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Survivors' Attainment of Life-Skills

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### **Abstract**

Domestic Violence (DV), Human Trafficking (HT), and Sexual Assault (SA), otherwise known as power based personal violence, survivors' lack life-skills to deal with the demands and challenges of everyday life. Community Solutions' Solutions to Violence department, a non-profit agency serving survivors of SA, HT, and DV is actively assisting their clients with accessing community resources and advocating beside them through their journey to self-sufficiency. The contributing factors for the lack of life-skills are dependence on others, trauma, and lack of professional development opportunities. The consequences that arise from this issue for survivors are ongoing dependence on perpetrators, depression/anxiety, and poverty. This project was designed to create and implement an open self-sufficiency support group that ran for six weeks. The group touched on the topics of stress busters, SMART goals, healthy communication and relationships, and much more. After the sixth week, data from evaluations administered at the end of every session was collected. The findings indicated that the support group did in fact change the survivors lives and after the six weeks they had many tools to help them become self-sufficient. One of the participants commented after a session that she is very grateful and happy she attended the group. She stated that she now feels like she can conquer her trauma and be the self-sufficient woman she used to be. The Self-Sufficiency Group is recommended to continue in an ongoing loop and by properly evaluating the data, the workshops can be modified for the future if needed.

*Keywords: sexual assault, domestic violence, human trafficking, workshop, community solutions*

**Agency & Communities Served**

Community Solutions is a nonprofit agency with a mission to, “Create opportunities for positive change by promoting and supporting the full potential of individuals, the strengths of families, and the well-being of our community” (Community Solutions, 2017). Through this mission statement, Community Solutions strives to provide advocacy for the survivors who need their voices heard. Community Solutions has many different divisions separated into the different offices. The Solutions to Violence (STV) division supports survivors of Human Trafficking (HT), Sexual Assault (SA), and Domestic Violence (DV). The agency is supported by countless volunteers, community partners, and an empowering group of staff.

The Solutions to Violence division in Morgan Hill provides many services and programs to the HT, SA, and DV survivors. Some examples of services and programs applicable to all three populations include safety planning, advocacy, court accompaniment, and peer counseling. A significant number of the employees in the STV division are advocates in addition to their job duties as case manager or coordinator. The advocates rotate on the crisis hotline for a 24-hour on call shift to help potential survivors in need. They safety plan with the survivors to ensure that if and when a future incident transpires, they will be ready and know the steps they need to take. Peer counseling groups maintain the support that survivors need to get through their crisis and back onto their feet. There are many more services Community Solutions provides on a case by case basis to better serve each survivor. Lastly, the Solutions to Violence division holds a Family Justice Center every Wednesday in the Morgan Hill office. This gives survivors the chance to have a quick and fast paced meeting with an officer, nurse, advocate, and a district attorney. The

advocates always make their best attempt to support and guide their client through every step of the process.

Looking at the Community Solutions Financial Reports of 2017-2018, many different races, ages, and genders are supported through services and programs of the agency (Community Solutions, 2017). The majority of the clients, seen in Figure 1 in Appendix B, are Latino at 56% and Caucasians are next in line at 26%. This shows that many clients of Community Solutions are Spanish speaking and therefore have a harder time getting access to the services needed. The majority of clients are female at 63%, as identified in Figure 3 in Appendix B, and male at 36%. In this field the survivor is called a "she", but it is important to understand that there is a great number of males who are survivors too. Lastly, as noted in Figure 2 in Appendix B, the bulk of clients seen by Community Solutions are ages 18 to 64. The next highest age bracket is teenagers from 13-17 years of age (Community Solutions, 2017). The teenager age bracket is higher than the others, because of access to social media, stigma, and cultural norms.

### **Problem Description**

Domestic Violence, Human Trafficking, and Sexual Assault, otherwise known as power based personal violence, survivors lack life-skills to deal with the demands and challenges of everyday life. In the United States DV, HT, and SA survivors have the ability to access a great number of nonprofit agencies like Community Solutions. Further issues can arise for the survivor, when an advocate or case manager oversteps their boundaries creating too much dependence from the survivor. The survivor then proceeds to lean solely on the professionals and not become independent. In the health and human services field, professionals such as social workers do not want the clients to remain dependent on the services and guidance provided.

Advocates/case managers strive to get their clients onto their feet by referring them to services and guiding them to change their current life cycles. To do this, for example, the professional would take them on a bus route or take them to the grocery store instead of buying the survivors's groceries. There are many clients who call into the crisis hotline or are currently in crisis walking into Community Solutions' doors every day. The fact is, most people do not speak up about their crisis, so these survivors coming forward are only a handful of the actual number of victims in Santa Clara and San Benito County.

Sexual Assault, Domestic Violence, and Human Trafficking are topics in people's everyday lives that if not related to them, they would rather not speak about it. According to the District Attorney's Office (2018), there has been "A notable increase in sexual assaults [that] seems to be – in part – a result of increasing reporting of the often unreported crime (p. 1)." These crimes that the survivors go through are a part of a "taboo" effect that many cultures adhere to in the United States. Community Solutions seeks to spread awareness about SA, DV, and HT to the community, so people become aware and can prevent themselves from becoming a potential victim. To do this, Community Solutions runs prevention events, such as the Denim Day event at Gavilan College in Gilroy. This event spreads awareness about sexual assault, and the booth has an activity related to SA.

According to Chadron State College (n.d.), "Social workers fight for the rights of others and work to obtain needed resources by convincing others of the legitimate needs and rights of members of society(p.1)." This statement is a great descriptor of the ambition that Community Solutions has for all of the Solutions to Violence clients. The advocates/case managers want nothing more than to see the survivors they work with to stop their current life cycle and turn

over a new leaf. Through doing that the survivor will see how needed and loved they are in the world, and that they truly are good and strong enough.

### **Contributing Factors**

#### *Dependence on Others*

Professionals in this field of work ultimately strive to have their clients move on from their agency or organization as quickly as they can, while assisting them with everything they need. Every agency/organization wishes to help every client to the highest possible level, while pushing clients to become independent simultaneously. The hardest thing for a survivor to do is speak up and receive the help they need. Once they make the initial reach for help, all of the resources and services align to assist with every need or worry. The immediate help is great, but it can turn into the survivor not knowing how to fend for themselves. They could lose their voice in their decisions that are life altering, and that is the opposite of what Community Solutions wants. After the crisis stage, the survivors try to wean off of the support and many are stuck without the little skills usually taken for granted in everyday life. These little skills were “taken care of” by the advocate or case manager during the survivors’ crisis stage. Before the survivor spoke up, their perpetrator very well could have been the one guiding the survivor. According to Bornstein, (2002):

This situation may occur because the person controlling the resources is the sole provider in a family and chooses to deny the partner access to these resources, but economic dependency can also occur when one person takes control of financial resources via other means (e.g., through threat or intimidation) regardless of where these resources originate (p.597).

For example, the perpetrator could have not given the survivor a phone, allowed them to work, or let them leave the house at all! The survivor then is at a loss and does not know the first step to take to do anything like get a job, house, or go to school. According to (Bornstein, 2002), “The dependency–possessiveness model argues that dependent persons’ insecurity and abandonment fears may lead them to become abusive when they believe their partner will reject them”(p.598). This helps explain that perpetrators act out when they personally feel that their victim is becoming dependent on them. They latch onto this feeling and realize they can control this other human, because the fear and insecurity is blatant.

### *Trauma*

When a person goes through a crisis, not only their own life is affected but also the lives of everyone that cares for them are altered too. Being in a crisis blocks all of the survivors' will and motivation to be independent and believe in themselves. As stated by Facts About Women and Trauma (2019), “ Many survivors currently living with PTSD experience symptoms that are both chronic and severe. These include: nightmares, insomnia, somatic disturbances, difficulty with intimate relationships, fear, anxiety, anger, shame, aggression, suicidal behaviors, loss of trust and isolation”(para. 4). Most survivors have a type of PTSD, post-traumatic stress disorder, due to their crisis and therefore have one or many of these crippling symptoms. When these symptoms are chronic, a survivor can barely live day to day let alone build a resume or rent a home.

Many people who have not been through a crisis do not realize the extent of what the chronic trauma symptoms can do to a person. They stop realizing their self worth and retreat to their life skills that are needed to keep them alive, such as eating and breathing. Another concern



is that a survivor might be subjected to another form of trauma, and then the whole process will repeat itself. The survivor could have potentially been almost “whole” again, and be retraumatized and all of their hard work will be washed away.

#### *Lack of Professional Development Opportunities*

Many agencies/organizations like Community Solutions provide counseling services for their clients, but the services mainly only look at concrete needs. These specific needs are explained by Miller (2016), “Concrete needs might include basic requirements like food, clothing, and shelter, but can also include social benefits, health care or child care”(para.1). These are detrimental needs for every survivor, but a person cannot move on from their crisis if they don't understand renter's rights or how to budget their money. Workshops and peer counseling groups are great support techniques and resources for clients meeting other fellow survivors. With that being said, if a client does not understand these life-skills, then it will not be brought up or thought about in the meetings or workshops.

Group meetings allow the survivors to not feel alone in their crisis. Every survivor is different and in a distinct stage of their story. Survivors talking with others who potentially have gone through what they are currently struggling with can be very beneficial. The survivor can see that they can overcome this crisis and they are strong enough. It can be embarrassing for a survivor to ask for guidance on how to build a resume or how to speak to their children about issues they may be having. Again, Community Solutions provides many options for the survivors to gain these needed skills without judgement or cost.

## **Consequences**

### *Ongoing Dependence on Perpetrators*

When people not experiencing the trauma/abuse see the survivor go back to the perpetrator, the common reaction is, “Why is she going back to him?” Comments like this are a form of “victim blaming” which could retraumatize the survivor. This very common saying takes the blame of the incident from the perpetrator and places it once again on the survivor/victim. Many perpetrators are known by the survivor before the incident, for example they are a father, son, boyfriend, uncle, etc. The survivor may still love their perpetrator and not want their whole family to break apart just because of their own trauma. Many survivors may also feel that the incident was a one time action, and therefore they are not in harm's way any longer. According to Samsel (2018), who wrote an article on victim blaming, “There is usually some rationalization for blaming the victim, most commonly, that the victim could have escaped the situation or avoided it in the first place”(para.2). Instead of blaming the survivor, the professionals need to empower the survivor in their choices even if the choice can not lead to the best outcome. If the survivor wants to stay with the perpetrator, then the professionals will make a safety plan in case another situation/crisis takes place. A safety plan is set in place to help the survivor stay as safe as possible when an abusive situation is beginning to occur. It can deal with securing/purchasing a spare phone, spare set of keys, a list of phone numbers, clothes, water, food, etc and keeping the items in a safe hidden place. This will give the survivor more time to flee, find help, and in return give the perpetrator less time to attack the survivor.

When a person becomes a survivor of human trafficking, sexual assault, and/or domestic violence they are left without pieces of their life they used to have. Before becoming a survivor

the person was independent, had a voice, and was able to be a part of society. Once crisis and trauma consumes the survivors' life, these simple skills are stripped from them. The perpetrator strives to have the survivor be completely submissive to them. To ensure their dominance they may force the survivor to stop working, to not have a phone, threaten to report illegal status, or even threaten their life. These intimidations are real, especially if the perpetrator has a weapon in the home or has in the past physically assaulted the survivor. Once the survivor seeks help, like the participants of the workshop, they are disoriented from reality and vulnerable to what their new life is throwing at them.

With these skills vanished, it can be very unsafe and treacherous for the survivor to attain help. With no phone, how could the survivor contact the outside world without the perpetrator knowing, especially if they are not allowed to leave the home. Also, even if the survivor gets access to a phone, how will they know who to call and if they can truly trust the person on the other end of the line. In some cases, the perpetrator may work for the police force and the policemen on the other end of the line could be a friend of the man the survivor is escaping from. Lastly, if the survivor has been in this crisis for years then they might not know the resources available or that the resources can be free of cost.

### *Depression / Anxiety*

Depression and anxiety are mental health obstacles that many people sometimes not in crisis deal with day to day. These two troublesome mental health problems have a lot of bad stigma against them, and people even joke about having depression and anxiety. Many people in the United States joke about these two serious mental health conditions and this makes speaking up about the crisis much harder than it should be. After going through a crisis and being

traumatized, the survivor may feel that they have no voice in their life. The feeling of not being able to control your life and not having the knowledge to take a correct step forward is unbelievably scary. According to Schouler-Ocak, (2017):

The psychological impact of victimization may be more severe than the physical violence. Victims who have been rescued from sexual slavery, typically present with various psychological symptoms and mental illnesses, including the following:

Post-Traumatic Stress Disorder (PTSD), depression, anxiety, panic disorder, suicidal ideation, Stockholm syndrome, and substance abuse (p.1).

Being a survivor that does not speak English well and is overcome with anxiety/depression puts up strong barriers to learning concrete life skills. To be taken seriously in a professional environment the survivor needs a completed resume, appropriate clothing attire, and the ability to effectively communicate to others. These are simple concrete skills, but many survivors never get the chance to obtain them during their crisis. Human Trafficking is a huge concern with survivors' lacking appropriate life skills. Their lack of mental stability due to the trauma they endured, as stated by Schouler-Ocak (2017), can actually be a greater problem than the physical abuse toll on the survivor (p.1). This psychological abuse can lead to worse mental health complications that can affect the survivor for the rest of their life even with professional guidance.

### *Poverty*

After a crisis hits in the survivors' life, their brain gets put on autopilot to survive. Their sense of pride and motivation becomes nonexistent. When the trauma sets in all sense of reality and direction is lost. The survivor may stop showing up to work, may begin to abuse substances,

and budget properly. When the only thing on a survivor's mind is staying alive, there is no room for common sense. According to Jewkes (2002):

Sexual violence also can jeopardize a person's economic wellbeing, often leading to homelessness, unemployment, interrupted education and health, mental health, and other daily stressors and struggles. In turn, living without one's basic needs met can increase a person's risk for sexual victimization causing a difficult situation (para. 3).

Survivors who lack concrete life skills are highly more susceptible to living in poverty than the average person. The survivor may have never lived on their own and had to depend solely on their own income. This can be frightening and potentially retraumatizing for a survivor to begin working, since their abuse may have begun at their workplace. Their perpetrator may have been upset they were working, and therefore had the survivor quit their job. This gives the perpetrator power, and in return takes away independence from the survivor. The survivor then becomes grounded in the life of their perpetrator and eventually will have no sense of what their normal life was.

### **Problem Model**

<b>Contributing Factors</b>	<b>Problem</b>	<b>Consequences</b>
Dependence on others	DV, HT, SA survivors lack life-skills to deal with the demands and challenges of everyday life.	Ongoing dependence on abusers
Trauma		Depression/Anxiety
Lack of professional development opportunities		Poverty

## **Capstone Project Description and Justification**

### **Capstone Project**

This project served survivors from diverse types of trauma and therefore required different goals, plans, and services. Immediately, when a survivor becomes a Solutions to Violence client, the case manager will open their file in the online system. They are then labeled either a domestic violence, sexual assault, or human trafficking survivor. From that point on, the three populations are separated from each other for pinpointed case management and services.

Community Solutions has looked into changing the trend of separating the survivors and initiated an open group for any client at the agency. The groups that have been run in the past were based on one specific type of trauma, SA, DV, or HT, to better treat and assist all clients who attend. Due to a grant received in 2019, Community Solutions was given the task to put together, run, and maintain an open group for survivors looking at the life-skills they had been stripped of at the hand of their trauma/crisis. This group was offered to any STV client that had a need for building their life skills or who needed the extra support in general. This group met once a week beginning on January 27th of 2020 until March 9th of 2020. Specifically, the group was held on Monday nights in the Gilroy office from 6:00 PM until 7:45PM.

The topics were different every session, beginning with goal planning and balancing factors in life. The first half-hour was the participants grabbing their dinner and sitting down, while the facilitators caught up on who was attending the workshop and why they were present. From there, the participants split up into the three age groups. There was a parent group for parenting skills, an open group for self-sufficiency, and a child group for trauma. The self-sufficiency group then moved into a nearby room and began the curriculum for the evening.

The group started with introductions and an icebreaker activity, and then began one or two guided activities that worked on the pinpointed skill. After, there was a group discussion, takeaways, and evaluations that the participants filled out. This six week workshop gave the clients enough resources and the strength to become independent on their own.

As stated above, there were six workshops which means the workshop was run for the span of a month and a half. The workshop topics were coping skills, health, education, resilience in life, a whole you, knowledge of resources, goal planning, communication and relationships, and time management. During the first workshop, the participants completed a “your life wheel” activity, where there is a circle cut into six sections and each section represented one lifeskill/session that the workshop will touch on. The participant rated their satisfaction of each topic from a scale of zero to ten. At the end of the six weeks/workshops, the participants then completed the “your life wheel” activity again and compared the two. If the workshop was truly helpful for them, the second activity should have had higher scores than the first time the activity was completed. This is also a physical reminder for the survivor of what they can accomplish and how balanced their life truly can be.

### **Project Purpose**

The Self-Sufficiency Group specifically addressed the survivors' lack of professional developmental opportunities. The purpose of the Self-Sufficiency Group was to educate the participants on six different life-skills that often become lost in trauma or crisis. These life-skills can be budgeting, housing, health, career building, and many more areas. In the first workshop, the participants completed a life wheel activity. This activity helped the participant gauge which areas in their life they needed to work on the most. All of the areas to be gauged are topics that

were covered throughout the six sessions. This helped the participants see that by the end of the six weeks their life is more put together, and the information gained from the sessions has been applicable to their current lives.

When a survivor gets out of their traumatic situation, may it be a domestic violence situation or being human trafficked, many life skills are nonexistent. The reason for this is many perpetrators make sure to isolate the survivor as much as possible. When the survivor has no job, no phone, and no car, then the perpetrator has much more control. Many perpetrators have a very good idea on how to manipulate their victims life to make the victim depend fully on them. The Self-Sufficiency Group helped the survivors regain these essential skills to get back on their feet. The workshop linked the survivors to resources in the community, and helped them prove to themselves that they can get back on their feet. Self care and coping skills were a topic of one workshop, so the participants could begin to put their pieces back together.

### **Project Justification**

An ongoing weekly workshop with predominantly the same participants, the same broad topic, and same facilitators was an effective way to maintain and support the participants' understanding of the topic. Community Solutions has a grant to hold an open group, and the Self-Sufficiency Group fulfilled that need. The workshop was held weekly and went on for a total of six weeks. In order to have an effective prevention program, there were certain principles that needed to be covered. The principle for this workshop was sufficient dosage of intervention. According to Nation, M., Crusto, C., Wandersman, A., Kumpfer, K. L., Seybolt, D., Morrissey-Kane, E., & Davino, K. (2003, June), "This principle refers to the need for participants to be exposed to enough of the intervention for it to have an effect"(p.453). In this



case, working with power based personal violence is tough when it comes to accessing resources. There is an abundance of resources available for survivors at no or low cost, but reaching out is a feat in its own self. Survivors struggle to reach out for multiple reasons, but once they do they are potentially home free.

The principle of sufficient dosage has many different aspects such as, "Session length, number of sessions, spacing of sessions, and the duration of the total program" (Nation, 2003 p. 452). The Self-Sufficiency Group covered all of these aspects: Hour and a half in length, six sessions, weekly, and the total duration is a month and a half. If a singular Self-Sufficiency Group was held, the participants would hear the information one time, not build a bond with each other or facilitators, and the length of the meeting would have to be pretty long to fit in all of the topics properly. The participants, being survivors, would be filled with so much knowledge and resources at once they could shut down and potentially become retraumatized.

According to Nation, 2003, "Effective interventions generally include some type of follow-up or booster sessions to support durability of impact"(p.452). The series of workshops touched on past questions of the participants. At the end of every session the participants filled out an evaluation form, and during the next session the facilitators answered the questions if any were asked. In addition to this, the first "your life wheel" activity, explained above, was completed after the last session and compared to the first session. When the participants found out what topics they were struggling with, then potentially the class as a whole or just the clients case manager can focus on the pinpointed areas in the future.

### **Project Implementation**

In order to implement the Self-Sufficiency Group for survivors' of sexual assault, human trafficking, and domestic violence for Community Solutions, there were many steps to complete. While working with a population going through a crisis, the workshops needed to be put together accurately and explained thoroughly. The group was going to be run in year time chunks and use the same agendas enforced in this first implementation. When it came time to enacting the actual implementation, this perfect idea ended up not being the way the group would unfold. To begin creating this workshop, the STV staff needed to get together and brainstorm the six topics, instead of the original twelve, that would be covered in the workshops and the timing of due dates for the curriculum. They also needed to look in Community Solution's calendar for using rooms at the agency and figure out what room the workshop would use weekly instead of monthly.

Changes occurred to the Self-Sufficiency Group due to being in this field of work with this type of individuals. The group began in January 2020 instead of the original date in October 2019, because of lack of time, participants, and knowledge. Instead of it being an adult open client group, it turned into an open group with two 7th graders and an 18 year old college student who were sexual assault survivors. The group was going to be run by multiple different facilitators in two counties and only one group ended up running with one facilitator. The curriculum changed from adult based self sufficiency skills to more relatable young adult life skills. For example, instead of budgeting and renters rights the group focused on healthy relationships, communication, and coping skills.

The next step was to figure out which staff member/s would facilitate each workshop and who would put together the needed supplies for each workshop. This changed into one professional facilitating for the whole group along with creating the curriculum and gathering needed supplies weekly. Each session was worked on and discussed a week before it was implemented since it changed from once a month to once a week. Figuring out the ordering of the six workshops took up a whole meeting in itself, because they needed to build on each other. For example, the first session was breaking down every aspect of life and rating it on a one to ten scale and from there every session was one of those aspects.

The first workshop was creating a life wheel, as stated above, and a vision boarding activity. In this workshop the participants completed a worksheet in which they rated the six sections of their life on a scale from zero to ten. The second activity was creating a vision board (on a piece of colored paper), by putting together a collage of what they wanted their ideal life to look like. The participants cut out images or words from magazines or other paper resources to create their collage. For the second session the workshop focused on SMART (Specific, Measurable, Attainable, Relevant, Timely) goals, each participant had their own specific goal/s to achieve. This helped the participants visualize and create steps towards goals that could help them with the tough time in their life. The other four topics of the workshops were the sections of the participants' life that they rated with the "your life wheel" activity during the first meeting.

There were multiple administrative weekly tasks to complete before each workshop was held. These tasks consisted of completing and printing a workshop agenda, gathering needed supplies, finding a speaker (if needed), reserving the needed room to run the workshop, making and distributing flyers throughout the community, and putting together the participants' folders.

The participants' folders were used ideally for the six workshops as a whole, but when new participants were added throughout the weeks new binders had to be put together. There were evaluations which the staff collected from the participants and entered the data into Google Forum. A detailed implementation plan and timeline can be seen in the Scope of Work in Appendix A.

### **Assessment Plan**

To measure the effectiveness of the Self-Sufficiency Group, the participants completed and turned in an evaluation after each of the six workshops. The staff of Community Solutions were going to meet at the beginning of the month before the first workshop was held to determine what questions were needed. Since it shifted to weekly, it was decided to keep four questions the same for every session and change one question to focus on the specific topic. The evaluation was five questions in total for every week. Three of the questions were multiple choice and were geared around the technicalities of the workshops as a whole. It dissected how the group was run, how effective the facilitators were, and how relevant the given topic was for each participant.

After having been completed, the evaluations were inputted into a single Google Forum database. At the end of the six self sufficiency workshops, all of the data was combined together in one file and the STV staff is now able to analyze it and see the effectiveness of the sessions. This also helped the staff at Community Solutions evaluate the data and to how effective the workshop really was for each individual participant. The Self-Sufficiency Group is recommended to continue in an ongoing loop and by properly evaluating the data, the workshops can be modified for the future if needed. For example, if the topic was not useful for the

participants or the activity was not helpful then it can be omitted or revised. The participants have their own lives with work, family, and other pressing factors. If they do not leave a workshop without new knowledge or potential ways to cope with their past trauma, then they simply will cease to show up.

The first question was, did this workshop meet your overall expectations. This was important to know, because if a participant was expecting to, for example, learn how to make a resume and they left the workshop with no idea how to do so, then their overall expectations had not been met. The second question was different for every workshop, but it showed if the person understood and gained new knowledge from the workshop. The third question was do you feel like you have learned one new way to balance your life. This is important, because it related back to the life wheel activity the participants completed during the first workshop. This workshop as a whole was constructed to help the participants balance all the aspects of their life. The fourth question was how much of the information presented was helpful for you. This was needed for assurance from the participants that all of the information, or none, was helpful and a good use of time for everyone involved. Lastly, the fifth question was an open ended question stating, do you have any further comments or suggestions. This was important, because this gave the participants a voice and the chance to speak up about anything they wanted the facilitators to know.

### **Expected Outcomes**

There were two expected outcomes for the Self-Sufficiency Group: participants reaching self-sufficiency and participants benefitting from the group. The first expected outcome of the participants reaching self-sufficiency was a very far stretched goal. With the group lasting six

weeks and the population being served, this expected outcome was changed to the participant becoming more self-sufficient than before attending the group. The second expected outcome of the participants benefitting from the group looked at all of the other aspects than being self-sufficient. These aspects look at being pleased with the curriculum, feeling welcome, leaving each workshop feeling like they have added to their skill set, and finally just believing in themselves as survivors. These expected outcomes were evaluated at the end of every session and it was hard to get accurate data due to the lack of participants.

The group provided the participants/survivors with resources and knowledge of how to live and strive on their own. Many survivors have been stripped of their life skills by their perpetrators and crisis', which therefore has left them discouraged and isolated. This group helped participants regain the life-skills they once had and potentially add to their past knowledge and experience. This support group also allowed case managers to help their clients get on their feet so, with that being said, it will relieve the case managers at Community Solutions. This workshop also allowed the survivors to build relationships with other survivors, and through this they learned to lean more on each other than on Community Solutions.

The Self-Sufficiency Group also helped Community Solutions reach out to the community more effectively. There could be survivors in the community that did not know about the services the agency provides or they were too nervous to seek help before. Many potential clients do not know that the agency's services are free and everything is confidential, unless it has to do with mandated reporting. A mandated reporter is a professional who has to report to law enforcement if the client is a harm to themselves, others, or someone is harming the client. As an agency Community Solutions wants nothing more than to not gain any more

clients/survivors. If there are no clients gained, then hypothetically it means every survivor knows the resources to access and has a solid group of people to lean on. This lack of clients could also mean the agency has provided so much outreach and prevention that abuse has taken a step back!

### **Project Results**

The self-sufficiency workshop was evaluated with a five question paper evaluation and given at the end of each of the six sessions. The evaluation, that was described above, was administered to ask the participants questions about the sessions content and relevance. The results of the six sessions were analyzed using Google Forum. This database forms graphs and combines the data to be better understood by the average person. This type of evaluation is common among workshops and support groups, but it can lack giving strong data in the end. As seen in Appendix C: Figure 1, 70% of the participants stated the workshops met their overall expectations. Also, looking at Appendix C: Figure 2, it can be noted that 60% of the participants have learned a new way to balance their life after every session. For this Self-Sufficiency Group specifically there was a good amount of data collected, but the participants did not take the time to thoroughly fill out the form. The group often lacked the time at the end of the session to fill out the evaluations and most of the participants did not understand the overall importance of an evaluation.

The last question of the evaluation, Appendix C: Figure 4, was an open-ended question which was meant to get the participants thinking about what other topics they felt necessary for the workshop to cover. In Appendix C: Figure 4, it can also be seen that 100 % of the participants thought the vision board activity was beneficial to them. The group was meant to be

relevant to the survivors' trauma and needs, so this question would help the facilitator/s build a stronger curriculum. After collecting all of the evaluations of the six sessions, it was clear to see that the participants did not see the importance of this question. Every survivor or person in general has at least one aspect of life they are not satisfied with, so seeing these results was troublesome. The top answer to the last questions was, "IDK" which means, "I don't know". The other four questions, in appendix c, were multiple choice and evaluated the expectations, acquiring the new skill/knowledge, importance of the topic, and for each specific workshop if they left with having added to their personal tool belt. These questions, since it was multiple choice, did give the facilitator accurate data for all of the six workshops.

There were big hopes and dreams for this Self-Sufficiency Group and in the end it really did change three young adult's lives in one way or another. There were a total of three participants throughout the six sessions, but only one participant attended all of the sessions which made the results acutely skewed. This made keeping a steady curriculum that built upon itself hard to attain, because the session would not make complete sense if the participant did not attend the last session. Overall the group did meet all of its expected outcomes, just in a different light than anticipated. It did serve the participants and give them their life-skills back that they had lost in the chaos of their trauma. After the six sessions the participant that attended every session left with two vision boards, SMART goals, stress busters, knowledge of healthy relationships and healthy communication, acquired new selfcare tactics, and became more resilient in life.

With the onset of the COVID-19 virus in the beginning of 2020, many of Community Solutions policies and procedures changed. All of the staff began to work from home and all of



the face to face contact with clients was put on pause. Any training, workshops, or support groups also had to be discontinued or they transitioned the curriculum into an online setting. The self-sufficiency group, for a week, was going to be transitioned to an online group but in the end the group discontinued. The group will begin with the same curriculum again when the virus chaos simmers down. As for the data and analysis of this project, the group stopped being conducted after the sixth session and thankfully there was enough data to analyze the group and curriculum.

### **Conclusion & Recommendations**

With having completed the full six week Self-Sufficiency Group, there is sufficient enough data to conclude that it should be implemented again. Looking at the charts in Appendix C, the majority of the participants chose the “yes” or “most of it” option on the evaluations. Likewise, none of the participants chose “no” or “not much” on any question given to them. This proves that every participant was at least neutrally impacted by every session given, if not positively impacted. There was only a short amount of time to have the participants fill out the evaluations and therefore there was not a great opportunity for them to fully assess the group. During the outbreak of the COVID-19 virus, all face-to-face interactions were put to a halt. Due to this, the self-sufficiency group was concluded rather abruptly. Two of the participants reached out to their case managers asking if the group could somehow continue despite not being able to meet in person. This proves, again, how positively the group impacted at least two out of the three participants. The Self-Sufficiency Group will be continued by Community Solutions and will assess again later to receive more concrete data.

Although the self-sufficiency group was a success in the sense of positively impacting the clients, there could always be changes and additions made to the process and curriculum. The first recommendation given is to create an agenda during the first session including how the group will be run and all of the topics that will be covered. This agenda of the whole group will allow the clients to be better prepared emotionally and it will reduce potential re-trauma. Another proposed recommendation is to have the open group be promoted to every client at Community Solutions, as to have a higher number of participants attending every session. Since the group is an open group to fulfill a grant's needs, it cannot be mandatory to show up for every session like many groups are. The last recommendation suggested is to include each participant's advocate or case manager on the group's curriculum. One of the clients attended one session and could not attend the rest due to other obligations. The client's case manager was then contacted and was given the curriculum for them to do during their check-in meetings. This extra support was a great success for the client and the case manager. Therefore, if every professional was more immersed into what their client is exposed to in the group, than there would be a higher chance the client would be positively impacted by the curriculum.

### **Personal Reflection**

I have gained a lot of knowledge and experience with the DV, SA, and HT populations by implementing this support group. I learned that these survivors are truly normal people like me and anyone I know, they have just experienced trauma and have gone through a crisis. To go from an undergrad student to an almost graduated student, with a year and a half of intern experience completed, and having created a support group is mind blowing. I have gained so much professional growth as well as personal growth. I have never thought of myself as a

professional and having the capability to work with clients at this point in my life and career. I now know that I am very deeply trained with the sexual assault survivor population and I am capable of working with clients. I have been able to serve many clients specifically during the Spring 2020 semester of my internship at Community Solutions. I did this through my self-sufficiency support group and shadowing many case managers/advocates. Nine times out of ten the thing I will be working on will not go as planned, and now I am okay with that. My project completely changed from what I had in mind in the beginning and now it is better than I could have ever expected. The agency asked to keep my whole curriculum to implement again once the COVID-19 chaos lessens. The clients got a lot out of the activities and they even asked if I could continue online with them when the agency shut down.

There were many ways I could have structured a group based on self-sufficiency. Holding the group once a week solidified the rapport among everyone involved and as we progressed through the sessions the conversations got deeper. It gave me the ability to do weekly check-ins and ask specifically about the test they mentioned or the birthday party they attended the weekend before. On the other hand, it was nice to have 6 days in between the meetings so I could properly create and implement the curriculum and it gave the participants time to think through the new tools they attained.

Implementing an open group was a challenge with retaining the participants, but I also strongly believe that when they did show up it meant more. They were not forced to show up to fulfill a mandate or treatment plan. It was all up to each and every client, so the ones who came were so strong and resilient. This was the first support group I have ever run so that limited me to how effectively I facilitated the sessions. Since the participants were pretty close to my age

bracket that also presented difficulties with me and the participants keeping boundaries professionally. They looked to me as a professional but also as a young adult that related to them.

Support groups that meet on a constant basis have such a positive and effective impact on survivors of SA, HT, and DV. Looking at the data in Appendix C, it is clear that working on base-level life skills with survivors is one of the main components to reaching true self-sufficiency. Every survivor has experienced different trauma/s and are at different places in their journey to being complete again. Having a group to lean on with mostly the same participants once a week helped release the stigma of seeking help and being vulnerable. Having completed my internship at Community Solutions and capstone project I now know that I will be able to properly and efficiently serve survivors of DV, SA, and HT.

Beyond implementing the Self-Sufficiency Group, I believe that there needs to be more work directed at breaking stigma. All of the participants who showed up were noticeably terrified that they would know someone attending the group or be judged for being a survivor. After the first session they realized that there was no judgement and that they are resilient and capable of being independent. Whether it is more open support groups, classes at colleges and schools, or simply putting up booths at town gatherings. In schools they can show videos or possibly bring in a survivor to make it normalized and impactful. Stigma is so strong, even with me doing in depth training about these survivors I was scared to facilitate the first group. I did not know what to expect and I imagined the worst outcome possible.

Being a student intern at Community Solutions was my first experience in this field. Throughout the whole three semesters I was supported, got my own cubicle, and was welcomed

by all of the staff from day one. Rosio was the best mentor, honestly better than I imagined, I could have asked for and she did everything in her power to support me. When she went on maternity leave her boss Erica became my mentor and supported me as if she had been my mentor from day one. They both took time away from their own fast-paced job and sat down with me looking at activities and programs I was helping with. They would give me advice on what to change or add on, but while doing so they would validate how hard I worked to get to that point. My advice for a future capstone student being placed at Community Solutions would be to not be afraid to advocate for yourself or ask questions. I was nervous to approach a staff member about concerns or struggles I was having and one day I spoke up and the issue immediately was dealt with. Everyone at the agency is so self-less and saw me as an equal. They constantly would ask what I was working on and would invite me to meetings and potlucks. Just speak up and do not be afraid that you are being a burden to a staff member. Trust me, they love to help or guide interns and they also love to be shadowed. You just need to voice that you want to do certain things! With the capstone project, I believe that the agency will try to make any project happen. I proposed my idea and they made it work to be able to best support me and serve the clients.

### References

- Bornstein, R. F. (2006, September). The Complex Relationship Between Dependency and Domestic Violence. Retrieved October 24, 2019, from <https://pdfs.semanticscholar.org/18bc/93e7d18bcd9d20af4b84537ec160dbc52fc.pdf>.
- Chadron State College. (n.d.). Roles of a Social Worker. Retrieved from <https://www.csc.edu/socialwork/careers/roles/index.csc>.
- Community Solutions. (2017). Retrieved from <https://communitysolutions.org/>
- District Attorney's Office. (2018). *Crime in Santa Clara County. Crime in Santa Clara County* (pp. 1–24). Santa Clara County , CA.
- Facts About Women and Trauma. (2019). Retrieved October 12, 2019, from <https://www.apa.org/advocacy/interpersonal-violence/women-trauma>.
- Jewkes, Sen, & Garcia-Moreno. (2002). How are poverty and sexual violence related? Retrieved October 13, 2019, from <https://pcar.org/poverty-and-sexual-violence>.
- Miller, A. (2016, November 9). Social Workers' Roles in Helping the Poor. Retrieved October 12, 2019, from <https://work.chron.com/social-workers-roles-helping-poor-24938.html>.
- Nation, M., Crusto, C., Wandersman, A., Kumpfer, K. L., Seybolt, D., Morrissey-Kane, E., & Davino, K. (2003, June). What works in prevention. Retrieved December 3, 2019, from <https://endingviolence.uiowa.edu/assets/ce3bfd4d08/What-Works-in-Prevention.pdf>.
- Samsel, M. (2018). Victim Blaming. Retrieved October 13, 2019, from [https://www.abuseandrelationships.org/Content/Survivors/victim\\_blaming.html](https://www.abuseandrelationships.org/Content/Survivors/victim_blaming.html).
- Schouler-Ocak, M. (2017). European Psychiatry. *Women Mental Health and Trafficking, 41*, 9–9.

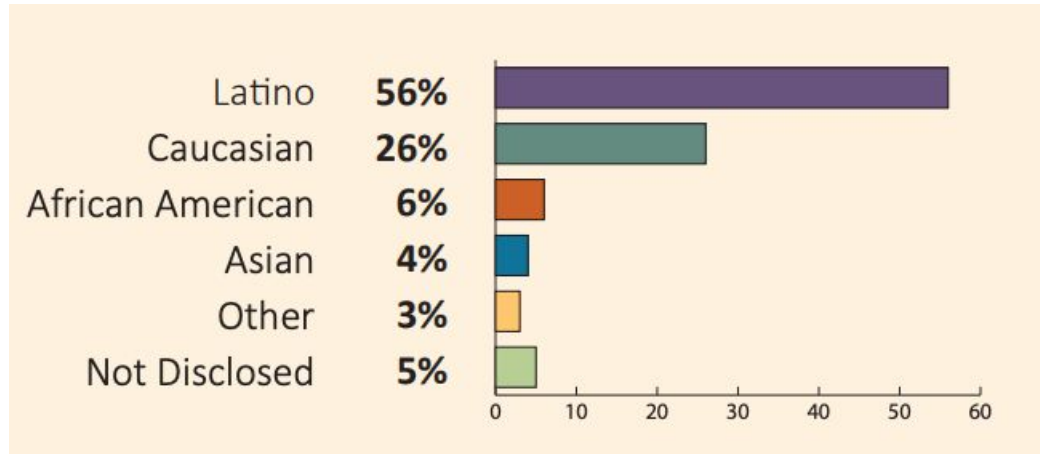
doi: <https://doi.org/10.1016/j.eurpsy.2017.01.078>**Appendix A****Scope of Work - All activities were accomplished as expected**

<b>Activities</b>	<b>Deliverables</b>	<b>Timeline/Deadlines</b>	<b>Supporting Staff</b>
Brainstorm Workshop Topics	6 Workshop Ideas	October 2019 - April 2020	Erica Elliott, Adriana Marquez & Rachael Castro
Figure Out Staff To Help	Solid Workshop Staff	November 2019 - April 2020	Erica Elliott & Adriana Marquez & Rosio Franco
Meet With Staff To Solidify Workshops		October 2019 - April 2020	Erica Elliott & Rosio Franco
In-Depth Topic Research	Accurate Information Given	November 2019 - April 2020	Erica Elliott & Adriana Marquez & Rosio Franco
Mention Workshop In Advocate/Division Meeting	Case Managers Mention Workshop To Clients	November 2019 - April 2020	Erica Elliott, Adriana Marquez, Rachael Castro, & Rosio Franco
Figure Out Where To Host Workshop	Room To Host Workshop	November 2019 - April 2020	Erica Elliott & Adriana Marquez & Rosio Franco
Research Past Workshops From Community Solutions	Useful Activities/Past Evaluations	November 2019 - April 2020	Erica Elliot, Adriana Marquez, Rosio Franco & Rachael Castro
Learn How To Make Community Solutions Powerpoints	Agency Usable Power Points For Workshops	November 2019 - April 2020	Erica Elliot & Rachael Castro
Agenda For Workshop	Participants/Case Managers Receive Agenda, Facilitator Can Shape & Run Workshop	October 2019 - April 2020	Erica Elliott, Rosio Franco & Adriana Marquez
Gather Supplies for Workshop Activities	Supply Needed Supplies For Participants For Each Activity	November 2019 - April 2020	Erica Elliot, Rosio Franco & Adriana Marquez

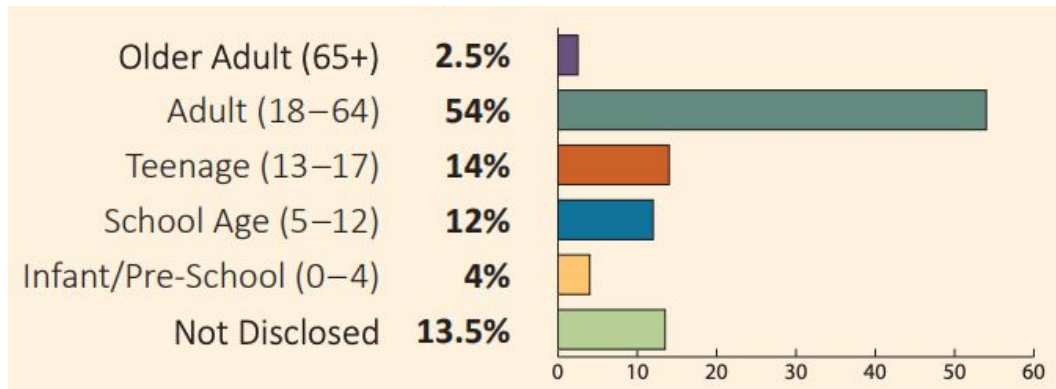
Gather Refreshments for Workshop	Access To Refreshments at Beginning of Workshop	November 2019 - April 2020	Erica Elliot & Rosio Franco
Evaluation of Workshop	Printed Evaluations	November 2019 - April 2020	Erica Elliott & Rosio Franco
Give Agendas to Staff	Potential Participants Lined Up	November 2019 - April 2020	Erica Elliott, Adriana Marquez, & Rosio Franco
Figure Out Speaker For Needed Workshops	Lined Up Speakers	November-December 2019	Erica Elliott, Rosio Franco, & Adriana Marquez
Create Monthly Workshop Flyers	Ability To Reach Out In The Community	December 2019 - April 2020	Erica Elliott, Rosio Franco & Adriana Marquez
Post Flyers For Upcoming Workshop	Gaining Participants	December 2019 - April 2020	Erica Elliott, Rosio Franco, & Adriana Marquez
Set Up SMART Goal Activity	SMART Goal Activity Packet Hand Each Participant	November 2019	Erica Elliott, Adriana Marquez, Rosio Franco, & Rachael Castro
Insert New Information In Binders	Updated Binder For Participants	November 2019 - April 2020	Erica Elliott & Rosio Franco
Create Example Personal Vision & Life Wheel	Participants Will See What The Activity Is	January 2020	Erica Elliott, Rosio Franco & Adriana Marquez
Host Workshop		January 27th, 2020 February 3rd, 2020 March 2020 April 2020	Erica Elliot, Rosio Franco & Adriana Marquez
Collect Data From Workshop Evaluations	Update Curriculum Accordingly	November 2019 - April 2020	Erica Elliot & Rosio Franco



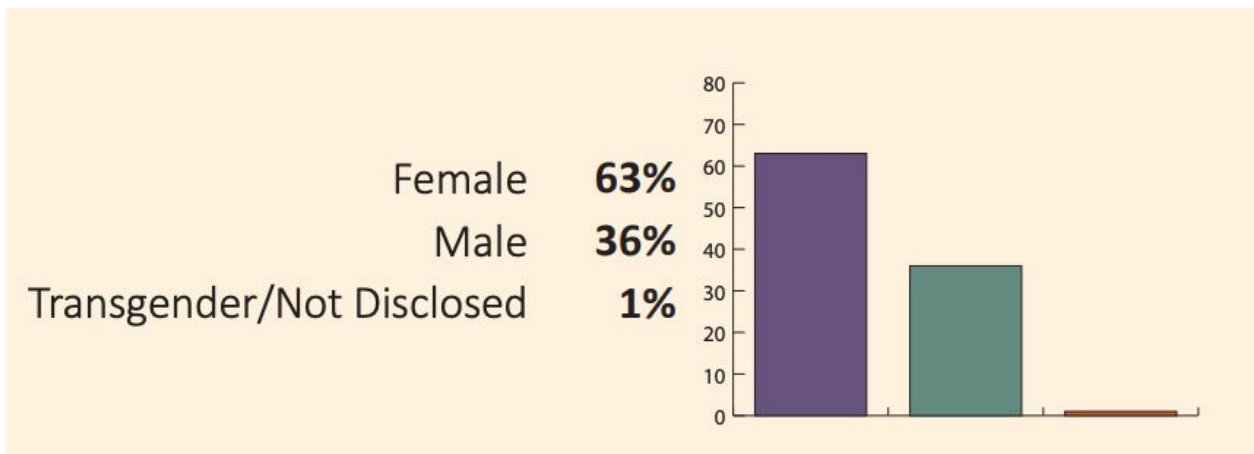
**Appendix B**



**Figure 1: Race Population**



**Figure 2: Age Population**

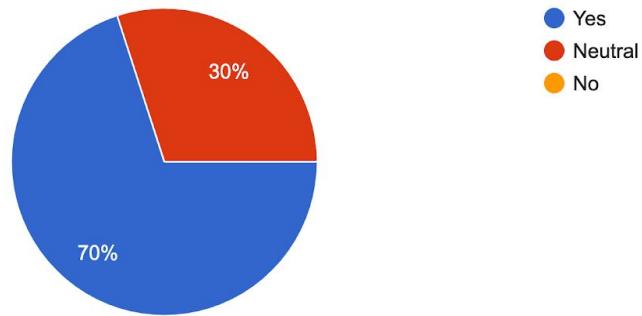


**Figure 3: Gender Population**

**Appendix C: Survey Results**

Did this workshop meet your overall expectations?

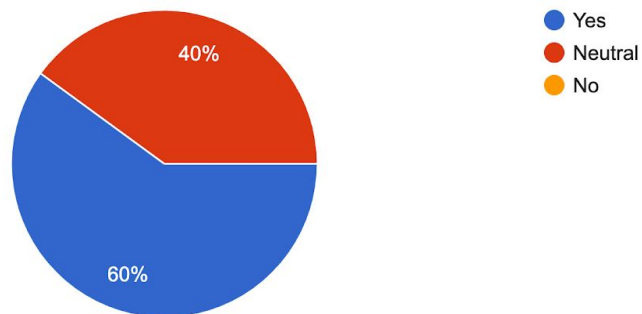
10 responses



**Figure 1: Overall Expectations**

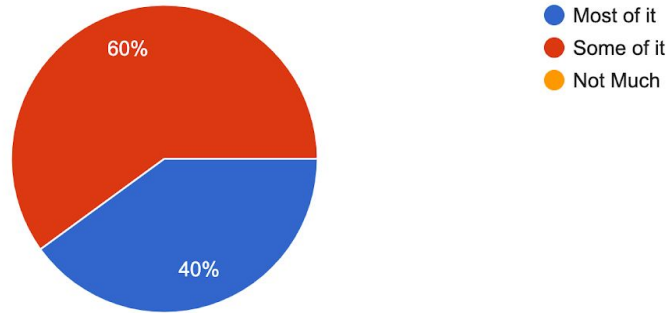
Do you feel like you have learned one new way to balance your life?

10 responses



**Figure 2: Balanced Life**

How much of the information presented was helpful to you?  
10 responses



**Figure 3: Helpful Information Presented**

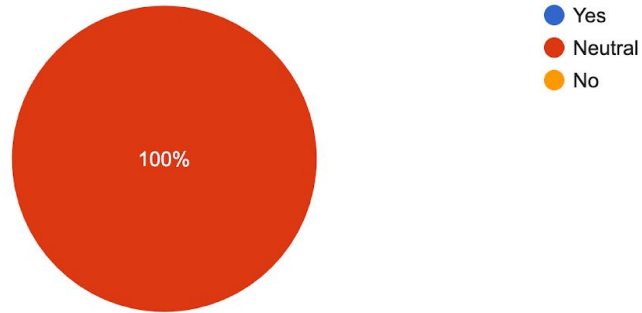
Do you have any further comments or suggestions?  
10 responses

- IDK
- N/A
- IDK!
- I do not have any?
- I have attended all of the sessions and my favorite take away was the SMART goals activity!

**Figure 4: Comments & Suggestions**

Do you think your vision board is useful for future planning?

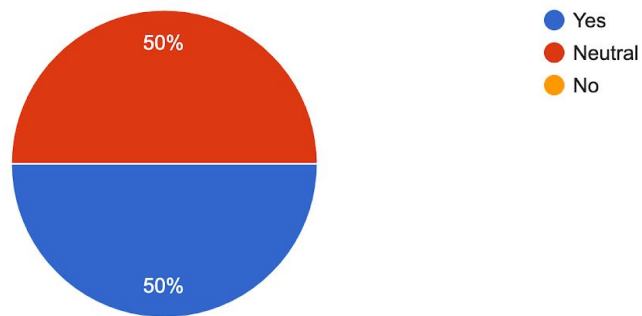
2 responses



**Figure 4: Vision Board**

Do you think you now have SMART goals to achieve?

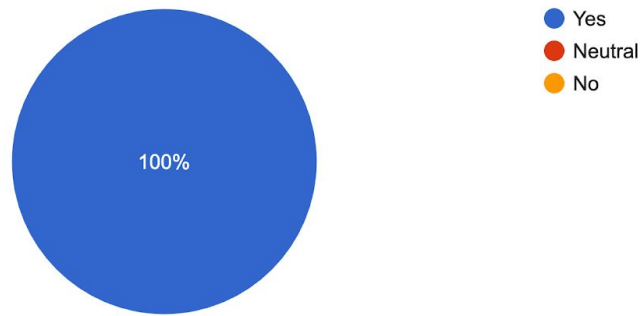
2 responses



**Figure 5: SMART Goals**

Do you think you now have a greater understanding of healthy relationships & communication?

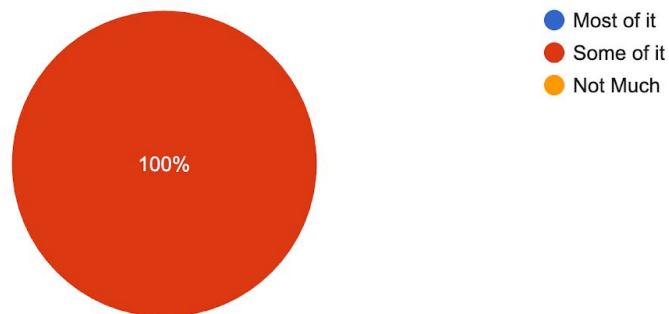
1 response



**Figure 6: Healthy Relationships & Communication**

Do you think you now have a greater understanding of how to cope with crisis?

2 responses



**Figure 7: Coping With Crisis**

Do you think you now have a greater understanding of what self-care is and how to implement self-care in your life?

2 responses

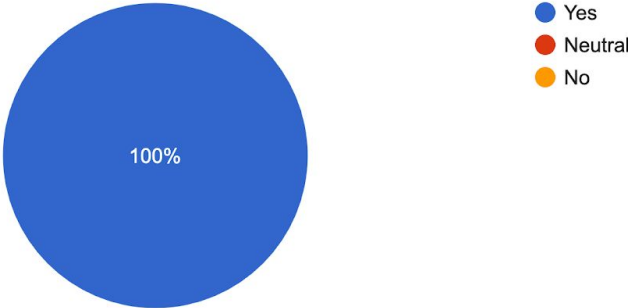


Figure 8: Self-Care

Do you think you now have a greater understanding of your personal strengths?

1 response

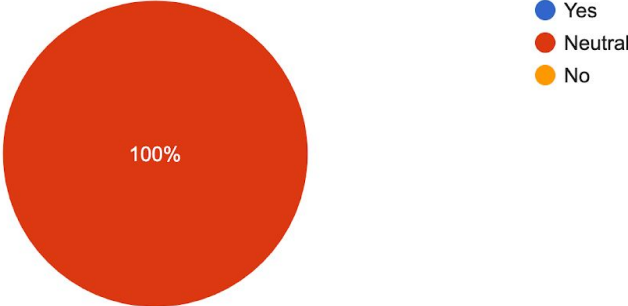


Figure 9: Personal Strengths