

Using Recovery Capital Ideas in Trauma Treatment with Women

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Overview

- Gender Stereotypes and Gender Biases
- Clinical Issues: Engagement with Women
- Trauma and Victimization: Barriers
- Using Recovery Capital Ideas in Assessment and Treatment with Women
- Questions and Discussion



Traditional Feminine Attributes

- Virtuous
- Modest
- Caring
- Nurturing
- Selfless
- Serves Others

- Freud's ideas about women's roles were stark:
- Could be a Madonna
 OR
- Could be a Whore



Clinical Issues among Women

Victimization

Grief & Shame Low Self Worth

Stigma

Mental Health Depression Stigma

Isolation

Substance Use

Stigma & Shame

Low Self Worth

Isolation& Fear



Gender Stereotypes Create Barriers to Therapeutic Relationship

- Among Clients:
- "I am a terrible person, why would anyone want to be my friend?"
- "I don't deserve to get better"
- "I let this happen to me, so I need to suffer the consequences"
- " I am not strong enough to beat this problem"



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- Among Professionals
- "Women are more difficult to work with than men"
- "Women who don't care for their children don't deserve their children"
- "Women's family roles makes it difficult for them to focus on recovery"

Trauma Symptoms Create Barriers to Therapeutic Relationships

- Women who have experienced trauma have decreased ability to trust (Sun, 2007)
- ...Find it difficult to form close social attachment to support recovery (Bollerud, 1990, Min, Tracy, & Park, 2014)
- ...Remain in a relationship with an intimate partner who was the source of trauma (Grella, 2008)



Trauma Symptoms Create Barriers to Interpersonal Relationships

- Women who have experienced trauma have increased difficulty managing interpersonal relationships (Cloitre, Miranda, Stovall-McClough & Han, 2005)
- Developing trusting relationships in treatment/therapy/recovery is also difficult for many women who have experienced trauma



Gender Specific Approaches

- Non-judgmental approaches
- Balance of Responsibility and Compassion
- Service Management and Wholistic Approaches
- Empowerment Approaches
 - Motivational Interviewing
 - Grief and Loss Approaches
 - Cognitive Behavioral Therapy



Recovery Capital

- Re-conceptualization of Social Capital (Bourdieu, 1998)
- Recovery Capital: practical resources that build support and access
 - From institutional social networks
 - From historical networks
 - From environment of the individual
 - Ideas can be used with many different populations
 - Strengths Based Concept consistent with gender specific interventions.



Recovery Capital

- Access and Connection to Resources
- People with specific characteristics are important
- Access within the network of people
- Structure of the Network
 - Loosely tied?
 - Density?
 - Bridges to New Resources (Granovetter 1973)



Recovery Capital

• Recovery Capital (Grandfield & Cloud, 2001,2008)

 Conceptualized as continuous – can be positive or negative

- Environmental or Physical Capital (financial)
- Human Capital (individual traits & knowledge)
- Cultural Capital (norms and values)
- Social Capital (family, friends and aquaintances)

Recovery Capital is consistent with Recovery Philosophy

- Recovery Philosophy: a wholistic approach to rebuilding all aspects of life (Walsh, 2013)
- Recovery Philosophy moves beyond symptom reduction as the outcome of interventions
- Recovery Philosophy builds all aspects of a clients life work, family, etc.
- Personal Goals as well as Treatment Goals

Application of Recovery Capital in Assessment with Women (Francis, 2019)

- Sample: 377 women in drug treatment
- Trauma Symptom Checklist Score = 44.7
- Average age =36.5 36% African American
- Dual Diagnosis (SA/MI) 76.6 % of total
 - Major Depressive Disorder 59%
 - Post Traumatic Stress Disorder 40%
 - Manic Episode 35%
 - Generalized Anxiety Disorder 20%

Social Recovery Capital

- Social Network Variables and Latent Profile Analysis
- Uses network data to group women into recovery capital profiles
- 3 Recovery Capital Profiles
 - Treatment Related Sobriety Supports (n=186)
 - At Risk (n=137)
 - Insulated Sobriety Supports (n=54)



Insulated Sobriety Support Profile (54 women) (Francis, 2019)

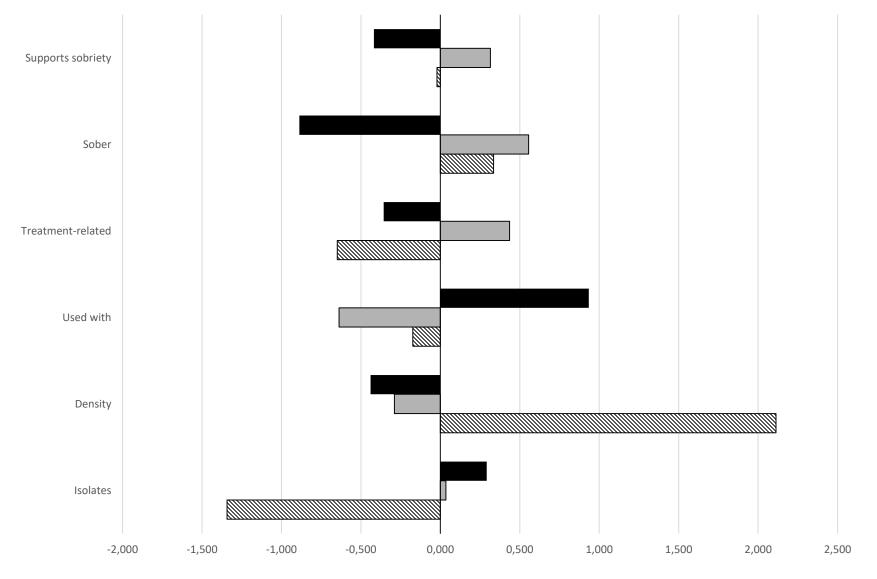
- Higher numbers of sober network members
- Higher levels of sobriety supports
- Few Isolated or Treatment related network members
- Potentially indicates higher levels of recovery capital

Treatment Related Sobriety Support (186 women) (Francis, 2019)

- Higher levels of sober network members
- Higher levels of sobriety support
- Higher levels of isolated network members
- Higher number of network members who they met in treatment(peers/therapists/self help)
- Potentially indicates access to novel recovery resources and higher levels of recovery capital

At Risk Profile (137 women) (Francis, 2019)

- Higher number of isolated network members
- Less sobriety support
- Fewer treatment related network members
- Fewer sober network members
- Higher number of network members with whom they had formerly used drugs/alcohol
- Potentially lower levels of recovery capital
- Less reinforcement of recovery oriented ideas



Z-scores: Bars to the right indicate mean scores that are above the overall mean Bars to the left indicate scores that are below the overall means

At Risk (n=137) Treatment-Related Sobriety Support (n=186) Insulated Sobriety Support (n=54)



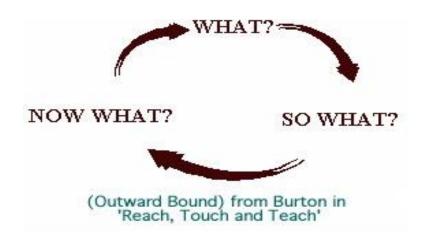
Overlay of Trauma Symptoms

- Higher mean trauma scores
 - Related to increased likelihood of classification in the At Risk profile
 - High levels of trauma symptoms associated with lower levels of recovery capital
 - More difficult to form recovery supporting relationships
 - Unsupportive network may have increased exposure to trauma



So What?

 Interesting, but what does this mean for your work with women with trauma?





Recovery Capital Concept

- All women have some level of Recovery Capital – a strengths rather then deficit approach.
- Process of understanding ideas of recovery capital can be empowering
- Focus on the structure and characteristic of social networks in the frame of recovery capital



Explore how a social network helps or hinders the trauma recovery process

- Network mapping illuminates network structures
 - Density of Network Supports
 - Isolation of Network Supports
 - Characteristics of supports available
 - Directions on how to strengthen networks to boost recovery capital
 - Sober versus Using
 - Treatment Related versus non-Treatment Related



Assessment Methods

- Complex computerized systems exist such as Egonet (McCarty, 2002,2007)
- Social Network Maps
- Eco Maps
- Genograms
- All can be adapted for use in a Recovery Capital framework



Strengthen the Existing Network and Expand New Networks

- Recovery Capital ideas support multiple paths for recovery and counter gender stereotypes
- Recovery Profiles can focus treatment intervention to increase recovery capital
- Can include efforts to learn and rehearse relationship-building skills
- Can provide a concrete explanation risks and resources for recovery



Selected References

- Bourdieu, P. (1998). *Practical reason: On the theory of action*. Stanford, California: Stanford University Press.
- Cloud, W. & Granfield, R. (2008) Conceptualizing Recovery Capital: Expansion of a Theoretical Construct. *Substance Use & Misuse*, 43, 1971-1986. <u>https://doi.org/10.1080/10826080802289762</u>.
- Francis, M. (2019) Social Recovery Capital among Women in Early Recovery. Unpublished manuscript.
- Granfield, R. & Cloud, W. (2001). Social context and "natural recovery": The role of social capital in the resolution of drug-associated problems. Substance Use & Misuse, 36(11), 1543-1570. <u>https://doi.org/10.1081/JA-100106963</u>.
- Granovetter, M.S. (1973) The Strength of Weak Ties. American Journal of Sociology, 78(6), 1360-1380. <u>https://doi.org/10.1086/225469</u>.
- McCarty. (2002). Measuring structure in personal networks. *Journal of Social Structure*, *3*(1).
- Walsh, J. (2013) *The Recovery Philosophy and Direct Social Work Practice*. Chicago, Illinois: Lyceum Books.



Questions?

- Thank you for your attention.
- What are your ideas and questions?
- Let's stay in touch kathleen.farkas@case.edu

