Knowing how to support Survivors

1. Basic tools
2. How trauma works
3. What to do if...
As a facilitator, you are there to hold a supportive space for survivors, encourage people to share their stories if they are ready, and witness the emotion that can go along with that experience. Here are some tools to help you connect and assist a survivor of sexual violence in saying what they need to say.

**Characteristics of a good facilitator**

- Warm
- Compassionate
- Patient
- Good Boundaries – able to see others’ lives as separate from your responsibility
- Able to listen with radical non-judgment
- Comfortable with silence
- Able to take in stories of trauma without suffering emotional harm
- Have a good support system and self-care rituals

**The best things you can say**

- Nothing. Listen. Be present with the person and their pain.
- I believe you.
- Is there anything that would help you feel safe right now, while we are talking? A more private space, a different chair, a sweater, a worry stone or a beanbag to hold?
- Would you like a hug? It’s ok to say no.
- It’s not your fault.
- I am so sorry that that happened to you.
- You did not deserve this.
- Thank you for trusting me with your story.
- You are not taking too much time or attention. I am so glad you feel brave and comfortable enough to talk with me.
- How can I help you right now?
- The only way through is through. It takes as long as it takes.
- It’s not fair that you have to go through this.
- Your feelings are totally valid.
- You are having a normal response to a messed up situation.
- You are brave and resilient for surviving what happened to you.

**Avoid**

- Pressing for details of the assault/s.
- Questioning why the survivor did or did not do _____ during or after their assault.
- Taking charge or being over-protective.
- Insisting the survivor take any action: report to the police, go to a support group, call a crisis line, tell their story to the group, or make a blanket today if they don’t want to.
- Blaming, accusing or judging.
- Asking too many questions.
- Jumping into rescue mode.
- Assuming the survivor does or doesn’t want to be touched. Some people can’t stand a hug at this point; others can’t make it without one.
- Telling anyone else about your conversation without permission.
- Offering support beyond your limitations.
Witnessing: the best thing you can do

The very best thing you can do for a survivor who is hurting is to simply be present with them while they experience pain and other emotions related to their abuse. This “simple” action is so difficult that many survivors have never had the opportunity to experience that kind of care.

What witnessing IS:

- Listening deeply, caring, and believing
- Staying with the survivor physically, mentally, and emotionally
- Being present and grounded
- Nodding, smiling, looking concerned, encouraging the survivor to keep speaking
- Letting the survivor cry, yell, laugh, or express strong emotions

What witnessing is NOT:

- Giving advice or trying to “fix” the person’s pain
- Saying “You should...”
- Taking over to tell your own story, or the story of a friend
- Talking more than the survivor
- Getting overwhelmed by your own anger, fear, or disgust about what happened

Ask open-ended questions

These are questions that cannot be answered with a simple Yes or No, but invite the speaker to go deeper. They are a good way to get you out of leading the conversation and center the voice of the survivor. Here are some great open-ended questions:

- How do you feel about that?
- What do you make of that statement?
- What’s your opinion about it?
- What do you wish had happened instead?
- Where will you go from here?
- What does your best self tell you about that?

Reflect feelings

This technique is similar to what’s often called “active listening” with a little extra. Listen to what the person says and rephrase what they are trying to convey, but add a word for the emotion they are expressing. This confirms that you have heard them on a very deep level, that you really see the person and are connecting with them through genuine empathy for their feelings.

For example, a survivor might say
“Some days I just walk around wanting to smash things.”

As an Active Listener you might say
“Smashing something sounds appealing some days.”

An even more effective skill is to name the feeling the person has conveyed, like:
“Some days you’re just overwhelmed with rage.”

You may not get it right! That’s fine. It’s especially true for many trauma survivors that the person’s feelings and their facial expression may not match. If what you guess is the case, you will still get some good information if they correct you, like “No, I’m not a crazy powder keg of rage. I just get frustrated.” Sometimes it may be helpful to talk about the discrepancy, like “I see that you are laughing, but I bet that was a pretty terrible moment for you.”
Give people choices

In working with sexual assault and abuse survivors, it’s essential to give people choices often and whenever possible. When a survivor was assaulted their choice was taken away from them. Giving people choices is an essential part of the process of re empowerment.

During the workshop and in talking with survivors you should avoid pressuring a survivor to do anything, including making a blanket or talking about their experience. Within the workshop format, EVERYTHING is optional for survivors. Survivors are the experts on their own needs and resources. They have already been through an experience where their “NO” was not respected. It will never help to push someone towards what you think they need to do.

Examples – choices you can offer:
- Share or pass
- Markers or paint
- Inside or outside
- Talk or be silent
- Chair, sofa, or stool
- Bring the music you want to hear
- Display your blanket in the local exhibit or keep it out

Maintain boundaries

Survivors of interpersonal trauma have had their boundaries violated, usually multiple times, sometimes up to the point that they don’t even feel they have them (or have a right to them) anymore. When in a facilitator’s role, maintaining boundaries is how you can signal to someone that you are safe. If you break a boundary, even in “positive” direction and with good intentions, (giving out personal information that you would not normally share to connect with them, stepping into a rescuer role, etc) that signals that you are someone who will break boundaries, i.e. you are not safe.

Know your own limits

There’s a general guideline in the world of trauma counseling: “Don’t open a box you can’t close.” This is especially important to bear in mind if you are a facilitator who does not have a strong background in mental health care training or experience. Most people who attend a workshop might need support, witnessing, or compassionate listening, but will be able to cope on their own after they leave the session. However, it is possible that you could unintentionally coax a survivor past the point where you can safely support them. If you sense that a survivor needs more support than you are able to give (and there is nothing wrong with you being clear about your own capacity as a support person!) you can connect them to resources, like a local crisis center or hotline. Check out the “what to do if...” section for some additional resources.
How to respond to self-blame

Sexual assault is NEVER, EVER, under ANY CIRCUMSTANCES, the fault of the victim. The perpetrator made a decision to violate the survivor’s trust, agency, and their body. That’s where the blame belongs. At the same time, self-blame is probably the only thing nearly all survivors have in common.

It is natural to think about how you could have prevented a terrible event in your life. Survivors are showing a certain amount of resilience and self-preservation by thinking those thoughts. If your rape was your fault, it implies that you could have stopped what happened to you if you’d made different choices. Taking the blame can be a way of masking the total terror of realizing you were not, in fact, in control.

Self-blame phrases you might hear:

“It was my own fault this happened.”
“What did I do to cause this?”
“If I did ________, maybe I could have stopped it?”
“I should have known better.”
“I know it wasn’t my fault but...”

Taking on that blame may be an instinctual shield, but it ultimately doesn’t serve a survivor on the path to healing. Gently describe what you see happening and call self-blame out as a lie. You can help the person articulate a distinction between “I wish this never happened” and “I feel guilty that I let this happen.” Then you might want to talk about the purpose of self-blame; a normal, natural way to try and claim you power back when it was taken from you.

As a facilitator you can never say “It was not your fault someone hurt you.” enough times. Even if the survivor is a smart, capable person who totally knows that – on a good day – say it anyway.

Try “I know you know this, but sometimes it just helps to hear someone else say it. What happened to you was wrong and it WAS NOT YOUR FAULT.”

[Images of textiles with messages: “I still remember vividly the sensation of your cold wet hand covering my mouth” and “2 drunk 2 talk = 2 drunk 2 fuck”]
How trauma works

Don’t ask leading or prying questions
Make space for and encourage people to tell their stories. Don’t push. Don’t ask for details. Don’t follow any curiosity you may have. When in doubt, let there be silence.

Survivors will generally talk about as much as they are ready to process at that particular place in their healing. The best way to not get too deep for you both to swim back to a safe shore is to let the survivor lead.

Get support for yourself
One of the most fundamental counseling skills is to figure out how to sustain your stamina while you dig into this important, intense work. In order to come back and support survivors tomorrow, you need support yourself today. Make sure you drink plenty of water and eat food that will nourish you well as you prepare to be a facilitator. Get plenty of rest and maybe a little exercise. Make a plan for how you will spend the evening when the workshop is over. Will it relax you to watch a movie? Eat your favorite comfort food? Take a long walk with your dog? Make the plan for self-care ahead of time, before you are exhausted and spent.

This is especially essential if you are a survivor yourself. Treat yourself as gently and compassionately as the people you are caring for. Remember that you are a person too, and you also have delicate emotions that need attention and respect.

Trauma occurs during an experience (rape, abuse, war, natural disaster, fire, car accident, witnessing violent acts happen to someone else, etc.) that causes intense fear, helplessness, or horror due to physical threat of death, serious injury, or a breach of physical integrity.

“Integrity” here means both impenetrable wholeness and bodily autonomy. Touching someone sexually without their consent causes trauma. A trauma is a terrifying event that temporarily overwhelms the individual’s ability to cope with the experience.

Triggers
Trauma physically rewires the brain. New pathways are sliced into the brain that make connections back to the moment of imminent threat. If a certain song was playing during a rape, it may become a trigger – hearing that song can cause an instant, involuntary panic reaction as the fresh neural pathway formed during the trauma is stimulated in the survivor’s brain.

A trigger might be a sound, a color, a smell, a certain location or specific pressure of a touch, a spoken word, or an anniversary date. One step in recovery for some survivors is to locate and isolate triggers so they can be avoided.
Post Traumatic Stress Disorder (PTSD)

PTSD is a clinical designation – a mental health diagnosis that quantifies the more extreme reactions some people have to trauma. Not everyone who experiences a trauma will end up with PTSD. However, many survivors of sexual assault and abuse deal with these difficulties, at least temporarily, even though their symptom profile may not call for a PTSD diagnosis. While everyone experiences PTSD differently, there are three main types of symptoms:

1. Re-experiencing the traumatic event
2. Avoiding reminders of the trauma
3. Increased anxiety and emotional arousal

Other common symptoms of PTSD:

Anger and irritability
Guilt, shame, or self-blame
Disordered eating patterns
Feelings of mistrust and betrayal
Depression and hopelessness
Suicidal thoughts and feelings
Feeling alienated and alone
Physical aches and pains

Adapted from work by Melinda Smith, M.A., and Jeanne Segal, Ph.D. at helpguide.org

1. Re-experiencing:

Intrusive, upsetting memories of the event
Flashbacks (acting or feeling like the event is happening again)
Nightmares (either of the event or of other frightening things)
Feelings of intense distress when reminded of the trauma
Intense physical reactions to reminders of the event (e.g. pounding heart, rapid breathing, nausea, muscle tension, sweating)

2. Avoidance and numbing:

Avoiding activities, places, thoughts, or feelings that remind you of the trauma
Inability to remember important aspects of the trauma
Loss of interest in activities and life in general
Feeling detached from others and emotionally numb
Sense of a limited future (you don’t expect to live a normal life span, get married, have a career)

3. Anxiety and emotional arousal:

Difficulty falling or staying asleep
Irritability or outbursts of anger
Difficulty concentrating
Hypervigilance (on constant “red alert”)
Feeling jumpy and easily startled

Positive ways of coping with PTSD:

Learn about trauma and PTSD
Join a PTSD support group
Challenge sense of helplessness
Reframe faulty thinking and self-blame
Avoid alcohol and drugs
Practice relaxation techniques
Pursue outdoor activities
Get good sleep and exercise regularly
Confide in trusted confidants
Spend time with positive people
Spend time with animals
Spend time in nature
A survivor is having a flashback

Some survivors experience flashbacks, an intense, involuntary reaction to a trigger that causes the person to relive their trauma. During a flashback the survivor may become disoriented, detached from the present moment, and feel phantom sensations, see and hear things that aren’t there, or react as though they are currently being attacked.

For example, a survivor may feel aches and pains, irritation in the area where they were injured or other symptoms as if they had just been raped. Survivors may also exhibit other behaviors as if they were currently being attacked such as screaming, running, hiding, fighting, shutting down or being completely quiet.

Interjecting current stimuli or removing irritating stimuli may help a person during a flashback. If the smell of roses is making someone flashback, remove roses, rose scented perfumes, etc. from their environment. Or if a person’s flashback makes them feel as if they are in a wooded, swampy area, mention the floor, carpet, ceiling, sofa, etc. to them. This type of activity should be verbal and it may not be helpful to touch a survivor who is having a flashback. Be cautious in your actions, and get to know the survivor and what they need before you do anything at all.

Here are a few suggestions.

- Name it. Not everyone realizes that what they’re suffering is a flashback.
- Tell the survivor that you know it feels real to them, but that it is not really happening.
- Turn a soft light on.
- Turn triggering music off.
- Help to ground the survivor. Encourage them to take slow, gentle breaths. Tell them they are remembering. Talk softly to the survivor. Remind her of where she is. Ask her to describe her surroundings to you. Point out the fact that the abuser is not present. Remember that she may not be able to respond to you, but often is aware of your voice.
- Consider placing your hand on his hand or arm (not on the stomach, thigh, etc). This may trigger him further, but may also remind him of where he is.
- Inform the survivor of the importance of flashbacks. They are an opportunity to learn and understand. They are often seen as an indication that the person is ready to remember; that the body has information to share. Many people are very frustrated by lack of memory; flashbacks can validate a survivor’s experience. Just be there for them during and after the flashback. Don’t press them to talk about it, and avoid triggering them further.
- If they want to discuss what just happened, be open to that, while at the same time being aware that many of the emotions they felt during the rape or abuse may be present now.

Flashback characteristics adapted from rapevictimadvocates.org, suggestions from Minnesota Coalition Against Sexual Assault
More grounding techniques

When someone feels panicked or emotionally overwhelmed, they might benefit from using grounding techniques. These are suggestions to help someone feel calmer and more secure, remember they are “here and now” rather than in their moment of trauma, and settle down enough to feel in control of their body.

- Try to notice where you are, your surroundings including the people, the sounds like the music or people talking, the temperature, the texture of your clothing...
- Concentrate on your breathing. Take a deep cleansing breath from your diaphragm. Count to 10 slowly as you inhale, hold for ten, then exhale for a count of ten.
- Mentally remind yourself that the memory was then, and it is over.
- Give yourself permission to not think about it right now.
- Hold something that you find comforting, like a beanbag or a smooth stone.
- Notice how it feels in your hands. Is it hard or soft? Describe it out loud.
- Imagine yourself in a safe place. Feel the safety and know it.

from http://www.recoveryhope4all.com/grounding.html

Play the 54321 Game.

Name 5 things you can see in the room with you.
Name 4 things you can feel (“chair on my back” or “feet on floor”)
Name 3 things you can hear right now (“fingers tapping on keyboard”)
Name 2 things you can smell right now (or, 2 things you like the smell of)
Name 1 good thing about yourself.

from http://www.psyke.org/coping/coping_skills/

A survivor is currently in a violent relationship

Connect the person to a local domestic violence crisis center or call the National Domestic Violence Hotline at 1-800-799-7233.

Talk to the person about whether they will be safe today, and if they are unsure strategize about how to get to a safer place. If you feel comfortable you can make a Safety Plan with the survivor using this template: http://www.domesticviolence.org/personalized-safety-plan/

However, know when to let go! Do not put your own number into the safety plan or tell the survivor they can stay with you unless you already have an established close relationship and you feel SURE you will not also become a target for their abuser. BE CAREFUL!

Recognizing other red flags

If you see these signs, the survivor may be dealing with Post Traumatic Stress Disorder. Take these seriously, this person could be in danger. Don’t panic. If something alarming comes up, find a way to gently end the conversation and shift your goal from supporting the survivor yourself to connecting them with options for professional help. Don’t pressure the person to do any specific treatment (therapy, support group, AA/NA) unless they are in imminent harm, but do express that you are concerned for their safety.

Flashbacks and Nightmares
Depression
Drug or alcohol abuse
Eating disorders
Self-injury or cutting
Suicidal thoughts and actions

[STOP! If someone is talking about suicide, take them seriously. Express your concern. Ask if they are willing to call a Suicide Hotline like 1-800-SUICIDE (1-800-784-2433) while you are together. If you feel comfortable, create a safety plan with them using this template: https://www.suicidepreventionlifeline.org/learn/safety.aspx If not, take them to an emergency room or at very least make sure they get to a close friend or family member who can stay with them.]