Training Curriculum – Part 2

The **Voices** Program for Girls: Theoretical Foundations and Program Overview

by Stephanie S. Covington*

**Editor's Note:** Voices: A Program of Self-Discovery and Empowerment is a new training curriculum for girls. In this issue of WGCJ, we publish the second of a two-part excerpt from this important new volume. In this part, California psychologist Stephanie S. Covington, along with co-authors Kate Calhoon and Kary Young, describe the program’s psychological/theoretical foundations and offer a practical overview of the program, focusing on the role of facilitators. Voices consists of a 223-page, three-ring binder Facilitator Guide ($80), plus an 80-page Participant Journal ($9.15 each). The full cost of these volumes includes a 10% shipping and handling fee (plus a 7.75% California sales tax where appropriate); these volumes can be purchased from the Center for Gender and Justice Institute for Relational Development, 7946 Ivanhoe Ave., Ste. 201B, La Jolla, CA 92037, (858) 454-8528, (website) www.centerforgenderandjustice.org. In this excerpt, some language has been altered slightly from the original and specific references have been deleted (all of these are available in the full document).

**Theoretical Foundation**

The framework for the *Voices* program is based on the following theories: psychological development, attachment, resilience, addiction, and trauma. The various treatment strategies used in the program apply these theories to create the therapeutic process.

**Psychological Development** Designing effective programs for girls requires a clear understanding of girls’ psychological development. Traditional theories of psychology describe “development” as a climb from childlike dependence to mature independence, where the goal is to become a self-sufficient, clearly differentiated, autonomous self. In contrast, Jean Baker Miller, in her 1976 book, Toward a New Psychology of Women, found that a girl or woman develops a sense of self and self-worth when her actions arise out of, and lead back into, connections with others. Because of their desire for connection, girls tend to give up their sense of self and their own voices to be in relationship with and acceptable to others, primarily boys. This desire for connection reaches a high point in adolescence, and girls will enter into unhealthy connections when healthy connections are not available, in order to avoid isolation.

A gender-responsive program based on relational theory creates an empowerment model that can reproduce five critical outcomes for the child’s future relationships. When this attachment is unhealthy or not available, the child can be negatively affected for life. Those who experience disruptions in attachment during childhood (who have not had healthy, growth-fostering relationships) often use drugs later to connect with a drug-dependent partner, to deal with hurt and pain in their relationships, and to maintain relationships.

According to Ainsworth, there are different types of attachment:

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"Rather than viewing relationships as signs of weakness or dependence or even just as a source of support, we may view them as signs of relational strengths, competence and empowerment."

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*Secure attachment, in which the child is confident that the primary attachment figure(s) will be available, responsive, and helpful—especially in adverse situations. These children feel safe and are clear about self/other boundaries;*

*Avoidant attachment, in which the child is unsure that the primary attachment figure(s) will be available or helpful when needed. These children experience separation anxiety; and*

*Ambivalent attachment or anxious-avoidant attachment, in which the child has no confidence that his or her needs will be met or responded to. Such children often feel rejected and criticized.*

**Resilience.** The term fostering resilience is often used in discussions of issues of youth. The definition of resilience is related to the question: Why is it that some people make it through the stresses and difficult situations in their lives, while others get weighed down and stuck in life’s struggles? Those who have studied resilience argue that there are certain...
There are "protective factors" that help some individuals—even those who face a great deal of adversity in their lives—to overcome life’s difficulties. Protective factors are not just personal characteristics; they are the result of a person’s experiences in his or her immediate environment, including family, school, and community.

There are tools that may be helpful in measuring levels of resilience. For example, the Adolescent Resiliency Attitudes Scale (A.R.A.S) is based on the work of Steven Wolin and Sybil Wolin. The A.R.A.S uses the following seven indicators of resilience to determine an individual’s level of resilience: insight, independence, relationships, initiative, creativity, humor, and morality.

A quote often used is that a resilient child is one who, “works well, plays well and loves well.” This implies that the resilient child has learned to cope with adversity in a way that allows her or him to move on from stressful situations and to participate in the enjoyment of life. Resilient children have confidence that, although they may be experiencing difficulties at this particular time, things will change for the better in the future.

According to Greene, Peters, and Associates, a girl who is resilient tends to have:

• A close relationship with at least one adult that she trusts and who cares for her;
• Significant adults in her life (e.g., parents, teachers, counselors, community leaders; elders) who have high expectations of her; and
• The opportunity to meet positive role models and mentors through community involvement.

Addiction. Health professionals in many disciplines have revised their concepts of disease. A more holistic view of health acknowledges not only the physical aspects of disease but also the emotional, psychological, and spiritual aspects. Alcoholics Anonymous (AA) was one of the first proponents of a holistic health model of addiction; the concept of addiction as a disease has now gained wide acceptance. Because so many young people begin to abuse alcohol and other drugs at an early age, addiction is being called a “pediatric-acquired disease.”

The theoretical model of addiction used in Voices expands this holistic perspective. It addresses the complexity of issues in the lives of young women who have substance-use disorders, including genetic predispositions toward addiction, histories of abuse, health consequences, shame, isolation, or any combination of these. For example, although some young women may have genetic predispositions to addiction, it is important in this program to acknowledge that many of them have grown up in environments in which drug dealing and addiction are ways of life. When addiction has been a core part of a girl’s life, the treatment process requires a holistic, multidimensional approach.

Why is it that some people make it through the stresses and difficult situations in their lives, while others get weighed down and stuck in life’s struggles?

It is important to understand that substance abuse is different for girls than it is for boys. Young women often are in relationships with young men who “use” and give them drugs. In other words, they often use drugs with the young men they are involved with. (Covington, 2002). Research suggests that girls are more likely to become dependent on alcohol and other drugs than boys are and that the earlier girls start to “use,” the more severe their problem use becomes. Often, girls who have substance-abuse problems also have problems with their parents, have been physically and/or sexually abused, and suffer from mental-health problems.

Young women cannot be separated from the influences that surround them. In considering girls’ likelihood of using alcohol and other drugs, it is important to think about their environments. They may be genetically susceptible to drug and alcohol use because of generations of addiction, they may have experienced trauma in their lives that compels them to use drugs or alcohol to numb the pain, they may face social and economic oppression that is difficult to cope with, they may feel spiritually depleted and disconnected to the world around them, and they may live with adversity stemming from oppressive policies and laws that obstruct their ability to move forward. These examples emphasize that it is important to think about the whole person when considering drug and alcohol abuse.

Trauma. Many young women have experienced abuse or other traumatic events in their lives. The diagnostic manual used by mental-health providers (DSM IV-TR) defines trauma as, “involving direct personal experience of an event that involves actual or threatened death or serious injury, or other threat to one’s physical integrity; or a threat to the physical integrity of another person; or learning about unexpected or violent death, serious harm, or threat of death or injury experienced by a family member or other close associate. The person’s response to the event must involve intense fear, helplessness, or horror (or in children, the response must involve disorganized or agitated behavior).” The word trauma is used to describe both the event and the reaction or response to the event.

Trauma begins with an experience that overwhelms a person’s normal coping mechanisms. There are both physiological and psychological reactions in response to the event: hyper-arousal, altered consciousness, numbing, etc. These are normal reactions to an abnormal or extreme situation. A young woman’s nervous system then becomes sensitized and is vulnerable to any future stressors in her life. She may be triggered in her current life by reminders of the traumatic event that happened in the past. There may be nightmares and flashbacks to the earlier experience. This creates a painful emotional state and affects subsequent behavior.

Girls and boys both are at risk of physical, sexual, and emotional abuse when they are young. Although sexual abuse in childhood is significantly higher for girls than for boys, girls are proportionally—a higher percentage of victims

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Females in general are more likely to be exposed to physical abuse, rape, sexual molestation, childhood parental neglect, and childhood physical abuse.

In adolescence, girls are more likely than boys to continue to be abused or assaulted, more often in private and by someone close to them, such as a date or a relative. Boys are less likely to be abused in close relationships. Their risk comes from peers or rivals (as in gangs). When males are assaulted or abused, it is more likely to be done in public and by strangers. This pattern carries on into adulthood. Women are most at risk from people they know, and men are primarily at risk from crime or war.

Having an understanding of the impact of abuse and trauma on the girls in the Voices group is essential.

Environment. One of the fundamental elements in trauma treatment and theory is providing a safe environment. The importance of environment is stressed in the field of child psychology, which emphasizes that the optimum context for child development consists of a safe, nurturing, consistent environment in which the child experiences warmth and a sense of being cared for and understood. These are the same environmental qualities that need to be developed in girls' programs.

A "therapeutic milieu" is a carefully arranged environment or culture that contains the following five elements, all of which are fundamental in both community and institutional settings:

- Attachment: A culture of belonging;
- Containment: A culture of safety;
- Communication: A culture of openness;
- Involvement: A culture of participation and citizenship; and
- Agency: A culture of empowerment.

The environment in many juvenile-justice settings is particularly challenging for young women with histories of trauma. Any therapeutic process will be unsuccessful if the environment mimics the behaviors of the dysfunctional systems the girls have already experienced. Rather, the design of program and treatment strategies should be aimed at undoing some of the prior damage. A therapeutic environment's norms are consciously designed to be different: safety with oneself and with others is paramount, and the entire environment is designed to create living and learning opportunities for everyone involved, staff and clients alike.

Safety. Safety is a critical and primary element when working with girls. It is fundamental in all trauma-treatment models. Judith Herman developed a three-stage model of recovery from trauma; stage one focuses on self-care and safety in the present. Herman also emphasizes that a trauma survivor who is working on safety issues needs to be in a homogeneous group. This means that it is important that the group be composed solely of girls and that the facilitator be female.

Facilitators can help young women in the group to feel safe by trying to keep the program free of physical, emotional, and sexual harassment and by assessing any risk of violence in the girl's home, school, and relationships. Facilitators also can help the young women to feel safe internally by teaching them grounding and self-soothing techniques. Many abused girls use alcohol and/or other drugs to medicate their depression or anxiety because they know no better ways to comfort themselves.

Self-Harm. "The term self-inflicted violence is best defined as the intentional harm to one's own body without conscious suicidal intent. In simpler terms, the act of self-inflicted violence is hurting yourself on purpose." Self-harming behaviors often are used by girls to deal with the pain of abuse. Cutting and burning are among the most common forms of self-harm. Successful treatment of self-inflicted violence (SIV) includes teaching young women new ways of coping with stressors so that underlying painful feelings can be dealt with. One of the challenges is abstinence from mood-altering drugs, as these have a tendency to increase self-harming behavior.

If you find that any of the girls in the group are hurting themselves, you will want to watch for other girls in the group who might be beginning this behavior.

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 Clinicians have found that, in juvenile-justice and other residential settings, when one girl is cutting, carving, or burning herself, others are more likely to begin to do the same.

Program Overview

The Voices curriculum is contained in a Facilitator's Guide and an accompanying participant's journal. It was created to serve girls and young women between the ages of twelve and eighteen. A recent Girls Scouts of the USA report determined that there are three distinct age groups in which girls have common interests. It may be helpful to think about these groups and their specific needs in relating to the age group that you are working with:

- Girls between 11 and 12 are anticipating the transition to middle school, want to be liked, worry about fitting in, are community oriented, and are full of hope and wonder;
- Girls between 13 and 15 are highly vulnerable to peer pressure, focused on "me," focused on boys, want to be popular, and are conscious of body image; and
- Girls between 16 and 17 are feeling more independent, feeling more pressure to succeed in school and make something of themselves, looking for activities that improve skills, and feeling adult pressures.

We Want to Hear From You

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Throughout this curriculum you will notice that the terms "girl" and "young woman" are used interchangeably. When you consider the language that you will use as the facilitator, think about the age range of the group members. Some feel that using "young women" for group members in early adolescence is "adultifying" and does the girls a disservice. However, it is respectful to use "young women" for older group members.

This program is designed for facilitation in a group setting but can be adapted for one-on-one use. The suggested number of participants per group is between six and ten. Ideally, the groups would be "closed," that is, the same girls would begin and end the program together. The curriculum can be adapted for larger groups and open groups, if either is essential to the program setting. Voices addresses core themes of self, connection with others, healthy living, and the journey ahead. Given the pervasive impact of substance use in many girls' lives, this theme is woven throughout the sessions. In addition, skill building in the areas of communication, refusal skills, anger management, stress management, and decision making is integrated across program topics.

The curriculum promotes a strength-based approach that seeks to empower the girls and increase their sense of self. In using this kind of model, the facilitator helps the girls in the group to see the strengths and skills they already have that will aid in their growth and development. The curriculum also focuses on emotional development; dealing with expression and containment of feelings are critical parts of adolescent growth.

The Voices Journal

Each group member is provided a Voices Journal. This journal serves as her personalized tool for exploring and recording her experiences, thoughts, and feelings as she progresses through the program.

The process and impact of journaling has been studied widely across many fields, including psychology, psychiatry, literature, art, and education. Research has generally revealed that journaling can be a valuable tool in self-exploration, healing, health improvement, problem solving, and coping with stress. Evidence suggests that journaling in general, and structured journaling specifically, is a powerful tool for personal growth and change.

The Voices Journal utilizes a process called Interactive Journaling®. Interactive Journaling® is an experiential writing process that guides and motivates people toward positive lifestyle changes. This process was created with the assistance of over 250 professionals in the health and human services field.

In the context of girls' lives, structured journaling provides an outlet for creativity, personal expression, exploration, and application of new concepts and ideas in the form of writing and drawing can be especially empowering and clarifying for group members. The Voices Journal becomes a personalized tool for exploration and growth.

It is important to convey to group members that there are no right or wrong answers to the questions posed in the Voices Journal. Penmanship and grammar are of no importance. The purpose of the journal is to provide group members a safe and structured place in which to explore their experiences, thoughts, and feelings.

Confidentiality

It is imperative that the confidentiality of the girls' responses in their journals be respected. In order to build the trust necessary for the girls to share and learn from one another's experiences, an atmosphere of mutual respect and tolerance must be established.

Some girls will hesitate to share their thoughts and feelings (both in the journal and in group), for fear that their contributions will be judged or considered "wrong." As a facilitator, you can help to minimize this hesitation by respecting the participants' privacy in regard to their journal responses and by validating all contributions made in the group.

Establishing group agreements is one of the first activities in this program. This is an important discussion that sets the groundwork for the girls' senses of safety, trust, and respect within the group.

It is recommended that the girls be allowed to take their journals home between sessions and at the conclusion of the program. However, be aware that some girls may not feel comfortable or safe carrying their journals to school or home. Because of this, it is recommended that you give all group members the option of storing their journals in a designated, secure place onsite. Be sure to identify such a place.

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The Facilitator's Guide

The first part of the Facilitator's Guide gives the facilitator some background information about girls and about the formation of the Voices program.

The second part includes four modules (or themes) with a total of eighteen 90-minute sessions. The sessions may be arranged in a variety of ways. However, the curriculum is laid out in the suggested sequence. The four modules are:

- Self (with sessions on Who Am I?, My Life Story, Breaking the Silence, the World Girls Live In, and Support and Inspiration);
- Connecting with Others (with sessions on Communication, My Family, Mothers and Daughters, Friendship, Dating and Sexuality, Supportive Relationships, and Abusive Relationships);
- Healthy Living (with sessions on Our Bodies, Emotional Wellness, Alcohol and Other Drugs, and Spirituality);
- The Journey Ahead (with sessions on Crossroads and Packing for My Journey).

Each session is organized the following way:

- The objectives, general topics to be covered, and materials needed are listed at the beginning of each session;

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Facilitating in a Juvenile Justice Setting. There are many unique challenges to being a facilitator in a juvenile justice setting, including issues of confidentiality, support, group space, comfort, and security. It is particularly important in this setting for the facilitator to provide confidentiality and emotional safety, as well as to be an advocate for the girls and the group. Often there is a “culture clash” in juvenile justice settings. Historically, the criminal justice system has been based on a control model; the therapeutic treatment field is based on a change model. Some treatment providers struggle to work in a setting that feels unsupportive.

Prior to the Session. Before you begin the group, it is suggested that you allow six-to-eight hours in which to read and comprehend the curriculum materials. It is also useful to review the materials for each session again before beginning that session. This is necessary in order to feel comfortable with and absorb the information. You will want to be able to present the materials by just referring to your notes, rather than “reading” them.

Consider finding a support person (a friend or mental health provider) who can be available to the girls between sessions. This may be another challenge in a juvenile justice setting, where support may not be readily available. Be sure that all equipment (e.g., flipchart and CD player) is available and in the session room at the time it is needed.

Be sure that the “logistics” (e.g., special needs, transportation, room setup, chairs, nametags, doors unlocked) are taken care of before each session. For example, you might need to find a secure place for the girls’ journals if you work in a correctional setting.

Knowing the Girls in the Group. Know something about the young women in your group. This is not only respectful; it will help your facilitation. Find out who they are, what they want to know and learn, their levels of experience, their current emotional states, their levels of functioning, and any particular group dynamics. You may wish to develop a questionnaire to help gather this information before the first session. Learn as much as you can ahead of time about the issues, concerns, and demographic profiles of the girls in the group. These could include issues of race, class, and culture.

Girls need adequate cognitive functioning to participate in the exercises and discussions. Girls who have certain men-
you might say, “That’s a good question. I’m glad you asked that.”

Be conscious of group trust and confidentiality. The facilitator needs to watch for interactions and indications that have the potential to impact the cohesiveness of the group. This might include competition among members, absenteeism, silence, non-participation, subgrouping, or a breach of confidentiality. Verbally check in with the group regarding these issues (e.g., “What does this silence mean?”). It is important to be culturally sensitive and to use culturally relevant examples throughout the curriculum. Race, class, religious differences, sexual orientation, disability, culture, and ethnicity can influence the girls’ levels of comfort with the issues discussed in the program.

Set standards for an acceptable way of relating with others (e.g., no physical or verbal abuse, no interrupting, no name calling).

Group Interaction. Encourage the girls to speak about their personal experience, not in generalizations or abstractions, while keeping the pace moving along. At the same time, allow the girls to set their own limits with respect to self-disclosure. This helps create safety. Sharing personal experiences increases connection and closeness with others. It also enables the girls to learn from one another’s experiences.

Be aware that too much disclosure on the facilitator’s part may be inappropriate and can derail the group process. It is also detrimental to use the group as a sounding board for your personal concerns. If you are considering self-disclosing, always ask yourself, “What would be most helpful for the young women in the group?” Remember, in a support group, the important discoveries will come from the group members. Your self-disclosure should be kept at a minimum.

Confidentiality is a value that must be adhered to by the facilitator as well as the group members. There are two exceptions:

• You may communicate with treatment team members as part of a participant’s ongoing care; and

• You may break confidentiality when someone’s personal safety or the safety of others is at stake.

Cultural Awareness. Remember that race, ethnicity, and gender are not mutually exclusive. Together, they are part of the complex lens through which many girls see and experience the world. To simply discuss issues related to girls, generically, does not recognize the importance of the racial and/or ethnic identities of the young women in the group.

Special Considerations for Juvenile Justice Settings. As was previously mentioned, conducting a group program in a juvenile justice setting has its own unique challenges. You need to think through the following issues before the sessions begin.

• Space, setting: Can chairs be arranged in a circle? Is music allowed? Is privacy allowed or must correctional staff members be present? Are there other security issues that affect the setting and environment you are trying to create? Is the facility co-ed?

• Confidentiality: Is confidentiality more difficult to ensure in a setting in which security is prioritized and trust is not the norm?

• Interventions: Will there be interruptions such as doing the “count,” observations by correctional officers, and inflexible times for medication?

• Attitudes of group members: Are some participants required to be there? Are the girls resistant to being there?

• Materials and journals: Can the girls’ journals be kept in a safe and confidential place? Do the girls have the time and permission to do the activities in their journals?

• Support for the Facilitator: The correctional environment can be harsh for the facilitator as well as for the girls. Getting support from someone within the institution or correctional setting can help you to navigate the system more easily as well as provide an emotional sounding board for your concerns.

• Standard Operating Practices: Procedures such as searches, restraints, and isolation may traumatize and/or re-traumatize young women.

Elements of the Group Process

Group Membership. Ideally, the group should be closed to new members after the first session, so that the entire group begins and ends together. This helps to establish connection and safety among the group members. The curriculum can also run as an open group if the setting requires an open group process.

Timing of Sessions. Each session takes about ninety minutes (one and one-half hours) to complete.

Safety. Many of the young women in a Voices group have never felt safe, be-

Sharing personal experiences increases connection and closeness with others. It also enables the girls to learn from one another’s experiences.
Having feelings is okay.
Getting angry is okay.
Being abusive to another group member or the facilitator is not okay.

Group members are to honor one another's confidentiality. What is said in this room stays in this room; it is not shared with anyone outside the group. (You might want to ask the group members, “What does confidentiality mean to you? What happens when it is violated? How does that feel? What do you want to do, as a group, to maintain confidentiality?”)

Violence and aggressive behavior is not permitted. No physical, emotional, or verbal abuse will be allowed in the group.

Sessions will start on time and end on time.

Regular attendance and participation is important for everyone in the group. Group members should contact the facilitator if they are unable to attend a session.

Contact with other group members outside the regular group session is encouraged.

Share the floor time with others; everyone in the group should have the time to talk and share what is on her mind.

There will be no smoking or eating in the group sessions.

Do not come to the group session under the influence of drugs or alcohol.

Having feelings is okay. Crying in the group is okay. Laughing is okay. Getting angry is okay. Being abusive to another group member or the facilitator is not okay.

Every group member is free to “pass” when asked a question or when invited to participate in an exercise during a group session. (It is important to take time at the end of the group to privately ask a girl who passed why she chose to do so. Often, those who do not speak have a great deal to say but may not feel comfortable sharing in a group setting. Find out how you may be able to assist her in feeling safe enough to share.)

Opening and Closing the Session.
Opening and closing activities help the group members feel grounded and present. Begin each group session with some quiet time and a brief check-in. Remind the girls of the confidentiality agreement and other ground rules. When closing a session, allow the girls time to reflect on what has been covered.

Empowerment.
Empower the girls in the group. Point out and emphasize the girls' strengths. Encourage them to make conscious decisions. Help them to take ownership of their feelings and to act out their feelings in appropriate ways, rather than suppressing them or being consumed by them. Encourage social action as part of the healing process.

Guided Imagery.
The curriculum uses guided imagery, or visualization, in several sessions. If you are not familiar and comfortable with this method, practice the guided imagery script, or directions, before the session so that your voice is relaxed and smooth when you are explaining the visualization. This is important in helping to make the group members feel relaxed.

It is important to start a visualization exercise slowly, to bring the girls out of the here-and-now and into the exercise. It is also important to end slowly, to help the girls come out of the experience and into the here-and-now. Once you have finished the visualization, and the girls have opened their eyes, it is important to serenely welcome the girls back into the group process.

For some trauma survivors, closing their eyes for an exercise can be very difficult. They may need to keep their eyes open until there is a deeper sense of safety and trust.