

Bibliography

- Bancroft, L. (2003). Why does he do that? Inside the minds of angry and controlling men. Berkley Books: Michigan.
- Bancroft, L. & Silverman, J.G. (2002) *Assessing Risk to Children from Batterers*.
<http://www.lundybancroft.com/articles/assessing-risk-to-childrem-from-batterers>. Retrieved: March 15, 2014.
- Bennett, L., & Lawson, M. (1994). *Barriers to cooperation between domestic violence and substance abuse programs*. Families in Society: The Journal of Contemporary Human Services. May, 277-286.
- Bland, P. J. (2001). *Screening chemically dependent battered women in NOT out of our programs*. The A Files Washington State Coalition Against Domestic Violence Newsletter, Vol. 3., No. 3, Pages 127-138, October.
- Callan, D. (1995). *Awakening the Warrior Within*. Nataraj Publishing: Novato, CA.
- Covington, S. S., Burke, C., Keaton, S., & Norcott, C. (2008). *Evaluation of a trauma-informed and gender-responsive intervention for women in drug treatment*. Journal of Psychoactive Drugs, 40: 387-398.
- Dayton, T. (2000). *Trauma and Addiction: Ending the cycle of pain through emotional literacy*. Health Communications, Inc.: Deerfield Beach, FL.
- Edmund, D. (2000). Women talk about substance abuse and violence. Rose Hill Press: Springfield, IL.
- Evan, K., & Sullivan, J.M. (1995). Treating addicted survivors of trauma. New York: The Guilford Press.
- Fazzone, P., Holton, J. & Reed, B. (co-chairs). (1997). Substance Abuse Treatment and Domestic Violence. Treatment Improvement Protocol (TIP) Series 25. U.S. Department of Health and Human Services, SAMHSA/CSAT.
- Finkelstein, N., VandeMark, N., Fallot, R., Brown, V., Cadiz, S., Heckman, J. (2004). *Enhancing substance abuse recovery through integrated trauma treatment*. National Trauma Consortium for Center for Substance Abuse Treatment (CSAT). Retrieved March 20, 2012.
- Gatz, M., Brown, V., Hennigan, K., Rechberger, E., O'Keefe, M., Rose, T., & Bjelajac, P. (2007). *Effectiveness of an integrated, trauma-informed approach to treating women with co-occurring disorders and histories of trauma: The Los Angeles site experience*. Journal of Community Psychology, 35: 863-878. doi: 10.1002/jcop.20186.
- Guidry, L. & Miller, D. (2001). *Addictions and Trauma Recovery: Healing the Body, Mind, and Spirit*. W. W. Norton & Company: New York.
- Harris, M. (1998). *Trauma Recovery and Empowerment: A Clinician's Guide for Working with Women in Groups*. Free Press: New York.
- Irons, R. & Schneider, J. (1997). *When is domestic violence a hidden face of addiction?* Journal of Psychoactive Drugs. 26, 337-344.
- Levine, P.A. (2010). *In an Unspoken Voice: How the body releases trauma and restores goodness*. North Atlantic Books: Berkeley, CA

- Markoff, L.S., Falloot, R.D., Reed, B. G., Elliott, D.E., Bjelajac, P. (2005). *Implementing trauma-informed alcohol and other drug and mental health services for women: Lessons learned in a multisite demonstration project*. *American Journal of Orthopsychiatry*, 75: 525-539. doi: 10.1037/0002-9432.75.4.525.
- Mburia-Mwalili, A., Clements-Nolle, K., Lee, William, Shadley, M, & Yang, W. (2010). *Intimate partner violence and depression in a population-based sample of Women: Can social support help?* *Journal of Interpersonal Violence*, 25 (12), 2258-2278.
- McCaig, M. & Kubany, E.S. (2004). *Healing the Trauma of Domestic Violence: A Workbook for Women*. New Harbinger Publications: New York.
- Root, M.P. (1989). Treatment failures: The role of victimization in a women's addictive behavior. *American Journal of Orthopsychiatry*. 59, 542-549.
- Russell, B., & Uhlemann, M.R. (1994). Women surviving an abusive relationship: Grief and the process of change. *Journal of Counseling and Development*. 74, 362-367.
- Schwartz, R. (2001). *Introduction to the Internal Family Systems Model*. Trailheads Publications: Chicago, Ill.
- Shadley, M.L. (2001). *Dueling Demons: Addicted women and interpersonal violence*. *Family Therapy News*. AAMFT: October.
- Steiner, L.M. (2010). *Crazy Love*. St. Martin's Press: New York.
- Steiner, L.M. (2012, November). TEDTalk, "Why Domestic Violence Victims Stay."
- Wadsworth, R., Spampento, A., & Halbrook, B. (1995). The role of sexual trauma in the treatment of chemically dependent women: addressing the relapse issue. *Journal of Counseling and Development*. 73, 401-406.
- Weissbecker, I. & Clark, C. (2007). *The impact of violence and abuse on women's physical health: Can trauma-informed treatment make a difference?* *Journal of Community Psychology*, 35: 909-923. doi: 1002/jcop.20189.
- Witte, T.H. & Kendra, R. (2010). *Risk recognition and intimate partner violence*. *Journal of Interpersonal Violence*, 25 (12), 2199-2216.
- Zubretsky, T.M. (2002). *Promising directions for helping chemically involved battered women get safe and sober*. In Roberts, A.R. (Ed.), *Handbook of domestic violence intervention strategies*. New York: Oxford University Press.

TRAUMA INFORMED REFERENCES

(Many of the descriptions given here are variations of [Amazon.com](https://www.amazon.com) descriptions)

Callan, D. (1995). *Awakening the Warrior Within*. Novato, CA.: Nataraj Publishing.

Dawn Callan affirms that individuals who have experienced trauma can reclaim themselves through the path of the warrior. As a martial arts instructor she teaches the reader how to reconnect with the natural power of the internal warrior through a mind body connection and the decision to uphold the "warrior's code." The author's goal is to help people to reclaim the powerful life force that protects and develops inner security.

Dayton, T. (2007). *Emotional sobriety: From relationship trauma to resilience and balance*. MN: HCI.

Illustrating that emotional sobriety is a mind/body phenomenon, Dr. Dayton includes ideas on how to attain emotional literacy--the skill of translating feelings into words so that we can use our thought processes to understand and bring our emotions into balance--and how to calm the limbic system so that we can actually experience what we're feeling without responding from our traumatic responses an oversensitized and underegulated limbic system. Dr. Dayton shows through concrete examples how to bring emotions and thoughts into balance and learn healthy ways of 'self-soothing' to relieve symptoms of depression, anxiety, rage, and the desire to self-medicate.

Herman, J. (1997). *Trauma and recovery: The aftermath of violence—from domestic abuse to political terror*. New York: Basic Books.

Trauma and Recovery brings a new level of understanding to a set of problems usually considered individually. Herman draws on her own cutting-edge research on domestic violence, as well as on a vast literature of combat veterans and victims of political terror, to show the parallels between private terrors such as rape and public traumas such as terrorism. The book puts individual experience in a broader political frame, arguing that psychological trauma can be understood only in a social context.

Kubany, E.S., McCaig, M.A., & Laconsay, J.R. (2004). *Healing the Trauma of Domestic Violence: A Workbook for Women*. New York: New Harbinger Publications

Women who are severely assaulted by their husbands or partners are a group of trauma victims likely to suffer from the symptoms of post-traumatic stress disorder (PTSD). As a primer, this is specifically designed as a workbook and is applauded by survivors as they recovery from their history of abuse.

Levine, P.A. (1997). *Waking the Tiger: Healing Trauma*. Berkeley, CA: North Atlantic Books.

Waking the Tiger normalizes the symptoms of trauma and the steps needed to heal them. People are often traumatized by seemingly ordinary experiences. The reader is taken on a guided tour of the subtle, yet powerful impulses that govern our responses to overwhelming life events. To do this, it employs a series of exercises that help us focus on bodily sensations. Through heightened awareness of these sensations trauma can be healed.

Miller, D. (2003). *Your Surviving Spirit: A Spiritual Workbook for Coping with Trauma*. New York: New Harbinger Publications, Inc.

Your Surviving Spirit uses vignettes and activities to promote healing and transform trauma-based pain and despair into a feeling of healthy well-being and spiritual renewal. Case studies cover a variety of traumas, from childhood abuse to more contemporary disturbances. Author Dusty Miller explores six characteristics crucial to the process of *transformation: Willingness, Letting Go, Commitment, Empathy and Compassion, "Lightening Up," and Creating Connections*.

Rosenberg, J.L., Rand, M.L. & Asay, M.A.D. (1989). *Body, Self, and Soul: Sustaining Integration*. San Francisco, CA: Humanics Limited.

A broad spectrum of ancient Eastern and modern Western philosophies are connected in this exciting new therapy. Free bodily tensions and release long-held emotions, thereby enhancing your mental and physical health. This superior integration of various therapeutic disciplines is ideal for the development of a holistic and integrated mind-body health approach.

Rothschild, B. (2000). *The body remembers: The psychophysiology of trauma and trauma treatment*. New York: W. W. Norton & Company.

Illuminates the value of understanding the psychophysiology of trauma for both clinicians and their traumatized clients. Traumatized people hold a memory of that trauma in their brains and bodies. This is the first book to link this phenomenon of somatic memory and the impact of trauma on the body. Reducing the chasm between scientific theory and clinical practice and bridging the gap between talk and body therapy, Rothschild presents techniques for addressing the memory in the body.

Shapiro, F. (1995). *Eye movement desensitization and reprocessing: Basic principles, protocols, and procedures.* New York, NY: Guilford Press.

EMDR is one of the most widely investigated treatments for posttraumatic stress disorder, and many other applications are also being explored. To keep up with this growing body of knowledge, the second edition has been revised to incorporate current neurobiological data, findings from controlled clinical studies, and literature on emerging clinical applications. Chapters provide background on EMDR's development, theoretical constructs, and possible underlying mechanisms, and present updated protocols and procedures for working with adults and children with a range of presenting problems.

Trauma-specific Manualized Treatment Models

ATRIUM -- Addictions and Trauma Recovery Integration Model

Guidry, L. & Miller, D. (2001). *Addictions and Trauma Recovery: Healing the Body, Mind, and Spirit.* New York: W. W. Norton & Company.

ATRIUM is a manualized recovery model used in conjunction with 12-step programs or on its own. Its sequentially organized, 12-week curriculum designed for people who are survivors of sexual and physical abuse, those with substance abuse and other addictive behaviors. Based on the premise that trauma impacts survivors on the physical, mental, and spiritual levels, ATRIUM is designed to intervene at all three levels by blending psycho-educational, process, and expressive activities. This how-to manual introduces new ways of thinking about self-care, self-soothing, and self-expression.

To obtain the ATRIUM manual, *Addictions and Trauma Recovery: Healing the Body, Mind and Spirit*, and for information visit <http://www.dustymiller.org>

Beyond Trauma: A Healing Journey for Women

Covington, S. S. (2003). *Beyond trauma: A healing journey for women.* Hazelden.

Developed by Stephanie S. Covington, Ph.D., L.C.S.W., *Beyond Trauma: A Healing Journey for Women* (Covington, 2003) is a manualized curriculum that is extensively annotated and includes research by the Center for Gender and Justice and the National Institute of Corrections. While the materials are trauma-specific, the connection between trauma and substance abuse is recognized and integrated throughout the curriculum. In eleven sessions, the major emphasis is on coping skills with specific exercises for developing emotional wellness. Promoting a strength-based approach that seeks to empower women and increase their sense of self, *Beyond Trauma* has a psycho-educational component that teaches women what trauma is, its process, and its impact on both the inner self and the outer self.

To obtain the *Beyond Trauma* program curriculum contact Stephanie S. Covington, Ph.D., L.C.S.W., 7946 Ivanhoe Avenue, Suite 201B, La Jolla, CA 92037, 858-454-8528. See www.stephaniecovington.com.

Seeking Safety Model

Najavits, L.M. (2001). *Seeking Safety: A Treatment Manual for PTSD and Substance Abuse.* New York: The Guilford Press.

Seeking Safety is a manualized, topic driven, integrated treatment program designed to address safety and recovery for persons with PTSD and substance abuse. Flexible and adaptable, Seeking Safety topics can be conducted in any order, the number of topics covered can be changed depending on a client's length of stay, and groups can be facilitated by a wide variety of counselors.

The treatment manual, *Seeking Safety: A Treatment Manual for PTSD and Substance Abuse*, (Najavits, 2002) includes client handouts and clinician guidelines. The program teaches a range of more than 80 "safe-coping" skills to work toward discontinuing substance use, letting go of dangerous relationships, and gaining control over dissociation and self-harm (e.g., grounding, self-nurturing, asking for help, setting boundaries in relationships). Visit <http://www.seekingsafety.org/>

Trauma Recovery and Empowerment Model (TREM)

Harris, M. (1998). *Trauma Recovery and Empowerment: A Clinician's Guide for Working with Women in Groups*. New York: Free Press.

Developed by Maxine Harris, Ph.D., and the Community Connections Trauma Work Group, TREM is a manualized, sequentially organized, 24–33 session group approach to healing from the effects of trauma. It is designed for women with major mental health, PTSD, and/or substance abuse problems. TREM combines elements of recovery skills training, psycho education, and other cognitive-behavioral techniques, and emphasizes peer support and initially focuses on the survivor's personal and relational experience, with emphasis on empowerment and skill building. Clients learn strategies for self-comfort and accurate self-monitoring as well as ways to establish safe physical and emotional boundaries. While designed for use with groups, the material is useful for individual sessions as well.

For more information on TREM, contact: Rebecca Wolfson, M.S.W. 801 Pennsylvania Avenue, SE, Suite 201. Washington, DC 20003 or www.communityconnectionsdc.org

TRIAD Women's Group Model

Developed by and implemented at one of the SAMHSA Women Co-Occurring Disorders and Violence Study sites, this manualized, 16-session, cognitive-behavioral group model is based on the perspective that complex disorders arise from trauma (Herman, 1992).

TRIAD is structured into four phases: Mindfulness, Interpersonal Effectiveness Skills, Emotional Regulation, and Distress Tolerance, with four weekly sessions in each phase.

This cognitive behavioral model is based, in part, on Linehan's Cognitive-Behavioral Treatment model, Evans and Sullivan's work on substance abuse and trauma and Harris' work on trauma and serious mental illness.

To obtain the manual and for information on training and consultation, contact Colleen Clark, Ph.D., at 813-974-9022 or cclark@fmhi.usf.edu

Bibliography prepared by:

Meri L. Shadley, Ph.D., LMFT, LCADC, LCS
Center for the Application of Substance Abuse Technologies (CASAT)
University of Nevada - Mail Stop 279 - Reno NV 89557
mshadley@casat.org – 775-784-6265