5-15-2013

The Olive Branch Program: a proposal for outreach to survivors of trauma highlighting the restorative potential of nature-based cultural settings

Mariana I. Swick
Bank Street College of Education

Follow this and additional works at: http://educate.bankstreet.edu/independent-studies

Part of the Health Psychology Commons, Social Work Commons, and the Women's Health Commons

Recommended Citation


This Thesis is brought to you for free and open access by Educate. It has been accepted for inclusion in Graduate Student Independent Studies by an authorized administrator of Educate. For more information, please contact kifreda@bankstreet.edu.
The Olive Branch Program: A Proposal for Outreach to Survivors of Trauma

Highlighting the Restorative Potential of Nature-based Cultural Settings

By

Mariana I. Swick

Mentor:

Nina Jensen

Submitted in partial fulfillment of the requirements of the degree of
Master of Science in Education
Bank Street College of Education
2013
The Olive Branch Program: A Proposal for Outreach to Survivors of Trauma

Highlighting the Restorative Potential of Nature-based Cultural Settings

By

Mariana Swick

2013

Abstract

This informal, exploratory study addresses the long-term implications of sexual assault-related trauma on the lives of women survivors and demonstrates how nature-based cultural institutions can support the needs of this population throughout recovery. The conceptualization of The Olive Branch Program, a hypothetical outreach program designed for women survivors of sexual assault, is supported by research in the field of trauma recovery, alternative therapeutic modalities within a holistic health framework, and insight gathered through interviews with trauma therapists and trauma survivors. The study proposes the adoption of The Olive Branch Program by local nature-based cultural institutions in light of the long-term needs of women survivors on various pathways towards recovery. In addition, the study proposes ways for cultural institutions to engage in interdisciplinary collaboration, address issues of accessibility and offer socially relevant programming.
Table of Contents

INTRODUCTION.................................................................................................................................4
LITERATURE REVIEW...........................................................................................................................8
Terminology...........................................................................................................................................8
Prevalence of Sexual Assault...............................................................................................................9
Stages of Trauma Recovery...............................................................................................................10
Complementary Therapies..............................................................................................................15
    Horticultural Therapy....................................................................................................................16
    Art Therapy....................................................................................................................................17
INTERVIEWS.......................................................................................................................................21
Methodology.......................................................................................................................................21
Voices from the Field.........................................................................................................................22
Voices of Strength, Voices of Survival..............................................................................................27
PROGRAM PROPOSAL......................................................................................................................34
CONCLUSION.....................................................................................................................................37
REFERENCES.....................................................................................................................................39
APPENDICES.......................................................................................................................................39
INTRODUCTION

During the harsh winter of 2008 in the aftermath of a violent sexual assault, I met the turning season and my ensuing journey towards recovery with a card from a friend in the mail. Enclosed was a brochure about Wave Hill Public Garden and Cultural Center and a stack of complimentary visitor passes. The Wave Hill literature invited me to visit the local cultural institution and described the offerings of New York City’s spectacular garden oasis—the Bronx’s best kept secret overlooking the Hudson River and Palisades. In a posttraumatic state, I was initially perplexed by the timing of the gift, but all the while grateful for the gesture of care and compassion demonstrated to me by my dear friend, Olive—my teaching mentor, and as I would later discover, a fellow survivor of trauma.

Although I wouldn't have suspected it at that moment, my weekly visits to Wave Hill provided the safety, solace, and sanctity that no other therapy could offer me. Walking the protected and enclosed trails, meditating and journaling on the expansive lawn, and dropping in on nature-inspired art making programs allowed me to begin restoring the very core of myself that I feared had been destroyed—the very nature of my being, that I discovered, was miraculously alive like the living organisms witnessed around me. As if to reach out with a branch of nature’s beauty, Olive’s gift provided me with the light of peace during my darkest hour.

The conceptualization and proposal of The Olive Branch Program at Wave Hill, and potentially other nature-based cultural institutions, seeks to honor Olive’s commitment to peace through justice, her respect for the natural environment, and her
effort to restore the hearts of fellow trauma survivors throughout their seasons of renewal and continual change. This project reflects my gratitude for the timely gift provided by Olive and Wave Hill, as it does my developing body of knowledge around the capacities of museums and cultural institutions to address social issues and be relevant to the lives of members of their community. Insofar as it is both timely and socially relevant, The Olive Branch Program serves as my survivor’s mission.

In light of my personal experience with Wave Hill, I propose a concerted effort be made to reach out to women in the local community who, like me, could find relief from the often debilitating effects of trauma in the therapeutic surroundings of the garden oasis. The program I am proposing seeks to provide survivors with access to the offerings at Wave Hill in the aftermath of trauma, at absolutely no cost to participants, by providing the benefits associated with annual membership in addition to an annual survivor’s retreat day or "Wellness Day" designed specifically with the survivors’ needs in mind, co-facilitated by experienced trauma therapists from Crime Victims Treatment Center and specially trained Wave Hill staff. The mission of The Olive Branch Program is to improve the quality of life for women survivors of sexual assault-related trauma through restorative experiences in a natural environment, and facilitated group activities that promote connections to art and nature.

Similarly, Wave Hill seeks to foster connections between people and nature through the arts and sciences. Exploring human connections to the natural world through programs in horticulture, education and the arts is central to Wave Hill's mission, in addition to preserving its magnificent views and celebrating the artistry and legacy of its gardens and landscapes. Wave Hill's exquisitely maintained 28-acres are home to 1,100
genera and 3,200 species of trees, plants and flowers nestled throughout wooded areas and a variety of gardens, diverse animals and insects including resident and migrating birds, and several restored historical buildings reflecting its natural and cultural heritage.

Today, as one of 33 City-owned cultural institutions, Wave Hill offers public programs in horticulture such as lectures, gardening walks, workshops, internships, excursions in nature, beekeeping, and engagement opportunities designed for young children and the whole family. Environmental education is offered throughout programming; school programs and a rigorous woodland management summer internship called *Forest Project* are examples of offerings to local students and teachers.

Programming in the visual and performing arts includes artist residencies, workshops and exhibitions of diverse artworks in the Glyndor Gallery, concert series, and other site-based performances relating to festivals and seasonal events.

Recently, Wave Hill has incorporated wellness offerings into its public programming, including seasonal restorative Hatha Yoga and Tai Chi Chuan offered outdoors, overlooking the Hudson River and Palisades. Such programming places greater emphasis on the institution's natural potential as a restorative space, as well as its ability to provide public resources for healing (Silverman, 2010). In addition to the restorative experience of simply visiting the grounds, *The Olive Branch Program* recognizes the benefits of incorporating restorative yoga and carefully designed on-site art and nature-based activities during the annual survivors' retreat. Engagements such as guided and independent nature walks, guided journaling (both writing and sketching), creation of visual narratives documenting change and renewal, and collaborative artworks
using transformative organic material offer both introspective and social experiences that support restoration (Bond and Packer, 2010).

In order to reach women survivors of sexual assault and effectively address the long-term issues associated with trauma during their retreat experience, The Olive Branch Program relies on a dynamic interdisciplinary partnership between the hosting cultural institution and the Crime Victims Treatment Center (CVTC). This type of collaboration not only serves to connect women to a cultural resource they may not access otherwise, it would also support the institution's ongoing professional development, addressing issues of equity and accessibility to all visitors.

By aiding the growing number of women in New York City who must navigate life in the aftermath of sexual assault-related trauma, nature-based cultural institutions such as Wave Hill demonstrate their inherent capacity to provide direct social service and address relevant societal conditions. Silverman suggests that while they have traditionally "viewed their work with people at risk as outreach, 'special' programming, or otherwise nonessential, it is clear that such work is fundamental to museums' social service. . . understanding the best methods and approaches for doing so is critical work for the future" (p.142, 2010). This study seeks to address this critical work by identifying some of the best methods and approaches to supporting survivors of sexual assault-related trauma through a restorative art and nature-based wellness program.
LITERATURE REVIEW

Terminology

Throughout this study, the word *survivor* will be used in lieu of *victim* in order to validate the strength of the person, recognize the long-term implications of the criminal act that has been committed against them, and at the same time, focus on their ability to recover from the trauma. In accordance with the definition provided by the Center for Disease Control, sexual violence refers to “sexual activity where consent is not obtained or freely given” (2011). For the purpose of this study, survivor participants were selected based on self-disclosure of and/or therapists’ knowledge of their personal history of sexual violence or assault, either as survivors of childhood sexual abuse or rape. Survivor participants were not given a set definition of sexual violence or sexual assault prior to being interviewed, rather, their self-identification as a survivor was honored, and self-defined meaning of the term was assumed.

Prevalence of Sexual Assault

According to the United Nations, “Violence against women is not confined to a specific culture, region or country, or to particular groups of women within a society. The roots of violence against women lie in historically unequal power relations between men and women, and persistent discrimination against women” (2008). UN Secretary General states, “Violence against women and girls continues unabated in every continent, country and culture. It takes a devastating toll on women’s lives, on their families and on society as a whole.” The United Nation’s Fund for Women (UNIFEM) calls for the investment of resources and for consistent assistance to women survivors of violence, stating, ”a more cohesive and strategic approach is needed from all actors, including governments,
the international community and civil society" (2008). The Center for Disease Control 
and Prevention (CDC) cites sexual violence against women in particular “a global human 
rights injustice of vast proportions with severe health and social consequences both over 
the long and short term” (2011).

While violence against women in all forms is an unacceptable violation of human 
dignity that must be addressed on a global scale, this study places emphasis on the 
prevalence of sexual assault against women nationwide and in particular, in New York 
City. The prevention of sexual assault in our city should be at the forefront of 
conversations, but educating our communities about the issue of sexual violence from 
those who have survived it is a critical first step. Using a survivor-centered approach in 
both the research and presentation of this topic, this study seeks to counter the pervasive 
silencing of sexual assault and shed light on the darkness that surrounds the lived 
experience of women who have survived the trauma in our local community.

The survivor participants who so bravely disclosed their stories and contributed 
insight to this study represent a small fraction of the estimated 1.3 million women 
survivors of sexual assault living in New York City (New York Alliance Against Sexual 
Assault, 2011). In 2011 alone, the prevalence of sexual violence in New York City left 
an estimated 22,000 women to navigate the devastating aftermath of rape and painful 
path toward recovery (New York City Alliance Against Sexual Assault, 2011). Although 
the statistics are daunting, available data greatly underestimates the true magnitude of the 
problem as sexual assault is one of the most underreported crimes. The New York City 
Alliance Against Sexual Assault reports that nationwide approximately 84% of rapes are 
not reported (2011).
Sexual assault may go unreported for many months or even years due to the social stigma attached to it; fear of being blamed, self-blame, and the wide range of reactions women may experience post-trauma. Though it is important to note that there is no one pattern of response, many women report feeling shock, confusion, denial, numbness, shame, guilt, sadness, anxiety, anger, hyper-arousal and hyper-vigilance; experiencing long term effects such as depression, social problems, sexual dysfunction, eating disorders, sleep disturbance, nightmares, flashbacks, chronic pain, substance abuse, suicidal feelings and/or attempts and posttraumatic stress disorder (PTSD), which is characterized by debilitating symptoms lasting over six months (National Center for PTSD, 2013). In a country where it is estimated that a sexual assault occurs every two minutes (Rape, Abuse & Incest National Network, 2006), there is an urgent need to increase community resources available to support recovery from sexual assault-related trauma.

**Stages of Trauma Recovery**

In 2007 the New York City Alliance Against Sexual Assault conducted the first ever city-wide research report including the survivor perspective and evaluation of services available in the aftermath of sexual assault. The report entitled “A Room of Our Own: Sexual Assault Survivors Evaluate Services” provided the following recommendations from survivors: offering referrals from rape crisis to other support services, offering counseling support over the long term, more opportunities to engage in group therapy, and the offering of services free of charge (2007). Although the evaluative data was based primarily on survivors’ experiences in the immediate aftermath of the assault with “first responders” (law enforcement, hospitals, crisis counselors) and
the criminal justice system, the results of the report speak to survivors’ need for services that support trauma recovery over the long term.

The necessity of support services not only in the immediate aftermath of sexual assault, but over the long-term trajectory of survivors' lives is affirmed by trauma expert Dr. Judith Herman's explanation of the stages of trauma recovery. According to Herman, the fundamental stages of recovery are "establishing safety, reconstructing the trauma story, and restoring the connection between survivors and their community" (1992, p.3). Although no single course of recovery can be expected to follow the identified stages through a straightforward linear sequence, Herman suggests it is possible to recognize “a gradual shift from unpredictable danger to reliable safety, from dissociated trauma to acknowledged memory, and from stigmatized isolation to restored social connection” (1992, p.155). From safety to reconnection, Wave Hill and the proposed Olive Branch Program could potentially offer “service across circumstances” (Silverman, 2010, p.142) in the form of support to survivors of sexual assault-related trauma during each stage of recovery.

The central task in the first generalized stage of recovery, establishing safety, takes precedence over all others, as it must be adequately secured before other therapeutic work can succeed (Herman, 1992). Establishing safety not only includes attending to self-care and control of the body, but also in securing refuge. For survivors of a single acute trauma, Herman suggests that a rudimentary sense of safety can be restored within a matter of weeks if adequate social support is available. Crisis intervention or psychotherapy treatment that focuses on empowerment of the survivor can hasten the relief of symptoms. However, Herman argues, the process of establishing safety may be
stymied altogether if the survivor encounters “a hostile or unprotective environment” (1992, p.165). Arguably, the therapeutic task of the first stage of recovery can be complemented by an established sense of security in the survivor’s immediate environment and additional protective spaces of respite, such as Wave Hill's natural yet protected gardens and grounds.

The maintenance of safety and security is of upmost importance during the second stage of recovery, reconstructing the trauma story. The preservation of safety must be balanced constantly against the need to face the past as the survivor embarks on the ambitious work of summoning her painful memories and telling her story (Herman, 1992). Often, reconstruction of the trauma is so emotionally and physically demanding that it requires slackening of ordinary life demands, and according to Herman some “‘tolerance for the state of being ill’” (1992, p.176). Through carefully timed and planned therapeutic treatment, Herman explains:

The therapist must help the patient move back and forth in time, from her protected anchorage in the present to immersion in the past, so that she can simultaneously re-experience the feelings in all their intensity while holding on to the sense of safe connection that was destroyed in the traumatic moment (1992, p. 178).

During this intense treatment period, survivors may find the peaceful escape of a natural setting such as Wave Hill ideal for reflecting, recharging and renewing energy following a therapy session, for example. The experience of restoration, defined as "the process of renewing physical, psychological and social capabilities diminished in ongoing efforts to meet adaptive demands" (Bond and Packer, 2010, p.422) has been positively correlated with natural environments (Hartig, 2004). Peter Kahn's book The
Human Relationship with Nature points to the findings of over one hundred studies that confirm that one of the main benefits of spending time in nature is stress reduction (Louv, 2008).

Regular access to natural environments that provide a space for reflection as well as positive social engagement can be especially important during the third and final stage of trauma recovery, known as reconnection. This stage is a marked time for reclaiming the self that has undergone change as a result of the trauma. Herman writes, "...while in the first stage the goal was simply to secure a defensive position of basic safety, by the third stage the survivor is ready to engage more actively in the world" (1992, p.197)..."her task now is to become the person she wants to be" (1992, p.202). The survivor undergoes a reconstruction of self, Herman suggests, both ideally and in actuality through the active exercise of imagination and fantasy, capacities that have now been liberated (1992). The writings of Maxine Greene remind us of the role of imagination in the process of reconstruction:

Imagination may be viewed as a passion for possibility; the possibility of replacing the blue tents with houses; the possibility of rebuilding the levees, of nurturing and teaching all the children, wherever they are; of enabling those in futile quests of certainty to envisage horizons—horizons to be sought as persons come together in the light of incompleteness. This is where the effort to achieve freedom begins—freedom as the opening of spaces in which choices can be made and action undertaken. Thoughtfulness, imagination, encounters with the arts and sciences from the grounds of lived life: this is the beginning and the opening to what might be (2006, pp.1-2).
Opening survivors' hearts and minds to the possibilities of a healthier life through thoughtfulness, imagination, and encounters with the arts and sciences is precisely what the proposed Wellness Day component of the *Olive Branch Program* seeks to achieve. A full day's program especially designed for survivors would invite participants to engage in restorative art and nature-based activities in a group setting. The proposed wellness program incorporating nature walks, gardening, restorative yoga, and both collaborative and individual art making projects reflects a holistic approach to healing using multiple modalities in a group setting (Bein, 2011).

Because traumatized people feel so alienated by their experience, survivor groups have a special place in the recovery process. Although deemed inappropriate for most survivors in the initial phases of recovery, group engagement becomes highly important by the reconnection stage. Herman suggests that the restoration of social bonds begins with the discovery that one is not alone. Nowhere is this experience more immediate, powerful, or convincing than in a group (1992). Access to a local sexual assault survivors group program in a natural setting during the final stage of recovery not only provides survivors with needed opportunities to restore social bonds, but offers the possibility of a mind, body, and soul reconnection; experiencing life in nature and life in their own bodies, as it could be otherwise (Greene, 2006).

Even as the survivor approaches resolution with a renewed sense of self and hope for her future, she is not necessarily free from lasting psychosocial impact from the trauma. Herman ascertains, "resolution of the trauma is never final; recovery is never complete. The impact of a traumatic event continues to reverberate throughout the survivor's lifecycle" (1992, p.210). As the survivor reaches new milestones in her
development--such as marriage or divorce, a birth or death in the family, illness or retirement--issues that were sufficiently resolved at one stage of recovery may be reawakened (Herman, 1992). The prevalence of posttraumatic stress disorder (PTSD) amongst survivors of sexual assault, who are considered the most at-risk population for PTSD (NCDTSD, 2008), and other lasting psychosocial impairments that 67% of trauma survivors suffer (Levine, 2005), can further compound the healing process.

Because resolution of the trauma is a lifelong process for most, trauma survivors benefit from ongoing self-reflection, self-care, and wellness practice. Herman offers, “Though the survivor is not responsible for the injury that was done to her, she is responsible for her recovery…the only way that the survivor can take full control of her recovery is to take responsibility for it” (1992, p.193). Part of our social responsibility is to ensure that the support and resources survivors need to recover are available to them over the long term. Although the methods used to support survivors of sexual assault throughout their recovery are varied, at the core of therapeutic practice is the belief that individual and community empowerment is the foundation for healing. Cultural institutions such as Wave Hill can create conditions for empowerment by supporting survivors' safety and healing throughout their recovery process.

**Complementary Therapies**

In recent years, therapeutic treatment services for survivors of sexual assault related-trauma have increasingly incorporated, or at least made available access to holistic healing practices such as yoga, meditation, Somatic Experiencing (SE), brain spotting, Eye Movement Desensitization and Reprocessing (EMDR) and art, music, dance, and horticultural therapy. Within a holistic health framework, multiple modalities
can be employed to access physical, mental, spiritual and social wellbeing. A holistic approach to trauma recovery maintains that motion and memory live in the body as well as the brain, and these techniques help to access, heal, and empower the whole person (Bein, 2011).

Just as sound pedagogical approaches to teaching and learning employ the use of multiple modalities to increase accessibility for all learners; practitioners in the field of trauma recovery also increase their ability to effectively attend to the diverse needs of clients by offering complementary therapies. Certain therapeutic practices may be offered simultaneously or in addition to traditional psychotherapy, depending on the individual needs, level of comfort and expressed interests of the trauma survivor. Alternatively, many survivors seek out alternatives to traditional psychotherapy or "talk therapy" throughout the stages of recovery, often, in pursuit of their own personal wellness practice. Of alternative therapies, Bein offers, "these techniques teach us—survivors and advocates alike—to connect to the body and soul in positive, nourishing ways" (2011, p.9).

**Horticultural Therapy**

*I go to nature to be soothed and healed, and to have my senses put in tune once more.*

- John Burroughs

Scientist Edward O. Wilson's theory of biophilia, the notion that humans have an innate affinity for the natural world, is supported by a widening circle of researchers who argue that exposure to nature affects our health at an almost cellular level (Louv, 2008). The idea that people respond positively to plants, flowers, open skies, grassy landscapes, lush woods or scattered stands of trees, meadows, water, winding trails and elevated
views; and that natural landscapes and gardens can be therapeutic is in fact, an ancient one that has filtered down through the ages. Horticultural Therapy (HT) is an approach that dates back to physician records of ancient Egypt, and has been used in mental health, convalescent and hospital settings for centuries to support the recovery and rehabilitation of patients (American Horticultural Therapy Association, 2013).

Horticultural therapy facilitates interactions with the healing elements of nature in a plant-dominated environment. Purposefully designed interactions can be passive or active depending on the garden design and users’ needs. Activities are generally season specific, such as propagation and planting in the spring, care and weeding in the summer, and harvesting in the fall. When weather does not permit, indoor activities are utilized, such as floral design and nature crafts, planting terrariums or cultivating house plants. HT is recognized as a beneficial therapeutic modality that has been used effectively with survivors of trauma in a variety of one-on-one and group settings to enhance mental, emotional and physical well-being (American Horticultural Therapy Association, 2013).

**Art Therapy**

_Those who contemplate the beauty of the earth find reserves of strength that will endure as long as life lasts._

-Rachel Carson

The practice of art therapy rests on the belief that the creative process involved in the making of art is healing and life enhancing. Research supports the use of art therapy for individuals who have survived trauma for the therapeutic benefits gained through artistic self-expression and reflection (American Art Therapy Association, 2013). For survivors of sexual assault-related trauma specifically, art therapy can provide a safe
format to express and process suppressed thoughts and feelings through a variety of non-threatening art media.

Similar to the process that is undergone during the second stage of recovery as the survivor's painful story is reconstructed and voiced, creative expression can be a vehicle for the cathartic release of pain, as well as a calming resolution to emotional dissonance. Herman argues that the visual nature of traumatic memories makes nonverbal methods of communication such as drawing or painting an especially effective method for survivors in the reconstruction of their story (1992). The expression and integration of unacknowledged feelings is certainly highlighted during the second stage of recovery, but beneficial throughout the recovery process as it helps to integrate and honor the whole self.

Engaging in creative expression through art making can create a space to honor whatever needs to emerge in the moment—whatever it may look like, whether it makes sense or not. Tina Wright, a fellow trauma survivor and graduate of Leadership in Technology and the Arts at Bank Street College, speaks to the benefits of impulsive artistic expressions in her 1992 thesis, Soil of my Growth: The Healing Power of Drawing for Victims of Violence, "Spontaneous images created out of an instinctive impulse can have a considerable therapeutic effect toward an individual's self-healing" (p.11). Tina's drawings served not only as an outlet for emotional expression but also provided a way for her to document emotional growth and personal transformation throughout the recovery process.

Dr. Nobel of the Foundation for Art and Healing affirms that the practice of using art for the healing of individuals and society is at least four thousand years old. However,
he argues that there are ways of making it available to people as well as to evaluate how it works on a more rigorous scientific basis (2010). In a survey of available research on the efficacy of using multiple artistic modalities in healing work, Dr. Nobel found that many creative activities contribute to a common set of physical, emotional, cognitive, social and spiritual gains. According to Nobel, visual expression in particular, has been linked to enhanced self-worth and identity through achievement, reduced stress, increased positive emotions, and decreased markers of emotional distress (2010).

In the Joyful Heart Foundation publication *Reunion*, intended to connect trauma survivors and practitioners through issues relating to healing, Dr. Nobel summarizes the major benefits of creative expression through art as follows:

> Art allows you to do three things, and this is where the healing comes from. Art puts you in the moment, puts you in touch with yourself and allows you to bring forth something that did not exist before. And those three things taken together are incredibly powerful in terms of adjusting your understanding of yourself, your relationship to yourself, your relationship to the world and your sense about possibilities for the future (Sims, 2012, p.23).

Creating a visual artwork can be the first step in making something that seems impossible, visible and tangible. In this way, it holds the potential of inspiring a sense of possibility for the future, which is another primary task during the final stage of recovery.

The potential for survivors to be inspired by the creative process either individually or collectively and gain a new sense of possibility for their future connects to what Greene describes as the having of an "aesthetic experience" (2001)--one in which the senses are operating at their peak, calling you to be fully present and resonating with
excitement; when you feel fully alive. The therapeutic support of a facilitated group engagement, the rich sensory experiences offered through planned art making and horticultural activities and the breathtaking natural surroundings of Wave Hill combine to create fertile grounds for the having of not only a restorative experience through the proposed Olive Branch Program, but an aesthetic experience as well.
INTERVIEWS

Methodology

The research for this study was conducted independently, as a student researcher, under the guidance of my independent study mentor at Bank Street College of Education and supported by trauma therapists at St Luke/Roosevelt Hospital's Crime Victim's Treatment Center in New York City. Using an informal interview method with guiding questions, the two trauma therapists were asked to speak about their experience working with survivors of sexual assault—survivors of childhood sexual abuse and/or rape—within the context of therapeutic practices used to support recovery. The therapists helped to identify two clients to be interviewed (with no previously established relationship to me) in addition to the two survivors I approached, who agreed to participate based on an established relationship of trust developed through our mutual participation in a therapeutic survivors group.

While conducting one-on-one informal interviews with guiding questions and a survey component, four women survivors of sexual assault-related trauma, ages 34-52 were asked about their experience post-trauma, their experience with different forms of therapy and activities designed to support recovery, and their satisfaction with art and nature-based restorative activities. Interviews with survivors were recorded, transcribed and coded for themes. Common themes from the interviews informed the direction of my study and final recommendations for the proposed Olive Branch Program. The summary profiles, however, reflect the variance in voice and experience, and the unique pathway toward recovery of each woman.
The four survivor participants are not presented as representative of New York City's sexual assault survivors' community; rather, their contributions are intended to provide insight and understanding of the possible experiences of women survivors in our community who have sought treatment. The strength of interviewing as a method of qualitative research is that we can come to understand details of people's experience from their point of view. In collecting and presenting the experiences and perspectives of local women survivors of sexual assault-related trauma, this study invites readers to both begin to understand the factors that influence pathways to recovery and bear witness to survivors' stories.

**Voices from the Field**

In March of 2013 Louise Kindley, LCSW and Sally Clayton, Complementary Therapist with Crime Victims Treatment Center (CVTC) at St. Luke's/Roosevelt Hospital sat down together to interview, offering their clinical expertise on therapeutic treatment of survivors of sexual violence and providing insight on the varied pathways to recovery. Both of the therapists came to the conversation with extensive experience and knowledge of trauma recovery, having 18 combined years of experience in advocacy work, and 32 additional combined years of experience practicing in their present roles at CVTC. Through our conversation, the dynamic therapeutic team drew salient connections between the essence of trauma recovery work and proposed offerings of the Olive Branch Program. Louise initiated the dialogue, providing a perspective from which to view the impact of sexual assault and sexual abuse on survivors' lives if they do, in fact, seek help:

*It is something that changes a person's life. It changes the course of your life.*

*You're not going to be the same person that you were before it happened. It may*
be better by the way...your life actually may be richer because you had to do this work. I truly believe that.

Sally offered:

And because you've gone through the therapy you then are aware of other things that happen in your life and how they may affect you. You're more aware of your feelings and the reality of what's happening in yourself...but it is such an individualized process. It's so hard to quantify how people are affected by the trauma because it affects everybody differently. Yet it's undeniable that there is an affect and people do change as a result.

When asked about when and where the offering of alternative therapies is appropriate in the trauma recovery process Louise suggested:

I would say it is appropriate for anyone who is interested and probably, at any point during recovery...but it all comes down to the practitioner, and that's true for talk therapy, too. For example, there are certain techniques and deeper alternative therapies that you would never use for some people in the beginning because they would be too intense.

Sally affirmed:

That's true. The work that I do does not look the same for any two people. The work evolves based on where people are in their healing process and what they come into the room with, week by week...it's about building a relationship with a person. You start to get a sense of what people might be comfortable with and what might be more solvent for them...
In a group setting like what you're describing, depending on the organization of the group and the guidelines you set up, experiences in nature—going on a mini-vision quest for example—and then coming together to talk about the experience afterwards, I think would be appropriate for just about anybody, don't you?

Louise responded:

Yes, and I'd assume you're talking about other activities, too—like yoga and art making—and I think the most important part, always, is that everything is by choice, nothing is compulsory. If people choose to participate they can and if they choose not to participate, they don't have to...and I think it's important that there is a trained professional or team of professionals available to counsel if someone needs to talk...and certainly in a setting like Wave Hill, you could come up with all kinds of interesting projects having to do with people's experiences in the natural surroundings...

Louise added:

There are also things that just can't really be expressed in words, where movement, or art, or certainly, getting your hands in dirt—whatever connects you to the current moment, whether it's a smell, sound, sight or touch—is the deepest kind of healing, I think. It then has to be organized. That's what talk therapy is about...or writing. There's a lot of research that shows that writing or journaling is every bit as effective as talk therapy as an organizing process. What you don't get with writing, however, is the relationship, validation and support that talk therapy provides.

In response to the proposed Olive Branch Program Louise commented:
I love transformation and renewal as a theme--that really resonates so powerfully, because that's what this therapy really is all about.

Sally concludes:

And connection...because really, we are a part of nature. Human beings are a part of nature, so this notion of people having a traumatic experience and feeling disconnected from themselves--there's also the disconnection with nature, with your own natural environment. So to reconnect to nature is in a way to reconnect back to yourself...Being in nature has a way of bringing a person into the present moment. So much of the effects of trauma are either about being sucked back into the trauma, or being pulled off into the future where you're worrying about either the same thing or something worse happening again. Being in that kind of environment has a way a bringing a person back into the present, to live in the moment.

Just as Bein suggests that certain alternative techniques to traditional talk therapy help to access, heal, and empower the whole person (2010), Sally and Louise confirmed the importance of offering survivors access to various alternative therapies over the course of their recovery. The therapists spoke of the effectiveness of a rich, but positive sensory experience in bringing a survivor of trauma into the present in order to connect with their feelings and needs. They described the importance of “grounding”, or learning to become and stay present in your body in the here and now, as a way to help survivors manage dissociation and the overwhelming trauma-related emotions that lead to it, and related the impact physical contact with the natural ground, the actual earth, can have towards this end. While they noted that the group engagement of the proposed Wellness
Day would not necessarily be appropriate for someone who is just beginning the recovery process, overall, the therapists affirmed the need for and the appropriateness of a program like the proposed *Olive Branch Program* throughout the stages of recovery for local women who have survived sexual assault.

At the close of the interview, Sally and Louise spoke to the general disbelief in the effectiveness of therapy and society's overall lack of hope for recovery after trauma. In *Creating a Healing Society*, Dr. Susan Lawrence concurs:

Our culture is often uncomfortable directly confronting the more distressing aspects of human existence, such as trauma, grief and death. Through societal peer pressure, we are encouraged to 'move on,' 'get over it,' take prescription medications, or employ socially acceptable forms of distraction, such as materialism, television, video games, and superficial relationships.

Unfortunately, these measures are simply not effective. Until we work through and gain power over our traumatic experiences, we are compelled, by the very nature of our humanity, to express our pain through the unconscious process of traumatic re-enactment, using the symbolic language of anti-social and self-destructive behaviors (2006, p.15).

In the following passages, four brave women reveal the challenges and triumphs they experienced as a result of directly confronting an aspect of human existence that is not only distressing but so heavily stigmatized, it is often dismissed altogether. Layla, Marisol, Nancy, and Patricia (names have been changed to respect the confidentiality of the participants), each a survivor of sexual assault-related trauma, share their experiences and insight on activities that support recovery.
Voices of Strength, Voices of Survival

History, despite its wrenching pain, cannot be unlived; however, if faced with courage, it need not be lived again.

-Maya Angelou

Layla, age 34

I was hesitant to go to a program after the last assault, in 2009...but I had previously been assaulted when I was 18--that was in 1997, so I figured it was about time to get help. The second one was giving me a lot of problems, because it was pulling up stuff that happened before. So I contacted them (support services through two organizations). The first assault I was so ashamed about, but this one I'm not as ashamed by because I think through getting therapy I know it's not my fault. I didn't do anything for this to happen. If somebody asks me about it, I don't feel ashamed to tell them about what happened to me.

It helps that I have always been very into art and writing poetry. When I went on a retreat (through a national organization), they helped me use those (art and poetry) as resources to express what I was going through and express the process of healing, which has been very useful. It was actually after an art show that it (the assault) happened, so afterwards, I didn't want to do my art anymore...it brought back everything that had to do with that day. It was very hard in the beginning to get back into making art and poetry, but I'm glad they helped me return to it. I had an art show in 2010 that embodied everything that related to the rape. The writing helped too. Reading my poems, being able to speak out about it
in public to other people; to tell other people you're not alone and then tell my story was very helpful.

The friends that I made during the survivors' retreat form a nice connection, because you always know that you share those roots with those people, and if you ever need anything, you can reach out to them knowing that the people from those groups, they're not going to judge you...they're very separate from everybody else. And you don't even have to say anything sometimes...you just know that they know. Even something as simple as the anniversary of the assault, the time of year, the weather, whatever it is, it can be a trigger. When I'm going through it, I know that someone else is going through it too...and I can reach out to her and be there for her, and she will be there for me. The women that I've met at groups provide that kind of safe support.

Marisol, age 36

I was raped in college, in 1997, and again in 2001, four years later. Initially, I sought counseling through the campus Women's Center, then a group "Circle of Survivors." I also remember being involved in "Take Back the Night" programs. Over the years, there have absolutely been long term effects of sexual assault...the lack of trust in relationships with men is a huge issue; it can change the relationship to sex, period, like consenting to avoid non-consent. I can be triggered by rape scenes or others' stories of rape. Overall, I've experienced patterns of disconnectedness from self—general disconnectedness from mind, body, and soul.
Individual talk therapy has been really helpful to me...but also group activities like (national organization) have created a safe space and outlets for expression around the rape. They helped me incorporate creative activities into my healing. I would say though that journaling has saved me...when I'm able to get clarity of thought. For a long time I wrote very disconnected...I was writing as a journalist. It's a very different process to mine your insides. Journaling is one of the most effective activities for me—to lift the pain.

Along with journaling, I've tried meditation and running in terms of my consistent practices around supporting myself. Getting out of the concrete jungle for even an hour helps to reduce stress. Sometimes I'll go running through the park and find a quiet spot for prayer and meditation underneath a tree. I would say that through these means I've learned maintenance recovery, but I think I'll have to commit to it (recovery) for the rest of my life.

Nancy, age 39

The sexual abuse I experienced from the time I was 6 or 7 until I was 18 was hidden for a period of 30 years until I disclosed for the first time to my husband, just two years ago. I guess I was in denial, or had repressed it...I suffered a lot of things that were consequences of the abuse—I still have nightmares, I was often sick as a child, I used to stutter for a long time, I had fears of being alone, fears of the darkness, I battled severe depression, anxiety, panic attacks, disconnected memories, dissociation, PTSD...at one point, a psychiatrist gave me medication for depression. I took the prescription and closed the door and said to myself: "I am going to change this"...
I do outreach work with families who have young children. So one day, I attended a professional training on trauma during childhood, with a facilitator from Bank Street, in fact. During the training she asked us to create an artwork relating to childhood. I didn't think about what I was making. I just went with my feelings and ended up with a very powerful, dark work. I created an image of a child like this (demonstrates) that was being silenced with hands covering the mouth. I realized there was something there that I needed to uncover. I realized I connected with the young children we were talking about because I was traumatized as well. I thought maybe art therapy will help me work through it, so I called an art therapy group. They referred me to CVTC for individual therapy as a first step before going to them, so I now attend individual therapy twice a week. I'm also back with the art therapy group now and I have discovered a lot about myself through art. I have to accept darkness and sadness, but through art I find I can express my feelings in a healthy way. Even though it's difficult, it's very healing. Other activities that have helped me in recovery include reading a lot of self-help books and doing a lot of information gathering about the disorders, meditation and tapping techniques, and yoga. Yoga is so important because it allows you to be connected with your body again. In my case, I was divided body, spirit and mind. They were not together.

But I think spirituality and faith in God are the most important for me. Being faithful about healing has helped most. Faith has helped me through the trials. I remind myself, "You have the right to be healed and God will help you heal...as survivors, we have the right to heal and not carry this burden on our shoulders
forever. How long will it take? It's very difficult to say. It's a process, and it depends on each person—but also the support of your environment.

Patricia, age 52

20 years after enduring childhood abuse by my caregiver, it was recommended that I seek the help of a psychiatrist for talk therapy. The abuse has had long term effects on me, bringing about issues with memory—an element of PTSD—the constant running of a memory, feelings of worthlessness, confusion of self, and a deep underlying interruption of development as a child. Initially, I would say I sought out "support therapy" through friends. Finding the right people to talk with is the first step to recovery, otherwise, there's no hope. After countless experiences with ineffective, ill equipped therapists, I came to CVTC, where the support is knowledgeable and committed. I can say the level of quality is very unique...very rare.

Support, however, doesn't come only with a body—it has to be complemented with an environment. We need an environment for the invisibly disabled—our disability is not a visible one—it is emotional, mental, and spiritual. Those of us who need to heal, and that is nearly all of us, represent the "one"—what we share is the same—it's the same cry, the same song of those who've suffered. The healing environment MUST be safe, and nature offers the safest, trusting place for any victim. In nature you feel the peace—it is the safest place for healing. No medicine, no pharmacy can bottle what nature offers—the universe bottles that.
These voices of survival and strength speak to the human capacity to heal and offer a tremendous sense of hope for recovery from trauma. Common threads throughout the interviews included: the unanimous acknowledgement of the long term effects of trauma, and therefore, lifetime pursuit of recovery and wellness that survivors face; the acknowledgement of experiencing a “mind-body-spirit” disconnection and the importance of activities that support reconnection (such as yoga), and the importance of complementary therapies in addition to, not in lieu of talk therapy—which was noted during each interview as the most, or one of the most helpful elements in support of their recovery.

In addition to responding to the guiding questions that framed the interviews, survivors rated their satisfaction with nature and art-based activities intended to support recovery (see Appendix A), which they experienced in different capacities—both individually, and in therapeutic group settings—on a scale of 1 (where 1=unsatisfactory, not helpful, not enjoyable) to 10 (where 10=completely satisfying, very helpful and enjoyable). A total of five survivors (all four interviewees, and an additional survivor who offered insight through the scaled survey) noted at least one experience in nature (i.e. hiking in the woods, bird watching, swimming with dolphins, jogging through a wooded park, and being surrounded by trees while contemplating the stars/sky) as a “10”—a completely satisfying, helpful, and enjoyable restorative activity. Only one survivor noted that the natural surroundings would also need to be private and protected in order to feel safe during the nature-based activity. Four of the five survey respondents commented that simply being in nature allows them “to feel free.”
In response to art-based activities intended to support recovery, the scaled survey results varied considerably based on the specific art-making engagement. A total of three survivors noted having experience with art-based therapeutic activities. Of them, two gave individual and group painting and drawing a “10”—citing it as relaxing and “a release”, while one survivor rated individual and collective painting and drawing activities a “2”—citing them as “least favorite media.” All three survivors with art-based therapeutic experiences rated individual and group collage a “10”—noting the variety and flexibility of expressive media (words, pre-printed images, etc.) it calls to use. In addition to collage, all three survivors who offered insight on helpful art-based therapeutic activities noted craft (such as mosaic, bead-stringing/mala-making, or paper-making) as highly satisfying, providing ratings from 8-10, noting primarily, the enjoyment of transforming material and the “satisfaction in the process of making something complete from broken pieces.”

While conclusive results cannot be drawn from such a small sample, important insights can be gleaned from the scaled survey results, together with the voices of both therapists and survivors. The information gathered through the interviews not only affirms what research suggests—that nature and art-based activities can have restorative effects on survivors of trauma— but it also speaks to the great variety that exists in personal preference and comfort level amongst survivors. The trauma therapists and trauma survivors who contributed to this small study make clear the importance of offering a variety of therapeutic modalities within a holistic health framework to complement ongoing group or individual therapeutic treatment.
PROGRAM PROPOSAL

The survivors spoke honestly about the pain and challenges they’ve experienced, and eloquently about their pursuit of life in the aftermath of trauma. With the collective recommendations of the survivors and therapists interviewed for this study in addition to the information gathered from a comprehensive review of related literature highlighting the restorative capacities of nature and art, the proposed Olive Branch Program seeks to provide an adjunct to individual and/or group therapeutic treatment, and support the recovery of survivors of trauma through the following:

• Membership to a nature-based cultural institution (such as Wave Hill) for identified survivors of sexual assault-related trauma (participants recommended by collaborative partners at CVTC), free of charge—allowing access to grounds and regularly scheduled programming.

• Special orientation to the grounds (including transportation to/from) and offerings of the nature-based cultural institution led by trauma-informed staff members, and special invitation to participate in the annual survivors’ retreat/Wellness Day.

• Survivors' retreat/Wellness Day offered on-site. Offerings include a welcome breakfast, introduction to the day and facilitators (including team of at least two therapists from CVTC, trained Wave Hill staff members, trauma-informed yoga instructor, art therapist and horticultural therapist). Introduction will also include orientation of the “Wellness Room”—a space that can be utilized throughout the day for an alternate activity, relaxation, or reflection.
should a participant need a break from the group engagement.

As suggested by experienced therapists and affirmed by survivors, scheduled activities during Wellness Day are optional, never compulsory, and could include a selection of the following:

- Guided tour of grounds
- Gentle, trauma-informed yoga including postures, breathing exercises, concentration and meditation (if at Wave Hill, overlooking the Hudson River)
- Nourishing lunch and tea
- Individual nature walk on grounds and vision quest activity
- Guided journaling
- Outdoor horticultural activity (based on season—either propagating, planting or harvesting)
- Collaborative art-making (multi-media collage, organic material collage, paper-making or felt-making)
- Take-home horticultural activity (building a terrarium, or selecting and preparing a house plant)
- Individual art-making, journal writing, or expression of choice documenting process of change or renewal witnessed or experienced during the day

The suggested offering of complimentary annual membership to those survivors identified by the partnering organization would allow access to service across circumstance (Silverman, 2010) or throughout the stages of recovery, through passive exposure to the restorative qualities of the natural environment (American Horticultural
Therapy Association, 2013). The direct activities proposed for the purpose of the survivors' retreat day reflect those considered most effective of the alternative or complementary therapeutic offerings cited by therapists and survivors during their interviews and are informed by the ratings they provided on the scaled survey.

The proposed activities are supported by empirical findings presented in this study, citing the effectiveness of visual art making and both passive and direct horticultural activities in supporting healing from trauma. But ultimately, the selection and design of survivor-centered, trauma-informed program activities to be carried out during the proposed Olive Branch Program's Wellness Day would reflect the particular offerings and strengths of the site as well as the collaborative planning efforts of the interdisciplinary team: the cultural institution's selected staff members, trauma therapists and specialists.

Therapeutic team members might also have their own session at the cultural institution to provide information and insight into the therapeutic benefits of the space; encouraging their participation as stakeholders not only in the proposed Olive Branch Program, but the institution at large. Ongoing collaboration with therapeutic staff in centers can support the development of the cultural institution’s staff and the ultimate success of the annual Wellness Day. In addition, informed and invested therapists can provide ongoing encouragement for their clients to visit the cultural institution on their own throughout the year.
CONCLUSION

The therapists at CVTC and trauma experts Dr. Judith Herman and Dr. Susan Lawrence all speak to the trauma survivors’ capacity to heal and improve their quality of life. Recognizing the devastating impact of human emotional pain, Dr. Lawrence views trauma as the root cause of societal and world problems. With healthy support, she argues, traumatized people possess the ability to transform their pain into power in some form or another, effectively turning their lives around, and in doing so change the quality of life of our entire society (2001).

Though each story is unique, the survivors’ messages gathered for the purpose of this study resound with a tenacity of spirit and determination to move from survive to thrive. The word “thrive” is synonymous with “flourish” and “blossom”. In adopting the proposed Olive Branch Program, nature-based cultural institutions can effectively use their natural resources, especially those flourishing and blossoming in abundance on their very grounds, for the restorative capacities they possess. Specifically, with a basic offering of membership to identified members of our community who are in need, institutions can “foster more caring cultures by providing direct social service and addressing relevant societal conditions” (Silverman, 2010, p.145).

Silverman suggests that museums and cultural institutions can provide resources, settings and opportunities that are useful and beneficial to various fields, such as psychotherapy and clinical work, and in return, these collaborative partners add rich new dimensions to the social work of the cultural institutions (2010). In conceptualizing a partnership in action between a local nature-based cultural institution and a team of social workers and therapists, such as those represented from CVTC, I hope to have applied
what I have gathered as both socially relevant and innovative practice in the field of museum education at Bank Street College of Education.

Finally, in researching a topic so personally meaningful and collecting the experiences of other survivors of sexual assault, I am grateful for the opportunity to approach this body of work as my survivor’s mission. Herman offers:

Most survivors seek the resolution of their traumatic experience within the confines of their personal lives. But a significant minority, as a result of the trauma, feel called upon to engage in a wider world. These survivors recognize a political or spiritual dimension in their misfortune and discover that they can transform the meaning of their personal tragedy by making it the basis for social action. While there is no way to compensate for an atrocity, there is a way to transcend it, by making it a gift to others (1992, p.207).

Following Olive’s lead in offering others a gift of peace in the aftermath of trauma, I propose The Olive Branch Program to honor those women who share my pain as victims of violence, the will to survive trauma, and the desire to thrive.
References


Fry, D. (2007). A room of our own: Sexual assault survivors evaluate services. Retrieved from New York City Alliance Against Sexual Assault website:


Appendix A:

Interview Questions

Interview questions for survivors:

Q: When were you sexually assaulted? (How long ago)*

Q: What kind of support did you receive after you were sexually assaulted?**

Q: Do you feel you have suffered any long-term effects of sexual assault?

Q: If so, what type of support or activity helps to reduce the effects?

Q: What are the things that have helped you most in your recovery?

*Be aware that the person may have experienced childhood sexual abuse or multiple rapes.

**If intervention/activity relates to art or nature-based therapy, elicit additional descriptions of engagement, as well as level of satisfaction with engagement on a scale of 1-10.

Nature-based Activity: __________________________________________________________

Satisfaction: 1 2 3 4 5 6 7 8 9 10 ___________________________________________

Nature-based Activity: _______________________________________________________

Satisfaction: 1 2 3 4 5 6 7 8 9 10 ___________________________________________

Art-based activity: ___________________________________________________________

Satisfaction: 1 2 3 4 5 6 7 8 9 10 ___________________________________________

Art-based activity: ___________________________________________________________

Satisfaction: 1 2 3 4 5 6 7 8 9 10 ___________________________________________

*If unsatisfied with a particular engagement (rating of 1-4), ask why. Note survivors' reference to triggers or potential triggers inherent in a described activity.
Interview questions for therapists

Q: How long have you been working in trauma recovery with survivors of sexual assault?
T1:
T2:

Q: In your experience, what are the long term implications of sexual assault related-trauma?
T1:
T2:

Q: How would you describe survivors through the stages of recovery? And generally, what are their needs (in terms of recovery and help combating symptoms).
T1:
T2:

Q: When is complementary therapy appropriate? For whom?
T1:
T2:

Q: In terms of support services for the NYC population of women survivors of sexual assault specifically, what do you see as the greatest need? (That is, where is the greatest void or deficit that could have the greatest impact on recovery?)
T1:
T2:

If experienced with following therapies specifically for survivors of sexual assault related trauma, comment on the effectiveness of:

Horticultural Therapy:

Art Therapy:
Appendix B:

Permissions
Mariana Swick

Dear Mariana,

Your proposal and consent letters and forms for working with human participants for your Independent Study have been approved. You may commence your work with human participants. If you make any significant changes to your work with human participants, you need to inform the IMP Committee in writing of your plans. Please place a copy of this letter along with unsigned copies of any consent letters and forms in a Permissions section at the end of your appendix. Keep the original signed forms in a safe place for five years.

The best of luck with your study. We look forward to having the completed copy in the Bank Street College Library.

Sincerely,

Nina Jensen

Nina Jensen, Chair
Integrative Master’s Project Committee
Dear study participant,

My name is Mariana Swick and I am a graduate student in Museum Education at Bank Street College of Education in New York. I am currently conducting research for my Master's thesis and will be acting as principal investigator for this study. The goal of my Master's thesis is to develop a nature and art-based outreach program at Wave Hill Public Garden and Cultural Center that is designed specifically for survivors of sexual assault-related trauma. I am interested in learning about your knowledge of and experiences with post-trauma restorative activities. The information that you share will provide me with insights that will be used in the development of this proposed program.

As a participant in this study, you will be interviewed by me. I will ask you a series of questions related to your experience with the trauma recovery process. Your comfort with the interview process is important to me. You reserve the right to decline response to any question and may stop the interview at any time. Please note that if the feedback that you share during this time is included in the thesis, your name will be changed to protect your privacy. Please also note that the Master's thesis will be submitted to the Bank Street Library where it will be catalogued as part of the Library collection and may also be entered into an international database for wider circulation. It is my hope that the thesis will also be utilized at Wave Hill and may serve as a model program for other outdoor cultural institutions interested in establishing outreach programs for survivors of trauma.

Please sign on the lines below to indicate that you grant permission for the information that you provide to be used for the purpose of this study.

Thank you for taking time to share your experience and insights with me. If you have any questions or concerns about the research, please feel free to contact me at mswick@bankstreet.edu.

Sincerely,

Mariana Swick

I agree to participate in this study.
Name of Participant (please print) ____________________________

Signature_____________________________________________________

Date ___________________________________________________________________
April 30, 2013

Mariana Swick

Dear Mariana,

I have read and approve of the use of material from my interview with you and consent to have my name included in your independent study. I understand that your final work will be submitted as a pdf to the Bank Street Library and entered into an international database.

Sincerely,

Louise Kindley, LCSW
Clinical Supervisor
St. Luke’s-Roosevelt Crime Victims Treatment Center
April 28, 2013

Mariana Swick

Dear Mariana,
I have read and approve of the use of material from my interview with you and consent to have my name included in your independent study. I understand that your final work will be submitted as a pdf to the Bank Street Library and entered into an international database.

Sincerely,

[Signature]

Sally W. Clayton, CH, ADS
Complementary Therapist
St. Luke’s-Roosevelt Hospital Center
Crime Victims Treatment Center
411 West 114th Street #2C
New York, NY 10025
April 29, 2013

Ms. Mariana Swick
2888 Bailey Avenue, #3
Bronx, New York 10463

Dear Mariana,

You have permission from Wave Hill to use the name of our organization for the purpose of your independent study at Bank Street College of Education. We understand that the name and description of Wave Hill and its mission will be presented in this study and used strictly for educational purposes only. The proposal you are working on is a purely hypothetical program at Wave Hill and any reference to it or our work as an exemplar site in no way commits the organization to the adoption of, or implies association with such a program.

I wish you all best luck with your study and we are delighted that Wave Hill has inspired your thinking.

Sincerely,

Claudia Bonn
Executive Director
Wave Hill