

Healing the Trauma of Domestic Violence: A Workbook for Women.

Kubany, E. S., McCaig, M. A., & Laconsay, J. R. (2003). New harbinger Publications; (www.newharbinger.com). 206 pp., \$18.95 (Soft cover).

The authors of the client focused workbook entitled Healing the Trauma of Domestic Violence: A Workbook for Women state that it was written for individuals, “suffering the aftereffects of having been physically and/or psychologically abused by your husband, boyfriend, or other intimate partner”. In other words, this workbook is targeted toward victims and survivors of domestic violence (DV) who are not in crisis or harms way as a direct result of intimate partner abuse. The authors take the perspective throughout, that the perpetrator is a male, and the victim in female, so the workbook is only appropriate for heterosexual couples in which the male is the perpetrator of DV.

The workbook is comprised of sixteen interactive chapters that describe the psychological sequellae of DV and steps a person can take to overcome this type of trauma. The first chapter describes the symptoms of PTSD and provides a questionnaire to self-diagnose this disorder. Chapter 2 discusses self-advocacy and outlines 25 strategies for enhancing self-advocacy. Chapter 3 addresses anger and some basic strategies for “letting go” of anger. Chapters 4 and 5 teach clients how to monitor their thoughts and ways to challenge distorted thinking. Chapter 6 reviews stress and progressive muscle relaxation and body awareness. Chapter 7 revisits the topic of PTSD and ways in which these symptoms are maintained and can ultimately be reduced or eliminated. Chapter 8 describes the concept of learned helplessness and how this phenomenon relates to survivors of DV. It presents strategies for adopting a ‘solution-oriented’ attitude and basic problem solving skills. Chapters 9 and 10 focus on guilt and ways to ameliorate it. Chapter 11 focuses on cognitive strategies for identifying and challenging beliefs and cognitions that may contribute to victims of DV either staying in an abusive relationship or returning to one. Chapter 12 describes assertiveness and provides guidelines for being assertive and responding assertively to verbal aggression. Chapter 13 expands on the topic of assertiveness from the previous chapter with a focus on how to use these skills effectively during interactions with the former partner. Chapter 14 helps the client develop an action plan for exposure exercises to reduce fear and anxiety. Chapter 15 helps the client increase her awareness of “red flags” in prospective partners that may indicate someone who might be abusive in an effort to prevent revictimization. Chapter 16 is entitled “Self-advocacy review: How have you changed?” is designed to help the client review and track her progress as she completes the workbook.

The chapters are well written and use case examples and analogies to illustrate key points. Some chapters stand well on their own, but the majority build on information presented in previous ones, and is probably more effective when presented as a unified body of work.

As previously noted, this workbook is designed for women who are no longer in an abusive relationship. In fact the authors state, “This book is for formerly battered women. Many of the things that we teach and recommend women to do could conceivably jeopardize the safety of a woman who is in an abusive relationship.” (p. 8).

This workbook is useful for clients in that it is practical and clinically oriented and focuses on helping victims of DV identify possible symptoms of PTSD, cope with trauma-related guilt, and faulty belief systems that may exacerbate and maintain psychopathology or adversely impact their ability to grieve and move forward in a more healthy manner both as an individual

and in pursuing new relationships. The workbook is user-friendly such that it could be used by a survivor of DV outside the context of treatment. However, because the sequellae of DV can be severe and multi-faceted, and because doing trauma-related therapy can result in symptom exacerbation and destabilization of clients at least initially, the workbook might best be used within the context of a therapeutic relationship to enhance recovery.

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