



*This is the final issue of The Tapestry. The staff of the Women, Co-Occurring Disorders and Violence Coordinating Center would like to express our sincere thanks for the support of our readers throughout this series.*

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## **Reflections from the Women, Co-Occurring Disorders and Violence Study: A Professional and Personal Learning Experience**

*Editorial Staff*

**I**n 1998, researchers, clinicians, administrators, policymakers, and consumer/survivor/recovering (C/S/R) women from across the country joined forces to implement the *Women, Co-Occurring Disorders and Violence Study (WCDVS)*. With support from the Substance Abuse and Mental Health Services Administration (SAMHSA), this multi-site initiative set out to design and assess the impact of integrated, trauma-informed and trauma-specific services for women with substance abuse and mental health issues and histories of trauma and their children. Much has been accomplished over the past five years that will result in lasting change for women and children.

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The study was the first of its kind to mandate the integration of C/S/R women into all aspects of planning and implementation. As a result, women with mental health, substance abuse, and trauma experiences have played active roles in shaping the design, delivery, and assessment of services and programs. The study's many successes make a convincing argument for the need to provide integrated, trauma-informed and trauma-specific services in every community.

This final issue of *The Tapestry* celebrates the accomplishments achieved over the last five years and

the heroic efforts made to improve systems and services. We honor the valuable contributions of all of those involved: study sites, federal project officers, C/S/R women, Coordinating Center staff and consultants. The pages that follow contain the reflections of many who participated in the WCDVS. It includes thoughts on the professional and personal impacts the study has had on the lives of those involved and what has been learned from this innovative collaboration. Contributions are listed alphabetically by name.

The study has:

- Raised awareness of women's service needs, bringing trauma to the forefront for the first time.
- Helped to facilitate partnerships between systems once working in opposition to provide integrated programs that serve women in a holistic manner.
- Created trauma-informed and trauma-specific services that acknowledge and respond to the profound impact trauma has on the lives of many women.

Our work through the Boston Consortium of Services for Families in Recovery totally transformed our approaches to substance abuse treatment among women of color. Prior to this project, while recognizing the role of trauma, we lacked the comprehensive tools and systemic approach that the project enabled us to develop and implement. Through the course of the last five years, I witnessed our own transformation in philosophy, clinical approaches to treatment of women with mental health and substance abuse disorders and histories of trauma, approach to staff training and development and integration of consumers into decision making and leadership positions. Personally, this project has been one of the most rewarding professional experiences that I have had. It has led to new and rewarding professional collaborations with clinicians and researchers across the country. Most importantly, the opportunity to work at the national level with many women consumers and to witness their leadership has given me a clearer understanding of the power of the human spirit to survive and thrive.

— Hortensia Amaro, Principal Investigator  
Boston Consortium of Services for Families in Recovery  
Boston, Massachusetts

As a team supervisor, I was fortunate to become connected to both the women receiving services and those providing services. The journey showed me that no matter what role one is in, the process and impact of empowerment and recovery are powerful for all involved. The voices and experiences of this project are a strong reminder to me of how interconnected we are and need to remain.

— Jerri Anglin, Clinical Supervisor  
Integrated Trauma Services Team  
District of Columbia Trauma Collaboration Study  
Washington, DC

I think the Triad Project is remarkable in its intent. To root out the disease and completely heal the person is what The Triad Women's project was all about.

— Michelle Ayala, Triad Specialist  
Triad Women's Project  
Avon Park, Florida

In my experience of substance abuse and domestic violence, I didn't know that women are still traumatized behind this. Here at Portal I've learned that this is an ongoing process and that it is okay to seek help. I realize that even though you've stopped using that the trauma is still there. I have learned a lot through Portal Project. I am glad to have been a part of.

— Daisy Beltran, Administrative Assistant  
Portal Project  
New York, New York

This study was hard work, rewarding work, for us all. We were in it together and there was a strong connection between the participants, clinicians, research interviewers, data managers, evaluators, etc. It wouldn't have worked but for the teamwork and commitment of all parties. I was amazed by the dedication and strength of the women participants to complete such lengthy, detailed, and personal interviews. Women talked of significant changes they were making during the study—some replaced isolated lives with a newfound sisterhood amongst peers; others found their way out of abusive relationships; some found new jobs; others found hope. The project affirmed my belief that people, even those who have experienced horrific abuse, can change, heal, recover, grow and move on. Simply, I was honored.

— Rebecca Wolfson Berley, Trauma Specialist  
District of Columbia Trauma Collaboration Study  
Washington, DC

Taking part in this study has made me come to the realization that all people who are involved with substance abuse, mental health, and histories of trauma desperately need examples of people in their lives who are willing to listen, encourage, and show them an example of follow through. These qualities are the key to beginning the healing process. Someone who takes the time to make someone else believe in themselves and to give them hope is what it takes to show sufferers a route out of turmoil and despair. Give them a route back onto the path and many will follow.

— Nicole L. Berry, Research Assistant  
Allies  
Stockton, California

*"...people, even those who have experienced horrific abuse, can change, heal, recover, grow and move on."*

I enjoyed many aspects of the project: getting to know people from the other sites (both nationally and locally), being a part of a federal project to improve women's lives, and gaining more knowledge regarding trauma and its treatment. But when I consider what I will carry with me for years to come, it is the women and their lives: their struggles, their pain, their insights, and their recovery. I feel so fortunate to have been a part of their journey. I hope the assistance they received in this project has enriched them as much as they have enriched my life.

— Lori Beyer, Trauma Specialist  
District of Columbia Trauma Collaboration Study  
Washington, DC

Palladia thought that we would be looking at a new treatment intervention with our involvement with the WCDVS. In fact, this experience and our work with Palladia's Portal Project has transformed treatment for women at Palladia.

— Diane Bonavota, Vice President of Program Planning and Development, Palladia, Inc.  
Portal Project  
New York, New York

I am very grateful for the experience I gained in the WCDVS. When it began I was brought in as a specialist group facilitator for women with histories of trauma and co-occurring disorders. If I am an expert at all it is because of the talented professionals and courageous women that I had the good fortune to meet in this project. It was a thrill to attend the National Steering Committee meetings with the eminent researchers and clinicians in the field. We have an outstanding evaluation team who was willing to teach us about developing our interventions and integrating services. It was rewarding to work with our knowledgeable and dedicated group of clinical staff and peer service providers. I am especially grateful for the strength and patience of the C/S/R women who shared their experiences and waited for us to implement our interventions.

— Margo Fleisher-Bond, Program Supervisor/Principal Investigator  
Triad Women's Project  
Avon Park, Florida

I feel privileged to have been a part of the WCDVS. Before the project, I was very aware of co-occurring issues, particularly trauma, in clients and felt the lack effective trauma services to be a “missing piece” in recovery. The services we now offer women in Colorado are much more effective. Working with C/S/Rs has brought something back to substance abuse treatment that was missing for a long time as the field had moved to a managed care model in recent years. I am grateful that C/S/Rs continue to remind me how to truly listen. I have appreciated the opportunity to learn from so many talented people across the country. I truly respect all of the hard work and risks that so many took during the past five years. In spite of any differences, we all want to help women and children in the safest, most respectful, and best way that we can.

— Angela Bornemann, Adolescent and Family Services Manager  
New Directions for Families  
Thornton, Colorado

Working on the WCDVS project has taught me a great deal about the intersection of substance abuse, trauma, and mental health as well as about evaluation and consumer involvement. The project has also demonstrated the challenges and accomplishments involved in truly collaborative processes, whether they be systems development, instrument and analysis decisions, or writing for publication. Having had five years of funding to develop, pilot, deliver, and evaluate the project is a luxury that providers rarely experience. The length and cross-site nature of this project are what have allowed us to learn so much about how to better negotiate and deliver services to women and their families in need.

— Ellen Brown, Grant and Publications Specialist  
Arapahoe House, New Directions for Families  
Thornton, Colorado

Early on, efforts of the Triad Women's Project mirrored in many ways what we saw other areas of behavioral health regard as integrating services. That is, there seemed to be a degree of posturing, related to beliefs about which disorder was “primary” and required the most, or at least the most immediate attention. It is refreshing to see how this group has worked to resolve much of this and arrived at a point where all disorders, challenges, and concerns are seen as primary and to recognize a truly integrated approach to addressing co-occurring disorders treatment in a variety of settings.

— Donna L. Burton  
Triad Women's Project  
Avon Park, Florida

Being a part of the Portal Project has been an invaluable experience. Many of the women I worked with were having their trauma validated for the first time, despite the fact that this may have been their 3rd or 4th time in treatment. Integrating the treatment of mental illness, substance abuse and trauma is a simple yet tremendously effective clinical intervention; both within a group setting and as a catalyst for stimulating interpersonal healing and individual self worth. I have already begun to integrate the principles outlined in this project into my everyday practice.

— Erica Butters, Women's Treatment Specialist  
Portal Project  
New York, New York

My experience with the Boston Consortium gave me lots of opportunities for personal learning and growth. Facilitating TREM gave me the opportunity to be a change agent in the lives of many women. I felt a commitment to treatment from the Boston Consortium staff. Our unique approach to consumer integration and the Consumer Leadership Training Institute gave clients the opportunities to have their own voices heard.

— Maria Cabrera, Trauma, Recovery Empowerment Model (TREM) Group Facilitator  
Boston Consortium of Services for Families in Recovery  
Boston, Massachusetts

The Portal Project, as part of the Women and Violence Study, is a shining example of what can be accomplished when a persistent vision drives dedicated action. As a result of the collective efforts of the sites, the face of treatment has changed and we hope to continue to see change unfold through ongoing treatment improvements. We have woven a new “tapestry” for the care of women. Weaving a tapestry creates a piece that has imperfections and irregularities, but it is just those features that create its beauty. This has been a beautiful example of collaboration that consists of many different threads.

— Sharon M. Cadiz, Principal Investigator  
Portal Project  
New York, New York

*“If I am an expert at all it is because of the talented professionals and courageous women that I had the good fortune to meet...”*

From its inception the Portal Project has made many unprecedented strides. Among the most notable is the manner in which the Portal Project staff set out to establish and build on relationships with health/human service providers, community leaders, elected officials and residents in various communities. Given the pervasive problem of substance abuse, domestic violence and mental illness among women of color, establishing such relationships, in my opinion, contributed immensely to the overall success and effectiveness of the Portal Project. Congratulations to Sharon Cadiz and her staff for a job well done.

— Jose Caraballo Director of Community Relations, Palladia, Inc.  
Portal Project  
New York, New York

Working on this project has been one of the most exciting and fulfilling experiences of my professional life. As a clinician and former mental health administrator, the issue of the treatment of women survivors in behavioral healthcare systems has long been near and dear to my heart. To have seen this grow from a few like-minded people sharing thoughts and experiences, to dream a dynamic possibility, and to see so very many people work so hard, take so many risks, and offer such brilliance in the undertaking has been quite literally awesome. Emotionally, at every level of this endeavor, it has been challenging. I have always been able to take courage and inspiration from the women whose lives have been marked by violence and whose spirits shine through. I offer my deepest gratitude to all of you, the work will continue—ain't no stopping us now.

— Colleen Clark, Evaluator  
Triad Women's Project  
Avon Park, Florida

As peer consultant, I have been involved with the Triad Project since the very beginning. It was very satisfying for me to participate in starting the first consumer-run monthly meetings, called CAB, and weekly support groups for women, called WOW. It has been exciting to see the interest sparked among women in our rural area, and their growing participation. It is now discouraging, however, not to receive adequate support from SAMHSA or our local agencies to continue this pioneering work.

— Sally Clay, Consumer Consultant  
Triad Women's Project  
Avon Park, Florida

Working with this group, the ladies from the project, and the ladies that come to the meetings has been beneficial to me. I have learned that there are people out there in worse shape than I am in, people that have been through more. It has helped me with coping skills, it has helped me to not be judgmental, and I really think it has been great. Seeing the looks on women's faces as they're growing and progressing...you start seeing this radiance in their faces—they're glowing and they start laughing! They're relating and they're finding out they're not alone.

— Donna Clute, WOW Peer Leader  
Triad Women's Project  
Avon Park, Florida

After moving to Florida in December, 2001 I was haunted by recurring depression. I received support as a member of the Sebring WOW peer support group in Highlands County. I made friends who were readily available to help my integration to the new community. My personal

*“Seeing the looks on women's faces as they're growing and progressing...you start seeing this radiance...”*

concerns were heard by the sensitive group members and facilitator during my rough adjustment. I attended the peer support group because I am familiar with and believe in the miracles that happen mending wounds with peers who have experienced similar situations and pain. I was invited to submit an application for a position as a WOW Peer Leader, and here I am a year later, more aware that Florida seriously needs peer services for many who cannot receive much needed information and support services in the professional realm. I am happy about the treasured friends I have found in the Heartland of Florida, but with funding lost many will

continue to flounder uninformed, withdrawn and unaware that peers can offer what professionals cannot; experience, understanding and love. Thanks to the Triad project I have found all these and a job. I am grateful. Ciao for now!

— Louise Collins, WOW Peer Leader  
Triad Women's Project  
Avon Park, Florida

We put the Relational model into practice on all levels: between agencies; within agencies; within the staff of the WELL Project; clinicians and women; women and other women in the project, and I think this is of enormous benefit to all concerned. Introducing trauma into the day to day treatment conversation has helped to “normalize” it as part of many women’s experiences, has taken away some of its power to keep them victimized, and has given that power back to the women. The long-term, authentic relationships that were built between women in the project and the ICFs were unique in that they allowed us to be involved in women’s lives on many levels; counselor, case manager, mentor, guide, companion. We were role models for what a healthy relationship is about; consistency, reliability, genuineness, empathy, support and positive regard. Using safety as a framework for thinking about all actions and interactions was a new concept for many women and clinicians. The Seeking Safety curriculum gave women the skills to become pro-active in their lives and move away from self-harm and harm from others. And it gave clinicians a way to talk about substance abuse, co-occurring disorders and violence as a whole, rather than as separate compartmentalized pieces of the picture. I have witnessed women who thought themselves hopeless find hope.

— Clare Andrus Cornell, Integrated Care Facilitator  
WELL Project  
Cambridge, Massachusetts

For the rest of my life I will remember the courage and strength of the women I interviewed for this study. Their words speak volumes about the pain of violence and the power of the human spirit.

— Catherine Coughlan, Research Associate  
Allies  
Stockton, California

It’s been an honor being involved in an awesome project that provides pathways out of darkness for our fellow “sisters’ souls”.

— Laura Lee Cummings, Triad Specialist  
Triad Women’s Project  
Avon Park, Florida

This is an experience that I can take with me regardless of my career choice. Working on this grant has showed me the impact that trauma has on families. I have used this experience to grow personally and professionally. Providing children’s services should be just as important as providing adult services. Hopefully the outcomes of this grant will show that to those that are still in doubt.

— Megan DeVilbiss, Team Leader  
New Directions for Families  
Thornton, Colorado

From my personal observation, the project showed that not only are women’s issues ignored, they are also discounted in some areas as being “women’s issues” (get my drift). The project has helped bring to the forefront that women need special assistance in many areas and that these areas can be addressed effectively and with love and empathy. I saw women who were literally trembling wrecks begin a journey of discovery and recovery that brings with it joy, peace and strength. I hope that, in the future, what has been learned this past 5 years will lead to a national program that leads other women to the same triumphs.

— Lyla Douce, Triad Specialist and WOW Peer Leader  
Triad Women’s Project  
Avon Park, Florida

The Portal Project was a great success in working with women with histories of trauma. I continually heard their testament regarding the value of the Seeking Safety group. For the first time in their life, many were able to address their trauma issues in a group where they felt safe to do so. I hope we can continue what the Portal Project began in providing special treatment services for women.

— Elaine Dubsette, Director of Admissions,  
Palladia, Inc.  
Portal Project  
New York, New York

As an expert in trauma and women’s psychology before I came to this project, I would have described myself as being quite integrated in my thinking about violence, mental health and substance abuse. I thought of myself as one of the ones who “got it” from the consumer perspective, was able to flatten the hierarchy of human service systems and insisted on a partnership between the helper and the woman served. The WCDVS took me to a deeper level of integration, a more profound state of “getting it”, and to a more authentic and deeper place of partnership than I realized was possible beforehand. I experienced a connection between myself and others in this work that was still appropriately bounded but without the bulky coat of distancing professionalism. As a result, the work has been immediately relevant, effective, inclusive, and has increased self-esteem for myself and others within these vital connections. Thank you. I am honored to have been a part of this project.

— Denise E. Elliott, Trauma Liaison  
Franklin County Women’s Research Project  
Greenfield, Massachusetts

*“The WCDVS took me to a deeper level of integration... and to a more authentic and deeper place of partnership than I realized was possible...”*

I remember most clearly the faces and voices of the women who participated in this project and, especially, the tremendous courage they demonstrated: in talking about their pain and their hopes, in beginning to trust, in working to reclaim their lives and their futures. Their journeys are powerful and sustaining reminders to me about the capacities of the human spirit. My hope is that the contributions of this project will reflect both the important facts about what is helpful for women survivors and the truth embedded in their experiences of recovery and healing.

— Roger Fallot, Principal Investigator  
District of Columbia Trauma Collaboration Study  
Washington, DC

The WCDVS has taught me many things about the centrality of trauma and the importance of safety, the critical voice of consumers, the richness of diversity in opinions, backgrounds and disciplines. Most importantly, it has reinforced for me the values of patience, trusting relational processes and collaborations across people, organizations and systems and the absolute necessity for safe and respectful environments in order for change to occur at any level—personal, organizational, and political.

— Norma Finkelstein, Principal Investigator  
WELL and WELL Child Projects  
Cambridge, Massachusetts

My belief is that deep within all individuals, there is the fundamental desire to be useful. Those who do not encounter or take advantage of opportunities to meet this longing live a life of discontentment. Most times this desire is realized through drawing on our own personal experiences (good and bad) to help others, often making us strong in our once broken places. Participating in the Triad Women's Project has given me the arena to reach my full potential of usefulness, thanks to the training received, the autonomy allowed, and the support of the Triad Team meetings. Triad has changed my definition of case management and the attitudes of many. It has been a privilege working on this project, and I know many aspects of services for C/S/Rs have been changed for the better because of the project.

— Pam Freeman, Triad Specialist  
Triad Women's Project,  
Avon Park, Florida

The people involved in this study including: consumers, evaluators, clinicians, interviewers, project directors, and SAMHSA officials were extremely competent and thorough. The members of the nine study sites, the Coordinating Center, and the three centers of SAMHSA (CSAT, CSAP, and CMHS) worked toward the same goal. Although the members of this study had different opinions on various techniques, subjects, and instruments to be used, they worked together to develop an excellent protocol. The consumers were valuable in their assessment of the questionnaires and provided experienced advice to the project staff and SAMHSA project officers. Both consumers and project staff learned from each other. This hard work paid off. The outcomes produced positive results. The results will be disseminated to people in the field as well as to the general public. Thus, more people will be able to get better.

It was a great experience working on this landmark study.

— Joanne Gampel, Federal Project Officer  
Center for Substance Abuse Treatment  
Rockville, Maryland

*“I still get plenty of calls [from women] saying ‘the study has left an impact on my life.’”*

I assisted women before and after interviews. The role as peer support was to help women when needed, usually after interviews. During the study, I had the pleasure of getting to know the women/children and watching them develop different coping skills to deal with their current situations. Watching women throughout the study become aware of their disease (PTSD) was always rewarding especially when there were positive results. The study is coming to an end so I don't see the women as often but I still get plenty of calls saying “the study has left an impact on my life”.

— Sherry Glidewell, Study Participant Support  
Allies,  
Stockton, California

I am honored to be part of a cross-site project that values the input of researchers, clinicians and consumers and policymakers. The concept of resiliency has taken on new meaning for me. Young children are responsive to learning and expressing themselves about violence and substance abuse. If material is presented by sensitive and caring clinicians in an age-appropriate manner, children can be willing and eager participants in their own growth.

— Karen Gould, Project Director  
WELL Child Project  
Cambridge, Massachusetts

When I, a C/S/R, started this project I was very suspicious and distrustful of people in the coordinating center. I did not believe they really wanted to hear my opinion about how they could help me. After a while I realized they were genuinely sincere in involving the women as participants, not observers, in this project. Being involved in this project has given me hope that women like me will have a better chance of recovering from the trauma in their lives. And that's because of the commitment and dedication of those involved in this project.

— Janice Grady, Director, Women's Support & Empowerment Center  
District of Columbia Trauma Collaboration Study  
Washington, DC

Working on the WCDVS has been an incredible learning experience for me. I hadn't previously worked on a project of this magnitude before. I have especially enjoyed working with and getting to know people from such a variety of experiences and backgrounds from all over the country.

— Carla Graeber, Senior Research Associate  
New Directions for Families  
Thornton, Colorado

I liked that we interviewed the women every three months for eighteen months. It was great to see what all the women had gone through the past year and a half; even if they were not doing wonderful it is amazing to see how resilient people can be. I cannot say that I have one particular memorable moment; however, I can say that my favorite part of the whole experience is watching the women grow, change, and be strong during incredibly difficult times. I feel from being able to view the women over time that it helped me accept people exactly where they are and for who they are, and to be able to step back and not pass judgment because regardless of where you are in your life or where you have been, everybody deals with their life experiences differently.

— Devi Grieser, Research Associate  
New Directions for Families  
Thornton, Colorado

Working on the Women and Violence project has been one of the most rewarding and challenging experiences of my professional career. It has been especially gratifying to get to know so many dedicated and brave women and to learn from them a new understanding and appreciation for what it means to survive.

— Maxine Harris, Co-Principal Investigator  
District of Columbia Trauma Collaboration Study  
Washington, DC

For me, this work was about both improving the quality of life for women in Stockton and about being able to share what we've learned with the hopes of improving the lives of women and their families throughout the country. At times I have wondered why this project has touched me so. One answer that I have become aware of is that it is about healing. And it's also about potential. Change is never easy and this project wasn't. There were heartbreaking aspects to it but there was also a great deal of beauty and inspiration. The level of commitment and dedication of so many has touched me a great deal. It has been an honor and privilege to be involved in this effort. May the healing continue.

— Jennie Heckman, Principal Investigator  
Allies  
Stockton, California

When I struggled to write the evaluation section for the WELL Project's Phase I application, I had no idea what an incredible gift being part of this project, both at the local and cross-site levels, would be. For me, the spirited collaboration of C/S/Rs, clinicians, and researchers on the three qualitative workgroups epitomizes what is so uplifting about the WCDVS experience and mission.

— Nina Kammerer, Project Research Director  
WELL and WELL Child Projects  
Cambridge, Massachusetts

Everything about this project was memorable for me! I moved across the state on January 1, 2002, and by January 2nd I was already learning. I had the privilege of seeing the women of WELL in peer support groups after they had been receiving the trauma-informed services and heart-to-heart Integrated Care Facilitator (ICF) relationship for some time. I got to experience the energy of women

finding their voice, perhaps for the first time! I am truly grateful for this opportunity, and I feel so honored to be able to share at the Steering Committee meeting with other highly evolved C/S/R voices!

— Christine LaClair, Consumer Coordinator  
WELL and WELL Child Projects  
Cambridge, Massachusetts

My experience with the SAMHSA project has been a good learning experience in how to provide services to women who have experienced trauma. I saw the women at different stages. I saw them during outreach; when I conducted orientation groups; and later when they were in the main treatment phase and stabilized. This kind of retention of participants with service delivery needs related to co-occurring mental health, substance abuse and domestic violence is amazing.

— Cardenia Livingston, Outreach Coordinator  
Portal Project  
New York, New York

*“For me, the spirited collaboration of C/S/Rs, clinicians, and researchers... epitomizes what is so uplifting about the WCDVS experience and mission.”*

Working at the Boston Consortium of Services for Families in Recovery has been my dream job because this work combines direct care, management, service coordination, research and evaluation. I have witnessed the courage and resiliency of women survivors of violence, substance abuse and related emotional problems. I have learned that providing comprehensive, culturally appropriate, and trauma-informed services in substance abuse programs, truly makes a difference in women's lives. I have grown as a leader through working with an array of outstanding agencies and individuals at the local and national level, who are committed to providing quality, substance abuse services. Yes, there is hope for women and families in recovery.

— Luz M. López, Program Manager  
Boston Consortium of Services for Families in Recovery  
Boston, Massachusetts

I had the distinct honor and privilege to have been a part of this study as a clinician/therapist for over a year. I was the facilitator of a Seeking Safety Group and was also a case manager for many of the women in the study. The curriculum for Seeking Safety was wonderful to work with and I saw first hand how it helped women stay clean and sober, and become more functional. As a case manager, I was able to learn about the resources in our community (or lack of them) and pass that on to the women to access. It was a moving experience to be a part of such an effective and positive change for so many women.

— Suzanne Lorenz  
Allies  
Stockton, California

It has been a great privilege to be part of what was essentially a “learning community” of consumers, researchers, clinicians and policymakers, all focused on understanding the impact of violence on women's lives and how best to support their recovery. It was delightful to see a diversity of backgrounds and opinions coalesce into shared understanding. The importance of “safety” was the main learning for me—creating a safe enough environment for women to face the damage done by violence and begin to anchor their choices in terms of creating safety for themselves.

— Laurie Markoff, Project Director  
WELL Project  
Cambridge, Massachusetts

It was an incredible honor for me to be part of a project that made such a positive impact on women and children. I learned an enormous amount about the healing power of voice. By offering the women in my groups the opportunity to speak their truth in a nurturing safe environment as well as explore their strengths as parents, hope for better relationships with their children began to emerge. This project reinforced for me the importance of resiliency. When exploring the difficult and painful realities of how children and the parent-child relationship are affected by substance abuse, mental illness and trauma, it is critical that one builds from a foundation of strength.

— Beth Marron, Parent/Child Specialist  
WELL Project  
Cambridge, Massachusetts

My experience at the Boston Consortium of Services for Families in Recovery has been educational, empowering, challenging and rewarding. I had the experience of working with the most diverse, well educated, empowering and strong staff that believes in helping women recover from addiction and co-occurring disorders. They also believe in supporting consumers like myself working in the field. I feel that my work ethic was strong before working here but these women have taught me the true meaning of work ethic. I love my newfound journey.

— Brenda Marshall, C/S/R Clinical Coordinator  
Boston Consortium of Services for Families  
in Recovery  
Boston, Massachusetts

At its core, the WCDVS was about trust and hope. Meeting our scientific goals required trust among evaluators, practitioners, and C/S/Rs. It was often hard work, but in the end, mutual trust enabled cooperation to emerge and reason to prevail. All of us had hopes for the interventions and their outcomes, but most inspiring was the hope that I saw in the hearts and souls of the C/S/Rs. Their testimony gave me hope for other women, and men, who have yet to recover from the mental and spiritual wounds of violence and abuse.

— Greg McHugo, Lead Evaluator  
District of Columbia Trauma Collaboration Study  
Washington, DC

The best part about being an Integrated Care Facilitator was that it allowed me to reach out to women and help them to get their basic needs met such as food, housing, transportation, insurance, etc. This process helped to deepen the relationship but it also freed them to focus on their health and recovery issues. Therapists also appreciated being able to focus on clinical issues when those barriers were being addressed and when coordination between providers was facilitated by the Well Project.

— Bea Medeiros, Integrated Care Facilitator  
WELL Project  
Cambridge, Massachusetts

*“It was delightful to see a diversity of backgrounds and opinions coalesce into shared understanding.”*

My involvement in the WCDVS has opened the doors for self-examination about my muddled past and a resolution to move forward as someone who is out there with their history. There are many ways to help in this battle of silence, denial and the painful realization of what happens daily to so many victims of trauma. I think we need to applaud each individual who chooses their path and work together with the knowledge that we all are important components of breaking this intergenerational cycle of violence. Let this respect that has begun grow and nurture the seeds of change.

— Susan Mockus, Director of Advocacy Services  
Tamar Program  
Baltimore, Maryland

Triad group has gone very well. The curriculum is designed in a progressive manner to build upon each preceding chapter so that, by the end of the 16th chapter, each member has gained a great deal toward survival, empowerment, and recovery. I have witnessed the amazing ability of the consumer to expand and grow through the process used in Triad.

— Lana Moors, Triad Women's Group Facilitator  
Triad Women's Project  
Avon Park, Florida

I remain impressed most by what the women told me saved their lives. For the 1st time in their lives, they felt valued and worthy of recovery. This came from: our relationships with them providing genuine and consistent positive regard, belief in them, education about the paramount importance of safety and how this directly relates to the connection between their trauma and substance use, respect for their concerns and priorities, committed availability. Availability included continued contact between treatment services and finding them when they disappeared from treatment, and expressing real joy when reconnecting, regardless of their circumstances.

— Mira Naanes, Integrated Care Facilitator  
WELL Project  
Cambridge, Massachusetts

I learned that empowering trauma survivors is not about giving women power, but about the peace that comes from healing. I often hear a beautiful song on the radio by Sarah Groves. One line in particular always moves me. In your (God's) arms the pain and hurt feel less like scars and more like character.

— Joy Newburn, Coordinator of Outreach and Consumer Advocacy  
District of Columbia Trauma Collaboration Study  
Washington, DC

For me, the most important lesson that emerged from the WCDVS is that working together for a common good, with mutual respect and consideration of other's perspectives, leads to success. I truly value the relationships, both personal and professional, that have been forged as a result of my participation in this endeavor, and have yet to meet a more dedicated and passionate group of people as those involved with this initiative.

— Chanson Noether, Women and Violence Coordinating Center  
Policy Research Associates  
Delmar, New York

Because of the Portal Project we now assess every woman that enters Starhill for trauma. Our staff is much more trauma informed and are much closer to meeting all of the needs of our women. As a current Seeking Safety facilitator, it is truly inspiring to work with our women on a much deeper level of compassion. I have learned much from the project and will continue to utilize the philosophy and concepts in my personal and professional life. As a result of this work I have much greater understanding, respect, and compassion for all women.

— Marie O'Boyle, Director of Social Services/Starhill  
Treatment Program  
Portal Project  
New York, New York

The WELL Project was a consistent presence in the lives of the women, regardless of whether they chose to use the services or not. If imprisoned, hospitalized, or admitted to an inpatient substance abuse program we kept in touch with the women but also kept the collaterals aware of their status. Many times collaterals working with a woman or child would never have met if it were not for WELL Project interagency service planning meetings. In order to have a successful children's group it is important to first establish a solid relationship with a parent or legal guardian. Children's services were limited; especially difficult was finding after-school programs and summer camps for families with unreliable transportation and limited income. It's important to be creative when working with children, to acknowledge their strengths and encourage them to report their own positive attributes. With these women, we were not only part of their clinical lives, but an integral part of their entire lives.

— Sue O'Donnell, Integrated Care Facilitator  
and Child Clinician Advocate  
WELL and WELL Child Projects  
Cambridge, Massachusetts

*"I...have yet to meet  
a more dedicated and  
passionate group  
of people as  
those involved with  
this initiative."*

The study has been very eye-opening. My exposure to “that other side of life,” the drug using population, was very limited. Judgment on women who “did that sort of thing with their children” came hard and fast. But this study allowed me the chance to hear the other side of the story, the things I only had seen in movies and the reasons these amazing women were able to survive, in whatever way they could. The study also afforded me the opportunity to hone my research and interviewing skills. Because the instruments were standardized and very meticulously laid out, I now have many lessons to take into other grants. It surprises me the attachment I have to these women as I leave them for the last time. What began as “gathering information for research” turned into a kind of “catching up with friends.”

— **Bess Pagano, Research Associate**  
**New Directions for Families**  
**Thornton, Colorado**

From the WELL Project, I take away 3 big themes: 1) The power of a respectful, supportive relationship; 2) the value of having an “ombudsperson” available as a woman changes treatment or living settings; and 3) the urgent need for cross training on substance abuse and trauma work. My women who improved the most were those who participated enough to feel the effect of items one and two. My most painful moments were when women’s PTSD symptoms were interpreted as substance use and exacerbated by an s.a. clinician’s confrontive tactics. I hope more of this work can be funded. It’s needed.

— **Emily Page, Integrated Care Facilitator and Child Clinician Advocate**  
**WELL and WELL Child Projects**  
**Cambridge, Massachusetts**

My experience at the Boston Consortium of Services for Families in Recovery has been a rewarding one. My work in Boston enabled me to gain a better understanding of the integration of trauma and other mental health issues into substance abuse programming. One of the lessons from the project was the importance of developing multiple channels of communication with staff regarding services integration. Since the project was complex and much new information was being presented, this was not an easy task initially. Overall, the process was an enriching one.

— **Melissa Porter, Director of Clinical Services**  
**Boston Public Health Commission, Boston Consortium of Services for Families in Recovery**  
**Boston, Massachusetts**

Being part of the WELL Project has been an extraordinary experience in incorporating the principles of the relational model into a study addressing the complex and multifaceted issues of the fields of substance abuse, mental health and trauma. It has been wonderful to witness the changes in attitudes and perspectives and increased collaboration among social service providers at Local Leadership Council meetings. Conducting in-depth interviews with C/S/Rs was a deeply moving and inspiring honor.

— **Carol Prost, Manager of Prevention Evaluation Health and Addictions Research, Inc.**  
**WELL Project**  
**Cambridge, Massachusetts**

The Portal Project has helped me define and find the safe people and places in my personal and professional life. In addition, this collaboration highlighted the need for a blended perspective in treatment. Women need to be looked at, and treated, holistically for recovery and healing to take place. I feel grateful to have been a part of the Portal Team and part of so many women’s lives.

— **Laura Quiros, Program Associate**  
**Portal Project**  
**New York, New York**

This has been a fascinating project to participate in. There have been tremendous opportunities for learning, insight, and growth as a result of several years of integrated planning, implementation, and interaction. Being able to develop a national network of colleagues who are experts in their various disciplines is invaluable. Finally, the progress we made with this project will provide incalculable

opportunities for the transformation of treatment for women and their families across this nation for years to come.

— **Elke Rechberger, Program Director**  
**PROTOTYPES Systems Change Center**  
**Culver City, California**

During the past 4 plus years I have had the pleasure of working with the Tri-County Human Services Triad program in an administrative capacity in Lakeland, FL. The dedication of the individuals involved has been incredible. The focus of effective case management has spawned the development of interagency cooperation to a level not experienced in the past. Today, mental health and substance abuse agencies work together to meet the needs of the person served in an ever-evolving network of integration. While the identity and mission of the individual agencies remain clear, the integration has prompted better and even best practices as co-occurring services evolve. It has been a pleasure to work with the research staff and the staff of each participating agency. As a result of all of the work, a new focus on integrated service to women specifically, but also, people in general, certainly has been reinforced. Thanks to all.

— **Robert C. Rihn LCSW, Executive Director**  
**Tri-County Human Services, Triad Women’s Project**  
**Avon Park, Florida**

*“the progress we made with this project will provide incalculable opportunities for the transformation of treatment for women and their families...”*

There are many things I have learned on a professional level regarding cross-site evaluation design, implementation, and analysis, as well as the many clinical issues that the women in our project face. I have enjoyed the diversity of composition of the cross-site steering committee and feel lucky to have been able to work with so many incredible people. Although it has been overwhelming participating in these meetings as they contain a lot of passion and knowledge, I feel that services will truly be enhanced as a result of this endeavor!

— **Debbie Rinehart, Associate Director, Research and Program Evaluation, Arapahoe House New Directions for Families Thornton, Colorado**

I have remarked often to colleagues that I have never worked on a project where those involved cared so passionately about the project: it was evident from the beginning with challenging issues, to the end with deep relationships having been forged, and remarkable effort put forth resulting in numerous products. I have appreciated the opportunity to be involved in such a project. Best wishes to you all.

— **Pam Robbins, Women and Violence Coordinating Center Policy Research Associates Delmar, New York**

My journey with the issue of the impacts of physical and sexual abuse has been a long one. I dared hope that this study would take root and flower into beautiful, brilliant blossoms that could light the way for the future and that the beauty and brilliance would shine from the faces of the C/S/Rs. That is the one lesson and outcome we were all striving for. This has been a very spiritual experience.

— **Susan Salasin, Federal Project Officer Center for Mental Health Services Rockville, Maryland**

Before Portal the women were often viewed as “sicker” than their male counterparts; and although there was awareness of sexual abuse and other trauma that suggested the need for specialized treatment, trauma was often left for last. The Portal study project put trauma first and made it central.

— **Andrea Savage, Principal Evaluator Portal Project New York, New York**

I have come away from the WELL Project with a much deeper and more internalized appreciation for the power of safety as a concept for healing and recovery. By reframing the context of our work with clients to an issue of safety, it is possible to destigmatize the entire process. Whether referring to the impact of trauma/violence, substance abuse or mental health issues, this reframing enables our women to examine their self-care choices in the more objective context of safe vs. unsafe behaviors (i.e. self-harm vs. self-care, remaining in vs. leaving abusive relationships, using substances vs. abstinence, discontinuing meds/therapy vs. continuing stabilization, etc.).

Further, this framework changes the conversation within systems. When safety becomes the primary goal of healing and recovery, the focus becomes the creation of both internal/emotional and external/environmental safety for clients in the here and now. This allows systems to more openly examine the treatment environment they create and through that process to address and decrease the underlying fears, reservations and assumptions that may have been made regarding working with women with co-occurring disorders and histories of trauma/violence.

— **Kath Schilling, Integrated Care Facilitator WELL Project Cambridge, Massachusetts**

*“I am constantly amazed by [women’s] courage, strength and perseverance.”*

Four years ago when I attended my interview for the position of Consumer Coordinator I had no idea of what the position entailed. But, I was very interested because the requirements were “in recovery from mental health issues and substance abuse, and with a history of trauma”. I felt honored to be hired for the position and valued as a person in recovery. The education, training and support I have received are

invaluable. It has enabled me to pass on what I have learned to my fellow A.A.s, C.A.B. and W.O.W. and to come closer to my goal to be the best Sharon that I can be. I am so very grateful to have been associated with the fine people of the WCDVS, the Triad Project and Tri-County Human Services.

— **Sharon Slavin, Consumer Coordinator Triad Women’s Project Avon Park, Florida**

Working with the Triad Project was a great experience. The bi-weekly meetings with the other Triad Specialists were appreciated. The training sessions were so helpful. The training helped to equip the Triad Specialist to better serve the clients. The thing that was most beneficial was watching the improvement the clients. To have a coordinator like Margo Fleisher-Bond, who is so professional and resourceful was a bonus.

— **Betty Smothers, Triad Specialist Triad Women’s Project Avon Park, Florida**

The Women, Co-Occurring Disorders and Violence Study is generating knowledge on the development of integrated services approaches for women with co-occurring substance abuse and mental health disorders who also have histories of physical and/or sexual abuse.

*The Tapestry* is a product of the Women, Co-Occurring Disorders and Violence Coordinating Center which is operated by Policy Research Associates, in partnership with The National Center on Family Homelessness and the Cecil G. Sheps Center for Health Services Research. The Coordinating Center provides technical assistance to program sites, conducts cross-site process and outcome evaluations, and develops a range of application products from the study sites. This publication was developed by The National Center on Family Homelessness.

The Women, Co-Occurring Disorders and Violence Study is funded by the Substance Abuse and Mental Health Services Administration's three centers – The Center for Substance Abuse Treatment, The Center for Mental Health Services, and The Center for Substance Abuse Prevention.

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Never have I worked on a project from which I learned so much. The perspectives and basic information that were shared play very important roles in many of the other projects on which I am working at the intersection of the mental health and criminal justice systems. Most importantly, the many inspiring women that I was privileged to meet have made a lasting impression on me with their strengths, persistence, and talents.

— **Hank Steadman, Women and Violence Coordinating Center**  
**Policy Research Associates**  
**Delmar, New York**

Working with women in substance abuse treatment is truly rewarding. I am constantly amazed by their courage, strength and perseverance. I feel very fortunate to be part of the team that makes up the Boston Consortium. Our daily effort, hard work and laughter allow us to work together, like a family. That feeling of family makes this a unique and wonderful job.

— **Bethany Stuart, Clinical Coordinator**  
**Boston Consortium of Services for Families in Recovery**  
**Boston, Massachusetts**

This project has taught me a number of very valuable lessons. The first lesson is that the most important prerequisite for true collaboration is listening. It is not as important to be heard as to hear. The second lesson is that everyone, regardless of expertise, status or outward appearance carries her own pain and triumphs. Acknowledging these elements of character enriches the process. Finally, this project has confirmed my experience that women truly do engage problems differently than men. This includes the way they disagree, the way they resolve disagreements, and the strength of the product that emerges from this process. In other words, the process may not be pleasant or pretty, but the outcome is terrific.

— **Nancy VanDeMark, Principal Investigator**  
**New Directions for Families**  
**Thornton, Colorado**

My participation in the WCDVS has broadened my awareness of the impact of trauma in women's lives and enriched my spirit both personally and professionally. It has been a privilege to collaborate with such a diverse and dedicated group of people. To the women, I will be forever in awe of your strength and commitment to telling your stories and finding your voices—you have been the champions of this project.

— **Wendy Vogel, Research Associate, Women and Violence Coordinating Center**  
**Policy Research Associates**  
**Delmar, New York**

This is such an interesting study because it spans so many topic areas. The WCDVS is about much more than substance abuse, mental health, and trauma issues. We are looking deeply at peoples' lives. It could be anyone's life. Few, if any, escape exposure in varying degrees to these events. This work is important for all social beings.

— **Debra Wagler, Interviewer**  
**Allies**  
**Stockton, California**

My job concerns finance and administration for the Boston Consortium of Services for Families in Recovery. Nevertheless, as part of the team which implemented the BCSFR I observed:

- How important and how challenging coordination of all treatment providers is for any client.
- This was an innovative method of treatment which could be effective for clients, where perhaps other methods have failed.
- It is a treatment model which requires a lot of communications skills and time to carry it out effectively.

— **Lynda Wallack, Director of Operations and Finance**  
**Boston Public Health Commission, Boston Consortium of Services for Families in Recovery**  
**Boston, Massachusetts**

*“To the women –  
I will be forever in  
awe of your strength  
and commitment to  
telling your stories  
and finding your  
voices...you have  
been the champions  
of this project.”*