Dan Griffin, MA
Grounding Exercise

Advanced Breathing
What would men tell us if we created a truly **safe place** and **listened** to their struggles instead of **telling** them what they are and are **not**?
This is Water
My Water

White
Heterosexual
Male
Upper Middle Class
Person in Long-Term Recovery
Trauma Survivor
What does it mean to be a man in recovery?
Group Exercise from Session II

The Rules of Being a Man

The Principles of Recovery
How have your ideas of being a man changed since getting into recovery?
The Missing Pieces

- Services and a system that values and seeks to understand the experiences of men
- Impact of male socialization on service engagement and recovery
- Relational needs of men
- Abuse and trauma (experienced and perpetrated)

Covington, Griffin, and Dauer
MEN’S INTEGRATED TREATMENT
Men’s Integrated Treatment

Male psychological development

Addiction

Trauma

Covington, Griffin, & Dauer 2013
Evolving Treatment Approaches

Gender-Responsive Treatment

Creating an environment through:

- site selection
- staff selection
- program development
- content and material

that reflects an understanding of the realities of women/men and girls/boys, and addresses and responds to their strengths and challenges.

Men’s Integrated Treatment

Male psychological development

Addiction

Trauma

Covington, Griffin, & Dauer 2013
Emerging Paradigm - Values-Based Services

- Gender-responsive
- Trauma-informed
- Culturally competent
- Recovery-oriented

Values-based services

Covington, Griffin, & Dauer 2013
The Three-Legged Stool

ADDICTION

MENTAL HEALTH

TRAUMA

Covington, Griffin, & Dauer 2013
“there is no clinical evidence pointing to the therapeutic efficacy of confrontation, and there is ample clinical evidence that this approach results in poor outcomes and can even cause harm (Miller & White, 2007). This is particularly relevant in treatment of offenders. Although there may be a need for increased accountability and consequences associated with inappropriate behavior, there is no evidence that a highly confrontational model is more effective than a strengths-based approach”

- Helping Men Recover, Chapter 1, 2011
The Theory of Men’s psychological Development

A New Psychology of Men

- Inspired by feminist scholars
- Questioning the traditional male role and the traditional masculine interpretation of psychological development (Freud, etc.)
The Theory of Men’s psychological Development

Relational-Cultural Theory

Response to male-centric psychology that over-emphasized individuation and separation as key elements in male development and growth

Covington, Griffin, & Dauer 2013
The Theory of Men’s psychological Development

Central Tenets of RCT

All humans yearn for connection

All growth occurs in connection – through and towards relationships

Relational competence allows for connection

Covington, Griffin, & Dauer 2013
RCT and Men

Dr. Stephen Bergman

* Self in Relation vs. Individuated Self
* Male relational dread
* Agents of disconnection
* Power dynamics

Covington, Griffin, & Dauer 2013
Male Relational Dread

Characteristics of Healthy Relationship?

Intimacy
Honesty
Vulnerability
Compromise
Trust
Sharing Emotions
The Theory of Men’s Psychological Development

Men are not the problem – how men have been socialized is the problem

Homophobia, devaluation of women, violence, detached fathering, and emotional illiteracy

Power, privilege, and pain

* Covington, Griffin, & Dauer 2013 *
Trauma
Definition of Trauma

Trauma occurs when an external threat overwhelms a person’s *internal and external positive* coping skills.

(Van der Kolk, B. 1989)
## Potential Trauma Sources

<table>
<thead>
<tr>
<th>Potential Trauma Sources</th>
<th>Potential Trauma Sources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical, Sexual, Emotional Abuse in childhood</td>
<td>Institutional abuse and neglect</td>
</tr>
<tr>
<td>Neglect</td>
<td>Community and school violence; bullying</td>
</tr>
<tr>
<td>Abandonment</td>
<td>Historical/generational trauma; racism, genocide</td>
</tr>
<tr>
<td>Domestic violence experienced and/or witnessed</td>
<td>Forced migration/immigration</td>
</tr>
<tr>
<td>Sexual or physical assault</td>
<td>War/Military Sexual Assault</td>
</tr>
<tr>
<td>Trafficking</td>
<td>Natural disasters</td>
</tr>
<tr>
<td>Catastrophic injury or illness</td>
<td>Terrorism</td>
</tr>
<tr>
<td>Grief, loss, death</td>
<td>Misuse/abuse of power over another</td>
</tr>
<tr>
<td>Other’s trauma (STS)</td>
<td></td>
</tr>
</tbody>
</table>

_Covington, Griffin, & Dauer 2013_
Process of Trauma

TRAUMATIC EVENT
Overwhelms the Physical & Psychological Systems
Intense Fear, Helplessness or Horror

RESPONSE TO TRAUMA
Fight or Flight, Freeze, Altered State of Consciousness, Body Sensations, Numbing, Hyper-vigilance, Hyper-arousal

SENSITIZED NERVOUS SYSTEM
CHANGES IN BRAIN

CURRENT STRESS
Reminders of Trauma, Life Events, Lifestyle

PAINFUL EMOTIONAL STATE

RETREAT
ISOLATION
DISSOCIATION
DEPRESSION
ANXIETY

SELF-DESTRUCTIVE ACTION
ADDICTIVE DISORDERS
EATING DISORDER
DELIBERATE
SELF-HARM
SUICIDAL ACTIONS

DESTRUCTIVE ACTION
AGGRESSION
VIOLENCE
RAGES

* Source: Stephanie Covington

Covington, Griffin, & Dauer 2013
The Theory of Trauma

“Big T” and “Little T” trauma

Complex PTSD / Developmental Trauma Disorder

Iatrogenic Trauma

Covington, Griffin, & Dauer 2013
Uncontrollable disruptions or distortions of attachment bonds precede the development of post-traumatic stress syndromes. People seek increased attachment in the face of danger. Adults, as well as children, may develop strong emotional ties with people who intermittently harass, beat, and, threaten them. The persistence of these attachment bonds leads to confusion of pain and love. Trauma can be repeated on behavioural, emotional, physiologic, and neuroendocrinologic levels. Repetition on these different levels causes a large variety of individual and social suffering.

– Van der Kolk, 1989
We are a traumatized field, Working with traumatized clients, Sending them to a traumatized recovery community.
Trauma-Informed Care

Trauma-informed services:

• Take the trauma into account.

• Avoid triggering trauma reactions and/or traumatizing the individual.

• Adjust the behavior of counselors, other staff, and the entire organization to support the individual’s coping capacity.

• Allow survivors to manage their trauma symptoms successfully so that they are able to access, retain and benefit from the services.

(Fallot & Harris)
Core Principles of Trauma-Informed Care

Safety: throughout the organization, staff and the people they serve feel physically and psychologically safe.

Trustworthiness and transparency: organizational operations and decisions are conducted with transparency and the goal of building and maintaining trust among staff, clients, and family members.

Collaboration and mutuality: there is true partnering and leveling of power differences; there is recognition that healing happens in relationships and in the meaningful sharing of power and decision-making.
Core Principles of Trauma-Informed Care

*Empowerment*: strengths are recognized and validated and new skills developed as necessary.

*Voice and choice*: the organization aims to strengthen the clients’ and family members’ experience of choice and recognize that every person’s experience is unique and requires an individualized approach.

*Peer support and mutual-help*: are integral to the organizational and service delivery approach.
Core Principles of Trauma-Informed Care

*Resilience and strengths based:* a belief in resilience and in the ability of individuals, organizations, and communities to heal and promote recovery from trauma.

*Inclusiveness and shared purpose:* the organization recognizes that everyone has a role to play in a trauma-informed approach.

*Cultural, historical and gender issues:* the organization moves past cultural stereotypes and biases, offers gender responsive services, leverages traditional cultural connections, and recognizes and addresses historical trauma.
Core Principles of Trauma-Informed Care

*Change process:* is conscious, intentional and ongoing; the organization strives to become a learning community, constantly responding to new knowledge and developments.

*Mutual responsibility:* is holding a man to a mutually determined highest standard of behavior and helping him to make responsible and recovery-focused decisions.

*Compassion:* is understanding that we can only see a part of a man’s life, thoughts, feelings, and experiences.
The Triune Brain Model

Neocortex
- Speech
- Logic
- Higher thinking skills

Limbic System
- Emotions

Reptilian Brain
- Instinct
- Survival

Chun-Hori 2007

Covington, Griffin, & Dauer 2013
Is There Another Way to View Men’s Trauma?
How Men Respond to Trauma

Men suffer abuse  Suffer alone with the abuse  Many become abusers

Male abuse victims tend to identify with the abuser as a means of reclaiming personal power and attempting to secure safety

Covington, Griffin, & Dauer 2013
Being An Asshole Is All Part Of My Manly Essence
The Theory of Trauma

A gender-informed framework. A fundamental belief that trauma is pervasive in men’s lives and there are gender differences in:

- How men experience trauma
- How men respond to trauma
- How men exhibit the symptoms of trauma-based disorders
- How men heal from trauma

Covington, Griffin, & Dauer 2013
THERE IS NO GENDER NEUTRAL
Psychiatric Diagnoses

What diagnosis for men would most likely mimic/mask the symptoms of complex PTSD?
ANTI-SOCIAL PERSONALITY DISORDER
42 to 95% of men coming into treatment

90% of male sexual abuse survivors did not report the abuse until they were adults.
Ending Men’s Violence

We will not end the cycle of boys’ childhood trauma and men’s violence until we treat men with compassion as well as accountability.
Recidivism

Undiagnosed and/or untreated trauma will increase the risk of:

* Return to the use of alcohol and other drugs

* Continued abusive, violent, self-destructive, and criminal behavior

Covington, Griffin, & Dauer 2013
Universal Precautions

Histories of abuse and trauma should be expected, not considered the exception.

Many treatment “failures” may well have unresolved trauma disorders.

We can do better at talking about the trauma that men experience and the abuse that they perpetrate.

Covington, Griffin, & Dauer 2013
A paradigm shift
From:
“What is wrong with you?”
To:
“What happened to you?”
Eight Points of Agreement

1. While progress has been made in the understanding of trauma, there remains a myth that trauma is not a major issue for males.

2. Trauma is a significant issue for males with substance and/or process addictive disorders.

3. Males are biologically and culturally influenced to minimize or deny traumatic life experiences.

Covington, Griffin, & Dauer 2013
Eight Points of Agreement

4. Addiction treatment has been negatively influenced by cultural myths about males.

5. Males are often assumed to be the perpetrator, which has negatively influenced our concepts of trauma and models for treatment, and often results in the re-traumatization of men in addiction treatment.

6. Male trauma must be assessed and treated throughout the continuum of addiction services.

Covington, Griffin, & Dauer 2013
Eight Points of Agreement

7. Male-responsive services will improve addiction treatment outcomes.

8. Effective treatment of male trauma will help to interrupt cycles of violence, abuse, neglect, and addiction.
A Man’s Way through the Twelve Steps

First gender-responsive and trauma-informed book for men in any twelve-step program focused on men’s unique issues and needs

Core Issues
• Emotional Awareness, Relationships, Grief, Anger, Violence, Abuse, and Trauma
A TREATMENT IMPROVEMENT PROTOCOL
Addressing the Specific Behavioral Health Needs of Men

TIP 56

SAMHSA
A Man’s Way through Relationships: Learning to Love and Be Loved
Dan Griffin - Central Recovery Press (August 2014)
MaleSurvivor provides critical resources to male survivors of sexual trauma and our partners in the recovery journey by building communities of Hope, Healing & Support.

- www.malesurvivor.org - Resource Directory, Therapist Listings, Discussion Forums, and Chat Room connecting survivors & partners in healing worldwide
- Over 1,000 male survivors have attended over 50 Weekends of Recovery over the past 10 years.
- Trainings for clinicians, social workers, law enforcement, parents, volunteers, and community organizations on how to best support male survivors
The mission of 1in6 is to help men who have had unwanted or abusive sexual experiences in childhood live healthier, happier lives.

www.1in6.org  www.1BlueString.org
Contact Information

Dan Griffin

- www.dangriffin.com
- dan@dangriffin.com
- 612-701-5842
- Facebook: http://www.facebook.com/TwelveStepsForMen