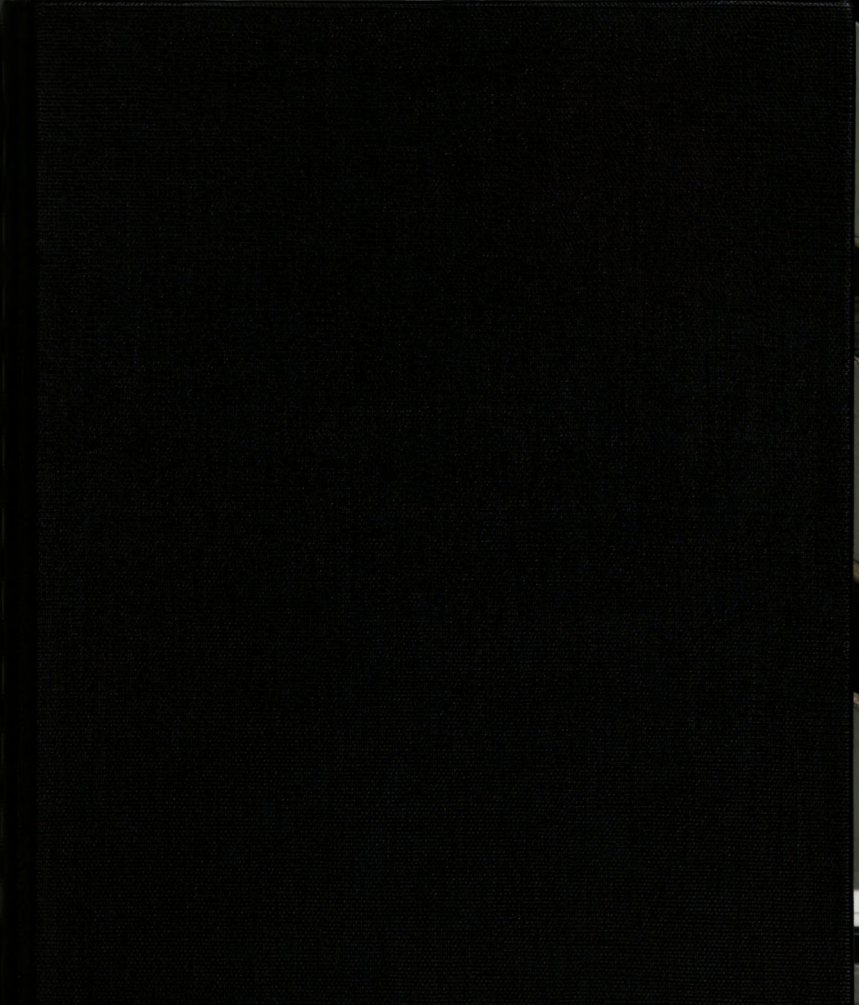


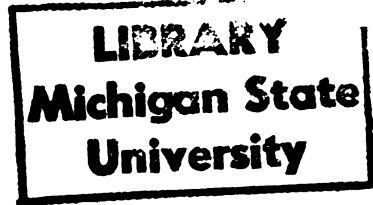


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SELF-DEFENSE TRAINING AND IT'S CONTRIBUTIONS
TO THE HEALING PROCESS FOR SURVIVORS OF
SEXUAL ASSAULT

presented by

Jayne A. Schuiteman

has been accepted towards fulfillment
of the requirements for

Ph.D degree in Physical Ed.

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**SELF-DEFENSE TRAINING AND ITS CONTRIBUTIONS
TO THE HEALING PROCESS FOR SURVIVORS OF
SEXUAL ASSAULT**

By

Jayne A. Schuiteman

Volume I

A DISSERTATION

**Submitted to
Michigan State University
in partial fulfillment of the requirements
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DOCTOR OF PHILOSOPHY

Department of Physical Education and Exercise Science

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ABSTRACT

SELF-DEFENSE TRAINING AND ITS CONTRIBUTIONS
TO THE HEALING PROCESS FOR SURVIVORS OF
SEXUAL ASSAULT

by
Jayne A. Schuiteman

Problem

Self-defense training has traditionally been thought of as a means of sexual assault prevention. However, self-defense instructors have long believed that self-defense training might be an important means of empowerment for survivors of assault, thus making an important contribution to their healing process following victimization. Therefore, this study investigated an innovative and new approach to the healing process. The study focused on a self-defense class designed specifically for women who were survivors of sexual assault in the forms of rape, battering, and/or the sexual abuse of children. The class included self-defense instruction taught from a feminist perspective as well as support group activities facilitated by a therapist in an effort to increase a sense of empowerment for class members.

Methodology

Fieldwork research methodology using participant observation and indepth interviews was used to examine two survivors' self-defense classes (a pilot and a focal class).

Each class was comprised of a teaching team and eight students for a total of 21 participants in the study.

Major Results

Self-defense training did make important contributions to the healing processes of the women who participated in the survivors' self-defense class. The training and support group work impacted individual healing issues such as alienation from the body; feelings of fear, anger, guilt, shame, sadness and loss; issues pertaining to trust in oneself and others; balance and integration; and self-esteem. The class contributed to the empowerment of class members in a variety of ways. Central to the uniqueness of the class was the importance of physicality in the healing process.

The study also suggests that instructional perspective is critical when considering the possible contributions of self-defense training to the healing process. A major benefit of instruction from a feminist perspective using feminist pedagogy was the facilitation of healing through participant choice-making and instructor modeling of empowerment. Such training taught from a more directive, non-feminist perspective might be much less beneficial for survivors.

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JAYNE ANN SCHUITMAN
1990

Dedicated to

My family and friends and all the women who are survivors of sexual violence. Your strength and determination has been my inspiration.

ACKNOWLEDGMENTS

As I approach the end of this very long yet satisfying endeavor, there are many people to thank for their assistance along the way. I always find it amazing to think that one person's name is attached to a dissertation when so many different people play a role in its evolution. There are several people who played vital roles in my dissertation and this is my opportunity to thank each of them.

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And finally, to Millie, I said you would help maintain my sanity in those last few months, and you did.

PREFACE

Sexual assault is a crime of violence (Brownmiller, 1975; Griffin, 1971; Groth, 1979; Katz, 1984). As is true of other forms of violent crime, victims of sexual assault often experience a sense of powerlessness. However, because sexual assault involves such an intimate form of violation, victims may feel intense levels of not only powerlessness but a total loss of control in their lives, loneliness and alienation, dehumanization, and objectification. The following quote from Judy Katz, author of No fairy godmothers, no magic wands: The healing process after rape, illustrates some of the intense feelings that victims of rape may experience. She was raped and shared her experience with others through the publication of the book.

It was 1:20 a.m. All of this had taken place in only twenty minutes. In that time period, I had gone from feeling that I was a confident, powerful woman, to feeling like a helpless, dehumanized object. Not only had I been raped, but I felt stripped of my dignity. In disbelief and shock, I repeated over and over, "I've been raped." The events of the past twenty minutes became surreal (Katz, 1984, p.6).

Susan Brownmiller (1975) described sexual assault as a form of social control that some men exercise over women. Not all men commit sexual assault. However, because some men do commit assault, all women are kept in a state of fear because of its possibility. Brownmiller (1975) argues that all men ultimately benefit from that realization because all

men benefit from women being "kept in their place." Brownmiller (1975) concludes chapter one of Against our will with the thesis of the entire book.

From prehistoric times to the present, I believe, rape has played a critical function. It is nothing more or less than a conscious process of intimidation by which all men keep all women in a state of fear (p. 5).

Sexual assault is an attempt to strip women of their power, or to deny them power in the first place. That feminist explanation places sexual assault in a social as well as gendered context. Victims of other forms of sexual assault also experience some of the powerlessness and helplessness that Katz (1984) described in her response to rape. Battering is another form of assault that serves to keep women powerless (Brownmiller, 1975; Dobash and Dobash, 1979; Guberman and Wolfe, 1985; Schecter, 1982). Brownmiller was quoted in Women who kill (Jones, 1980), where she stated that "Rapists are the shock troops of male supremacy, batterers are the home guard" (p. 82).

In a culture such as ours, which is based in part on a gender hierarchy where most men seek to maintain a position of status and power over women, sexual assault becomes but one means of maintaining that position of status and power. Women's freedom is limited and controlled through the threat of rape in our greater society and through the use of battering in heterosexual relationships. Children who experience sexual abuse learn lessons of powerlessness that enforce a future prescription for a life that feels helpless and ineffective (Mitchell, 1985).

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A vital aspect of the healing process following assault is to regain a sense of control over one's life (Katz, 1984; NiCarthy, 1986). In describing her feelings several years after she had been raped, Judy Katz (1984) reported:

One major aspect of coming to terms with being raped is that I have regained a sense of power in my life. Surviving this life-threatening situation, both in terms of the assault itself and the hell of the aftermath, has enabled me to recognize the internal resources I have... Through this, I have come to terms with the fact that basically I am alone in the world. Coupled with this learning is the awareness that I can seek out and identify the resources I need to help myself... All of this has helped me to identify a new sense of internal power that exists within myself (p. 65).

Self-defense training can be a very empowering experience that provides participants with a sense of control and personal power (Brownmiller, 1975; Caignon and Groves, 1987; National Self-defense Teaching Practicum (NSDTP), 1983). Not only do self-defense courses provide women with psychological, verbal, and physical skills that are designed to deter sexual assailants, but they also provide women with a safe environment to challenge many of the so-called normative female behaviors such as passivity and unassertiveness that may have set them up to be potentially "good" victims (NSDTP, 1983). In addition, the physical activity itself may provide women with positive experiences in movement, in which they learn to use their bodies efficiently, and to be physically fit. Those experiences are likely to be beneficial for all women; however, they may be especially important for women who are already survivors of sexual assault.

Survivors need to regain control in their lives. They need to increase their sense of confidence in themselves as Judy Katz (1984) revealed. The experience of a self-defense course may be an important aspect of a survivor's healing process as she seeks to regain control and power in her own life. The course may also assist in providing survivors with the tools to gain more self-confidence as they learn to predict and deter dangerous interactions.

A self-defense course that is set up specifically for survivors of sexual assault would include many of the same psychological, verbal, and physical skills that a more general self-defense course offers. However, exercises, drills, and strategies would also need to be designed with the realization that these women have already survived very difficult experiences which may be all too fresh and difficult to deal with. Therefore, the course would need to be tailored to meet the specific needs of women who have already faced assaultive situations. Additionally, a therapist would need to work with the class in order to deal with the emotional issues that are likely to surface.

This study examines such a self-defense class. The study represents an effort to understand from a feminist perspective sexual assault, assault prevention, and recovery. That understanding is critical for without that perspective, self-defense as a means of protection, confidence, deterrence and empowerment makes little sense. Additionally, the concept of self-defense as a means of healing

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following experiences of sexual assault would also have little meaning.

The class was taught from a feminist perspective which sought to have participants understand male power, dominance, and control over women as the primary explanation for sexual assault in this culture. An express goal of the class was to have participants experience empowerment in their lives where they actively took control as compared to being passively controlled by life's circumstances. This goal was consistent with feminist pedagogy which stresses students as active participants in their learning process rather than passive recipients of knowledge.

My research of this class was also conducted from a feminist perspective. Feminist researchers have stressed a methodology that places primary emphasis on the experiences and perceptions of ordinary women as they live their lives in patriarchal social structure (Weiler, 1988). I sought to understand the experiences and perspectives of survivors of sexual assault as they moved through their healing process.

As a self-defense instructor, I have had considerable experience in dealing with assault prevention and some experience in dealing with women who have already experienced sexual assault. This study was to change all of that. It was truly an experience into the unknown for me because I was forced to confront issues that all survivors face. I had read about those issues in books and research articles, but this study put me face to face with people who were

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living those issues every day of their lives. The two classes that I studied were emotionally charged. There were times when individuals experienced intense fear, sorrow, pain, and alienation. I watched women struggle to trust me, to trust each other, and to trust themselves. Those times were contrasted with experiences of power, concentration, confidence, joy, and feelings of oneness with others who had similar experiences.

This dissertation is really their story. I wanted to understand what self-defense training felt like for these women. I wanted to know what the training meant for them and how they saw it being a part of their healing process. I wanted to better understand the pain that they had experienced, I wanted to know what their lives were like now in relation to their assaultive experiences, and I wanted to better understand their courage as they confronted the "monster" in their lives. My respect for these women is enormous because every one of them expressed the courage to heal.

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CHAPTER ONE

INTRODUCTION

This study focuses on self-defense training as one aspect of the healing process for survivors of sexual assault. Rather than thinking of self-defense training only as a means of prevention or deterrence, this study seeks to explore such training as a means of healing following sexual assault in the forms of rape, childhood sexual abuse, and battering within an intimate relationship.

This first chapter provides an overview of the study in which I will present background material which will serve as a rationale for the need for the study. Following will be the purpose and focus of the study as well as a brief sketch of the research design. I will conclude the chapter by presenting a brief outline for the rest of this dissertation.

Background

Sexual assault has been the focus of research attention in a number of different ways over the last two decades. The research conducted has focused on assault from psychological perspectives, from sociological perspectives, and most recently from various feminist perspectives.

Researchers have chosen to focus on victims, on assailants, on the factors that are related to the various forms of assault, on statistics as to how prevalent assault really is, and most recently, on responses to sexual violence.

A recent body of literature has been developed over the last decade that has focused on assault prevention. In her now classic work entitled Against our will: Men, women, and rape, Susan Brownmiller (1975) may have been the first who talked about assault prevention and advocated that women take self-defense classes and/or martial arts classes. She discussed her own experiences in a martial arts class and the empowerment that was part of that experience.

More recently, Pauline Bart (1979, 1981, 1985) has conducted a series of research projects that have looked at women's efforts to resist rape. Other researchers have followed suit and have reached similar conclusions in their studies. Unequivocally, the advice that these researchers have passed on to women is that self-defense works (Bart & O'Brien, 1985; Selkin, 1975; McIntyre, 1979; Queen's Bench, 1976). They have argued that women have been taught to be "nice girls." That kind of socialization may contribute to victimization. In contrast, self-defense training provides an opportunity to "unlearn" being a nice girl (Bart & O'Brien, 1985).

The present research study also focuses on sexual assault and self-defense training. However, in this case, self-defense training was placed in a very different

context. Previous research focusing on self-defense looked at it strictly as a means of preventing or deterring rape. This study focuses on self-defense training following various forms of sexual assault as a therapeutic intervention during the process of healing and recovery.

The present focus did not happen accidentally or even as a "next logical step" for examinations of self-defense training. While researchers have advocated self-defense training as a very effective means of deterrence since 1975, the training is not readily available to most women. Caignon and Groves (1987) listed self-defense programs in the United States and Canada as a resource for women who wanted to participate in self-defense classes. According to their listing, there seem to be pockets of programs across various parts of the United States but they are not readily available in all parts of North America. For instance, in California there were 33 programs listed throughout the state (however, 5 of the 33 programs were branches associated with Model Mugging Inc./Women's Self-Defense and Empowerment, which is a nationwide program originating in Monterey, CA). Illinois, Massachusetts, Minnesota, New York, Ohio, Pennsylvania, and Michigan were the only other states that offered programs in more than one or two cities.

I feel fortunate that I live in one of those active pockets where self-defense training is readily available to women, children, the elderly, and the handicapped. I have been teaching self-defense for the last six years in a

variety of different settings. There are a number of women in my community who are my colleagues and we have been involved in the training of literally thousands of women in both-long term classes that span at least 10 weeks and short format programs that may last two to eight hours.

Many of the women who have taken our self-defense classes have identified themselves as survivors of various forms of sexual assault. They have reported in incidental conversations with me and with other colleagues who teach self-defense that the training has contributed to their healing process in very important ways.

The Problem

My colleagues and I had talked over the last several years about offering a self-defense class for survivors only. The idea was based on the conversations we each had with different students. According to the students who had talked with us as survivors, it seemed that self-defense training did make some important contributions to their healing process but those contributions came at a cost. Because of the issues that many survivors faced as they worked toward healing, many aspects of self-defense training seemed overwhelming and very difficult. Some who started the classes dropped out because they found the classes too difficult to attend. There was no support network in which to deal with those issues in the context of an average class where many women were not necessarily survivors. Thus, when

the opportunity finally presented itself to actually develop and offer a self-defense class designed to meet the specific needs that survivors had in dealing with the training, I was not only interested as a self-defense instructor but as a researcher.

We had long suspected that self-defense training was important for survivors as they worked toward healing but the possible contributions had never been systematically examined. Additionally, the specific needs that survivors have in dealing with their assaultive experiences in the context of a self-defense class had also never been studied. These are the problems that this study addresses. This study represents an effort to systematically examine self-defense training as a means of healing for women who are already survivors of sexual assault.

This study is intended to further our understanding of the process of empowerment that survivors must go through to regain the control in their lives that many feel they have lost through their experience of sexual assault. Self-defense training may play an important part in that process of empowerment and therefore, healing.

Purposes of the Study

The study has the following three purposes:

1. To describe the development and implementation of a self-defense class specifically designed for survivors of sexual assault.

2. To document the progression of the class as well as the experiences and perceptions of the participants: students, therapist, and instructors.
3. To examine what is described and documented for patterns which may be useful in better understanding the role that self-defense training may play in the healing process.

The detailed description of the development and implementation of self-defense training geared specifically to the needs of sexual assault survivors will provide information that will be useful to a variety of audiences, among them those who currently work in the area of assault prevention, those who work with survivors in the healing process, physical educators, sociologists, and those involved in research specific to sexual assault and/or feminist issues.

I also hope that this study is beneficial to the participants who were in the study: the women who were the students and the therapist and instructors who planned, taught, and facilitated the two classes. Self-defense training has the potential to provide participants with a very empowering experience that may assist them in regaining control in areas of their lives where they feel that control has been lost. Additionally, the therapist may find the study very beneficial in gaining added insights into the experiences of survivors. Finally, instructors may learn new ways of presenting materials specifically suited to the special needs of survivors.

Focus of the Study

As is true of other areas of social research, it is important to let the research questions guide the choice of method, and not vice versa. Among the questions guiding this inquiry of a self-defense class for survivors were the following:

1. How did the students in the class define their own assaultive experiences?
2. What was the historical and social context of their assault experiences?
3. How did those experiences currently affect their lives?
4. How did the course developers determine the course content?
5. What self-defense strategies were taught as part of the class and how were those strategies taught?
6. How did the students perceive and deal with the course content? Additionally, how did they perceive the course as part of their own therapeutic process?
7. What was the role of the therapist in working with the class?
8. What were the therapist's perceptions concerning the class and its role as part of the therapeutic process?
9. What were the perceptions of the instructors throughout the course?

Approach to Inquiry

These questions seem best answered through an interdisciplinary approach that combined physical education, sociology, social psychology, and feminist theory. Besides the interdisciplinary approach described above, it should be noted that I approached my research from a distinctly feminist perspective. That perspective uses feminist theory to explain sexual assault as outlined in the preface to this final report. I considered myself primarily as a feminist physical educator/sociologist in my approach to this study. Single perspectives have been used to examine sexual assault, prevention, and healing in the past. While each approach has made its unique contribution, the topics each involve complex issues that demand a more complex approach to fully and holistically understand them.

The complexity of this type of violence and the interdisciplinary nature of the approach to the research questions required a methodology which could capture the complexity of the phenomena being studied. Fieldwork research was such a methodology.

Fieldwork research places primary importance on understanding the meaning of events to the participants in those events. Fieldwork research can provide rich case descriptions of complex social interactions that represent the perspectives of those being studied (Dunn, 1985). Additionally, besides providing rich descriptions of events and

the meanings of those events to participants, field research identifies general patterns and regularities of social life which is the aim of theory (Emerson, 1983; Frake, 1983; Geertz, 1983; Hammersley and Atkinson, 1983). Such research has the following distinctive features, all of which were prominent in data collection, reduction, and analysis (Erickson, 1985; Hammersley and Atkinson, 1983; Bogdan and Biklin, 1982; Gordon, 1980; Schatzman and Strauss, 1973; McCall and Simmons, 1969):

1. fieldwork research is holistic, studying phenomena in their wider social context;
2. fieldworkers typically collect descriptive data from multiple sources such as direct observation of everyday life, informant self report, naturally-produced written documents, and interview;
3. fieldworkers begin with initial broad, guiding questions about a particular phenomena and proceed to subject those questions to data as they are collected;
4. by generating short- and long-range working hypotheses both during and after fieldwork, researchers are able to refine their questions and modify their accounts of the phenomenon of interest;
5. such hypothesis testing and building of grounded explanations is accomplished by the constant comparison of explanations with instances of new data and by the cross-checking of inferences across multiple types of data (triangulation);
6. in framing their descriptive accounts, fieldworkers continually seek disconfirming evidence--instances that do not fit their explanations. Ultimately, they hope to ground their explanations in the behaviors recorded and develop an explanatory model that accounts for all the cases observed;
7. during the ongoing deliberative process of data reduction and analysis, the perspectives of the researcher and each of the informants studied are actively sought. In addition to these perspectives,

insights from various relevant literatures are applied to the data as "conceptual levers" helping the researchers to view the data in new and insightful ways and to generate analytic categories;

8. fieldworkers document the evolution of the study, offering an account of how their research questions, theoretical orientations, assumptions based on prior experience, and culturally learned values and beliefs have changed during the course of the study.

(Florio, Clark & Dunn, 1983, p. 19-20)

Overview of the Research Procedures

Data were collected by means of three primary procedures. The majority of data was represented in fieldnotes written on the basis of participant/observation. I participated and observed in a self-defense class that was established specifically for women who were survivors of sexual assault. The class was offered two times and each class was part of the study. The first will be referred to as the pilot class and the second will be referred to as the focal class throughout the rest of this dissertation.

A second means of collecting data consisted of tape-recorded interviews with various participants in the two classes. Those people included those responsible for developing the class, the students in the classes, the instructors who taught the classes, and the therapist who worked with each class.

The third means of collecting data consisted of examining existing documents that were used in developing the classes or were used in the classes themselves.

Additionally, I was able to examine self-produced writing and questionnaire responses from the students.

Two classes were offered so I was able to collect data from each one. I was able to compare the two classes and document the changes that occurred between them. The pilot class met for eight weeks and the focal class met for twelve weeks. Data were collected throughout the time span of the classes as well as after each one was finished through interviews.

Analysis occurred throughout the study as fieldnotes were reviewed on a regular basis. Upon completion of the pilot and focal classes, data were analyzed more thoroughly for patterns that were useful in answering the research questions both as they initially were stated as well as the subsequent questions that ongoing analysis throughout the study produced. This dissertation represents the final research report.

Assumptions

This study is based on the assumption that self-defense training is only one aspect of the healing process. The class was offered to women as a supplement to their ongoing efforts to work toward greater healing. While a therapist worked with the class and facilitated the group portion, it was not intended to be a substitute for other forms of individual or group therapy. Healing is a lifelong process that is never completed. It may be a very painful and

difficult process for many survivors. An eight or twelve week self-defense class is not a cure for all of the lasting repercussions of sexual assault, as nice as that would be. My goal in this study was to determine if self-defense training could play a role in the healing process, not whether it could be the healing process.

Another assumption of the study is based on a feminist philosophy of healing. In many of the helping professions, there is an ongoing struggle between helping people learn to help themselves versus saving or rescuing the client (Schechter, 1982; Schuiteman, 1986). A feminist analysis of healing implies that women who are survivors of sexual assault must be helped to understand their own healing issues better so that they can ultimately be their own healers. Becoming that self-healer is part of the process of empowerment. There were no false assumptions about the role of healer among those working with the class. However, the analysis shows that the line between empowerment and caretaking was not always clear in the survivors' self-defense class.

Limitations

Although this study will have important curriculum implications, it is not a curriculum study. There are many potential skills taught in a self-defense curriculum. The specific techniques taught are not so critical as compared

to the intent behind the techniques, that being empowerment. Participants in self-defense classes are taught to rely on themselves for their own sense of safety rather than sources of safety external to themselves. Additionally, the techniques that were part of this curriculum were chosen as skills that would prevent or deter sexual assault based on a feminist perspective of the reasons behind assault. Rather than assuming that the assailant was sexually motivated, the assumption was made that sexual assault was a crime of violence involving power, dominance, and control as the primary motivating factors.

The total number of survivors who were part of the two classes (pilot and focal) was 16. That is not a large group in terms of generalizability. However, due to the nature of the study and the class, the number of participants needed to be limited. Support/therapy groups of any kind typically have no more than 8-10 members. The pilot and focal class each had 8 women who participated as survivors of sexual assault. These 16 women certainly do not represent all survivors. Each woman experiences sexual violence in a very personal and unique manner. However, the literature indicates that many of the issues around healing are similar among survivors. I believe that by learning more about these 16 women's experiences with assault and with the self-defense training as one aspect of their healing process, more knowledge can be applied to the experiences of other survivors as well.

A final limitation of the study lies in the fact that in essence, I studied myself because I was part of the teaching team. As a true participant/observer, I played a very important role in the class. Thus, my research was impacted by my teaching and my teaching was influenced by my constant researcher's focus. It is a very difficult task to study oneself. However, I primarily focused on the class members and not so much on myself. I believe my role as instructor was necessary, even if problematic at times. Survivors of sexual violence often have great difficulty trusting others. The teaching team worked very hard to establish an atmosphere of trust for all class members. Thus, had I been an "outsider" coming in to study the class, I suspect that I would not have been welcome in the first place. The role of "insider" seemed critical in establishing the trust necessary to conduct the research project.

Overview of the Organization

This dissertation is divided into seven chapters. Chapter One includes a brief statement of the problem and a definition of the purposes of the study.

Chapter Two provides a review of the literature that provides a rationale and theoretical basis for the study. How the study fits into multidisciplinary framework is described.

Chapter Three details the methods used in the study.

The chapter includes a discussion of student recruitment and screening, the context for the study, and the methods of data collection and analysis.

Chapter Four provides an analysis of the development of the pilot and focal classes. While both classes were examined as part of the study, the focus on each was somewhat different. The pilot class represented our first effort to offer a self-defense class strictly for survivors of sexual assault. As is true of many first time efforts, some of the choices made for the class seemed better than others. Thus, we used our experiences in the pilot class as important resources in planning the focal class. Thus, the focal class represented the best aspects of the pilot class as well as changes that we thought would improve it. This final report reflects that same understanding of the two classes. The pilot class was examined as background to the focal class which in turn served as the primary focus for analysis.

Chapter Five presents the results of the examination of the focal class. The chapter introduces the reader to each of the members of the class, the primary issues that survivors face as they work toward greater healing, and how the class addressed those issues.

Chapter Six presents three overarching themes that transcended any one of the individual healing issues. Those themes were apparent throughout the entire focal class.

The final chapter presents the conclusions and

implications of the study. Those implications are addressed to self-defense instructors, survivors of sexual violence, therapists who work with survivors, and researchers who would continue pursuing this line of inquiry.

CHAPTER TWO

REVIEW OF RELATED LITERATURE

This chapter begins with a discussion of the nature of sexual assault in its various forms, including rape, battering, and childhood sexual abuse. For many years there was a conspiracy of silence about this kind of violence. The silence effectively minimized the significance of this violence in society at large. This silence may in part also have been responsible for the failure of those in the academic community to study sexual assault. Very few people understood the magnitude of sexual assault or thought it worthy of study. While incidences of sexual assault have been documented throughout history (Brownmiller, 1975), it was not until 1971 that a real break-through occurred that effectively began to break down the conspiracy of silence. That break-through occurred when Susan Griffin wrote "Rape: The all American crime" which was published in Ramparts. That article was the first that examined rape as an extension of male behavior. Griffin (1971) focused on the cultural definitions of male erotic pleasure and their links to power and violence.

Dramatic changes have occurred since 1971 in social responses to sexual assault. The conspiracy of silence is being broken by those committed to assault prevention, those providing services to the women and children who are

victimized by sexual assault, those academic researchers who are committed to increasing our understanding and knowledge in this area, and those in the legal system as that system strives to put sexual violence in perspective and to respond to the needs of those who must be protected under the law.

Sexual assault, no matter what form it takes, is a means of social control over women and a crime of violence (Brownmiller, 1975; Dobash and Dobash, 1979; Griffin, 1971; Groth, 1979; Guberman and Wolfe, 1985; Katz, 1984; Schecter, 1982). Yet, for those who have never experienced this form of violence, those words may not provide a sufficient context for personal meaning. The words of the following poem were put on paper during the ten-day period immediately following an attempted rape as experienced by its author, Jan Angevine. While the entire poem has not been recorded below, the sections provided give more meaning to the pain, degradation, objectification, force, hatred, and terror that may all be part of this crime of violence.

I hear his feet running toward the car.
 I see the flash of him through the rear window.
 I know what is about to happen.
 The door is torn from my hand
 as I try to close myself off from the
 Mongol, the Turk, the Viking, the slave owner,
 the Crusader, the G.I., the marauding hordes,
 centuries of brutal men,
 masculine force,
 rapists,
 Monster-full.
 Their creation, their true believer,
 swings his arm and my lips,
 smashed against my teeth, split open.
 The car is invaded with violent colors.
 A holocaust of black and blue fills the space.
 I am breathing blood from my lips.

It is chaos. His body crashes full force
 onto me. He is demented, hallucinating,
 groaning. His tongue swollen with violence
 comes for my mouth, now open with screaming.
 Revolt and terror twist my body,
 pinned to the seat.
 My mind shrieking with death,
 explodes with horror,
 breaks into infinite pieces.
 His knee shoved between my legs is driven
 with wild force to crush my soft helpless genitals,
 again and again.
 I am over the edge, head on the floor.
 He is tearing at my clothes, throwing
 blows to my stomach. He is enraged
 at my khakis, which won't open,
 won't yield to him.
 One hand thrusts into my pants, the other
 grabs the door, slams it shut.
 Every part of me that is woman
 is struck, shoved, grabbed, yelled at, violated, hated.
 I am lost in unendurable loneliness.
 Terror traps my spirit and
 fills me with paralysis,
 until the most primitive part of my brain,
 survival,
 pure survival, screams for life.

(Anglevine, 1981 in Caignon and Groves, 1987)

Sexual assault, no matter what form it takes is the
 exertion of power, dominance, and control by one person over
 another. However, many myths and misconceptions have pre-
 vailed concerning sexual assault that serve to perpetuate an
 ideology that justifies such violence.

Myth 1: The Frequency of Sexual Assault

One of the most prominent myths concerns itself with
 the frequency of sexual assault. While the conspiracy of
 silence is being broken, we still do not hear about the many
 assaults that are occurring and therefore, we tend to believe
 that sexual assault happens infrequently. In reality,

sexual assault is the most frequently committed violent crime in America (Bart & O'Brien, 1985; Brownmiller, 1975) and paradoxically, it is also the violent crime that most often goes unreported (Bart & O'Brien, 1985). It is estimated that only 5-10% of rapes and rape attempts get reported to law enforcement agencies (Groth, 1979). Battering is considered to be the violent crime reported least often (Dobash & Dobash, 1979; Schechter, 1982).

Statistics indicate that one in five women will experience either rape or attempted rape at some point in their lifetimes (Brownmiller, 1975). One in three women will experience battering at the hands of some man with whom they share bonded relationships (Strauss & Gelles, 1980). Several researchers have estimated that 20-25% of all women will be battered at least one time during the course of a relationship with a given man (Straus, Gelles, & Steinmetz, 1980).

Russell (1978) reported that 54% of the females under age 18 in a random sample had been sexually assaulted. Sexual assault was defined as sexual activity ranging from unwanted touching and threats of unwanted touching to rape causing bodily harm. Estimates are that one out of five to one out of three women have experienced childhood sexual abuse (Finkelhor, 1979). Additionally, many women who experience sexual abuse as children tend to experience further victimization as adults (Mitchell, 1985). Mitchell (1985) reported that "it is almost as if most victims of child

sexual assault were type-cast early to take abuse and continued to think that this was appropriate" (p. 100). Thus, the above information about the frequency of sexual assault indicates that rather than occurring infrequently, as has been previously believed, assault occurs with great frequency in this culture.

Myth 2: The Motivating Factors Behind Sexual Assault

Early explanations for sexual violence varied depending on the form of violence. This section will briefly address some of the most common explanations for rape, battering, and the sexual abuse of children.

Rape

For many years, rape was explained in terms of psychology. The focus was placed on individual assailants and theorists assumed that men raped for sexual reasons. Early theories concerning rape postulated that the assailant was highly aroused or highly "turned on" by his victim and that he simply acted out impulsively and inappropriately in response to those feelings (Brownmiller, 1975; Groth, 1979). We now realize that sexual assault is not motivated by feelings of sexual arousal. Amir (1971) provided the first in-depth statistical study of rape in the Philadelphia area. Brownmiller (1975) wrote the following about Amir's (1971) study:

For the first time in history the sharp-edged profile of the typical rapist was allowed to emerge. It turned

out that he was, for the most part, an unextraordinary, violence-prone fellow (p. 196).

One of the most significant findings to come from Amir's work was that over 70% of the assaults in his study were preplanned. Previous psychological theories attributed rape to spontaneous and uncontrolled lust. Amir (1971) found that rape was not only planned in advance, but also often included elaborate set-ups so as to lure the intended victim into a trap.

Battering

Early explanations for battering were also based on psychology. However, those theories focused more on the women in violent relationships rather than on the men. In 1964, Snell, Rosenwald, and Roby published a study entitled "The wife-beater's wife: A study of family interaction." The researchers attributed the aggression that the women experienced to their own masochistic needs which the violent husbands fulfilled. Other studies were based on similar androcentric notions.

Morash (1986) provided an in-depth review of the literature available on wife battering. She reported that many early studies were based on additional incorrect beliefs such as the belief that battering rarely occurred and that women were to blame for precipitating the abuse.

Childhood Sexual Abuse

Early explanations for childhood sexual abuse were based on the Freudian theory of the Oedipus complex. The theory claimed that sexual abuse did not occur with great frequency and what women did remember as sexual abuse was only their wish for such sexual abuse (Mitchell, 1985). The myth of the seductive child who was responsible for her own abuse was born from these early psychological explanations that excused the assailant.

In addressing the myth regarding the motivating factors behind sexual assault, psychological explanations focusing either on the assailants or victims were discussed. Psychological explanations failed to provide structural or societal explanations for sexual assault. Later theorists began to focus more on sexual assault from a sociological perspective. The following section of this chapter focuses on sociological studies that have examined sexual assault. They include demographic and correlational studies as well as studies that use social learning theory and the inter-generational transformation of violence theory. Following that examination, I next discuss feminist theory and its contributions to our understanding of sexual assault. That section also includes a critique of the other perspectives used to examine sexual assault.

Sociological Studies That Have Focused On Sexual Assault

Demographic Studies

Menachim Amir (1971) was one of the first sociologists who seriously studied rape. As was previously explained, he examined rape in the Philadelphia area. While many of his conclusions have been criticized for being racist and for being too lenient on assailants, he was the first to describe the stages and characteristics of rape that served to dispel many earlier myths associated with the crime. Additionally, while Amir (1971) claimed that rape was primarily a crime committed among blacks, a claim which many criticized as racist, he dispelled a previously held racist myth that had long been held among Anglos. Amir (1971) found that rape was primarily an intra-racial phenomena, meaning that men raped the women with whom they had the most ready access. White men tended to rape white women, black men tended to rape black women, etc. Previously, many white people assumed that black men desired to rape white women. That myth had been held for many years and had been evidenced historically through the hundreds of lynchings of black men for the rape of white women.

Other researchers during the mid and later 1970's began looking at rape on a much larger scale so as to provide demographic characteristics of the crime. The Law Enforcement Assistance Administration (LEAA) of the U.S. Department of Justice sponsored a wide scale study that spanned two

years and was concluded in 1978. The purpose of the project was to increase the effectiveness of law enforcement agencies in their responses to the crime of rape. The LEAA (1978) reported that rape is the most-under reported crime in the United States, "with only a fraction of the cases reported to police.... Even when crimes are reported, only 5 percent result in apprehension of a suspect and in less than 3 percent is there an actual conviction" (p. ix, abstract). The report also stated that the rapist is largely indistinguishable from the rest of the population (LEAA, 1978). This was an important finding in terms of dispelling the myth that the rapist is somehow "different" from non-rapists.

Sociological perspectives have also been used to look at domestic violence. Struass, Gelles, and Steinmetz (1980) provided an important demographic look at domestic violence. They reported that 47% of the husbands in their study beat their wives at least three or more times per year.

Correlational Studies

Researchers at the New Hampshire Family Violence Research Program were among the first sociologists to give serious consideration to wife beating. Gelles (1977) examined the social dynamics of spouse abuse by analyzing when, where, and under what conditions family violence occurred. Strauss (1977) discussed wife beating from a sociological perspective in which he placed it in a number of different

contexts. Those contexts included cultural norms that encourage violence within this society, the family as a training ground for violence, sexism, and economic frustration.

Social Learning Theory

Other researchers have used social learning theory to look at battering as well as child abuse. Pagelow (1981) postulated that when a man first acts violently toward a woman and the act provides satisfactory results, i.e., the woman "shuts up," quits arguing, gives in, tries harder to be a good partner or mother, etc., the violent behavior is likely to be repeated. The model suggests that violence directed against women is learned in a culture where men learn to compete, be aggressive, where gender expectations are highly polarized, and where physical force is condoned as an acceptable means of maintaining dominance and control over others.

Intergenerational Transmission of Violence Theory

Social learning theory has contributed greatly to the concept of intergenerational transmission of violence. Research conducted from this perspective suggests that children raised in violent homes learn to be violent adults. (See for example Herrenkohl, Herrenkohl, & Toedter, 1983). While most of the research efforts have focused on child abuse, the concept has also been applied to men who physically abuse their partners. The theory suggests that men who were themselves abused as children, or who saw their

fathers beat their mothers, are more likely to use physical violence against their own partners.

Herzberger (1983) examined this theory from a social cognition perspective because it was clear that not all individuals who grew up in violent homes became violent adults and conversely, not all violent adults had grown up in violent homes. Unlike strict social learning theorists who view individuals as "empty vessels" to be totally influenced by their social environment, social cognition theorists view each individual as an active, thinking, and interpreting being (Herzberger, 1983). Children who grow up in violent homes may not automatically accept the violence nor internalize it as appropriate behavior later in life. Herzberger (1983) suggested that children will come to accept abusive parents' behavior as legitimate under three conditions: 1) when the parents' behavior is perceived as normative within the culture; 2) when the circumstances around abuse are considered proper, i.e., when wrongdoing has actually occurred as compared to random beatings; 3) when abuse is accompanied by verbal communication that substantiates the parental behavior.

Feminist Theory

The advent of the feminist movement in the 1970s sparked a wave of feminist revision in many academic pursuits, particularly those that directly affected the well-being of women and children. Thus, feminist researchers

began examining sexual assault from a feminist perspective.

While feminist theorists may share many of the perspectives of other theorists in psychology or sociology, feminist theorists bring a unique perspective to their research that seeks to place sexual violence in the much larger context of women's oppression. Feminist theorists contend that no other theories besides feminist theory explain why some men choose to act violently toward some women and/or children. These feminist theorists have critiqued other perspectives used to examine sexual assault because of the shortcomings that result from such androcentric perspectives. I shall outline several of those critiques below.

The first and possibly primary critique levied at non-feminist approaches to sexual assault is based on the primary questions asked by theorists using each perspective. Feminists argue that no other perspectives can actually explain why men sexually assault women and children. Sexual assault is the most one-sided crime regarding the gender of victims and assailants. Ninety to ninety eight percent of sexual assailants are male (Brownmiller, 1975) and ninety-five percent of the victims are women and children (Schechter, 1982). Schechter (1982) pointed out that some sociologists and criminologists ask "why are men violent?" and assume that question is synonymous with asking "why are men sexually violent toward women and children?" In speaking specifically about battering, Schechter made the following observation:

Examining why men are violent does not explain why men act violently toward a specific target, women, or within a specific context, their home, nor can it tell us why some men are violent solely to their wives. Only by studying social and historical relationships within the family can we reveal the meaning and purpose behind battering (p. 210).

Social learning theory has also been applied to sexual assault. However, while social learning theory may adequately explain why men continue to use violence against women, the theory cannot explain why men use that violence in the first place. Currently, social learning theory has not provided an adequate answer as to why some men use violence against some women and children. While researchers using the intergenerational approach of social learning theory would argue that children growing up in violent homes become violent adults, feminist researchers, as well as those using more of an interactional approach, would argue that not all children growing up in violent homes become violent adults. Conversely, some violent adults grow up in non-violent homes.

Schechter (1982) argued that most researchers looking at male violence directed at women and children claim that they are analyzing what causes such violence. However, in reality, they are simply looking at individual cases and why a particular man beats his wife or rapes a woman or molests a child. Rather than developing a social theory of why men as a group direct their violence at women and children, they call the sum of their insights about individual cases social theory.

Feminist theorists have also been critical of correlational research. Researchers who conduct correlational work concerning the factors associated with battering, rape, or child abuse may accurately provide pictures of some violent men. For example, Strauss (1973) developed a "system" approach to family violence. According to Tierney and Corwin (1983), who applied Strauss' (1973) system approach in developing a model to study incest, no form of violence is the sole result of "single pre-conditions acting independently, but rather of the combined or cumulative influence of a set of factors" (Tierney and Corwin, 1983, p. 106). Tierney and Corwin (1983) selected variables that fell into several broad categories that might be associated with incest. They recommended that future researchers develop hypotheses based on their model so as to better explain which factors were truly associated with incest so as to better explain the phenomena. In describing the variables that were selected, the authors stated:

They [variables] are presented with the full awareness that their apparent association with incest may, in fact, be spurious. The only way to determine whether such factors do help explain the phenomenon is to test hypotheses based on the model (p. 106).

Factors associated with sexual violence do not cause that violence. Many researchers associate stress with battering. However, stress does not cause abuse. Men choose to deal with their stress in different ways. The belief in the right to use violence, to abuse women, and to dominate women causes a man to deal with his stress by abusing his

wife (Schechter, 1982).

Additionally, Groth (1979) provided us with important information concerning the psychology of the rapist. Yet, feminist theorists argued that his analyses do not go far enough. His work helped to dispel many myths concerning the nature of rape. He provided detailed information about many individual assailants and the attacks that they initiated. He carefully explained that rape was not sexually motivated but rather, was motivated for reasons of hostility and control more than passion. However, while Groth (1979) explored issues of power, dominance, and control, he never put that analysis in a social framework of gender relations. Groth (1979) described power rapists as those assailants motivated by needs of mastery and conquest. "Sexuality becomes a means of compensating for underlying feelings of inadequacy and serves to express issues of mastery, strength, control, authority, identity, and capability" (p. 25). Yet Groth (1979) never took his individual analysis any further in identifying those as issues that mark male and female relations in this culture. Feminist theory goes beyond individual analysis and examines the social relations between men and women to uncover why men target women and children as their victims of sexual violence.

Feminist theorists place primary emphasis on the patriarchal social structure that allows men a position of dominance and control over women and children. Feminist

theorists do not explain sexual assault in terms of "sick individuals." Rather, feminist theories emphasize a social order and structure that condones certain forms of violence as acceptable means of maintaining control (Brownmiller, 1975; Griffin, 1971).

Sonia Johnson (1987 in Master, 1988) cited rape, incest, prostitution, battering, and the murder of women by men as integral components of the patriarchal power structure. If these practices were not part of that structure, patriarchy would crumble (cited in Master, 1988). "Women have to be murdered [raped, battered, and sexually exploited] so that the rest of us will be terrified...and feel that we have to please men so that won't happen to us" (Johnson, 1987 in Master, 1988).

Both Griffin (1971) and Johnson (1987 in Master, 1988) point to a dichotomy that is established when we look at definitions of either heterosexual love or patriarchal control. Not only are men sexually violent, but they seek to protect women from other men. Protection, or chivalry as it is called, depends on sexual violence for its very existence (Griffin, 1971). Women pay a price for their protection. Johnson (1987 in Master, 1988) points out that women must try to please men. Griffin (1971) goes even further in saying that women must remain virtuous because women who do not remain virtuous do not deserve protection in this scheme of things. Rape is a transgression against chastity as defined by men. If a woman has already "given up her

chastity," she cannot be raped and therefore becomes part of the pool of women who are available for any man's sexual exploitation. Thus, rape and other forms of sexual exploitation limit women's freedom and forces them to be dependent on men (Griffin, 1971).

Bart (1979) also explored the dynamics of rape in terms of the double standard that exists for men and women. Men have sexual freedom to do as they please whereas women who stray from the path of chastity are labeled as "bad." Additionally, "bad" women are not going to be treated well by the legal system because they got what they deserved. In addition, unlike other crimes, corroboration is necessary to prove that rape really took place and often times there needs to be some evidence of a physical struggle in order to believe that the woman was indeed raped as compared to being a willing participant in sexual activity (Bart, 1979). Other feminist researchers were considered pioneers in the area of sexual assault. Two of those pioneers were Susan Griffin and Susan Bronmiller.

Susan Griffin (1971) was among the first to speak out about rape in an attempt to break the conspiracy of silence about this particular crime. She reexamined Amir's (1971) data and pointed out that these rapists were not abnormal men. Additionally, she explored cultural definitions of erotic pleasure. She claimed that male sexuality and violence seem to be inseparable. Male erotic pleasure seems to be tied to power and heterosexual definitions of love are

characterized and expressed through male dominance and female submission.

Brownmiller (1975) wrote what is now considered to be one of the classic feminist analyses of rape entitled Against our will men, women and rape. The first part of the book was devoted to a very detailed historical analysis of rape in which she showed over and over how rape has been used as a tool of male dominance to maintain control over women, thus supporting the primary argument of the book. The following quote best summarizes Brownmiller's theme:

A world without rapists would be a world in which women moved freely without fear of men. That some men rape provides a sufficient threat to keep all women in a constant state of intimidation, forever conscious of the knowledge that the biological tool must be held in awe for it may turn to weapon with sudden swiftness borne of harmful intent.... Rather than society's aberrants or 'spoilers of purity,' men who rape have served in effect as front-line masculine shock troops, terrorist guerrillas in the longest sustained battle the world has ever known (p. 229).

Brownmiller (1975) was instrumental in changing many people's attitudes about the crime of rape. A New York Times book review stated that the book deserved "a place next to those rare books which force us to change the way we feel about what we know" (front cover, Bantam edition).

Battering has also been examined from a feminist perspective. Pioneer research was conducted by Dobash and Dobash (1979) in a work entitled: Violence against wives: A case against patriarchy. The authors not only critically examined the patriarchal social structure, but also examined that structure within its historical context, so as to

better understand men's use of physical force in maintaining control over women. The researchers contended that violence cannot be studied in isolation. Therefore, they looked at violence that occurred within the family and concluded that violence happened frequently and that violence directed toward adults within the family unit was disproportionately directed against women. Based on those findings, Dobash and Dobash (1979) proposed that domestic violence is the extension of domination and control of husbands over their wives. This control is historically and socially constructed. Historically, men have believed that wives cannot and should not make certain claims upon them. Wives were objects to be exploited in order to have men's needs met. Dobash and Dobash (1979) claimed that such ways of thinking were typical of men in this culture. The issue is that of power and control of men over women and some men will use physical force to exert that control. Therefore, we need to consider the history of the family, the status of women within it, as well as the violence directed against them.

A number of feminist scholars have recently begun examining the concept of "The Family" and how ideology is closely linked to the subordination of women (Collier, Rosaldo & Yanagisako, 1982; Prager, 1982; Rapp, 1982; Thorne, 1982). Thorne (1982) began her examination with a critique of beliefs concerning the "monolithic family." She critiqued notions that it is natural and biological. She was also critical of analyses that maintain present family ideals in

a language of functions and roles. The family is not a biological given, rather it is a social construction resulting from the social organization of sexuality, reproduction, motherhood, and the very division of gender itself (Thorne, 1982). The assigning of roles and the use of functionalism only serve to set up mutually exclusive dichotomies between women and men as well as oversimplifying the complexity of behaviors within families. The idea of roles also implies the notion of "separate by equal" and obscures real differences in power between wives, husbands, and children.

Susan Schechter (1982) also examined the ideology of "The Family" as it contributes to violence directed against women. Schechter (1982) presented a history of pre-capitalist and early capitalist societies in both Europe and the United States. These societies were based on the father's control over the household. Powerful legal and moral codes were established that perpetuated the ideology of patriarchal marriage where the wife was ordered to love, honor, and obey. The family was recognized as the exclusive domain of the husband (Schechter, 1982).

Schechter (1982) pointed out that although men no longer own women as they once literally did, many men act as though they still do. Men are still recognized both legally and through tradition as being the head of the household. Men's status is upheld through a division of labor that is perpetuated both inside as well as outside the home. Major institutions such as legal, medical, judicial, and social

service institutions also support a man's right to control his wife (Schechter, 1982).

Battering is but one means of maintaining control over women (Dobash & Dobash, 1979; Schechter, 1982). It is important to differentiate between domination and battering.

All men learn to dominate women, but only some men batter them. Violence is only one of the many ways in which men express their socially structured right to control and chastise.... Men are not necessarily consciously aware of their need to dominate. Rather, they are socialized to feel uncomfortable when not in control, and they turn to violence as a response to their discomfort (Schechter, 1982, p. 219).

Incest is the final area of sexual assault that will be discussed from a feminist perspective. Florence Rush (1980) did groundbreaking work in this area. As with other feminist theorists, Rush did not provide individual explanations for so-called sick assailants. Rather, she provided an argument in which incest was placed in a social context where issues of power and control were examined. She provided evidence that traced the sexual abuse of children from Greek and biblical times through the present in order to point out that there never have been clear-cut taboos about sexual relations with either children or family members.

There have never been firm taboos against the sexual use and abuse of children by adults, or against incest. The 'horror' of sex or marriage between blood relatives has never been a barrier to erotic behavior. Marriage between kin is not a universal crime, and incest taboos are simply codes designed to regulate mateships (Rush, 1980, p. 134).

Rush (1980) also suggested that historical evidence supports the idea that seldom do child molesters even

realize that they have done anything wrong because that behavior has "always been done." Incestuous fathers simply believe that sexual access to their children is their right. Using historical evidence, she pointed out many instances where that notion was believed and has been carried into the belief system of today. For example, Rush (1980) used evidence from the Bible and the Talmud to point out that women have not been "free." They have always been someone's wife, concubine, or slave. The few women who were free of male ownership were free only because of their reduced value to men. In other words, if an overaged daughter went unmarried, a Talmudic decree released fathers of this unwanted responsibility by giving daughters of age their freedom.

While we may have progressed beyond those ancient times, the concept of the female as sexual property still exists. It is that belief that prohibits men in most states from being prosecuted for raping their wives. The concept of female as sexual property, coupled with a patriarchal system that gives men power over children as well as women, perpetuates the sexual abuse of children, particularly female children.

Mitchell (1985) talked more specifically about the absolute power that the perpetrator has over a child, especially when that child is dependent upon that adult for her very survival.

A child faced with a caretaker who wants her to perform sexual actions is faced with someone who is literally in control of her life. She is dependent on him for

emotional and physical nurturing...when she perceives this nurturing to be in jeopardy if she refuses to comply with sexual demands, she is forced 'to pay with her body for affection and care which should be freely given' (p.97).

The home is the location of greatest danger for women and children. Family units are microcosms of a greater society that is based on hierarchy and male dominance. In this structure women are subservient to men and children are subservient to both men and women (Guberman and Wolfe, 1985; Thorne, 1982). Feminists have long argued that men, women, and children experience the family differently because of status differences associated with gender and age (Thorne, 1982). Functionalists would have us believe that the family is a haven of love among equals. Feminists paint a very different picture of the family. The privatization of the family unit has concealed the reality that so many women and children experience. Rather than being a place of love and caring, for too many women and children the home is a place of fear and pain. Ultimately, the power of parents over children and husbands over wives is backed by force (Goode, 1982; Thorne, 1982).

Thus far, this review of related literature has focused on the nature of three forms of sexual assault: rape, battering, and childhood sexual abuse. The dynamics of sexual assault have been examined as well as the myths and misconceptions commonly associated with these forms of violence. Various psychological and social theories were presented as explanations for sexual assault. Those theories

were critiqued in light of a feminist explanation for sexual assault which serves as the basis for this author's approach.

The following section of this review focuses on the process of healing experienced by survivors of sexual assault. Regardless of the form that sexual assault takes, many of the issues that women face during the healing process are very similar. Thus, the following discussion of the healing process is a general discussion applying to rape, incest, and battering. Issues unique to one particular form of assault are discussed separately.

The Healing Process Following Assault

In this section, I first discuss the impact of assault on survivors. The impact of assault determines what kind of healing work is necessary as survivors work toward wholeness.

Bart (1979) discussed the differences and similarities among the different forms of violence directed at women.

1. Rape committed by someone known to the victim along with incest and battering are not only physical violations, but violations of trust. Stranger rape is not necessarily a violation of trust.

2. Victims of battering and incest are ecologically trapped in the situation because either they share the environment with the assailant or he has easy access to it.

3. Victims of all three forms of assault have been blamed for precipitating the behavior, but to a lesser extent in

stranger rape.

4. The assailant has no respect for the needs of others.

5. Battering and incest may be recurrent, rape is not (unless rape is occurring within the context of a relationship).

6. Stranger rape represents the social control over women who are not attached to a particular man (the assailant), whereas incest, battering, and acquaintance rape represent the social control of women who are attached to a particular man.

7. Depersonalization is a common response of victims experiencing all three forms of assault. "This isn't happening to me but instead to someone else."

While the above list describes some differences in the way women may experience sexual assault, (i.e., whether it is recurring as compared to a one-time only event) the list also contains some important similarities. Those similarities include the lack of respect the assailant has for his victim, the social control that the assailant exerts over his victim, the depersonalization that many victims attach to their experience, and finally, the blame that society attaches to the victims of assault for somehow causing their own victimization. The common experiences shared across the different forms of assault lead to issues that all survivors must face during their process of healing.

Most victims of sexual assault experience a loss of control in their lives. One of the primary motivating

factors for the assailant in any form of sexual assault is the total control of the victim. Victims of sexual assault experience acute loss of control during their experience with assault, but oftentimes that loss of control carries over into many, if not all, aspects of their lives. The introduction of this chapter included a quote from Judy Katz (1984) that described her feelings of helplessness and objectification. Bart and O'Brien (1985) asked the women in their study why they thought men raped. Nine women identified rape as a way that men kept women in their place. Twenty-four women said that rape was a means of terrorizing or controlling women. They recognized it as a "power trip" for the assailant. Seven women said that men raped because they viewed women as sex objects. Each response indicated some aspect of control and/or objectification. Women experiencing battering and incest also feel the same sense of a loss of control in their lives.

Hofeller (1983) presented three case studies of battered women in her book entitled: Battered women, shattered lives. These women's experiences also indicated that their abusive partners attempted to exert control over them and that the women felt very helpless to change the pattern of abuse.

Roger (not his real name) wanted to control every aspect of my life. He wouldn't let me go out and he wouldn't let me see any of my friends from work.... I never told anyone about the beatings until the very last. I was so embarrassed, I was sure that everyone would think it was all my fault, because I was such a terrible person (p. 10).

Hofeller (1983) pointed out that most women who receive physical abuse at the hands of a male partner also usually experience psychological abuse which has the same effect of control. Many women are told that they are worthless, incompetent, and incapable of ever making it on their own. They are criticized for the smallest to the biggest details, such as the way they comb their hair or being the worst wife and mother that ever existed. Hofeller (1985) went on to say that the psychological abuse is perceived by most women as far more devastating than the physical abuse. One formerly abused woman said that the physical injuries and bruises healed but the emotional scars never healed (Hoffeller, 1985). Psychological abuse of that nature tends to lower a woman's self-esteem to such a point that she becomes virtually helpless and very dependent upon her abuser, thus increasing his control over her.

Many incest victims also feel a loss of control in their lives. Assailants choose to victimize children for the same reasons that other sexual assailants choose their victims. Men assault children to feel powerful (Mitchell, 1985). Their intent is to subject a child's will to their own desires. Children are much more helpless than adults and children often maintain the lowest status of any age group in our culture. As a result, very seldom are children able to deter their abusers. The end result is that the child feels a loss of control that often carries over into later adult life (Mitchell, 1985). In a study conducted by

Diana Russel (1986) one woman expressed the results of her incestuous experiences in the following way:

I went completely inside myself. I'm only now beginning to come out after five years of intensive therapy. There probably isn't one area of my life it hasn't touched because without a solid family foundation you don't have anything (p. 12).

Victims of sexual assault must work through their experiences and learn to deal with them in order to move toward healing.

Part of the healing process for victims of sexual assault is to regain control in their lives where control has been lost. Other related issues include eliminating or reducing the sense of helplessness, the feelings of vulnerability, objectification, and the sense of incompetence (American Psychological Association, 1984). Women who are able to do these things experience what is termed empowerment. Empowerment is the act of reclaiming the power that victims of assault once had before they were victimized. In talking about her own healing process, Judy Katz (1983) stated:

Through this, I have come to terms with the fact that basically I am alone in the world. Coupled with this learning is the awareness that I can seek out and identify the resources I need to help myself. I feel stronger now knowing that I can ask for what I need.... All of this has helped me to identify a new sense of internal power that exists within myself (p. 65).

Besides feeling a loss of control in their lives, women who experience sexual assault also tend to share the belief that they have somehow caused their own victimization (American Psychological Association, 1984; Bart, 1979;



Hofeller, 1983; Mitchell, 1983; NiCarthy, 1986; Katz, 1984). The belief is very common because historically, women have always been blamed for being too seductive or too promiscuous, thereby causing rape. Double standards have historically been applied to men and women in terms of sexuality (Bart, 1979; Griffin, 1971). Women are expected to closely guard their chastity and when that chastity has been violated, even by another's use of force, the woman has always been blamed for not being pure enough.

Battered women have long been accused of not being good enough, of somehow provoking their partner's wrath (Hofeller, 1983; NiCarthy, 1986; Freedman, 1983; Schechter, 1982; Dobash & Dobash, 1979). Historically, physical violence has been condoned as an acceptable means of keeping a wife in line and punishing a "bad" wife (Dobash & Dobash, 1979).

Young children who are sexually abused by familiar adults are frequently told that they are to blame. Many abusers convince the child that she really wants to be touched, penetrated, fondled, etc. Many children and/or adult women assume that they must have done something to deserve the pain which they have endured.

The healing process for survivors of sexual assault involves being able to provide oneself with self-compassion. Women must learn to end the self-blame that society has reinforced. Some rape victims believe the myths and accept the blame that society heaps upon them for their own

victimization (American Psychological Association, 1984; Brownmiller, 1975; Janoff-Bulman, 1979). A sense of guilt and shame are two major reasons why many women choose not to tell anyone about their rape experience let alone report the rape to law enforcement agencies.

Self-blame is a reason why many women stay silent about battering as well (American Psychological Association, 1984; Janoff-Bulman, 1979). Pagelow (1981) found that very few of the women in her study sought outside help in dealing with their physical abuse. However, when women did seek outside help, they most often talked to clergy and/or marriage counselors. Pagelow (1981) reported that most of the women became disappointed with the lack of understanding that they received from these so-called helpers. Oftentimes the women were encouraged to stay with their husbands and were advised on how to make appropriate changes to end the beatings (insinuating that the women were to blame) as compared to learning to place responsibility on the assailants.

Survivors of sexual assault often feel intense anger toward their assailant and/or toward men in general (American Psychological Association, 1984). Thus, another aspect of the healing process is learning how to deal with that anger. One of the benefits of being involved in therapy is that women are assisted in getting in touch with feelings that may be repressed--feelings such as anger. When finally in touch with feelings of anger, women have expressed the desire to kill their assailants or place them

in positions where they would experience some of the trauma that they inflicted on their victims (Katz, 1984). Verbalizing those kinds of feelings to people who understand, such as a therapist or members of a support group, provide feelings of relief and freedom. What were once repressed feelings are no longer locked inside (Katz, 1984).

A final aspect of the healing process deals with the acute alienation. Alienation can occur in several forms: Alienation from the body, alienation from others and alienation from events (or denial from events/experiences). Russell (1986) reported that 20% of the incest survivors in her study experienced increased negative feelings about their body as the result of the incest. Katz (1984) expressed feelings of abandonment and isolation after being raped. She felt like she was totally isolated and that no one could understand what she had been through. Battered women are frequently isolated by their batterers as outside social connections with friends and other family members are actually cut off. As a result of being cut off from others, many battered women feel very much alone and isolated in their experiences. Healing involves ending those feelings of isolation.

There are many ways that women who are survivors of sexual assault can work toward healing. Because this research project explores self-defense training as it relates to the healing process, the next section of this chapter looks at research conducted in the area of self-defense and

assault prevention. Following that examination, I discuss how self-defense training may contribute to the aspects of healing described in the section above.

Self-Defense Training and Assault Prevention

Self-defense training is a concerted effort to provide women with very practical skills that would prevent and/or deter sexual assault. Strategies include awareness and assessment skills to teach women how to recognize assault and choose particular strategies of prevention/deterrence. Psychological, verbal, as well as physical skills are taught as prevention/deterrence strategies. The training is not martial arts training per se. However, while certain physical skills may be based on martial skills (i.e., various strikes and kicks) self-defense training is designed to be very practical, simple, and effective. Karate, for example, may take many years of intensive training and practice in order to develop certain techniques. Those techniques may be very complex, beautiful, and exciting. However, a flying-spinning-inside-crescent kick may mean very little when confronted by an assailant. The physical skills taught in a self-defense course are intended to take advantage of vulnerable target areas that are poorly protected on an assailant's body. Because such target areas are poorly protected and sensitive to pain, women can learn to take advantage of them regardless of strength and/or size.

Self-defense training as one strategy of assault prevention has been advocated by feminists for many years (Brownmiller, 1975). While self-defense training is an individual level response to a societal level problem, it can be an important preventive strategy for several reasons. First, unlike more traditional avoidance strategies advocated by many men and women alike, self-defense training does not limit a woman's freedom, rather, it increases her sense of personal freedom. Second, because sexual assault is based on men's power over women, strategies must be employed at all levels (individual to societal levels) that would empower women. Self-defense training can empower at the individual level. Finally, and related to both of the previous reasons, self-defense training may serve as a catalyst for attitudinal change. Self-defense training provides women with opportunities to examine the very behaviors that are not only encouraged by society but are behaviors that have set women up to be good victims. Self-defense training does, therefore, play an important role in assault prevention. In this section, I examine the contributions of self-defense training as outlined above. Following that discussion, I examine literature directly related to assault deterrence.

While feminists have long advocated self-defense training as an important option for assault prevention, historically, others (particularly men) have given women very different advice. The primary advice that women have

received concerning assault prevention has usually come in the form of avoidance strategies (Brownmiller, 1975; Community Action Strategies to Stop Rape Project (CASSRP), 1980). Women have been encouraged not to walk alone at night, to never hitchhike, not to go to bars and/or restaurants alone, etc. The underlying assumptions behind these kinds of strategies is that if restrictions are placed on mobility and therefore availability, these restrictions will reduce rape (CASSRP, 1980). These kinds of prevention strategies serve to meet the very goals that men try to accomplish in the use of sexual assault. Feminists have identified sexual assault as means of socially controlling women (Brownmiller, 1975; Griffin, 1971; Bart, 1979). Strategies that control the freedom and mobility of women effectively control women and leave them in a perpetual state of fear. However, feminists have not totally disregarded individual control strategies (CASSRP, 1980). Instead, they have suggested that women must learn to analyze their own situations and choose appropriate measures for individual circumstances. The key, however, is having a choice because the very act of choosing is a measure of individual power and control. There may be times when a woman chooses not to walk alone at night, for example, but that choice should not be her only option. If in fact that choice becomes an only option, it ceases to be a choice.

Self-defense training is a very active alternative to other avoidance strategies. Self-defense training involves

making active choices about what to do in any situation in order to protect oneself. The idea is to give women more options and more control (Caignon and Groves, 1987). Smith (1981) conducted a study to determine whether self-defense training increased women's confidence about their ability to deter assault. She compared 44 self-defense students to two additional groups of students. One group was composed of 24 students taking a different activity class through the physical education department at the same university, and the other group was composed of 31 students serving as motivational controls. She gave each group a pre-course, post-course, and five-month follow-up questionnaire concerning their confidence in their abilities to deter sexual assault. The treatment group did not differ significantly from the other two groups prior to the course. Ten weeks later, following completion of the self-defense class, the self-defense students reported a significant increase in their confidence to deter assault, while there was no increase for either of the other two groups. Five months later, the self-defense students were still significantly more confident than the other students concerning their abilities to deter sexual assault. Through self-defense training, many women may experience an increased sense of personal freedom because of the increased confidence that often results from knowing self-defense strategies (American Psychological Association, 1984).

Self-defense training can provide women with knowledge

that they are capable of defending themselves. They do not have to rely on men for protection. That realization allows women to take back the power and control they are entitled to. Independence rather than dependence is a necessary ingredient of empowerment. Sexual assault is an act of violence involving power and control over the victim by the assailant. Any efforts that would empower women, whether at the individual level or societal level, are likely to decrease incidences of sexual assault. The patriarchal system is based not only on men's power over women and children but upon women and children's dependence upon men for protection (Bart, 1979; Griffin, 1971; Self-defense Teaching Practicum, 1983).

Self-defense training also puts women in touch with their bodies and the potential that the body has. Women have rarely been encouraged to be strong, to view their bodies as physically competent (except for child-bearing) or to even conceive of using physical combat for fear of being stigmatized as "unfeminine." Self-defense training and physical activity training in general challenges those notions. Women are taught to be strong, to view their bodies as not only physically competent but as a potential weapon, and to fight back using aggressive combative skills. Brownmiller (1975) described her experiences with self-defense training:

I gained a new and totally surprising awareness of my body's potential to inflict real damage. I learned I had natural weapons that I didn't know I possessed, like

elbows and knees. I learned how to kick backward as well as forward. I learned how to fight dirty, and I learned that I loved it (p. 453).

Empowerment means learning how to respect ourselves and demanding respect from others. Self-defense can contribute to that process of self-respect (National Self-defense Teaching Practicum, 1983).

The third important contribution that self-defense training makes toward the avoidance of sexual assault is related to the examination of attitudes that increase the likelihood of victimization. Feminists have long struggled with issues of socialization and the different socialization experiences typical of men and women. While I do not believe that we are simply an end product of all our various socialization experiences, I do believe that those experiences impact who we are. Typically, little girls are exposed to different socialization experiences than are boys. Those experiences might include an emphasis on behaviors that are stereotypically attributed to being female in our culture such as nurturing, caretaking, being somewhat dependent and passive, polite, nice, etc. An internalization of those behaviors may contribute to the likelihood of sexual assault.

Feminists who have examined the dynamics of rape have suggested that women have a trained inability to avoid rape because they are often socialized to become victims. In contrast, assault avoidance behaviors such as fighting back or being verbally assertive, have been associated with



"unfeminine" behavior. Thus many women never learn how to protect themselves since self-defense training may be perceived by these women as incongruent with their definition of femininity (Brownmiller, 1975; Griffin, 1971; Bart and O'Brien, 1985).

Brownmiller (1975) made the following passionate argument about the necessity of self-defense training for women:

The psychologic edge men hold in a situation characterized by sexual aggression is far more critical to the final outcome than their larger size and heavier weight. They know they know how to fight, for they have been trained and encouraged to use their bodies aggressively and competitively since early childhood. Young girls, on the other hand, are taught to disdain physical combat, healthy sports competition, and winning, because such activities dangerously threaten the conventional societal view of what is appropriate, ladylike, feminine behavior.... It is no wonder, then, that most women confronted by physical aggression fall apart at the seams and suffer a paralysis of will. We have been trained to cry, to wheedle, to plead, to look for a male protector, but we have never been trained to fight and win (p. 451 & 452).

In the introduction to their study that examined assault avoidance behaviors, Bart and O'Brien (1985) stated: "We found that the best overall advice we could offer women to increase the probability of avoiding rape is 'Don't be a nice girl'" (p. 14). Self-defense training provides women with an opportunity to "unlearn" being a nice girl.

Self-defense training has been defined not only as the learning of new skills designed to prevent and/or deter assault, but the unlearning of old behaviors that set women up to be good victims (Nelson, 1984). Self-defense training includes an examination of the dynamics of assault, of what

an assailant looks for in a "good" victim, and of how our culture encourages all women to behave in ways that suggest that we are indeed "good" victims. The training also provides women with some alternative ways of thinking and behaving that would decrease the likelihood of being perceived as a "good" victim.

Self-defense strategies have been shown to be effective in deterring sexual assailants. Several researchers reported results that indicated that active resistance was the key factor in deterrence (Selkin, 1975; Bart & O'Brien, 1985; McIntyre, 1979; Queen's Bench, 1976). Active resistance was defined as any assertive, aggressive, or forceful behavior that suggested to the assailant that his intended victim was determined to deter the rape at any cost. Passive resistance, on the other hand, was associated with crying, pleading, begging, and stalling tactics. These sorts of strategies correlated in several studies with completing the attack (Queen's Bench, 1976; McIntyre, 1979; Bart & O'Brien, 1985). Passive resistance correlated with completion of the attack rather than successful deterrence because behaviors associated with vulnerability seemed to indicate to the assailant that he had indeed chosen the right victim, and thus he continued the assault.

Bart and O'Brien (1985) have probably conducted the most extensive study about deterrence to date. They interviewed 75 women all of whom had experienced either rape or attempted rape. Their purpose in conducting the interviews

was to focus on the differences between women who were raped and women who were attacked but not raped. Their book was written in an effort to help answer the question "what do I do if someone tries to rape me?" (p. 2). Their findings indicated that the more self-defense strategies that a woman used against her assailant, the more likely she was to deter the assault. Additionally, they reported that the type of strategy used was an important factor in deterrence.

Avoiders were more likely to yell, scream, and use physical force. The women who were raped were more likely to plead or cry. The authors discussed the advice that women have received for years concerning deterrence, that being "don't fight back, it will only make the assailant more angry."

Bart and O'Brien (1985) concluded that their findings did not support such advice. They reported that the risk of serious injury remained about the same whether a woman actively resisted or not, and that women who chose to actively resist more often deterred their assailants than those who did not.

Bart and O'Brien (1985) discussed socialization factors associated with rape and rape avoidance. They reported that while avoiders and nonavoiders alike shared similar sport related backgrounds, avoiders were more likely than nonavoiders to have played contact sports such as football. Besides having sports experiences as children, avoiders were more likely to have carried their participation into adulthood. Thus, sport experiences, and particularly contact

sport experiences, may have implications for deterrence. In discussing sports experiences during both adulthood and childhood, the authors concluded:

What is the implication of this relationship? The causal links are difficult to establish. Whether avoidance is a by-product of a more "ready-for-action" physical condition, a more self-confident feeling of bodily capability, or some other factor (such as endurance) is unknown. However, a relationship exists. Women should know that regular participation in sports may provide them with skills that decrease their chances of being raped (p. 60).

Another factor that seemed to be important in differentiating avoiders from nonavoiders was the knowledge of self-defense. The authors suggested that not only did self-defense classes teach important skills, but that women learned new attitudes that better prepared them for emergency situations. They learned that women are not "sugar and spice and everything nice" (p. 61). Avoiders were nearly twice as likely as raped women to have learned self-defense, although the number of women who learned self-defense was small (Bart & O'Brien, 1985).

Several studies have shown that immediate and vigorous resistance seems to be the key in deterring assault. Self-defense training can provide women with the skills and attitudes that they need to be prepared to immediately and vigorously resist. Thus, self-defense training plays an important role in sexual assault avoidance. The question that remains to be asked is "can self-defense training also be important for women who have already experienced sexual assault?" This study seeks to answer that question.

Potential Contributions of Self-Defense
Training in the Healing Process

As a self-defense instructor, I know that I have had survivors of assault in my classes and workshops. Other self-defense instructors have reported the same thing. Some of these women choose to share their experiences with us. Most survivors who have shared their experiences with us have also talked about the importance of self-defense training in their own healing process. As instructors, we have long speculated on the contributions that self-defense training may provide to women who are healing from sexual assault. Those contributions may include the following possibilities:

1. Self-defense training may provide women with the opportunity to overcome alienation from the body that many survivors experience. Some survivors tend to lose touch with the physical aspect of who they are. Self-defense training puts emphasis on the body as well as the mind. A warm-up that includes exercises for building flexibility, strength, and endurance not only brings women in touch with that part of themselves, but may also contribute to building the spirit. Human beings are an integrated whole and it is impossible to separate the body, mind, and spirit from one another. Building the body may also help build the spirit. Spirit may include such things as self-esteem, confidence, compassion for oneself, and an overall sense of competency.

2. Self-defense training may provide contradictions to images of helplessness and victimization. Many women who have experienced sexual assault have been victimized previously, either as children or as adults. Self-defense training contradicts notions of vulnerability and a loss of control by giving women choices and providing them with strategies over which they have control. The training also provides students with role models who are strong women. So many images of women in our culture depict women as helpless, objectified, and vulnerable. Women are depicted as needing protection from men. Self-defense classes may allow women to experience an environment where women are independent, strong, and able to make choices about what is best for themselves.

3. A knowledge of self-defense skills may also provide women with a sense of reassurance and self-confidence about future victimization. Many survivors have reported that a major fear in their life centers on future victimization. "If it happened before, will it happen again?" That fear begins to control and is dominant in making any decisions for the future. The self-confidence that many women report resulting from self-defense training may provide women with a sense of control again in their own lives because they are no longer dominated by such extreme fear.

4. Self-defense training may provide women with the opportunity to experience physicality in a different way.

Several researchers have discussed the fact that seldom are

young girls or women provided with opportunities to learn how to fight (Bart & O'Brien, 1985; Brownmiller, 1975). Self-defense classes teach women how to use their bodies in more aggressive manners. For many women, that is a very empowering experience. The legitimate use of aggressive movement may provide some women with a means of working out much of the anger that they feel about their assaults. Learning to use the voice in a more assertive and/or aggressive manner may also allow women to externalize their anger in a legitimate way.

Summary

In this chapter, I have presented a review of the related literature regarding sexual violence. The review included two prominent myths regarding sexual violence as well as explanations of sexual violence in its various forms--rape, battering, and the sexual abuse of children. Those explanations ranged from early psychological theories which placed primary emphasis and blame on the victims of assault to a variety of sociological theories. The sociological theories included demographic research, correlational work, social learning theory, and the inter-generational transmission of violence theory. Each of those theories was critiqued in light of feminist theory which seeks to explain sexual violence within the context of a patriarchal social structure that allows men a position of dominance and control over women and children.

Literature was also reviewed regarding the impact of sexual assault on women and children. That information served as a basis for better understanding the process that survivors must go through as they work toward healing in their lives.

The final two sections of this chapter focused on self-defense. First, I examined the literature discussing self-defense training as a means of sexual assault prevention. Finally, the chapter concluded with a brief discussion of the possible contributions that self-defense training might make to the healing process. The remainder of this dissertation presents the research that examined in detail the possible contributions that self-defense training makes to the healing process for women who are survivors of sexual assault.

CHAPTER THREE

RESEARCH DESIGN

As was stated earlier, the purpose of this study was to examine self-defense training as one aspect of the healing process for women who are survivors of sexual assault. The study is intended to further our understanding of the process of empowerment that survivors must go through to regain the control in their lives that many feel they have lost through their experiences of sexual assault.

While the healing process is very long and painful for many survivors, this study focuses on one slice of that process. The aspect of recovery that this study examined is self-defense training for survivors. Because the concept of self-defense training specifically for survivors as a means of healing and recovery is a new one, this study represents pioneering work. Therefore, the final report is an effort to document the development of the course (both pilot and focal), the implementation, and the meaning of the course to the women who took part in it.

This final report attempts to describe the classes primarily from the perspectives of those who developed it, those who were part of the implementation, and the students who took part in the classes. It is an effort to examine the contributions self-defense training may make to the

healing process for women who are survivors of sexual assault. The research design described in this chapter was chosen to help accomplish these purposes.

Contexts of the Study

The Site

This study was carried out primarily at an establishment that has provided personal safety and self-defense training for people in Michigan and other areas of the mid-west over the last eighteen years. The agency has been on the leading edge of developing personal safety/self-defense trainings for a variety of populations. Training programs have been developed to prevent sexual assault for women, children, the elderly, and handicappers. Other programs have been developed to provide personal safety skills for law enforcement, prison, hospital, and mental health employees throughout the state. The class that was developed for survivors was the first effort to move into a direction of programming where the focus was not only on prevention of assault, but on self-defense training as a means of healing from previous assault.

The Participants

This study focused on both the pilot and focal classes. Therefore, each class had its own group of participants. First, there was the group of people responsible for developing the course. Second, there were the people associated with the pilot class. Those people consisted of

two primary instructors, one assistant instructor, a therapist, and the eight women who were students in the class. Third, there were the people associated with the focal class. Those people consisted of one primary instructor, one assistant instructor, a therapist, and the eight women who were students in the class. There was some overlap in terms of participation between the two classes. The course developers not only worked to develop the pilot class but also used the knowledge gained from that effort to make the focal class stronger.

Several people were part of the implementation of both classes. I served as a primary instructor in both the primary and focal class. Additionally, the same therapist worked with each class. Two students who were part of the pilot class began the focal class (one completed it and the other dropped out after two sessions). Tables 3.1 and 3.2 indicate the names (pseudonyms) and roles of the participants involved in each class. The names of those involved in both the pilot and the focal class appear in both tables. The names of the developers have not been included in either table. However, the reader should realize that the planners were involved in both classes.

Table 3.1
Participants in the Pilot Class

Name	Role
Laura	Primary instructor
Jayne	Primary instructor
Sue	Therapist
Sandy	Assistant instructor
Chris	Student
Gerrie	Student
Kate	Student
Laine	Student
Maggie	Student
Mary	Student
Rachel	Student
Sarah	Student

Table 3.2
Participants in the Focal Class

Name	Role
Jayne	Primary Instructor
Sue	Therapist
Jen	Assistant Instructor
Gerrie	Student
Lin	Student
Becky	Student
Jaquleen	Student
Kari	Student
Margaret	Student
Cheryl	Student
RaeAnn	Student

Those who were involved in the development and the actual implementation of the class brought with them a rich background in self-defense and the martial arts. Each member of the teaching team as well as the course developers had taught self-defense for a minimum of four years.

However, not only did they have extensive teaching backgrounds in self-defense, but they were also very accomplished martial artists. Each member of the developing/teaching team was a black-belt instructor in karate with the exception of Laura, who was a brown belt (the next highest rank) and Sue, the therapist. Sue had also trained in the martial arts and was very familiar with the relationship between the martial arts and self-defense. Their experience in teaching and training totaled over 50 years as a group.

The owner and operator of the agency that offered the class was an accomplished martial artist and teacher. She was a third degree black belt and had brought that martial training into all of the different self-defense classes that she had developed. She had been teaching self-defense for 15 years and part of her interest in the survivors' class stemmed from the many conversations that she had with women who had identified themselves as survivors in her classes throughout the years.

She and the others who had all taught self-defense, realized that many survivors had been in their self-defense classes over the years. Some women chose to identify themselves as survivors and conversations with those women indicated that the training seemed to be an important part of their own healing process. However, the training was also very difficult for many of those survivors. There were some who dropped out of classes because it all seemed too difficult. There were others who remained in the classes

but struggled emotionally with many aspects related to their own assaultive experiences. Each instructor recognized that those survivors may have had particular needs around self-defense training that other students may not have had. Additionally, they recognized the role that self-defense training seemed to play in the healing process. Thus, the instructors decided to construct a class specifically designed for survivors of sexual assault.

The women who took part in each class as students represented a population with distinct parameters. Those parameters will be outlined and explained below.

Therapist Referral. All but one student were referred by area therapists who work with victims of sexual assault. While a therapist's referral was not mandatory for participation, we felt that it was an important criterion. That referral served as a means of determining whether particular individuals might or might not be ready for a group experience. While the class was not a therapy group per se, it did represent a support group and certain "group skills" were necessary for participants. Group skills might be defined as the ability to interact appropriately with other people. Several issues that survivors face may inhibit group skills early on in the healing process. Trust is often problematic for survivors (Ledray, 1986; Bass & Davis, 1988). The ability to trust an individual therapist may be difficult enough for a survivor, let alone a group of nine other women. Sexual assault is also an extremely personal

issue for many. For some, the ability to share intimate details of abuse or assault or the ability to listen to others share their stories may initially be difficult and even overwhelming (Maltz & Holman, 1987).

Particular individuals might not be ready to work on healing in the context of a group at certain points in their own process. Thus, we relied heavily on individual therapists' knowledge of their own clients and what they most needed in their own healing journey.

Preclass Screening. Prior to the pilot class, we did not conduct a screening to further assess whether this class was appropriate for particular individuals. Rather, we relied strictly on the therapists' recommendations. That proved to be a costly mistake that will be discussed in more detail later in this final report. As a result, we chose to conduct a brief screening for potential participants prior to the focal class. The screening amounted to a half hour conversation between the potential class member, the therapist and myself. During that conversation we had the opportunity to meet one another, explain the class in more detail and address any questions or concerns that the potential participant had about the class. The screening is discussed in more detail later in this dissertation. While the conversation itself was brief, it did give each of us (the potential class member, the therapist, and myself) a better sense of whether the class would be appropriate for the individual's needs at that point in her healing process.

Thus, we relied not only on the therapists' knowledge of their clients, but on our own assessment as well as the potential participant's self-assessment of her own needs after she had learned more about the class. As a result of the screening prior to the focal class, one potential student decided the class would not meet her needs in the way that she had hoped and chose not to join. Sue and I felt that her decision was appropriate.

While the therapist referral and screening process were important tools to determine whether the class was appropriate for particular individuals' needs, the referral criterion, in particular, limited the population of potential class members in several ways. Individual therapy may be a service that is only available for women who can either afford it or who have health insurance that will pay for it. Individual therapy is not free and unfortunately, tends to be expensive. Thus, its costs may be prohibitive to women who are not working outside the home, those who are students, or those who do work outside the home but do not have health insurance or whose health insurance does not cover mental health care adequately.

There was a second way in which our potential population was limited. Our initial contact with the therapeutic community was through a group of local women therapists who met together on a regular monthly basis. One of the course developers and myself attended one of their monthly meetings as guest speakers. A flyer was distributed to group members

where the topic of the meeting was described as "Self-defense Training: Therapeutic Impact." The format of the presentation was described as "Presentation followed by free-flowing exploration of the process of empowerment in self-defense and martial arts training." The group members who attended the meeting expressed significant support for our efforts and provided the majority of referrals. Several referrals came from outside of that group. It is likely that the therapeutic community has its own communication network and word of the class spread through that network. However, because I was unsure of the extent of that network, the population of potential class members may have been limited by the actual number of therapists who knew about the class.

As a result of these limiting factors, I recognize that the women who participated in the pilot and focal self-defense classes for survivors were not necessarily representative of all survivors of sexual assault. However, there was some diversity in the composition of class participants.

Ten women began the pilot class but eight women actually completed it. Two women left the class during the course of the eight weeks. The ages of students ranged from 23 - 47 years. Nine of the ten women who began the class were white, one woman was black. All of the class members were employed outside of the home in some capacity ranging from full- to part-time. Additionally, two of the women were

students at a local university. Educational backgrounds ranged from having completed the 10th grade to having completed master's degrees. One woman in the class was currently working on a Ph.D. and another reported that she had done postgraduate work. Several of the class members identified themselves as single, two were married, one woman was separated from her husband and was parenting three young children, one woman was divorced from her husband, one woman identified herself as living with her partner. Over the course of the eight weeks, several women identified themselves as lesbians.

Eleven women started the focal class. One woman was forced to discontinue the class after the first session because of physical problems. Two additional students left the class. One never came back after the third class session. Sue made repeated attempts to contact her but to no avail. The last woman who left the class was also one of the students who began and quit the pilot class. She reported that an aggravated hip injury forced her to leave the pilot class and that she was too busy to continue the focal class. As a teaching team, Sue, Jen, and myself wondered about the apparent coincidence in beginning and leaving both classes. However, I was not able to interview her following the focal class, thus, I cannot be sure whether there were more reasons for her leaving both classes.

The ages of class members ranged from 18 - 47 years. All of the women in the focal class were white. All but one

of the participants was employed outside of the home and the other identified herself as a full-time student. Two of the other women were also students working on advanced degrees and were employed at the same time. Educational backgrounds ranged from having completed high school to having completed a master's degree and working on a Ph.D. None of the ten women in the second class were married; however, one woman was engaged to be married, one woman lived with her partner, two women were divorced, and the rest identified themselves as single. Over the course of the twelve weeks, several women identified themselves as lesbians.

Data Collection

Data were collected over several distinct periods of time and in a variety of ways that were naturalistic as is characteristic of descriptive and theoretical field research. This section describes the specific methodology and time frame that was used for data collection.

In general, I spent time observing and participating in the development of the pilot class curriculum as well as the actual implementation of the pilot and focal classes themselves. Because the study focused on both classes, there were three fairly distinct periods of data collection. The first phase consisted of collecting data related to the planning of the pilot class. That phase began with initial conversations with course developers and local women therapists. It continued as course developers met to plan for

the presentation to local women therapists and concluded with the last planning meeting related to the class itself.

The second phase of data collection focused on the implementation of the pilot class. I was part of the teaching team as one of two primary instructors. I collected data during the eight weeks the class met as well as additional data after the class was finished that were related to closure and completion.

The third phase of data collection focused on the planning and implementation of the focal class. I was the primary instructor for that class. That phase began when the planning group first met to consider revisions for the focal class. It continued during the 12 weeks the class met, and concluded with data related to closure of the class and study.

Time Frame

The total time period of data collection ranged from February 1988 - April 1989. There was one period where data were not being collected and that was between August 1988 and November 1988 which was the time period between the second and third phase of data collection. During that time period, I analyzed data associated with the first and second phases of data collection. Table 3.3 charts the time frame of data collection as it was related to each of the phases.

Means of Data Collection

There were three primary means of data collection that were employed during the course of the study. Those included participant/observation and the fieldnotes produced from those observations, interview with study participants - both formal and informal, and existing documents that were used during the classes themselves. Each of those categories of data are described in more detail below.

Table 3.3

Data Collection Phases and Time Frame

Phase 1	Phase 2	Phase 3
-February, March, April 1988 Planning for Therapists presentation and the first class	-May 4 - June 22 First Class met -July and August Data collected for closure	-December 1988 Planning sessions and screenings for the focal class -January 9 - March 27, 1989 Focal class met -April and May Data collected for closure

1. Participant observation: Throughout the study I was involved as a participant in two different ways. First, I helped develop the course and second, I was a primary instructor in both classes. The role of participant made me an immediate insider to the course developers as well as to the class participants. While being an insider was not only advantageous in some respects and even critical in others, it also certainly had its drawbacks. Those advantages and

drawbacks were discussed in the first chapter.

My role as observer (as compared to participant) came in brief moments here and there. I was constantly aware of not only my participant role as instructor and planner but of my observer role which I most often thought of as my "researcher" role. Most often, I tried to actively be involved in planning, teaching, etc. but always with my observational eyes and ears taking in as much as I could along the way. However, occasionally I was able to "step back" from such active involvement and simply observe and listen to what was going on around me. Some of those moments came during the planning of the class when others on the planning team did the primary contributing. Those moments also came during the pilot class when I was one of two primary instructors. Laura and I were each responsible for the primary teaching on an every-other-class-session basis. Thus, on the nights that Laura was responsible for the teaching, I roamed and assisted where necessary, but was much more involved in my "researcher" role of careful observation. I was also able to step back during much of the second half of each session where the therapist took a much more active role in facilitating group activities and discussions.

The group portion of the class was the only time that I actually took notes. During the self-defense portion of the class, I was either teaching or assisting and therefore, was unable to write. Additionally, I believe that it was

important for the class participants to see me involved in the class as much as possible in order to develop and maintain trust in me. Even during the group portion of the class, I took only brief notes to stay as engaged as possible while still remembering what was going on during discussion and activities. I felt that it was important to take brief notes during that portion of the class because much of it was discussion oriented and I wanted to remember who was saying what. Prior to the pilot class, I asked permission to tape-record that portion of the class because so much of it was based on conversation and discussion. However, that request made a number of the participants very uncomfortable and therefore, I did not tape-record during class time at all. I chose not to even ask about tape-recording prior to the focal class. Thus, during each class, brief notes helped me keep track of conversations and discussion.

Following each session, I used a number of methods for expanding my fieldnotes. Occasionally, I simply went home and immediately began working while I still had a very clear picture of the evening. Most often, however, because the night was very late by the time I got home from each session (generally it was close to 11 p.m. when I got home), I usually "talked" the session into a tape recorder on my drive home. That strategy gave me approximately 35 to 40 minutes to recap the session and served as a guide for expanding my fieldnotes later. The majority of my

fieldnotes were typed into my computer and were saved on disk as well as on hard copy in three-ring notebooks. A few sets of notes were handwritten and therefore, not stored on computer disk. The notebooks not only contained all of my fieldnotes, but calendars that chronicled each set of data by date, and any written documents that became part of the data set. Throughout the notebooks I included my own reflections and journal entries as I proceeded through the study. Those reflections included several "take stock - so where are you right now?" entries as well as my general feeling state at different parts of the study. Those reflections and journal entries became important resources for ongoing and later data analysis. The notebooks also contained catalogs of my tapes and other materials.

During each phase of data collection, I tried to document what was going on during that phase. During the first phase, I tried to document the actual process of putting the course together. During the second phase, I tried to document the actual implementation of the pilot class, and during the third phase, I tried to document the revisions and planning that went into the focal class and its actual implementation. Throughout my data collection, I tried to focus not only on events occurring in each setting, but on what those events meant to the participants. I tried to maintain sight of my overriding research question: What does self-defense training contribute to the healing process for women who are survivors of sexual assault?

The use of a tape recorder during participant/observation. As stated above, I did not use a tape recorder during actual class time. However, in addition to my taped recaps on my ride home, I used a tape recorder at other points during participant/observation. During the first phase, where I documented the development of the class, I was able to tape-record each planning meeting as well as the presentation for the group of women therapists. Thus, in addition to my own fieldnotes about each planning session, I also had audiotapes of each of those planning sessions. Due to forgetting to bring the tape recorder, one of the planning sessions was not audiotaped.

I was also able to tape the teaching team wrap-up after each session during the second stage of data collection. Each session during the pilot class ended at approximately 9 p.m. The teaching team usually stayed after each session and talked about how the session had gone. Those wrap-up sessions lasted anywhere from 30 minutes to an hour and 30 minutes. They served as an important resource for understanding the perceptions of the teaching team.

Each session during the focal class did not end until 9:30 p.m. Thus, we did not have the wrap-up sessions that were characteristic of the pilot class. We usually talked about the evening, but only briefly, and often as we were getting ready to leave. As a result, I only taped a few of those sessions during the focal class. The wrap-up sessions that were taped were those where we actually sat down and

talked about the class. On the nights where we talked as we were getting ready to go, I did not tape but tried to recap the conversation into the tape recorder on my way home.

2. Interviewing. Interviews were another important method of data gathering. Members of the teaching team, including the therapist, were not formally interviewed. However, throughout the three phases of data collection, informal interview conversations with other teaching team members provided insight into their perceptions of the class.

Interviews with the students in the two classes were conducted to document their experiences with sexual assault and their perceptions of the course and its specific components. These interviews were both formal and informal in nature. Each of the formal interviews with students were conducted at the end of pilot or focal class as part of the class wrap-up. No formal interviews were conducted during the eight or twelve weeks of the two classes.

As stated above, the formal interviews were conducted after each class was completed as a follow-up interview. Following the pilot class, I was able to formally interview all but two of the students. I tried to reach the other two on a number of different occasions. They were unavailable at the times I called and chose not to return my phone messages. Following the focal class, I was able to interview all but one of the class members.

These follow-up interviews permitted me to further document the role that the self-defense training played in the

therapeutic process. I found these to be particularly helpful. All but one of the interviews lasted at least one hour and some lasted up to two and one-half hours. Some of the women who spoke very little during the classes themselves shared many of their perceptions with me during the follow-up interviews. Those interviews provided us with the opportunity to talk about aspects of the class in more depth and on a very personal level. These were the only conversations where I actually tape-recorded the students. I asked permission to do so in order to focus on the conversation rather than on note taking. Each student granted me permission to tape the follow-up interview even after expressing uncomfortableness about me using a tape recorder earlier in the pilot class.

3. Examination of existing records. There were a number of written documents that were helpful in developing an increased understanding of the role of self-defense in the healing process. These documents included several resource books that we used in preparing for some of the group activities in the focal class and an information packet about the nature of sexual assault that was handed out to all participants at the beginning of the focal class.

Participants in each class were asked to fill out information sheets that covered a variety of material ranging from basic demographic information to their goals and concerns for the class. A copy of those information sheets is included in Appendix A. Prior to the focal class, we

also asked participants to fill out a "Responses to Childhood Incest" questionnaire. That questionnaire was intended to provide us with a tool to better understand the general emotional states that people experienced in response to their assaultive experiences. A copy of that questionnaire is included in Appendix B. I had access to the information sheets and questionnaires that were returned to us. Finally, in the focal class, we asked people to keep journals if they were willing and/or used writing exercises in the context of group activities. I asked class participants if they would be willing to share any of their writing with me and some chose to do so.

This naturalistic approach to data collection required that careful attention be paid to the coordination and planning for data reduction and analysis. The goal of field research is to not only yield rich descriptive accounts of what is observed but to ground those descriptions in the realities of the greater social context of the participants' lives (Bogdan & Biklen, 1982). It was also important to adequately reflect the perspectives of those involved in the self-defense class. Figure 3.1 summarizes the variety of data sources described above that were utilized in this fieldwork research design. The next section of this chapter describes in detail the procedures for data reduction and analysis that were used in this study.

Figure 3.1

Summary of Sources of Data Within Each Research Phase

PLANNING PHASE

fieldnotes from planning sessions
 planning notes for therapist presentation
 tape recorded therapist presentation
 feedback from therapists

PILOT CLASS PHASE

fieldnotes from the eight pilot class sessions
 tape recorded debriefing and planning between sessions
 documents from the pilot class
 personal information sheets
 response to incest questionnaire
 tape recorded interviews with class members

FOCAL CLASS PHASE

fieldnotes from planning sessions between classes
 fieldnotes from the twelve focal class sessions
 tape recorded debriefing and planning between sessions
 documents from the focal class
 handouts
 student writing
 student journal
 personal information sheets
 response to incest questionnaire
 tape recorded interviews with class members

INTENSIVE ANALYSIS AND WRITE-UP PHASE

periodic analytic memos
 second therapist presentation and feedback

Data Analysis

Ongoing data reduction and analysis is an important characteristic of field research and proceeded throughout the entire research project. Throughout the process of information gathering, the data constantly served to formulate and reformulate emerging concepts. For instance, one of the earliest concepts that began to emerge from the pilot class involved the idea of empowerment versus caretaking. I was able to further explore that concept in several ways. Regular review of my fieldnotes provided a means of synthesizing patterns pertaining to the emerging concept. Additionally, I kept a journal throughout the study. That journal also allowed for an expansion of ideas about that concept. Those reflections on a regular basis then helped to shape subsequent interviews/conversations with teaching team members and course planners.

Ongoing Data Analysis

As previously stated, fieldnotes were expanded as soon as possible after leaving the site and were reviewed almost daily. That review served to make sense of particular events or interactions. Theoretical notes (Schatzman and Strauss, 1973) were often made about the fieldnotes themselves and served as guides to both answering questions as well as the developing of new questions that were used to guide future observations and interviews.

As more data were collected, I tried to conduct

periodic "take stock" sessions. While I was not able to conduct "take stock" sessions with the regularity that I had hoped prior to beginning the study, I was able to conduct two at different points. They became very helpful as I moved between stages of data collection. During these sessions I tried to identify patterns, compare my assertions and working hypotheses with my data, and make data collection revision plans as necessary.

Additionally, the other course developers and instructor played an important part in the study as it progressed. I was able to discuss many of my emerging ideas with them and they served as reality checks throughout the study. I wanted to be sure that the story I was attempting to tell remained true to the differing perspectives that I was trying to bring into the study.

The pilot class was analyzed in great detail prior to the start of the focal class. There was a period of four months between the second and third phases of data collection (August 1988-January 1989). In November 1988, I presented a paper at the North American Society for the Sociology of Sport annual conference (Schuiteman, 1988). The paper was based on analysis of the pilot class which forced me to think about that class as its own entity rather than in comparison to the focal class.

Final Analysis.

Final analysis that was more focused was also an important aspect of the study. Following all three phases of

data collection, I began my final analysis by reading my fieldnotes in their entirety several times. Each time I read the notes, I made additional notes to myself in the margins. While I had been thinking of different themes and concepts throughout the study, part of my full reading of the notes included a pad of legal paper. As I read, I began recording anything that appeared to be a pattern. In other words, any ideas, events, or themes that reappeared with some regularity throughout the notes were recorded. This was done in case I had failed to recognize valuable patterns that might only surface with careful reading of the whole set of notes. I read the full set of fieldnotes several times. The first time was for flow and continuity, the second time I began taking notes, and the third time I searched for detailed evidence that would support the most dominant patterns.

Summary

This chapter has described the specific research design, methods, and analysis procedures used in this study. The chapter began with a description of the contexts of the study. Those contexts included the site where the study was carried out, the participants involved in the study, and the specific means of establishing the population of participants for both the pilot and focal classes.

Following the description of contexts, the next section focused on the means of data collection used in the study. Those means included participant/observation fieldnotes,

informal interviews/conversations, formal tape-recorded interviews, and documents associated with the class.

The final section of the chapter described the data analysis procedures that were used in this study. Those procedures included both ongoing analysis throughout the data collection phases as well as final analysis following the data collection periods.

The following chapters will provide the reader with the results of the data collection and analysis. Chapter four is an analysis of the development and implementation of the pilot class as well as the revisions brought into the structure of focal class. This discussion provides the background necessary for the more indepth analysis of the focal class contained in Chapter Five. Chapter Six presents three overarching themes that occurred throughout the focal class. Finally, Chapter Seven summarizes the study and draws conclusions and implications based on the results.

CHAPTER FOUR
DEVELOPMENT AND IMPLEMENTATION OF THE PILOT CLASS
AND DEVELOPMENT OF THE FOCAL CLASS

Overview

The following chapter is an analysis of the development and implementation of the pilot class. The analysis is not intended to be in-depth, rather it is meant to provide background sufficient to understand the development and implementation of the focal class.

The survivors' self-defense class evolved from idea to practice over a period of approximately one year. Several months of planning preceded the implementation of pilot class. Based on what was learned during the pilot class, the teaching team felt there should be significant structural changes in the focal class. This chapter represents a chronological examination of the process of development and implementation of the pilot class through the further development of the focal class.

The chapter is divided into three sections. The first section focuses on the development of the pilot class. The second section describes its implementation, and the final section presents the structural changes made for the focal class.

Section 1: The Development of the Pilot Self-Defense Class

This section begins with a brief history of the agency that offered the class. That history has bearing on those who were involved in the survivors' class. Following that history, I will present a chronological explanation of the class's evolution from its dream stage to reality. The section will conclude with an examination of the different perspectives brought into course planning. Those perspectives resurfaced throughout the implementation resulting in some teaching and group difficulties.

History of the sponsoring agency

The agency that sponsored the survivors' self-defense class has had an interesting history which has contributed to its philosophy and course offerings. It has been in existence in one form or another since 1976. Initially, it was primarily a martial arts club that provided martial arts and self-defense training to women in a large university campus community. The club had a feminist philosophy that recognized the potential of women as students, and the need to provide martial/self-defense training for women, given the nature of society where much of its violence was sexual violence directed toward women and children. The following statement of philosophy provides evidence of a commitment to women and concern over sexual violence.

We recognize that women's martial arts activities are part of a multifaceted worldwide movement to free women. Our programs are specifically geared to address those aspects of women's bondage that

keep us physically passive and vulnerable to violent attacks.

We believe that the development of agility, speed, and strength in women is both beautiful and necessary for fostering the growth of self-sufficiency and respect for our physical strength.

We affirm the value of cooperation and insist upon a supportive atmosphere that maximizes everyone's potential.

We see martial arts as a means of establishing and maintaining our human right to defend ourselves, of fostering individual self-respect, and of developing pride in our collective strength.

The club operated as a women's martial arts school from 1976 until 1984. However, even during that time period, the club itself was changing. In 1983 the club included men in a beginning class for the first time. By 1984 the club was fully open to women and men but maintained a distinctly feminist orientation. Additionally, self-defense was addressed much more formally than it had been before. Initially, the primary emphasis was on martial arts training and self-defense was a by-product. However, the demand for women's self-defense training increased and the club began offering formal self-defense classes. At that same time the club also began providing personal safety skills training for groups on a contractual basis. Instructors for these classes were women who had trained with the club and were accomplished martial artists. They applied their martial skills to a thorough understanding of sexual assault in order to provide sexual assault prevention training.

Since 1984 the club has become a business that provides martial arts training to women, children, and men, and also serves as a consulting agency for personal safety and self-defense training. Programs are now available to a wide range of people whose lives or professions bring them into potentially dangerous situations. Classes are still offered to women which focus on sexual assault prevention. However, additional training programs are now available that focus on other forms of violence as well. As a result, the agency provides training programs relevant to a variety of professionals such as those in law enforcement, corrections, health care, and mental-health care.

The survivors' self-defense class represented one of many different personal safety classes that the agency has developed over the last several years. However, unlike programs designed for various professionals, the survivors' self-defense class represented a return of sorts to the original intent of self-defense training with which the agency originally began, that being sexual assault prevention for women. The class was unique because of its population and intent. The class was developed specifically for women who were already survivors of sexual assault and was intended to be an empowering experience that would contribute to that survivor's healing process.

There were five women associated with the agency who were teaching self-defense throughout the greater metropolitan area. I was a member of that group and we all

experience teaching self-defense from 5-15 years. Over the years of conversations about our teaching experiences, one topic came up consistently. We all realized that there were many survivors taking our classes. Some of those women had chosen to identify themselves to us. We also realized through talking to some of those survivors that self-defense training seemed to be an important part of their healing process. However, because of some of the issues that survivors face as they work toward healing, aspects of the general class seemed very difficult, and for some, overwhelming.

Some of the women talked about feelings of fear over practicing skills that dealt with ways they were actually attacked. Others talked of an inability to trust in themselves and their own interpretation of a potentially dangerous situation. Some felt overwhelmed by the emotions that the class stimulated and the lack of built-in time to deal with those feelings.

Over the years, several of the instructors talked about a dream of someday designing a self-defense class specifically for survivors. We imagined that it could address the needs that survivors had expressed concerning self-defense training. The instructors talked about the idea from time to time, but nothing progressed beyond that point.

The catalyst that actually sparked the dream to reality was the very real necessity for me to write a dissertation. The study I intended to conduct did not materialize and I

was expressing frustration about the situation to one of the other instructors, June, who also was the owner of the agency. She again brought up the idea of a survivors' self-defense class because she had recently been contacted by a local therapist wanting information about self-defense training for clients who were survivors. I felt the topic had potential as a dissertation study and the wheels were put into motion.

While self-defense training for survivors of sexual assault as part of their healing process has made intuitive sense to many who are associated with the therapeutic process, it is an idea that has not been formally explored. Several therapists in the area had expressed interest in the topic over the years. Thus, in an effort to get support from local therapists who work with survivors as well as their professional input, June and I decided that a presentation to them was in order.

The next step in the evolution of the class was to contact other self-defense instructors associated with the agency to determine their willingness to participate in this effort. Four of the five agreed to work on the planning of the presentation that was being done for the therapists' group. We first met on February 10, 1988, to plan for that presentation. Our intent was to brainstorm the possible benefits and drawbacks of self-defense training for survivors from our perspectives as self-defense instructors. As a result of that meeting, we generated a list of

possible outcomes. We recognized that each outcome could be potentially positive or negative, depending on the stage at which a survivor was in her own healing process. The list we generated and discussed is briefly outlined below.

1. Self-defense training contradicts experiences of helplessness.
2. Instructors of self-defense contradict images of women being passive that are pervasive in our culture.
3. Self-defense training contradicts society's ideas about women being victims.
4. Building strength, endurance, and flexibility can alleviate acute alienation from the body that many women and survivors in particular may experience.
5. Self-defense training may promote a mind/body integration. Through the strengthening of the body, one can also strengthen the spirit.
6. Aggressive movement offers an opportunity to redirect inner emotions in an appropriate and constructive manner.
7. Self-defense training decreases the likelihood of the victimization being repeated. Some survivors may also use the training as a means of reconstructing their own experience to see how it might have been different.
8. Self-defense training allows for a reclaiming of personal space and the restructuring of personal boundaries.
9. Women learn to trust themselves and one another.
10. The class provides a safe arena for the processing of certain feelings associated with the training.
11. The class provides an opportunity for meeting other survivors and talking to one another.
12. An up-beat class allows for experiencing joy as compared to the morbidity often associated with sexual assault.
13. The process of empowerment can be helpful in memory searches around incest.

14. Yelling releases anger and it is important to hear one's own voice sounding powerful.

While these outcomes were discussed as potentially positive in nature, we recognized that the same experiences could be potentially negative as well. Therefore, we also generated a list of possible negative outcomes.

1. Memories of assaultive experiences might be too fresh. Class drills simulating assaultive experiences may be too difficult as a result.
2. Self-defense training could reinforce feelings of self-blame.
3. Some survivors may be horrified at the prospect of learning how to injure another.
4. The actual experience of confronting one's own vulnerability is difficult for most women. It may be particularly difficult for women who have already been victimized and have experienced a great deal of fear in their lives.

Later that month, June and I presented these ideas to approximately 20 local women therapists. We told them about our idea of establishing a self-defense class geared specifically for the needs of survivors and asked for their input. In general, the group was very supportive. They agreed that some of their clients could benefit from self-defense training. They offered suggestions about dealing with certain issues. Several of them mentioned the importance of dealing with anger in a constructive manner. They saw the aggressive movement and the yelling as potentially important releases for pent-up anger that often has no socially acceptable manner of being released.

The group agreed to circulate information concerning

the class to colleagues who were not at the meeting and they agreed to serve as a resource for referrals to the class. As the meeting came to a close, one therapist said to us, "If you were concerned about covering your bases, you have really done that well and everything sounds very solid. You have discussed most of the issues that I deal with in working with survivors" (Audiotaped transcript, 2/19/88).

One month after that presentation, the five self-defense instructors and a therapist who had agreed to work on the project met to begin preliminary planning for an actual survivor's self-defense class. Our planning took into consideration standard skills taught in all women's self-defense classes offered through the agency as well as the possible special considerations that might be part of a class geared specifically to survivors.

In that first meeting, differences between starting orientations among the six of us became obvious. Our overall goals for the class were similar. Each of us shared a commitment to the concept of empowerment as a goal for the class. We all recognized the empowering potential in self-defense training for any woman and particularly for women who had previously been victimized by sexual assault. However, beyond that common goal, each member of the planning team had different ideas about the content of the class. Those ideas were based on differing background experiences for each of us.

June was a teacher. She had more teaching experience

than anyone else in the group. She was founder and owner of the agency and as a martial artist served as teacher to the rest of us. Her primary concerns were over curriculum and instructional matters. Those concerns were evidenced in a number of issues that she raised during the meeting. Even upon arrival at the meeting, June had taped large sheets of poster paper around the room on each of the four walls. She had already drawn up a potential curriculum based on standard self-defense classes and had written those curriculum ideas on the sheets posted around the room. She told us that our greatest challenge would be in staying sensitive to people's needs and being flexible. However, at the same time we needed to cover all of the material.

Like June, I was also a teacher. I had an extensive teaching background that ranged from working with children to adults. I had been teaching self-defense for the last five years and also taught other physical education classes. I had little experience working with survivors in a formal way and had no experience in the mental health profession.

Laura had been teaching self-defense for approximately nine years. Professionally, she was a massage therapist. She had long maintained an interest in issues of holistic healing. She approached the class more as a healer than as a teacher. At our first meeting Laura was excited because this class would be such a luxury. "We can sit people down anytime it becomes necessary to process feelings that were coming up and we just couldn't do that in regular self-

defense classes" (Audiotaped transcript, 3/19/88). Her primary concerns seemed focused on the difficulties that might arise for the participants. She was very sensitive to the needs of survivors and those seemed primary for her.

Sue was a therapist and had an extensive background in working with survivors of sexual assault. She had a private practice and also worked with adolescents through a local mental health agency. Sue had previously trained in the martial arts but was not currently doing so. She brought a unique perspective in that she was somewhat familiar with self-defense and was also professionally involved in the survivors' healing process.

Jennifer, or Jen as we called her, was a self-defense instructor who had interrupted her own training and teaching in the martial arts in order to work toward her own healing from incest. It was through her training and teaching that the memories began to come back and she decided to take some time away from each in order to focus on healing.

As a result of her own experiences, she was very interested in the class as both an instructor and as a survivor of sexual assault. Most of her input about the class came from her perspective as a survivor. Although she had an extensive teaching background, she had not been teaching for several years and she was not very confident in her teaching skills at this point in time. Jen seemed to provide a check against June's primary concern over covering material. For example, she would remind June that survivors might not be

ready for some activities as quickly as June assumed. The following excerpt of conversation at the planning meeting provides an example of the different perspectives that people brought concerning a survivor's self-defense class.

June told us that everyone seems to teach the front choke hold progression a little bit differently so she proceeded to demonstrate for us her progression for that combination of techniques. "Okay, the next step is to add a yell to the grab, something like 'hey you're dead' or 'shut up!'" She emphasized how important she thought the yell was in adding reality. "Then the next step is to grab and yell with the defender's eyes shut." At that point, Laura jumped into the conversation. "I think that might be a bit fast. I've had survivors in my seminars who have really struggled with the yell and to have them do that and shut the eyes might be too much. It could just trigger too much." The therapist, Sue, suggested that if necessary, at that point we could take a time-out from class. "It might take away from group time later, but it could be real important to sit folks down at that point."

June went on to say that she had found through her own experiences, that when she explains what the yelling and eyes shut are all about, and given the knowledge of the process, most fear is alleviated. Jen and Laura immediately expressed disagreement by shaking their heads. Jen responded by saying, "That might be good for the intellectual stuff, but that doesn't do anything for the emotional part and that may not be what these women are feeling at all" (Fieldnotes, 3/19/88).

The above excerpt of conversation at the planning meeting indicated some of the very different ways of thinking about self-defense for survivors. June believed that procedures typically followed in an average self-defense class should also be followed in this class. Laura and Jen saw this population as very different and having needs that also differed significantly from populations who usually took the class.

Sandy was another self-defense instructor who was a survivor of physical abuse as a child. She, too, leaned more in the direction of perceiving these women as having very different needs from the general population of women and expressed concern over pushing people too much. She did not want to call the class "survivors' self-defense" because it might stigmatize the participants. Like Jen and Laura, Sandy was afraid that we were covering too many self-defense skills in too short a time.

The following excerpt of discussion from that planning session provides another example of the difficulty that the planners had in deciding what would be most beneficial.

Jen brought up the idea of a fine line with the other planning group members. She said, 'there is such a fine line between dealing with what needs to be done and making sure it isn't too much. I'm starting to feel a lot like Laura, that this might be too much for one week.' June then said that she had given this a lot of thought the night before. 'I was thinking that this was likely to be a group that would have some trouble with this, this, or this, but then I came back to the idea that these people have been giving us feedback for years that this is a valuable and empowering experience. Part of what makes it that is that we allow them to experience things realistically, yet know they can get past the fear. These are strong people that have made the choice to maximize the opportunity and value this offers.'

Laura again went back to the difficulty some survivors have had in her seminars, and she added that not respecting where some people were in their own healing process would be wrong. Jen then asked Sue about referrals. She said to Sue, 'are they all going to be at different places in therapy?' Sue responded by saying that there would be a real spectrum of experience. She added that maybe the teaching team should put their heads together each week to try to get a sense of where people were at and play it by ear.

Sandy suggested that maybe we should start out with skills that demanded no partner contact. She went on, 'Partner contact might be too much. Hitting

something inanimate could be empowering and less threatening.' June responded by saying, 'What I have found the most empowering for folks is the excitement that's generated by knowing they can do this, by taking on a challenge and upping the ante a little bit.... Our curriculum is what is empowering in the first place' (Fieldnotes, 3/19/88).

This excerpt of discussion again portrayed the difficulty in reaching consensus over what seemed best for survivors.

June felt strongly that our curriculum was what had been empowering in the past. She acknowledged that we needed to be sensitive to the differing needs of survivors, but in deviating from that curriculum, we would compromise the very empowerment we sought to instill in the participants. While Jen, Sandy, and Laura recognized the importance of June's perspective, they thought our standard skills progression might move too quickly for many survivors. They were very sensitive to the different needs of survivors and tried to anticipate them in our planning. During this meeting, I felt very conscious of my lack of experience in dealing with the healing process. I believed that I had little to contribute, thus, I retreated more into my observer/researcher role.

The differing approaches to working with survivors that surfaced during the planning session remained evident throughout the pilot class. A theme, which I termed "the fine line: empowerment versus caretaking" emerged which was based on the conflict between these two approaches. That theme will be discussed in more detail later in the dissertation.

Section 2: The Pilot Survivors' Self-Defense Class.

This section will briefly highlight the structure of the pilot class and will discuss some of the themes that emerged during the class. Those themes include an assertion that is followed by two sub-assertions. Each assertion has to do with the tentativeness that the teaching team brought to the class. That tentativeness seemed to be based on the uniqueness of the class and how it represented something very different and new for each member of the teaching team. This section will primarily reflect the perceptions of the members of the teaching team. The third section will deal not only with the teaching team but the perceptions of the students as well.

The pilot class met for a total of eight weeks. There was one session per week that lasted for two hours. Each session was divided into two parts. One hour was devoted to self-defense training which included centering exercises, a physical warm-up, verbal skills instruction, and physical skills instruction. The second hour was devoted to the group portion of the class. Two self-defense instructors, Laura and myself, and an assistant instructor, Sandy, were responsible for the first hour of class. As the therapist, Sue was responsible for the second half of each session. Even though there was a distinct breakdown in terms of responsibilities for each member of the teaching team, we all actively participated during the entire session to ensure continuity across both aspects of the class among the

teaching team.

Each class session began with centering exercises. Sandy, the assistant instructor, led these meditations. The exercises were intended to provide participants with the opportunity to find calm and control in themselves even in the face of a possible assault. That calm and control was contrasted with feelings of paralysis, panic, and overwhelming fear. The exercises involved breathing drills and the use of guided imagery to increase feelings of calm, control, and a centered or focused feeling. Students were generally instructed to sit in a comfortable upright position. They were given the option of shutting their eyes or keeping their eyes open but focused on an area of the floor slightly ahead of them. They were instructed to breathe slowly, evenly, and deeply. Each breath was inhaled through the nose and exhaled through the mouth. There were times when they were instructed to imagine a bubble of safety around them or to imagine a ball of energy being deposited in their abdomen, and other times they were instructed to simply focus on their breathing.

No matter what type of centering exercise Sandy chose to use, the emphasis was that individuals could learn to bring about a more relaxed and focused feeling for themselves. She provided them with the tools, but it was up to them to use the tools. She indicated to them that it would take practice, but that anyone could learn to put themselves into that relaxed state. This pointed out that the students

were not dependent on her to bring them into that relaxed state but that they could do that for themselves.

Centering exercises were followed in each session by a physical warm-up which consisted of stretching and strength-building exercises. Emphasis was placed on working toward personal improvement rather than on comparisons to other class members. These exercises included sit-ups, push-ups, and exercises for the legs. The strength building exercises increased in intensity throughout the eight weeks, and students were able to see improvement in themselves as a result. Students were encouraged to do additional work outside of class. During the warm-up, there was usually a considerable amount of joking and laughter. Sandy seemed to emphasize the idea that fitness did not have to be painful and could even be fun. Rather than doing a certain number of repetitions, which might have been very difficult for some people, Sandy took different levels of fitness into consideration by having people do sit-ups for 30-45 seconds or push-ups for 15-20 seconds at their own pace. Students were reminded that no one had to be big or strong to successfully stop a potential assailant; rather, the link between feeling fit and feeling more confident about the capabilities of the body was emphasized. One of the students had this to say about the warm-up following the class.

I don't exercise on a regular basis or anything. And even with the little sit-ups that we did, I could feel myself start to tighten up more and everything felt really good. That helped to make me feel more personally powerful. It has gotten me going, I've got to

exercise. I don't do it on my own...but I am thinking about going back to aerobic dance because I need a class or a group kind of experience. (Interview transcript, 8/3/88).

The physical warm-up was followed by instruction in verbal or physical strategies designed to prevent and/or deter assault. The curriculum established for the pilot survivors' self-defense class was based on the standard curriculum used in most of our self-defense classes. While the skills taught did not differ from the standard self-defense classes, the manner in which those skills were presented was somewhat different. As indicated in part 1 of this chapter, there were already differing ideas concerning the best way to teach women who were sexual assault survivors that had emerged during the very first planning session. The tensions created during the planning sessions spilled over into the teaching of the class and will be described in more depth later in this section.

It is not my intent to describe in great detail each skill that was taught in the pilot survivors' class. The following list was taken from the curriculum plan established at our planning meetings. It provides a general description of the skills that we planned to cover each of the eight weeks. A complete Survivors' Class curriculum plan can be found in Appendix C.

Class topics - by week

1. -Registration, Introduction
 - Lecture/Discussion concerning the nature of sexual assault.
 - Centering/breathing exercise

- Stage 2 Defense: Confrontation - Demonstrated role play by instructors followed by a scripted role play by participants.
- Stage 3 Defense: Evasive side step with kiya *kiya*
- 2. -Warm-up
 - Review evasive side-step
 - Introduce front choke hold progression
- 3. -Review evasive side-step and front choke hold progression
 - Introduce mugger's hold progression (rear choke hold with forearm around throat)
- 4. -Review evasive side-step, front choke hold, mugger's grab
 - Introduce response to punch progression
- 5. -Complete review of sessions 1-4
 - Introduce wrist grabs (1 on 1, 2 on 1, 2 on 2)
- 6. -Introduce ground defense progression
- 7. -Introduce defense against armed attacker progression
 - Myths and fallacies, facts
 - Active and reactive weapons
- 8. -Complete review
 - Confrontation
 - Evasions
 - Front choke hold
 - Mugger's grab
 - Response to punch
 - Strikes
 - Wrist releases
 - Ground Defense
 - Defense against armed attackers

The curriculum plan that we established covered essential information and important skills to develop around the concept of self-defense. Skills were taught that would enable someone to avoid an attack through the use of verbal confrontation prior to the initiation of force. Neutralizing techniques designed to stop the attack without inflicting pain were taught as a first option once force was

initiated. Those techniques included evasion and blocking. Other skills dealt with responses to the most common frontal attacks, rear attacks, and armed attacks. Those responses included strikes intended to cause pain and possibly devastating damage if necessary to protect one's own safety. While all of the information was deemed important, we found it too ambitious a schedule to maintain. There was simply too much material to cover during each session. When each session included centering drills, a warm-up, and review of previous material, it left only 30 minutes to cover new skills. The teaching of new material spilled over into the next session, throwing us off schedule. Thus, we were not able to cover armed attacks at all and the last three weeks were very rushed in an effort to teach as much material as possible.

While the self-defense instruction was very structured with an established curriculum, the group portion of the class was very different in its lack of structure. Sue was a highly competent therapist who worked extensively with women and children survivors of sexual assault. She had always facilitated her groups in a very unstructured manner. The following excerpt from one of our planning sessions indicated how the group portion was designed. The ambivalence about how to structure this part of the class is evidenced. With the exception of Sue, we were self-defense instructors with many years of experience. Sue was the only one with experience leading a therapy group. Thus, we

looked to her for leadership in that regard. However, the excerpt shows how Sue was just as unsure as the rest of us, given the uniqueness of this particular class and group.

Laura asked if the group session would be different each week. Sue responded, "you know, I just don't know. I've never done a group for this short a period of time. Most of my groups have occurred over 6 months. I don't impose an agenda, I use a method where I just let them bring things up so that they set the agenda and what they end up talking about is exactly what you wanted them to talk about. I think that first session will be a lot of what it's like to be there, what it's like to get into their bodies, I have yet to find any silence in a group that size." (Fieldnotes, 3/19/88)

While we looked to Sue for leadership concerning the group portion of the class, and she certainly provided it to some extent, she seemed to be in a difficult position herself. She definitely had more experience than any of the rest of us regarding therapy groups. Yet, this was also something that was brand new for her as well. As she indicated in the excerpt, she had never done a group that was as short as this one. Offering group therapy to survivors following self-defense instruction had never been done. Sue was able to offer input based on her own professional experiences, but this class was to differ from anything similar to her own experiences. Thus, I propose the following assertion which will have two sub-assertions.

Assertion: Each member of the teaching team was a very experienced professional in her own right. However, because of the very unique nature of this class for survivors of sexual assault, there was a certain tentativeness

experienced by the teaching team that impacted both the teaching of self-defense and the group therapy portion of the class.

As already discussed, Sue had a tremendous amount of professional experience in dealing with survivors of sexual assault and in running groups, but in many regards this was a brand new experience which brought out a certain amount of indecision. Note again, in the excerpt above, the first thing that Sue said was, "I just don't know."

Sub-assertion A: The tentativeness in teaching was reflected both in planning and in practice. In terms of planning, we often anticipated the worst possible responses that students might have to the skills being taught. That anticipation became like self-fulfilling prophecy in that we assumed we would see all of those negative reactions. Thus, in practice, teaching was based on our own assumptions rather than on actual student responses.

This class brought out tentativeness in the self-defense instructors. While each of us had taught for a minimum of five years, and while we knew that survivors were taking our classes, none of us had worked explicitly with that population. Our primary focus over the years had been teaching self-defense. Now our concern also included how to best teach self-defense to a population of survivors who had potentially different needs from women who had never experienced assault. Additionally, two members of the teaching team were survivors themselves. Possibly based on

their own experiences as survivors, possibly based on the conversations each of us had over the years with survivors, possibly based on Sue's professional experience, and our own knowledge of sexual assault, we were trying to anticipate all of the needs that survivors might have and we were often thinking about the worst case scenarios. Following is an excerpt from a planning session that included a discussion of particular skills and the thinking through of potential student responses to those skills. Most often, we anticipated the worst possible responses rather than more favorable responses.

The five of us were trying to develop the curriculum for the first session. June said that she almost always does confrontation before she does any other self-defense techniques because of the way it fits into the chronology of the stages of assault. Almost immediately, concerns were raised by Sandy that confrontation might feel too threatening already that first night before trust is really established. She added that it might also seem very embarrassing to have to "act" in front of one another. Laura offered a suggestion about how she did confrontation with high school-age students who also often find confrontation embarrassing to do. I also offered a suggestion about the way I do confrontation in a very simple manner with college students. Additionally, I suggested that a more drawn-out role play could be demonstrated by two of us if we wanted to do more without making it so difficult for the students.

June said, "I agree, I think that's best to do." I added that even watching was important. Jen had been looking around at the other instructors and at Sue. She looked directly at Sue and said, "Sue, come on, speak up. I think for some, even watching will produce a lot of emotional stuff and will be real scary." Sue responded to what Jen had said. "I agree, for that first night we should make it as non-threatening as possible." Jen quickly added, "or they won't be back" (Fieldnotes, 3/19/88).

The excerpt indicated the extent to which we anticipated

the difficulties that might arise in response to the skills that we were teaching, the order we were teaching them, and the way that we might be teaching them. At one level, that kind of anticipation was important so that we would not be surprised by student responses.

Our extensive anticipation of possible student responses seemed both necessary and problematic. The extensive anticipation seemed to result from our lack of experience in teaching self-defense explicitly to survivors of sexual assault. It became problematic in that we started teaching very differently based on assumptions about negative responses. As was stated in the sub-assertion, we often didn't wait for the students to respond, we expected certain responses and proceeded according to those assumptions. The following vignette about a portrayal of vulnerability illustrates the sub-assertion.

The event occurred during the first session as I was discussing with the group the dynamics of assault. As part of that discussion, I covered the three stages of assault which include victim selection, testing, and the initiation of force.

Portrayal of Vulnerability

What does an assailant look for when selecting a victim? Remember, we already talked about the primary motivating factors behind most sexual assaults, that being the need for the assailant to express power, dominance, and control over the victim. With that in mind, we can better understand what kind of victim the assailant thinks is best. The best victim from the assailant's perspective is someone who is passive, quiet, who won't speak up if she feels uncomfortable

with what is going on, who appears intimidated and scared - in other words, someone who appears vulnerable. There is a second key consideration in victim selection and that is accessibility. The assailant must be able to get close to you and isolate you to some extent if he is going to be able to assault you.

Now, I'm going to give you an example of the kind of vulnerability that an assailant might be looking for. I want you to pay attention to what you see and hear in my behavior.' I proceeded to give an example that I often give in the programs and classes elsewhere. I asked them to imagine that they were meeting me for the first time and that they were getting a first impression of me. I stood up and moved away from the circle. Then I approached it and sat down as if I were coming into the circle for the first time. I walked quickly with short little steps and tried to hurry to sit down implying that I didn't want anyone to notice me. I looked around for a moment but avoided making any eye contact. As a matter-of-fact, throughout the example I avoided all eye contact. When I started to speak my voice was very soft, I hesitated often as if I weren't sure what I needed to say, and I used lots of qualifiers in my word choices. 'Hi, my name is Jayne Schuiteman, and I'm one of the instructors for this class. (Pause) I'm going to be working with you on this issue of sexual assault (pause) and I hope that by the time this evening is over, (pause) well, (pause) that you will be excited about this class. I think I have some real important things to share with you and I hope you agree, and well, (pause) I just hope, that by the time we are done tonight, well, (pause) I just hope that you come back next week.'

At that point I stopped and looked around the group. One of the students had been taking notes and was busy writing. Others just looked at me and at others, a couple snickered at the end as if they understood the humor I intended in wondering if they would come back if one of their self-defense instructors was so passive (Fieldnotes, 5/4/88).

During group that evening, several students made reference to the vulnerability portrayal. At one point, one student looked at me through her tears and said,

'I am the person that you acted out. That is me all the time. I know I should be assertive, but I can't, all I want to do is curl up into a little tiny ball and hope they go away' (Fieldnotes, 5/4/88).

Another student had this to say,

I've made some progress in learning how to be more assertive. Yet, at least three quarters of the time I am still very passive. I tend to work against my own progress. When I am assertive, I immediately think, 'did I say the wrong thing?, maybe I shouldn't have said that, I hope I didn't hurt that person.' For every step I take forward I feel like I take two steps backward because I get down on myself for being assertive. I could really identify with your role play (she looked directly at me as she said that) because I'm like that most of the time' (Fieldnotes, 5/4/88).

Following class that night, Sue, Sandy, Laura, and myself met to talk about the class and how we thought that first session had gone. Sandy and Laura expressed concern over the portrayal of vulnerability. Sandy said, 'We shouldn't have traumatized them on the very first night.' Laura seemed very concerned over student reactions and seemed to be interpreting them as "bad" because it was too personal and more than the women could handle. Sue, on the other hand, said, 'We just don't know. For some it may have been overwhelming and difficult, for others it may have been just what they needed to see and hear, even if it was difficult. It's just hard to know.'

The event spurred several different phone conversations between members of the teaching team. Four of those conversations included me. In each of those conversations, we tried to reanalyze the positive and negative aspects of the vulnerability portrayal. As an instructor, I felt very frustrated -- like "I was walking on eggshells" in my teaching and that at any minute I might be doing something terrible without even realizing it. I did not perceive

myself as insensitive, but because of the other instructors responses to my teaching, I was now very unsure of myself.

In a phone conversation with Sue, I said,

Where do we draw the lines? I don't want to do anything hurtful, yet I don't want to shield them from reality, coddle, or anything like that. I am really frustrated and I've been grappling with this ever since we started planning, but especially after Monday night's portrayal of vulnerability. I feel like I'm walking on eggshells. (Fieldnotes, 5/10/88)

Sue's response was reassuring to me. She said,

We need to trust our gut and if we are doing what we are doing out of a sense of love for these women, we won't do anything hurtful. We may do some things that are less helpful than others, but a true sense or spirit of love won't do anything hurtful. We can't constantly be worried about doing the wrong thing versus the right thing. Nor should we take full responsibility - that is, even a false sense of power. We don't have control over how anyone else perceives us. I think it would be best to basically do things the way you would in a regular 10-week class. You've had survivors in those classes and that's been okay (Fieldnotes, 5/10/88).

The excerpts of conversations indicate the tentativeness referred to earlier. As an instructor, I felt frustrated. I typically had great confidence in my teaching and enjoyed myself. In the excerpt I was grappling with what seemed to be the right thing to do. I also indicated that I felt like I was walking on eggshells, just waiting to make a mistake.

Sue's response indicated less tentativeness than the rest of the teaching team had been expressing thus far. She believed we should not try to interpret student perceptions for them. However, that was exactly what we were doing by trying to always think about what would be right or wrong,

or good or bad. She concluded by telling me to teach the way I usually teach and we would have to wait and see what student perceptions were. Just moments before in that same conversation, she had said to me,

I honestly don't know whether it (the depiction of vulnerability) was hurtful or helpful. That will be something that we face every week and we won't know till afterwards (Fieldnotes, 5/10/88).

I understood that comment to mean that we would find out during the group portion how students felt about what we were doing in each session. By verbalizing their feelings, we would get a better sense of what seemed hurtful or helpful to students. However, that was not to be the case.

As already discussed, the group therapy portion of the class was very unstructured. Rather than imposing an agenda, Sue felt it was important to let the participants determine the flow of conversation. That philosophy seemed to make sense to everyone in theory, but in practice it presented difficulties due to the relative short length of the class, and to the fact that Sandy, Laura, and myself were very tentative concerning our role in the group portion of the class.

Sub-assertion B: The tentativeness in group therapy was evidenced in a lack of clear definition of the role of the self-defense instructors and in Sue not having facilitated a group that lasted only eight weeks. The tentativeness meant that the group never did talk about the self-defense training or how they felt about it.

The tone for the group was established the first night of class. Sue explained the group rules and they included:

- 1) No smoking in the building during class or group.
- 2) No chemical usage just before class and preferably none during the eight weeks because mind altering substances tend to block or slow down one's ability to get in touch with certain feelings.
- 3) Confidentiality for group members was very important. Nothing should be said to others that might be a violation of a group member or that would betray that person.
- 4) There should be a no murder and no suicide contract. This was explained as a means of allowing group members to feel safe enough to express a variety of emotions including anger, rage, or intense pain and other group members would not have to feel like they had to take responsibility for what someone might do in response to those feelings.
- 5) There should be no sex with any group members. Sue added that while that might not be a concern for some, we just wanted to be upfront about that because this group was like a family and should those kinds of desires surface for anyone, to act on them would be just like incest.
- 6) No advice unless asked for. The last rule was suggested by a student. The other members concurred, and with that, Sue looked around and said that what she would like is to have a few moments where it is quiet, where people could center, and then when someone felt like talking, they could.

During group that evening, Laura, Sandy, and myself never spoke. Most of the group members spoke at some point,

but Sue never responded to anything that was said. She didn't speak again that night until it was time to wrap things up and then she summarized what she had perceived to be the theme of the discussion. When she finished, people began to leave.

During the teaching team's wrap-up meeting that evening, Sandy questioned Sue about the role of the self-defense instructors during group. She said that she noticed that Sue had said nothing all evening and wondered if the self-defense instructors should stay silent as well. Sue explained that especially early on in a new group, she tried to let group members do the talking. She explained that if she said something in response to what each person said, she would be looked at as the expert with all the answers. She wanted them to look to one another, not always to her or the rest of us for support. She went on to add that she wasn't sure what the role of the instructors should be.

Don't feel like you can't talk, but we certainly don't want to take away from the participants talking either. I think as long as our comments address questions they ask or because we might ask a more probing question of someone, that's fine. (Interview transcript, 5/4/88).

Laura said that she knew that she needed to be careful because without thinking she could easily start talking about how she felt, as if she were a class member rather than group facilitator. She knew that should not be our role and Sue agreed.

The rest of the eight weeks preceded in a similar

fashion to the first week, however, seldom did the participants talk about the self-defense portion of the class. Rather, most discussions focused on what was happening to class members in different aspects of their lives. The connection to self-defense training or to the healing process was not always evident; at other times the connection was more apparent. Additionally, in the first three weeks, there were two class members in particular, who had difficulty in abiding by the "no advice unless asked for" rule. They insisted on telling others what they should have done in particular situations as well as how they should have felt about those same situations. Any effort to understand a different way of feeling or interpretation seemed very difficult for them. The following vignette about a discussion in group points to the difficulties experienced, as well as to a lack of understanding concerning different roles. The vignette is about a conversation that turned into an argument between several students. Note that Sue did not intervene nor did any of the instructors. Also note that the instructors showed tentativeness about what to do concerning the events that transpired.

The Argument

In the second week of class, a major discussion about attention from men being good or bad was ignited by an incident that occurred to one of the students during the week. She had been outside a convenience store when a man in a van whistled at her and called her the love of his life. She felt helpless to say anything to him even though she wished she could have. That was clearly an effort to share feelings related to the class. However, the group quickly took sides and a

long debate about the man's behavior took place. Accusations were made about different interpretations being wrong and the discussion finally culminated with one student saying to another, "okay, but we can agree that the guy who yelled at Laine was an asshole, she (Laine) didn't like what he did, was he an asshole, yes or no?" The student who asked the question of the others insisted on an answer. She repeated her question, "Was he an asshole, yes or no?" At that point, another student who had only listened to the debate, stood up and mumbled under her breath, "This is bullshit and I don't have to listen to this" and she walked out of the room.

At this point, I felt very uncomfortable. I looked at Sue and then at the other instructors. Sandy motioned to me from across the room whether or not she should go after the student who left. I motioned back that I didn't know. Neither of us did anything. It was almost time to leave. Sue looked around the room and said, "I have observed a very intense and articulate discussion over the last twenty minutes that all seemed pretty academic. We spent all of our time talking about men's behaviors and never really talked at all about our own feelings concerning the self-defense. We dealt with something tonight in self-defense that was very scary, being choked by an attacker. By talking about Laine's experience in the parking lot in the way we did, we never got past that academic discussion about men's attention and never got to deeper levels, levels of feeling that maybe people were trying to avoid" (Fieldnotes, 5/11/88).

Note again how all of the instructors as well as Sue remained silent during the debate. During our wrap-up session, each instructor indicated feeling uncomfortable during that discussion but was not sure what should have been done about it if anything. As instructors, we followed Sue's lead even when we felt uncomfortable because we just were not sure about what we should or should not do. Also note that neither Sandy or myself took action when we wondered if we should follow the student who left. In the wrap-up meeting, Sandy asked Sue what we should have done in that situation. Sue indicated that one of us should probably

have gone after her, not to bring her back, as that would have been second guessing her choice. Rather, it would have been helpful to know whether she felt okay about her choice to leave and whether she needed anyone to talk to at that point. Once again we were looking to Sue for leadership because she was perceived as the expert. The instructors relied heavily on what she said and did in terms of being an example during group and in discussions afterward.

The following section of this chapter discusses these issues in more depth in terms of what we learned from the first class. It will also explore student reactions to the pilot class that also served as the basis for structuring the focal class. Based on the experiences of the pilot class, we decided to make certain structural changes in the focal class in an effort to make it a better experience for everyone involved.

Section 3: What Was Learned From The Pilot Class

The third section of this chapter discusses what we as a teaching team learned from the pilot survivors self-defense class. The previous two sections described the pilot class and served as the foundation for this final section. I will discuss in detail some student responses to the pilot class as well as adjustments that the teaching team made for the focal self-defense class.

Student Responses to the Pilot Class

Students responses to the pilot class were varied. Most of the women were in agreement that the class was beneficial to some extent. Some certainly found the class more helpful than others. Only one woman felt that the class was actually detrimental. In an interview with her at the conclusion of the class, she told me that the first three weeks set a very strong and negative tone for her. She felt that during those first three weeks in group several class members were verbally "attacked" by two students in particular. As a result, she never did feel safe in the class. She had the following to say about the class.

After the first couple of sessions, I was ready to quit. I went to my therapist, and I told her I thought there were a couple of people in the class who didn't belong. And I was very upset by that.... I thought maybe they [class organizers] could do a better job of screening next time. To be honest, I went to this class to be in a safe place and I NEVER felt safe except for the one night they were both gone. (Interview transcript, 9/26/88).

She went on to report that she felt okay with most of the people in the class, it was the two that "blew her away." She was able to establish a bond with some of the other class members and that felt important to her. However, she felt bad that she did not accomplish anything nor had she resolved anything in her judgment. Notice in the quote, she had told her therapist that we should do a better job of screening in the future. In the pilot class, we did not do a pre-class screening. Each woman who came into the class had a referral from a local therapist. We went on the

assumption that a therapist's referral would be sufficient. The two women who the above student referred to were not ready to be in a group experience such as this one. Sue expressed those concerns in our very first wrap-up meeting and we decided to see how things went over the next few weeks. One of those two women eventually left the class and the other did improve her group skills over time, but for the student above, the damage seemed to have been done in the first two class sessions.

Other students had different reactions to the class. Nearly all of the students agreed that eight weeks was not sufficient to cover the self-defense material and do anything meaningful in the group portion of the class. Additionally, several students expressed disappointment with the group portion of the class.

Student responses to group therapy. Several students referred to the first two group sessions in post-class interviews. Each student talked about how difficult those first several sessions felt. Their feelings about those sessions ranged from the student above, who felt as if those first two sessions ruined the class for her, to students who thought they were difficult but part of any group that is just getting started. Sue explained to the teaching team that groups typically get off to a rocky start as individuals learn about one another and determine where they fit into the group structure. While that kind of start may be typical in many therapy groups, those same groups often meet

for a much longer duration and, therefore, there is more time to work through those early group difficulties and move on to constructive group work. In this case, eight weeks was simply too short a period of time to work through those early difficulties and still move on in a constructive manner. Following our three weeks of instability, there were only four sessions left.

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The short time span of the class also presented difficulties in the way group was structured. Earlier in this chapter I explained how Sue chose to facilitate the group. She had always run groups in a very unstructured manner. She let group members talk about anything they wanted to as long as they abided by the group rules. Her rationale was that all of the issues that she would have chosen to address were eventually raised by group members in their own time when they were ready to deal with them. Thus, group members set the agenda which was a form of empowerment for them. Sue took the lead in determining how group would be run in the pilot class because we looked to her as the professional therapist.

During the first session, after Sue explained the group rules, she asked people to focus silently for a few moments, and when anyone felt ready to speak, they could. She never spoke again until it was time to end the session for the evening. The rest of the members of the teaching team followed her lead and also stayed silent.

Several students responded to those first few sessions

in the following ways. Note their references to not feeling safe.

I was angry, mad, and upset with Sue. She should have put a stop to the attack on Laine [one of the other students]. I felt so bad for her [Laine]. Sue should have stepped in but (pause) after thinking about it, I guess she was doing exactly what she needed to do. She was sizing things up and getting a feel for everyone. It took me several weeks to realize that she needed to figure out what was going on.

I don't feel like I always need to be rescued, but that environment felt so unsafe, it felt like I needed to be rescued. It felt too vulnerable. I learned that Sue was only human too (Interview transcript, 9/26/88).

Privately, people talked about how they felt in class but not during the sessions. People just didn't feel safe. The people who did talk with each other already trusted each other (Interview transcript, 9/28/88).

It felt like we wasted a lot of time. We spent five weeks trying to feel safe and then it was all over. I wish it could all have been done in one stormy session and then be over (Interview transcript, 9/26/88).

The lack of perceived safety prevented some group members from ever freely sharing their true feelings. Feeling safe enough to freely express feelings is a critical aspect of group therapy. Without a safe environment, group members are unable to explore the issues and feelings that survivors face as they work toward greater healing. The course planners intended that the group component of the class would be a safe environment where students could share their feelings about self-defense training as it related to their own healing process. For some, that opportunity was totally missed.

In addition to reporting a lack of perceived safety in the group therapy portion of the class, several students

also indicated that the group needed more structure and leadership. The following examples of student feedback point to that need.

People came from so many different spaces, Sue needed to be more directive in the therapy part (Interview transcript, 8/25/88).

In group, Sue played a very passive role. Well, I guess everyone did. I guess I felt betrayed by all the instructors, but particularly by Sue because she was supposed to be running the group. The group just kind of did what it wanted to do and she very seldom stepped in at all, and when she did it was in a very tentative sort of way. I would have liked more active leadership in the group (Interview transcript, 8/25/88).

Students expressed strong feelings about the lack of leadership. One student said that she felt betrayed by all the instructors because no one stepped in when she felt they should have. This perceived lack of leadership contributed to the feelings of a lack of safety. Class members needed to feel like someone was in control of the group. In the earlier quotes, one student said that she even felt like she needed to be rescued.

The teaching team was aware of how people were feeling and we struggled with that issue. During our own meetings after class, we discussed the struggle between reality and philosophy. In reality, people felt unsafe and felt like they needed Sue or other instructors to step in and "make things better." However, our primary goal for this group centered on a philosophy of empowerment. We wanted them to learn how to rescue themselves rather than relying on someone else to do it for them. Often, survivors of sexual assault,

particularly sexual abuse, have learned the victim role all too well. One of the goals of therapy conducted from a feminist perspective is to facilitate healing rather than direct it (Maltz and Holman, 1987). While perhaps a subtle distinction, facilitation is based on a philosophy of empowerment where survivors learn to take control for themselves rather than relying on the control of another. Sexual assault strips victims of control and a major part of the healing process is learning to regain control (Bass and Davis, 1988; Ledray, 1986; Maltz and Holman, 1987).

Maltz and Holman (1987) write the following:

Incest survivors are victims of trauma. A profoundly negative experience occurred in their lives - an experience over which they had no control and no escape. Nothing can erase the pain from the past; memories do not dissolve. However, incest survivors do have a choice. They can let the pain from the past continue to control and victimize them or they can make a conscious choice to leave the victim role behind. It's not easy. It's not possible to leave the victim's experience behind by willing it to be that way (p. 137).

The last line in the above passage seems to be of central importance in revealing a mistake on the part of the teaching team. Our lack of intervention in the group did not originate out of sense of ill will, quite the contrary. Our intentions were stemming from a philosophy of empowerment and a desire to have our students step out of the victim's role. However, we were simply "willing it to be that way." We weren't directing nor were we facilitating the healing process. Because we realized class members felt unsafe, the teaching team decided that more direct intervention and

facilitation was necessary and we began interacting more with students during group. Sue, in particular, began asking more questions and began picking up on themes that students raised in order to increase awareness of those issues. However, our efforts may have come too late for some students who told me in post-class interviews that they never felt safe.

Student responses to the self-defense instruction. The student responses to the self-defense training were generally more positive than their responses to the group therapy. Most students felt the self-defense training had been valuable. However, as the discussion above indicated, while students may have felt the self-defense training was valuable, it may have been even more valuable accompanied by a stronger group component. As would be expected, feelings associated with the group also impacted the self-defense portion of the class. One student was unable to partner with two of the other students during self-defense training because she felt so unsafe around them. She privately expressed those feelings to Sue. She in turn shared that information with the rest of the teaching team in order to avoid those partnering arrangements.

Most of the students made only two distinctions between the different aspects of the class, those being the "physical part" and the "therapy" or "group part." Thus, many of their responses to the "physical part" included not only the self-defense training but the centering exercise and the

physical warm-up that preceded the actual instruction.

The following responses to self-defense/physical training were reported by students in the pilot class. They represent a sampling of responses that are considered fairly representative of student reactions to the training.

The main thing is in just getting options and another big part of it for me was using my body. I mean I just have not done that and have no faith in my body for the most part, and it was also a great release. I've never yelled that loud in my life. I've always held that back and I've always held my body back and that felt wonderful (Interview transcript, 8/25/88).

In the excerpt above, several references were made to issues that survivors face as they work toward healing. As discussed in detail in chapter 2, those issues include alienation from the body and anger. This student reported that she was physically relying on her body in a manner that she had never done before. Furthermore, she had never really trusted her body and, for the first time, had come to realize that trust was possible. It is interesting to note that even in this brief excerpt, alienation seems to be present. She referred to "me" and "body" as if they were two very separate entities rather than one whole being. The self-defense training seemed to be an important bridge for this student in learning to be more in touch with her physical self.

She also reported that the physical training as well as the yelling served as important releases for her anger. Other students also indicated that the physical training was an important medium in working on issues related to their

healing. However, because those issues were seldom raised in the context of the group therapy, it was not until the class was completed and I was able to interview the students, that I realized the extent to which the class accomplished some of the goals shared by planning and teaching team.

There were times that issues such as anger surfaced in the context of the group. One evening a student named Sarah expressed the following feelings about anger.

My demons are real, they are not illusions, they are not make believe, they are real. When we were confronting our partner during the role play, (she pointed to her partner) you were my demon. I was ready to blast you through a brick wall. That scared me. It's the same old shit. My anger is a demon. At least now I'm starting to project my anger externally, before I used to direct it against myself, and I became very self-destructive. I guess that's a step in the right direction. My demons counteract what I should know in my head, now I fight with my demons (Field-notes, 5/4/88).

Several students described how kicking foam shields served as an outlet for their anger. One woman who had been sexually abused by her father told the group that she imaged her father in that shield as she kicked it over and over.

There were other favorable responses to the self-defense training. One student spoke of the value of learning to protect herself in increasing her own feelings of safety.

Knowing that I can defend myself physically, and learning that, that has value. That makes a big difference. I can't go back and protect that child, but if I know I can protect myself now, then I feel good, I can feel safe. And the most frustrating thing in my life has always been "your safety is going to come from

inside you." You know people would always say that and that's bull shit.... There is no safety inside of me until someone teaches me to be safe (Interview transcript, 8/3/88).

Other students addressed the issue of empowerment, which was the primary goal of the class. The training did serve as a means of increasing a sense of empowerment in the students' lives.

It [self-defense] empowers women. It makes them know they have options, that their option isn't just to lie down, like who was it? Maggie? Really thinking she has no choices, she has only two options, one is to let somebody use her in any way they want or to kill them or break their arm.... There's a ton of options in between breaking arms and being used, but it takes a long time to learn what those are, and self-defense classes are one of the few places that women can learn those things and society isn't about to teach us (Interview transcript, 8/25/88).

A lot of us weren't as confident, as able, as empowered as we needed to be. So even if we hadn't been assaulted, we would still have needed this training to better get through life. The problem with assault is that it doesn't have to happen to have it limit your life. Just knowing that it happens limits your life all the time. The empowerment, to be able to be more than you were before, is so important to move into other areas that you would otherwise not have the confidence to move into (Interview transcript, 9/28/88).

Doing the physical stuff was good...that was helping me get in touch with powerful feelings that I had in other parts of my life that I had lost. I used to be a much more athletic person when I was younger and then after I got hurt in the back accident, that has all been closed to me. And being physically active and athletic made me feel much more powerful. So doing those physical activities made me get in touch with that powerful person again (Interview transcript, 9/28/88).

These students indicated that empowerment was an important concept to them and the training contributed to an improved sense of empowerment in several different ways.

The first student indicated that she felt empowered because she now had more options at her disposal. Self-defense training provides students with more options than to simply "lay back and take it." Rather than "taking it" they have the option to try to "fight it" and "stop it."

The second student defined empowerment as "being more now than she was before the class started." She felt that she had learned enough so that she was indeed more than she had been prior to the beginning of the class. In her definition, knowledge was power.

Finally, the third student in this set of examples talked about the importance of feeling physically powerful again. Like the student in the first example, she felt out of touch with her body. The class provided her with the opportunity to feel physically powerful again.

Several students expressed disappointment that we had not covered as many self-defense skills as was originally planned. On the first night of class we told students what skills would be covered in terms of self-defense training. As stated earlier in this chapter, we were not able to cover all that we had intended. Additionally, several students said that the pacing felt rushed in the last several weeks as it became clear we would not cover everything.

Changes Made From the Pilot Class to the Focal Class.

Based upon both the teaching team and student responses to particular aspects of the pilot class, changes were made from the pilot class to the focal class. The teaching team met two times between the classes. The group met once after the pilot class was finished to officially discuss it. Additionally, the group met one time prior to the start of the focal class in order to finalize its curriculum and design. During those meetings, the teaching team decided that certain changes were necessary in order to improve the class to better meet the needs of students. Those changes are outlined below.

1. We decided to conduct a preclass screening for all potential students rather than relying strictly on a therapist's referral. Sue and I met with each prospective student for approximately 30 minutes. During that time we were able to outline what the class would be like and what students might expect. I was able to give them more information about the research component of the class and they had the opportunity to tell us about their expectations as well as ask any questions they had concerning the class.

2. The total class time was lengthened both in terms of the number of class sessions as well as the length of each class session. The pilot class extended over eight class sessions with each session lasting two hours. The focal class was lengthened to 12 class sessions and each

session lasted 2 1/2 hours. Thus, total contact time was increased from 16 to 30 hours.

3. The teaching team was reduced. The pilot class teaching team consisted of two primary instructors who split the teaching responsibilities on a biweekly basis. Both primary instructors attended each session, but one who was not teaching roamed and assisted. In addition to the therapist there was also an assistant instructor for a total of four teaching team members. In interviews at the conclusion of the pilot class, I asked students how that number of people felt to them. They all reported that it felt just fine and some even described it as reassuring to have the four of us there each week. However, the number seemed somewhat troublesome for the teaching team itself. Both of the instructors were very competent and had many years of self-defense teaching experience. They were used to teaching in their own way and in their own style. The teaching team seemed to have some difficulty in being able to merge those different styles and, at times, those differing styles became sources of frustration. The decision about who would continue with the class was relatively easy. One of the two primary instructors and the assistant instructor decided that they did not want to continue with the next class. Their decisions not to continue were based on other time commitments they had over the time period of the focal class. Rather than finding two new people to take their places, the teaching team decided to go with one primary

instructor who was responsible for all teaching, one assistant instructor, and one therapist.

4. The group portion of the class was redefined and restructured. Our original vision of that part of the class was that of group therapy. However, as we discovered, the class did not meet long enough for traditional definitions and structures of group therapy to be applicable. Sue had told us at one of our first planning meetings that most of her therapy groups lasted a minimum of six months so we just could not predict how an eight-session group would work. The unstructured approach that may be perfectly suitable for longer groups was clearly not suitable for this class. At both the wrap-up meeting as well as at the planning meeting for the focal class, the teaching team discussed whether it was even appropriate to think of a 12-session group as a therapy group. The decision was made to call the group portion a "support group" rather than a "therapy group."

In referring to this aspect as a support group rather than a therapy group, the teaching team was able to clarify for itself as well as for potential students what they could expect from the group portion. It was intended as an arena where students could freely and safely deal with their feelings about the self-defense training. The group was also intended to provide the students with additional tools with which to deal with some of the issues that survivors of sexual assault face. With those expectations for the

support group, the teaching team was able to plan for how that portion of the class should be conducted.

Clear expectations were not part of the pilot class. As a teaching team, we did not have any clear sense of the group portion. We envisioned it functioning like a traditional therapy group but we had not given consideration to the class' length and how that might make a traditional approach inappropriate for this situation.

An analysis of the pilot class and student responses to it after the class was completed indicated that the self-defense training and group portion provided students with tools to better deal with the issues that survivors face in working toward healing. The discussion about student responses to the pilot class provided the reader with examples of how students used what they had learned to better deal with anger. Other issues that survivors face in the healing process also surfaced during the class. However, due to the unstructured nature of the group portion, those issues were not approached in any systematic manner nor were they dealt with explicitly. Rather, issues were addressed only if a student happened to bring it up in group. For research purposes, I was also able to explore the relationship between the class and the healing process in more detail with students at the conclusion of the class in post-class interviews. Those interviews suggest that there was a positive relationship between the class and the healing process for most of the students in the pilot class. Thus, our goal for

the focal class was to make that connection much more explicit.

In order to make the relationship between the healing process and self-defense training more explicit, the decision was made to structure the support group. Issues that had surfaced during the pilot class or during post class interviews were incorporated into themes that would provide the focus for each week's class session. The themes reflected issues such as anger, sadness and loss, trusting one's own perceptions, trusting others, body awareness and boundaries. Each week's theme was to be explored through the use of planned discussions and activities. Although Sue was still the primary facilitator during this portion, Jen and I, as instructors, took a much more active role in the support group than had previously been the case. There were to be times when Jen or myself might lead part of a discussion, explain an activity, etc. The themes, discussions, and support group activities are described in detail in later chapters.

5. The curriculum for self-defense was not altered significantly. The teaching team understood that there would be additional time in the focal class, but rather than try to add anything new, we decided that it would be important to teach everything that we intended to in the pilot class but could not. Therefore, ground defense, armed attacks, bag work, and a discussion concerning multiple attackers were put back into the curriculum. We did try to

coordinate the self-defense curriculum with the theme for each class session. For example, The theme for the third class session was "anger." In conjunction with that theme, the self-defense skills taught that evening were strikes. Those included hand techniques as well as kicks. Students practiced those skills on bags and shields in order to practice striking with force and power. In addition, striking the bags and shields with force often serves as an important outlet for anger. Examples of other curriculum/theme matches included confrontation training with "trusting one's own perceptions" and the front choke hold progression with "fear."

The Structure of the Focal Survivors' Self-Defense Class

The changes outlined above provided the basis for the structure of the focal class. It differed significantly from the pilot class and this chapter closes with a description of that structure as well as the themes that were covered in each session.

This section includes several vignettes used to illustrate the structure of the focal class. Each vignette includes names of participants in the class even though those women have not been introduced. My intent is not to confuse the reader. Class participants will be formally introduced as part of the analysis of the focal class.

As noted previously, very few changes were made in the self-defense curriculum. Because the focal class met for a

longer period of time than the pilot class, skills that were omitted from the one class were included in the other.

The class planners tried to incorporate a number of activities and discussion topics into the group portion in order to help class members better deal with issues that survivors face as they move toward greater healing. Those issues then became themes that guided the activities and discussions of the evening. Whenever possible, the entire session was guided by a particular topic. For instance, the theme for the first session was body awareness and boundaries. That theme guided not only the group activities but became the theme that the entire session was structured around. The self-defense portion of the class reflected the theme in addition to the group portion. In order to better illustrate that concept, a brief description of the theme and session structure follows.

Because personal boundaries were invaded inappropriately at very young ages in the case of childhood sexual abuse, many survivors have little sense of boundaries as adults (Bass & Davis, 1988). Personal space can be invaded very easily and inappropriately and survivors may not realize the invasion until it has occurred.

Many survivors disassociated themselves from their body as a means of coping with the assault. By separating from the body that experienced the assault/abuse, survivors can convince themselves that what happened did not happen to them, but to somebody else (Bass & Davis, 1988). In order

to address those issues, the entire session focused on being in touch with the body and the boundaries around it.

The warm-up included a very drawn out and extensive stretch where I asked participants where they felt different stretch sensations. I also carefully explained why it was important to stretch each muscle group.

Following the warm-up, we practiced several skills associated with recognizing and protecting personal boundaries. All of the skills were described as neutralizing skills (i.e., the skills were intended to stop the assailant without inflicting pain).

The first concept introduced was the "critical distance of safety." That distance is directly associated with protecting one's boundaries. It is considered the distance from which one is minimally safe from a would-be attacker and corresponds to two arm lengths. Skills were taught that combined recognizing personal boundaries and protecting those boundaries with both verbal and physical techniques (see Appendix D for a brief description of three specific techniques: the evasive side step, flying wedge break, and use of confrontation).

Whenever possible we attempted to match the entire session with the theme for the evening so that the self-defense skill seemed to fit with the theme as well as the group activities as described above.

Structure of the group portion. The group portion of the class was changed significantly from the pilot to the

focal class. The group portion became more structured with planned activities and discussions. Following the self-defense instruction, there was a 15-20 minute discussion concerning feelings associated with the self-defense skills learned that evening. The following vignette provides the reader with an example of such a discussion. In order to provide context for the vignette, it should be noted that the self-defense skills taught that evening focused on primary target areas on the assailant's body and various strikes used to inflict pain into each of those target areas. Students had worked on those strikes in several different ways. Each strike was demonstrated and then practiced slowly either solo toward the mirrors or with a partner at a safe range. Students also practiced the skills on suspended punching bags ranging in weight from 40-75 pounds. Practicing on heavy bags allowed the students to generate power as well as provided feedback about hand or foot position, penetration, and commitment. In this particular example, Sue started the discussion with a fairly specific question. Often, however, the discussion began with her asking, "So, how did folks feel about tonight's self-defense?" The intent of the discussion was to allow participants the opportunity to talk about feelings associated with the self-defense training. In the following vignette, the reader will notice that Sue occasionally asked probing questions to get at deeper feelings. Additionally, the discussions served as an important means of legitimizing

feelings as participants vocalized them and others affirmed them in various ways. The discussion let others know that they were not alone in their feelings. Different comments also allowed us to ask questions to gain a better understanding of how class members perceived the self-defense training.

Feelings about Targets and Strikes

Everyone sat down in the circle and Sue looked around and asked, "How did it feel to think of the body as a weapon and another's body as a set of targets?" Becky spoke first. She said that she had been through all of this before in the beginning karate class that she had taken several years ago. She had much more trouble with the concept of the human body as a set of targets and weapons the first time she had been told about it than this time around. Becky went on by saying, "Now I can picture myself doing it, I'm real aware and I respond, and that feels real empowering - knowing I can react." Sue asked her why it felt much more difficult the first time she was taught these skills. Becky replied by saying, "My trouble hearing it the first time was fear. Fear was at the base of it." Jacqleen responded by saying, "Perpetrators sometimes seem like huge mountains of power and breaking the mountain down into its parts seemed to really help."

Lin said that she felt real aggressive both defending but also in attacking. She went on by saying, "I not only defended powerfully, but also attacked [my partner] just as powerfully and that scared me. I didn't want to hold back and I didn't care. I attacked and didn't care, I defended and didn't care." Jacqleen had been Lin's partner so Sue asked Jacqleen how she felt about that. She responded by saying, "I felt threatened at first but after awhile it felt ok because it was real and it was honest." Lin looked at her and said, "You lost your smile and became more controlled (Fieldnotes, 1/9/89)."

The vignette provided an example of post-self-defense group discussions. It also illustrated the intent of keeping the discussion focused on feelings rather than more "academic" sorts of matters. Sue asked a number of probing

questions to get at deeper feelings or possible explanations for certain feelings. Additionally, one person's comment often stimulated affirming comments from others such as Jacqleen's response to Becky. Becky said she was very afraid the first time she learned about targets and weapons. However, this time she was able to hear and respond which felt very empowering. Jacqleen's response seemed to affirm both aspects of Becky's feelings. First she said the perpetrator often seemed like a mountain, which affirmed and legitimized Becky's fear. She also added that breaking the mountain down seemed to help, affirming Becky's feelings of empowerment and being able to respond.

Following the discussion about the self-defense training, the group moved into activities and discussions associated with the theme for the evening. The theme was always introduced the previous week as part of that week's closing. Thus, class members were always prepared for the session's focus.

The following were the themes that guided each class session:

- Body awareness and boundaries
- Fear
- Anger
- Guilt and shame
- Sadness and loss
- Trust in oneself and one's perceptions
- Taking stock at the half-way point
- Trust in others
- The healing process: Where we are
and what we have done
- Balance and integration
- Self-esteem
- Personal power

Each theme included group discussion guided by one of the group leaders (Sue, Jen, or myself). The discussion often started through the use of some sort of activity, meditation, or reading intended to stimulate thinking about a particular topic or issue. The following vignette provides an example of such an opening to the theme for the evening.

Introducing the Theme of Guilt and Shame

The group had been discussing the feelings associated with practicing the front choke hold response realistically. Margaret said she had read some of the material handed out the previous week and was really thinking about the fact that most attackers are someone the victim knows. She added that she didn't think she would be able to use the skills practiced tonight on someone she knew. After several others had also spoken, Sue introduced the theme for the evening. She said to the group, "Let's go back to what Margaret said a little while ago. It can be real disconcerting to think of someone we know as the assailant. That may be because we were abused by an adult whom we thought we could trust, an adult we were dependent on for love, affection, care, food, everthing! The thought of hurting someone who did care for us in some ways makes some feel really guilty."

Sue then read from the book entitled The Courage to Heal. It was a book that we used often in preparing for group activities. The passage that Sue read was from the chapter entitled, "Understanding That It Wasn't Your Fault." The reading discussed some of the obvious and more subtle reasons why many survivors blame themselves for the abuse they experienced. Sue then went on to ask if people wanted to share at all how that burden of guilt felt for them. She asked if they would be willing to share any part of their story and how guilt and shame fit into their own experiences. Four of the women then went into their own experiences and shared with the group ways that they had been made to feel very guilty for what had happened to them. Group continued from that point with different discussions and activities all designed to better understand how those feelings of guilt affected us even today as well as ways those feelings could be dealt with in a constructive manner (Fieldnotes, 1/30/89).

Sue used a comment that a student had already made to introduce the topic for the evening. She often used that strategy in an effort to give class members a sense of ownership for discussion direction. She further introduced the topic by discussing some of the common reasons why a survivor might feel guilt and shame. The introduction stimulated discussion about feelings of guilt and shame that other class members shared.

The group portion included a variety of activities designed to stimulate thinking about healing issues. Most activities were experiential in some way beyond group discussion. Throughout the course of the focal survivors' class, we used journal writing, writing exercises in group, meditation, symbolism (an adult version of "show and tell"), healing rituals, and physical activity/movement as a way of tapping into certain emotions. Each of the activities associated with various themes will be discussed in detail in the next chapter.

Through the use of vignette examples, this portion of the section introduced the reader to the general structure of the focal class ranging from the self-defense to the group portion with its two parts: discussion about the self-defense training and the activities associated with the selected healing theme for the evening.

Summary

This chapter analyzed the pilot survivors' self-defense class in order to better understand the history and context of the focal class. The chapter was divided into three different sections. The first section presented the evolution of pilot class. The section began with a description of the agency that offered the class. The agency has existed in one form or another since 1976 and throughout its existence has been very instrumental in providing martial arts/self-defense training to a wide segment of the population. The agency has always had a strong focus on women's issues, particularly sexual violence and assault prevention. Additionally, the five women who were involved in the inspiration and planning of the survivors' self-defense class were all associated with that agency as martial artists and self-defense instructors.

The second part of section 1 provided the reader with a chronology of the evolution of the pilot class. That evolution began with a presentation to a group of women therapists and continued through the planning stages of the pilot class. The section concluded with a discussion of the very different perspectives that each member of the planning group had concerning self-defense training for women who were survivors of sexual assault. Those differing perspectives translated into difficulties in the planning stages as well as implementation of the pilot class.

The second section of the chapter provided the reader

with a description of the pilot class itself. The structure of the class was presented along with the themes that emerged during the implementation of the class. In discussing those themes, several assertions emerged and are reiterated below.

Assertion: Each member of the teaching team was a very experienced professional in her own right. However, because of the very unique nature of this class for survivors of sexual assault, there was tentativeness experienced by the teaching team that impacted the teaching of the self-defense and the group therapy portion of the class.

That assertion also had two sub-assertions. Sub-assertion A stated: The tentativeness in teaching was reflected both in planning and in practice. Sub-assertion B stated: The tentativeness in group therapy was evidenced in a lack of knowing the role of the self-defense instructors and in Sue not having facilitated a group that lasted only eight weeks.

Data in the form of vignettes and excerpts of conversations from planning meetings served as the evidence to support both the primary assertion as well as the sub-assertions.

The third and final section of the chapter outlined the changes made between the pilot and focal classes. In this section, primary emphasis was placed on the students' perspectives of the class as I discussed what was learned from the pilot class. Several important understandings were

gained from the pilot class. First, we learned that a therapist's referral might not be adequate enough to determine who might be ready for a self-defense class/support group. Therefore, prior to the focal class we conducted screening sessions for all potential participants. Second, eight weeks was not sufficient to teach all of the self-defense skills planned. Therefore, the focal class was extended to 12 weeks, and the length of each session was also extended. We also learned that eight weeks was too short a time to call the group portion of the class "group therapy." The unstructured way in which Sue typically ran therapy groups was not appropriate for a group of our duration. Thus, in the focal class, the group portion was more highly structured around different themes that were explored through discussion and activities. Finally, we also chose to decrease the number of instructors for the focal class. While participants reported no problem with the number of instructors associated with the class, the teaching team found it problematic to blend so many different teaching styles effectively. There were no major changes that were made in the self-defense curriculum from the pilot to the focal class.

The chapter ended with a detailed description of the structure of the focal class. The class format allowed time for self-defense instruction, discussion of feelings associated with the self-defense skills, and group activities focusing on the theme for the evening.

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**SELF-DEFENSE TRAINING AND ITS CONTRIBUTIONS
TO THE HEALING PROCESS FOR SURVIVORS OF
SEXUAL ASSAULT**

By

Jayne A. Schuiteman

Volume II

A DISSERTATION

**Submitted to
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in partial fulfillment of the requirements
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CHAPTER FIVE

RESULTS AND DISCUSSION

Overview

This chapter is divided into two sections. The first introduces the members of the focal class. The women are introduced in terms of their own experiences with sexual assault, why they chose to enroll in the focal class, what their expectations were regarding the class, and what the issues were that they thought were central to their healing process.

The second section further elaborates on the primary issues related to healing that students identified in section 1. Each of those issues is examined in light of the focal survivors' self-defense class in order to explore the connection between self-defense and healing.

An Introduction to the Participants in the Focal Class

Eleven women began the focal class. Over the first three weeks, three women left the class and we ended the twelve weeks with eight class members. One woman dropped out after the first night since she had not fully recovered from a metatarsal condition. Two other women quit after three weeks. Both women simply quit coming to class. Sue

called each one in an effort to determine why they had dropped out. One woman explained that she was in another support group for incest survivors and one more class/group felt like too much. Sue was never able to reach the last woman. She left her former address with no forwarding address or phone number.

The remainder of this section will focus on the eight women who remained members of the focal class. Their introductions are based on each woman's experience(s) with sexual assault, her reasons for coming into the class as well as her expectations for the class, and the primary issues that she felt were part of her own healing process.

While the introduction of class members may seem quite lengthy, I felt it was important to look at each class member as an individual with her own experiences, expectation, and issues around healing.

I caution the reader about making incorrect assumptions that the course was tailored to the needs of these eight women. The course was developed prior to these women enrolling in it. However, as the course progressed, certain aspects were tailored to meet the needs of the group as a group personality began to emerge. One difficulty of other self-defense courses that survivors might attend may lie in the fact that curricula are established and virtually inflexible. Therefore, the curriculum may or may not be meeting the needs of survivors as compared to women who have never experienced sexual assault.

The healing issues discussed in this section are very similar to the themes developed for the individual sessions. Each woman's experience with sexual assault is unique, however, the healing process following assault is remarkably similar. Given the planning team's expertise around assault and the healing process, we were able to structure a class that we thought would best meet the needs of survivors. These introductions will point to the similarities in healing needs and will set the stage for discussion of how self-defense training contributed to those healing needs.

Jacqleen. Jacqleen was 25 years old. She had been victimized by sexual abuse as a child by her brother-in-law. She distinctly remembered the abuse at the age of nine, but she reported that it may have started earlier. The abuse continued until she was 23 years old. Jacqleen said that she finally told her parents about the abuse after it had stopped. They did not believe her and now she has very little contact with her immediate family.

Jacqie reported that she came into the class because she wanted to be in a group setting as an incest survivor. She and her therapist both realized that contact with a group of other survivors might be very important for her continued healing progress. She had reached a block in individual therapy so she decided to try another avenue of healing potential.

Jacqleen was a very soft spoken person who appeared quite passive. However, as the class continued, I realized

what a strong and determined person she was. In an interview she said that one of her expectations for herself was to become more confident through the class "almost to the point of being borderline aggressive." Prior to the class, she expressed considerable anxiety about feeling awkward with physical activity although her anxiety seemed to quickly dissipate once the class started.

There was one other aspect of the class about which Jacqleen reported some anxiety before the class started. She said that with her personality as it was, she easily slipped into the role of therapist.

Having Sue there was very helpful for me, that I could sit back and be, it was almost forced upon me, which was good, that I was not the professional in this situation. I had anxieties about that because of my "save the world syndrome" and I didn't need that, even though I would have felt compelled to be in it (Interview transcript, 5/16/89).

When asked what healing meant for her, Jacqie reported that healing was closely linked to her self-esteem and the ability to gain it back. Healing was also associated with taking back what had been intrinsically hers.

Jacqleen: Granted, in the society that we are, and as a woman, I have a lot of fighting to do that has nothing to do with the incest. But that compounded it and made it a very unique kind of struggle than for other women who have been nurtured. So then the healing process is to take that back.

Jayne: Is there anything else that you think goes into healing?

Jacqleen: (Pause) I don't know how to label it, but it's just a sense of being whole and intrinsic worth. I think that's it (Interview transcript, 5/16/89).

I asked Jacqleen how she had worked on healing in the past. I asked that question of each participant as I was

interested in knowing how this particular class fit into their healing process. She explained that she had been in individual therapy, which she defined as a very concrete attempt to work on healing. In addition, she looked for healing in her pursuit of recreational activities. Even the ability to enjoy herself had to be learned. She had a very strong work ethic and pleasure made her feel guilty. She explained that she was also actively seeking out old friends and writing to them in an effort to rekindle friendships. Because of the incest, she lost touch with most of her friends and bringing friendship back into her life was an important means of healing.

Jacqleen was in individual therapy until September 1988. During the interim between ending that and beginning the survivors' class, she attended several ISA (Incest Survivors Anonymous) meetings, but felt that the group was unable to meet her own needs. I asked her what those needs were, in other words, what were the primary issues that she needed to address as she worked toward greater healing?

In answer to that question, she responded, "autonomy," without a moment of hesitation. She added:

And along with that, power and assertiveness that when people infringe on my rights to be an autonomous person, both emotionally, psychologically, physically, that I have the right and the power to stop it. If that means stepping back from the situation or authenticating their feelings without fusing with them (Interview transcript, 5/16/89).

RaeAnn. RaeAnn was 40 years old. She described herself as a former athlete who used to feel pretty comfortable in her body but had lost that comfort as she became more immersed in the issues of her own experiences with sexual assault. RaeAnn was sexually abused as a child by several older brothers, a brother-in-law, and a cousin. She reported that the abuse first began around the age of 8 and it continued until the age of 12. As a child, she believed something was terribly wrong with her because each of her perpetrators seemed somehow mysteriously drawn to her. It was only later, as an adult, that she realized each of her perpetrators had talked to one another which served as permission for the next one to begin.

When asked why she took the class, RaeAnn explained that she had started therapy for the third or fourth time the previous fall (1988). She and her therapist talked about different options that would hopefully move her along toward healing. Her therapist told her about our class and she also considered going to ISA. After she read over the 12 steps that were part of the ISA program, she decided it really was not for her so she pursued our survivors' class.

During the follow-up interview, I asked RaeAnn about her expectations prior to the start of the class. She began laughing and said, "Actually, they were all pretty negative." She went on:

I'm not much of a group person and I've gotten less social as time has gone by. So I kind of thought, gosh I'm going to begin this class with a bunch of

emotionally disturbed people (we both laughed) and I was a little worried about the self-defense part because I'm so out of shape. So I was kind of hoping for the best. I figured I'd give it a shot and do the whole thing and if it was a waste of time, well, that's the breaks (Interview transcript, 5/11/89).

RaeAnn defined healing as "accepting where I am and who I am" (Interview transcript, 5/11/89). She had been told many things that she could accept intellectually, but accepting them emotionally was very difficult for her. "So when I really embrace those things and experience them emotionally, that feels like healing to me" (Interview transcript, 5/11/89).

RaeAnn explained that she had worked on her own healing process in a number of different ways. She said that she normally tries to confront problems, especially when the same problems seem to resurface in different ways. At that point she tries to be introspective in order to solve the problem.

RaeAnn: I try to confront it in some way, usually rudely, you know, screaming at myself. I was in therapy for several years about 10 years ago. In my early thirties I decided I either had to start life over or give it up (she laughed). In therapy I started working with just skills for everyday living it seemed like (she laughed again as she said "skills for everyday living"). Just learning to give myself self-care, to be less hard on myself, and to be more protected. I was also real prone to depressions, really bad (laughter). I had an excellent therapist who really taught me to understand myself better and to know what causes my depressions and to anticipate them.

Jayne: Now at that point were you also working on stuff around the incest or had that not come up yet?

RaeAnn: I couldn't deal with that yet. I would get emotional reactions like one time I couldn't breathe (laughter). One time my therapist asked me a question and I couldn't remember the question long enough to answer it. I started to panic. I wasn't ready for

that yet (Interview transcript, 5/11/89).

RaeAnn began therapy again after her father died. She said that she did not have a very good therapist at that time so it did not last long. She decided to go back to therapy one more time to work on the incest. She realized that she was a very angry woman who harbored tremendous rage at men. Initially she thought herself to be indifferent toward men, but she realized more and more that she was angry at them all the time.

I asked RaeAnn about the primary issues she needed to address in her healing. In addition to anger and rage, another important issue for her has been her self-concept. At many points in her life, she has not felt good about herself and that has stunted growth in many aspects of her life. She spoke more about the effects of those combined issues including self-esteem.

I'm probably not very social because of it too [lack of self-esteem]. I think I'm angry. I think there's a part of me that is angry in general, not just because of the incest, but I grew up in a big family and felt that I never had any control over my life. So other people in a lot of cases represent losing some kind of control in my life (Interview transcript, 5/11/89).

Lin. Lin was 25 years old. She had been victimized by sexual abuse as a child by an older brother. She grew up in a large family composed of several combinations of full, half, and stepbrothers and sisters. Lin reported that the abuse started before the age of 10, although she was not sure exactly how much earlier. She also reported

that her father may have been a perpetrator in addition to her older brother. The abuse ended by the time Lin reached the age of 11.

Lin was one of the few people who enrolled in the class primarily because she wanted to learn self-defense. For most, the group seemed most important with the self-defense being secondary. She had previously been part of a survivors' support group and now was ready for a different kind of group experience. Another of her primary expectations centered around wanting to gain more self-confidence and to feel that she had more control in her life. She felt that by increasing control, she would also increase confidence.

Lin defined healing knowing the reasoning behind the pain and how to deal with it. Along Lin's journey toward healing, she had first gone into an incest survivors' support group. She explained that the group raised many personal issues that she was unable to deal with in that setting. Thus, she decided to pursue individual therapy. Her therapist suggested that she consider this self-defense class as a different kind of group experience. She was seeing her therapist in conjunction with the self-defense class.

Lin had several issues that needed to be worked through in her healing process. The first she discussed was the tendency to sexualize relationships whether or not it was appropriate. She described the issue in this way:

It's like having a friend who will nurture me but

taking the nurturing and sexualizing it because that was the pattern that happened to me when I was a child. It wasn't nurturing, it was sexual, but I mixed those two things up and I'm still working really hard on that (Interview transcript, 4/27/89).

She also discussed anger as a primary issue for her. Lin said she is finally able to vocalize her anger. Earlier she got angry but "would stomp around, throw things, and not say why I was angry. It always felt bigger than it really was" (Interview transcript, 4/27/89).

Although Lin reported anger and sexualizing relationships as her primary healing issues, two other sources of data indicated one other issue. With Lin's permission, I was able to talk with her therapist who reported that Lin had difficulty accessing her feelings--a primary reason for originally coming into therapy. Lin had also filled out the personal information questionnaire during her screening. Lin wrote of her inability to access her feelings. She wrote:

Weaknesses: Feel vulnerable and small when getting in touch with some heavy feelings - even outside of the groups or therapy (Personal Information Questionnaire).

Kari. Kari was 28 years old. She had been victimized by sexual abuse as a child. Her perpetrators were two older brothers. The abuse started prior to the age of five with each brother. One brother abused her until she was eight years old. The other abused her until he left home at the age of eighteen and Kari was sixteen. One more incident occurred when Kari was 19 years old.

Kari had always wanted to take a self-defense class. She knew of other incest survivors who had very difficult times in regular classes and when she heard about this one with the added support group component, she thought it might feel safe enough to give it a try. Kari added that she wanted to feel better about herself, better about being in her body, and better able to protect herself.

The expectations that Kari had concerning the class focused primarily on the self-defense and physical component of the class. She explained that she wanted to take a realistic look at this whole process of self-defense, realizing that she was not going to be a karate expert, but learning how she could use her body in self-protection.

Kari had used "splitting" as a coping mechanism in dealing with the sexual abuse. She often experienced the sensation of leaving her body during the abuse as a means of surviving. However, now as an adult, she continued using the same coping mechanism in difficult situations. She had few opportunities to specifically focus on her body. Therapy was a lot of "head stuff," as she put it. Thus, she hoped this class would provide her with an opportunity to get back in touch with her body and feel comfortable in it.

In defining healing, Kari reported that her definition had changed throughout her healing process. At the beginning of that process, she thought that healing was something you did once. Now she had come to understand that healing is something ongoing in her life. The process might be very

different at different times.

It's like facing up to things. Admitting that things actually happened to me and looking at them and at different levels. One level might be having a memory and just letting it be, not trying to bury or do anything with it. Then maybe further down the line I get a memory that is more of a feeling kind of thing instead of being real visual, its harder to explain, I just kind of have this feeling. Alot of it [healing] is just kind of walking through it. It's something I do alone sometimes, sometimes I have to have help with it.... As time goes on its not so painful.... I can think of it but its not going to blow me away (Interview transcript, 5/2/89).

Kari identified feeling good about being in her body as one of her primary healing issues. Another major issue included facing her parents and determining where they were during the abuse. She has confronted each of her parents. Her father blamed her for the incest, her mother was more supportive. Thus, Kari made the decision to move out of her parents home in order to deal with her feelings, particularly anger.

Gerrie. Gerrie was 47 years old. She had been raped at the age of 21, but had blocked all memory of the incident for 25 years. She had been held captive by two men for approximately six hours and during that time, was raped repeatedly. Twenty six years ago, a young man whom she had been dating, picked her up and told her that they were picking up another friend as well. The two men started drinking heavily and the three drove out to the country. The driver pulled the car over, the two men pinned Gerrie down in the back seat and then took turns raping her. The

incident ended when the men finally passed out from the alcohol. For 25 years, that night was totally blocked from her memory. It was during another very stressful time in her life that she began having a series of nightmares. Slowly and painfully the memories have come back. Gerrie was working with a therapist who was helping her to make sense of her memories and the impact they were having on her life.

In addition to being raped as an adult, Gerrie grew up in a very dysfunctional home. She had been given up by her mother at the age of three weeks because her mother did not want the responsibility of children anymore (Gerrie also had two older brothers). The people who finally adopted her actually wanted to adopt one of her brothers. The orphanage made them adopt her and told the adoptive parents, "keep her for a year, and if it goes well, then you can adopt her brother too." Thus, from Gerrie's perspective, they really wanted a son, but in order to get him, they had to take her. Her childhood memories seem to indicate the same perspective. She reported that her brother got everything he wanted and she got nothing. She received very little love or support as a child. While Gerrie never said whether she had been sexually abused as a child, it was clear throughout the class that she identified with the other women who were survivors of childhood sexual abuse. Many of the issues that she struggled with in her own healing were the same issues that survivors of sexual abuse must deal with in

theirs.

She reported on her personal information questionnaire that she had trouble expressing her feelings to important people in her life. She wrote, "I can never tell important persons in my life how I really feel. We never talk about important things." She also reported that she cannot maintain relationships. Clearly, being able to get in touch with her feelings and being able to deal with them was a major issue for Gerrie. She wrote, "I have just recently felt anger for the first time in my life and it leaves me feeling a terrible weakness, an out-of-control feeling" (Personal information questionnaire). While not reporting this as an issue per se, Gerry told me that she is a caretaker. She is more than willing to invest time in those who need her, but gives herself no time at all. She recognized that as a problem for her but did not necessarily indicate a strong desire to make changes.

Gerrie had taken the pilot survivors' self-defense class and was repeating the focal class. She was an individual who had a terrible experience in the pilot class. She reported that she never felt safe in that class even after the turbulence of the first three weeks had subsided; for her the damage was done. For that reason, I was very surprised that she chose to take the class over. However, when she said that she was considering taking the class again, she was assured that the class would be more structured and that potential participants would be screened much more

carefully. Therefore, she decided to try it again. Her original goals were to feel safe again in public. Prior to her memories of the rape, she had functioned fairly well around men and in public settings. However, after the memories resurfaced, she reported having trouble confronting men, making eye contact, and simply being around them. She said that the differences between the old Gerrie who did not remember and the new Gerrie who did, "blew her mind." As she described, "I would just like to somehow find that old self and know what I know now and still be that confident as I was then" (Interview transcript, 9/9/88). In addition to wanting to feel safer, Gerrie reported that one of her weaknesses was an inability to say "no" to anyone. She had literally never been able to yell "no" in the pilot class. On the first night of the focal class she told the group that one of her goals this time was to learn to yell "no."

Cheryl. Cheryl was 25 years old. She had been sexually abused by her father as a young child. The abuse started at approximately the age of three and continued until she was 6 or 7 years old. She reported that it also resumed for approximately 6 months when she was 13 years old.

Cheryl described herself as very independent and somewhat aloof. She considered her independence as both a strength and a weakness because she also felt very disconnected emotionally, which in turn contributed to her independence from other people.

In response to my question about why she took the class, Cheryl explained that she thought it might be a good place to vent some of her rage. She also said that she had intended to take a self-defense class for a long time and this seemed like as good a time to take one as any other.

Cheryl viewed healing as giving back to herself some of the things that had been taken away from her because of the incest. She felt that much of her trust in people and the world in general had been damaged. She also thought that part of her core self had been taken away.

I don't know how to explain it, but because of what happened to me I think its going to be harder for me to be the person that I was meant to be and I have to work harder to get myself to where I think people should be (Interview transcript, 5/2/89).

In addition to taking this class, Cheryl was seeing a therapist and was working on healing in a variety of ways. She tried to be good to herself and to other people and she tried to do things for herself that were not done for her as a child.

Cheryl saw anger as a primary issue that she needed to work through as she moved toward greater healing. In describing other issues, Cheryl discussed feelings of helplessness and powerlessness that she experienced as a child. She found comfort now in knowing that she did not have to feel as much that way.

Margaret. Margaret was 44 years old. She had been sexually abused between the ages of 11-16 by an older

brother. During the early years, her brother and some of his friends grabbed her and felt her breasts. During the later years, he came into her bedroom at night and the abuse was more extensive. Margaret was married for 20 years. The relationship was very abusive and her husband was very demanding sexually to the point of abuse.

When asked why she took the class in the first place, Margaret told me that her therapist and survivors group leader both suggested that she take it. Her expectations were vague coming into the class, however, she had taken a karate class about 5 or 6 years ago that did include some self-defense so she thought she might have a clue about that part of the class. On her personal information questionnaire, Margaret wrote that she would "like to get in touch with my feelings, understand other people's feelings better, be more comfortable socially, get some relief from physical pain that I have which is associated with the memories of my abuse, get some relief from my arthritis, and learn to protect myself" (Personal Information Questionnaire).

Margaret defined healing as not having the secret anymore and being able to tell people, to feel comfortable about the abuse, and to be able to tell herself that this is a part of her life--that it did happen. She also thought healing had to do with feeling stronger and better able to protect herself if anything ever happened to her again.

Margaret told me that she saw having more access to her own feelings as a primary issue that she needed to work on

in terms of her own healing process. In addition, she also identified the need of having more confidence in her own perceptions as an issue of healing. She had this to say about trusting her own perceptions:

I didn't take things in, I didn't want to know because I didn't like what I would have known. So I've noticed all through my life without ever understanding why before that it was difficult for me to draw conclusions from situations, to trust my own perceptions about things. Other people could be in the same situation and they could have conclusions and perceptions and be so clear about it and I would just be sort of amazed and wonder how they did that (Interview transcript, 5/9/89).

Finally, Margaret discussed an issue that was also common to several other students. Possibly because of the incest, but maybe for other reasons, too, she had made choices in her life that left very little room for herself. For ten years in her marriage, she was the full-time bread winner and full-time parent. Now she was feeling the need to nurture herself more. Previously, there was never time for herself.

Becky. Becky was 44 years old. She had been sexually abused by several members of her family. Through her efforts in therapy, she had come to realize that the abuse started very early, at about six months of age. She was abused by her father, an uncle, a sister, her grandmother, and during her teens by a brother-in-law who had been appointed as her legal guardian. Throughout the class she referred to her father as the primary sexual abuser but to her mother as the person who abused her physically and emo-

tionally. The abuse by her parents continued until she was 11 or 12 years old. At one point, she told her mother about the sexual abuse from her father. Her mother responded by beating her and making Becky apologize to her father for lying. "Later my uncle and father mutilated a kitten in front of me to warn me against ever trying to tell again" (Personal information questionnaire).

I asked Becky why she decided to take the survivors' class. She had taken a karate class several years ago but at the time it seemed too overwhelming. Yet, she also knew that she wanted to be more integrated with her body than she had been. Becky explained that this class seemed like a safe way to get back to karate and self-defense and still be able to process the incest.

Her expectations prior to the class focused on goals that she set for herself. In the interview she was very explicit about her goals. Becky wanted to feel more confident in her body, to feel more confident in yelling, she wanted to work toward getting back into karate and thought this would be a means of doing.

I asked Becky to define healing for herself. As I asked the question, she had already thought of an answer.

Jayne: What does healing mean for Becky?

Becky: Well, when you said that, one word came to mind and that's wholeness. It's being integrated. And it's being able to not have parts of me blocked off and to be able to pull those parts of me, pull the energy from those parts of me when I need to in an appropriate manner (Interview transcript, 6/8/89).

Becky added that healing also meant being healthy. She used

to think that healing meant being normal but then decided that most "normal" people were not healthy so she changed that definition.

Becky had worked on her healing in many ways. She had taken assertiveness training, she had tried yoga, Thi Chi, and dance. She realized that the movement and body work sparked emotions that she did not know how to handle. Therefore, she backed away from movement practices altogether. Becky has worked in traditional therapy as well as ISA. She told group members throughout the class about her involvement in ISA.

Becky described a number of issues that she was struggling with in terms of her own healing. She wrote in her personal information questionnaire that she still had a tendency to accept the blame for things that went wrong, especially in close relationships. Additionally, she wrote that while she had made progress in accessing her feelings, she still had a long way to go in that area, particularly in expressing them. She described herself as a perfectionist. Even if she did nine things right and only one thing wrong, rather than focusing on what she had done right, she would only think about what she had done wrong.

Summary. This section of the chapter introduced the eight women who were students in the focal survivors' class. Each of the students were introduced in terms of their experiences with sexual assault, their expectations

coming into the class, their ideas about healing, and the primary issues they felt were pertinent to their healing process. The introduction was intended to provide a picture of who each of these women were, but maybe more importantly, allow the reader a better sense of the healing process. Each of the women identified important aspects of the healing process unique to themselves. However, when those aspects are examined more carefully, we realize that many can be generalized to sexual assault survivors as a population.

Seven of eight women in the focal class were survivors of childhood sexual abuse. Additionally, the majority of those women had been sexually abused by older brothers. Several of the women had multiple perpetrators and in all of the cases of childhood sexual abuse, the perpetrators were family members. This finding was consistent with other studies that suggest that the most common form of childhood sexual abuse involves family members as compared to acquaintances or particularly strangers (Rush, 1980; Russell, 1986). Even Gerrie, who had experienced rape as an adult, experienced family dynamics as a child that were similar to class members who had experienced sexual abuse.

A number of healing issues were identified by the class members that can be summarized at this point for the reader. Those issues were also closely related to definitions of healing and the goals/expectations expressed for the class. For example, Jacquleen defined one aspect of healing as being

whole. A sense of wholeness was related to her expectations of the class in her desire to improve her self-esteem and sense of intrinsic worth. She also identified autonomy and regaining control in her life as key issues that were part of her healing process. Each of these can be related back to her definition of healing.

Several class members defined healing as self-acceptance. For some, self-acceptance meant accepting the fact that the sexual abuse happened and not allowing it to be a secret anymore. Others expressed self-acceptance as accepting themselves as they were right now, flaws and all. There seemed to be several issues related to self-acceptance. One issue raised by several class members focused on accepting their body and being more in touch with their own physicality. Another issue had to do with being unable to provide self-nurturance. Five of the eight women indicated that they seldom took time for themselves or did nice things for themselves. Both Jacqleen and Gerrie reported always putting others ahead of themselves. Cheryl, RaeAnn, and Margaret each expressed the inability to nurture themselves. Part of their healing process was learning to give more self-care.

Another important definition of healing centered around regaining what had been lost through the assaultive experiences. There were a number of characteristics that had been lost because of incest, battering, or rape. Five of the eight women reported that they did not have access to

their feelings in the ways they thought they should. Several said that they entered formal therapy primarily to regain the feelings that had been lost. Others felt they needed to reestablish a sense of self-esteem. RaeAnn believed her lack of self-esteem was behind her social isolation, whereas Cheryl attributed her isolation from others as resulting from her own isolation from her emotions and feelings.

Other issues were also related to regaining what had been lost. Those included regaining a sense of control in one's life, regaining confidence/assertiveness, and feeling more powerful. Each of those issues seemed part of a larger issue having to do with empowerment and the ability to rely on oneself. Another characteristic that had been lost was a sense of integration with one's own body. Kari and Becky, in particular, wanted to be more in touch with their bodies, and Kari felt the need to learn to "stay in her body" as compared to "leaving" when things felt scary or uncomfortable around her.

Fear, feeling safe around other people, and the ability to trust others were mentioned by several of the class members as issues that they needed to work on in their healing process. Margaret went further with the issue of trust by indicating that she needed to learn to trust herself and her own perceptions. The perception of self-blame/guilt was mentioned by Becky. Not only did she, like many survivors, blame herself for what had happened to her

as a child, but she continued blaming herself for many situations as an adult.

Almost all of the participants discussed anger/rage as an issue in their own healing process. Some indicated that anger left them feeling out of control. Others expressed fear of their anger. Some simply did not know what to do with it or how to direct it in an appropriate manner. Only one person talked about the tendency to sexualize all relationships as an issue that she needed to address. Additionally, in the context of this introduction, only Kari discussed dealing with her family as an important issue. However, family difficulties were expressed by almost all class members during the focal class.

The primary issues of healing that class members raised will be discussed in greater detail in the next section of this chapter. In addition, I will also examine how the focal class addressed those issues of healing. Finally, the section will also examine student responses to the class as a means of assessing the class' value in their own healing process.

The Healing Issues that Survivors of Sexual Assault Face and Ways the Class Addressed Them

The last section introduced the reader to the class members and identified the primary issues that those eight women thought were central to their own healing process. However, as noted earlier, the class was developed prior to

these women voicing their own healing concerns. The literature points to certain issues that most survivors must work through as they move toward greater healing. It was on the basis of professional expertise in the areas of sexual assault prevention and healing that the teaching team put the course together in the way they did. However, while survivors can be grouped together in a number of ways, each woman's experience of sexual assault is uniquely her own and thus will require that she work through her own combination of issues related to her experiences. Therefore, in putting the class together, we wanted to address the majority of issues that survivors face, yet make allowances for individual differences. This study allows for an examination of how well we addressed the issues of this particular group of eight as well as provide insight into how well these issues can be generalized to other survivors of sexual assault.

This section of the chapter examines the issues of healing raised by the class members in more detail. The issues as well as how the class addressed them will be tied back to the literature to provide evidence of generalizability to survivors of sexual assault as a population. An ongoing theme will be presented throughout the rest of the chapter.

The theme can be stated as follows: Traditional therapy and therapy groups address the same issues of sexual assault. However, because of the physical component of this class that included self-defense training as a means of

empowerment, this class was uniquely different in its approach.

While we used many of the same kinds of activities used in traditional therapy groups such as discussion, sharing of feelings, and writing exercises, this class included the use of specific self-defense training, other forms of physical activity, and rituals as unique means of addressing healing. Additionally, each of the activities that were used in the group portion of the class were related back to the self-defense training and vice versa whenever possible. The remainder of this section examines the issues of healing in detail.

Alienation from the Body as a Coping Mechanism

A fairly common means of coping with sexual assault, particularly for children who are the victims of sexual abuse, involves acute alienation from the body in the form of dissociation (Bass and Davis, 1988; Maltz & Holman, 1987). The authors of Courage to Heal write the following about the body and its relationship to victimization:

Children learn about the world through their bodies. When you were sexually abused, you learned that the world was not a safe place. You experienced pain, betrayal, and conflicting sensations of arousal. Children often learn to leave their bodies to avoid these feelings--or they numb themselves as best they can (p. 37).

There are a number of dissociation coping strategies that survivors use to block out the pain of assault. "Splitting" is the term used by Bass & Davis (1988) to describe the

mind/body split that would allow a survivor to believe that she is somewhere else rather than in the body that is experiencing the abuse. Many survivors learned to consciously bring about a numbing of different body parts as a means of withstanding extreme pain and violence (Maltz & Homan, 1987). Still others created different kinds of pains so as to forget the pain that was part of the assault. Biting the lip and holding the breath are examples that different women have used (Maltz & Holman, 1987).

The process of dissociation or splitting can become so deeply ingrained that survivors may still unconsciously resort to the same coping mechanism in later situations that seem somewhat risky or scary. Taken to an extreme, splitting may lead to multiple personality problems (Maltz & Holman, 1987).

Even when survivors no longer resort to such extreme measures of coping, many report a lack of integration between mind and body. The body experienced the assault, the mind wants no part of it. Some of the questions that women are encouraged to consider as they learn more about the healing process are the following:

- Are you aware of the messages your body gives you (hunger, fear, tiredness, pain)? Do you respond to them?
- Do you have a hard time loving and accepting your body? Do you feel at home in it?
- Do you enjoy using your body in activities such as dance, sports, or hiking?
- Do you have any physical illnesses that you think might

be connected to your abuse?

(Bass & Davis, 1988, p. 36)

Several of the women who were part of our focal class struggled over issues pertaining to their bodies. All of the students were asked to complete a personal information questionnaire prior to the beginning of the focal class. Kari wrote the following: "I'd like to have a better sense of feeling comfortable with myself in my body." Margaret wrote the following as part of her questionnaire goals: "I would like to get some relief from physical pain I have now which is associated with memories of abuse, get some relief from arthritis." Becky listed seven different goals that she had for herself pertaining to the class. Listed first was her desire to "become more centered and comfortable in her body."

As course developers, we felt that issues dealing with the body needed to be addressed before any others since this class was physical in nature and very explicitly so. Our first theme was called body awareness and boundaries. Even before any physical self-defense strategies were taught, we incorporated activities that would increase an awareness of the body and its connection to the rest of the being. One such activity was meditation and it was used to begin each session. It was intended as a means of preparing the body, mind, and spirit for the activities to follow.

Beyond the benefits of feeling more centered and focused, I also explained to the students that deep breathing

was an important means of controlling anxiety in potentially dangerous situations. Anxiety resulted from an inability to control the breath. If we could learn to control the rate of breathing, even in situations that made us feel uncomfortable, we could control our level of anxiety. That ability, in turn, reduced the likelihood of a panic response in an assaultive situation.

Each session also included a stretch warm-up and strength-building exercises. Those activities were included for two reasons. First, and perhaps quite obviously, stretching and strength building brought women in touch with their bodies. During the first session when our theme for the evening was on boundaries and body awareness, the stretch routine was intentionally drawn out in length. The women were encouraged to feel the stretch sensations. As we moved into each new stretch, I asked them where they felt the stretch and what kind of a sensation it was that they felt.

Each session also included a strength-building routine. We worked on upper body, abdominal, and leg strength through push-ups, sit-ups, leg lifts, etc. As we moved through the 12 weeks, some of the students reported that they felt much stronger and fit than they had prior to the class. Fitness and strength are not necessarily prerequisites to being able to successfully defend oneself. However, participation in sport and/or physical activity has long been recognized as a potentially empowering experience for participants. Through

such activities, participants are provided with opportunities to experience physical strength and competence. Women, in particular, stand to benefit from those opportunities given that many women have never been encouraged to develop those kinds of attributes (Theberge, 1987). Thus, the development of physical strength has the potential to contribute to feelings of personal power and physical competence. Those attributions may have direct bearing on a woman's feelings of confidence in herself and her ability to deter assault.

Besides the strength building and flexibility exercises, we did several exercises designed to bring the students more in touch with their bodies and boundaries during the self-defense training and support group. Self-defense skills that evening focused on protecting the two-arms length distance or what was referred to as the critical distance of safety. The primary skill taught that evening was the evasive side step (see Appendix D for a detailed description). The skill was intended to keep a safe distance between the defender and attacker. As students practiced the skill, they also practiced an awareness of the critical distance of safety. That distance can be defined as a boundary in self-defense.

An exercise done during the support group to practice sensing boundaries was called "the sun and the moon." The following vignette provides a detailed description of the body awareness and boundary drill called the sun and the

moon. The vignette indicates the extent to which physical activity was part of the support group as well as self-defense. The activity provided students with opportunities to practice boundary recognition, voice that recognition (which may be very difficult for many survivors), and practice more intuitive boundary recognition skills.

"The sun and the moon"

Prior to doing the "sun and the moon" we had just done a milling exercise where people walked around the room in no particular direction. They cut in and cut out of each other as they worked on being aware of the six cardinal directions, other people, and confident walking. Once that drill had finished, I explained that we were going to build on that heightened awareness in a slightly different way. Jen and I demonstrated the drill as I explained how it worked. One partner, "the earth", circled around the other partner, "the sun" at approximately a two-arms-length distance. While circling around her partner, occasionally the earth was instructed to come closer to her partner than the two-arms-length distance. Each time the sun thought the earth had come closer than the two arm length distance, she was instructed to say "now" very assertively. If the sun did not realize that the earth had gotten within the two arm length distance and actually got close enough to touch her partner, she was instructed to touch her lightly on the shoulder.

Students paired up after watching Jen and I demonstrate the drill and they began trying it for themselves. Each pair did very well. No one was touched by her partner. I asked each of the earths to speed up a bit and again, people did real well. After each person had tried the drill, I asked them to try a slightly different variation. This time the sun stood in place with her eyes closed. The earth quietly approached her partner from any direction she chose. The partner with her eyes closed tried to listen and intuitively sense her approaching partner. When she thought that she knew her partner was moving toward her, she was instructed to point in the direction that she thought her partner was moving from and say "now." As expected, this drill proved to be a bit more difficult. Everyone tried it and some were touched on the shoulder more frequently than others. Gerrie was touched by her partner fairly often and each time her

partner touched her shoulder, she jumped a little bit (Fieldnotes, 1/9/89).

The vignette indicated ways the class attempted to deal with issues related to boundaries and body awareness. In this case, awareness focused more on another's body than on one's own. The drill was done in stages that provided greater and greater challenge. Students had the opportunity to voice their awareness, which seemed particularly important. Earlier during the same session, several students indicated that they had trouble yelling during the self-defense instruction. This seemed a less intense way of using the voice while still maintaining a degree of assertiveness.

Body awareness and boundary issues were dealt with in an ongoing manner throughout the 12 weeks. Each new physical skill that was introduced in self-defense increased the awareness that class members had of their bodies and their capabilities. Additionally, during the self-defense instruction, when skills were practiced in more realistic ways, some students' primary goal was to not dissociate. Following the self-defense instruction during one class session, the following conversation occurred during the processing time:

Jen, the assistant instructor, said that she noticed that people appeared much more comfortable and powerful this week. She added that voices also seemed stronger. Kari said that she didn't feel so powerful. 'I was just trying to be present because it is so easy for me to leave. I just tried to stay in my body and remember what I was doing. That did feel more powerful but I'm still shaking inside or else it feels like people are laughing at me, but no one did. It's real different to think about being offensive instead of

just defensive, I mean, I know this is defensive, but I'm doing something offensive back.' Sue responded to Kari by saying that what she [Kari] had done was real important. 'In any drill we will do whatever we need to do. You needed to work on just being present and not leaving your body and working on correct technique or power wasn't so important for you' (Fieldnotes, 1/9/89).

Thus, different students had different goals during any one exercise. Some were working to perfect their techniques, some worked to simply stay fully in the activity and remain in their bodies.

Interestingly, the room where the class took place had large wall mirrors. I thought nothing of that until after the class was completed and I was conducting interviews with class participants. Several students discussed the mirrors and one student talked about them in direct relationship to her sense of body awareness and how the class contributed to her issues around splitting.

Kari: It's [splitting] what got me through being molested, that ability to just kind of be gone, that kind of thing.

Jayne: Did the class have any contribution there? Did it help in any way?

Kari: Yeh, in terms of focusing on what your body was doing and that you had a mirror right across from you showed you this is your body and this is what it's doing, you know. It was nice that everyone was not this Farrah Fawcet and stuff like that. Everyone was just dressed in whatever and no one was Joe Pro at it. That helped me accept being in my body and feeling ok. I know I worked on it in the self-defense class in terms of.. like one class I came and I went through the whole exercise in the beginning but I really wasn't there and it was really good because Sue keyed in on it and I didn't even catch it. I don't remember exactly what she said but I was thinking 'wow, I got through that really pretty good, you know, I didn't get upset or anything and she just said something that made me realize that I just head tripped on it, I mean I was just a machine and I could do that fine. But I wasn't there to do that, I was there to do it [the self-

defense] and go through it so the next week when I came in I tried to be as present as I could (Interview transcript, 5/2/89).

The above quote from Kari indicated that splitting and not being fully present in her body was a problem for her. She said that splitting was what had gotten her through being molested but now it was something that was interfering with her life. She mentioned several ways in which the class seemed to help her be more fully present in her body. One aspect that seemed important to her was that everyone in the class was just an ordinary person like herself, thus contributing to a sense of comfort. A second aspect was the presence of the mirrors. They forced her to deal with her body as it was. Finally, she expressed appreciation for Sue's ability to recognize her splitting and bringing it to Kari's attention.

Another student talked about the issue of better understanding where body boundaries were. After asking her if the self-defense class had contributed to her own healing issues, she responded that yes, the class had done so in some very concrete ways. She immediately provided an example around boundaries and being able to recognize those boundaries.

When another adult gets too close, I can step away. Especially in that familiar situation, like in crowds it's very difficult, but in familiar situations where people are standing too close I can go through my head and you know, is this uncomfortable for me in this particular situation? and is this person uncomfortable for me at this distance? and how can I step back from that? (Interview transcript, 5/16/89).

In order to set appropriate boundaries, women need to be fairly sure of their perceptions and confident of themselves. Fear can interfere with feelings of confidence and the ability to recognize and set boundaries. In the next section, feelings of fear are discussed in greater detail.

Dealing with Feelings of Fear

Fear is a very common and understandable response to sexual assault, no matter what form the assault takes. In this portion of the chapter, I deal with the issue of fear and discuss its impact on survivors of rape and incest.

Many women who are raped report feelings of fear that seem to be overwhelming. Following her rape, Judy Katz (1984) wrote the following:

Although my new home was fortified with a multitude of locks, I rarely felt safe. I feared walking from my car to the well-lit front porch. I would imagine someone in the bushes would attack me before I could safely enter my home. Once inside, I immediately locked the front door. Still not feeling safe or secure, I then went on a ritualized room-to-room search. I put the lights on in every room, opened each and every closet, and checked all the windows to insure that they were securely fastened. I checked behind the shower curtain to verify that there were no intruders (p. 25).

According to Ledray (1986), the most common fear among rape victims is the fear of death. In research conducted in Minnesota, well over half of the survivors of rape that Ledray (1986) worked with did not expect to survive the rape experience itself. She also indicated that many rape survivors fear seeing the rapist again. Additionally, many rape

survivors are likely to be afraid of situations that remind them of the rape or rapist (Ledray, 1986). Ledray (1986) explained those fears as resulting from having lost a sense of inner security.

Survivors of sexual abuse also experience similar kinds of fear in response to their victimization. Four of the eight women who were part of the focal class reported on their "feelings inventory survey" that they experienced fear and anxiety over half the time when they thought about the incest. Three of the women also reported feeling anxious and frightened over half the time when they were alone.

Memories and flashbacks often trigger fear because they seem so real. According to Bass and Davis (1988), "forgetting is one of the most common and effective ways children deal with sexual abuse" (p. 42). The authors reported that many children are capable of forgetting abuse even as it is happening (Bass and Davis, 1988). As a result of this coping mechanism, many adult survivors of sexual abuse are unaware that abuse even happened to them.

Remembering is often the first step toward healing. Several of the survivors of sexual abuse who were part of the survivors' class were still trying to remember much of their abuse. One of our great planning concerns was the possibility that various self-defense skills could trigger memories if practicing those skills resembled ways that abuse occurred. While retrieving memories is an important part of the healing process, it can also be terrifying to

the survivor. We wanted to be sure that we built in ways to deal with those memories should they occur so that class members could feel safe. The teaching team agreed that "time-outs" from self-defense instruction might be necessary for individuals experiencing terrifying memories. Sue and Jen roamed during self-defense drills to watch for individuals who appeared to be having difficulty.

The following vignette presents an example of a memory flashback that one of the class participants experienced during a self-defense drill. The class member's responses indicate the fear experienced resulting from her flashbacks. Not coincidentally, I was her partner during this drill. Occasionally, Jen, Sue, or myself would step in as partners when there were uneven numbers of people in class or when students wanted to increase a sense of reality. We wanted students to be challenged by increasing reality but we also felt they needed to decide for themselves what level of reality felt challenging, yet safe.

In this vignette, I stepped in as Becky's partner. However, I did so without asking her permission. There was an even number of people in class so members of the teaching team were simply roaming and giving feedback. I had given students the option of having one of us (Jen, Sue, or myself) step in as a partner to increase a feeling of reality but no one had taken us up on the offer. Becky's partner was RaeAnn. She stepped out of the drill for a moment in order to get a drink. We were at the point where the pace was

fast and the attackers were grabbing hard and yelling to increase a sense of reality. Inappropriately, I simply moved in front of Becky to be her partner when I realized that RaeAnn was stepping out. At the time, I simply wanted to provide Becky with opportunities to continue practicing rather than having to stop because RaeAnn was taking a break. However, my decision violated the norm that had been established in the class. Normally students took responsibility for making choices that would challenge yet ensure their own sense of safety. By simply stepping in as a partner, I made the choice for Becky.

Memories of Mom

As soon as I moved in front of Becky, I could see the look of fear on her face. She even seemed to physically shrink back a bit. Just as quickly, I realized that I had made a mistake. I asked her if this (my being her partner) felt okay to her. While she could have said "no" at that point, I had made that choice difficult because I was already there. To now say "no" would have drawn attention from others which was something that may have bothered her. I felt bad.

In response to my question, Becky replied that she didn't know if she felt ok, but she would try it once to find out. I was very careful not to grab too hard or to yell too loud, although I did yell and grab firmly as my hands reached for her throat. We were practicing responding to a secured front choke hold, a grab that already seemed very scary to some. Becky seemed even more afraid when I became her partner.

The first time I grabbed her, she responded very well. However, she couldn't make eye contact with me, and I thought she was actually shaking. I immediately praised her for doing a good job in dealing with the grab, "Becky, that was excellent. Your voice was powerful, your techniques were great. Do you want to try it again?" Without making eye contact, she nodded and said, "yes, I'll try it again." We worked together several more times. Each time I grabbed a little bit harder and yelled a little bit louder. Becky continued to respond with speed, power, and commitment.

Later that same evening, after we had finished

with the self-defense and had moved into the group portion of the class, students were sharing how the self-defense felt to them that night. Becky remained conspicuously quiet. Normally, she often shared with the rest of the group. After most of the other students had spoken, she finally talked. "I didn't think I was going to be able to work with Jayne because she reminded me so much of my mother. My mom had similar glasses and hair about your (she looked toward me) same color. Your faces also have a real similar shape." Becky also told the group that she was phobic about having her neck touched by anyone because she had often been grabbed around the neck as a child. However, she also added that what had been most important was that she was able to work with me and she didn't feel guilty at all about responding, even if that would have meant hurting me in reality had the attack been real. She then added that she almost felt guilty for not feeling guilty (Fieldnotes, 1/30/88).

The vignette illustrated several important points about fear and Becky's responses to it. First, this vignette provided a discrepant case concerning the norm that students should make choices about degree of challenge. As a result of insensitivity, Becky was put in a position that seemed less safe to her than she would have chosen for herself. While she still had the opportunity before we started to back out of the situation, I made that rather difficult. The connection between feeling safe and fear was rather clear. Because Becky did not feel safe, her level of fear increased.

Becky felt unsafe because of my similarity to her mother and the nature of the grab itself. Because I reminded Becky of her mother and because I was grabbing toward her throat, she was feeling the fear she experienced as a child when her mother grabbed her in a similar manner.

This situation ended in a very positive manner. Becky

was able to overcome her fear and work with me very successfully. She reported to the group how important that was for her. I suspect that she would not have made the choice to work with me as a partner on her own. However, because I made that choice for her, she experienced success and hopefully empowerment. However, as a general rule, students should make those kinds of choices, not instructors. Had Becky felt overcome with fear rather than experiencing empowerment, the experience could have been devastating. That kind of scenario could have impacted Becky's sense of safety about me and the class for a long time, which would have been very unfortunate.

Fear was a healing issue that became a theme for the second session. While the theme of fear did not seem altogether unsuccessful, it was not entirely successful either. Our goal as a teaching team was to bring people closer to their own feelings of fear. Once people understand what those feelings are, they are in a better position to do something with them in order not to be incapacitated by them. However, some people that evening never got in touch with their own feelings of fear. Perhaps they were not ready to face those feelings yet. Healing does not happen along a well-structured schedule.

We used several methods to bring class members more in touch with feelings of fear. I first asked the class members to think of something that made them feel afraid. I asked them to visualize that situation for a few minutes.

As they sat quietly, I stayed silent. Following those few minutes, we talked about the places in our bodies where we "store" or feel fear. I began that conversation by telling them where I stored fear to give them a better sense of what I was asking them to describe. I explained that I often felt fear in my face. I could feel my face get tight and I could feel my teeth clench. I added that I also felt fear in my legs because sometimes, usually after the situation had ended, my legs would have that "jello" feeling. Several others named areas of the body where they felt fear. Some mentioned the stomach, others pinpointed the side of the neck. One woman felt fear through extreme pain in her solar plexus.

The conversation about storing fear was followed by a meditation. The meditation asked them to focus on their breathing and it brought them through a sense of feeling grounded and secure. They envisioned breathing through the body part that held fear until the fear melted away. The meditation ended after they imagined a shield they could always visualize and bring back as a symbol of protection when they felt afraid. The meditation worked well for some of the students, but others reported having difficulty visualizing fear and/or the protective shield.

We also used other methods to bring students in touch with feelings of fear. Class members read a story about an assault attempt in which the author experienced a tremendous amount of fear. We asked to react to the story in a journal

by writing down their thoughts, how they would have felt as well as what they thought they might have done had they been in the situation themselves. Students shared their reactions during group.

Cheryl: I felt really angry about the woman's concern for the cab driver.

Kari: Well, I interpreted that as not wanting to give him the satisfaction of a response. I could really understand her choice.

Jacqie: Maybe she didn't want to set herself up again. How did she know she could trust getting into another cab? I mean, maybe the cabby had set something up with another cabby.

Cheryl: The story reminded me of walking to the bus stop as a kid on my way to school. I had to take a city bus into the downtown area to get to school every day and the story reminded me of things that occurred on that bus. I felt real angry about some of the things that happened when I had to take that bus. I felt real connected with the woman in the story (Fieldnotes, 1/16/89).

Sue realized there seemed to more feelings of anger being expressed at that point and told the group what she noticed. Class members nodded their heads, agreeing with Sue's observation. Here we were stuck. The group was expressing more feelings of anger but we had planned to deal with fear as our theme that evening. A long-term therapy group would probably have gone with the mood of the evening and continued dealing with the issue of anger. However, the teaching team had chosen to make this a support group with more structure than a traditional therapy group. What should we do? Go with the flow or go with the plan for the evening? We pursued the evening plan; however, those kinds of questions seemed important to us and became the focus of a later conversation as we continued to ponder the

role of the support group.

Sue concluded the evening by making a joke about the theme for the following week. She explained that next week's theme would focus on anger. Then she added, "Next, week, watch, we'll have people feeling very fearful about anger."

Fear is a very complex emotion that we are seldom encouraged to express. As a result, fear is often masked as other emotions, particularly anger (Sisk & Hoffman, 1987). Perhaps some of the class members were experiencing feelings of fear but expressing them felt too risky and instead, they expressed anger. It is also possible that some class members could not not access their feelings of fear.

Feeling emotions is very difficult for some survivors of sexual assault. The ability to block any sense of feeling is a very common coping mechanism during assault, particularly during the repeated sexual abuse of children (Bass & Davis, 1988; Maltz & Holman, 1987). As a result of learning to use that coping mechanism to survive as a child, many women have not learned how to remove it as adults. Thus, a lack of identifying with emotional feelings may become a hindrance in adulthood. Learning to feel again is an important part of the healing process. Many of the themes that we focused on during the focal class centered around emotions such as fear, anger, self-esteem, guilt, and shame. Even if some students were unable to relate to their feelings in the exact ways we hoped they would, perhaps the

themes each week nudged them along in learning to feel them at all.

Dealing With Feelings of Anger

Anger is perhaps one of the most important emotions for a survivor to experience (Bass & Davis, 1988). While feelings of fear, guilt, and shame are very common and important emotions for a survivor to feel and work through in her healing process, some survivors get stuck in those feelings and do not heal. Survivors who are only beginning to work toward healing may feel overwhelmed by fear, guilt, and shame. However, when survivors are able to begin feeling anger; when they are able to be angry at what happened to them; when they are able to feel angry because they recognize their own level of fear; when they are able to feel angry because of being weighed down by feelings of guilt or shame--then they have really begun the process of healing.

According to Bass and Davis (1988), anger is natural reaction to being abused or assaulted. However, few survivors feel as if they can express that emotion. Young children who express anger toward the abuser are often met with even more abuse. Even adult survivors who try to express anger may be met with resistance from the rest of society. The following is taken from The Courage to Heal (Bass & Davis, 1988):

Few women have wholeheartedly embraced anger as a positive healing force. Traditionally women have been taught to be nice, conciliatory, understanding, polite. Angry women are labeled man-haters, castrators,

bitches. Even in new-age psychotherapy circles, anger is usually seen as a stage to work through or something toxic to eliminate. And most religious or spiritual ideologies encourage us to forgive and love. As a result, many survivors have suppressed their anger, turning it inward (p. 122).

In the above quote, Bass and Davis (1988) make a very important point. Women have seldom been allowed to express their anger. However, anger does not go away just because it is repressed. Rather, it remains and becomes directed inward. Anger that turns inward is self-destructive. Anger directed inward can become depression and self-hatred.

There are several ways that internalized anger manifests itself. Bass and Davis (1988) continue:

You may have wanted to hurt or kill yourself. You may feel yourself to be essentially bad, criticize yourself unrelentingly, and devalue yourself. Or you might stuff your anger with food, drown it with alcohol, stifle it with drugs, make yourself ill.... Many survivors have also turned their anger against partners and lovers, friends, co-workers, and children, lashing out at those who (usually) mean no harm. You may find yourself pushing your child against the wall or punching your lover when you get mad (p. 123).

In the above quote, Bass and Davis (1988) provided examples of people who might be targets of anger turned outward. Each example represented an individual who the survivor likely trusts. In order to express anger toward someone else, one often has to trust that other person enough to know that expressing anger will be a safe thing to do.

Displaced anger found its way into the survivors' class. Interestingly, each time it happened, the recipient was either Sue or myself and not other students in the

class. Possibly on a conscious or subconscious level, the women who targeted us with their anger trusted us enough to do so. They must have realized that we would not lash back. While intellectually I understood where the anger was coming from and why, it was still difficult to experience someone else's anger directed at me. The following vignette provides the reader with an example of such anger. The incident occurred during the second to the last week of class. The theme that evening was self-esteem, which proved to be a very difficult theme for many of the class members. As part of the activities focusing on self-esteem, I taught the group a short self-defense form. A form in the martial arts is a choreographed series of moves that depicts an imaginary fight. I chose several of the self-defense skills that we had been working on throughout the class, put them together in a short five-move routine and taught the routine to the group.

Performing Forms

After the entire group had practiced the form many times, I asked folks to move into groups of three. Sue, Jen, and I each joined one of the groups. I explained to everyone that we were going to have the opportunity to perform the form for each other making use of positive affirmations that would reflect our spirit and sense of self-esteem. I demonstrated to the entire group what I meant. I proudly stood in front of the group, announced outloud "I am powerful!" in my most confident sounding voice, and proceeded to do the form. After I finished the demonstration, I asked each group to find their own space in the room and to do the same thing. Each group member should perform her form for the others with some affirmation announced at the outset. I asked the group members to "clap wildly" for each performance. I tried to be very upbeat because I could sense that the students were not enthusiastic.

Individuals moved very reluctantly toward other group members. Each group moved very reluctantly toward an unshared area of the room. No one expressed any enthusiasm in their facial expressions.

My group headed toward the far end of the room. I asked who wanted to go first. There were no volunteers. RaeAnn, Jackie, and I sort of sat down on the floor leaving Lin standing and apart from the rest of us. We looked expectantly at her and suddenly it dawned on her that we were expecting her to go first. She flopped down to the floor, rolled over on her back, and moaned "oh noooo..." She half grinned, got back up and said, "ok, I guess I will do this." Each group member did the form. One person forgot the last two moves. Another shrugged her shoulders as she said her affirmation very quietly. I interpreted that as embarrassment.

When all three groups had finished, we came back together. Prior to this activity, people had been talkative, but now participation of any sort was nonexistent. Sue asked folks how that activity seemed to them. There was silence. Sue had once told the other members of the teaching team that if silence seemed to be going on too long, to count silently to 20. If no one had broken the silence by then, it would be ok for one of us to do so. Thus far, during the 11 weeks of the class, that rule had worked every time. By the time I had ever counted to 20, a group member had already broken the silence. This time, however, I could have counted to 50. No one spoke. Sue finally did. I looked around the circle and noticed that some of the women had their heads down, others seemed to be looking at nothing at all even though their heads were up. Two of the women looked around the circle at others the same way that I was. Finally RaeAnn spoke. "I felt like an ass." Several others spoke only a bit more positively. Sue asked them if they had to fight self-judgment. There were nods of yes. Sue talked about those feelings for a bit before we went on to a slightly different topic.

As the evening was coming to a close, Margaret looked at me and said, "Before we end, I want to see Jayne do the form again. I want to see her do a terrible form where she trips right over her own feet. After all, she set us up to think that doing the form for others would make us feel great but we practically tripped over our own feet. I think she should do a terrible form where she really looks stupid. Maybe she could fall on her face or something." I remember looking up and I know my mouth fell open a bit. I didn't know how to respond. Part of me wanted to be a good sport and I almost got up. Part of me thought I had just been offended but I wasn't quite sure. Jen

spoke up in a deliberate attempt to make the moment less tense and more humorous (she reported later that she intentionally tried to make a joke out of it so as to break the intensity of Margaret's comment and tone of voice). Jen laughed and made a joking reference to me falling on my face. Lin responded by saying, "yeh, let's all just dump on Jayne and put all our shit on her" (she then laughed). Others were also laughing and Sue said maybe we should end at that point (Fieldnotes, 3/20/89).

The vignette illustrated the anger that Margaret felt about the activity. Margaret did not feel powerful, skilled, or graceful. The teaching team tried to force affirmations and a positive self-esteem on the class members through the activity and Margaret reacted with anger.

Because anger is an emotion that women are seldom encouraged to express, self-defense training may be a very positive and safe outlet for the expression of anger. The very movements associated with self-defense techniques are powerful and aggressive. Thus, class participants had the opportunity to vent some of their anger each week through the movements associated with the class. However, certain movements seemed better associated with venting anger than others. For instance, many of the techniques practiced in a self-defense class are done with a partner. Thus, safety considerations must be part of any drill. As a result, class participants did not strike with full speed and full power when working with a partner.

As reported earlier, whenever possible, we tried to draw a connection between the self-defense portion of the class and the group work around different healing themes.

During the session where the theme was anger, the self-defense portion of the class covered target areas and body weapons. Students were taught the six primary target areas on an assailant's body that are susceptible to pain regardless of size or strength and they were taught which of their own body parts could serve as weapons to protect themselves. In addition, they were taught strikes that would take advantage of their different weapons and the assailant's target areas. Strikes are the most aggressive techniques taught in self-defense. Some of the strikes are intended to cause pain, others are intended to cause serious damage, and one is even potentially lethal. In planning the class, the teaching team believed that the learning and practicing of such aggressive movements might serve as a catalyst toward getting in touch with feelings of anger for students.

Rather than having to throw the techniques into the air or pull them short to avoid striking a partner, we had students practice the techniques on heavy punching bags suspended from a bag rack. They were able to kick and strike at the bags with full power and full speed. The bags also served as a source of feedback concerning their level of power. Sometimes the bag really swung after being hit, sometimes it barely moved at all. Students were encouraged to hit the bags as hard as they could. Aggressive powerful strikes against heavy objects may provide a safe outlet for anger. Bass & Davis (1988) encourage survivors to find safe outlets for anger, including striking inanimate objects

such as pillows, beds, etc. The following vignette describes the class' efforts to hit the bags. There were a variety of responses that students seemed to register. Those responses ranged from intense and powerful strikes to tentative efforts.

Striking the Bags

I asked them to form three equal lines in front of each bag. Folks slowly moved and positioned themselves in front of one bag or another. There was a fourth bag. It was a small punching bag, the kind boxers work out on at high speed. I had told folks that they could use that one. It wasn't at all heavy but it would certainly respond to being hit. Lin moved toward that bag. No one had struck the bag yet and they appeared kind of tentative about the whole thing. Lin was the first one to break the ice. She swung at that little bag very hard and hit it several times. The little bag whipped around and around. It also made a lot of noise as it swung around its hook and bounced around its suspension plate. Everyone just stood and stared at Lin as she hit the little bag over and over in a very aggressive manner. After a few moments, everyone else started hitting and kicking the bigger bags.

While others took some swings or kicks at the bags, no one else besides Lin seemed to express any real intensity until Becky took her turn. She was kicking one of the lower bags. Her first kick was fairly powerful but it seemed that she was testing the waters to see what it would be like to kick something solid. Each kick got progressively more powerful. She also began yelling with her kicks. Each time she kicked harder, her yell got louder. "No!...No!!...NO!!...NO!!!...NO!!!!...NO!!!!

After we finished hitting the bags, we sat back down as a group to begin talking about the experience. Sue hadn't even gotten a question out when Lin jumped right in. "I really liked that little one! it's shaped just like a head and you can just go wham, wham, wham!! (each time she said "wham" she swung her arms across her body, one after the other, with her hands in fists). She spoke very rapidly and loudly, her eyes were wide as she threw imaginary punches at the little bag.

Others had different kinds of responses but were no less intense. Becky spoke very quietly in contrast to Lin but there was incredible intensity in her voice.

She said that she had been very close to tears. Even as she spoke, tears welled up in her eyes and spilled down her cheeks. She looked down toward the floor. Jacquleen said that it all felt very intense to her and she even got some of that vicariously as she watched Lin hit the bag so hard. Kari said that listening to others scream as they hit the bags felt very scary enough to make her want to run to the closet and hide inside it. She added, "I went totally into my head and rationalized everything that was happening." Margaret added that it seemed too scary to be angry and be powerful. Gerrie told the group that she had to stop when she realized that between each strike to the bag, she had to reach out to the bag and make it better before she could hit it again. She went on, "That's what I've done all my life. I've always taken care of everyone but me. I had to stop because that bothered me so much. When I watched everyone else hitting the bags, I felt like I was being hit, it made me sick to my stomach" (Fieldnotes, 1/24/89).

The vignette illustrated a number of different kinds of responses to hitting the bags. Lin seemed to get in touch with some of her anger and seemed to take great pleasure in hitting the bags. Later she said that she saw her brother's face in that bag. He had been the one who abused her. Becky responded with tears. Gerrie had to stop because she felt herself being the caretaker again. She became sickened when she watched others hitting the bags because it brought back memories of being hit herself. Margaret felt that it was too scary to be that angry and powerful. Whether or not students actually vented anger through striking the bags, the exercise certainly brought them in touch with some very deep emotions, many of which might be linked to anger and others.

Anger is an emotion that seems to be tied to so many others. Anger can produce fear as was the case for

Margaret. As previously discussed, fear can also be expressed through anger. Expressions of anger can also produce feelings similar to those experienced by Gerrie. She immediately felt bad for the bag. She may have also felt guilty for wanting to hit the bag or wanting to hurt it. Her response was to care for the bag. Yet that may have also made her feel angry because rather than continue something that she recognized as a pattern, she stopped. When she told the group why she had stopped, she sounded very frustrated about that pattern in herself that seemed so deeply ingrained.

Anger that is directed inward may be the result of feelings of guilt and shame because the survivor believes that the assault or abuse was her fault. It is often very difficult for survivors to place anger where it belongs - on the perpetrator (Bass & Davis, 1988). However, when the survivor is able to place anger where it belongs, she often feels very guilty for doing so. Because feelings of guilt and shame are very common for survivors to experience, and because they need to be resolved as part of the healing process, those emotions became one of the themes that was focused on in the survivors' class.

Dealing with Feelings of Guilt and Shame

The previous section dealing with anger indicated the interconnectedness of many of the emotions that survivors of sexual assault must work through as part of their healing

process. Feelings of anger are often linked to feelings of guilt and shame that may result for several different reasons.

Many survivors are told by their perpetrators that the abuse was explicitly the victim's fault. Some are told that they are very bad children and deserve what is happening to them. Others are told that they are very sexy and, therefore, the abuser cannot help himself. Some children are told that if they tell anyone what is going on, something terrible will happen. Several of the women who were part of the survivors' class had similar experiences. Many internalized the messages that they received from society and their perpetrators. They believed if they could just somehow change or be better children, then the abuse would end.

RaeAnn, for instance, was abused by several older brothers, a cousin, and a brother-in-law. As a child she had assumed there was something terribly wrong with her because all these boys and men knew they could abuse her. She believed she was somehow sending out signals to these perpetrators that it was okay to abuse her.

Margaret was also abused by an older brother. She felt considerable guilt because he was only three years older and she felt he should not have been able to overpower her.

There is another important but less obvious reason why many survivors blame themselves for what happened to them. Guilt and self-blame are often linked to issues around control or the lack of it. Victims of sexual assault feel as

if they have no control over what is happening to them. Someone else--the assailant--has exerted his control over the will and body of the victim. Those feelings of powerlessness and lack of control may be so overwhelming that rather than accept them, the survivor instead blames herself for her own victimization. Bass and Davis (1988) explain,

It is a stark and terrifying realization for a child to see how vulnerable and powerless she actually is. Thinking that you were bad, that you had some influence on how you were treated, gave a sense of control, though illusory. And perceiving yourself as bad allowed for the future possibility that you could become good, and thus things could improve (p. 105).

Victims of rape experience similar feelings of self-blame and guilt. Society has produced so many myths and misconceptions concerning rape. Many believe that the victim caused her own victimization (Katz, 1984). Assailants can still be acquitted because the jury believes that the woman willingly participated or that she somehow invited attack because of her clothing or behavior. As a result many people respond to victims of rape with questions such as: "Why were you dressed that way?" "Why did you go out with him in the first place?" "Why didn't you fight back?" (implying that it really might not have been rape after all).

As is the case with sexual abuse, some adult survivors of rape also blame themselves because it provides some sense of control over an uncontrollable situation (Janoff-Bulman, 1979). Had they done something different, had they fought back or fought back harder, had they dressed differently,

they could have avoided the rape. Katz (1984) warned against an overemphasis on individual responsibility in counseling rape survivors.

A counselor whose emphasis is on individual responsibility may also be reinforcing feelings of guilt, shame and self-blame. If a woman is discussing how she wishes she could have done something differently during the rape; if only...; and a counselor explores what she might have done differently to avoid being raped, this will only serve to further support her self-castigation (p. 77).

In the planning of the survivors' self-defense class, we were mindful of that possibility occurring in the class. Self-defense can be very empowering but it can also reinforce feelings of self-blame. That issue was not raised during the focal class but did surface in the pilot class. Individual reactions to self-defense training may be influenced by when assault occurred. Several women in the focal class had been raped as adults. However, each of the women had also experienced some form of abuse as children. These women did not seem to replay their rapes as they learned different self-defense skills. In contrast, one woman in the pilot class who had been raped as an adult, and had not experienced victimization prior to that point, expressed some resistance and anger to the idea of self-defense. During one session she told the rest of the class members that she had resisted the idea of learning self-defense for years. She was convinced that she would learn everything that she had done wrong in her own situation of assault. In a later interview following the class, she

said,

I have also been afraid of a self-defense class because I knew it would bring up a lot of feelings for me, having never resolved my feelings about the rape--I kept that a secret for three years. I was assaulted again and felt real guilty about it. I knew all these feelings would come up if I took a self-defense class and I think I was afraid of that. The fact that there was a group was important; I probably would not have done it yet [self-defense training] without the group (Interview transcript, 8/25/88).

As a teaching team, we tried to address the issue of self-blame and ensuing guilt in a variety of ways. First, as a self-defense instructor, I tried to keep self-defense instruction in the present. I never encouraged students to apply the skills to their own rape experiences and I explicitly talked about the past as past. Whatever their experiences of assault had been and whatever they had done or not done in response to that assault was their choice and they survived. Now we were learning skills that might prevent future victimization. However, I also tried to help them see realistically that sometimes, despite our best deterrence efforts, assaults may still be completed. There were no guarantees. We also dealt with feelings of guilt and shame very explicitly as a theme during one of the sessions.

One of the group activities that stood out most for many of the class members was the group work around guilt and shame. In follow-up interviews, the topic and resulting activity was brought up by almost all participants. In addition to using some very traditional therapeutic techniques such as group discussions, we also experimented

in this class with some very non-traditional techniques such as the use of rituals. On the evening that we dealt with guilt and shame, Sue first introduced these themes and some of the ways that survivors are generally made to feel those emotions. She then asked group members if they wanted to share any part of their own experiences and ways that guilt or shame fit into those experiences. Several of the students shared with the rest of the group. We then discussed the impact of guilt and shame on our lives now as adults. Following that discussion, Sue handed out paper and pens. She asked the class members to make a list of anything that made them feel guilty. She told them the guilt could directly relate to their assaults or it could seem totally unrelated. We all began generating our lists, including Jen and myself. Sue allowed approximately five minutes for people to generate a list. Most wrote furiously. It did not seem difficult for anyone to generate their guilt list. When the group finished Sue asked them to pair up with one other person and share anything they wanted from their lists. After several minutes each pair returned to the circle. Sue then told the group that we were going to do a brief ritual designed to symbolically release our own sense of guilt and shame. The following vignette describes the ritual and student responses to it.

Burn Sucker!

While the pairs had been sharing their lists with each other, Sue had quietly gotten up and brought a bag back to the circle area. As each pair finished up, she

quietly placed a rubber mat down in the middle of the circle, placed a metal bowl in the middle of it, and then sat back down. After each pair had come back to the circle, she told the group that we were going to burn our lists as a symbolic release of our guilt. RaeAnn immediately snickered and said, "You guarantee that all my guilt will just vanish? Is this really going to work?"

Sue told everyone to wad their list up tight and think about anything they might want to say as their list burned. Without waiting, Kari looked at her list as she wadded it up and said "Burn Sucker!" As she spoke her eyes got very big and wide. She immediately laughed. RaeAnn again joked about the ritual saying, "If I would have known this was what we were going to do, I would have drawn a picture of someone I don't like."

The first person put her crumpled list into the pot. Sue lit the list on fire. RaeAnn said she wished she had marshmallows. At first people put their lists in one by one; then several put their lists in at the same time. The flames rose higher from the pot. People seemed drawn by the flames. In order to put their lists in the pot, they had to pull in closer to it. Most stayed close as they put the paper in so that our circle got much smaller around the burning paper. As the paper continued to burn, talking ceased and everyone simply watched the flames coming from the small pot sitting in the middle of the circle. Very quietly after some silence, Kari said that the guilt no longer felt as controlling. She added, "I can be more in control now and not hang on to it." Cheryl was laying on her stomach with her head resting in her hand as she watched the flames. She said that burning was a way of releasing energy stored in the paper. "Nothing in the universe is ever destroyed, it changes shape and form. As the paper burns, it gives off light and warmth, this is a really appropriate thing to do with guilt. I can think of it as nothing more than ashes and it can blow away."

Becky told the group that it reminded her of a ritual at the last Solstice celebration. At the celebration they had small fires burning and they said a poem which also seemed appropriate now. She recalled, "Let the winds of Mother Earth take you away and be free."

Jen quietly introduced the group to the idea of an energy circle. She asked everyone to take the hand of the person sitting next to them. Everyone held hands around the circle. She continued by saying we should close our eyes if that felt comfortable and should try to feel the energy moving around the circle. "Focus on your breath, breathe in slowly, breathe out fully...."

Feel the energy that is moving around the circle. As you breathe in, you take it from one person, and as you breathe out you pass it to the next." She told folks that they could say something to the rest of the circle if they wanted to. RaeAnn said that tonight she could go home and sleep knowing that her guilt had been released. Lin told the group that she now felt more in touch with her guilt and better able to do something about it. We finished the energy circle as we started it. Everyone was still holding hands, breathing deeply, and quietly receiving and sending energy around the circle. After several last quiet moments, Jen told them to finish their last breathing cycle and to open their eyes (Fieldnotes, 1/30/89).

The vignette illustrated one of the rituals that was used in the survivors' class. Initially there seemed to be some joking about the ritual. RaeAnn commented about marshmallows and people she did not like. However, as the ritual continued, most students seemed to be very moved by the experience. Joking ceased, conversation ceased, and class members began to experience the symbolism that was part of the burning. Cheryl and Becky both made eloquent statements about the meaning of what we were doing. The group became physically and emotionally closer when we all moved in toward the fire and held hands. It seemed a very significant and powerful event in the life of our small healing group.

In later interviews, I asked class members what they would keep the same or change if designing the class were up to them. Everyone told me to keep the burning ritual just the way it was. The burning ritual was mentioned by almost all of them as a significant event. The following interview responses give some sense of student reactions to the ritual

after the class was finished.

RaeAnn: I always had mixed feelings about the class. One minute I could just feel intense pain for somebody going through something, but on the other hand, I'd look at them and say, these women are survivors--just look at them in here just fighting and doing for themselves what they really need to be doing. So the celebrations kind of affirmed that in some way, we're fighting.

Jayne: What felt celebratory to you?

RaeAnn: Burning little pieces of paper (Interview transcript, 5/11/89).

Cheryl: I like the thing that we did where everybody wrote on a piece of paper and then everybody kind of burned it. That was nice, I liked that a lot (Interview transcript, 5/2/89).

The above quotes indicate that students found the burning ritual celebratory and enjoyable. The event provided class members with the opportunity to symbolically turn their feelings of guilt into ashes and let them blow away. Guilt often seems like a heavy burden. The discussion and activities associated with the theme helped release part of the burden for most class members.

The ritual also seemed to bring the class members closer. As they tossed their lists into the fire, the circle became smaller. The energy circle at the end of the session was very moving. At its conclusion people continued holding hands for a few last moments. Perhaps this event helped to increase the level of trust in the group. Trusting others and oneself is often very difficult for many survivors. The issue is discussed in the next section.

Issues Pertaining to Trust

Trust has clearly been violated in situations of sexual assault. Children who experience sexual abuse learn very quickly not to trust adults. Not only are they likely not to trust the adult who is abusing them, but if they try to tell other adults and are not believed, they will lose their trust in those people as well. Additionally, their trust in themselves is also damaged. This loss of trust may be most critical for later adulthood (Bass & Davis, 1988).

Adults who experience sexual assault in the form of rape also experience a loss of trust in other people. Such a lack of trust is also significantly tied to feelings of fear, concerns about safety, and feelings of being out of control (Ledray, 1986).

Loss of Trust in Others. The previous section discussed guilt and shame. As already discussed, these healing issues are all very much interrelated. Not only do young children experience guilt and shame when they are told that they are bad children who deserve what they are getting or that they are so sexy that daddy just can't help himself, but they also experience a distortion of their own sense of the truth. Maltz and Holman (1987) write the following:

It is very painful and difficult for a child to perceive her parent as a liar. To seriously doubt a parent's honesty shakes up the trust system the child has for understanding the world (p. 42).

While some children refuse to give up on their parents, they are willing to give up on other less critical adults. They

may not trust other adults whom they try to tell. Others learn to trust no one. They take care of themselves and handle things on their own (Bass & Davis, 1988).

Several of the women who were part of our survivors' class talked about their own trust issues.

Kari: I had no idea that I wasn't trusting others until I got into counseling. I was able to establish a healthy relationship with my counselor that was based on trust. Through that relationship I was able to see what was missing with other people (Interview transcript, 5/2/89).

Lin: I have a new job and I work with more people and a lot more men. At first I couldn't even talk to the men. It has taken me two months just to relax a little bit. Two of the guys, in particular, remind me of my brother [her perpetrator]. It took me a long time before I could be anything but distant and cold to them. One is gone and the other one I can tolerate now (Interview transcript, 4/27/89).

Becky: For me it's not a straight process. I think it's different with different people. If someone reminds me of a family member, I have a real difficult time learning to trust them. It's also been real hard to trust any kind of authority figure (Interview transcript, 6/8/89).

Learning to trust others is also closely linked to having firmly established boundaries, an issue discussed earlier in this dissertation. Becky added that her difficulty is not always so much in learning to trust others as in learning not to trust the wrong people. She explained that she is still working on establishing appropriate boundaries and too often she trusts people who should not be trusted. The inability to set appropriate boundaries and the indiscriminate trusting of anyone may be tied to another loss of trust, that being trust in oneself.

Loss of Trust in Oneself. Many survivors have great difficulty trusting their own perceptions. Bass and Davis (1988) wrote the following to illustrate the point:

When children are abused, their perceptions become threatening to them. To acknowledge that the neighbor who pushed you on the swings and gave you birthday presents was also the man who made you suck his penis was unbearable. To admit that your father, who went to work to support you and stayed up late to make you a dollhouse, had a scary smile on his face when he touched your genitals was too terrifying. So you pretended they weren't doing these things or that these things were really all right. The lengths to which children go to distort their perceptions is striking (p. 116).

RaeAnn told the group that she never believed it was her brother doing such awful things to her as a child. She said that it was easy to believe it was some monster instead of her brother because he always came into her room in a certain way with a certain expression on his face. He never acted like her brother when he abused her. Therefore she rationalized that it was someone else coming into her bedroom because her brother would never do something like that to her.

Children's perceptions of reality are also damaged when other adults in their lives either do not believe them or downplay the significance of the abuse. Often times children do not even dare tell another adult that abuse is happening. However, when they do, many adults find it impossible to believe the child. Bass and Davis (1988) write the following:

Many young girls try to tell teachers, counselors, minister, or other adults, only to be told, "You must

be mistaken. Your Uncle Jimmy is a deacon in the church." Survivors have gone to therapists for help and have been told, "You should be over that by now," or "It was just your brother; all kids do that" (p. 116).

Class members shared with others in the group how they felt that their own perceptions had become distorted through their experiences with assault and abuse. Kari told the group that she learned to believe that the abuse was okay. She believed that it was affection and attention. She added that she had forgotten all of the bad parts of her relationship with her brother and only remembered the good parts. Kari also believed that she could have stopped the abuse had she wanted. She did not stop the abuse; thus it continued. While this is certainly a case of taking on self-blame, this is also an example of the kind of self-blame that provides the survivor with some necessary feelings of control (Janoff-Bulman, 1979). When a survivor believes that she has the ability to allow the abuse to continue or to stop, she can also hang on to some sense of control, even in a totally uncontrollable situation. While the belief of control is actually an illusion, the reality of total helplessness may be too overwhelming to accept (Janoff-Bulman, 1979).

Becky told the group that she always believed that she had been adopted. "I believed that my real parents were somewhere out there and that they really loved me and someday would come and get me. These people who were doing these terrible things to me were not my real parents"

(Fieldnotes, 2/13/89).

Several activities within the class assisted students in dealing with issues of trust--both trust of one's own perceptions as well as trust of others. One of those activities was part of the self-defense training. Confrontation training was presented as a means of dealing with sexual harassment and/or the verbal interactions associated with the testing process of sexual assault (for a more detailed description of confrontation training, see Appendix D). Many women may not immediately recognize the testing process or even harassment in some cases. Recognition may be even more difficult for survivors since many have learned to distrust their own perceptions and judgments.

In presenting confrontation as a self-defense strategy, I made some very deliberate links to the theme of trusting one's own perceptions. We discussed examples of the testing process that were not glaringly obvious. I explained that recognition sometimes comes only because of our own intuitive sense. In order to respond to those intuitive feelings, we had to trust that they were legitimate. I also explained that choosing to confront or not to confront, particularly in situations of harassment rather than testing, is a matter of judgment.

After I presented the principles of confrontation, the group had an opportunity to try these skills in the context of role plays. As a teaching team, we had decided that a highly structured first effort might feel safer to the

students than a more spontaneous role play. Thus, Jen and I first demonstrated a role play so that the students could see exactly what they would be doing. We talked as a group about some of the key points of the role play. Following the discussion, I asked students to partner with someone else so we could practice. First we asked the students to participate in a very structured role play. Partners stood across the room from one another. One partner started walking toward the other and when she approached the two-arm-length critical distance of safety, the partner who remained stationary was instructed to put up a hand and say very assertively, "Stop! Leave me alone."

The other role plays were more spontaneous. I set up two different situations in which one partner played either the part of the harasser/tester or herself. In both situations, class members had opportunities to practice confrontation resulting from the scripted behavior of the harasser/tester.

Following the role play practice, the group came back together to talk about how confrontation training felt. Becky said that she felt very vulnerable. "As I grew up, my abuse was a secret. You never used words or came back about anything in my family. So when I was confronted now, I didn't feel so frightened; it was more like I was afraid of being humiliated" (Fieldnotes, 2/13/89). Jacleen described her feelings in terms of the "Cinderella Complex." She said, "If I'm just good enough or if I just wait long enough

for someone else to save me, then everything will be okay. But confrontation is another way of relying on ourselves. If we are really good girls in this society, we don't talk" (Fieldnotes, 2/13/89).

Through the above examples and student responses, the reader can see how confrontation training played an integral role in the survivors' self-defense class. Not only was confrontation an important deterrence strategy during the testing process, but it also provided students with an important means of empowerment in less threatening situations as well. As Jacqueen indicated to other students during class, confrontation is another way for women to rely on themselves. The voice is powerful. Many assailants and/or harassers assume that their victims will be quiet. Women who speak out assertively take on power that is stripped through silence.

As already indicated, the class focused not only on trusting one's own perceptions, but also on being able to trust others. A number of activities were involved in trusting others. The focus here will be on students' reactions to two of these activities--ground defense strategies and a lifting exercise.

Ground defense strategies were taught as part of self-defense that evening. Ground defense strategies are specialized skills that would only be done if the potential victim were laying down in some way. These skills included learning how to fall if pushed over, kicking from the

ground, rolling out of limb grabs, as well as how to escape from various pins on the ground.

Being pinned against a wall or down on the ground proved to be very difficult for most of the class members. The previous week we had told the group about ground defense so they could psychologically prepare themselves, but drills still proved to be very emotionally difficult. Practice of strategies designed to shift an attacker's weight, and thus his balance, required that students work with a partner who actually pinned her to the ground or up against a wall. The drills demanded a tremendous amount of trust as one partner allowed another to actually get on top of her and pin her down to the floor. Students talked about how realistic these situations felt and for some, because of the realism, the drills brought back searing memories and flashbacks.

Becky told the group that as she was pinned down with all of her partner's body weight, she remembered that the only other times she had ever experienced such had been when her drunken father laid on top of her after he had raped her. She found the drills very difficult because she saw and felt her father rather than her partner. As Becky lay underneath her partner during the drill, she told the group she could actually smell his alcoholic breath. "As soon as I had that feeling, I just had to get her off. I felt anger. In that position I felt angry and I was willing to fight to get out of that situation" (Fieldnotes, 2/27/89).

As part of group during that same session, we did an exercise that has often been done by other groups who are working to build trust in one another. We called it simply "the lifting exercise." The activity was done in a very ritualistic manner. The following vignette describes the activity.

"The Lifting Exercise"

Everyone participated in the lifting exercise but choice to actually be lifted was strictly optional. The group gathered together in a small circle. Sue began beating a hand drum in a constant slow and even beat. Boom....boom....boom....boom. The beating of the drum provided the pacing for the moves that were part of the lifting exercise and gave it a ritualistic flavor. Jen laid down on the floor and the group gathered around her. During the first four beats, Jen shut her eyes and thought of something that seemed like a burden to her. During those same four beats the other group members, already positioned around her, placed their hands on her and pressed down slightly to add to the feeling of the burden. During the next four beats, the group placed their hands under Jen's body. One person was positioned at the head, another at her feet, and three people were positioned along each side of her body. During the next four beats, the group lifted Jen all the way up and over their heads so that their arms were completely extended toward the ceiling. We held her there during the next four beats and then slowly lowered her to the ground during the next four beats. The last four beats allowed the group members to remove their hands from under Jen's body and gently back away. Sue continued beating the drum as the next person got in position to be lifted. During the entire exercise group members remained very quiet; the only sounds were the beating of the drum and my quiet one word instructions to remind the group of our role during each set of four beats. Everyone was lifted but Gerrie, including Sue and myself. The sensation as I was lifted was incredible. The lift seemed to happen so fast and the feeling was of being so light, from my perspective, it served as a wonderful metaphorical release of burdens (Fieldnotes, 2/27/89).

Following the exercise, everyone sat back in the circle and Sue asked what people thought of the activity.

Lin had a big grin on her face as she nodded her head in approval. "That was really neat," she said. Raeann smiled and jokingly said, "I don't know about these cults." Kari told the group that it seemed like the exercise exactly symbolized how her life had been going lately. She had been feeling very weighed down and that her friends were really carrying her through. Becky and RaeAnn were both shocked that they had allowed the group to lift them at all. Becky said that she is terrified of heights to the point of not being able to go past the first few rungs of a ladder. Raeann told the group that normally she cannot stand to have anyone touch her legs, particularly her upper legs. She thought having people touch her would really bother her but she reported that it did not. Instead, she said that it felt like a reassuring touch.

These examples indicated some of the more explicit ways that the class dealt with issues related to trust in one's own perceptions as well as the ability to trust others. However, trust is such an integral aspect of healing for survivors that building of trust was an implicit part of every session. The students' very willingness to come to the class week after week, actively participate as a group, and share their feelings with one another all reflected a level of trust that could not be taken for granted by any of us. Because Gerrie had been in both the pilot and focal classes, she served as a good indicator of the level of trust in each group.

During the pilot class, Gerrie herself said that she went through the motions of the class. She participated in the self-defense but felt that she learned very little. She rarely spoke during group. Following the pilot class, I interviewed Gerrie about the experience. I expected that the interview might be very short because she rarely spoke in class. However, her interview was the longest at two and one half hours. The interview allowed me to see the Gerrie that never dared come out in class. She felt so unsafe in the pilot class that she often barely made it to class, let alone participate to any great extent. During the interview she repeatedly said that she never felt safe and that she could not trust two of the other class members. Gerrie's experience seemed much different in the focal class.

Gerrie was the very first person who spoke during group in the first session of the focal class. She participated in all of the self-defense activities, including the ground pins which she had been unable to do during the pilot class. She also spoke much more often during group. Perhaps the most significant indicator of the extent of Gerrie's trust during the focal class was her willingness to introduce Suzanne to the other group members. Suzanne came to class several times with Gerrie and the following vignette is the story of Gerrie first introducing Suzanne to the other group members.

Suzanne

The group had just finished talking about confrontation training. There was a few moments of silence before Sue looked at Gerrie and asked if an introduction was in order. Gerrie didn't say a word but very gently reached over and picked up a small bundle that had been lying on the mat beside her. She cradled it in her arms. The bundle was all wrapped in a soft white blanket with very delicate pink trim around the border. Gerrie carefully began unwrapping one end of the blanket to expose a very small little sleeping face. She then finished unwrapping the baby and turned her around to face us. The baby remained cradled in her arms even as she turned her toward us. "This is Suzanne," Gerrie said very softly, and very lovingly looked back down at the baby's face. The baby was a very life-like baby doll. It had a very serene face that appeared to be content and smiling ever so slightly. She had blond hair that covered her head and reached down to her little ears. Everyone sitting on the circle "ooed" and "aahed" over the little baby doll. Gerrie proceeded to tell the group that she had been very taken with the doll when she first saw it. "She never opens her eyes and that is real important. I figured if I never opened my eyes when I was that young, then it would all go away. I was so taken by her smallness. As soon as I saw her, I went right back to when I was three weeks old. That's how old I was when my real mother abandoned me." After Gerrie finished showing us Suzanne, she very gently wrapped her back up in the blanket but left her face exposed. She then cuddled her back in her left arm with the baby's face almost smothered in her breast and gently rocked her as the group continued talking. Every so often her right hand would stroke the baby's face or hair as she continued rocking the baby ever so gently (Field-notes, 2/13/89).

Suzanne made several other visits to class with Gerrie.

Gerrie picked her name because that had been her own name before her biological mother abandoned her and an older brother. Gerrie now treated Suzanne in the ways that she thought she should have been treated as an infant. Suzanne was the small three-week-old infant that was abandoned by her mother. Suzanne symbolized the child within Gerrie.

Some professionals who work with survivors of incest encourage survivors to find the child within themselves.

Bass and Davis (1988) write the following:

Many survivors have a difficult time with the concept of the child within, even though forgiving that child is an essential part of healing. Too often women blame her, hate her, or ignore her completely. Survivors hate themselves for having been small, for having needed affection, for having "let themselves" be abused. You may feel split, caught in a real schism. There is the "you" that's out in the "real" world, and then there's the child inside you who is still a frightened victim: "I feel like all my successes had been one big fake, because I ignored the little child who never got over it, and who lives her life in humiliation and pain because of it" (p. 111).

Gerrie had found her child within and Suzanne became a symbol of that child. Gerrie was able to care for and nurture that small doll as a concrete symbol of the caring and nurturing she needed to provide for herself. Thus, Suzanne was an important part of Gerrie's healing process.

Gerrie trusted the group enough to bring Suzanne to class. Here was an adult who was treating a small doll as if it were a real baby. Had Gerrie not trusted the group to fully accept her need to have Suzanne in her life, she likely would never have brought the doll to class. Group members fully accepted Suzanne. Their "ooing" and "aahing" over her indicated their acceptance. That evening after class, Gerrie was getting ready to put on her boots and coat. Becky asked Gerrie if she could hold the baby while Gerrie got ready. Gerrie gently handed the doll to Becky who cradled the baby in her own arms and gently talked to Suzanne while Gerrie continued getting ready to leave.

Gerrie had truly found a group that she could trust.

A loss of trust in others and self is often experienced by survivors of sexual violence. This section examined how trust is lost and how the content of the focal class helped the students to regain trust in others and in their own perceptions. Confrontation training served as an example of learning to trust one's own perceptions and the lifting exercise was a very specific activity designed to increase trust in others.

Trust is not the only loss that survivors of sexual assault experience. The next section addresses the concept of loss. During the healing process survivors learn to recognize and mourn their losses (Bass & Davis, 1988). They also learn to reclaim some of those losses--such as trust.

Dealing with Feelings of Sadness and Loss.

Survivors of sexual violence have lost much of what many others take for granted. Many of the other issues that I have discussed in association with striving for healing are qualities that the survivor has lost. For example, trust is a perception that the survivor has lost and is now trying to regain as she works toward greater healing. Additionally, she may have lost a sense of her body and its physicality. She may have also lost a realization of boundaries associated with the body and personal space. Before a survivor can begin reclaiming such losses, she must first realize what she has lost and must often go through a

grieving process to mourn those losses. Many people attempt to bury their feelings of loss. However, burying those feelings never makes them go away (Bass & Davis, 1988). The authors of Courage to Heal wrote the following which helps to better explain the role of grieving.

Buried grief poisons, limiting your capacity for joy, for spontaneity, for life. An essential part of healing from traumatic experiences is to express and share your feelings. When you were young, you could not do this. To fully feel the agony, the terror, the fury, without any support would have been too devastating to bear. And so you suppressed those feelings. But you have not gotten rid of them.

To release these painful feelings and to move forward in your life, it is necessary, paradoxically, to go back and to relive the experiences you had as a child - to grieve, this time with the support of a caring person and with the support of your adult self (p. 119).

While Bass and Davis (1988) were writing specifically to survivors of incest, adult survivors of rape and battering also mourn their losses as part of the healing process. Adult survivors of sexual violence often feel a loss of control that can be overwhelming and paralyzing long after the rape or physical abuse is over (Ledray, 1986; Katz, 1984; Schechter, 1982).

We devoted one particular session to the issue of sadness and loss. Prior to beginning any group activities that evening, Lin asked if she could share a paper with the rest of the group. The paper had been written for a class she was taking and it described her feelings for her brother --her perpetrator--who had recently been arrested for drunk driving. She read the paper aloud for the class and

gave me a copy of it. The paper is reprinted below.

D.U.I.; Good-by Brother

I am finding it very hard to say good-by to my brother. He is not dead. He is going to jail. Last year he was driving under the influence of alcohol and was involved in a car accident. The driver of the other car was killed. He was found guilty of involuntary manslaughter. They will be sentencing him in two weeks. He may be sentenced from 5 to 30 years in prison. I am torn between the emotions of love that I had felt for him as a child, and the anger and numbness that I feel for him now.

I can remember all the fun we used to have when we were young. We would climb trees, go fishing, play tricks on my sister, and generally just get into a lot of trouble. Any younger sister would have been proud to have him as a big brother. I loved him very much.

Unfortunately, the love I had for him as a child has long since been replaced by emptiness and anger. He became a very abusive, angry, and very cold human being which is the result of sexual abuse he encountered as a child. Being the recipient of his hatred left me an abused child. I had to learn to protect myself from a wild young man who had no outlet for the misdirected hatred he was feeling for the perpetrator. Sometimes I felt as though I wanted to die just so I wouldn't have to endure any more pain from him.

As an adult, my brother was in trouble with the police quite frequently. He had been in jail twice before. Once for stealing lottery tickets and then leaving the state; and once for assault and battery. I felt a lot during these times. I was always defending him when the family was quick to point out his faults. I did not know then that my life was confused because of him. I still cared for him. He was my big brother.

As a way of handling his problems in the recent past, he started to misuse alcohol and drugs. He had been stopped for driving under the influence of alcohol before, but had never been ticketed. This time he got what he deserved. I'm not going to try to defend him this time. I have nothing left to give.

I am torn between feeling love for my brother, the brother of an innocent childhood, but very cold towards the young man who became my tormentor. He made my life a living hell. He can rot in jail. I will put my life back together. Good-bye dear brother, may you rest in peace.

Lin's paper reflected sadness and loss. She had once

loved this brother, a brother anyone could be proud of. Now she felt torn; her memories of childhood were still there, but now, so were her memories of abuse. She lost the love that she had once felt for her brother. It was replaced by emptiness and anger. She seemed to be saying good-bye to a brother both literally for he was going to jail, but also symbolically. Lin was acknowledging the loss of her love for him.

As part of our activities and discussion about the theme of sadness and loss, the group listed losses on a chalk board. Table 5.1 represents a partial listing of losses as identified by class members.

Table 5.1

Losses Identified by Class Members

Childhood	Love	Belonging and being normal
Feeling safe	Optimism	Physical health
Potential	Sexuality	A sense of one's body

After listing losses on the board, we spent time discussing them. For instance, several class members talked about having lost their childhoods. Some had no memories of particular time periods. Others remembered their childhood, but it was filled with pain and fear. They felt they had lost the innocence that children should be able to experience as they grow up.

Class members also discussed how loss felt to them. Cheryl described the feeling as that of heartbreak. Becky said that she would feel choked with sobs that were

suppressed in her chest. Margaret told the group that she did not think she had ever learned to mourn. The group also talked about ways that they had tried to reclaim their losses. Gerrie brought up Suzanne. Becky said that she often tried to go out and do some crazy things that adults weren't supposed to do. One time she and John, her fiance, had a water balloon fight because she was never allowed to do anything like that while growing up.

We closed the class session discussing how class members had tried to regain losses. In dealing with this particular healing issue, the teaching team did not want to end the discussion on a "low note" such as grieving. While this positive focus was important, some class members may have felt alienated from this part of the discussion. Margaret had indicated that she felt she had never learned to mourn. Other class members may have also been in positions similar to Margaret's. By focusing on regaining losses, we may have inadvertantly given class members the impression that we thought everyone could or should be able to move through the listing of losses, the mourning over those losses, and the reclaiming of those losses in a very short span of time.

Margaret told me in the follow-up interview that some of the group discussions seemed to go right over her head because she had not learned how to "take things in." Her therapist later indicated that one of Margaret's major issues around healing was in learning to be in touch with her

emotions. Perhaps Margaret's self-definition of not being able to take things in was the inability to access her emotions. Margaret said the following:

Well some of the class felt like it was going right over my head. I know why we are doing this theoretically because this is supposed to happen and this is supposed to happen. But I am going to sit here and nothing will happen to me because nothing ever does because I can't take things all in (Interview transcript, 5/9/89).

RaeAnn spoke about the pace of the discussions more directly than did Margaret. While Margaret talked in general terms about group discussions, RaeAnn specifically addressed the discussion concerning losses. She said the following:

We were talking about some stuff that was really hard and the group seemed to be emotionally responding to that part, I think that was when we listed all those things. I think the pace was too fast for everyone. It was like we listed all those things that were the effects of the incest and I think that was a biggie to a lot of people. And I think it seemed to be a place where we could have stayed a little bit and talked about those things in more depth instead of moving on to the next thing (Interview transcript, 5/9/89).

While some students may have felt that the discussion went too fast, others felt they had benefited a great deal from the discussion. Becky said the following during her follow-up interview:

One of the things that I got out of the class was the session we did on reclaiming. We were talking about our losses and then we talked about reclaiming them. I'm still working on that. That [discussion] opened up a whole barrel of things and I am realizing how, I don't think the class helped me, per say, do any more reclaiming, but it helped me realize that I had systematically gone back to my childhood and reclaimed. The wedding was a reclaiming. My parents always said I didn't deserve to have something like that and it's

like fuck you, I deserve it and I am going to have it. The house I am living in is a reclaiming, my flower beds are a reclaiming, my cat is a reclaiming, my kids and grandkids are a reclaiming, everything I do in my life is a reclaiming (Interview transcript, 6/8/89).

Thus, the discussion had a different impact on different people. Each woman who was part of the class came into it at a different point in her healing process. Some class members had worked on their healing for a longer period of time and perhaps had made more progress than others. It seems likely that certain discussions, activities, and the self-defense training itself benefited some class members more than others. This assertion will be discussed in greater detail later in the dissertation. The following section addresses some additional issues pertaining to healing that the survivors' self-defense class addressed.

Other Themes and Issues Pertaining to Healing

The focal class dealt with two other healing issues that were integrated into themes for individual sessions. The themes were called "balance and integration" and "self-esteem." Survivors often experience lowered self-esteem and may also experience excesses in their lives such as compulsive eating, alcohol abuse, drug use, and the like. These are important issues to work through in the healing process; however, our planning of activities and discussions associated with these themes was much better than the actual implementation.

Rosaen (1989) and Anderson (1990) have described the

potential difficulties that can arise between the intended, enacted, and actual curriculum. The differences between each are described by Rosaen (1989):

The intentions for students learning embodied in textbooks, lesson plans, and teachers' heads we label the intended curriculum. When those intentions are transformed through classroom activities they become the enacted curriculum. Finally, what students actually learn in school is the actual curriculum. It is reasonable to expect changes or transformations in knowledge across the three different kinds of curriculum as teachers' intentions are carried out and interpreted by students in classrooms (p. 4).

In dealing with the themes of self-esteem and balance and integration, we experienced significant transformations between the intended, enacted, and the actual curriculums. This section will highlight those transformations.

Balance and Integration. In introducing the theme of balance and integration, Sue explained to the group that it was very easy for survivors to have excesses in their lives, especially during the intensity of the healing process. Even working on healing could become an excess in itself for some survivors. However, Sue went on to explain that balance and integration involved recognizing the excesses and then choosing to bring about more balance in one's life. Sue then asked group members if they felt they had any excesses in their own lives. RaeAnn spoke first. She told the group she was having a terrible time with food at this point in her life.

I started worrying about weight so I started thinking about how much I was eating. As soon as I decided that I had to eat less, I started doing all the classic stuff around addiction and food. I sneak food into my

office, I sneak food at home--food is all I can think of and I'm totally out of touch with my body. I used to be an athlete. There is no balance because I feel so consumed by food (Fieldnotes, 3/13/89).

Gerrie told RaeAnn that she was not alone, that she had gained 130 lbs. last year. "I was making myself feel better by eating" (Fieldnotes, 3/13/89).

Cheryl told the group that her big excess was isolation. She needed to be isolated as much as possible for a long time. She could not think about socializing when all of her energy went into getting up each morning and getting through her day. Now, however, she realizes that she no longer needs the isolation, yet it seems so difficult to break out of it. Becky responded back to Cheryl in the following way:

I also went through an isolation but was cutting people out who really needed to be cut as compared to cutting everyone. I went through a period where everything was done to excess. Now I am in a phase where everything feels like it is flowing and that feels real good. I've learned not to beat myself up for excesses and obsessing. I now try to learn from it and find balance again (Fieldnotes, 3/13/89).

The intended, enacted, and actual curriculum stayed consistent during the discussion. The teaching time wanted class members to discuss their personal experiences with excessive behaviors which they did. However, following the discussion, transformations in the curriculum took place. In planning this session, we thought physical activities designed to improve physical balance would be appropriate. We intended them to serve as a metaphor for finding emotional balance in other aspects of life.

Sue, Jen, and I led the group in several balance exercises. While observing the group participate in the exercises, I noticed that some group members seemed very willing to do the drills but others seemed much more tentative. In my fieldnotes, I wrote interpretive commentary that focused on the lack of connection between the drills and excessive behaviors. RaeAnn, for example, seemed particularly tentative about the exercises, and I was not sure if she was making any connection between the balance drills and her compulsive eating behavior. We did not introduce the activity with an explicit connection to the discussion and unfortunately, the session ended before we could discuss the drills.

In my research journal, I wrote about the theme as the weakest presented to date (it was the 10th of 12). I did not specifically ask class members about the theme in follow-up interviews, nor did any of them discuss it. Thus, I would assert that the theme did not stand out as a primary theme for class members. The issue of finding balance and integration may be very important as RaeAnn, Gerrie, Becky, and Cheryl indicated. However, the transformation between the intended, enacted, and actual curriculum may have been too great.

Self-Esteem. Sexual assault can be devastating for a survivor's sense of self-concept, particularly as it is related to issues of guilt, shame, and the inability to trust one's own perceptions. Adult survivors of rape often

report that their entire sense of self-worth is shaken because of their experience (Katz, 1984). While adult survivors of rape may have had a better sense of self-esteem prior to their assault, survivors of childhood sexual abuse may never have had the opportunity to develop healthy levels of self-esteem. Maltz and Holman (1987) write the following:

Victims are systematically forced to doubt their own perceptions of reality. Adults guide children by validating children's perceptions. For example, a parent may agree with a child that the water is hot or the dog is dangerous, as the child suspected. Children gain self-esteem by trusting their own feelings and experiences and by being believed by others. This makes it possible for them to act on their beliefs. In incest, the offender is so involved in his own experience that the victim's perceptions get discredited and denied (p. 42).

Thus, the link between trust of one's own perceptions and self-esteem is critical.

Self-esteem was addressed as a theme during one of the sessions. In group that evening, Sue discussed the negative messages that survivors of assault get from others. Many of the messages focus on self-blame. She said to the group,

Tonight I would like us to spend a little bit of time thinking about what those messages actually were. What did we hear as kids that were negative messages about our esteem? Maybe some heard messages like, 'maybe I did deserve this,' etc. We want to begin giving ourselves positive affirmations that we didn't hear as a kid. Those around us may not be able to give us the affirmations that we need to hear, but we can say those things to ourselves. Positive messages can and should come from us (Fieldnotes, 4/5/89).

Group members began identifying some of the negative messages they had received from others. We discussed how

people felt after receiving those messages and how they impacted self-esteem. Once again, the intended, enacted, and actual curriculum stayed consistent through the discussion. However, as we moved into an activity intended to enhance self-esteem through the use of positive affirmations, the transformation in curriculum was significant.

After the discussion I introduced the concepts of "forms." I taught the group a short self-defense form fully described in the vignette entitled "Performing Forms." We wanted students to use the affirmations to feel good about their movements in the form. The activity did not achieve what was intended. Previously in this chapter, the vignette was used to illustrate anger as a reaction to feeling pressured into performing in front of others. Additionally, other students reacted negatively to using positive affirmations when they did not believe what they were saying. RaeAnn told the group she felt "like an ass." In the follow-up interview she said the following:

Is that the night when we stood up and said something foolish like "I'm wonderful?" I have to be in the right space to be able to do affirmations. I really haven't done much of them because self-esteem has been an issue for me. It took years before I could look in a mirror and really look at myself. It took a long time just to feel good enough about myself to accept me, much less say these positive sorts of things (Interview transcript, 5/11/89).

RaeAnn indicated that self-esteem was very difficult for her, and our effort to use positive affirmations was not helpful because she was not ready to use them. Saying

wonderful things about herself was not real when she could not even look at herself in the mirror in an accepting manner.

A second factor strongly impacted the changes between the intended and actual curriculum. We intended to focus on self-esteem but group members were focusing on something quite different. This theme was addressed in the second to the last week of class. The teaching team did not realize it at the time, but class members were feeling badly about the class coming to an end. We were focusing on positive self-esteem and they were mourning the end of class. These feelings were discussed by several women during the follow-up interviews.

RaeAnn: All of a sudden it became apparent that it was the next to the last class and I think some of us, I was, going through some grieving. All of a sudden it was like there's only one more week and we aren't going to see these people and I think that somehow that seemed to come up that night (Interview transcript, 5/11/89).

Becky: I felt like we didn't have enough time, we were trying to do too much too soon. It felt like we were just hitting the surface and then you were ready to move on. It's just like that one night. You were suggesting we do the positives about the class, and we were all mourning because the class was ending (Interview transcript, 6/8/89).

The teaching team suspected that students were feeling badly about the end of the class, but not until the session was over. We all realized the session had not gone well and were discussing what we thought had happened. Sue said the following:

We could have predicted a night like this so close to

the end of the class. It's like groups regress as members start thinking about the group ending. Some get real angry, others get scared, but regression of some sort is pretty typical as members show that they don't want the group to come to a close (Fieldnotes, 4/20/89).

There were major differences between the intended, enacted, and actual curriculum. I believe the timing of this particular theme could not have been worse. It may not have mattered what the theme was that evening; uppermost in class members' minds was the fact that soon the class would be ending. That fact was mourned and grieved; people were feeling very sad. However, the teaching team was asking them to think and act upon a very contrasting emotion. When people are already feeling sad, trying to interject positive feelings may seem very contrived and artificial. Additionally, as RaeAnn pointed out, self-esteem may already be a very difficult issue through which we tried to move too quickly. We wanted class members to experience a higher level of self-esteem and some people were simply not ready and did not fake being ready.

This section discussed two themes that were part of the focal class but did not make particularly positive contributions to the class members' healing processes. The themes can be considered important aspects of the healing process as indicated in group discussions about each of them. However, there was a significant shift between the teaching team's intentions in planning and what class members actually took away from each of those sessions. As a result, the

themes did not seem as significant to the healing process during the focal class.

Chapter Summary

This chapter was divided into two primary sections. The first section introduced all of the class members. Those individuals were introduced in terms of their experiences of sexual assault, why they came into the class, what their expectations for the class were, and what the issues were that they identified as being primary to their own healing process. In discussing the healing issues unique to these eight women, I indicated that most survivors of sexual assault shared many healing issues in common. However, each survivor's healing process is uniquely her own. Survivors work through their issues in different ways and at their own pace.

The second section of the chapter was divided into seven sub-sections. Each sub-section provided a detailed analysis of how the focal survivors' self-defense class addressed some of the common issues faced by survivors during the healing process. Throughout the analysis the perspectives of the teaching team (myself included as a member of that team) and the class members were presented as a means of discussing the issues and the class' contribution to the healing process. Self-defense strategies and group activities were discussed in order to better understand how the different parts of the class addressed the various

issues. Specific examples of self-defense training and group activities were provided in the forms of vignettes so that the reader could understand those examples in greater detail.

In the following chapter, I will further explore the contributions of the focal class to the healing process for survivors of sexual assault. The chapter will discuss some of the overarching themes and patterns that seemed to transcend any one of the healing issues.

CHAPTER SIX

OVERARCHING THEMES

The previous chapter provided a very detailed analysis of several of the issues related to the healing process. The chapter was organized in terms of introductions of the eight class participants, their healing issues, and the ways in which the class addressed those issues. Thus, individual healing issues were the "primary unit of analysis."

This chapter takes a different analytical perspective through descriptions of three overarching themes that seemed evident across individual healing issues. The first theme will focus on empowerment--an overall goal for the class. This section will define the concept and discuss its vital necessity as part of the healing process. The second theme presents the importance of physicality to healing. This class contrasted with traditional approaches to healing in that it involved the physical component of self-defense training. The importance of that component will be discussed. The third overarching theme will be referred to as "the fine line." As a teaching team, we consistently felt a tension between our goal of empowerment and our need as a teaching team to do a certain amount of caretaking of individuals. This tension was ever present and affected every curricular decision regarding self-

defense instruction and group work.

The Goal of Empowerment

Empowerment was a primary goal for the class. The concept of empowerment is somewhat abstract in that we cannot see many forms of power. Power can take on many different forms and operate at several different levels. When sexual assault is explained from a feminist perspective, issues of power are critically important to examine. While a feminist explanation for sexual assault has been developed and described previously in this dissertation, it seems important to review some of the key elements of that explanation in relation to the concept of empowerment.

First, sexual assault has been described as a form of social control that men exercise over women and children (Brownmiller, 1975; Griffin, 1971; Schechter, 1985; Russell, 1986). In essence, feminist theorists argue that sexual assault results from the power differences between women and men in a patriarchal social structure (Brownmiller, 1975; Griffin, 1971; MacKinnon, 1982). However, how exactly does one define power? At the societal level power can be defined as having access to resources that are considered scarce. Those who control and have access to scarce resources within the society have power over those who do not have access to the same resources. Those resources could be economic, religious, environmental, or political, among others. In our society, white men of higher socio-

economic levels have traditionally maintained primary access to economic, political, religious, and environmental resources and rape is prevalent. Such is not the case in all cultures. Sanday (1981) discussed the concept of rape-free versus rape-prone societies. In some cultures of the world rape is virtually non-existent. In those cultures, women have equal status with men and equal access to resources. Sanday (1981) found that women in rape-prone societies did not have equal access to resources.

Power also operates at the individual level in terms of varying levels of strength. Power can also be thought of as the ability to act (NCRPTSR, 1978). At the individual level, a woman may be economically dependent on another person (typically, a male partner). She may be physically weaker than another person. She may lack the power to act in certain situations.

Power is a key element when studying sexual assault at both the societal and individual levels. Feminist theorists have argued that the only way we will reduce the prevalence of sexual assault in our culture is to challenge the gender hierarchies that currently exist. A complete social restructuring must occur in which women have the same access to resources as men currently enjoy. At the individual level, personal power--the ability to make choices and act on those choices--is critical if individual women are to prevent victimization in their own lives.

The experience of sexual assault strips a woman of

personal power. An assailant exercises power over someone else, thereby showing the woman that she had little or no power in comparison. The issue of empowerment may be the factor that distinguishes victims from survivors. Victims are controlled by their experiences of sexual assault. Survivors must learn to take back this personal power--to control their own lives again. They are actively seeking to take back the control that was lost through their assaultive experiences (Bass & Davis, 1988; Ledray, 1986).

Self-defense is an intentional effort to empower women. Through self-defense training, women are given accurate information about the nature of assault. That knowledge alone can be a source of power in cultures that recognize knowledge as a resource. Women are also taught to recognize a potential assault, analyze the situation, and make informed choices based on several strategy options. The ability to act, which has been defined as one form of power, may be enhanced through self-defense training.

Self-defense training also encourages women to question the socialization practices that may increase the likelihood of victimization. Empowerment is a goal of any self-defense class taught from a feminist perspective, whether or not it is specifically geared toward survivors. Therefore, women who take such classes are likely to make some gains in personal power. The focal class included many elements of a feminist self-defense curriculum.

Additionally, the class included activities geared specifically to the unique needs of sexual assault survivors. The remainder of this section will discuss some of the ways that the class moved toward its goal of empowerment.

The Importance of Having Options

As indicated above, the realization that one has options and the knowledge of self-defense skills is a source of empowerment. RaeAnn discussed that aspect of empowerment in our interview following the class:

I really enjoyed the self-defense more than I thought I would. I didn't think it would do any good, honest to God. There is a part of me that, because people have said that before, that unless you go get a black belt you are not going to be able to do anything. That's just not the case. You really showed us things that are really important.

Also knowing that I have a couple of techniques that I can keep my head about me and being able to feel that I could do some of the techniques [gave more confidence]. I used to be more athletic so I thought I would be able to do some of them. I used to be strong enough to do certain things and that gave me a confidence, but I have lost a lot of that confidence because I am so out of shape. But learning the techniques helped a lot. I was amazed. I did not expect how effective those things were (Interview transcript, 5/11/89)

In the quote above, RaeAnn indicated two important points. First, she began to realize through learning and practicing that the techniques could be effective. Second, having the options of effective techniques increased her feelings of confidence. Increased feelings of confidence are considered critical in the process of empowerment (Smith, 1981).

The Importance of Making Choices

Many victims of sexual assault feel that all control has been stripped following the assault (Katz, 1984; Ledray, 1986; Maltz & Holman, 1987). An important aspect of healing is learning to regain control in one's life. Katz (1984) reported that following her assault and while waiting at the hospital, a friend asked her if she wanted coffee. Katz (1984) replied that she did not want any and her friend brought her a cup of coffee anyway. Even a decision that minor felt as if it had been taken away from her.

Cognizant of the importance of control in the healing process, the teaching team provided students with choices whenever possible (as discussed previously in Chapter Five). As part of the goal of empowerment, choice was built into the curriculum wherever possible. For example, rather than telling students to shut their eyes on a self-defense drill in order to increase a sense of reality, I would instead say:

If it feels safe to you, I want you to shut your eyes if you are the defender. If that does not feel safe, then try looking toward your partner's feet. If you need to, you can look directly at your partner's eyes; however, I want you to start looking further down each time we repeat this move (Fieldnotes, 1/30/89).

Part of the reason for giving students choices was to ensure their own feelings of safety. I was also indirectly encouraging their own empowerment. By allowing them to decide for themselves what felt safe, they were making choices, exercising their choices, and being responsible for

themselves.

In her follow-up interview, Cheryl focused extensively on the connection between empowerment and being responsible for herself. Taking responsibility for one's self is essentially synonymous with being in control of one's own life. When asked how she would define empowerment, Cheryl responded:

I think empowerment is finding and utilizing the power that you already have. I don't see it as something that you never had, at all, and suddenly you have it. I think everybody has the skills to take care of themselves. It's just a matter of deciding that that's something you're going to do for yourself, and doing it. I think it means acknowledging that you're a woman living in a world where women aren't safe, and understanding that that's the case, but not taking it to the extreme where you're afraid all of the time. I think it just means being aware of what the world is like and knowing that you have to kind of live in that, and you have to do what it takes to get around the disadvantages (Interview transcript, 5/2/89).

Cheryl believed that personal power is a part of everyone, although some are better able to recognize and use it than others. The power in this case involved the physical power and skills to take care of one's self.

The Importance of Acting on One's Choices

Several of the students in the focal class defined power as being more assertive. Jacleen discussed the importance of being able to define boundaries and being able to use confrontation to defend those boundaries. In her follow-up interview, I asked Jacie how the self-defense class related to her own healing process.

As we come away from it, I think it has impacted

me more and more. In very concrete ways it makes me feel very assertive and it gives me concrete language and techniques to handle situations...like separating and knowing where my body's boundaries were. Working with children, my physical contact is often infracted. But I know now that I can allow limits with children that are not the same with other adults. And when another adult gets too close, I can step away. Especially in that familiar situation with people standing too closely, I can go through my head--is this uncomfortable for me and is this person uncomfortable for me at this particular distance? How can I step back from that? It gives me a back up in a threatening situation, what would I do? I have a series of skills I can rely on and that, like when a panic attack comes on, I say "okay, feel it, but here's what you can do" (Interview transcript, 5/16/89).

She added more about the importance of confrontation by saying:

I talked about the confrontation and how that has backed me up. And that has come up in a lot of situations where I've had to say, "No, that's not an appropriate way to handle this situation. I know that's not an appropriate way for you to speak to me" (Interview transcript, 5/16/89).

In response, I asked her if she had been able to confront prior to the class. She said:

No, and I would put it like, 'I know how you are feeling' in a very pansy way because I would feel threatened. What if they told me I was wrong? Or what if they pursued it? What do I have to back up? The confrontation techniques, it's not going to escalate to a physical aggression, or if it does, I have some techniques (Interview transcript, 5/16/89).

Kari also discussed the importance of learning to confront. However, she emphasized more the feeling inside herself rather than the actual confrontation of another person:

I think just kind of feeling inside that I could say "no", that felt really good. It's kind of like an inside kind of thing, cause I think, (pause) when I first started I wanted to just kind of do everything

kind of quiet, and it was like the little kid in me feeling she couldn't...you know, say "no" to stuff and I think I got some confidence inside (pause) the little kid in me realizing, hey, I can fight back, I can say "no," and I mean, I don't feel stupid about it, but I can feel sharp about what's going on around me, just kind of an awareness that I feel like I developed (Interview transcript, 5/2/89).

There are several key points to emphasize concerning the above quotes. First, Jacqleen felt it was important to have options. She talked about the onset of panic attacks and her new ability to calm herself down by reminding herself that she had options, she had "a series of skills" that she could rely on. Second, Jacqleen also felt more assertive in being able to make choices about boundaries and act to protect those boundaries. Confrontation played a key role. She could confront someone on inappropriate behavior, perhaps a boundary violation. Prior to taking the class, she was not able to confront because she was afraid she would be challenged. Now, even if she were challenged, she had specific strategies to support her confrontation. Kari discussed the inner confidence that came from her perception that she could say "no" and fight back. As a child, she had never been able to say "no" to her abuser or to fight back. Now she felt that she had the confidence to act in those ways. That confidence, or empowerment, felt good to her.

The Importance of Having Role Models

As the self-defense instructors, Jen and myself served as role models for class members and, as such, modeled

empowerment. Class members discussed this aspect of empowerment in a variety of ways. Several students spoke of trying to move like Jen or myself. Most often mentioned was the amount of power we were able to generate in our movements, as well as the grace and flow of our movements. Jacqueleen referred to the role modeling of the instructors in her final interview:

You are a black belt and are so precise and you are also graceful. But the way it was executed and the way you provided confidence and lots of feedback, both verbally and non-verbally, that was a real confidence builder. It was something to work towards, not something to measure myself against (Interview transcript, 5/16/89).

As indicated in the discussion concerning Performing Forms, role modeling by instructors was not always positive. Margaret became very frustrated when comparing her movements to mine. Thus, role modeling was both positive and negative. The key seemed to be reflected in Jackie's statement: "It was something to work towards, not something to measure myself against." Jen and I tried to provide positive feedback and encouragement in order for the students to feel good about their movements. The fact that all the class members were doing the same moves in much the same ways also provided people with important feelings of comradery.

In addition to the role modeling that instructors did, class members also served as role models for one another. Role modeling occurred during self-defense partner work but also occurred during some group activities. The theme guiding one session focused on the different ways that

individuals had already worked toward healing. In this session, individuals took approximately ten minutes to tell others what they had done that worked well for them as they moved toward healing. Class members were recognized as experts in their own healing process and shared their expertise with others. In my fieldnotes for that session, I called it our "show and tell" theme. Class members brought in a variety of materials to share with others about their healing process. Some brought inspirational books they had read. One woman brought her journal and discussed how important it was in her healing. Another student read samples of the poetry she had written about her healing process.

In planning the focal class, the teaching team felt this theme important. In many traditional approaches to therapy, knowledge concerning the healing process is typically perceived as the domain of the therapist--she/he is the expert. The approach fails to recognize survivors' own knowledge of their healing needs. We wanted class members to recognize their own expertise and share it with others. Thus, class members role modeled the healing process for one another.

Learning to Use One's Voice as an Example of Empowerment

Empowerment seemed to be experienced by the participants in several ways throughout the class. First, these women learned that they had effective options within par-

ticular drills in the class context, as well as in "real life" situations. Second, they made choices from among these options. Third, they practiced acting on those choices and being responsible for themselves. Examples of such action included the use of confrontation and the ability to speak assertively in defense of boundaries, integrity, or ideas. Fourth, interacting with other women who were taking these important steps seemed also to be an important means of empowerment. In this section I will describe an example from the class of the realization of these aspects of empowerment--learning to use one's voice.

The ability to use the voice seems an essential part of the healing process as survivors of sexual violence often experienced being silenced as part of their abuse. Young victims of sexual abuse have no right to say no to their adult perpetrator. Adult survivors of rape also feel helpless when confronted with the reality of rape. Recovering the voice and the right to say "no" seems to be a critical aspect of learning to take back control rather than being controlled by the experience of assault.

The voice can be a powerful weapon. In the previous section, Jacqie and Kari discussed verbal confrontation as one means of feeling more assertive. There were also many opportunities throughout the class to use the voice in various ways to defend oneself.

Margaret discussed a different use of the voice to yell as it contributed to feelings of empowerment. She reflected

on a drill in which class members were asked to yell "No!":

I thought about how everybody was behaving in that last class; we were all using our voices as a forceful weapon. And I thought about the first few weeks when some of us, including me, could hardly talk at all. I couldn't make any sound come out. And I don't know when that happened, but somewhere along the way it happened and that was a big change for me.

Jayne: How do you think that was a big change?

Margaret: Because it was so hard to do and it seems to represent alot about taking my own power and not being afraid of it (Interview transcript, 5/9/89).

Margaret equated the ability to yell with becoming more powerful and not being afraid of that power. Becky also described the importance of being able to yell. For her, the ability to yell "NO!" meant that she had some rights.

The exercise where we yelled "NO!," I have never done that. I had a real sense of this is my body, I have rights (Interview transcript, 6/8/89).

Becky talked in detail about a particular kind of yelling, or what is also called doing a "kiay." I am including that entire segment from my interview with her. While it is fairly long, it seems to be a very important commentary on the power of the voice.

When I took that other karate class, I would do these little kiays like "don't hear me." I always timed them so everyone would be saying them at the same time so I couldn't hear my own. That has definitely changed. In fact, in the beginning it felt funny to be sometimes the only one yelling. It also got so I liked that and it felt good to hear that sound come out of myself. My kiay, now when I let out the noise, is much stronger, deeper--I wouldn't want to tangle with myself.... And I have been doing something now since the class that I wasn't aware of and I think the class has been instrumental in helping me be aware of it. There are often days that I can feel as if I have a yell here or sobs caught here [she pointed to her chest area] and then I can say I need to get those out. Often what I do, I go into my bedroom and once at work I went into the gym, and just yelled "NO!" I'm learning

that when I am feeling frustrated and when I'm feeling all the world is coming at me and I don't want them coming at me, if I just stand in front of the mirror and yell "NO!" it just releases enough energy. I don't know, I come away feeling stronger and I am more able to cope just screaming "no" a couple of times. It was the one thing I wasn't able to say as a child, even when I was being raped or mutilated. And if I fought back I was told that's not right and in fact when I said that, I saw a hand come down and hit the shit out of me. Now I tell my inner kids "It is okay, you can say 'no' and you can scream no until the world ends." I think that might tie into why, it just hit me because at work I am finding myself saying no to my boss--this is not right, you are off course here--and it's this practice of looking in the mirror and yelling no at myself, this just isn't going to be anymore (Interview transcript, 6/8/89).

Becky had found a tremendous value in learning to yell and use her voice assertively. She felt that she had sufficient energy to cope with people or problems that seemed to be crowding in around her. She also felt stronger being able to yell loudly. Becky also described a carry-over of that strength and coping ability to her interactions with her boss. She had become more assertive in voicing her own opinion at work, even when it seemed to conflict with the opinion of her superior. Yelling was important enough to Becky that she had continued using it as a coping strategy after the class was finished. She summarized her own feelings about yelling and the power of the voice in the following manner:

It's a safe feeling. I just realized it ties in with my feelings of helplessness and vulnerability. I don't feel so helpless and I don't feel so vulnerable. That's also, I just realized, tied in with standing up to bosses. I often felt totally helpless and totally vulnerable and instead of fighting back, I just shut down and go away and make myself a doormat. And I'm not doing that (Interview transcript, 6/8/89).

Clearly, the ability to use her voice in a very assertive way was empowering and carried over into other areas of Becky's life. She no longer felt like a doormat. Rather than feeling helpless and vulnerable, she now felt safe.

This example illustrated many important aspects of empowerment. There was another important way in which the class contributed to feeling of empowerment. Earlier in this section, physical strength was identified as a form of personal power. The focal class included intentional efforts to increase physical strength. This form of power is very closely linked to the next theme presented in this section of the chapter--the importance of physicality as part of the healing process. Empowerment experienced through working with the body will be discussed as part of the next theme.

Physicality in the Healing Process

In the second section of Chapter Five, the importance of physicality in the healing process was introduced, though this idea was not developed at that point. I stated that Traditional therapy and therapy groups address the same issues of sexual assault. However, because the physical component of this class included self-defense training as a means of empowerment, our approach was unique. In this section, I will discuss the more general concept of physicality. Clearly, self-defense training is physical and therefore a part of this more general concept. However, in

this section I will focus on other physical aspects of the class and their importance in the healing process.

The Importance of Physical Activity

Simply being involved in a physical activity seemed to be an important part of the healing process for the class members. Already in the second class session, RaeAnn told the group that she seemed to be moving into a new phase in her own healing process. She said that she had only recently begun feeling anger. She felt that this was triggered by a very powerful dream and related to the class because the class was physical. Sue asked her to explain how being physical and being in touch with her anger seemed related. RaeAnn explained that she had been involved in sports when she was younger and had always had trouble controlling her temper in those settings. She thought that perhaps being involved in a physical activity again triggered her feelings of anger for her. Thus, for RaeAnn, the physical activity seemed to trigger and intensify access to her feelings.

Other class members also related involvement in a physical activity to particular aspects of their own healing. For example, when I asked Cheryl which parts of the class seemed most important to her, she responded in the following way:

I wish the self-defense parts had been longer,
(laughs)...that was really the part I enjoyed the most.
Jayne: Why do you think that you enjoyed it the most?
Cheryl: Because it was real physical, and it was doing

something. So much of therapy is just sitting around and talking and not doing anything. But, being able to actually be in motion.... It's progress, and it's learning. And you're doing something for yourself that's hard to do. And I saw myself taking responsibility for my own safety (Interview transcript 5/2/89).

In the above quote, Cheryl pointed to the importance of being physical as part of her own healing process. Part of the importance for her was in being able to learn something that she found challenging and that also allowed her to take responsibility for her own safety. That sense of responsibility also counters feelings of helplessness that seem prevalent in many survivors of sexual assault. Cheryl was learning to depend on herself rather than depending on someone else.

Many class participants were much less comfortable with the physical activity of the class. Kari, for example, explained to the group that being physical "unnerved her" (Fieldnotes, 1/16/89). Therefore, as a means of coping with having to be physical, she concentrated on simply following directions and "going through the motions." She told the group that she felt mechanical and tried to feel very little emotion. While Kari's response to being physical seemed different than either RaeAnn's or Cheryl's, hers was not unusual. Some of the class members were very challenged, both physically and emotionally, by the self-defense portion of the class.

As a teaching team, we discussed the difficulty of moving directly from self-defense into the group portion

because of responses like Kari's. Kari found herself needing to shut down emotionally to get through the self-defense. She described herself as becoming very mechanical and simply following directions. If that is a coping mechanism that a survivor uses to meet the challenge of the physical aspects of self-defense training, it may be very difficult to "switch gears," and be ready to focus on the feeling and emotional part of the personality for the sharing in group. This problematic aspect of the class structure will be discussed in the next chapter.

The Importance of Getting in Touch With Your Body

As indicated in the previous chapter, many survivors feel acute alienation from their bodies. Several class members experienced various effects of this alienation. For example, both Gerrie and RaeAnn had difficulties with excessive food consumption and talked with the group about their weight. Kari was unnerved by physical activity. Jackie felt that she had never been in touch with her body as a child or as an adult. In an interview she said, "In sporting events I feel I'm the one with two left feet and the gracefulness of a cow" (5/16/89). None of the class participants described themselves as physically active when the class began, in spite of previous athletic experiences for some of the women. For each of these eight women, the class represented the only physical activity in their lives at that point in time.

Many class members commented that becoming physically active was an important step toward bringing them in touch with their bodies. The following excerpt from an interview with Jacqleen illustrates the importance of being physically active in ending some of the alienation from the body that survivors often feel.

Jayne: Was the physical component of the class important for you in any way?

Jacqleen: Yes, because I had in my past been very fragmented and my physical sense is very separated from my emotional and intellectual. In high school I was very gifted intellectually, but in athletics, I avoided them at all costs and that made me feel like I was a separate person. I think being semi-forced into a situation where my mind and my body had to work together helped me to see that as a whole person. That brings on a whole integration of who I am (Interview transcript, 5/9/89).

Becky also talked about the class in terms of her relationship with her body. She, like Jacqleen, felt better about her body partly as a result of the class. Unlike other class members, Becky had already come to realize that she needed to be more self-nurturing of her body. She had previously taken a yoga class and was also trying to adopt more healthy eating habits. She said the following:

I think I like my body more. I think I am able, and again I don't think it was this class alone but a number of things that I am doing, but I am able to look in the mirror and say this is me and I like this person.

I think one of the things [that I learned through this class] was that I could work with my body instead of against it. There is a lot of sadness there. I think because of the incest and the pain as a child that I got to see my body as the enemy because it was what hurt. It was what told me I was raped.

I think the class helped me take one more step in caring for my body--being able to look in the mirror see where I am getting muscles where I didn't have

muscles before. Finding I have these little pads on my knees because I have been working out more. It's the visual, looking in the mirror and saying, hey I like these muscles and this body is a friend to me. When I think about that there is a lot of sadness because of that loss. I'm almost 45 years old and I'm just now integrating with my body. I'm angry there (Interview transcript, 6/8/89).

Clearly, Becky and Jacqleen both felt that the physical component of class--the ability to work out and to be physically active--was important in giving them a sense of connection with the body. Becky talked about looking in the mirror and liking the reflection that she saw. Jacqie felt that she had finally experienced some integration between her intellect and her body. Both women related the development of this alienation to their experiences with sexual violence. Thus, for survivors of sexual violence, being physically active may be an important aspect of healing.

While RaeAnn had once been athletic and Becky was currently doing more to care for her own body, none of the other class members described involvement in other physical or self-nurturing activities. Physical activity may be important in the healing process, but because of the alienation produced by the assaultive experiences, and because of the lowered self-concept that many survivors experience, it seems unlikely that many survivors will engage in physical activity on their own. In preliminary screening interviews, none of the class members had identified the physical activity as being a primary reason for taking the class. However, most of them talked about the importance of working

out and being physically active in their follow-up interviews.

Theberge (1988) described sport participation as a means of empowerment for women. While self-defense is not classified as a sport, it certainly demands physical exertion and provides women with the opportunity to engage in strenuous physical activity. Additionally, because the pilot and focal classes began with a physical warm-up that included flexibility and strength building, the class members had the opportunity to develop some degree of physical fitness. As Becky indicated, seeing muscles where there had been none and knowing that she was taking care of herself physically made her feel better about her body and thus, about herself. Therefore, overcoming the feeling of alienation from one's body may also have contributed to the enhanced self-esteem of class members.

The Importance of a Sense of Community

The physical nature of the class contributed to its uniqueness from more traditional styles of group therapy. Many of the self-defense drills necessitated working with a partner. Students had physical contact with each other through those drills. Thus, while in traditional therapy groups most of the communication is verbal, in this class this was combined with many avenues for non-verbal, physical communication. As an instructor, during drills I consistently asked students to check with their partner about how

intense or fast they wanted to practice particular moves. They learned to read body language and facial expressions while working with one another.

Additionally, the physical partner work seemed to enhance a sense of trust and community in the group. Kari expressed that aspect of the class in her interview. She said:

I think all the physicals have helped. It was like a confidence builder--all the kicking and things and practicing with another person. Because it felt good to be able to work with somebody else, and different people to work with. I mean, some people it worked out better to work with, and some people didn't. I realized that I didn't work with that person. So I had the freedom to choose, and everyone got to choose how they wanted to learn things. Lin was like, if you want to get--fight back, choose [to work with] Lin. (Interview transcript, 5/2/89).

In the above quote, Kari made several important points. First, like others in the class, learning self-defense gave her more confidence which is related to the concept of empowerment. Second, Kari enjoyed working as partners with other class members; but as part of that partner work, it was also very important for her to be able to have choices. She realized that she worked better with some class members than others. She also chose her partners on the basis of the type of challenge she wanted on that particular night. In general, self-defense instructors often have students change partners between every drill, and that is often accomplished in a very expedient manner by simply having one group move down and face a new partner. Participants in those classes do not necessarily have control over who they

will work with as a partner. In the survivors' self-defense class, the teaching team was much more cognizant of providing class members with choices in almost every aspect of the class structure. Students found that choice to be very important as indicated in the above quote and previous discussions focusing on the issue of control.

RaeAnn also expressed her feelings about the physical work with partners in the following way:

Another thing I thought was valuable was if we had just gone in and plopped down somewhere and talked it could get very heavy. I think the physical stuff helped to get people feeling more comfortable. Having to touch somebody physically helps break the ice a little bit. So when you are doing this physical kind of stuff, switching partners helped too. Even though I preferred certain partners, I think it was good to go through some of the routines with each individual because there is something about touching someone that helps you to not feel as distant from them in some ways (Interview transcript, 5/9/89).

I asked RaeAnn if touching still felt comfortable even when some of the moves were aggressive grabs. She had not been bothered by being grabbed or by grabbing someone else because she knew that was an important part of learning. However, some of the other students did report that being the attacker seemed very difficult to them. They felt uncomfortable grabbing someone hard or trying to be realistic. Most reported that playing the role of the attacker was more difficult than being attacked themselves in most cases.

Breaking Boards as an Example of Issues of Physicality

The physical component of the class seemed to involve

several dimensions important to the healing process. First, for some class members, the physical activity triggered feelings that were ultimately helpful in terms of further healing. For some, however, being physically active was initially uncomfortable. Second, being physically active brought people in touch with their bodies, thus ending some of the alienation they had previously experienced. Third, the physical exercise that was part of the class increased a sense of physical power, thereby increasing empowerment. Finally, the physical nature of some of the partner work seemed to help bring about a sense of community in the group that was not part of traditional therapy groups. Below I will describe an example which concretely illustrates these important interrelationships among the varying aspects of empowerment and physicality.

Empowerment and physicality were interwoven across many class activities. In addition to the more subtle ways in which the class contributed to the empowerment of the participants, we also dealt with the physical aspects of empowerment in a very explicit manner on the last night of the focal class. There were no new self-defense skills taught that evening; rather, the session served as a review of the skills that had been presented over the twelve weeks. The review was intended to reinforce how much they had learned and what they could recall in a very short span of time. The ability to quickly recall skills and use them effectively, even twelve weeks after some were first learned, was

hoped to serve as a confidence builder for class participants and thus as a means of empowerment.

In group that evening, the discussion theme was the concept of empowerment. Sue explained that there were many ways that people might feel empowered in their own lives, and she asked if anyone wanted to share ways they had learned to feel empowered. Several class members shared activities that they felt were empowering.

Following that discussion, I explained that empowerment seemed to be an intangible quality. We could recognize it when we felt it, but it wasn't necessarily something we could describe in concrete terms. The following vignette describes the activities which followed:

Breaking Boards

I explained to the group that one form of power that was more concrete was evidence of physical power. I added, "We have worked on physical power during the entire 12 weeks in different ways. Tonight we are going to experience the physical power that we have worked on all class long in a very concrete way. We are going to have the opportunity to demonstrate our power [pause] through [pause] breaking [pause] boards."

I paused between those last few words because I was having trouble just coming out and saying what it was that we were going to do. Finally, when the words came out, I saw eight shocked faces. Their expressions reflected disbelief.

I went on despite the expressions on each face. I explained that in many martial arts practices, board breaking is routinely done to demonstrate power. From my own reading on the topic, breaking through a half inch board is equivalent of breaking a human's rib. While we did not want to inflict pain on another person, if our safety depended on it, we wanted to know we had the power to effectively stop an attack. Each of us would have the opportunity to break a half inch board.

I further explained and demonstrated that we would be placing the board on two bricks. We would be kick-

ing down on top of the board to simulate an instep stomp. We wanted to make contact with the heel of the foot and we would be doing it with our shoes on.

Prior to actually trying to kick down on the boards, we took some time to prepare for the actual event. I explained, "We want to prepare to the point of overkill so that you are so prepared that the break itself is easy. Now if you do not want to try to break a board, that is okay, but I would still like you to go through the preparation. If following the preparation you feel that you really do not want to try the board break, that's fine. No one has to do that." I then demonstrated how we would place the board on the bricks and how we would kick down so they could visualize the technique during the preparation.

I then passed out a board to each person. Each board was one square foot in dimension. While everyone was still sitting on the floor, we did a brief meditation. I told them to either shut their eyes or place their board on the floor in front of them and look at it during the meditation. During the meditation, I led them in a vivid visualization. "You walk up to the board and the bricks, and you look down. You carefully line up the grain of the wood and picture where your heel will strike down. You slowly raise your leg so that your foot rises above the board. You slowly lower your leg directly over the spot you have picked out in the middle of your board so that your heel touches that spot very precisely. Again, you pick up your leg and lower it in a similar manner, being sure of your accuracy and concentrating on gathering your power at the same time. One last time, you slowly raise and lower the leg. Finally, you raise the leg one more time, but this time, once it reaches the top of the chamber position, you send it down with great speed and power, thinking of sending your foot not just to the board, but all the way through it and down to the floor. The board breaks easily in half."

Following the meditation, each person was able to practice the exact movements described in the meditation using a thick foam shield. As the women practiced into the shield, Jen and I walked around and gave them feedback about their placement, speed, and striking. By this point I was feeling quite nervous. I really did not know if folks would be able to break the boards and I did not want anyone to fail.

Following the practice, I asked if folks were ready. Gerrie said that she chose not to do it because of the bunions on her feet. Everyone else decided to try. Margaret suggested that I go first. I just smiled and said I thought someone else should start. Jen volunteered to go first. She placed her board carefully between the bricks. She took several

placement tries before she sent her foot crashing down for the actual break. The board easily split in two. The whole group had been watching and immediately broke into applause. One by one, each person volunteered to take her turn. Every person was successful. Cheryl came down so hard on her board that it actually split into four different parts. Each person got wild applause from the rest of the group after the board split apart. Each class member then gathered up her split pieces and carefully tucked them away for safe keeping. They all took their pieces home. RaeAnn asked each of us to sign her broken pieces of board (Fieldnotes, 3/27/89).

I felt tremendous pride in the accomplishment of each class member. I believe they were also proud of what they had done, evidenced by the fact that each person took her board home and in a later interview, Jacquleen told me that her pieces of board were mounted on her bedroom wall.

Thus far in this chapter, the reader has been introduced to two overarching themes that seemed to transcend any one healing issue. The first theme focused on the concept of empowerment and its importance in the healing process. The second theme presented the importance of physicality as part of the healing process. The final theme that will be addressed in this chapter will focus on the constant struggle between empowerment and the need for a certain amount of caretaking. I called the struggle, "the fine line."

Caretaking Versus Empowerment: The Fine Line

Empowerment through self-defense training is evidenced in several ways. In the first section of this chapter, I discussed that empowerment for class participants seemed to result in the learning of self-defense strategies, being

aware of options in various situations, including when faced with an attacker, and being able to act on their choices). The belief that one could act on their choices is crucial in developing empowerment. Throughout the class, instructors modeled these positive steps. Over time, class members came to serve as important role models for one another as well.

While Chapters Five and Six have thus far described the focal class primarily, the pilot class is also discussed in this section because our responses to the tension of the "fine line" changed significantly from the pilot to the focal class.

The Dilemma Over How Much Realism

Some women who take self-defense classes go through the motions of physically learning self-defense skills, but never come to believe that they could actually use the techniques if faced with a threatening situation. Realistic practice is necessary to develop confidence in the techniques and the ability to use them in a real situation. However, too much reality can be overwhelming, particularly for a survivor of sexual assault. Most of the women discussed fear as being an issue that they had to deal with as part of their healing process. Realistic scenarios and practice situations tend to increase these feelings of fear and anxiety. Additionally, participants were at varying levels in their own healing processes. Some women seemed ready, and even eager for more realistic practice; others seemed

to have great difficulty practicing some of the skills in very controlled and carefully staged drills. Therefore, it was difficult for the teaching team to know how much realism to introduce in particular drills.

As a teaching team, we began to use the term "the fine line" to refer to dilemmas such as this. The fine line regarding realism seemed more apparent during the pilot class than during the focal class. We often struggled during the pilot class over what was good or appropriate to do in terms of realism. Many of our teaching decisions and discussions centered around the topic of realism. We did not want to overwhelm anyone and were consistently aware of the possibility of doing so. Additionally, we all had differing ideas as to what might be overwhelming.

One of the lessons that the teaching team learned during the pilot class had to do with the issue of control. Through all of our discussions and planning, we tried to take on much more control and power than was appropriate. Rather than relying on the class participants to take some responsibility for themselves, we were trying to assume all of it. As Sue later pointed out, that was too great a burden for us and not respectful of the class members. Our goal was that of empowerment, but we were trying to maintain all of the power concerning what was best for class members. During a phone conversation, Sue said the following:

We can't constantly be worried about doing the wrong thing versus the right thing. Nor should we take full responsibility--that is even a false sense of power.

We don't have control over how anyone else perceives us. I think it would be best to do things the way we would in any regular self-defense class. We've had survivors in those classes, whether or not we knew it, and what we did was okay (Fieldnotes, 5/10/88).

The Dilemma Over How Best to "Help"

The frustration that the teaching team seemed to be feeling is not new to those who work with survivors of sexual violence. Considerable research has been conducted concerning the dilemmas in philosophy surrounding the battered women's movement and the operations of shelters (Schechter, 1982; Schuiteman, 1986). Schechter (1982) provided a detailed account of the controversies that arose between a feminist philosophy of empowerment in the original shelters versus a professional social service agency helper philosophy that emerged as battered women's shelters began receiving more agency funding.

While we never lost sight of our goal of empowerment during the pilot class, we did over estimate how much control we had in the situation and we took on too much of a care-taker's role. Additionally, none of us had ever been involved in conducting a class of this nature. In attempting to teach a class to survivors that included self-defense and group work, we were charting new territory. Thus, all of us were a bit unsure of ourselves during the pilot class. Perhaps in the effort to feel more sure, we were trying to make decisions which ultimately should have been made by classmembers for themselves. Additionally, there were

several discussions between members of the teaching team regarding whether more victimization was brought into the class because it was expressly for victims of sexual assault. Unlike other self-defense classes, everyone involved in this class had full knowledge that each class member had been victimized. Were we bringing in a different set of expectations because of that knowledge? Did we expect less of class members because they had been victims? Was our goal of empowerment diluted as a result of our differing expectations? During the pilot class, Laura, the other instructor, and I talked about the feeling of walking on eggshells. We were often emotionally exhausted following each session. I usually enjoy teaching very much, but at times the energy spent guessing people's needs took all of the fun out of teaching. Thus, I made a decision between classes that I would teach the focal class very differently (i.e., more similar to the ways in which "regular" self-defense classes were taught).

Even in the focal class, we were constantly aware of the fine line running between empowerment and necessary caretaking. However, we had completed the pilot class, we were more sure of ourselves, and were simply more comfortable in letting the class members take responsibility for themselves. As already indicated, rather than trying to assume what was best for everyone, Jen and I were much more mindful of providing class members with options so that they could choose what was best for themselves. I also taught

much the same way I teach any self-defense class in terms of energy, fun, and enthusiasm, while remaining mindful of the fact that students in the class were dealing with very painful issues.

Choices of Partners as an Example of Finding a Balance

Throughout the focal class, many activities involved finding a balance between empowerment and caretaking. Below I will describe two such examples. As previously discussed, class members were at different points in their healing process. As a result, there were differences between class members regarding their readiness for practice realism. Some wanted to be "attacked" realistically by their partner during self-defense drills, others felt overwhelmed by such realism. In an effort to accommodate different student needs around realism and find the balance between empowerment and caretaking, the teaching team offered a variety of possible practice situations ranging from slow controlled movement to simulations of realistic attacks. Students could choose for themselves which of the options felt safe, yet challenging.

Some of the women in the class were never able to be very assertive in the role of attacker, even when their partner wanted a more realistic practice situation. Therefore, we also gave students the option of partnering with members of the teaching team if they wanted to be "attacked" more realistically than their partner was able. Such was the case in the following example.

We had begun increasing reality at one level by increasing speed and the element of surprise. Kari was partnered with Jen during the drill. At its completion she announced to the group that she found it much easier to work with an instructor as a partner rather than other students. She continued by saying the following:

When I practice with other partners, I don't feel as powerful because I am afraid of hurting them (Field-notes, 1/30/89).

Kari looked directly at Margaret as she referred to working with other partners. Earlier that evening Margaret and Kari had been partners during one of the drills. Margaret immediately asked Kari if she felt that way working with everyone else or only with her. Kari explained that she had seen a scared look on Margaret's face and that immediately frightened her. Kari was not as afraid while working with Jen because she assumed that Jen was skilled enough to avoid any technique that came a little too close as the drill speeded up and became more realistic. (Kari had accidentally kicked Jen in the knee earlier and Jen was able to respond quickly enough to ensure that the impact was very light).

The example above provided evidence of one partner backing off from another because she thought she saw fear registered on the other's face. Kari was frightened when she perceived fear from Margaret. Kari found it safer to practice with Jen and was thus able to practice her own skills more powerfully. In almost every drill I gave

students the option of asking one of the instructors to attack them if they wanted more realism than their partner was providing. Occasionally, different class members acted on that option. In some cases students opted to make such adjustments themselves.

Because we gave people options and because so much of the self-defense instruction included partner work, class members began taking responsibility for themselves and each other. The following vignette illustrates the kind of caretaking that occurred between partners during self-defense drills.

Grabbing Harder

The Class was working on the rear choke hold break. Jackie and Gerrie were working together. I had just asked the attackers to start grabbing harder as their partner felt more comfortable with the movement. As I moved around the room giving feedback to different people, I looked at Jackie, who was the attacker, and laughingly told her she would have to take "mean pills" because she was being much too nice an attacker. She looked at me very matter-of-factly and said, "Oh, I will get meaner, we worked this out, I'm going in different stages." Because she had been so matter-of-fact in saying that she would get meaner, I responded by saying that she must have already taken the mean pills. Both she and Gerrie laughed in response. Jackie did start grabbing harder and a few moments later I heard Gerrie tell her that she could start grabbing even harder (Fieldnotes, 2/6/89).

As the vignette indicates, individual class members learned to take care of themselves as well as each other through having options and being encouraged to check with their partners so they would know how to proceed.

The fine line was a difficult line to maintain, however, we seemed to do much better at maintaining our goal of

empowerment and self-responsibility during the focal class than we were able to do during the pilot class.

Chapter Summary

This chapter explored three overarching themes that were part of the self-defense class. Those themes included the concept of empowerment, physicality and its role in the healing process, and the fine line between caretaking and empowerment.

Empowerment was a primary goal shared by the teaching team. In that section, empowerment was defined and described with the context of a feminist framework. Additionally, in describing the concept of empowerment within the focal class, four important processes were identified. In order to feel empowered, students first needed to have options regarding self-defense strategies. The realization that they had options gave them an increased sense of confidence. Second, class members needed to be able to make choices. Class members chose for themselves from among a range of practice options in order to feel safe, yet challenged. In this way they learned to take responsibility for their own safety. Third, class members also had to be able to act on their choices. Students discussed the importance of being able to define and protect their boundaries in the world outside of our class. The ability to use skills in other areas of their lives was very empowering to them. Finally, part of the process of

empowerment included role modeling. Jen and I served as role models for the group, but class members also served as role models for one another. The section ended with a discussion of learning to use the voice as an example of empowerment.

The second section dealt with physicality in the healing process. I first discussed the importance of general physical activity in the healing process. This discussion was followed by an exploration of the importance of integration between body, mind, and spirit and the class' contribution to that effort. The final sub-section discussed the sense of community brought about by the physical activity. Class members worked with each other in most drills which seemed to enhance feelings of trust in the group. The section concluded with an example of physicality in the healing process--breaking boards.

The final overarching theme presented in this chapter focused on the tension created by the fine line between empowerment and caretaking. We wanted class members to feel challenged yet safe while learning self-defense. As a result, we were faced with the dilemma over how much realism to use in practice and how best to "help" survivors of sexual violence in their healing process. In discussing these dilemmas, the section focused on the pilot and focal classes to indicate how the tensions were adjusted from one class to the other. The section concluded with an example of finding balance around the fine line through choices

of partners.

In the final chapter, I will summarize the analysis and draw some conclusions about the role of self-defense as part of the healing process for survivors of sexual assault. In so doing, I will discuss the positive contributions as well as some of the difficulties encountered in the class. Finally, based on the conclusions drawn from the data analysis, I will outline implications for others interested in teaching a similar course, therapists who work with survivors, survivors of sexual assault, and researchers who would pursue a similar line of research.

CHAPTER SEVEN

CONCLUSIONS AND IMPLICATIONS

This chapter is divided into three sections. First, I summarize the findings presented and discussed in Chapters Five and Six. Second, I present a general statement of conclusions drawn from the findings of the study. Here, I discuss some of the positive contributions that self-defense training seemed to make in the healing processes of the eight women who were part of the focal class. I also briefly discuss some of the difficulties or challenges that were associated with the class. In the third section the positive contributions and challenges are also discussed in terms of implications for a variety of audiences: 1) others who would wish to teach a similar class for survivors of sexual assault, 2) other survivors of sexual assault, 3) therapists working with survivors, and 4) those who would continue doing research in this particular area of inquiry.

Summary of the Findings of the Study

Several research objectives guided this study. First, I wanted to document the development and implementation of a self-defense class for survivors of sexual assault. In addition, I wanted to understand the perspectives of those involved in such a class--the individuals who planned it,

those who were part of its implementation, and most importantly, the women who were survivors of sexual violence who chose to take the class. The final research objective was to answer the main research question this study sought to address: What is the role of self-defense training in the healing process for women who are survivors of sexual assault?

The foregoing chapters have provided a detailed description of the development of a survivors' self-defense class (Chapter Four particularly). I presented the contextual nature of the course by describing the agency that sponsored it and its developers and instructors. Additionally, I tried to portray the basic philosophical differences among course planners. Those differences centered around what was ultimately the best strategy for enhancing the healing of women who had experienced sexual violence in their lives. Some of the course planners thought that the curriculum of the class should be significantly altered from "regular" self-defense classes because of the unique needs of survivors; others argued the curriculum should be altered very little because the way in which the class was taught was believed to be its strength. Those philosophical differences permeated the course through the difficulties associated with the fine line between empowerment and caretaking. This was presented as an overarching theme that dominated the pilot class and remained to some extent even during the focal class.

In describing the implementation of the course in the preceding chapters, I discussed the structure of the pilot class, its strengths and weaknesses, and the subsequent changes that resulted in the focal class.

The focal class, as its name implies, was the class that was analyzed in the greatest depth. The pilot class was analyzed primarily to give background to the focal class. The pilot class represented the first effort to implement the planning effort of a group of women interested in providing self-defense training to survivors of sexual assault. As is true of any new endeavor, we learned by doing. We learned what worked well and we learned by "bumping our noses." In structuring the focal class, the class planners tried to eliminate the "bumped noses" and to maintain the parts of the class that had seemed effective. While the self-defense curriculum used in the pilot class remained basically intact, the structure of the focal class experienced some changes. The class was lengthened both in terms of hours per session and total number of sessions. The group portion was more structured, focusing on themes related to the healing process. Subtle changes were made in teaching style that encouraged more student self-responsibility for caretaking and empowerment as compared to the teaching team wrongly assuming all of that responsibility.

While I attempted to gain the perspectives of all involved in the survivors' self-defense class, this

dissertation focused primarily on the perspectives of the women who were the members of the class. My primary research question focused on the role of self-defense in the healing process for survivors of sexual violence. There is a substantial amount of professional literature that has focused on either self-defense or the healing process but has done so primarily from the perspectives of the professionals who work with survivors. The voices of survivors themselves are often missing. Because there seems to be so few descriptions of the healing process from the perspectives of survivors, I felt that their voices would provide a significant contribution to the current knowledge. Thus, this dissertation, as stated in the Preface, is really the story of the women who were part of the focal class. Although I presented the planning, structure, and implementation from the perspectives of the teaching team members, I tried to capture the perspectives of the class members in responses to the course content.

Chapter Five introduced each member of the focal class. The women were introduced in terms of their own experiences with sexual assault, the issues that they found most relevant to their healing process, and their pre-class expectations. As I had anticipated, class members raised many of the same healing issues addressed in the professional literature regarding the healing process. While each survivor's experiences of assault are uniquely her own, there are many common features to women's responses to rape,

battering, or incest that need to be addressed in the healing process. In planning the class, we wanted to address some of the healing issues in the unique context of self-defense training. Those issues included:

1. Alienation from the body and a lack of physical/emotional boundaries
2. Feelings of fear
3. Feelings of anger
4. Feelings of guilt and shame
5. The inability to trust others
6. The inability to trust one's own perceptions
7. Feelings of sadness and loss
8. A lack of balance and integration in one's life
9. A lack of self-esteem

Each of the above issues became the primary theme that guided the self-defense skills and group activities done during a particular session. In addition, the class also used the topics of the healing process and empowerment as themes guiding individual sessions. Thus, there was one theme for each session. The class actually met twelve times. We used the midpoint session to do an evaluation of the first half of the course during group.

Chapter Five provided a detailed analysis of each of the healing issues that became the themes guiding each class. The chapter included descriptions of various self-defense skills taught and group activities that corresponded to each theme. Also included were student responses to those skills and activities in an effort to better understand how those events contributed to the healing process of class members.

Chapter Six transferred the analysis from the micro-

level of individual healing issues to the macro-level of overarching themes that impacted the entire class. The themes presented in that chapter included the concept of empowerment, the importance of physicality in the healing process, and the demarcation of the fine line between empowerment and caretaking.

Empowerment for class members was the primary goal shared by members of the teaching team. Chapter Six discussed the importance of empowerment for survivors of sexual assault, the ways in which empowerment can be realized, and the ways in which the class sought to empower participants. The physical portion of the class included the self-defense skills, a physical warm-up, and some of the group activities. Because the intent of self-defense training is to increase a sense of safety and confidence in the ability to protect one's self, the very nature of the activity is a source of empowerment. However, more general forms of physical activity also seemed to play an important role in the process of empowerment and therefore were seen as an important part of the healing process by class members.

The last theme presented in Chapter Six focused on the fine line between empowerment and caretaking. In that section I discussed the importance of realism in contributing to feelings of confidence in practicing self-defense skills. However, realism can also feel overwhelming to someone who has already experienced assault. Thus, as a teaching team, we constantly walked the fine line in trying

to determine the degree to which we could challenge the members of the class.

Conclusions

The primary research question that this study sought to answer was the following: What is the role of self-defense training in the healing process for women who are survivors of sexual assault? In answering that question, it was important to determine not only what the course developers, in their own professional expertise, thought was important for survivors of sexual assault, but to determine what the class members--survivors of sexual assault--thought was important for them personally. In drawing conclusions concerning the course and its role in the healing process, I will focus on the uniqueness of this class in its approach to both therapy and the concept of self-defense, thereby making it particularly beneficial to survivors of sexual assault. First, I will address its uniqueness as a therapeutic tool in the healing process.

Most traditional therapy strategies attempt to bring survivors closer to the memories and feelings associated with their assaultive experiences. A survivor tries to work through these memories and feelings in order to put them in perspective. This helps her regain control of her own life rather than being controlled by her experiences of assault.

The course described in this dissertation was intended to be a supplement and complement to other means of healing

that many survivors pursue. The survivors' self-defense class was not intended to be a substitute for long-term therapy. Twelve weeks is simply not a long enough time period to effectively work through all of the issues associated with healing. Some of the women had been involved in long-term individual therapy and needed a group experience to continue their progress. There are therapy groups available for survivors of sexual assault. However, this class was still very different than most therapy groups in a number of ways.

Prior to the pilot class, the course developers presented 14 ideas about self-defense training for survivors to a group of local therapists in an effort to get support and additional input from those professionals. The ideas served as "hypotheses" or predictions for what we believed self-defense training could contribute to the healing process. The predictions were based on the professional experiences and understandings that each of us brought to the survivors' self-defense class. They represented intelligent generalizations; this study represented the particular expressions of those generalizations. I will use those hypotheses as the basis for making some conclusion about the role of the class in the healing process. The ideas will be grouped and summarized below.

Physicality

Building strength, endurance, and flexibility can alleviate alienation from the body that many women and survivors

in particular may experience.

Self-defense training may promote a mind/body integration. Through the strengthening of the body, one can also strengthen the spirit.

Self-defense training allows for a reclaiming of personal space and the restructuring of personal boundaries.

As previously discussed, the physical nature of the class directly contributed to feelings of empowerment experienced by the participants. Class members had the opportunity to develop physical strength through the warm-up and strength building exercises that were part of each session. Many of the class members thought this led to more integration between body and mind. They also began to perceive the importance of feeling in touch with their bodies and learning to set boundaries that they could recognize and protect both verbally and physically.

Many individuals who have never been victimized by sexual assault take for granted the integration between mind, body, and spirit. However, as Chapters Five and Six indicated, several members of the focal class felt little integration among those aspects prior to the focal class. Two of the women indicated that the connection they felt with their bodies was one of the most significant results participating in the survivors' self-defense class. The survivors' self-defense class made a major contribution in the area of physicality.

Power and Control

Self-defense training contradicts experiences of helplessness.

Instructors of self-defense contradict images of women being passive that are pervasive in our culture.

Self-defense training contradicts society's ideas about women being victims.

Self-defense training decreases the likelihood of the victimization being repeated. Some survivors may also use the training as a means of reconstructing their own experience to see how it might have been different.

The movements associated with self-defense are not only physically vigorous, thereby aiding in the development of strength, but are also physically aggressive. Class members used powerful techniques such as hold breaks and strikes designed to deter sexual assault. Practice of those techniques was done on large punching bags and shields so that class members could develop and feel the power their body was capable of generating. In learning those skills, the students came to realize that they were capable of hurting someone else and capable of defending themselves. During the fourth-class session, Cheryl told the group that she realized that she could actually hurt another person if she wanted to. Sue asked folks how they felt about that realization. Cheryl said that it seemed kind of scary. Becky said that it felt great. She added:

If someone is trying to hurt me, then they deserve to be hurt if necessary. I felt real powerful and that felt really good (Fieldnotes, 1/30/89).

In the same conversation, RaeAnn told the group that she was surprised at how well her body was able to recall the

techniques. She did not think that she would ever be able to actually defend herself and now she was realizing that it was possible.

Through those kinds of realizations, class members learned to depend more on themselves, thus reducing feelings of helplessness. Helplessness is one of the most common feelings that survivors of sexual assault experience (Katz, 1984; Ledray, 1986; Bass & Davis, 1988). Knowledge of self-defense seemed to counter those feelings of helplessness for most of the women who were part of the focal self-defense class.

Cheryl spoke directly about the issue of helplessness and how the class worked to change those feelings:

I think women are given so many messages that they should be helpless, they should be afraid of themselves. You're going against that stuff in a self-defense course. Even more so when you have sexual abuse compounding these societal messages. When you look at the media, the way women protect themselves, I mean, most of the time they don't. It was really funny watching TV after I had taken a few of these classes. Because you know, I was watching these women get grabbed, and thinking immediately, "well, what would I do in that situation?" And, then realizing that almost everything that I was watching was women getting pushed around, and not doing anything. And then some man comes along and saves them, and you know, it's never dealt with that you may have to do something for yourself (Interview transcript, 5/2/89).

In the above quote, Cheryl's perceptions provided direct evidence for the hypotheses that self-defense training contradicts societal images of women as being passive and being victims. Cheryl understood the ways in which society stereotypically thinks about women and the ways in which the

media plays out those stereotypes. However, as a result of her training in self-defense, Cheryl could see that women could learn to depend on themselves rather than on a man who would play the role of rescuer.

While all of the class members reported some increase in confidence regarding their abilities to protect themselves, some of the class members seemed to experience more confidence and empowerment than others. For example, Margaret told me that she believed that she would never be victimized by anyone she knew again. However, she was not so sure about her abilities to defend herself against a stranger attack. She said the following:

I feel stronger that I can protect myself, that I won't be victimized anymore--certainly that I won't be victimized anymore by people that I know. Whether I might be victimized by a violent stranger is a different issue. I feel somewhat able to protect myself, more so than before; but to be realistic, I am still pretty vulnerable, and I think most of us are (Interview transcript, 5/9/89).

The above quote indicates that while Margaret did feel better able to protect herself, she still felt vulnerable, particularly around the possibility of a violent attack by a stranger. Thus, there were different degrees to which class members felt empowered and capable of protecting themselves.

We did not encourage the class members to reconstruct their own experiences, nor did anyone talk explicitly about doing this. As a teaching team, we did not want the knowledge of self-defense to increase feelings of guilt for any of the women in the class. "Replaying" an assaultive

experience after learning self-defense has the potential to be empowering if a woman realizes that she did not have certain skills previously, but that if the same thing happened now, it might turn out very differently because of her new knowledge and skills. However, that "replaying" could produce even more feelings of guilt for not taking certain actions if the survivor is already feeling guilty about her victimization, as is often the case.

Chapter Six provided a discussion of the role modeling that took place in the focal class. Jen and I, as instructors, were visible role models of power and fluid movement. We also tried to role model empowered behavior which included confidence and assertiveness. Class members also served as role models for each other. They became experts regarding their healing processes and shared that expertise with others in the class.

Relating to Other Survivors

Women learn to trust themselves and one another.

The class provides an opportunity for meeting other survivors and talking with one another.

The class provides a safe arena for the processing of certain feelings associated with the training.

The up-beat class allows for experiencing joy as compared to the morbidity often associated with sexual assault.

Several of the class members discussed how important it was to participate in a self-defense class with other survivors. The commonality that they felt with one another was very important. RaeAnn was one person who came into the

class primarily because of the group component. Her therapist had suggested that group experience would be helpful so she decided on the class rather than going into a 12-step type of group that is also available for incest survivors. RaeAnn had some interesting early perceptions concerning a group made up specifically of survivors.

I'm not much of a group person, but had gotten less social as time has gone on so I thought, gosh, I am going to be in a class with a bunch of emotionally disturbed people.... When I first started I thought it was an odd group of people. I looked around and I thought these people seemed kind of an odd grouping, but they didn't seem emotionally disturbed. Actually, they seemed pretty withdrawn. No one was very social. It was three weeks before people started standing in groups of two before and after class. I was just glad that it all worked out. No one seemed pushy or anything like that. I think we all needed to take our own pace for that (Interview transcript, 5/9/89).

RaeAnn indicated that her feelings changed over time and she expressed much strong feelings about the group by the end of the class. She said the following about the importance of being with a group of women with whom she shared the experience of assault in common:

Probably the biggest benefit for me was just being with other women. I had felt the last week like all of us were aliens from outer space, we're from this other planet and we are on this earth because our planet was destroyed or something and we all had this knowledge of it and somehow we have been brought together. We know that we can't acknowledge each other and we can't let anyone know we are all aliens, but for this brief time we can share our experiences and go through some grieving and then we are going to go our separate ways, and if we happen to see each other, we can acknowledge each other like we are earthlings, but we also know there is something we share and that will keep us connected in some way. We know that they are out there pulling for each other but we will never be true earthlings. There is always something there. I connected with these people. I didn't think I would

because I don't tend to trust people and it takes me a very long time to get close but I really did feel genuinely affectionate for all of them (Interview transcript, 5/11/89).

In this quote, RaeAnn described feeling like an alien on earth. She found something so profound in her experiences as a survivor of sexual assault that she saw herself as very different than people who had never experienced assault. She also disclosed that she never thought she would learn to trust these women but did and learned to feel affectionate toward all of them. RaeAnn likely would not have experienced that sort of trust and bonding in a self-defense class that was not geared specifically for survivors. It might be argued that RaeAnn could have found a similar experience in any kind of group as long as it was made up of survivors. However, earlier in this dissertation, I discussed the importance of physicality in the healing process. I would argue that part of the trust that RaeAnn and others experienced resulted from the combination of the class being specifically for survivors and the trust that was required in working on physically aggressive skills with partners during the self-defense drills. Jackie expressed perceptions that provide additional evidence for the argument:

Jayne: How do you think it was that you were able to develop such a sense of trust from those people? How do you think that came about?

Jacqie: A sense of comradeship that I sensed the first couple of times. Just that other people felt awkward and they weren't all athletically gifted. If the precision of the execution on an activity was perfectly matched, I wasn't the only one.... When you get the other people in there who feel that.... And I think their openness has a lot to do with it. I think that

when the other people were able to cry or to express their emotions with such intensity, I authenticated my own too. That made me feel really safe, surprisingly so (Interview transcript, 5/16/89).

Several of the class members said they would not have been able to take a "regular" self-defense class that was not necessarily geared toward survivors. In this regard it also became apparent that these women felt that the group component was a very important part of the class. There were several "regular" self-defense classes offered in the same geographical area but none of the women chose to participate in those classes. Most felt that the group component as well as the fact that the class was made up of other survivors was important.

The last hypothesis in this section portrayed the joy that is possible in an upbeat class. I always tried to be very upbeat in my teaching style, more so in the focal class than in the pilot class. When teachers feel little joy in their teaching, students will feel little joy in their learning, particularly in a self-defense class. The realities and fears associated with sexual assault present difficulties for most women. Thus, it is especially important that self-defense instructors bring energy and joy into the empowering aspect of self-defense training.

In the pilot class I experienced considerable anxiety over the fine line between empowerment and caretaking. As a result, I lost much of the joy I had always associated with teaching. The pilot class contained less energy and joy

than most of the self-defense classes that I have taught. It seemed very serious and there was little laughter or joy expressed. In contrast, the focal class seemed to have a lighter atmosphere even though many class members found aspects of the class very difficult. Class members often joked with each other during the warm-up. Several of the class members also established friendships that extended beyond the class. One evening three women announced that the following week, after class, they were going dancing. They asked if others wanted to join them. Five women went dancing the following week. Thus, friendships both in and out of class provide evidence of the bonding that occurred between class members and also provide secondary evidence that class members experienced enough joy around each other so that they wanted to establish those relationships.

The last set of hypotheses focus on the unique contributions that self-defense training seems to make to the therapeutic process. As previously mentioned, the survivors' self-defense class was intended to serve as a complement to other healing strategies, not as an only means of healing. As a compliment to regular and ongoing therapy, self-defense training seemed to accelerate certain aspects of the healing process.

Relationships to Therapy

Aggressive movement offers an opportunity to redirect inner emotions in an appropriate and constructive manner.

The process of empowerment can be helpful in memory searches around incest.

Yelling releases anger and it is important to hear one's own voice sounding powerful.

Chapter Five contained an extensive discussion regarding feelings of anger and their role in the healing process. The ability to feel anger is critical if a survivor is to move closer to healing (Bass & Davis, 1988). However, there are few positive outlets for anger in our culture, especially for women. Therefore, many angry feelings may be directed inward, becoming destructive, because they have no other outlet.

Most self-defense skills, by their nature, are very aggressive. The teaching team believed that learning and practicing highly aggressive skills would serve as an outlet for anger. As discussed in Chapter Five, practicing strikes against the punching bags did serve as an outlet for anger for class members. However, very few other drills allowed for the expression of anger in the same way. As already discussed, partner work had its strengths and weaknesses. Partners often did a considerable amount of caretaking in working together. While such behavior can be thought of in positive terms, it also had its drawbacks. Partners were often concerned about not overwhelming one another and therefore, did not always practice as realistically as they might have otherwise. Some class members also found it difficult to express anger in front of others at all. Cheryl was a perfect example.

Prior to the focal class, Cheryl expressed hope that

the class would help her deal with her intense feelings of anger. Cheryl put a tremendous amount of energy into the self-defense training. She generated power in her techniques, and generally practiced at a more realistic level than most other students. In her follow-up interview, I asked her if the class met her needs concerning her anger.

(sigh) To be honest, not as much as I had hoped. And I think part of that was that it wasn't a long enough period to get to know everybody.... And it was just too scary to get angry in front of all those people. I have a therapy group that I go to on a real regular basis that I was going to while I was doing this. And I'm the same way there, too. It's real hard. I can't (pause), I (pause), it's hard to get angry (Interview transcript, 5/2/89/).

Even though Cheryl had identified anger as a primary issue that she needed to address in her healing process, she found it very difficult to express her anger in front of other people.

Overall, I believe the survivors' self-defense class made positive contributions to the healing processes of the class members. However, there were several weaknesses, or challenges, associated with the class that also need to be addressed as part of the conclusions.

I have already discussed the difficulties associated with the "fine line." The constant tension between empowerment and caretaking was a challenge faced by both the teaching team and class members. There were times when some women had difficulty practicing with others for fear of hurting or overwhelming them. Additionally, at least one class member felt she could not express anger because she

did not know people well enough. Participants in the study expressed differing perspectives concerning the length of the course. Both Jen and I liked the 12-week course length. Sue felt that 12 weeks was too long a period and preferred a 10-week course. Class members almost unanimously believed there was too little time to accomplish everything.

In each of the follow-up interviews, I asked class members if they felt let down in any ways by the class. I also asked what changes they would make. In response to my questions, Becky reported the following:

I felt like we didn't have enough time, we were trying to do too much too soon. You should open up with one or two topics and go in depth on them. It felt like we were just hitting the surface and then you were ready to go on (Interview transcript, 6/8/90).

Becky's concern over going too fast and trying to cover too much was echoed by several other class members. RaeAnn expressed similar feelings in the following excerpt from her interview.

[The way] we were moving through things, it did seem like, okay, we are going to cure people in 12 weeks. Everybody is going to be well and move through these phases and keep up (Interview transcript, 5/11/90).

The teaching team never believed that people in the class would be "cured" in 12 weeks. We also recognized the fact that healing is not a linear process where progress is always forward. We realized that one session of two and one half hours would not be sufficient time to explore each class theme in great depth. Our goal was to expose class members to different healing issues in the context of self-

defense training. However, we never vocalized those understandings to class members. Thus, some looked at each theme, as well as the order of themes, as presented in the class and felt that we were trying to move people through a linear process of healing in which they would be cured in 12 weeks. In light of that understanding, in future classes, the teaching team needs to be more explicit about the purpose of the class, its themes, and how they are being explored in the context of self-defense training.

Despite the challenges faced in the focal survivors' self-defense class, I believe that self-defense training made a very positive difference in the lives of the class members. This section of the chapter focused on the possible outcomes of self-defense training for survivors of sexual assault generated by the teaching team as they planned for the pilot class. They were intelligent predictions based on professional expertise; but this study represented the actual materialization of those predictions.

In reexamining the predictions, I reviewed and presented some new evidence that supported each of them. In conclusion then, the results of this study indicate that self-defense training does play an important role in the healing process for women who are survivors of sexual assault. The precise nature of the contributions varied according to the individual progress already made in each woman's own healing process.

Implications for Teachers

This study has shown that self-defense training was an important component of the healing process for the women who were part of the focal class. However, it should not be assumed that any self-defense training will be beneficial. The evidence indicates that the focal class provided better support for the healing process than did the pilot class. In thinking about the fine line between empowerment and caretaking, in order for self-defense training to be beneficial for survivors, such training must be taught from a particular perspective using some specific teaching strategies. The perspective and strategies will be discussed briefly below.

The teaching team shared an overall goal of empowerment for class members. However, during the pilot class, we seemed to assume more power and control over the class than we should have. Thus, we did more caretaking than empowering. We made the choices that we thought were best for survivors rather than letting them make decisions for themselves. Clearly, given the teaching team's expertise in self-defense training and the therapeutic process, there were certain decisions that we needed to make as planned for and implemented in the course curriculum. However, we tried to make too many decisions based on what we thought survivors needed in their healing process. We tried to be healers rather than facilitators of healing.

During the focal class, we better anticipated how to deal with the fine line between empowerment and caretaking. Adjustments in teaching style gave more control to the class members. We provided them with a range of options regarding various skills and drills and this allowed them to choose for themselves which of those options felt best and safest. As a result, class members took responsibility for themselves. Such action is in itself empowering, as discussed earlier.

My own approach to teaching also shifted between the pilot and focal classes and thus contributed more to the empowerment of class members. Prior to teaching this class, my own experience with survivors of sexual violence was somewhat limited. As indicated in the introduction to this dissertation, I had taught self-defense for the last six years. However, none of those classes were designed explicitly for a population of sexual assault survivors. Many survivors enrolled in those classes, but often I did not know who they were. The survivors' self-defense class seemed very different to me. I knew these women had all experienced sexual assault. As a result, I believe that my approach to teaching self-defense changed. During the pilot class, I talked to Sue about "victim expectation." Because we all knew that these women had been victimized, did each of us (teaching team and class members) bring to the class additional expectations of victimization?

I felt that I was teaching, wearing "kid gloves"

because these women were victims of sexual assault. Perhaps I focused more on their victimization during that pilot class than on the fact that they were survivors. I anticipated their weaknesses much more than their strengths. I actively sought to change that orientation during the focal class and I believe this shift made a tremendous difference in the tone of the class.

The pedagogical issues discussed above can be framed in the larger context of work currently being done in the development of feminist pedagogy. Feminists often bring a particular perspective to their teaching that encourages the empowerment of their students (Weiler, 1988; Field Belenkey, McVicker Clinchy, Rule Goldberger, & Mattuck Tarule, 1986). In a feminist pedagogy, students are viewed as active participants and creators of knowledge. The following excerpt from Weiler (1988) further explains that perspective:

Underlying these critiques of schools is an ideological view of both knowledge and students that assumes that knowledge is quantifiable and students are the passive recipients of that knowledge. The role of teachers then becomes that of the dispenser of knowledge. As we have seen, the vision of these feminist teachers and administrators is deeply opposed to this view of learning and teaching. Instead, they emphasize that students are knowers and the creators of knowledge (p. 122).

Field Belenky, et al. (1986) used a powerful analogy in describing the role of the teacher which expands on the concept raised by Weiler (1988). The teacher as midwife is described in the passage below.

Midwife-teachers are the opposite of banker-teachers. While the bankers deposit knowledge in the

learner's head, the midwives draw it out. They assist the students in giving birth to their own ideas, in making their own tacit knowledge explicit and elaborating it (p. 217).

In the focal class, the teaching team came to a better realization of the concepts expressed by Weiler (1988) and Field Belenky, et al. (1986). The women who were students in the survivors' self-defense class had many strengths, including an understanding of their own healing process. Our job was to facilitate that process through self-defense training. We were not the "dispensers of knowledge" or "banker-teachers" regarding their own healing. In the focal class, we stayed more true to a feminist pedagogy. Part of the concept of teacher as midwife or facilitator included active choice making on the part of students. They decided for themselves how much they needed to be challenged.

The above discussion indicates that the process of learning self-defense cannot be ignored. In both the pilot and focal classes, women finished the classes with the end product of having learned self-defense. However, the process by which people move toward the end product was different. That process is critical if self-defense training is to play an important role in the healing process for survivors of sexual assault. The process will influence whether or not empowerment truly occurs.

Process not only included pedagogical issues surrounding self-defense instruction but also the entire format of the survivors' self-defense class. Many of the women

indicated that they would not have been able to take a self-defense class that did not include a group portion. While the group portion was very important, the class was structured around self-defense (i.e., it was a self-defense class with a group component rather than a therapy or support group with self-defense training). The group component made the process of learning self-defense training feel safe for women who already experienced great fear in their lives. The desire to feel safe was a primary goal expressed by many class members. Self-defense training alone did not feel safe to many of the women and thus, the group component was a critical part of the process of empowerment.

Implications for Women who are Survivors of Sexual Assault

The process of healing following sexual assault is very complex and difficult--it does not happen quickly. Many survivors spend years trying to overcome the damage that has been done to them. They invest a tremendous amount of energy, time, and money in healing--resources that could have been spent elsewhere in the pursuit of more creative or self-fulfilling endeavors had they not been victimized.

Healing occurs in many ways. Some women choose to pursue it alone, others seek the help of a therapist or therapy group. The survivors' self-defense class represented a very unique approach to the healing process that benefited the women who participated in it. However, the class may not be appropriate for every woman who experiences

sexual assault.

In developing the course, the teaching team listed potential positive outcomes associated with self-defense training that were used as part of the conclusions to the study. Evidence from the investigation indicated that those outcomes were realized for the women in the class. However, the degree to which the women realized those outcomes varied from person to person.

I would argue that some class members benefited more from self-defense training than others. Margaret, for example, believed that she had learned many skills regarding self-protection but she still felt somewhat vulnerable. The contributions of self-defense training seem dependent on where a survivor is in her own healing process before she even comes into such a class. Some women seemed further along in their own healing process and found the class particularly helpful. Other women who were just beginning to work toward healing may have found the class to be less helpful at that point in time.

The women who seemed to benefit most from the survivors' self-defense class were those who had already spent some time and effort in the healing process. They were women who seemed to be very much aware of their own healing issues and had already received some guidance in learning to deal with those issues.

The teaching team also realized that there could be potential negative outcomes associated with self-defense

training. Those outcomes are listed below.

1. Memories of assault might be too recent for some survivors to participate in class drills that paralleled their own experiences.
2. Some women might be overwhelmed by realism in practice situations.
3. Self-defense training might reinforce feelings of self-blame.
4. Some women might have real difficulties being the attacking partner.
5. Some survivors might be horrified, rather than empowered, at the potential of their bodies being capable of inflicting pain on another human.
6. Most women in general have difficulty confronting their own vulnerabilities. We were concerned that some survivors might find that confrontation too difficult.

There were four women who began the pilot and focal classes (two in each class) who dropped out before the classes were completed. I was not able to interview any of those women. However, it was obvious that the class was simply not right for those women at that point in time. Perhaps they were experiencing some of the more negative outcomes associated with the class.

The women who chose to participate in the survivors' self-defense class were strong women who took their healing process very seriously. They wanted to heal. They wanted to expand the ways in which healing could occur, and were willing to face the emotional and physical risks associated with self-defense training. Oftentimes particular skills were very difficult for some women. The skills brought to mind memories of their own assaultive experiences. Some

women experienced nightmares during the 12 weeks that were likely triggered by the class. However, while the class was a major challenge for most of the women, they wanted to attend and they wanted to heal. Survivors of sexual assault, who consider taking a self-defense class as part of their healing process, should be prepared for the joys and breakthroughs in healing that such a class can provide. They need to also realize that aspects of such a class are likely to be very difficult because of the reality of assault that self-defense training represents. Survivors will need to carefully determine when self-defense training may be most beneficial to them in the healing process.

Implications for Therapists

The above discussion concerning implications for survivors of sexual assault also points to certain implications for the therapists who work with survivors. Traditional approaches to therapy are absolutely critical for most women who are survivors of sexual assault. Individual and group therapy has brought many women closer to the healing that they desire. However, therapists also need to be aware of less traditional approaches to healing. This self-defense class represented such an approach.

Self-defense training as a supplement to traditional therapeutic approaches may provide a more complete healing experience than traditional therapy alone can provide. Self-defense training is physical. It allows for

integration among the mind, body, and spirit that traditional therapy may not be able to do. Most therapeutic approaches seek to empower clients by reducing a sense of helplessness and increasing feelings of self-control. Self-defense training shares the same goal but seeks to achieve it in different ways. The training focuses explicitly on reducing the likelihood of future assault, thereby increasing feelings of safety, confidence, and empowerment and decreasing feelings of helplessness, fear, and vulnerability.

Therapists need to realize that self-defense training can accelerate the healing process because the practice/learning of many self-defense skills forces survivors to deal with healing issues in very concrete ways. Participants in self-defense classes take both physical and emotional risks that are not expected of them in traditional therapy. Several class members reported breakthroughs that had not occurred in traditional therapy. Because the training is physical and closely approximates the ways in which some women experienced assault, particular drills associated with buried memories may help to bring those memories to the surface. Once identified, survivors can work through the feelings associated with those memories. Participants work with partners in ways that encourage trust and respect. They work on skills such as confrontation that demand a certain amount of trust in oneself. Traditional therapy moves survivors toward these same goals but at a slower,

more subtle pace. It provides survivors with the tools necessary to deal with the accelerated pace of self-defense training in dealing with various healing issues.

The above discussion, coupled with the discussion regarding implications for survivors, indicates that therapists must exercise some caution in recommending self-defense training for their clients. Women who are just beginning to focus on the healing process are not good clients for self-defense training. They may need to establish a good relationship with a therapist or therapy group that will challenge them to grow, but at a pace that feels safe to them at this point in their journey. Early in the healing process, survivors may not yet trust others or themselves sufficiently to take the risks associated with self-defense training. If survivors are highly fearful, self-defense may reinforce fear rather than help to alleviate it.

Potential clients for self-defense training should already be well on the way to healing. They should already have some of the tools that enable them to take the risks associated with self-defense training. They are likely women who have made some progress but need new kinds of challenges to continue moving toward greater healing. They may be clients who are at a plateau and a new challenge is the "nudge" they need to make new breakthroughs. Prior to recommending self-defense training to a client, therapists should know their clients well enough to address these kinds

of considerations.

Therapists should also be familiar with the content and structure of any self-defense classes they might consider recommending to their clients. The discussion regarding pedagogical issues indicates that self-defense training should be taught from a feminist perspective with the goal of empowerment for participants.

Implications for Future Research

This study was conducted within theoretical and methodological frameworks that are distinctly feminist. Feminist explanations for sexual assault provided the rationale for the necessity of self-defense training being part of the healing process. Feminist theory places control at the center of the sexual assault issue. Assailants seek to control their victims through the use of rape, incest, or battering. The healing process following such victimization also involves control. The survivor must learn to take back the control and power that was taken from her through her experiences with assault. Self-defense taught from a feminist perspective can be a source of empowerment, thus contributing to the healing process.

This study also focused on the lives of ordinary women, using a research methodology that placed primary emphasis on their experiences and perceptions. Use of a methodology that recognizes the significance of ordinary women's lives in a patriarchal social structure enables us to better

understand how oppressive social structures impact the lives of individual women (Weiler, 1988). Additionally, this methodology enhances our understanding of the responses of individual women to social conditions to change their own lives and the society around them.

The use of such methodology provides implications for continued research in this area and will be briefly outlined below.

Participant Perspectives

I made an intentional effort to portray the experiences and perceptions of the class members--the women who were survivors of sexual assault. Sexual assault is a concrete and graphic example of women's oppression within a patriarchal social structure. Sexual assault impacts all women whether we have been assaulted or not. However, its most direct impact is on the lives of the individual women who have been victimized. Therefore, it seemed imperative to place the perceptions of the class members at the center of this research.

When I began the study, I knew that I wanted to focus on the experiences and perceptions of class members. But, as a teacher, I was also very interested in how the teaching of self-defense would impact the healing process. Therefore, I focused on the development of the course, its implementation, and its impact on the healing process of the women who were part of the course. This was a sociological

study written from a feminist perspective as compared to a psychological study addressing the clinical determinants of victimization and healing. However, because it explicitly involved the healing process, there was considerable overlap with such clinical issues. The study should be of great interest to therapists and other members of the psychological professions, but future research should more explicitly address the clinical aspects of self-defense training from a psychological and/or feminist perspective.

Pedagogical Issues

Earlier in this chapter, I indicated that the process of teaching self-defense is critical to the goal of empowerment and subsequently to the healing process. Because process seems so important, additional research should focus more on the pedagogical issues associated with teaching self-defense to survivors of sexual violence. Such research could not only shed more light on how to best teach survivors of sexual violence, but could also expand knowledge regarding the teaching of other oppressed groups. Teaching for empowerment is critical for a wide variety of oppressed groups, including women in general, children, ethnic minorities, lesbians and gay men, the elderly, handicappers, and those of the lower socio-economic classes.

Class Formats

More self-defense classes for survivors of sexual assault need to be established and studied. While the focal

class can serve as a model for others who are interested in developing similar sorts of courses, other formats may also be beneficial. As previously noted, significant format changes were made between the pilot and focal classes based on student and teaching team evaluation. Though formal study of the survivors' self-defense class has been completed, we have continued to offer this class through the sponsoring agency. Continued subtle refinements have been made. As more survivor self-defense classes are developed and taught, continued on-going assessment and modification in curriculum may need to occur.

Experience of Other Survivors

Eight women were part of the focal class. These eight women benefited from the course in unique ways. However, I find it difficult to generalize to the entire population of assault survivors on the basis of the experiences and perceptions of eight women. As discussed earlier, the healing issues that survivors work through tend to be very similar so some amount of generalization seems warranted. However, I have also argued that such a class may not be appropriate for every survivor at any given point in time. Those that benefited most from the focal class were those who were further along in their healing process. Different class members seemed to benefit in different ways and to varying extents. Additional research of similar cases needs to be conducted. More attention should be given to where women are in their healing process before they come

into the class. Such research would better ascertain the impact of self-defense training as survivors fall along differing points of the healing continuum. This research implication could be one of the specific clinical aspects addressed under "participant perspectives" in this section.

Methodological Considerations

While there have been other self-defense classes offered to survivors of sexual assault, the concept of combining self-defense training with a support group component was brand new. Self-defense training for survivors of sexual assault has never been systematically studied; therefore, this study represented a new research endeavor focusing on an experimental class. Field research methodology was therefore critical to the study. The methodology allowed for a detailed description of the development and implementation of the class. The methodology also allowed me to focus on the experiences and perceptions of the women who were part of the class as is consistent with the concept of feminist methodology. Future research conducted in this area could appropriately make use of the same methodology as the different directions outlined in the points above are explored.

Future researchers may also want to make use of different methodologies as they explore some of the implications suggested above. Follow-through on the research suggestions would ultimately provide a more complete picture of

the healing process and differing approaches to it. In addition, the use of different methodologies would also help to make that picture more complete. The use of varying methodologies would triangulate the kinds of evidence used to study the contributions of self-defense training to the healing process.

Final Comments

The implications for teachers, survivors of sexual violence, therapists, and researchers provided additional insight into the contributions that this study made to our understanding of the role of self-defense training in the healing process. The implications pointed to the limitations of such training as well as the more positive aspects.

In the preface to this dissertation, I explained that this class put me in touch with women who spent every day of their lives dealing with the impact of sexual assault. Through teaching the survivors' class and conducting this study, I feel that I have greatly increased my understanding of sexual assault. Most of my previous work in the area of sexual assault prevention had focused on explaining the dynamics of assault and on using that knowledge to teach others how to prevent assault. Many women and children in this culture have never had the chance to prevent their victimization. Their lives are shattered and the struggle to put the pieces back together never ends. They have often wondered, "What good is self-defense now? The damage is

done." This study has shown that the value in self-defense training goes beyond prevention and helps survivors put the pieces back together. I am excited about seeing that potential developed even further.

The women who were the members of both the pilot and focal classes were committed to healing. They were committed not only to their own healing but the healing of other survivors as well. Prior to beginning this study, I was concerned that class members might feel that I was intruding into deeply personal issues in conducting this research. My concerns never materialized. These women were excited about being part of an effort that might help other women like them. They were willing to talk about their experiences; they shared very personal information with me through interviews and writings. One woman even made her personal journal available to me because she hoped it would help me in better understanding her own healing process and the impact the class had on it. I am deeply grateful to each woman who was part of this study. I have taken a tremendous amount of inspiration from the strength, courage, and tenacity that these women displayed.

APPENDICES

APPENDIX A

PERSONAL INFORMATION SHEETS

APPENDIX A

PERSONAL INFORMATION SHEET

NAME: _____ AGE: _____

ADDRESS: _____

PHONE #: _____ (home) _____ (work) BEST TIME TO CALL: _____

EMPLOYMENT OUTSIDE THE HOME: _____

LAST GRADE COMPLETED: _____

CHILDREN (name & age): _____

HUSBAND OR PARTNER'S NAME: _____

Married _____ Single _____ Divorced _____ Live w/ Significant Other _____

INDIVIDUAL THERAPIST: Name _____ How Long: _____
Phone # _____

Do you have a history of substance abuse? Yes _____ No _____

Is this currently a problem? Yes _____ No _____

Do you have a history of suicide attempts? Yes _____ No _____

If yes, briefly describe number of attempts, your age, when attempted and method used:

Is this currently a problem? Yes _____ No _____

Are you presently on any medications? Yes _____ No _____

If so, briefly describe which ones and what they are for:

Who was your perpetrator/s? _____

Very briefly, summarize the abuse (age, duration, setting, what happened, etc):

Did you tell anyone or receive any support? Yes _____ No _____

Was there physical abuse involved (separately or with sex abuse)? Yes _____ No _____

(OVER)

- 10

10

10

10

APPENDIX B

RESPONSES TO INCEST QUESTIONNAIRE

APPENDIX B

RESPONSE TO INCEST QUESTIONNAIRE

Responses to Childhood Incest A Tool for Self Assessment

Developed by:

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Instructions:

Responses to the experience of childhood incest are very complex, but usually follow certain themes. These themes include thoughts and feelings of fear, anger, guilt, shame and/or sadness. This questionnaire will help you and your counselor or therapist assess which response themes are most distressful for you.

Please respond to each statement by putting an "x" under the one heading that fits most for you. Usually it is best to use your initial reaction to the statement in marking your response.

[illegible]

	DOES NOT APPLY	NEVER	HARDLY EVER	ONCE IN AWHILE	HALF THE TIME OR MORE	OFTEN	ALWAYS
27. I feel vulnerable in my job(school).....	()	()	()	()	()	()	()
28. I feel vulnerable in personal relationships with men (boys).....	()	()	()	()	()	()	()
29. I have difficulty in trusting women(girls).....	()	()	()	()	()	()	()
30. I have difficulty in trusting men(boys).....	()	()	()	()	()	()	()
31. I feel sad that my family life wasn't what I wanted it to be.....	()	()	()	()	()	()	()
32. I feel sad when I think about the incest.....	()	()	()	()	()	()	()
33. I feel I really lost something because of the incest.()	()	()	()	()	()	()	()
34. I feel that my life is empty.....	()	()	()	()	()	()	()
35. I feel empty inside.....	()	()	()	()	()	()	()
36. I find that thoughts about the incest intrude when I don't want them to. (intrusive thoughts).....	()	()	()	()	()	()	()
37. I have intrusive thoughts about the incest at work..	()	()	()	()	()	()	()
38. I have intrusive thoughts about the incest when I am alone.....	()	()	()	()	()	()	()
39. I have intrusive thoughts about the incest when I am with a man(boy).....	()	()	()	()	()	()	()
40. I have intrusive thoughts about the incest during sexual closeness.....	()	()	()	()	()	()	()
41. I have nightmares that seem related to the incest....	()	()	()	()	()	()	()
42. Sometime if something reminds me of the incest I feel just like I did when it was happening.....	()	()	()	()	()	()	()
43. I can push away thoughts of the incest to the point where I don't feel anything inside - numb.....	()	()	()	()	()	()	()
44. It seems impossible that I will be able to feel any- thing about the incest--the feelings are buried.....	()	()	()	()	()	()	()
45. I feel detached and estranged from others.....	()	()	()	()	()	()	()
46. I have a very difficult time expressing my feelings..	()	()	()	()	()	()	()
47. Others tell me that I'm "so in control".....	()	()	()	()	()	()	()
48. At times I shake uncontrollably.....	()	()	()	()	()	()	()
49. I avoid places or activities that cause me to remember the incest.....	()	()	()	()	()	()	()
50. When I'm in a place or around people that remind me of the incest I have a strong emotional reaction....	()	()	()	()	()	()	()
51. I don't remember a lot about my childhood, especially the period of time when the incest occurred.....	()	()	()	()	()	()	()
52. I have trouble concentrating.....	()	()	()	()	()	()	()

RESPONSE TO CHILDHOOD INCEST
A Tool for Self-Assessment

INFORMATION FOR THE COUNSELOR OR THERAPIST

This questionnaire is based on original data gathered from approximately 50 clients. Since 1981 therapists have used the questionnaire in clinical practice as a self-assessment tool. A Factor Analytic Study was completed in 1987 with data from 104 clients. The factors are:

Vulnerability and Isolation - Questionnaire items 23, 26, 28, 29, 34, 35

Fear and Anxiety - Questionnaire items 1, 2, 5, 6, 7, 21

Guilt and Shame - Questionnaire items 17, 18, 19, 20, 25

Anger and Betrayal - Questionnaire items 12, 13, 14, 15, 31

Reaction to the Perpetrator - Questionnaire items 9, 10, 11, 16

Sadness and Loss - Questionnaire items 8, 30, 32, 33

Powerless - Questionnaire items 22, 24, 28

Intrusive Thoughts - Questionnaire items 36, 37, 38, 39, 40

Intrusive Behaviors and Emotions - Questionnaire items 41, 42, 48, 49, 50

Detachment - Questionnaire items 45, 46, 52

Emotional Control and Numbness - Questionnaire items 43, 44, 47, 51

We are now developing a test users packet that will include scoring stencils, graphs, instructions for scoring and Responses to Childhood Incest profiles. We will send you more information about the packet later.

APPENDIX C

SURVIVORS' CLASS CURRICULUM PLANS

APPENDIX C

SURVIVORS' CLASS CURRICULUM PLANS

PILOT CLASS

Description: This eight-week long class combines one hour of self-defense instruction with one hour of group therapy. It is offered specifically to survivors of sexual assault/incest; and is designed to provide tools for healing and self-empowerment.

Format:

Session 1:

REGISTRATION

Use agency registration form, which includes brief health history, physical activity history, emergency medical information, liability waiver, and payment schedule.

INTRODUCTION

1. Presentation of format (this will already have been done to some extent by referring therapists, in screening interviews, etc.)
2. Establishing rules. (confidentiality, no suicide pact, no homicide pact, etc.)
3. Introduction of instructors/facilitators and participants, including information regarding a) pertinent training/skills already developed, and b) hopes, expectations, concerns about the class.

LECTURE/DISCUSSION on the nature, circumstances and stages of sexual assault. (approx. 30 min.)

CENTERING/BREATHING EXERCISE (2 min.)

STAGE 2 DEFENSE: CONFRONTATION - Demonstrated role play by instructors, followed by scripted role play by participants.

STAGE 3 DEFENSE: evasive side step with kiyai

PILOBOLUS to finish for body/boundary/space awareness

Session 2

WARM-UP

REVIEW: evasive side step

INTRODUCE: front choke progression

- a. prevention with flying wedge break

- b. teach front snap kick and heel hand
 - c. kick/wedge break/heel hand response to secured front choke hold
 - d. add shout from attacker (process immediately and briefly, if necessary)
 - e. cueing off the grab itself-defender's eyes open
 - f. cueing off the grab itself-defender's eyes shut
 - g. mental practice (select one less frightening)
 - h. pilobolus with front choke: attacker shouts "you"
- PILOBOLUS to finish.

Session 3

WARM-UP (10 min.)

REVIEW: evasive side step and front choke progression

INTRODUCE: mugger's hold progression

- a. tug and tuck (a.k.a. "roll it")
- b. add elbow jab (use shields)
- c. kick back, scrape, and stomp
- d. add shout from attacker
- e. eyes closed
- f. running attack
- g. mental practice
- h. in pilobolus format

PILOBOLUS to finish

Session 4

WARM-UP

REVIEW: evasive side-step, front choke and mugger's hold progressions

INTRODUCE: Response to punch progression

- a. inside (cross body) block with hook hand
- b. add circle retreat
- c. line-up with avenue of escape and run!

2

Targets and Body weapons (6)

target practice with eye gouge, heel hand, web strike, punch, groin grab, and knee/shin kick.

MEDITATION TO FINISH

Session 5

WARM-UP

COMPLETE REVIEW OF SESSIONS 1-4

INTRODUCE: wrist grabs (1 on 1, 2 on 2, 2 on 1)

Hair grabs

PILOBOLUS to finish

Note: warn participants about ground defense planned for next session

Session 6 (mats)**WARM-UP****INTRODUCE:** ground defense progression

- a. staying upright
- b. falling fundamentals
- c. ground kicks
- d. rolling free of an ankle grab
- e. kick/knee defense to a side approach
- f. ground throws
 - full length pin/supine
 - full length pin/prone
 - 3 pt. straddle/supine
 - 3 pt. straddle/prone

Note: tell participants about defense against armed attackers planned for following session

Session 7**WARM-UP****INTRODUCE:** Defense against armed attacker progression

- a. myths, fallacies, facts
- b. active versus reactive weapons
- c. active weapons defense
 - avoidance
 - in response to straight-in jab: step and cover/stomp and run
- d. reactive weapons defense drill
 - importance of timing/tactical planning while biding one's time
 - tactical details: avenue of escape, neutralizing the knife, breaking any holds, necessary strikes)

PROCESSING/QUESTIONS**Session 8****COMPLETE REVIEW:**

Confrontation during stage 2

evasions

front choke hold

mugger's hold

response to punch

strikes

wrist grabs

hair grabs

ground defense

defense against armed attackers

PILOBOLUS to finish

FOCAL SURVIVORS' CLASS

Description: This twelve-week-long class combines 75 minutes of self-defense instruction with 75 minutes of support group activity. It is offered specifically to survivors of sexual assault/incest; and is designed to provide tools for healing and self-empowerment

General format: 75 minutes of self-defense instruction

5 minutes of meditation
10 minutes of warm-up
20 minutes for review
30 minutes for new material
10 minute cool down

20 minutes of processing time to address issues /feelings that come up during self-defense training

55 minutes of support group activity, developed around a different theme each week

Session 1:

REGISTRATION:

Use agency registration form, which includes brief health history, physical activity history, emergency medical information, liability waiver, and payment schedule

INTRODUCTION

1. presentation of format (this will have already been done to some extent by referring therapists, in screening interviews, etc.)
2. establish rules (confidentiality, no suicide pact, no homicide pact, etc.)
3. Introduction of instructors/facilitators and participants. (In absence of screening interviews, participants might also offer information regarding a) pertinent training/skills already developed, and b) expectations, concerns about the class)

SELF-DEFENSE

lecture/discussion on nature, circumstances and stages of assault (approx. 30 mins)

Meditation

Warm-up (emphasis on body awareness)

Neutralizing techniques
evasive side step

flying wedge break
inside block (hook hand)
circling retreat

Heel hand strike/shields
Cool-down (progressive relaxation)

PROCESSING TIME (20 mins)

SUPPORT GROUP ACTIVITY: BODY AWARENESS/BOUNDARIES

Symbol meditation (15 mins)
Pilobolus (10 mins): emphasis on "negative space" and
6 cardinal directions
Earth and Sun series (15 mins)
1. slow circling with partner
2. faster circling with partner
3. eyes closed, earth approaches slowly from
known direction
4. eyes closed, earth approaches slowly from
unknown direction
5. pilobolus repeated

PROCESSING TIME (20 mins)

Note: talk to participants about journal/next week's
topic

Session 2

SELF-DEFENSE

warm-up: (meditation on transforming fear)
review: Neutralizing techniques
introduce: Front choke hold progression
a. teach front snap kick and heel hand
b. kick/wedge break/heel hand response to secured
front choke hold
c. add shout from attacker (process immediately
and briefly, if necessary)
d. cueing off the grab itself-defender's eyes
open
e. cueing off the grab itself-defender's eyes
shut
f. mental practice (select one less frightening)
cool down

PROCESSING TIME (20 mins)

SUPPORT GROUP ACTIVITY: FEAR

Sharing journal entries on fear/article in Her wits
about her
Discussion on getting familiar with how one experiences

fear.

Techniques for dealing with fear:

1. seated - tension release in area of body holding fear
2. standing meditation (10 mins) includes focus on breathing, grounding, shielding

Closing meditation on fear as challenge

Session 3

SELF-DEFENSE

warm-up (10 mins)

review: Neutralizing techniques and front choke progression

introduce: Targets and body weapons: eye gouge, heel hand, web strike, punch, groin grab, front kick

cool-down

PROCESSING TIME

SUPPORT GROUP ACTIVITY: ANGER

Session 4

SELF-DEFENSE

warm-up

review: Neutralizing techniques, front choke, and strikes

introduce: Mugger's hold progression

- a. tug and tuck
- b. add elbow jab
- c. kick back, scrape and stomp
- d. add shout from attacker
- e. eyes closed
- f. running attack
- g. mental practice

cool-down

PROCESSING TIME

SUPPORT GROUP ACTIVITY: GUILT AND SHAME

Session 5

SELF-DEFENSE

warm-up

review: sessions 1-4

introduce: Wrist grabs (1 on 1, 2 on 2, 2 on 1)

Hair grabs
cool-down

PROCESSING TIME

SUPPORT GROUP ACTIVITY: SADNESS AND LOSS

Session 6

SELF-DEFENSE

warm-up
complete review of everything covered to date

PROCESSING TIME

SUPPORT GROUP ACTIVITY: TAKING STOCK AT THE HALFWAY
POINT

Note: warn participants about ground defense for next
week

Session 7

SELF-DEFENSE

introduce: Confrontation Training

PROCESSING TIME

SUPPORT GROUP ACTIVITY: TRUST/SELF-BELIEF

Session 8

SELF-DEFENSE

warm-up
review: none
introduce: Ground defense progression
 a. staying upright
 b. falling fundamentals
 c. ground kicks
 d. rolling free from an ankle grab
 e. kick/knee defense to a side approach
 f. ground throws
 -full length pin/supine
 -full length pin/prone
 -3 pt. straddle/supine
 -3 pt. straddle/prone

cool-down

PROCESSING TIME

SUPPORT GROUP ACTIVITY: TRUST/OTHERS

Note: tell participants about armed attack defense for next session

Session 9

SELF-DEFENSE

warm-up

review: none

introduce: reactive knives (plus general information on armed attacks)

Defense against armed attackers

a. myths, fallacies, facts

b. active versus reactive weapons (definitions)

c. reactive weapons drill

cool-down

PROCESSING TIME

SUPPORT GROUP ACTIVITY: BALANCE AND INTEGRATION

Session 10

SELF-DEFENSE

warm-up

review: brief overview of 'reactive knives'

introduce: Active knife defense

Principle 1: stay out of range

Principle 2: use shields and barriers

Principle 3: if 1 & 2 are impossible, move in and control the weapon

drills to practice above principles

cool-down

PROCESSING TIME

SUPPORT GROUP ACTIVITY: THE HEALING PROCESS

Session 11

SELF-DEFENSE

warm-up

review: knives (reactive and active)

introduce: Defense against multiple attackers

Principles: use verbal confrontation

avoid the web

keep moving

deal with the person causing greatest threat

use most effective and devastating techniques

break and run at first opportunity

cool-down

PROCESSING TIME

SUPPORT GROUP ACTIVITY: SELF-ESTEEM

Session 12

SELF-DEFENSE

warm-up

review: selected techniques chosen by the group

cool-down

PROCESSING TIME

SUPPORT GROUP ACTIVITY: PERSONAL POWER

APPENDIX D

DESCRIPTION OF TECHNIQUES

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DESCRIPTION OF TECHNIQUES

Evasive Side Step

The evasive side step is intended to allow a defender to move in a quick explosive manner away from an on-coming attacker. Critical to this technique is an understanding of range, or distance. If the attacker is at or just beyond a two-arms-length distance, the defender has the time to quickly lunge, with one giant step to the right or left, off the line of the attacker's force. Following the explosive lunge to the side, the defender then moves quickly forward and toward an avenue of escape.



1. As the attacker lunges, step quickly off the line of attack. NOTE: wait until the last moment to avoid being 'tracked'.



2. As attacker's momentum carries him slightly beyond you, move quickly to retreat or to restrain.

Flying Wedge Break

The flying wedge break is used when the attacker is within a two-arms-length distance and attempts a two-handed grab to the throat. Prior to the attacker securing the front choke hold, the defender brings her arms up in front of the body with the fists closed, rotated inward, and touching (the forearms are parallel). Effort is made to make contact with the inside area of the attackers forearms close to the wrists. On contact, the defender rotates the arms outward, away from the center of the body to deflect the attacker's grab attempt.



1. As attacker lunges for your throat, place one foot behind you to brace against the assault.



2. In one explosive and fluid movement, bring your arms up in front of you and intercept the attack. Intercept at the attacker's wrists and keep your elbows at 90-120 degrees for maximum strength/leverage.



FACT SHEET ON USING CONFRONTATION TO DETER SEXUAL ASSAULT

Division of Women's Programs • Department of Human Relations
380 Administration Building • Michigan State University

What is sexual assault?

Sexual assault is a violent crime in which an assailant attempts to overpower, dominate, and control a victim. Sexual desirability and/or attraction have little, if anything, to do with rape. The assailant doesn't care how attractive his intended victim is. Rather, the assailant looks for two key features in a potential victim. First, the intended victim must be accessible. Second, the intended victim must be perceived as someone who is easy to overpower, dominate, and control.

What is confrontation?

Confrontation is a potential victim's firm, assertive, verbal refusal to comply with behaviors that an assailant seeks in a "good" victim. Confrontation can be a way to prevent sexual assault.

How does confrontation deter sexual assault?

There are three stages of sexual assault—selection, testing, and initiation. During the selection stage, the assailant determines how passive and easily manipulated the potential victim will be. Testing often involves verbal interaction between assailant and potential victim. For example, the assailant may ask questions that become increasingly personal in nature. The more personal information that the intended victim discloses, the more the assailant perceives the intended victim to be naive, trusting, and therefore, a good victim. The assailant often interprets a victim's inability to respond assertively on a verbal level to mean that the victim is incapable of physical self-defense.

By confronting the assailant during the testing stage, a potential victim shows that she is not vulnerable and cannot be manipulated. Therefore, a potential victim can prevent the third stage of sexual assault, which is actual initiation of physical force.

Why is confrontation effective?

Confrontation suggests to the assailant that his intended victim is assertive and confident rather than passive and easily manipulated. A confident, assertive

response to testing often deters the assailant because he can't be sure that his intended victim will be easy to overpower and control. If his intended victim doesn't act like an "easy" victim, the assailant often prefers to back down and look for an easier victim.

How do I use confrontation?

Confrontation means that you must show the assailant in a firm and direct manner that you understand what is happening, how it offends or bothers you, and what the assailant should do about his behavior. It means placing responsibility for inappropriate behavior where it belongs—with the offender. To confront an assailant you must:

Name the offensive behavior. Name exactly what the assailant does or says to upset you. Naming the behavior tells the assailant that you're aware of his intentions and that he is not fooling you with his behavior. Be very clear and direct so the assailant has little opportunity to misunderstand you. For example:

- "You are standing too close to me."
- "You are using a threatening tone of voice."
- "You are showing no respect for my own wishes."

Notice that these statements don't contain qualifiers such as "please" or "I think" or "I'm not sure, but..." Each statement is very direct and very clear.

Criticize only the behavior, not the individual. Let the assailant know that you do not like his behavior and why his behavior is inappropriate. Criticize only his behavior to avoid escalating a situation by personally offending the assailant. Use criticism in conjunction with naming statements. For example:

- "You are standing too close to me. That is an invasion of my space."
- "You are using a threatening tone of voice. I don't like it."
- "You are showing no respect for my wishes. That is very selfish."

Tell the assailant to change his behavior. Use a direct command so the assailant has no opportunity to argue with you, misunderstand you, or continue negotiations. Your goal is to end communication in the most firm and direct way possible. Combine commands with naming and criticism statements. For example:

- "You are standing too close to me. That is an invasion of my space. Back away from me!"
- "You are using a threatening tone of voice. I don't like it. Don't talk to me that way!"
- "You are showing no respect for my wishes. That is very selfish. Leave me alone!"

How you communicate your message is as important as what you say. Not only must you say the proper words, but also you must support what you say with appropriate body language. Be sure to:

- *Take up your physical and emotional space.* Stand up straight, square your shoulders, look up, even place your hand out in front of your body as a traffic director does. Don't shrink away, slouch, or act nervous. Your posture must appear as confident as possible.
- *Use eye contact.* Look directly at the assailant when you address him. If you don't, it suggests that you are intimidated or scared. You want to show that you are very confident and that you are not intimidated.
- *Maintain a calm and controlled voice.* Keep your voice as calm and controlled, yet as firm as possible. Any emotions reflected in your voice, such as anger, hostility, fear, hysteria, etc., are likely to give the assailant the impression that you are out of control. You want the assailant to believe that you are totally in control and that you will not be easily dominated by him. If your voice reflects any emotion it is better for it to be anger or hostility than fear or nervousness. Don't give

the assailant any reason to believe that you are easy to overpower, control, or dominate.

Can confrontation be used in other situations?

Confrontation is an effective verbal strategy not only to prevent sexual assault, but also to deal with sexual harassment. Women are often silent or try to ignore sexual harassment, but confrontation is a way to inform the harasser that his behavior is inappropriate and undesired. Occasionally, harassment and testing are virtually impossible to distinguish. The principles that apply to assault testing confrontation also apply to harassment confrontation. For example:

- "I am not your baby. Don't talk to me that way!"
- "You have no right to touch my body that way. Don't ever do that again!"
- "Those kinds of comments about a woman's body are out of line. Don't talk that way around me again!"

By confronting an assailant or harasser you are saying that you will not tolerate inappropriate behavior, that you will not be silent, that you will not be fooled, and that you are not a passive individual. Confrontation works because most men would rather back down and find an easier victim than risk an unsuccessful assault. Confrontation is a powerful strategy. Rather than giving power to the assailant, take on power yourself and use confrontation to say "I am a lousy choice for a victim. Don't waste your time on me!"

Sources

- Graff, S., et al., eds. *Self-Defense Teachers Guide*. Proceedings of the National Self-Defense Teaching Practicum, 1983.
- Nelson, J. *Confrontation Training*. Unpublished paper, 1982.

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APPENDIX E

A COMPLETE SET OF FIELDNOTES FROM 1 CLASS SESSION

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A COMPLETE SET OF FIELDNOTES FROM 1 CLASS SESSION

Date: January 30, 1989

Actors: Sue, Jayne, Jen, Students (Karen, Mary, Ann missing, Kari and Lin came late)

Purpose: Class session #4

Tonight I reached the agency early so that I could do some self-training before class. I spent the whole day writing and thinking about the dissertation and then coming right back into it first hand felt like it would have been too much. I also felt like I needed to see some people in a social context and I felt like I needed to work out. All in all, it was a good choice. By the time class was ready to begin, I felt warm, relaxed, and pretty ready to go.

Sue, Jen and I stood by the mirror and weight rack for a couple of minutes just before class to make sure that we were cool about the group activity for the night. Sue said that she had brought a small burning pot and paper. I asked her if she was going to talk at all about the difference between guilt and shame as we had talked about it. She said that she could do that. I also said that we had talked about doing an energy circle. I wondered if we were still going to do that and then said I wasn't exactly sure I knew what that was. Both Sue and Jen responded with a 'oh yeh... we did talk about that.' Jen looked at me and said, 'I'm sure you've done an energy circle before. You know, its when everyone sits in a circle, holds hands, and thinks of passing energy to one another around the circle.' I was just ready to ask her if she wanted to lead that when Sue beat me to it. Jen said that was fine.

It was a couple minutes after 7 when I looked up at the clock and then at the room around me. There were only 5 people there. I said 'where is everyone else?' We quickly tried to figure out who was missing. Mary had called and left a message that she would not be in class that night. Kari had told us last week that she would be late because a test had been rescheduled to a conflicting time. Lin had called Sue and explained that she was birthing a foal on the farm where she worked and would come as soon as they were done. That meant there were two people unaccounted for, and they were Karen and Ann. I immediately wondered if Karen had been dependent on Kari for a ride since she had come with her the second week. She didn't come last week and this week, Kari was coming late and Karen wasn't here at all. I hoped she hadn't been hanging out waiting for Kari to pick her up. We had no idea about Ann. RaeAnn hadn't been there the week before, and I talked to her when she came out of the changing room. She said that last week her heart arrythemias were acting up so she decided not to come. We talked about the condition a little longer because I

wanted to make sure that the condition wasn't aggravated by exercise. Jen was standing there too. RaeAnn said that her doctor encouraged her to walk and to exercise but she hadn't since she first discovered the problem. She didn't think it was exercise induced but stress induced. She said that she has been in the process of trying to get a mortgage for a new house and has been under a lot of stress with that and believed that was causing the problem. I told her to please tell me immediately if she ever experienced any problems in class.

We started with Sue making some brief announcements. She reminded people of the theme and Gerrie said that all week long she was thinking about what the theme was. She couldn't remember. She said that she almost called me to ask, but she somehow knew that it was guilt and shame. 'I just knew that it was it when I couldn't remember it, I just knew it.' We explained why a few people were missing and said that we didn't know about Ann or Karen. Someone asked if we wanted them to call when they knew that they would not be there and I shook my head yes and said, 'please do, otherwise we worry.'

The meditation followed. I asked folks to not only focus on their breath but also to imagine a ball of energy forming at their center each time they inhaled. 'Imagine that you are taking in energy with each breath. Each time you inhale, that energy is deposited in your center and that ball of energy that is inside you is getting bigger and bigger. It is warm, it is gently glowing, and is filling you with more and more energy. You may even want to give it a color. It is growing. Once it has filled your body, imagine that it is continuing to grow around you. Your bubble of energy may touch the energy bubbles around you and that is fine because as you touch you can give and receive energy from the people around you. Continue to breathe in energy...focus on the breath and the energy that you get from it...finish that last breathing cycle and slowly open your eyes.'

We moved into the stretching. I find that I often talk during the stretching no matter what I am teaching and its often a way to catch people up on events, my life (if appropriate), or a way to just be light so as to break the ice and silence if things start out that way. This group tends to be pretty quiet during the warm-up so I am often the only one who says anything. Tonight I told them why we stretch moving from the right to the left and its supposed relationship with digestion. People laughed a little bit.

I was so ready to move into a "musical review" of the basic techniques that we worked on last time, that I totally forgot about strength building. Following the stretching, I said that we were going to review the techniques by setting them to music. I added that if people were at all interested in aerobic exercise, this was a way to review the skills, but also get the heart rate up a little bit. 'Many people get real discouraged with aerobics because the

jarring on the joints can be real problematic. We often forget that we can get the heart rate up by using our upper limbs just as easily as using the legs. Here is how we are going to do this (I demonstrated the movement as I explained it). We are just going to move back and forth, doing different techniques on the beat. RaeAnn, even though you weren't here last week, don't worry about not knowing all of these techniques. This is going to be a pretty rapid fire review, but you will pick them up as we go and we will use them often enough so that it won't be critical to have them be perfect right now. All right, here we go.' I turned on the music, we got a sense of the beat and began with the eye gouge. I don't remember which direction I faced. I think I faced them. I do remember talking through different techniques even as we went so as to review the key points about each one (that made it hard for me to stay on the beat). I explained that since the beat was not real fast, and if they wanted more of a push, they could lunge more as we moved from side to side. We reviewed the eye gouge, heel hand strike, webb strike, front punch, groin grab, and kick during that one song. I used a Stevie Winwood song.

I really thought people would enjoy doing that. I always think its nice to put on some music and move. I didn't get any sense about whether they liked it or not. Everyone did it, and did just fine. But there was almost no expression on anyone's faces, including Sue and Jen's. They all just did what I asked them to do and that was that. When we finished, I just said that they could easily do that at home on their own as a way of remembering the techniques as well as getting in some aerobic exercise. As I spoke, Becky took off her sweatshirt. I smiled, and said, 'you warmed up a bit as the old heart rate went up, that's good.' She smiled back and got a drink.

We then went into the new material for the night. I explained that already we had worked on a method to keep the hands away from our throats if someone was trying to choke us or grab us, but tonight we were going to put some of our basic techniques together in an effort to stop someone after they had already gotten their hands solidly around our throats. I asked people what they thought was life threatening about that grab. By asking questions of them, we got through information about the carotid arteries, how the brain needs constant oxygen, and how after 4-14 seconds of deprivation, we pass out and why. I explained that trying to wrestle or grapple to get the arms off the throat was a waste of our precious time because of strength differences, and that what we wanted to do was inflict pain. I think people are getting used to the fact that I ask questions. They seem to be much quicker to answer than they used to be.

I had Jen put her hands around my throat. I asked them what could I do here? They gave a variety of answers based on the target areas. RaeAnn suggested that we immediately use the flying wedge. I said that we could do that, but for

some it would be almost like pitting strength against strength if the assailant was strong. I demonstrated how I could go into any target area with any of the techniques that we had learned so far and added that any of them would be appropriate. I emphasized that there is no one way and that self-defense is all about making choices. I then went on to explain that we were going to work on a particular combination because the techniques fit well together but that it was not the only way to respond. I explained why we were going to choose to start with the front kick--any one can reach that target area regardless of height differences, and it draws the head down. Jen and I demonstrated how the head responds to pain and then I asked what would happen as the head started to drop. They caught on fairly quickly that the grip on the throat would start to loosen. Once the grip was loosened, then we could use the flying wedge. I said that if necessary at that point, I could add a follow-up because that assailant was still close, but my goal was to get away as quickly as possible. I demonstrated the whole sequence slowly, and one time at full speed and with full volume in my voice. People reacted a little bit to the combination with a 'woa...' type response. I explained that we were going to break it down into its individual parts. We went through the entire sequence starting with the "one grab," and adding the kick, then the break, then the heel hand strike. When we were ready to add the strike, Margaret said that she thought her chances of outrunning an assailant were pretty slim. 'Wouldn't it make more sense for me to use the eye gouge so he couldn't see and then be less likely to chase me?' Absolutely--you need to use your own judgment in the situation to decide what is best for you to do to insure your own safety. As a matter-of-fact, you decide even as we work on this combination what follow-up you want to use. You might try different techniques to get a sense of how they work. You may want to stick with hand techniques because balance is easier then trying to kick twice very quickly, but you certainly could do that if you wanted to.

That served as an important example of taking control in a very positive way. I want them to think and do for themselves. Margaret was thinking about what she needed as an individual, she voiced what she thought she needed, and I responded by encouraging personal choice making and thus, personal power. That is exactly what I want these women to take on in this class.

As we moved through the progression, people started getting more powerful and quicker in their responses.

Lin came in late and as soon as I saw her come in, I immediately said 'Hi Lin, why don't you start stretching out a little, and as soon as you feel ready, you can join us. She paused a little, and said that she had injured her shoulder and wasn't sure she could do much tonight. I said

'okay, just do what you feel you can do. She stretched a little and then sat down and watched.

I asked them to add their voices. Then I immediately stopped and said that we were going to backtrack for a second. I said we routinely ask you to add your voice, but we have never worked on that all by itself. 'We're going to do that. Just face this way so you don't have to look at your partner. Put your hands on your abdominal muscles, and we're going to do this all together. At Sue's prompting, Lin got up and joined us for this one. What do you want to say? Do you want to say "NO" or do you just want to make a noise like Becky was?, your choice.' People agreed on "no". 'Ok, we're going to start by just saying no at normal voice level. We will start to get louder and louder and as we do, your hands are on your abdominals so that you can make sure that those muscles contract each time you shout. Let's try it.' People started out by just saying no. Everyone had their hands on their abs. Then I asked them to say no with more intensity. So far, everyone was still saying no. I asked them to start saying no louder and louder. I kept looking around as we all got louder and louder. Gerrie and Cheryl were with us to a point but I know that we lost Gerrie somewhere along the way, and she stopped shouting at a certain point. I don't know if she ever shouted or not before she stopped. Then it reached what I thought might be a critical point. I said, 'ok, you have the combination down, people are doing real well with that. Now we need to start building more reality. The more realistically we practice, the better prepared we are to respond realistically if necessary. Grabbers, I want you to start grabbing with more speed and power. When you grab your partner, they should know they have been grabbed.' (I demonstrated with Jen and grabbed her pretty hard.) Some did start grabbing harder. RaeAnn grabbed Becky pretty hard. Jen had been working with Kari because she came in late and she was trying to catch Kari up. Jen started grabbing Kari pretty hard. Cheryl was working with Gerrie and they were still pretty gentle in the way they grabbed, but both demonstrated good power when they responded to being grabbed. However, neither could use their voice. I explained that this might be more difficult to respond to and that was okay. We needed to get past the shock of being grabbed hard and still be able to respond. We did that for awhile, and then I took it a step further. I said that I wanted the attacker to yell in the face of her partner. I asked them why it might be important to practice with someone doing that to us. Kari said, 'that's probably what they are going to do.' Yes, some attackers might try to be real quiet, so no one else knows what is going on, and that may have been how your assailant worked if incest occurred in your life, but remember, right now we are thinking about possible rape as adults and working to prevent that from occurring as a future occurrence. Many rapists will yell loud to try to shock you and scare you and it works. So if we can practice with

someone yelling and learn how to react anyway, that's real important.' As I talked, I saw expressions on faces start to change. The expressions looked tentative and a bit scared. I said that yelling might be real difficult for some so if people wanted, Jen, Sue, and I would substitute in and yell so that people could practice getting yelled at. Sue and I demonstrated and I grabbed her hard and yelled shutup at the same time. It took her a second to respond but when she did, the techniques happened, however, there was no noise. I think I sort of shocked her which may have been good for people to see, I don't know. I asked the group what was missing and someone said the noise. We laughed and I had Sue try it again. This time she had the noise, but the techniques came out in a different order. I asked the group if that mattered, and immediately said rather passionately, 'no, what mattered is that she reacted. I don't care if its perfect, I don't care if you change the order or even change the techniques, what is important is that you show that assailant that you are willing to do whatever is necessary to stop him.'

They worked with their same partner for awhile. Some yelled okay, others not at all. After several repetitions, I asked them if anyone wanted one of us to substitute in or to change partners. Raeann and Becky were willing to change and they did. Sue and Jen both became partners. People did really well. I saw scared expressions on their faces but they responded and they responded with power. Their own voices in response still were sort of weak. I kept urging them to either use them out loud, or yell inside if it couldn't come out. I began yelling with them. I said that if it helped, I would yell with them and I began yelling no right along with the group or with individuals as I watched them. I don't know what they thought about it, but when I started adding more noise, those who had been yelling started yelling louder (Becky and RaeAnn primarily and Kari).

I asked them if they wanted to switch partners again. Gerrie said that they were just fine. Because I wanted to make sure that Cheryl was speaking for herself, I asked Cheryl if she wanted to switch partners. She sort of looked down and mumbled something like no. Gerrie moved toward her and kind of put her arm around her (she was way into her caretaking role). I looked at her and smiled, and said in my most energetic yet playful way, 'Hey, you got to be direct with me, if you don't want to switch, that's okay, but just say "I don't want to switch", you have to be direct.'

Cheryl used lots of power, but each time I added a new element of reality, she seemed to have some trouble until she had done it for awhile. A couple of times she backed away before completing the combination and shook her head, I encouraged her to keep going. She and Gerrie only worked together that night, neither used their voice, and I think it gave Gerrie a chance to be a caretaker because Cheryl

was expressing some difficulty with the techniques. I said that I would be willing to be a partner, and immediately RaeAnn said I could come in for her while she got a drink. I jumped right in and didn't think about whether the person across from me would approve. The person was Becky. She had a frightened look on her face and I immediately asked her if that felt okay to her. She said that she didn't know, but would try it once to find out. I was careful not to grab too hard, or yell too loud, although I did yell and did grab firmly. She responded really well. Her voice was strong, her techniques came right out with power and crispness. I immediately praised her. 'Becky, that was excellent. Your voice was powerful, your techniques were great. Do you want to try it again?' Yes, she was willing to do that. We worked together several more times. Each time she did what she needed to do. By the time we finished, I was grabbing her pretty hard and yelling pretty loud.

The next level of reality was to shut the eyes. I gave people the choice of either looking toward the floor if shut eyes seemed too difficult, or just shutting them. At that point, Sue stepped out as partners and let them strictly work with one another since there was an even number. I put my hand up in the air as the signal for the attackers to attack. Before we started, I said that this might be really hard and that they might feel frightened. I said that was okay, and that I wanted them to be a little bit afraid, that was again important to teach the body it could react even when afraid. The key was to simply do something, even if it didn't come out perfect. Sue demonstrated with me because Jen was still a partner. Sue grabbed, I had my eyes shut, and I responded by opening my eyes and continuing through with the techniques.

I really didn't know what to expect. I told them we were going to do it this way a bunch of times so they could get more used to it and start feeling more comfortable with the reality. By the time we switched roles, everyone was starting out with their eyes shut. Quite honestly, I was surprised. I thought that might be too tough for folks.

Most people did real well. Each time they were grabbed, they opened their eyes and responded with power and commitment. Kari had some trouble with rushing and trying to do all the movements at once. Several times she was kicking as she was blocking or blocking and striking at the same time. A few times, I wasn't quite sure what I saw come out, but the key was that something was coming out. I just kept telling her to take her time but that what was important was that she was taking action. Cheryl reached way forward as she used the web strike each time as a follow-up. Her extension was pretty amazing. Gerrie demonstrated excellent reflexes in her ability to evade back to avoid being struck. They seemed to have worked that out and Gerrie did not appear overwhelmed or scared by it so I

didn't interfere. I routinely told Cheryl that her power was excellent and complimented Gerrie on her reflexes moving back. She smiled and nodded as if to say yeh, that's right. I sensed that she was pleased that I acknowledged that. She was also demonstrating good power and I made sure that I routinely said to her things like 'excellent power, Gerrie.' Even Margaret, who tends to move a bit slower because of the arthritis, I'm assuming, had good power. Her kick was a little slow yet, but her hand techniques seemed very effective. Becky used good power and used her voice very effectively as did RaeAnn.

We did that eyes-closed drill quite a few times because I really wanted those movements to start feeling more automatic. While it appeared that people were a little afraid of the reality which I would have expected, they did respond and did so with commitment and power. I was pleased.

The culminating level of reality for the front choke hold involved them listening to me tell a story before getting grabbed. I explained that we don't often walk around just waiting for something to happen and the story was to put them in a different context than just waiting for something to happen. The story with one group involved them just getting out of work on a Friday and heading out of the office. They stopped at the store to pick up some groceries for the weekend and as they headed back to their car in the lot, someone grabbed them from between two parked cars. The second story involved a shopping trip to the mall to find a birthday present for a friend. While shopping, they had to go to the bathroom and headed for the nearest one in the mall. They noticed that it seemed pretty quiet, looked around, but didn't see anyone. While washing their hands, a stall door swung open and someone grabbed them.

Everyone was able to respond, and no one stalled part way through. Everyone did something that came close to the combination which pleased me a lot.

Following that exercise, I said that it was almost 8:30, so we needed to cool down, maybe bring the heart rate down if it had soared a little bit, and get ready for group. We stretched for a minute or two and then took a break before moving into the group activities for the evening.

We moved into a circle and Sue started by asking people how the front choke hold drills felt. Kari spoke first. 'It felt really good to me. I mean, I just came out of that test and I couldn't get angry at the prof like I wanted to, this felt like a really good release. It also felt more spontaneous because I didn't have enough time to think and get nervous. Cheryl spoke next. She spoke pretty softly as she often does. She said that she realized tonight that she could really hurt someone if she wanted to. Sue asked folks how that felt to realize that. Cheryl said that it seemed a

little scary. Becky said that it felt good. 'If someone is trying to hurt me, then they deserve to be hurt, if necessary. I felt really powerful and that felt good.' RaeAnn said that she was really surprised at her ability to do as well as she thought she did. 'Even with my eyes shut and even after the story, I was able to respond and my body just seemed to know what to do. I was surprised and pleased because I never thought I could really learn how to defend myself.

Margaret said that she had read my material about 85% of rape being acquaintance rape and she said that it seemed like a totally different thing to do something like this to a supposed friend who had crossed the line and become an enemy. Kari then said that it was easier to practice with an instructor and she looked at Jen. She looked at Margaret and said that when she practiced with other partners, she didn't feel as powerful because she was afraid of hurting them. Margaret asked if she felt that way about everyone in the class, or only when she worked with her (Margaret). Kari said that she saw a scared look on her face and that immediately scared her. She figured she wasn't as afraid with an instructor because she thought they were skilled enough to catch anything that might be too close. (Kari had accidentally kicked Jen's knee while they were partners. Jen was able to respond quickly and the impact was very light. Since I saw it happen and realized that Jen didn't get hurt, I just told Kari that her power was really good, now she just had to glance down so she knew exactly where the target was.) When Kari realized that she had kicked Jen, she immediately stopped the rest of the combination, her hands went up to her mouth and she asked if Jen was okay. Jen said that she was fine and encouraged her to continue. That was good that no big deal was made of it.)

After Kari made her comment about instructors vs. students, I responded by saying that I thought that was pretty understandable. I said that I felt more comfortable practicing with someone who I thought was really skilled as I was first learning these skills too. I felt that was for the same reason, that if I did start to come a little too close, a skilled person might better avoid injury. I actually felt like I was stumbling over my words as I realized I was referring to reflexes which had made Margaret pretty upset two weeks before. Someone asked me if anyone ever had gotten hurt in a class. I said that no, in all my teaching, no one had ever experienced serious injury. RaeAnn immediately sort of laughed and said, 'serious injury (emphasis on serious), what does that mean, that they didn't have to go to the hospital? Ha Ha' I said, well, of course there are always little things, things like scratches, bruises--like when we do the wedge break lots of times without arm pads, but no one had ever been injured in any more serious a manner and that included literally hundreds of students because I taught 90 every term at the university. RaeAnn then asked if anyone ever really got angry doing this stuff.

I asked her what she meant by that. She said that being physical sometimes really brought out anger in her, she sort of chuckled and said that she had a temper anyway, but that if could really come out while being physical. She hastened to add that she didn't think that had happened in this class, but.... I said that sure, lots of emotions got expressed as people learned these skills and that anger was one of them.

Sue said, 'let's go back to what Margaret said, it can be real disconcerting to think of someone we know as the assailant. That may be because we were abused by an adult who we thought we could trust, an adult we were dependent on for love, affection, care, food, everything. The thought of hurting someone who did care for us in some ways makes some feel really guilty. Kari said that she couldn't even do what I had suggested about looking at people as walking target areas. She said that was her way of avoiding the whole idea of really hurting someone. She added that she thought she would almost rather take it as compared to hurting someone, even though she realized that it shouldn't be that way.

Becky said that the idea of hurting someone she knew was real difficult. She said that she didn't think she would be able to work with me earlier because I reminded her of her mother. She said that her mother had similar glasses, had hair about my color, and that our faces had a similar shape. What was important was that she was able to work with me and she didn't feel at all guilty. She said that she almost felt guilty for not feeling guilty.

Sue read from The courage to heal. She read some of the opening of the chapter on guilt and shame. She then asked if people wanted to share at all how that burden of guilt felt for them. She asked if they would be willing to share any part of their own story and how guilt and shame fit into their own experiences.

Becky said that after her father abused her, he would cry and ask her to hold him in his drunken mess. She said that she could never cry, she could never feel angry about what had happened to her because she had to take care of her father. She said that even now, she can be hurting like hell on the inside, but she will always assume the caretaker role. She also said that she felt very dirty as a kid, she figured that someone at school would see either the blood or the semen dripping down her leg from under her dress. She said that later, when she first started talking about the incest, she couldn't even look at anyone as she talked because she still felt so dirty and ashamed.

Margaret said that she felt guilty because she was abused by a brother who was only three years older than she was. She felt guilty because she thought that someone only three years older should never have been able to overpower her. Later, she also felt guilty about her marriage. Her husband was somewhat abusive and she blamed herself because she chose the relationship.

RaeAnn said that she was abused by several older brothers. One of her abusers was only three years older than her as well. She said that there was also a brother-in-law and cousins who abused. She felt guilty because she kept thinking that there must be something wrong with her if all these people were doing this. Later she realized that there had been communication between them but at the time she didn't realize that.

Kari said that she never felt guilt or shame as such but she remembers feeling really low life, as she put it. What really bothered her was that the last time it happened she was 18 and by then she thought she should have been old enough to know better or stop it. She said that even when she chose to tell her parents what had been going on, her dad blamed her for not stopping it (I think the age difference between her and the brother was something like 9 years).

Sue then said that another thing that can produce a lot of shame and guilt is that some children and women experience pleasure and their bodies respond to the abuse. Not all, it depends on how you were abused or touched. But it is very difficult to tell a young girl or a woman that her body is only doing what it is supposed to do. Our bodies were made to respond to the right kind of stimulation and that is a normal response. She also added that some feel very guilty because they believe that they sought out the abuse when all they were doing was seeking love and affection. Every child needs love and affection, and every child needs to be touched. For some, the only way they got any affection was through abuse. That too can make many feel very guilty.

No one said anything in response, so Sue went on. She said that we were going to do this writing exercise and that it was strictly for ourselves, not for anyone else. She said that writing allowed some to say things that they might not be able to say in front of the group or aloud to anyone else. She suggested that it be stream of consciousness writing so that they write whatever came to them.

See handwritten notes concerning the writing exercise because I kept taking fieldnotes as everyone else wrote about guilt. Since we were all writing, it gave me a chance to write more complete notes at the same time without being conspicuous.

When people seemed pretty much done, Sue asked if anyone wanted to share anything that they had written. No one volunteered. She then said that on a separate piece of paper, she wanted folks to make a list of everything they felt guilty about in their lives. Lin asked if it needed to be related to the incest; Sue said no, it could be about anything. Prior to asking them to write the list, she made the transition from childhood guilt to how that guilt/shame can now permeate our lives in lots of different ways. See

my hand written notes. People wrote lists. Jen and I each wrote a list, Sue did not. While people wrote their lists, she started getting the fire pot ready off to the side by the counter. When people finished, she asked them to pair up with one other person and share whatever they wanted to from their lists. Sue directed them to pair up with the person they were closest to along the circle and people just swung around so that instead of sitting and facing the middle of the circle, they were facing their partner, even though they were still sitting along a circle.

Becky and Cheryl paired, Margaret and Gerrie paired, Kari and Jen, and RaeAnn and Lin paired up. People started talking right away with no hesitation. I couldn't hear exactly what was being said. I sat closest to RaeAnn and Lin. I heard Lin say that she felt guilty when they lost animals on the farm. RaeAnn appeared confused and asked Lin what she meant by that. Lin explained that she worked on a farm and every time an animal died, she somehow felt responsible. She added that she felt guilty about not participating tonight. She didn't like sitting off to the side and figured she paid good money to be in the class. Sue came back to the group with the pot and mat. She put the pot and a mat in the center of the circle that we were sitting in. People turned away from their partner and back toward the circle.

Sue asked if people seemed to carry a lot of guilt. Kari said that in certain areas she does, but not in others. Cheryl said that she realized that she does not recognize guilt very well. She usually just feels really bad.

Sue asked folks how guilt felt. Gerrie replied that sometimes it felt really suffocating. Margaret said its tough to figure out how all that extra baggage is going to pay its freight--people laughed in response. Becky said that it felt like knots in her stomach. Kari said that she tried to deny it defiantly. Its like all these years everyone has tried to push it on me and I just say, no more.

Sue asked how it affected our relationships and interactions with others. Becky said that she tended to overcompensate. Margaret said that she over reacts. Kari said that she finds it really hard to ask for the things she needs from others.

Sue then explained that we were going to do a little ritual designed to allow us to symbolically release our guilt and shame. She said that we were going to take the list that we had come up with and crumple it real tight and then burn it in the pot. RaeAnn immediately joked, 'you guarantee that all my guilt will just vanish? Is this really going to work?' Sue asked them to think of what to say as their list burned. Kari said BURN SUCKER! As she said that her eyes got big and she immediately laughed. RaeAnn again joked, 'if I would have known this was what we were going to do, I would have drawn a picture of someone I don't like.' The first person put her crumpled paper in the pot. RaeAnn said that she wished she had a marshmallow. At

first, people put their lists in one by one. Then we put several in at the same time. The flame rose higher from the pot. People seemed drawn by the flame. In order to put their lists in the pot, people had to pull in close to it. Most stayed close as they put the paper in so that our circle got much smaller around the burning paper. People seemed to get much quieter as they watched the paper burn. Kari said that the guilt didn't feel as controlling. 'I can be more in control now and not hang on to it.' Cheryl was laying on her stomach with her head resting in her hand as she watched the flames. She said that burning was a way of releasing energy stored in the paper. Nothing in the universe is ever destroyed, it changes shape and form. As the paper burns, it gives off light and warmth, this is a really appropriate thing to do with guilt. I can think of it as nothing more than ashes and it can blow away.

Becky said that it reminded her of a ritual at the solstice celebration. As they had small fires burning, they said a poem and it seemed appropriate now. 'Let the winds of mother earth take you away and be free.'

Jen then introduced the idea of the energy circle. She said that we should all hold hands and she reached for the hands of the people next to her. We all followed suit and took the hand of the person next to us. She said that we should close our eyes and feel the energy that was going through each of us and around the circle. She said that if we wanted to, we could each say something about what the burning felt like and she said that she would start. If someone didn't want to talk, that was okay, just squeeze the hand of the next person so they would know it was their turn. Jen began and said that she felt less controlled. Each person said something. When it came to Gerrie, she really seemed to struggle. Tears welled up in her eyes, she looked up and sort of shifted her weight back and forth. It looked to me like she really wanted to say something. Finally, she looked up towards the ceiling, took in a deep breath, and paused...she then looked back toward the floor, shook her head, and squeezed the hand of the next person. I don't remember what each person said, but I do remember Raeann saying that she could go home tonight and sleep knowing that her own guilt had been released. Lin said that she now felt more in touch with her guilt problem and better able to do something about it.

We finished and Sue told the group that next week's theme was sadness and loss. She then gave them a play-by-play about themes coming up. I asked if people would be willing to share any of their writing with me. I knew that it was very personal but it would really help me gain more insight into how they felt about the class and their own experiences. If that felt like that was something they could do, wonderful, I would welcome the opportunity to share their writing, if it didn't feel good, no problem, I understood.

LIST OF REFERENCES

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- American Psychological Association Task Force on the Victims of Crime and Violence. (1984). Victims of crime and violence: Final report. American Psychological Association.
- Amir, M. (1971). Patterns in forcible rape. Chicago: University of Chicago Press.
- Anderson, C. (1990). Course syllabus. Michigan State University, East Lansing, MI.
- Angevine, J. (1987). Newark - August 17, 1981. In D. Caignon & G. Groves (Eds.), Her wits about her (pp. ix-xliv). New York: Harper & Row.
- Bass, E. & Davis, L. (1988). The courage to heal. New York: Harper & Row.
- Bart, P. (1979). Rape as a paradigm of sexism in society: Victimization and its discontents. Unpublished manuscript.
- Bart, P. & O'Brien, P. (1985). Stopping rape: Successful survival strategies. New York: Pergamon Press.
- Bogdan, C. & Biklen, S. (1982). Qualitative research for education. Boston: Allyn and Bacon, Inc.
- Brownmiller, S. (1975). Against our will: Men women and rape. New York: Bantam Books.
- Caignon, D. & Groves, G. (Eds.). (1987). Introduction. In Her wits about her. New York: Harper & Row.
- Collier, J., Rosaldo, M., & Yanagisako, S. (1982). Is there a family? New anthropological views. In T. Thorne & M. Yalom (Eds.), Rethinking the family: Some feminist questions (pp. 25-39). New York: Longman.
- Community action strategies to stop rape project, women against rape. (1980). Proceedings of the national conference on rape prevention theory, strategies and research. Columbus: Women Against Rape.

- Dobash, R. & Dobash, E. (1979). Violence against wives: A case against patriarchy. New York: The Free Press.
- Dunn, S. (1985). Hidden competence with written language: Dialogue journals in a K-6 resource room. Unpublished dissertation proposal, Michigan State University, East Lansing, MI.
- Emerson, R. (1983). Theory and evidence in field research - introduction. In R. Emerson (Ed.), Contemporary field research (pp. 93-107). Boston: Little, Brown and Company.
- Erickson, F. (1985). Qualitative methods in research on teaching. In M. Wittrock (Ed.), Handbook of research on teaching (3rd ed.). New York: Macmillan.
- Field Belenkey, M., McVicker Clinchy, B., Rule Goldberger, N. & Mattuck Tarule, J. (1986). Women's ways of knowing: The development of self, voice, and mind. New York: Basic Books, Inc.
- Finkelhor, D. (1979). Sexually victimized children. New York: Free.
- Florio, S., Clark, C., & Dunn, S. (1983). Environments for writing in secondary school: A study of ninth-grade English. (NIE Grant Proposal). Unpublished manuscript.
- Frake, C. (1983). Ethnography. In R. Emerson (Ed.), Contemporary field research. Boston: Little, Brown and Co.
- Freedman, L. (1983). Wife assault. In C. Guberman & M. Wolfe (Eds.), No safe place (pp. 41-60). Toronto: The Women's Press.
- Geertz, C. (1983). Thick description: Toward an interpretive theory of culture. In R. Emerson (Ed.), Contemporary field research. Boston: Little, Brown and Co.
- Gelles, R. (1977). No safe place to go: The social dynamics of marital violence. In M. Roy (Ed.), Battered women: A psychosociological study of domestic violence (pp. 46-62). New York: Van Nostrand Reinhold Co.
- Goode, W. (1982). Why men resist. In B. Thorne & M. Yalom (Eds.), Rethinking the family: Some feminist questions (pp. 131-150). New York: Longman.

- Gordon, R. (1980). Interviewing: Strategy, techniques, and tactics (3rd ed.). Homeward: Dorsey Press.
- Griffin, S. (1971). Rape: The all-American crime. Ramparts, 10(3), 1-8.
- Groth, N. (1979). Men who rape: The psychology of the offender. New York: Plenum Press.
- Guberman, C. & Wolfe, M. (1983). Introduction. In C. Guberman & M. Wolfe (Eds.), No safe place (pp. 9-18). Toronto: The Women's Press.
- Hammersley, M. & Atkinson, P. (1983). Ethnography: Principles in practice. London: Tavistock Publications.
- Herrenkohl, E., Herrenkohl, R. & Toedter, L. (1983). Perspectives on the intergenerational transmission of abuse. In D. Finkelhor, R. Gelles, G. Hotaling & M. Straus (Eds.), The dark side of families (pp. 305-316). Beverly Hills: Sage Publications.
- Herzberger, S. (1983). Social cognition and the transmission of abuse. In D. Finkelhor, R. Gelles, G. Hotaling & M. Straus (Eds.), The dark side of families (pp. 317-329). Beverly Hills: Sage Publications.
- Hofeller, K. (1983). Battered women, shattered lives. Palo Alto: R & E Research Associates, Inc. Publishers.
- Janoff-Bulman, R. (1979). Characterological versus behavioral self-blame: Inquiries into depression and rape. Journal of Personality and Social Psychology, 37, 1798-1809.
- Johnson, S. (1988). Speech at Michigan State University. In A. Master. Women's spiritual revolution. Revisions: Journal of the Michigan State University Women's Studies Program, 1(2), 11-13.
- Jones, A. (1980) Women who kill. New York: Holt, Reinhart and Winston.
- Katz, J. (1984). No fairy godmothers, no magic wands: The healing process after rape. Saratoga, CA: R & E Publishers.
- Law Enforcement Assistance Administration (LEAA). (1978). Forcible rape: Final report. Washington, D.C.: U.S. Government Printing Office.

- Ledray, L. (1986). Recovering from rape. New York: Henry Holt and Co.
- MacKinnon, C. (1982). Feminism, marxism, method and the state: An agenda for theory. Signs, 7, 515-544.
- Maltz, W. & Holman, B. (1987). Incest and sexuality. Lexington, MA: D.C. Heath and Co.
- Mc Call, G. & Simmons, J. (1969). Issues in participant observation. Reading, MA: Addison- Wesley.
- McIntyre, J. (1979). Victim response to rape: Alternative outcomes. (Grant No. R01MH29045). Rockville, MD: National Institute of Mental Health, Division of Special Mental Health Programs.
- Mitchell, A. (1985). Child sexual assault. In C. Guberman & M. Wolfe (Eds.), No safe place (pp. 85-108). Toronto: Women's Press.
- Morash, M. (1986). The literature on wife battering. Unpublished manuscript.
- National Self-defense Teaching Practicum (NSDTP). (1983). Self-defense teacher's guide: Precedings of the national self-defense teaching practicum. Bethesda, MD: Intrepid.
- Nelson, J. (1984). Unpublished interview.
- NiCarthy, G. (1986). Getting free: A handbook for women in abusive relationships (2nd ed.). Seattle: The Seal Press.
- Pagelow, M. (1981). Woman battering: Victims and their experiences. Beverly Hills: Sage Publications.
- Prager, S. (1982). Shifting perspectives on marital property law. In B. Thorne & M. Yalom (Eds.), Rethinking the family: Some feminist questions (pp. 111-130). New York: Longman.
- Queen's Bench Foundation Study. (1976). Part III: Conclusions. Unpublished project report.
- Rapp, R. (1982). Family and class in contemporary America: Notes toward an understanding of ideology. In B. Thorne & M. Yalom (Eds.), Rethinking the family: Some feminist questions (pp. 168-187). New York: Longman.

- Rosaen, C. (1989). Course syllabus. Michigan State University, East Lansing, MI.
- Rush, F. (1980). The best kept secret: Sexual abuse of children. New York: McGraw-Hill Book Co.
- Russel, D. (1983). The incidence and prevalence of intrafamilial and extrafamilial sexual abuse of female children. Child Abuse and Neglect, 7, 133-146.
- Russell, D. (1986). The secret trauma: Incest in the lives of girls and women. New York: Basic Books, Inc., Publishers.
- Sanday, P. The socio-cultural context of rape: A cross-cultural study. Journal of Social Issues, 37(4), 5-27.
- Schatzman, L. & Strauss, A. (1973). Field research: Strategies for a natural sociology. Englewood Cliffs, NJ: Prentice-Hall.
- Schechter, S. (1982). Women and male violence. London: Pluto Press.
- Schuiteman, J. (1986). Field research at the Council Against Domestic Assault: The two faces of the battered women's movement. Unpublished manuscript.
- Schuiteman, J. (1988). Self-defense training for survivors of sexual assault: Its contributions to the healing process. Paper presented at the North American Society For The Sociology of Sport 1988 Conference, Cincinnati, Ohio.
- Selkin, J. (1975). Rape. Psychology Today, Jan., 71-75.
- Sisk, S. & Hoffman, C. (1987). Inside scars. Gainesville, FL: Pandora Press.
- Smith, D. (1981). An evaluation of self-defense training: Women's outcome and efficacy expectations of assault deterrence. Unpublished doctoral dissertation, Michigan State University, East Lansing, MI.
- Snell, J., Rosenwald, R. & Robey, A. (1964). The wifebeater's wife: A study of family interaction. Archives of General Psychiatry 11(1), 107-112.
- Straus, M. (1973). A general systems theory approach to a theory of violence between family members. Social Science Information, 12, 105-125.

- Straus, M. (1977). A sociological perspective on the prevention and treatment of wifebeating. In M. Roy (Ed.), Battered women: A psychosociological study of domestic violence (pp. 194-238). New York: Van Nostrand Reinhold Company Inc.
- Straus, M. & Gelles, R. (1981). Physical violence in American families. Interuniversity Consortium for Political and Social Research, Codebook 7733. Ann Arbor: Institute for Social Research, University of Michigan.
- Straus, M., Gelles, R. & Steinmetz, S. (1980). Behind closed doors: Violence in the American family. Garden City, NY: Doubleday.
- Theberge, N. (1987). Sport and women's empowerment. Women's Studies International Forum, 10(4), 387-393.
- Thorne, B. (1982). Feminist rethinking of the family: An overview. In B. Thorne & M. Yalom (Eds.), Rethinking the family: Some feminist questions (pp. 1-24). New York: Longman.
- Tierney, K. & Corwin, D. (1983). Exploring intrafamilial child sexual abuse: A systems approach. In D. Finkelhor, R. Gelles, G. Hotaling, & M. Straus (Eds.), The dark side of families: Current family violence research (pp. 102-116). Beverly Hills: Sage Publications.
- Weiler, K. (1988). Women teaching for change. South Hadley, MA: Bergin & Garvey Publishers.
- Yllo, K. (1983). Using a feminist approach in quantitative research: A case study. In D. Finkelhor, R. Gelles, G. Hotaling, & M. Straus (Eds.), The dark side of families: Current family violence research (pp. 277-288). Beverly Hills: Sage Publications.

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