



Sexualized trauma

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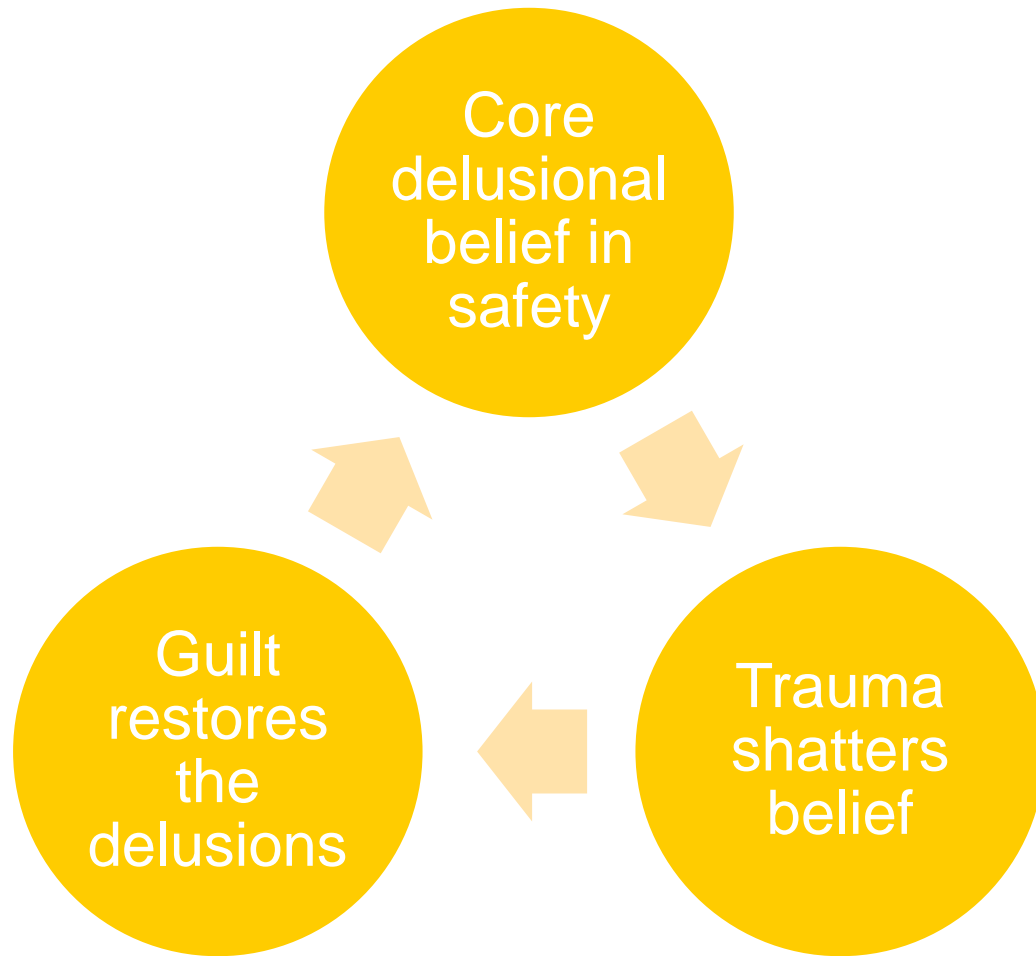
This presentation will cover:

- Victims and offenders.
- The human response to extreme threat.
- The cyclic nature of trauma.
- Suggestions for supporting victims of sexualized traumas.

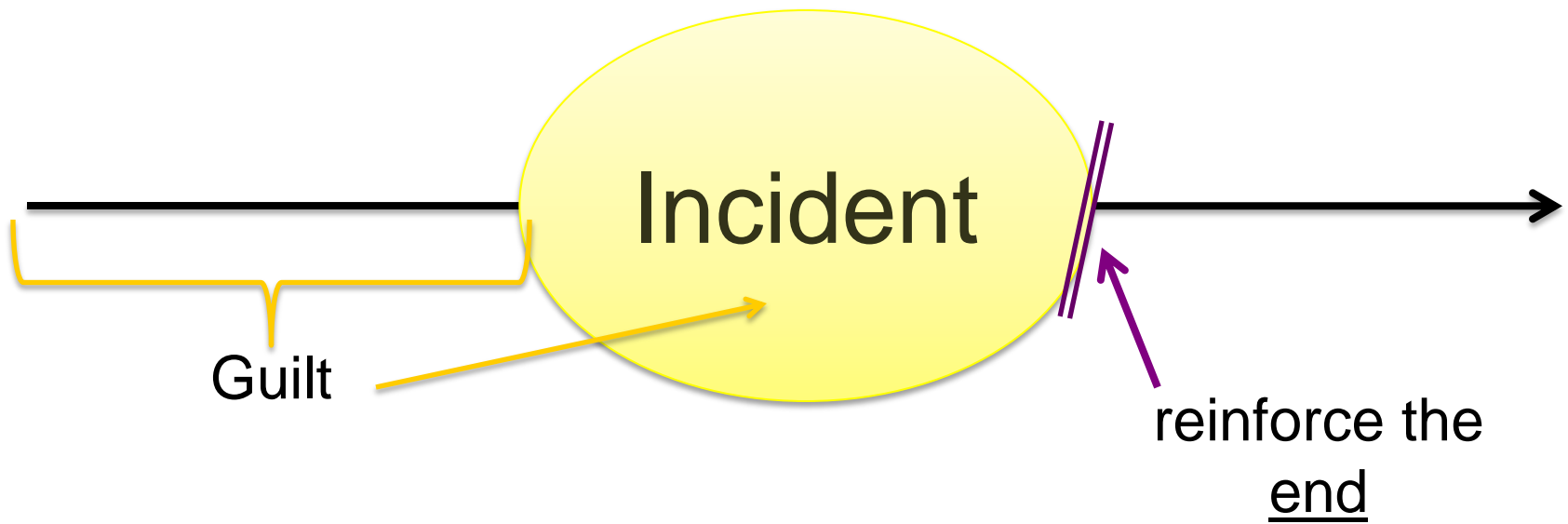


**The implications of guilt for
interviewing victims...**

Guilt is psychologically healthy.....



Disclosure and guilt.....

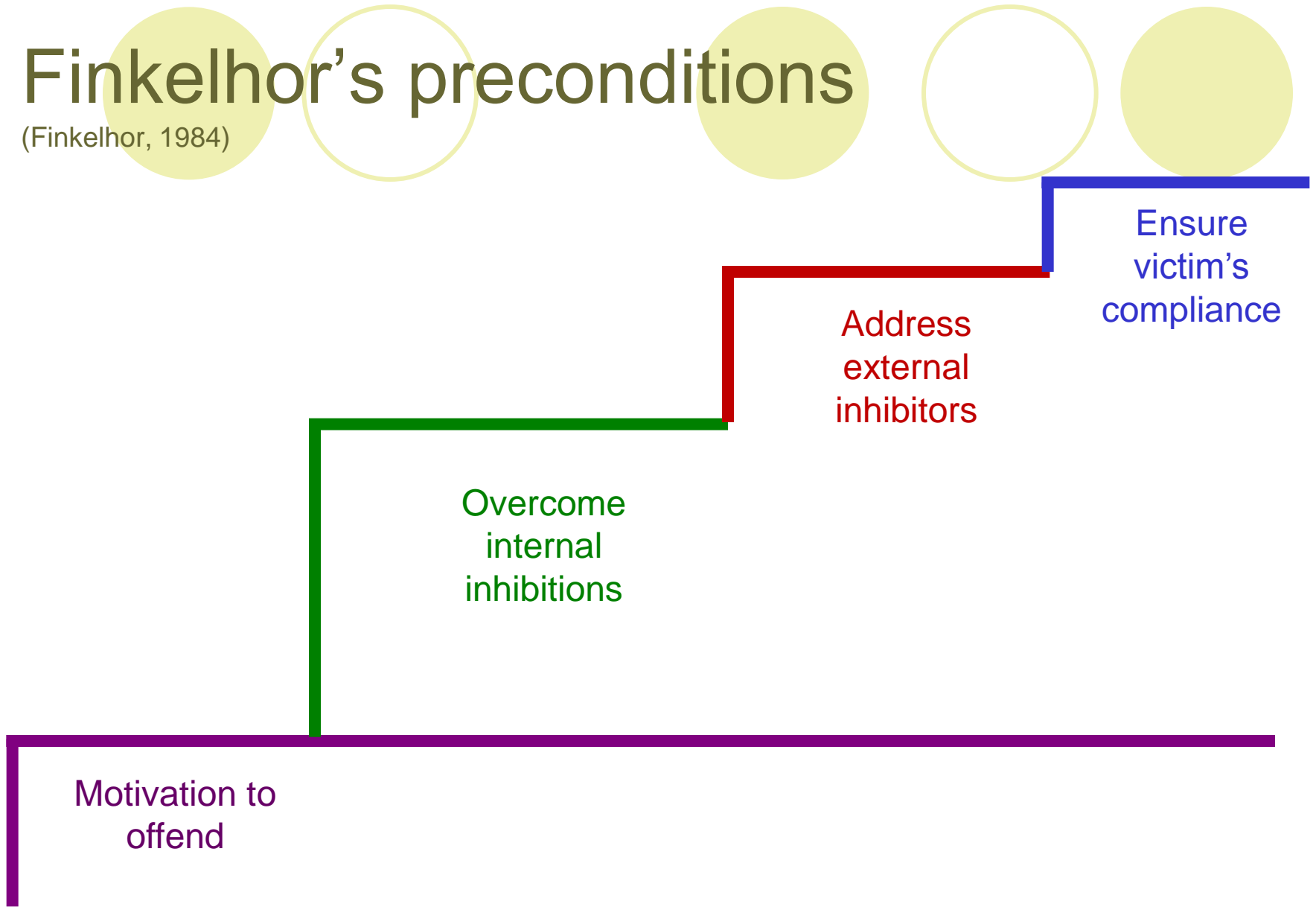




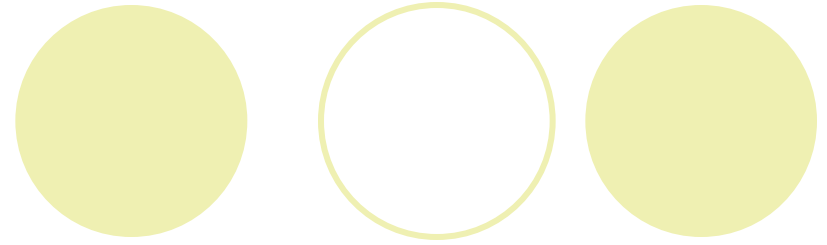
**Four steps to
offending.....**

Finkelhor's preconditions

(Finkelhor, 1984)



Put very simply:



The individual wants to offend



They find a way to square that with their conscience



They create an opportunity



They deal with any victim resistance and make every effort to 'get away with it'.....

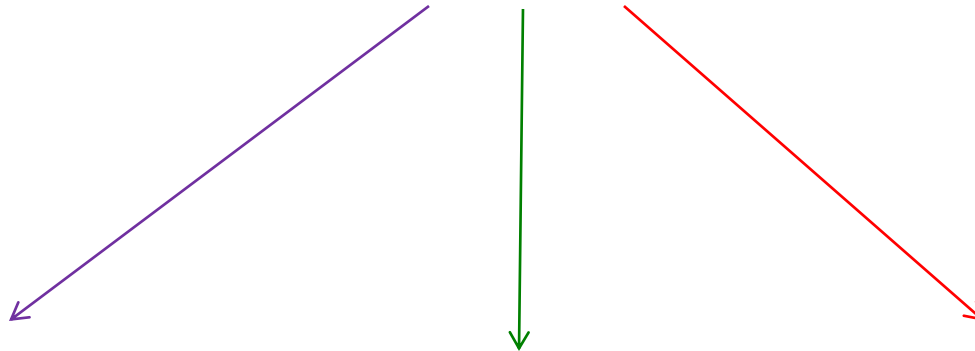


Motivation.....

Motivation:



Three Basic Theories



BIOLOGICAL

Sex / reproduction is a basic human drive; and rape seen as a mating strategy for relatively unsuccessful males.

PSYCHOLOGICAL

Sexual aggression is believed to be learned behaviour.

SOCIOLOGICAL

Rape is considered an inevitable product of patriarchal (male dominated) society.



Internal inhibitors.....



Internal inhibitors may include:

- Conscience
- Moral objection
- Timidity
- Empathy
- Ambivalence
- Social incompetence
- Physical debility

Ways to overcome them may include:

- Alcohol / drug use
- Fantasy (especially if accompanied by masturbation)
- Use of pornography
- Anger / rage / paranoia
- Normalisation through 'banter' with friends
- Cognitive distortions ("wonky thinking")



Cognitive distortions.....

Rapists' schemas

(Polaschek & Ward, 2002)

I am superior to other people and they should appreciate my want / need to assert my entitlement over them.

Women are unknowable / dangerous; they do not communicate in a direct manner.

The world is dangerous and other people are threatening. Need to 'get in there first' and/or 'get even'. *This is a non-sexual schema that generates interpersonal aggression.....*

Women are sex objects in a constant state of receptiveness.

My sex drive is uncontrollable; if a woman turns me on I will be powerless to stop.

Schemas



Creating opportunity.....

External inhibitors

Environment selection – considering potential inhibitors



Consider how / when victim(s) might enter the 'field'



Victim selection – vulnerability / accessibility / desirability



Consider any potential objection / opposition from others



Victim contact strategy

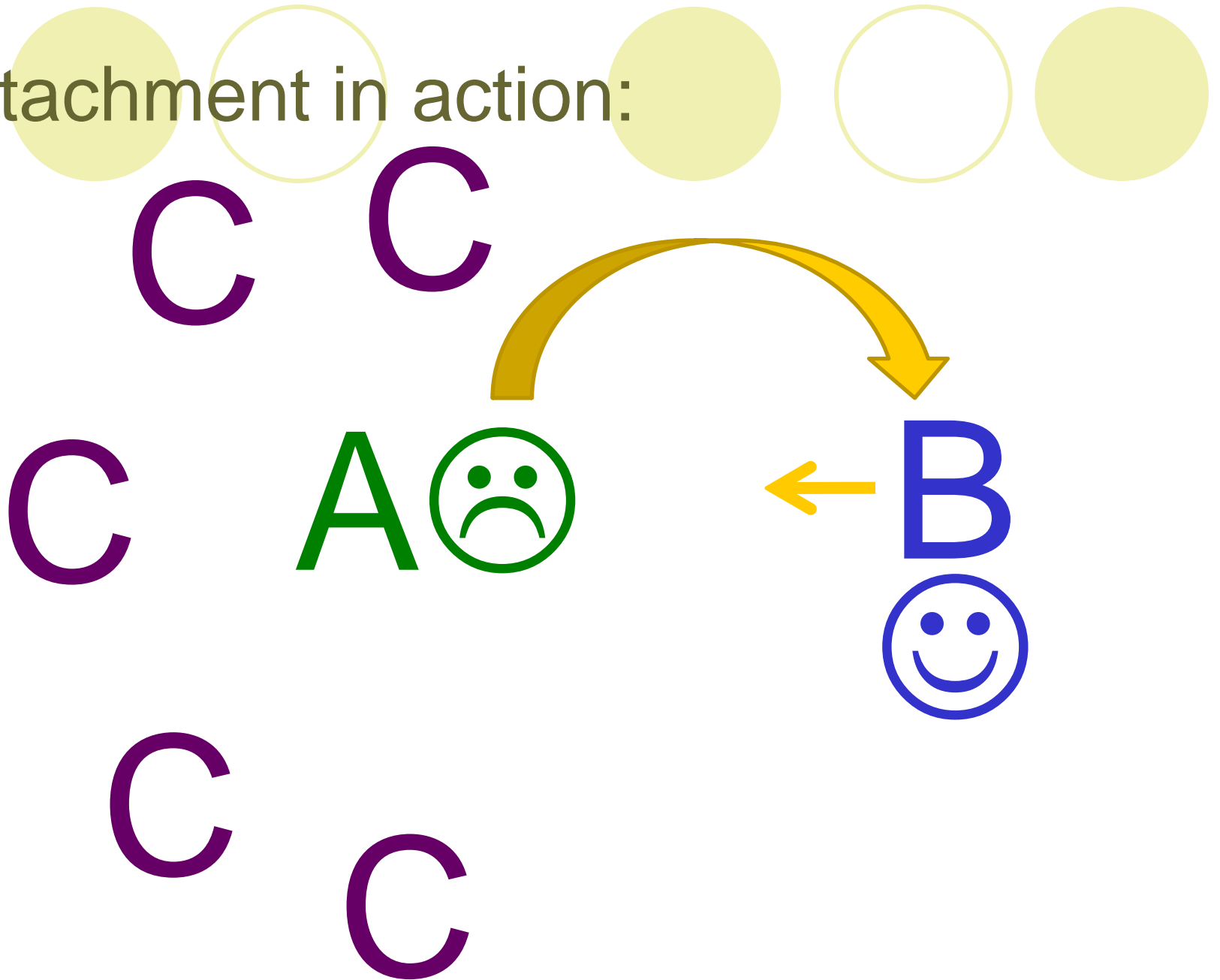
The text is centered on a white background. It is surrounded by six light green circles. Three circles are arranged in a horizontal row above the text, and three are arranged in a horizontal row below it. The top-left circle is an outline, while the other five are solid. The text is in a bold, black, sans-serif font.

**Overcoming victim
resistance.....**

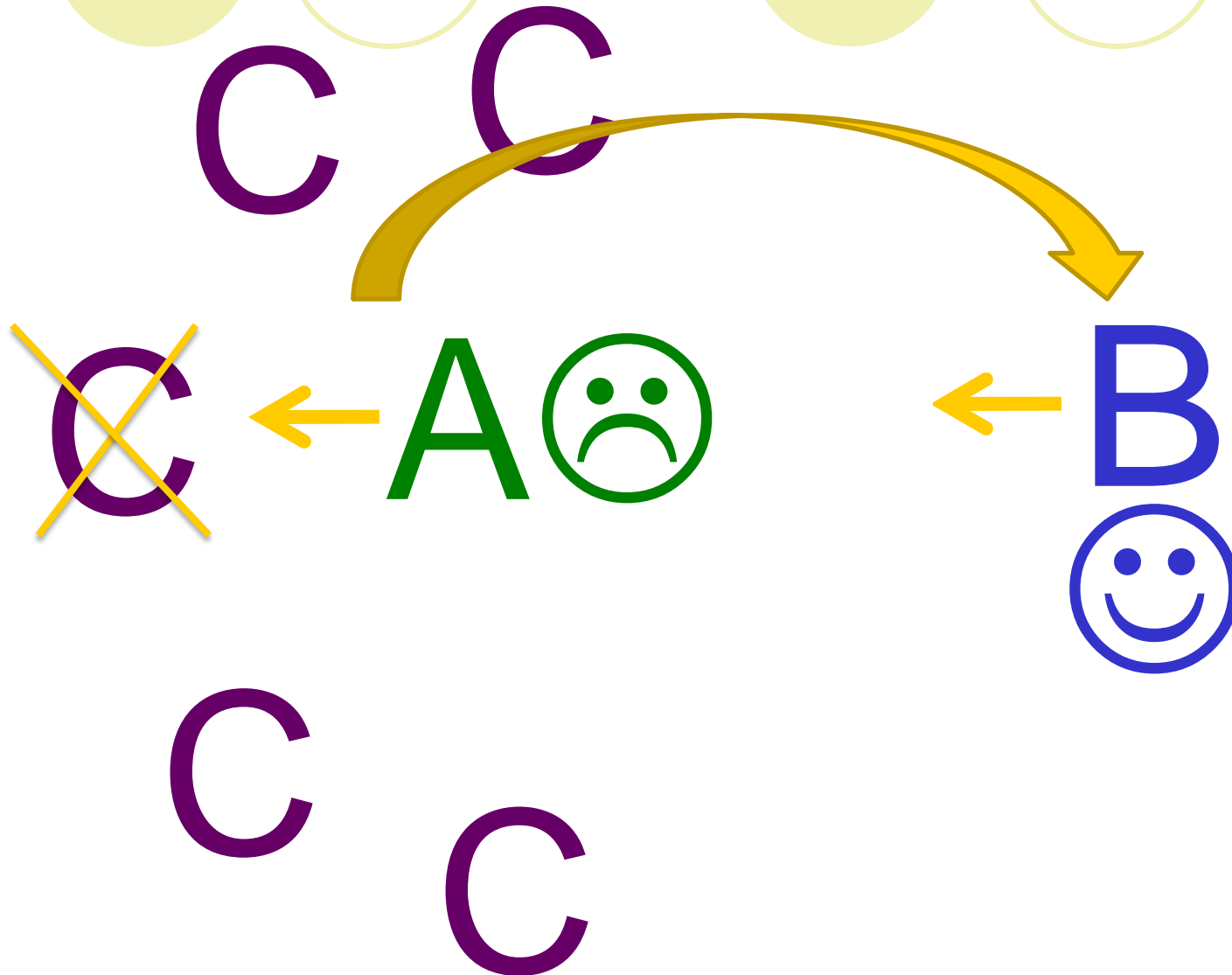
Ensuring compliance is relatively easy.....

- Targeting / grooming – attachment (of victim to offender) is likely to significantly contribute to compliance and silence.

Attachment in action:



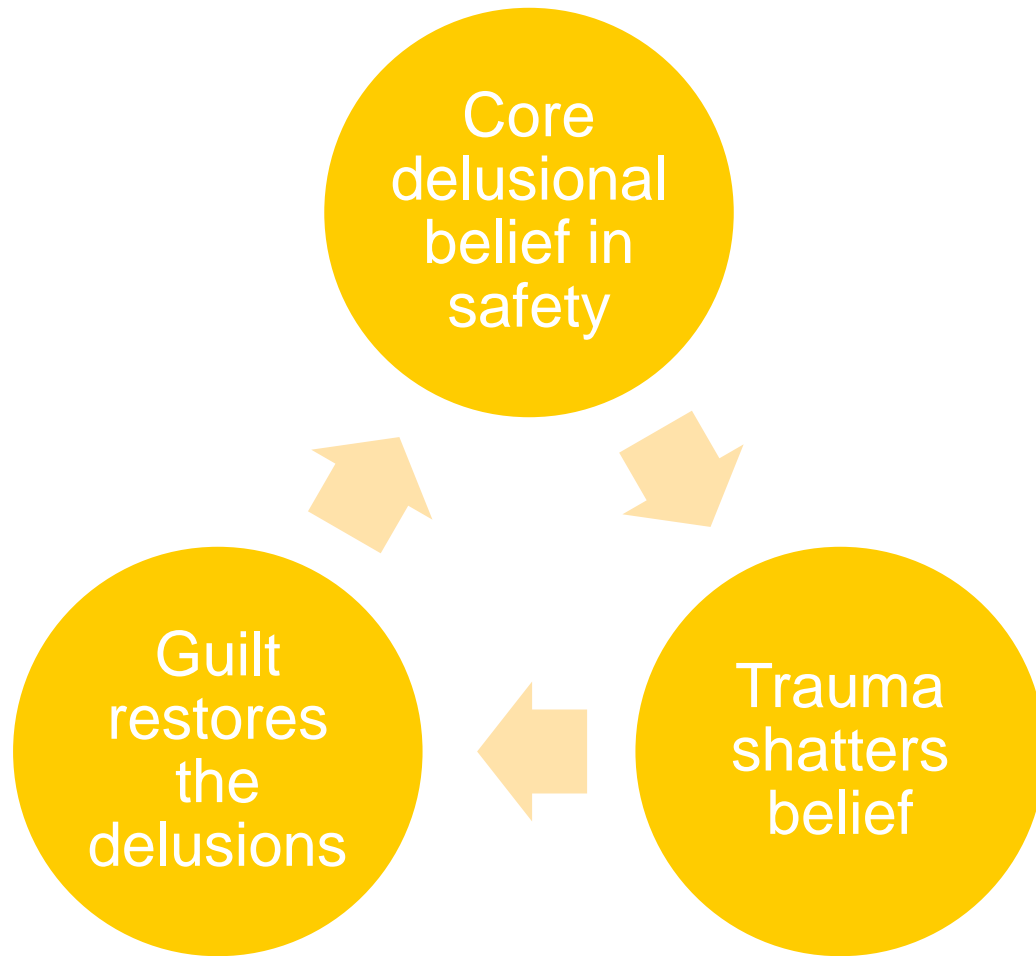
Attachment in action expanded:



Ensuring compliance is relatively easy.....

- Targeting / grooming – attachment (of victim to offender) is likely to significantly contribute to compliance and silence.
- Fear will likely pacify the majority of victims' and guilt will subsequently silence them.
- Violence or threats of violence may be used.
- Moral force or persuasion may be utilized.
- Offenders may share their cognitive distortions with the victim.

Guilt is psychologically healthy.....

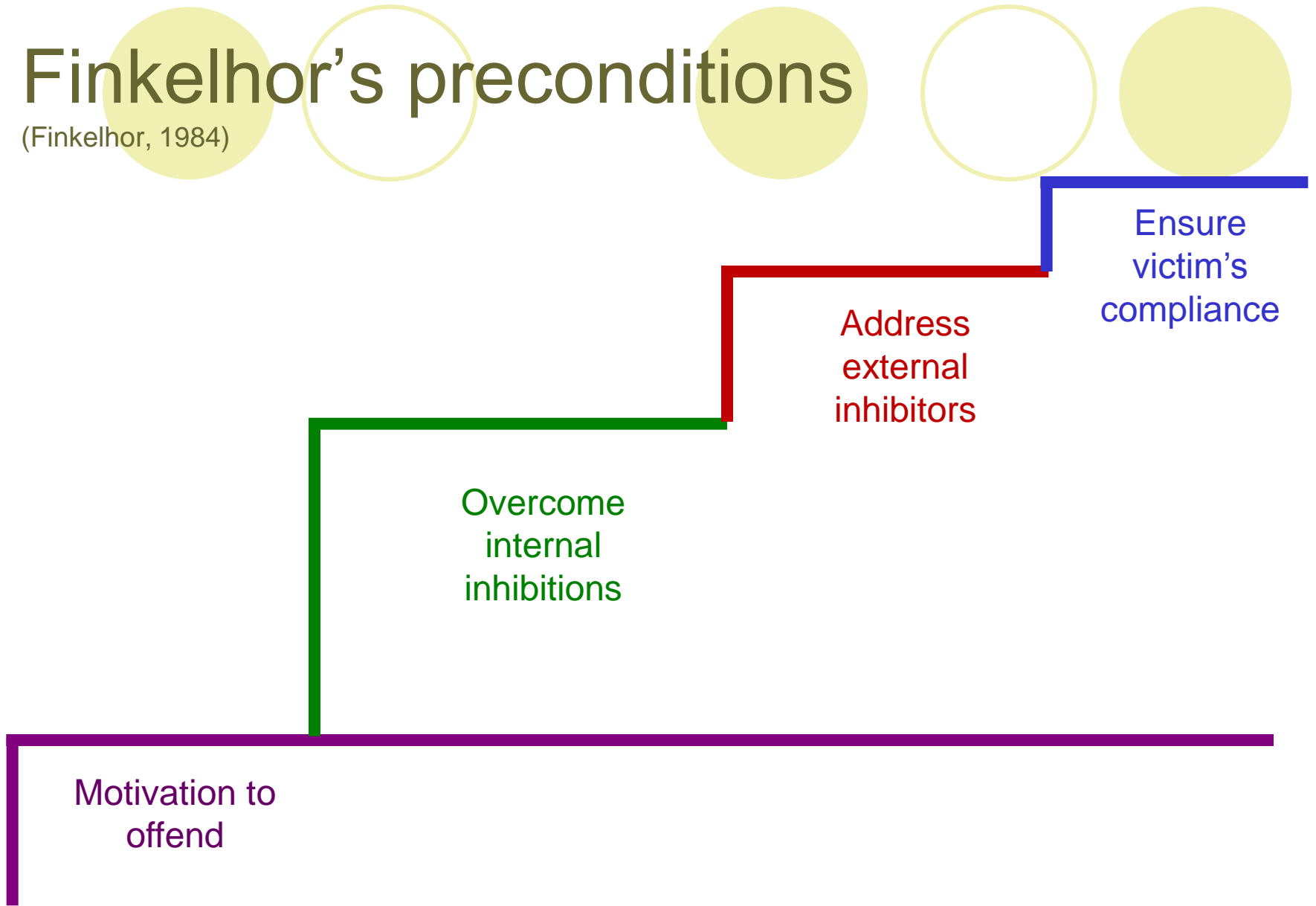


The background features several overlapping yellow circles and outlines. Some are solid yellow, while others are just yellow outlines. They are scattered across the slide, with some overlapping the text.

How can we utilize what
we know of sex offenders
in investigations.....

Finkelhor's preconditions

(Finkelhor, 1984)

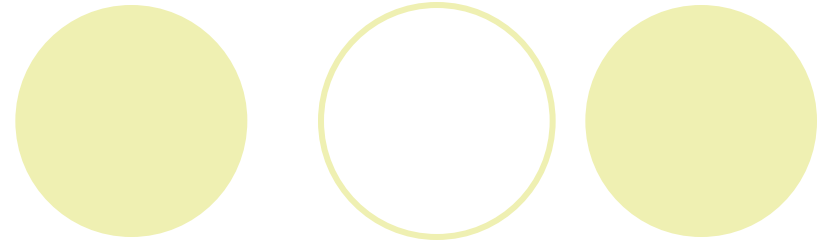


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**Human defensive
responses to threat....**

The Five Fs:

Defensive fear responses



● Friend

● Fight

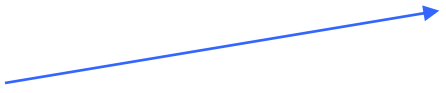
● Flight

● Freeze

● Flop

active defences

passive defences



Friend.....

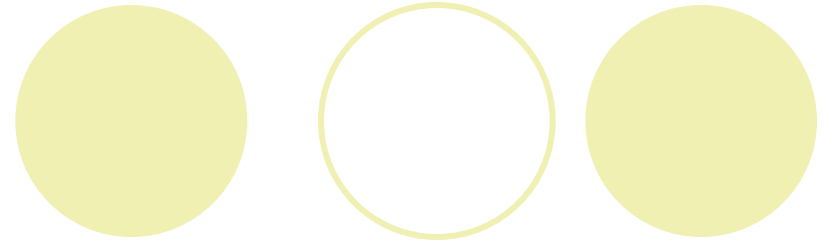
- Friend is the only *active defence* human infants are born with.
- The FRIEND defence is sub-divided into two further defensive responses:

Help me!

Social engagement
system

The Five Fs:

Defensive fear responses



● Friend

● Fight

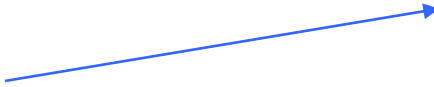
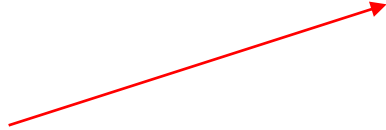
● Flight

● Freeze

● Flop

active defences

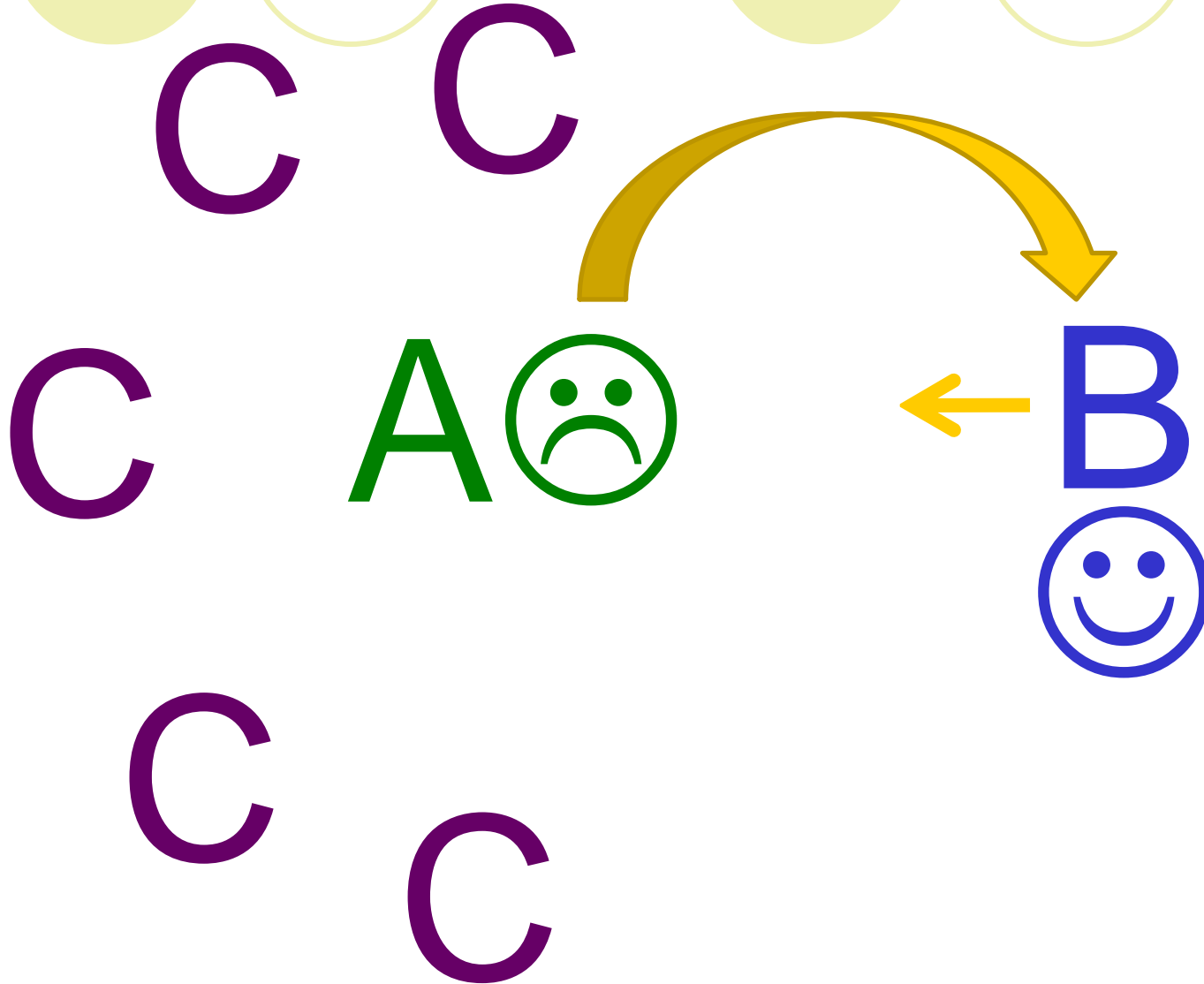
passive defences



The reasons for the underutilization of 'flight' in humans

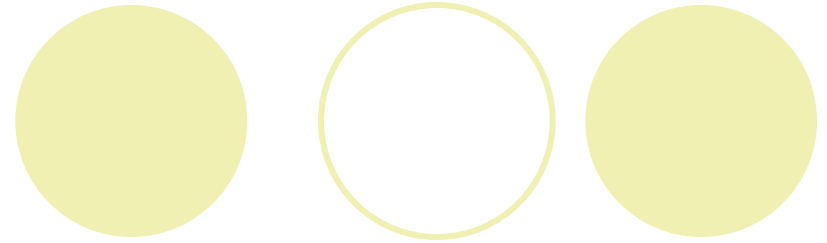
1. We cannot outrun our predators.
2. We do not run away from danger toward safety; rather if we flee from danger we move toward the person(s) and place(s) that we are attached to.
3. It is a sad fact that in UK people tend to be threatened by the person(s), and in the place(s), they are attached to.

A more generic experience:



The Five Fs:

Defensive fear responses



● Friend

● Fight

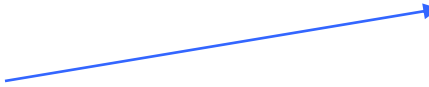
● Flight

● Freeze

● Flop

active defences

passive defences





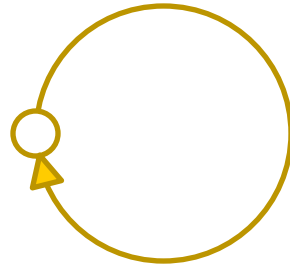
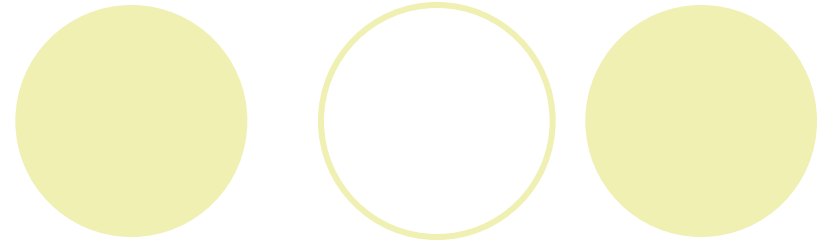
Important:

- The decision as to how to defend against a threat is not a cortical one.
- The amygdala acts in the way it deems most likely to ensure SURVIVAL.
- If a defence is successfully used it is likely to be utilized again.
- If a defence is unsuccessful it is unlikely to be used again.



Trauma is cyclic.....

Trauma is cyclic



Thoughts
Feelings
Body sensations
Behaviour

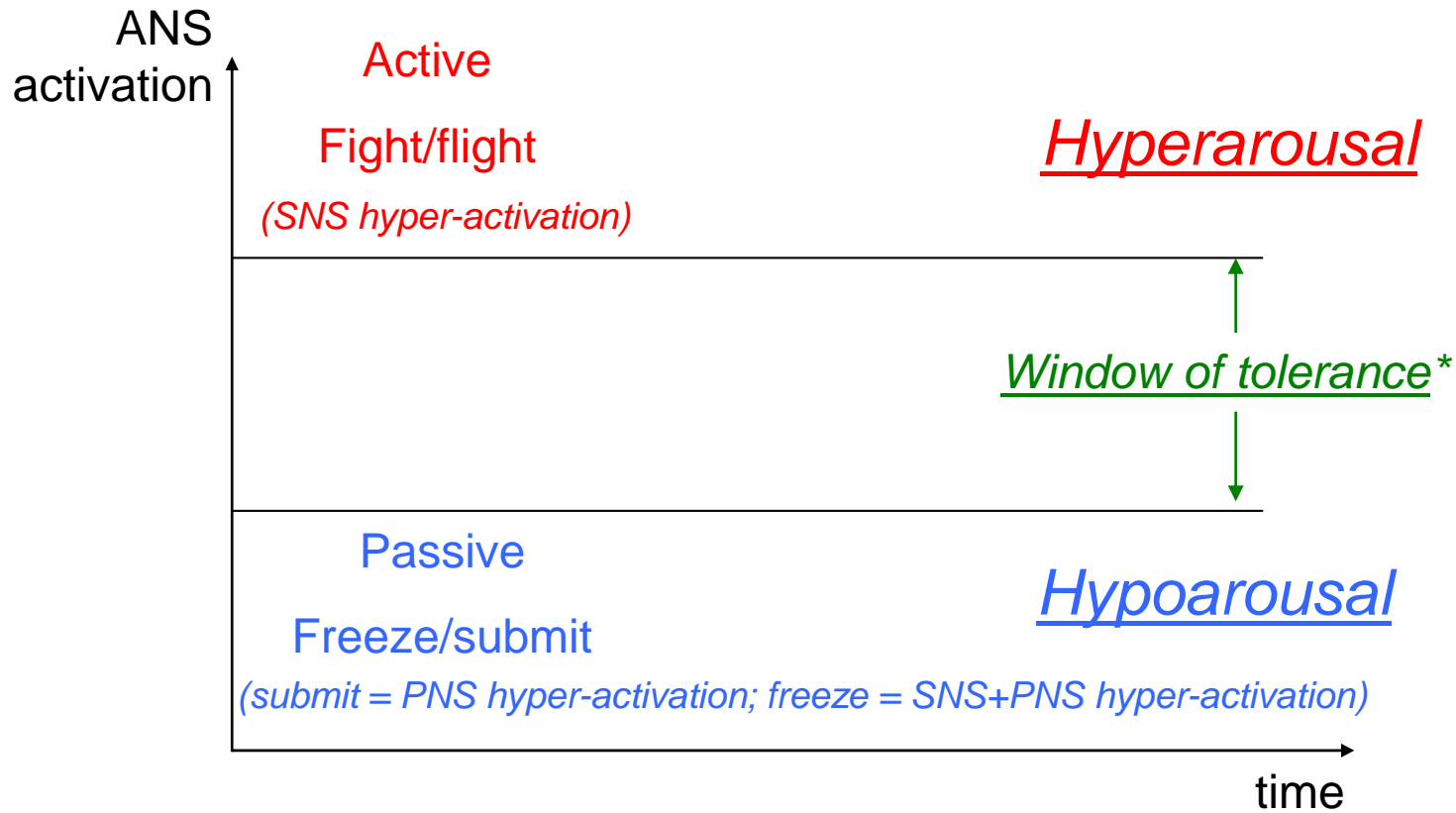
Breaking the cycle reduces crime

- Ice-skating metaphor.
- It is imperative that, in talking with victims about their experience, professionals ensure that they do not contribute to deepening the 'trauma groove'.
- If we can reduce the number of people vulnerable to meeting sexual threat with, often outdated, passive defences we can arguably reduce crime.



**Suggestions for supporting
victims.....**

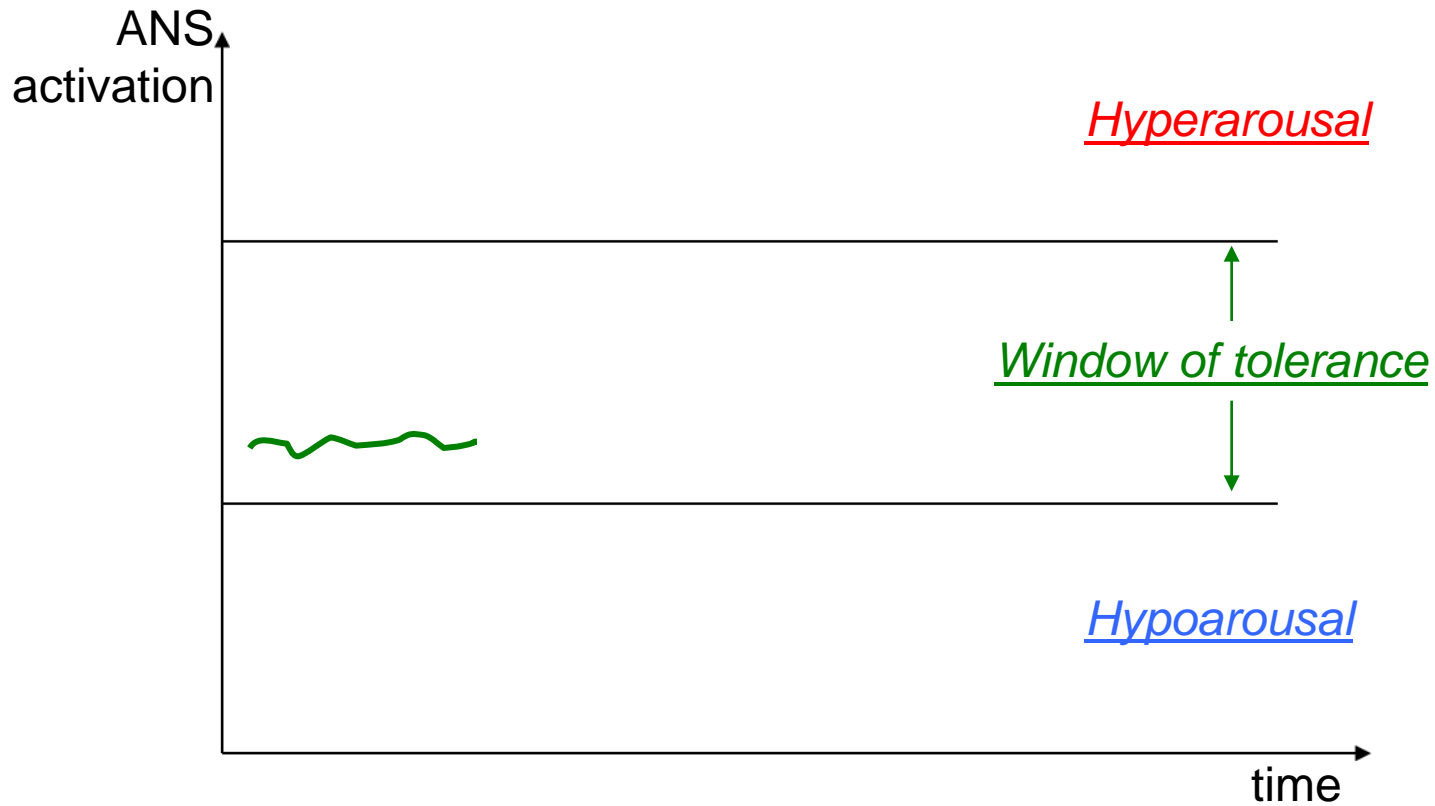
The Modulation Model



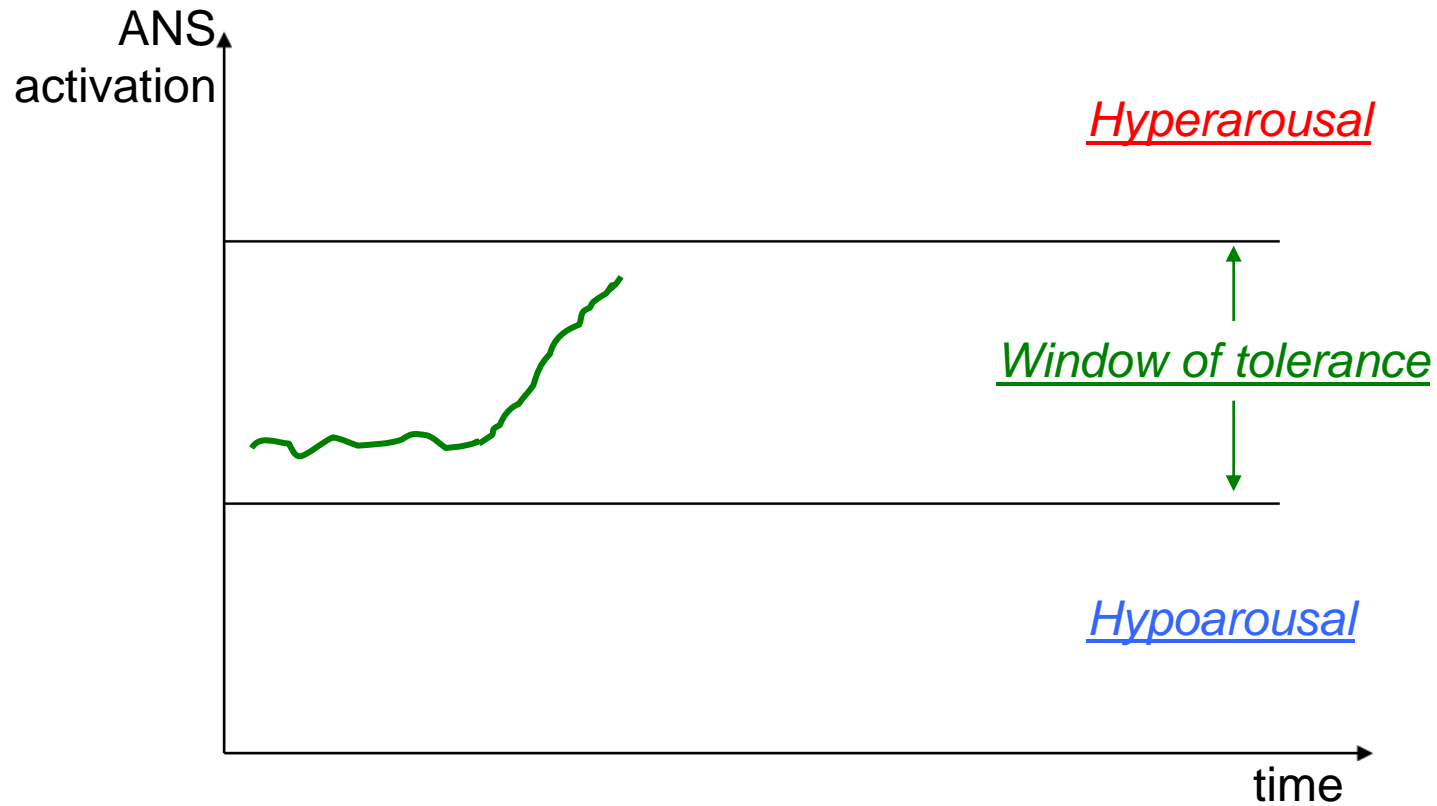
Ogden and Minton (2000)

*Siegel (1999)

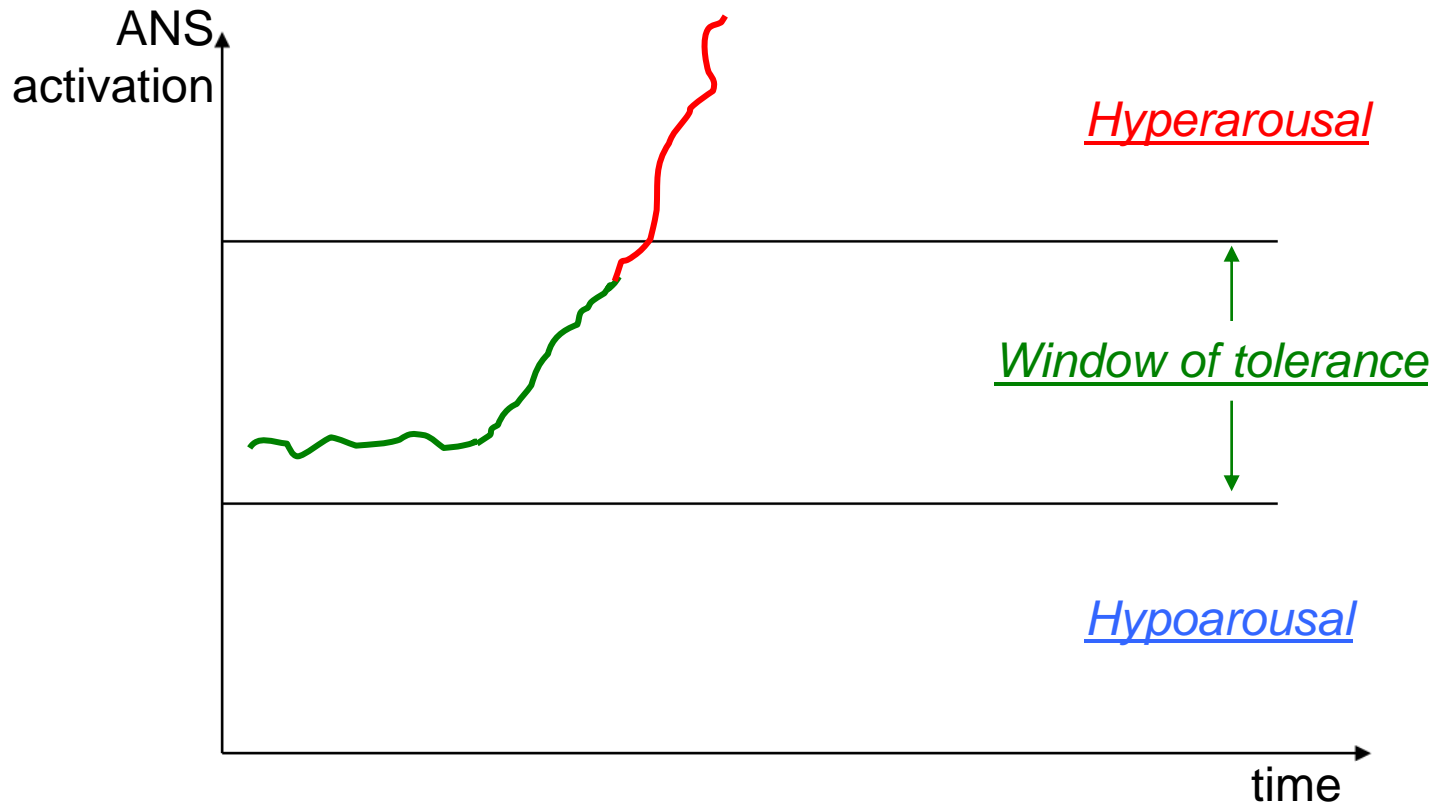
Walking alone in a quiet industrial park....



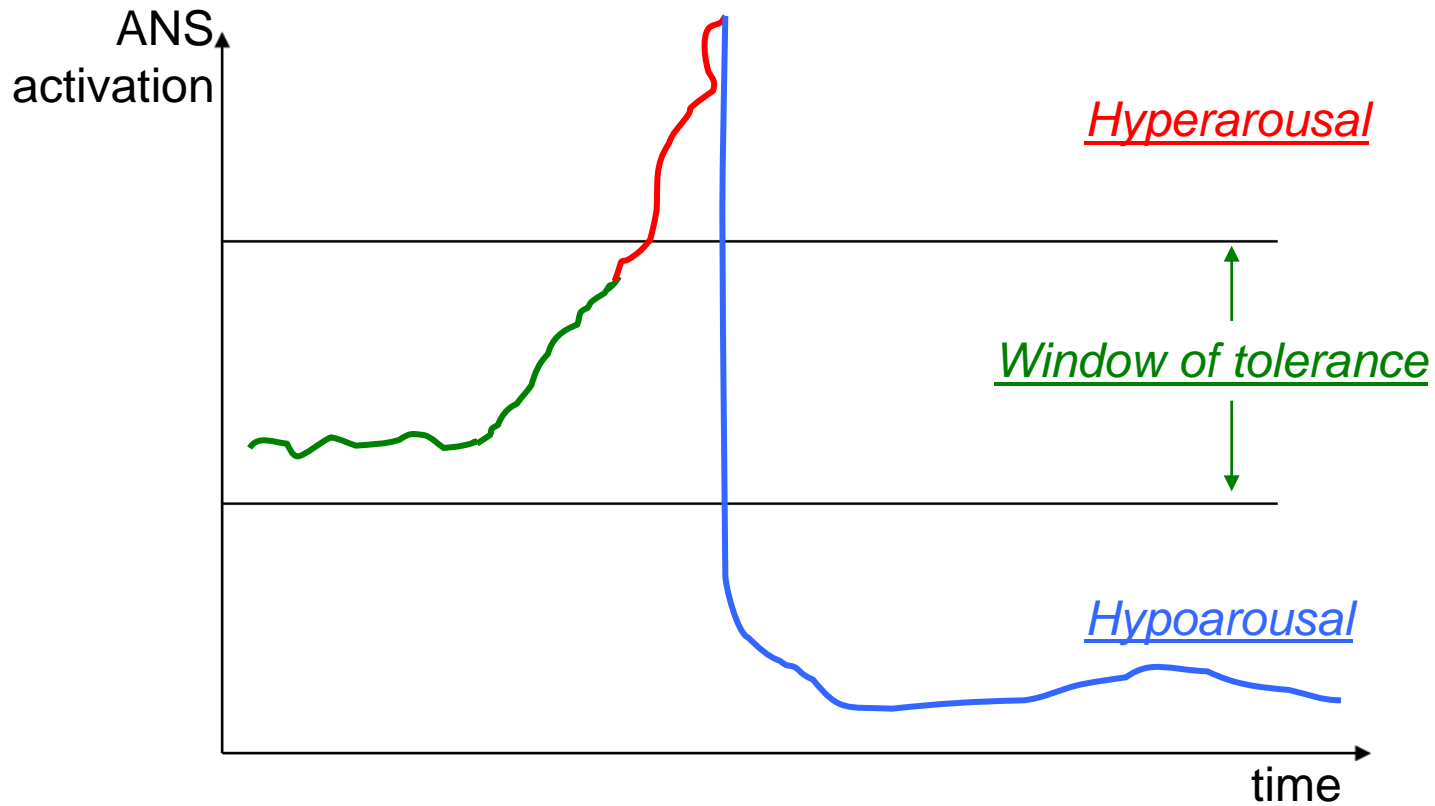
I hear quickening footsteps behind me....



From behind someone grabs my arm....



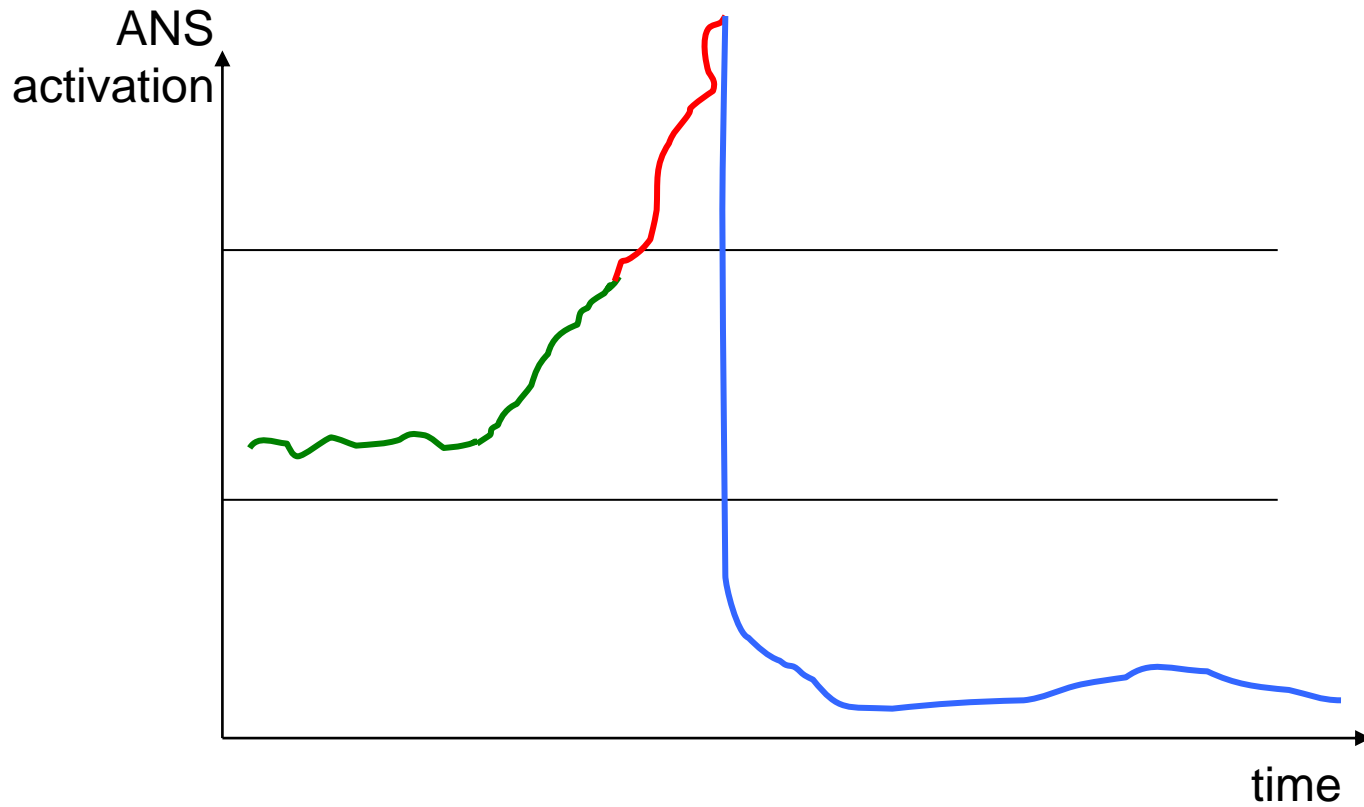
A knife is held to my throat.....





**Implications for interviewing
victims.....**

As I talk about my experience.....





Interrupting the cycle.....

How then do we interrupt the cycle?

- In short: we need to ensure that the victim remains within their 'window of tolerance'.
- To do this: we must first recognise if, and when, a person is outside of their 'window of tolerance'.
- Then: we need to know how to help them to regulate their ANS and return to their 'window of tolerance'.

Hyperarousal - fight/flight

SIGNS include:

- Faster, shallow breathing – emphasis on inhale
- Staring or scanning eyes
- Dilated pupils
- Pale, cold, often clammy skin (blood from skin to muscles)
- Increased muscle tension
- Sweaty palms
- Increased heart rate
- Increased blood pressure
- Trembling
- Mobility
- Rapid speech
- Racing thoughts

To aid ANS modulation:

- Encourage deep out breaths.
- Endeavour to keep cortex functioning!
- Ask simple questions focused on ‘here and now’ observable reality (e.g. “what colour are the walls”).
- Narrow focus (of thoughts and speech).
- Model slow, calm speech and breathing.
- Bi-lateral stimulation (e.g. rub hands together, take a walk...).
- Focus on current, non-threatening, reality (e.g. “right here, right now, nothing bad is happening”).
- Tense muscles (to ‘soak up’ chemicals)

(Ogden et al, 2006; Siegel, 1999; Rothschild, 2000)

Hypoarousal - freeze/submit

SIGNS include:

- Slower, deeper breathing – emphasis on exhale
- Vacant, often unfocused eyes
- Constricted pupils
- Flushed, warm, usually dry skin
- Decreased muscle tension (collapse through the spine)
- Compliance/submission/passivity
- Paralysis
- Slower heart rate
- Decreased blood pressure
- Feeling 'numb', 'dead' or 'empty'
- Stillness
- Slow, often apparently vacant speech, or no speech at all
- Disconnection

To aid ANS modulation:

- Encourage deep in breaths.
- Endeavour to keep cortex functioning!
- Overall aim is to introduce movement (grading very important here!)
- Ask simple questions focused on 'here and now' observable reality (e.g. "how many panes are there in the window").
- Widen focus (of thoughts and speech).
- Model more energy, lack of stuckness, cortical integration (may need to act as auxiliary cortex for a while).
- Bi-lateral stimulation (e.g. rub hands together, take a walk...).
- Focus on current, non-threatening, reality (e.g. "right here, right now, nothing bad is happening").
- Grounding

(Ogden et al, 2006; Siegel, 1999;
Rothschild, 2000)

Key principles:



- ANS activation is ‘infectious’ – always ensure you modulate your own activation whilst working with victims (remember: in-flight safety demonstration).
- Whilst recounting the trauma of rape the victim must always be supported to maintain contact with the here and now, non-threatening, reality.
- At all times the aim is to assist the victim in moving from a place of trauma-induced disintegration to a more integrated-self.
- In supporting the victim to modulate their ANS activation it is important to explain what you are doing and why. In this way you not only ensure that they have a degree of control over the process, you also teach them ‘techniques’ that will be invaluable to them in their ongoing recovery from the rape.



References

Herman, J. (1992). Trauma and Recovery. New York: Basic Books.

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