'We, as women, can heal when we help each other. ' 'How strong our will is and what we are capable of surviving.'
- (Full evaluation details of 2012 on conf. website)





Survivor to Thriver Conference Fall 2012





Survivor to Thriver Conference Fall 2012





Impacts of the new Model

- Able to reach each woman on the wait list and offer service, now <u>no wait list</u>
- Increased knowledge base in the women with regard to sexual assault, PTSD, trauma physiology, need for self care and reasons why (still anecdotal, evaluations on conf. site)
- Women more ready to accept and participate in group therapy
- Fewer clients self harming!

Impacts of the Conferences

- Anecdotally, women expressed great reduction in their sense of guilt and shame regarding their assault history
- Women in therapy programs were able to make accelerated progress and sustained change
- Connections made with other women have resulted in friendships and less isolation
- Women are more involved in advocacy, speaking out with friends, family and in their communities

Muskoka Rose! (Feb. 14, 2013)



One Billion Rising Muskoka

- In our Muskoka District, with 57,000 permanent residents, more than 500 women and men took part in the One Billion Rising anti-VAW initiative in 6 separate venues!
- Our agency partnered with MWAG and the YWCA to co-sponsor the organized events...
- In addition, numerous schools and others held their own events... We are still tabulating...

Namaste

- Thank you for your interest in this program ...and for all that you do in our field.
- Remember, you *are* the change you want to see in the world! (Gandhi)

