

Supporting Someone Who's Reliving Sexual Assault

Janet Kent

What I want to talk about may seem overwhelming and scary but it happens sometimes and the more of us who know how to help, the better. Many people who have been sexually assaulted develop a condition called Post Traumatic Stress Disorder, PTSD for short. The National Institute of Mental Health defines PTSD as "an anxiety disorder that can develop after exposure to a terrifying event or ordeal in which grave physical harm occurred or was threatened." They cite personal assaults, natural or human-caused disasters, accidents, or military combat as experiences that can trigger PTSD. The disorder is characterized by various degrees of re-experiencing the trauma: recurrent memories, nightmares, frightening thoughts, and what I want to discuss here, flashback episodes. Other symptoms are sleep disturbance, emotional numbness, anxiety, irritability, depression, and outbursts of anger.

Though this cluster of symptoms has probably been around as long as people have been hurting each other, it was not diagnosed until men began to exhibit symptoms in great numbers during and following World War I. Before, women were considered by the medical establishment to be the only bearers of physical manifestations of a mental condition; the disorder was called hysteria and was generally considered a contrivance of attention-seeking females. World War I sent home men who had experienced more than their minds could bear. They relived their experiences of war, their bodies shut down; they could not function. Suddenly, doctors decided that this mental state, shell shock they called it, could happen to anyone, not only to members of what they considered the weaker sex. What had previously been viewed the folly of women became a legitimate disorder worthy of attention. Unfortunately, this attention usually consisted of institutionalization and heavy sedation.

However negative the treatment, at least people who suffered from this disorder had a name for it. They could see that the mind sometimes collapses under stress, that it is a normal response to unbearable strain, not a sign of weakness. As the women's movement of the 70s grew, women who began to examine sexual assault and its effects saw the symptoms of PTSD in many women who had been assaulted or had lived in abusive environments. People who wanted to create a supportive framework for dealing with sexual assault developed strategies for helping people who exhibited signs of what they called Rape Trauma Syndrome. These strategies were implemented and taught to volunteers throughout the network of Rape Crisis Centers and Domestic Violence Shelters and they still are today.

When I trained at a rape crisis center, we spent part of one short class talking about what to do if a client started to relive an assault. Many of the volunteers expressed concerns that they were not prepared to deal with such an extreme situation. Our advisor explained that it hardly ever happened and that she hadn't dealt with a flashback in all her years at the center.

At least we spent those few minutes on flashbacks, because within a few weeks, one of my clients showed up at the center fully in the throes of reliving a rape. She had been in an abusive marriage for years, during which time her husband had repeatedly raped her. Though she had been on her own for a while and lived in a different town from him, she still had nightmares and felt continually unsafe. I don't remember what triggered her flashback, but it happened while she was driving. Luckily, she was near the rape crisis center and was able to pull in there. She walked in shaking and staring straight ahead. I led her to the couch as she described her assault as it was happening. She was terrified.

First, I slowly put my arms around her and spoke in a low voice, telling her she was in a safe place. Here is the important part: since the person is not in the present moment, you need to get them someplace safe in their mind. This might sound silly but it works. As they told us to do in training, I told her to picture a safe place and to put herself there, a place where no one can get her and she

feels free from any possible harm. I then asked her to describe the place for me. This gives the person something to do, a task to occupy the mind until the crisis is over. She told me about a boat. I asked a lot of questions about the boat and the area around the boat. No question is too detailed. The person needs to focus on this safe place. After a few minutes of describing her boat, she quit shaking, her heartbeat slowed down, and her eyes saw her immediate surroundings again. She was still upset, but the crisis was over. We talked until she felt okay to leave and I checked on her frequently for the next few days.

The fact is, you may never be around when someone you know relives a trauma. But if you are, remember these few things:

- 1. Speak in soothing tones.
- 2. If you touch the person, be gentle as you comfort them, there's a fine line between feeling held and feeling held down.
- 3. Ask them to picture a safe place and to tell you all about it.
- 4. Ask a lot of questions so they really have to inhabit the safe place.
- Once the immediate crisis is over, talk to the person about what happened, what triggered the flashback.
- 6. Make a plan to stay with your friend or find another person they trust to stay with them if you have to leave.
- 7. Offer to be available for the person to talk to or spend time with in the immediate future.
- 8. Remember, these symptoms may get better with time, but you may need to actively support this person for a long time. They are dealing with a lot and this flashback is just an extreme manifestation of what they may be thinking of every day.
- 9. While therapy is sometimes maligned in our community, it can be very helpful. When someone is dealing with this much mental stress, talking to a trained counselor is probably a good idea. Don't be afraid to suggest this option, and help them find a therapist.

Some rape crisis centers offer free counseling to survivors, regardless of how much time bas passed since the assault. They also may be able to give you some referrals to experienced counselors in the area.

10. Keep up the support. Keep checking in.

Self-Care and Crisis Management

Peregrine Somerville¹

Lists

Write down everything you can think of that is beautiful, that makes you feel alive, or that you simply *like*. It's so easy to forget these things when we're in our lows—and, consequently, to forget why we even want to live—and reconnecting to them even by name can help bring them back into our lives. Here are a few of the things on my list: moments of total silence on a city street; freshly opened lilacs; the smell of old books; drinking water when I'm really thirsty; handwritten letters to loved ones, or from them; the color of my skin under a full moon; the wind; the color green, deep green; the feeling of velvet against my ears and cheeks; the smell of sheep; putting on clean socks. This is the comfort food of my life. When my mental health plummets it's my tendency to forget all of these things, but with this list in a visible spot, I can't forget them.

In addition to the list of things to live for, you can write a list of actions you know will help pull you out of your shit when you're in a bad way. Examples could be anything from taking a walk around your neighborhood to eating a good meal to spending time with your dog. Give copies of this list to your close friends and supporters so they have some idea of how to help you when you're not feeling okay. Also a good resource to give your support people is a list of warning signs that you're sinking into a bad place. The signs could be subtle indicators like circles around your eyes from lack of sleep, or more overt behaviors such as not leaving your bedroom for days on end. Even if these things seem obvious to you, it's important that you identify them to your supporters so they know to come to your aid quickly, when the warning signs first start to appear.

¹ Excerpt from Peregrine Somerville, "Mental Health" in *Recipes For Disaster:* An Anarchist Cookbook (CrimethInc.: Olympia, 2004), 366–382.

There is one more list you cannot do without: a list of people you will contact when you're feeling triggered or panicked or otherwise distraught. Write this list when you're in a relatively level headspace because if you try to do it in an activated, highly charged mental state you may have a hard time remembering who you can turn to, which may prevent you from seeking support. Always seek out support when you need it. Keep the list somewhere accessible; laminate it with packing tape and stick it to your phone or your bathroom mirror, and make several copies in case you lose one. Even if it doesn't seem important now, it will be crucial later on.

Crisis

A panic attack can be one of the most distressing and terrifying experiences you'll ever have. You might not even know that you're having a panic attack; the accelerated heart rate, shortness of breath, fear and confusion may set on instantly and inexplicably, and you may feel paralyzed and disoriented, with no idea what's going on. Although coming down from an activating experience like this isn't easy, particularly when you're by yourself, it can definitely be done. Here is one highly effective approach that comes from somatic psychology, known as "Three Out, Three In."

- 1. SIT in an upright position on a comfortable surface like your favorite chair, or lean up against a something solid like a wall or a tree. Don't lie down, as this can intensify feelings of help-lessness and overwhelm. If you're walking, try to slow your pace until you can get somewhere reasonably safe (meaning a place where you're not surrounded by other people, or in traffic). You want to be still rather than in motion so that your heart rate can begin to slow down. If at all possible, try to find someone you trust to come with you. If not, that's okay.
- 2. ONCE you've gotten physically still, allow your eyes to begin taking in your current surroundings. Try to let your gaze move around slowly, not looking for anything in particular but simply wandering, just noticing what's around you. Now say, out loud, three things you can see in your external environment. For example: "I see the clock on the wall. I see the green color

of the houseplant. I see the wind blowing in the trees outside." Whether or not you have someone with you, it's important that you say the three statements *out loud* because it draws your attention toward *speech*—an embodied action that affects heart rate and respiration—rather than mental activity, which may be spiraling out of control.

- 3. NOW allow your awareness to come inside. Don't close your eyes, as this can be disorienting and can lead to overwhelm, but do start to notice what you can *feel* right now. For example: "I feel the chair against my back. I feel a gentle breeze on my skin as it comes through the window. I feel a slight tension in my stomach." As much as possible, try not to assess or interpret what you're feeling. There's really no need to think about whether the feeling is pleasant or unpleasant, or what it "means" that you're feeling it, just name the experience and move on to the next thing you can perceive.
- 4. REPEAT steps 2 and 3 until you have completed the cycle (Three Out, Three In) three times. So by now you should have mentioned nine things you can see and nine things you can feel. There may be a longer pause each time you name something, a moment to take it in, and it's a good idea to go along with that because it helps your system slow down. If you're still feeling panicked at the end of these nine, begin another set and continue until the panic lessens. Remember, the objective here is not to float away on a cloud of peace and bliss, but to simply decrease the feelings of distress and overwhelm.

As you do this exercise you may begin to notice sensations like heat or shakiness in your body, or some deeper, more spontaneous breathing beginning to occur. This is a natural part of the process of coming down from the fight/flight response (sympathetic nervous system) and entering the orientation response (parasympathetic nervous system). As much as possible, try to allow this to happen without intervening too much. Your body has evolved to recover from life-threatening events by moving freely into and out of survival states of consciousness, like the fight/flight response. In other words, frightening as a panic attack may be, your nervous system

knows how to come down from it, and the "Three Out, Three In" exercise can help this innate "deactivation" ability to come more fully online. It is one of the most effective practices for managing distress and panic, and you can use it anytime you like.

If You Are Not the One Falling Apart

As a support person, the most vital tool available to you is empathy. Supporting a suffering person is a challenging thing to do and it may feel stressful and frustrating at times, and yet your task is to remind yourself that your loved one is in pain. Try to bring yourself back to a time when you were struggling like this person is struggling now. Remember how it feels to need support, and how hard it can be to ask for it. Your role as a supporter requires patience, a clear sense of what you can and cannot offer, and a willingness to communicate this clearly to your loved one. It can get really hard and feel really scary. There will be times when you don't know what to do, or if there even is anything you can do to help this person you care for so much.

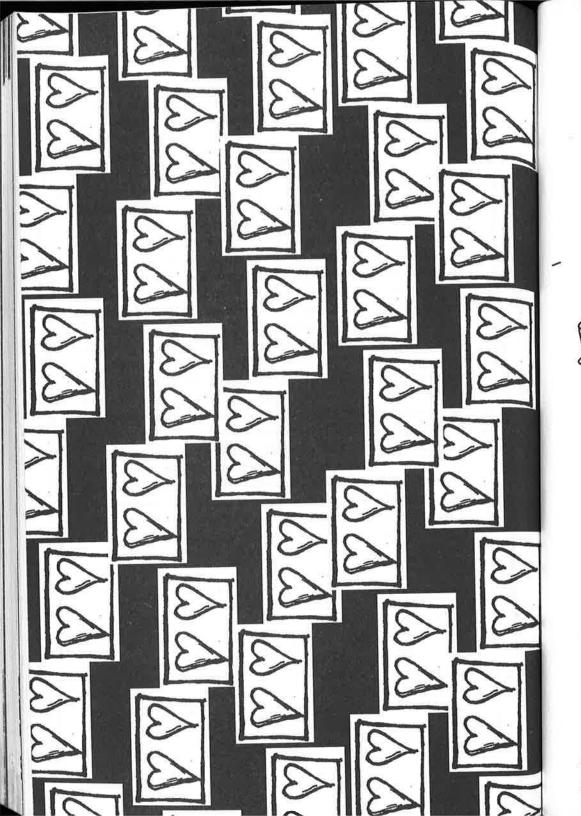
Do your support work as a team. Having a core group of dedicated support people will preserve your own mental health and help to avoid any one person burning out or becoming resentful. Meet together with the other supporters and check in with one another. Talk about how the process is going, what's working, and what needs to change. It really does help to be organized about this. Be honest with one another about your own needs around the support process, and take care of each other.

Some responsibilities of support people may include basic survival stuff like getting the person to eat, go outside, and get enough sleep. A person who is falling apart in a serious way may not have any self-care ability, at least initially. Part of the role of support people is to help the person reestablish a self-care routine, which can look like a lot of handholding at first. Make good use of the tools the person has available, like the list of ways to pull them out of their shit, when they are too bogged down by pain. You may need to take the initiative in getting your friend to see their therapist, or go to yoga class, or whatever other external resources they may be leaning on (besides you). If they are on medication, get them to take their medicine at regular times each day and if they run out you may need

to make a doctor's appointment for them. Network with their family members—blood relatives as well as chosen family—who have seen them go through these types of situations, and find out what worked in the past.

It is not appropriate for you to try to "fix" the person, or to lessen their suffering because it's too painful for you to witness. It's said that in healing, no one can do it alone, but likewise no one can do it for you. As a support person it's your job to create a safe enough container for your friend to have their recovery experience, including all the pain that goes along with that. You cannot control their experience. You cannot make their suffering go away, and it will actually hurt them—and you—if you try.

The most important thing is that you stay out of judgment. You may feel for a time that you're carrying more weight or doing more work than you'd prefer, but you have to remind yourself of your love for this person, of everything they give you when they're well enough to give. This is someone you love. The role you play in their wellbeing is a gift you are giving, not a burden you feel obligated to shoulder. Stay open and be honest, with yourself and with the person you're supporting, about your own needs and limits. Yes, you are allowed to have boundaries, and in fact it is crucial, for you and for the person you're supporting, that you make them. Keep the lines of communication open, especially when you're feeling fed up or frustrated. Seek out support yourself when you need it. Most of all have empathy, always, no matter how hard it gets. Avail yourself to the person's suffering, and let it open you, and make you tender. In this way, the suffering of others makes us whole.



Things to do when you're having trouble staying present



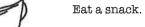
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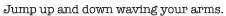


Blink hard. Blink again. Do it once more as hard as you can.

Make tea. Drink it.

Call a friend.

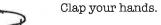


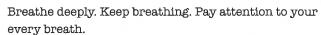




Lie down on the floor; feel your body connecting with it. Keep your eyes open. How does it feel? Describe it out loud to yourself.

Make eye contact with your pet. Now hold it.







Hold a stuffed animal, pillow, or your favorite blanket.

Alternately tense and relax some muscles.

Now "blink" with your whole body, not just your eyelids.



Move your eyes from object to object, stopping to focus on each one.

Wash your face.



Go outside for sunshine or fresh air.