

# Healing From Sexual Trauma: A Movement-Based, Empowerment Self-Defense Approach

Brenda Jones & Lynne Marie Wanamaker



# PowerPoint online

This presentation and related resources are available online at [www.lmwsafe.com](http://www.lmwsafe.com)

The screenshot shows a web browser window displaying the website [www.lmwsafe.com](http://www.lmwsafe.com). The page features a green header with the name "Lynne Marie Wanamaker" and a navigation menu with links for "Home", "Biography", "Services +", "Media", and "Contact". A Facebook icon is also visible. The main content area displays a blog post titled "Because I Can" with the following text:

*I had the privilege of delivering the sermon at my house of worship (Unitarian Universalist) once again, on Sunday, August 2, 2015. I am so lucky to have such wonderful friends to teach and inspire me.*

This service started not as a gathering for worship on a warm summer Sunday, but at a kitchen table in a dark and quiet house at the end of a long winter day. The children are finally asleep. The dinner dishes have been washed. The lamplight throws warmth in small circles. And the grown-ups sit at the humble kitchen table with a cup of tea -- or a glass of whiskey, if that's a good choice for you -- and we talk about what matters.

And someone tells a story that becomes a kind of guide for your life.

Published on 03 August 2015 [Continue Reading](#)

Below the main text, there is a section titled "What is Empowerment Self Defense?". To the right of the main content, there is a sidebar with four green buttons: "Speaking", "Safe Communities", "Self Defense", and "Writing". A quote is visible in the sidebar: "Phenomenal workshop leader, speaker, and expert on the topic of self-defense, anti-violence, and assertiveness. I'm not exaggerating when I say Lynne Marie is in the top 1% of what I've seen for". The Windows taskbar at the bottom shows the Start button, several application icons, and the system tray with the time 9:15 AM.

# Healing From Sexual Trauma: A Movement-Based, Empowerment Self-Defense Approach

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- **Empowerment Self-Defense (ESD)** is uniquely effective at reducing risk of sexual assault.
- **ESD delivers benefits to survivors:**
  - Prevents victimization and re-victimization
  - Facilitates social support
  - Consistent with emerging trauma interventions
  - Promotes active coping
  - May contribute to recovery from sexual violence.

# Empowerment Self-Defense

- Rejects victim-blaming.
- Debunks “stranger-danger.”
- Addresses known assailant violence.
- Examines gender socialization.
- Teaches awareness, assessment & verbal skills.
- Teaches physical defense skills.
- Encourages healing and community organizing.

## In the Media

*Everyday Feminism:*

[How to exercise our right to defend ourselves without being victim-blaming](#)

*The Washington Post:*

[Actually, Miss USA was right](#)

*The Guardian:*

[Bring Back Self-Defence Classes for Women](#)

*Ms. Fit: Real World Feminist Fitness:*

[Defend Yourself!](#)

*Jezebel:*

[A look inside the terrible manual cops use to teach rape prevention](#)

*The Hairpin*

[The Shark Has Pretty Teeth, Dear: Why I Teach Women Self-Defense](#)

# Self-Defense Paradox

There is one person responsible for any act of interpersonal violence:  
The perpetrator.

The diagram consists of two dark blue rounded rectangular boxes connected by a thin blue circular line. The line starts at the top of the left box, goes up and over the top, then down and under the bottom, forming a circle that encloses both boxes.

Each of us can take action to increase safety.

# ESD & Person-in-environment perspective

## Individual

- ESD promotes knowledge, awareness & skills acquisition

## Relationship

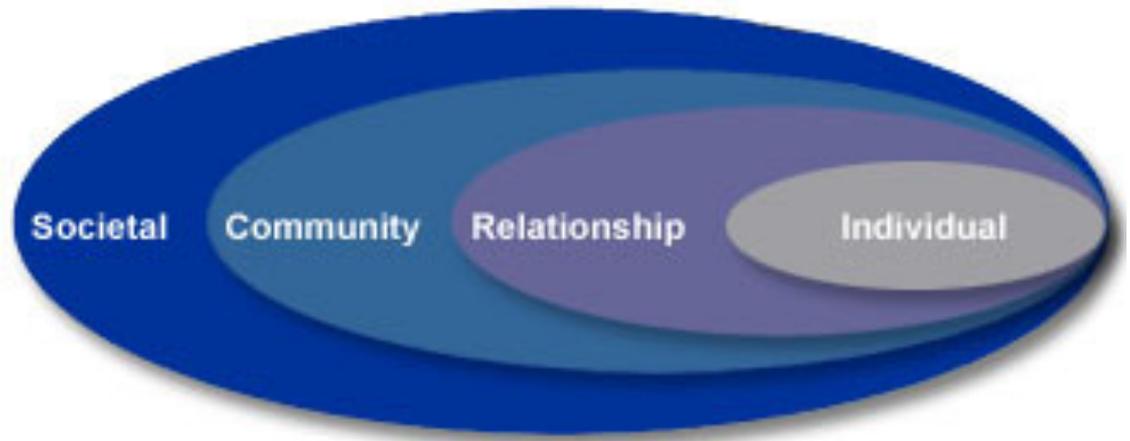
- ESD counters the myth of “stranger-danger”
- ESD delivers healthy relationship and consent negotiation skills

## Community

- ESD promotes collective action for increased safety
- ESD promotes social norms incompatible with violence perpetration

## Societal

- ESD is explicitly feminist and addresses systems of inequality and oppression



<http://www.cdc.gov/violenceprevention/overview/social-ecologicalmodel.html>

# Evidence-based: Adolescent girls, Kenya

- Randomized control trial (RCT) compared ESD training with a control “life skills” class.
- In ESD group, **1/3 reduction in sexual assault rate**; no change in control group.
- **50% of ESD group reported using skills** they learned to stop assaults.



[Sarnquist et al. \(2014\). Rape Prevention Through Empowerment of Adolescent Girls, \*Pediatrics\*, 133\(5\), e1226-e1232.](#)

[Cohen, R. \(April 16, 2014\). Rape prevention program cuts sexual assaults in Kenya. \*Reuters\*.](#)

Image credit: <http://nomeansnoworldwide.org/>

# Evidence-based: University women, Canada

- RCT compared sexual assault resistance program with access to brochures on sexual assault.
- Intervention included a positive sexuality component.
- **50% reduction in 1-year risk of completed rape** in intervention group; no change in control group.



[Senn, C.Y., Eliasziw, M., Barata, P.C., Thurston, W.E., Newby-Clark, I.R., Radtke, L., & Hobden, K.L. \(2015\). Efficacy of a sexual assault resistance program for university women. \*New England Journal of Medicine\*, 372, 2326-65.](#)

[Hoffman, J. \(2015, June 10\). College Rape Prevention Program Proves a Rare Success. \*The New York Times\*.](#)

# Benefits of ESD

- Increased self-confidence/self-efficacy
- Increased perceived control
- Increased assertiveness
- Increased physical competence
- Does not restrict women's behavior
- May reduce self-blame
- Increased disclosure

[Brecklin, L. R. \(2008\). Evaluation outcomes of self-defense training for women: A review. \*Aggression and Violent Behavior\*, 13, 60-76.](#)

[Hollander, J.A. \(2014\). Does self-defense training prevent sexual violence against women? \*Violence Against Women\*, 20\(3\), 252-269.](#)

# Benefits of ESD



# Supporting Survivors

ESD professional certification requires a survivor-centered practice.

ESD instructors have developed a robust practice wisdom to support survivors.

# Indivisible:

## Sexual violence prevention & intervention

- Sexual violence accrues disproportionately to **women early in the life course.**
- Rates of sexual violence suggest that we should assume **survivors are present in any community setting.**
- Once victimized, individuals are at **elevated risk of revictimization.**

# Sexual violence: Prevalence & gender



- 1:5 women and 1:71 men have been raped during their lifetime.

- 1:2 women and 1:5 men have experienced other forms of sexual violence.

- Most sexual assaults against women are delivered by men they know.

[Centers for Disease Control and Prevention \(CDC\)  
National Intimate Partner and Sexual Victimization Survey \(NISVS\), 2010](#)

[Infographic based on the 2010 NISVS available here.](#)

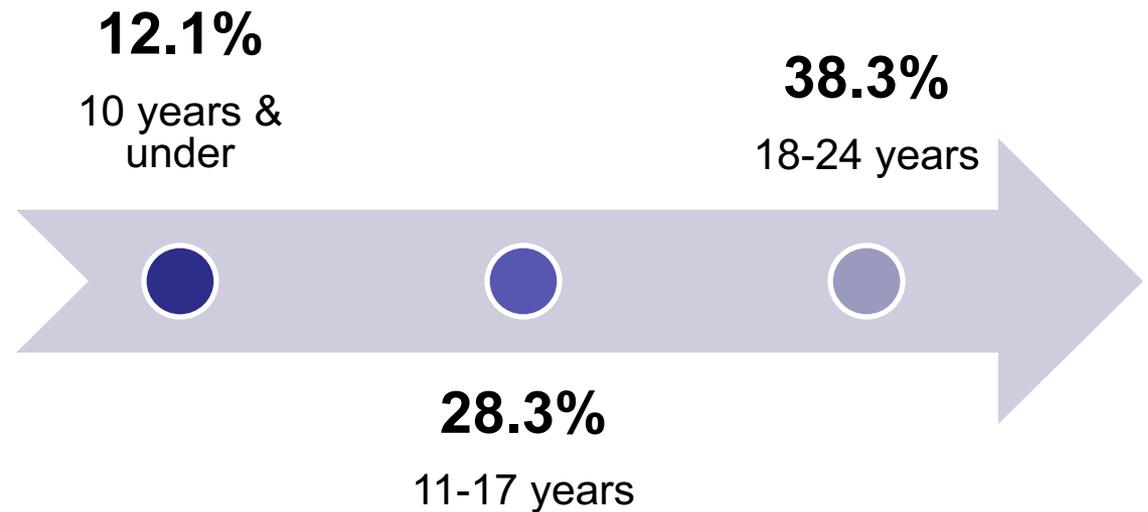
- Rates of sexual violence against transgender people are also disproportionately high.

[http://www.ovc.gov/pubs/forge/sexual\\_numbers.html](http://www.ovc.gov/pubs/forge/sexual_numbers.html)

# Life course perspective

Negative consequences of sexual violence include:

- physical injury
- Sexually transmitted diseases
- unplanned pregnancy
- depression
- suicidal ideation
- substance abuse
- effects to the “nervous, cardiovascular, gastrointestinal, genitourinary, reproductive, immune and endocrine systems.”



**Nearly 80%** of female victims of completed rape report their first victimization **before age 25.**

# Survivors are always present

## Because:

- Survivors are present in any community setting.
- Survivors are at elevated risk of sexual violence.

**Community-level  
prevention  
must be  
survivor-centered.**



# Stress:

## Acute vs. chronic

### **Short-term**

Stress response is adaptive and necessary for survival when mobilized in response to imminent threat.

### **Long-term**

Stress response becomes maladaptive when mobilized repeatedly in response to reminders of a past emergency.

**Understanding acute stress helps us to understand PTSD and other post-traumatic sequelae.**

# Post-Traumatic Stress Disorder

“This is not about something you think or something you figure out. This is about your body, your organism, having been reset to interpret the world as a terrifying place and yourself as being unsafe.”

Bessel van der Kolk

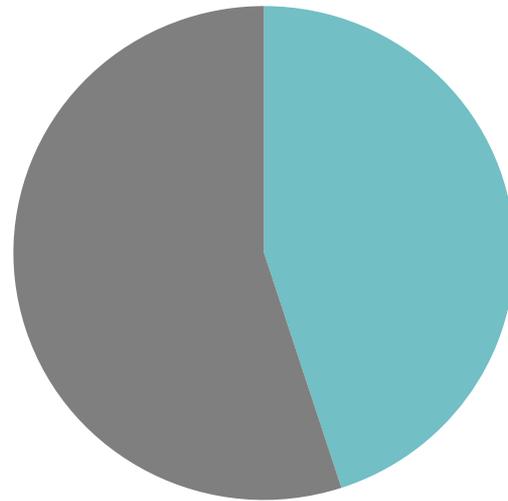
# Challenges to treatment

“The Institute of Medicine found that the currently available scientific evidence for the treatment of PTSD does not reach the level of certainty that would be desired for such a common and serious condition.”

(van der Kolk et al., 2014)

# Challenges to treatment

**Percentage of therapy clients with PTSD who remain "significantly symptomatic" after treatment**



- 45% Remain symptomatic
- 55% Symptoms resolved

[Bradley, R., Greene, J., Russ, E., Dutra, L., & Westen, D. \(2005\). A multidimensional meta-analysis of psychotherapy for PTSD. \[Review\]. American Journal of Psychiatry, 162, 214-227.](#)

# Challenges to treatment

Reminders of traumatic experience create changes in the brain that make it harder to “communicate experience in words.”

**Language and attachment are compromised in PTSD**

Attachment = Trust, experience of social connection as safe and comforting.

Psychotherapy relies on **verbal communication** and **interpersonal connection**

(van der Kolk, 2006)

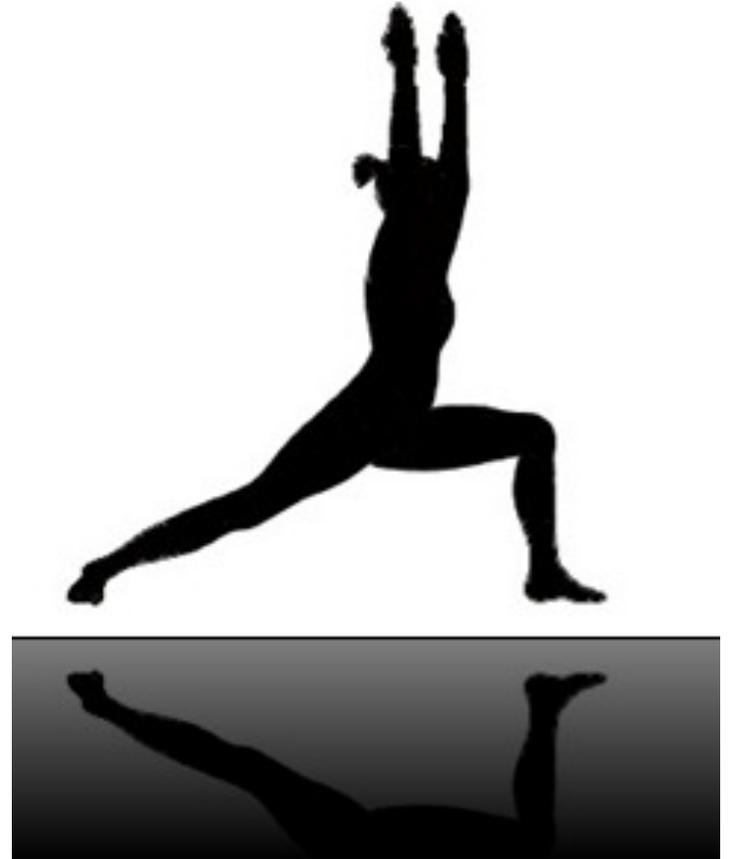
# ESD facilitates social support



Image credit: <http://defendyourself.org/>

# Mind-body trauma interventions

Yoga  
Mindfulness  
Breathing



# Mind-body trauma interventions

- Interoceptive awareness
- Movement
- Intentional movement and/or body postures
- Breathing
- Meditation
- Mindfulness
- Martial arts techniques

# ESD & mind-body practice

ESD does not provide an intervention-level “dosage” of mind-body practice.

The same techniques have been suggested as **“somatic approaches to decreasing arousal.”**

[Kozłowska, K., Walker, P., McLean, L., & Carrive, P. \(2015\). Fear and the defense cascade: Clinical implications and management. \[Perspective\]. Harvard Review of Psychology.](#)

# Active coping & ESD: Survivors

On the basis of these findings, LeDeux & Gorman (2001) recommended active coping for **survivors** of the 9/11 terrorist attacks.

Other researchers recommend movement, including stretching, punching or kicking, to address tonic immobility arising in response to **reminders of past trauma**.

# ESD supports survivors

- ESD uses active teaching methods that include movement and participation.
- Most sexual assault prevention models reviewed by the Centers for Disease Control use passive, didactic methods.

ESD may be more supportive of survivors of sexual violence because it utilizes **mind-body techniques** and **active coping**.

# Lack of Access to ESD



George Washington University Physician's Assistant Program

Image credit:  
<http://defendyourself.org/>

# Benefits of ESD



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