

**Trauma & Healing: Findings
and Insights from Nurse
Scientists**

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Disclosure

The speakers have no conflict of interest to disclose.



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Background – Interactive Research Council

- Idea: 2013 Conference
- Focus groups (APA Research Council Steering Committee and Expert Panel members plus interested APNA members)
- Question: What can the Research Council do to promote psychiatric nursing research?



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Results

- Provide support, motivation and research-specific information for APNA conference participants
- explore new models of research collaboration
- dialogue with a leading nurse-scientist with track record of mentoring and inspiration
- address current funding issues – sources & strategies to secure funding
- Connect with other APNA nurse scientists
- Provide a dedicated space during the conference for emerging PMHN programs of research



Background

- APNA awarded the Research Council a grant to meet the needs identified
- Outcomes
 - Preconference: 4 dedicated sessions (Wednesday)
 - Welding Strong Connections Between Research and Practice: PhD and DNP Partnerships to Generate Knowledge and Improve Care
 - The Making of a Nurse Scientist
 - Understanding the Funding Landscape
 - Depression Recognition, Assessment and Intervention: Emerging Psychiatric Mental Health Nursing Research
 - Interactive Panel (Friday 4:45-6:15)
 - Trauma and Healing: Findings and Insights from Three Nurse Scientists



This session addresses the following needs:

- Provide support, motivation and research-specific information for APNA conference participants
- explore new models of research collaboration
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- address current funding issues – sources & strategies to secure funding
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Trauma & Healing Session Objectives:

- identify key processes associated with women and men's experiences of healing from sexual violence.
- discuss meanings, facilitators, and barriers associated with men's experiences of healing from childhood maltreatment.
- describe the risk/resilience factors that influence PTSD treatment seeking among female Veterans who experienced military sexual trauma.



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Adult Male Survivors' Experiences of Healing from Childhood Maltreatment

Funded by the National Institute of Nursing Research (R15NR011353)

- Danny Gaylon Willis, Principal Investigator



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Adult Male Survivors' Experiences Healing from Child Maltreatment

- Purpose: to describe healing from child maltreatment as experienced by adult male survivors of CM
- Methodology: Hermeneutic Phenomenology
- Recruitment: Multiprong approach; purposive maximum variation community-based sampling
- Sample: 52 adult male survivors of CM
- Data collection: in-depth in



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Adult Male Survivors Experiences Healing from Childhood Maltreatment:

- HP analysis uncovered the primary meaning of healing from CM in the multidimensional concept “Moving Beyond Suffering”
- Reflects the continuous, innovative pattern of change of liberating the self from preoccupation with abuse and the past, and focusing instead on discovery, cultivation, and sustenance of an authentic sense of self capable of experiencing and maintaining wellbeing.



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Moving Beyond Suffering
(Willis et al., in review; Willis, DeSanto-Madeya, Fawcett, in press)

Breaking Through the Masculine Veneer (BTMV)

Finding Meaning

Choosing to Live Well

Caring for the Self Using Diverse Healing Methods

Engaging in Humanizing Supportive Relationships:



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Moving Beyond Suffering:

“It has been a very long process. It’s taken years. It’s difficult.”

“It’s been like being in your own prison of suffering. You want to get out. It’s almost unbearable. I use that analogy because it has taken almost 10 years to heal through this notion of finally being a complete man and making sure that every day I wake up I expect this day to be a great day knowing that whatever I’m able to do is good enough.”



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Moving Beyond Suffering:

Finding Meaning

“The need was to understand where does this come from? Because I wasn’t even cognizant of what was going. I knew I was an angry person, an inpatient person, and that I was using alcohol and food, but I wasn’t sure why ... then I realized, from talking with people, that not everybody had a difficult childhood. Not everybody was struck. Not everybody was in an environment where people were yelling all the time”



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Moving Beyond Suffering:

Choosing to Live Well

“Just believing in my own self ... just believing in me even when sometimes people may not believe in me. Anything is possible if you can believe in your own self.”

“I’m going to have a healthy future. I am going to have a loving family of my own. It’s going to happen and I won’t let anything prevent that from happening... I don’t have to be like my dad [abuser]. *I am my own person.*”



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Moving Beyond Suffering

Caring for the Self Using Diverse Healing Methods

“I was having backaches, and someone recommended I go to a bodywork therapist. And she said [referencing his account of prior abuse], that’s one of the places that you were physically injured so its stored there.” At one point, she started to touch different things in my spine, and she pressed, and I started to weep.”

“I had a chance to explore some deeper levels of myself by putting that work [exploring self] out there on paper, it helped a great deal. How does it work in terms of healing? It’s telling your stories, even in abstract.”



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Moving Beyond Suffering

Engaging in Humanizing Supportive Relationships

"I needed social support, which is one of the most important things. To go about my daily affairs and have people respond positively to me, this is KEY because the response that I got from my parents was so negative."

"I realized I had come full circle because I helped so many people. I do all of this, different things for different people, and I realized that in my helping others, it helped me. And not looking for something in return, helping others you sort of get out of yourself ... get the feeling of joy of helping someone and seeing them helped."



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**Facilitators of Healing:
Desiring Release from Suffering**
(Willis, DeSanto-Madeya, & Fawcett, in press)

Desiring Release from Suffering

The men's perceptions and expressions of how they evolved from moving beyond suffering to experience wellbeing

- Openness to change
- Mindful Awareness
- Intention
- Perseverance
- Optimism



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**Barriers to Healing:
Dwelling in Suffering**
(Willis et al., 2014)

Men's perceptions and expressions of what slowed the rate of their evolution to experiencing wellbeing

- Hiding behind a masculine veneer
- Lack of insight
- Being distressed escaping through behaviors regarded by society as dysfunctional
- Mistrust of others
- Statements by therapists and others perceived as unsupportive
- Being in environments perceived negatively
- Without adequate male-centered resources for CM healing



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Implications

- Complex, multidimensional evolving nature of healing from CM calls for multimodal approach
- Multiple approaches; different approaches work at different times based on individual's needs
- Validate courage, strength, power to heal; provide support
- Advocate for enhanced male resources for healing & testing of intervention programs to determine most effective male survivor healing programs.



Processes of Healing from Sexual Violence

- The Sexual Violence Study
- Funded by the National Institute of Nursing Research (R01NR009230)
- Claire Burke Draucker, RN, PhD, FAAN, and Donna S Martsolf, RN, PhD, FAAN



Processes of Healing from Sexual Violence

- Purpose: To develop a theoretical framework that describes, explains, and predicts how men and women heal from sexual violence
- Methodology: Grounded Theory
- Population: Women and men who had experienced sexual violence at any time in their lives



Processes of Healing from Sexual Violence

- Recruitment: Adaptive community sampling
- Sample: 121 men and women
- Data collection: In-depth life narrative interviews
- Data analysis: Constant comparison, narrative, content, and cross-case analysis



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Framework 1: Living the Family Legacy (Martsolf & Draucker, 2008)

- Being stuck in the legacy
- Being plagued by the legacy
- Rejecting the legacy




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Framework 2: Determining my Sexuality (Roller et al., 2009)

- Grappling with meaning of CSA
- Figuring out the meaning of CSA
- Tackling the sexual effects of CSA
- Laying claim to one's sexuality




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Framework 3: Storying the Violence
(Draucker & Martsolf, 2008)

- Starting the story
- Shielding the story
- Revising the story
- Sharing the story



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Framework 4: Being Delivered (Knapik et al., 2008)

- Spiritual connection
- Spiritual journey
- Spiritual transformation



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Framework 5: Helping Others (Stidham, 2009)

- Protecting children
- Being understanding
- Choosing a helping profession
- Providing guidance/advocacy
- Speaking publicly



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Implications

- Healing from sexual violence occurs in multiple domains
- Healing from sexual violence involves complex trajectories
- Frameworks that describe the complexity of healing can guide clinicians in providing targeted approaches to treatment



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Risk and Resilience Influences on Seeking Treatment for PTSD

- PTSD Treatment-Seeking of Women Veterans who Experienced Military Sexual Trauma (MST)
- Funding: Emory University School of Nursing
- Ursula Kelly, PhD, ANP-BC, PMHNP-BC; Meghna Patel, PhD; Bekh Bradley, PhD



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Risk and Resilience Influences on Seeking Treatment for PTSD

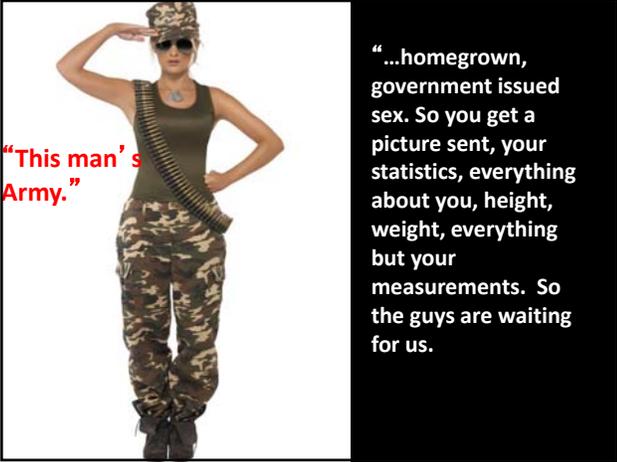
- Purpose: to explore the PTSD treatment-seeking decision-making processes of female veterans who experienced MST
- Methodology: constructivist grounded theory
- Sample: women Veterans who experienced MST and sought MST-related PTSD treatment (n=15) in a southeastern VA Medical Center
- Data collection: individual interviews



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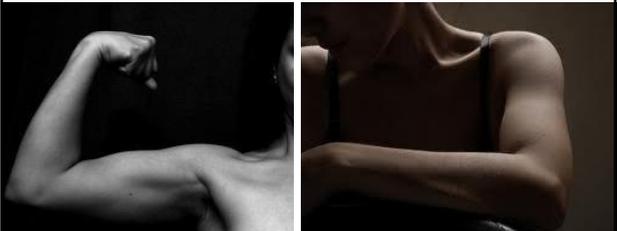
BEING A SOLDIER

- “Well, they say you’ re a soldier, you’ re strong, you can do it, like they will tell you suck it up. You can handle anything. They put this machoism in you... You have to be strong. You’ re not a soldier; you’ re a wimp if you can’ t deal with this [MST]. So I had to deal with that.”

BEING A SOLDIER

- “They forced me to learn you’ re a soldier, you can do it, you can do it, you can do it, and that’ s the mentality that I had that I could do it. So that’ s [what I did] and I put that in the past and I left it back there.”

Being strong, feeling weak





Conclusions

- Risk and resilience
 - Dynamic processes, not static events or attributes
 - Risk and resilience factors change over time
 - Two sides of the same coin
 - Not mutually exclusive

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Implications

- Recognize the context and dynamic nature of coping with and healing from trauma.
- The same risk and resilience factors can lead to different decisions at different times.
- Recognize women veterans' identity as soldiers who value being strong and projecting strength.
- Identify and capitalize on strengths and resilience resources to develop optimally effective PTSD treatment programs.

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