



Dear Applicant,

We are pleased to extend to you an invitation to apply for a Family Wellness Warriors Initiative (FWWI) training. FWWI trainings educate and equip natural helpers within the community (e.g., Tribal members, community health aides, clergy, law enforcement personnel) to lead support groups and work with those who have experienced domestic violence and child abuse. Parents/adults with histories of harm and/or at-risk for extending child abuse/neglect are also encouraged to apply.

Participants can expect to hear Alaska Native presenters share personal stories and teach topics from a culturally appropriate and faith-based curriculum. After each teaching, participants meet in small closed groups designed to create a safe environment for sharing how they related to the topic.

FWWI trainings are not meant for every individual and there is an application process. Appropriate FWWI staff review and assess the appropriateness of each participant's application based on the Pre-Screening Questionnaire. This training is intense and requires participants to be fully focused. The schedule is rigorous and sessions are held late into each evening. Because of the nature and content of this training, and in order to create a safe environment for every individual, **the on-site lodging is a requirement**. In order to be approved in the application process, participants must agree to be present throughout the entire training. Off-site appointments and activities are not allowed during the training. Applicants must be at least 21 years of age.

**IMPORTANT: FWWI has a Zero Tolerance Policy for alcohol, illegal drugs, weapons, and/or pornography.** If a participant chooses to use alcohol or drugs, carry a weapon, or view or access pornography while on SCF FWWI property, they will be required to leave the training immediately. If you are required to leave, you will be responsible for repayment of all expenses incurred from the lodging or airfare; as well as be required to repay any training fees or scholarship monies awarded.

For your own safety, **if you have experienced any of the following in the last six (6) months, we recommend you consider applying to future trainings.**

- Are currently pregnant
- Have had recent attempts to harm yourself
- Have had recent instances of substance abuse or struggles with addictions
- Are in Inpatient Treatment *\*\*If you are currently in counseling, please have your counselor complete a referral form from their office.*

HOW DO I APPLY?

**Step One: Fill out Pre-Screening Questionnaire**

**The attached Pre-Screening Questionnaire must be filled out completely in order to be considered for this training.** The Questionnaire is highly confidential and only designated FWWI staff will view and assess your questionnaire to determine whether or not they recommend you to attend this training at this time. An appropriate FWWI staff person will contact you for a phone interview to discuss your questionnaire. As a reminder, this is an application process and the interview does not mean you have been accepted to attend.

**Step Two: Fill out Application Packet and Submit Application Fee**

If approved to attend, additional training information will be sent to you. The non-refundable application fee of \$100 must be submitted at this time.

**Step Three: Submit Final Payment**

Cost: \$100.00 Application fee (non-refundable) plus \$1400.00 training fee per person. The \$1400.00 training fee must be paid two weeks before to the first day of training. If we receive your application two weeks before the deadline you will receive a \$100 discount. Payment includes on-site lodging, catered meals, training materials, and Alaska Native cultural activities.

Payment Options: Visa or MasterCard are accepted. Checks and/or Money Orders can be made out to Southcentral Foundation - FWWI.

**Cancellation Policy: A cancellation must be received in writing and can be faxed to (907) 729-5449. Cancellations received less than two weeks before the start training are nonrefundable and will be assessed a \$250 administrative fee. Payments may be transferred to cover the fee for another person provided they meet the pre-screen requirements. To transfer a payment, request the change in writing and fax the replacement attendee's name and application to (907) 729-5448.**

#### WHAT CAN I EXPECT TO LEARN?

Beauty For Ashes (BFA), or Arrigah House (AH) course objectives include that participants will:

#### ATTITUDE

- Develop sensitivity towards others whose lives have been impacted by abuse, neglect, and violence;
- Develop awareness of how they impact others through communication and relationships;
- Understand how Alaska Native strengths can help to break the silence and to break the cycle of abuse;

#### PROCESSES

- Learn methods of building protective factors and coping skills thoroughly grounded in traditional values;
- Learn to have appropriate responses to harm and trauma disclosures;
- Learn to affect change in family violence and child maltreatment;
- Learn how to evaluate and address the root cause of behaviors and motivations.

#### UNDERSTANDINGS

- Gain tools to understand how past harm impacts the current ways we relate to and interact with those around us;
- Experience Alaska Native history, the people, their stories, challenges, tears, pain, and their lives, as well as their successes, victories, healing, and growth;
- Identify what shame is and how it shows up in thoughts, feelings, and actions;

#### SKILLS

- Gain tools to become an effective group facilitator;
- Observe and practice effective communication methods that promote healing from trauma and harm;
- Gain tools to become an effective speaker in the areas of abuse, neglect, and domestic violence;
- Learn coping skills that assist when dealing with trauma and harm; and
- Practice how to safely enter conflict in a way that invites healthier relationships.

If you are interested in applying to attend this training, please complete the attached Pre-Screening Questionnaire and the Registration page. You can submit the attachments by mail to 3210 Lark Street, Anchorage, AK 99507 or by confidential fax to 907-729-5448.

BFA/AH now offers 4.5 Continuing Education Units and a 3-Credit Course through Alaska Pacific University (APU). If you are interested in receiving either of these options, please contact FWWI for additional information including registration steps and APU fees.

Thank you for your interest in attending an FWWI training. We look forward to the possibility of partnering with you in the fight against domestic violence, abuse, and neglect in the Native Community.

Sincerely,

**FWWI**

907-729-5440

907-729-5448 (confidential fax line)

[fwwievents@scf.cc](mailto:fwwievents@scf.cc)

**BEAUTY FOR ASHES / ARRIGAH HOUSE / WELLNESS WARRIORS GROUP  
PRE-REGISTRATION APPLICATION**

**Training Name:**

- Beauty for Ashes
- Arrigah House

**Contact:** FWWI Events Team

**Toll-Free:** 1-866-729-3994

**Direct:** 907-729-5440

**Email:** fwwievents@scf.cc

**Fax:** 907-729-5448  
(Confidential)

**Training Dates:** \_\_\_\_\_

**Location:** \_\_\_\_\_

**Training Tuition Fee:** \$1500.00 Covers cost of education and training, training materials, lodging and catered meals.).

**Early Bird Special:** \$1400.00 if two weeks prior to the training.

*(For FWWI Staff Use Only)*

Initials: \_\_\_\_\_

Date: \_\_\_\_\_

Pre-Screening:

Approved to attend

Not approved to attend

**Beauty for Ashes:** This training is held in a large conference style over a period of five-days and four-nights. This intensive training is designed to educate and train Natural Helpers to use culturally appropriate means to work with individuals and communities impacted by violence. This training is held locally and is designed to host approximately 100 people.

**Arrigah House:** A five-day, four-night intensive training designed to host up to 50 people in rural communities as part of the FWWI 3-Year Model for Alaska Native Areas. Upon request, Arrigah House can be customized for other specific groups and communities.

**Cancellation Policy:** A cancellation must be received in writing and can be faxed to (907) 729-5449. Cancellations received less than two weeks before the start training are nonrefundable and will be assessed a \$250 administrative fee. Payments may be transferred to cover the fee for another person provided they meet the pre-screen requirements. To transfer a payment, request the change in writing and fax the replacement attendee's name and application to (907) 729-5448.

All applicants please return this completed form along with the following items:

COUNSELOR REFERRAL FORM (if currently seeing a counselor)

PRE-SCREENING QUESTIONNAIRE FORM

RELEASE OF LIABILITY FORM

MODEL RELEASE FORM

EMERGENCY CONTACT FORM

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## Emergency Information

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*(Please Print Clearly)*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

If there is a medical/emotional emergency involving me, I release Southcentral Foundation's Family Wellness Warriors Initiative to contact:

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## Emergency Contact Information

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Name: \_\_\_\_\_ Phone Number: (    ) \_\_\_\_\_

Relationship to you: \_\_\_\_\_ Alternate Phone: (    ) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

And, if applicable: Name of friend/relative with you at AH / BFA / WWG

Name: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

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## Special Considerations

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Please LIST any food allergies: \_\_\_\_\_

Please LIST any illnesses, special needs, or disabilities: \_\_\_\_\_



## Release of Liability

In consideration of my electing to and being able to participate in the small group sessions at the Beauty for Ashes (BFA), Arrigah House (AH), or Wellness Warriors Group training (WWG) in Anchorage, AK scheduled for \_\_\_\_\_ (date), I \_\_\_\_\_ (print name of participant), for myself, my heirs, executors, successors and assigns, hereby completely and unconditionally release and agree to defend, indemnify and hold Southcentral Foundation (SCF), and the respective boards of directors, officers, executive team members, leaders, presenters, employees, and other representatives, from and against any and all claims, costs, causes of action, expenses, judgments, and liabilities of any kind whatsoever resulting from, arising out of or in any way relating to:

- (a) My participating in the small group sessions during BFA/AH/WWG, scheduled for \_\_\_\_\_;
- (b) Any individualized care or small group sessions in which I may be involved which use any methods or materials developed by SCF;
- (c) My use of any information, methods or materials learned at or obtained through the small group sessions or the BFA/AH/WWG training; or
- (d) The actions or omissions of any family members, including but not limited to minor children, and close personal friends who accompany me to the place where the small group sessions are to take place, regardless of whether the family member or close personal friend participates in the small group.

At Beauty for Ashes, Arrigah House, and other FWWI trainings, personal stories of both harm received and harm caused are shared as part of the process. I am aware that hearing stories may result in experiencing triggers, various emotional and/or physical responses, and present at varying levels of difficulty for people.

By signing below, I agree to the terms and conditions as explained in the paragraphs above.

Print Legal Name: \_\_\_\_\_

\_\_\_\_\_ Date:

Signature: \_\_\_\_\_

\_\_\_\_\_ Date:

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Signature of  
Witness: \_\_\_\_\_

\_\_\_\_\_ Date:

## CONSENT TO PHOTOGRAPH/VIDEOTAPE/FILM/AUDIO TAPE RECORD

For value received, receipt of which is hereby acknowledged, I hereby give Southcentral Foundation ("SCF") permission to publish and otherwise use, without charge or compensation, photographs, video, film or audio tape recordings SCF or its agent takes of me, the undersigned individual:

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(Print name of subject being photographed, videotaped, filmed, audio tape recorded)

I understand that "tape recordings, photographs, video or film " means all audio, cinematic (moving images), or still photographic images, whether film, videotape, audio tape recordings, transparencies, negatives, prints, digital data, or otherwise, all reproductions in any form in any media, and all derivative works based on any of the foregoing.

I understand that "publish" means to reproduce and to distribute throughout the world, in any media whatsoever and by any and all means, methods, processes, whether now known or hereafter invented, including but not limited to printing copies on paper and maintaining digital copies on SCF's World Wide Web site on the Internet.

I understand that the photographs, videotape, film, and audio recordings of me may be used in conjunction with my name and I hereby consent to such usage. I hereby waive any right that I may have to inspect and approve the finished product or copy that may be used in conjunction therewith.

I understand that all photographs, videotape, film, and audio recordings of me, and all rights therein, including copyrights, are and shall remain the sole and exclusive property of SCF or its agents.

I understand that the photographs, film and videotape of me may be used by SCF in its news releases and advertisements, its publications, its printed material, and on its Web site, including, but not limited to, annual reports, brochures, newsletters, radio recordings, educational and instructional materials, video and/or audio presentations, recruitment, illustrations, art, exhibits and displays.

I understand I have the right to withdraw my consent and to stop the photo session, videotaping, filming or audio recording; and that I also have a right to rescind my consent ***a reasonable time before*** the photos, videotape, film or audio recordings ***are reproduced for distribution***.

I hereby release and discharge SCF, its officers, directors, employees, agents, and subcontractors, if any, from any and all liability, claims, damages, expenses, and demands arising out of or in connection with the publication or other use of the photographs, videotape, film, or audio recordings of me, including without limitation, any and all claims for libel or invasion of privacy.

I further understand and agree that this Consent Agreement contains the entire agreement between the Parties to this Agreement; that the terms of this Agreement are contractual and not merely recital; that this Agreement is intended to be as broad and inclusive as permitted by the State of Alaska; that, if any portion of this Agreement is held invalid, the balance shall, notwithstanding, continue in full legal force and effect; that this Agreement is binding upon me, my heirs, executors, administrators, assigns, legal representatives and anyone claiming through or under me; and that this Agreement shall inure to the benefit of the licensees, successors, assigns and legal representatives of SCF.

I further state that I carefully read the foregoing Consent Agreement and know and understand the terms of the same. I agree that this Consent Agreement contains an authorization for SCF to copyright, use and publish photographs, videotape, film, or audio recordings of me without compensation. Nevertheless, this Agreement is entered into freely and voluntarily and is intended to bind me and my heirs, executors, administrators, assigns and legal representatives.

---

Signature of subject being photographed, videotaped, filmed, audio recorded Date  
Street Address

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City, State, Zip Telephone

**IF THE INDIVIDUAL EXECUTING THIS AGREEMENT IS UNDER THE AGE OF 18, THE FOLLOWING MUST BE EXECUTED BY THE INDIVIDUAL'S PARENT OR LEGAL GUARDIAN:**

I hereby certify that I am the parent or legal guardian of the individual (hereinafter "my child/ward"), who executed the foregoing Consent to Photograph/Videotape/Film/Audio Tape Record. Acting both for my child/ward and for myself, I consent to the execution of the foregoing Consent to Photograph/Videotape/Film/Audio Tape Record by my child/ward and to the grant of rights and the release of liability therein. In addition, and without limiting the foregoing, I hereby personally release and discharge SCF, its officers, directors, employees, agents, and subcontractors, if any, from any and all liability, claims, damages, expenses, and demands I may have, arising out of or in connection with the publication or other use of the photographs of my child/ward.

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Signature of parent or legal guardian Date  
Address

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City, State, Zip Telephone

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**PERSONAL INFORMATION** (Please Print Clearly)

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Full Legal Name: \_\_\_\_\_

First

Middle

Last

Name you prefer on your name tag: \_\_\_\_\_ [ ] Female [ ] Male

Ethnicity: [ ] Alaska Native [ ] American Indian [ ] Caucasian [ ] Other: \_\_\_\_\_

Age: \_\_\_\_\_ Number of Children: \_\_\_\_\_ Number of Children Living with you: \_\_\_\_\_

Marital Status: [ ] Single [ ] Married [ ] Separated [ ] Divorced [ ] Widowed [ ] Significant Other

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Birth Place: \_\_\_\_\_ Daytime Phone: ( ) \_\_\_\_\_

Evening Phone: ( ) \_\_\_\_\_ Email Address: \_\_\_\_\_

Native Corporation: \_\_\_\_\_ Occupation: \_\_\_\_\_

1. If accepted to attend, will you agree to remain fully focused on yourself even though you may have close family/friends/associates also attending throughout the week? [ ] Yes [ ] No

2. Check all previous FWWI trainings you have attended. Include the month(s) and year(s) of each training you attended if more than one:

[ ] AH Date(s): \_\_\_\_\_ [ ] BFA Date(s): \_\_\_\_\_ [ ] WWG Date(s): \_\_\_\_\_

3. How did you hear about Family Wellness Warriors Initiative?

[ ] Anchorage Native News [ ] scf.cc web site

[ ] SCF New Hire Orientation [ ] SCF/FWWI event/training (which one): \_\_\_\_\_

[ ] Referred by: \_\_\_\_\_ [ ] Community Awareness Workshop (where): \_\_\_\_\_

[ ] Other: \_\_\_\_\_ [ ] fwwi.org web site

4. What is your reason for attending this training? \_\_\_\_\_

5. I am interested in starting a small group in my community. [ ] Yes [ ] No

6. I am interested in being a resource in my community. [ ] Yes [ ] No

7. Are you an SCF EMPLOYEE? [ ] Yes [ ] No

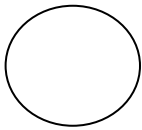
If yes, list the Name of Supervisor/Dept: \_\_\_\_\_

If you are an SCF employee, you must fill out a Request for Training Form (RFT). A letter will be sent to your supervisor notifying them of your application to attend.

1) The RFT should be faxed to FWWI (907) 729-5448 with your supervisor's signature;

2) The RFT must be submitted to finance with a copy of your pre-registration page only;

3) An application is not considered complete until finance has approved your RFT.



# PRE-SCREENING QUESTIONNAIRE

Family Wellness Warrior's Initiative

(For FWWI Staff Use Only)

Initials: \_\_\_\_\_ Date: \_\_\_\_\_

Recommendation:

Approved to attend

Not approved to attend

Interview:  Yes  No

A large part of this training will involve being in a small group. In order to determine whether or not we recommend this training for you, and to facilitate placing you in a group that will best meet your needs, you will need to respond to **EVERY question**. **Incomplete questionnaires will not be accepted.**

For your own safety, **if you have experienced any of the following in the last six (6) months, we recommend you consider applying to future trainings.**

- Are currently pregnant
- Have had recent attempts to harm yourself
- Have had recent instances of substance abuse or struggles with addictions
- Are in Inpatient Treatment **\*\*If you are currently in counseling, please have your counselor complete a referral form from their office.**

**Your answers are confidential**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

1. Would you like to be considered for a co-ed group?\*  Yes  No

*\*There is always a possibility of co-ed groups and gender based groups **cannot be promised or guaranteed***

2. Are you requesting to lodge with a specific person at this event?\*  Yes  No

If Yes, who are you requesting to share a room with? \_\_\_\_\_

*\*These requests are thoughtfully considered and cannot be promised or guaranteed*

3. Have you **Received Harm** or **Caused Harm** in any of the following ways (see attached abuse definitions)?

*(Reminder: these questions are necessary so we can appropriately place you in a small group. Answering either yes or no does not disqualify you from attending, but we do ask that you be as honest as possible).*

	Received	Caused		Received	Caused
Domestic/Spousal?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Emotional?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Physical?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Sexual?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Spiritual?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Verbal?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			Satanic?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

4. Has the exposure to or use of pornography been a part of your journey?  Yes  No

5. Do you ever feel like you are somebody else, or have you had "out of body experiences" as if you are disconnected from your body?  Yes  No Have you experienced amnesia or time loss?  Yes  No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

6. Are you currently in a relationship in which you fear you may be harmed or you may harm yourself or someone else?  Yes  No If Yes, please explain: \_\_\_\_\_

7. Do you have a restraining order against you or do you have a restraining order against someone else at this time?  Yes  No If Yes, please explain: \_\_\_\_\_

8. Are you currently incarcerated, in a halfway house, or other correctional facility?  Yes  No If yes, please explain: \_\_\_\_\_

9. Are you currently on probation or parole for any crime, or on an early release program from any correctional facility?  Yes  No If yes, please explain: \_\_\_\_\_

10. Are you currently charged with any crime for which, if convicted, you could go to jail?  Yes  No If Yes, please explain: \_\_\_\_\_

11. Please indicate your relational **style from the attached pages** that describes various definitions.  
Good girl/Nice guy  Tough girl/Tough Guy  Party girl/Party Guy  Holy Jane/Holy Joe

*I understand that this FWWI Training **is not intended** to substitute for mental health, addictive, medical, pastoral, legal, or other professional services. I also understand that if expert assistance is required, I should seek the services of a competent professional.*

*I also understand that due to the nature and content of this training, and in order to create a safe environment for every individual, **the on-site lodging is a requirement for participation in the training**. In order to be approved in the application process, participants must agree to participate by being present throughout the entire training.*

*I am aware that FWWI has a Zero Tolerance Policy for alcohol, illegal drugs, weapons, and/or pornography. I agree that if I choose to use alcohol or drugs, carry a weapon, or view or access pornography while on SCF FWWI property, I will be required to leave the training immediately. If I am required to leave, I will be responsible for repayment of all expenses incurred from the lodging or airfare; as well as be required to repay any training fees or scholarship monies awarded.*

*Submitting this information **does not mean** I have been accepted to attend this training. By my signature, I am indicating that I read and understand these statements and verify that all information on this form and any accompanying documents are true to the best of my knowledge. I understand that I will be notified on the status of my application.*

\_\_\_\_\_  
SIGNATURE of participant

\_\_\_\_\_  
DATE

<u>For Consultation Use Only</u>
C/N: _____ Date: _____
Consultant Recommendation:
<input type="checkbox"/> Approved to attend
<input type="checkbox"/> Not approved to attend
<input type="checkbox"/> Referred out

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## ABUSE DEFINITIONS

**Sexual Abuse:** involves any contact or interaction whereby a vulnerable person (usually a child or adolescent) is used for the sexual stimulation of an older, stronger, or more influential person (It should be noted here that the stronger or more influential criteria may be real or perceived. Sexual abuse may even occur between two same age children when one child is compliant in nature and the other is the leader).

Sexual abuse is much broader than forced, unforced, or simulated intercourse. It includes any touching, rubbing, or patting that is meant to arouse sexual pleasure in the offender. It may also involve visual, verbal, or psychological interaction where there is no physical contact.

Sexual abuse may also include the abuse of a submissive adult by a person in a position of power, such as a priest, pastor, therapist, boss, doctor, or teacher. It may also include forced sexual contact, manipulated or through threats when the aggressor is a romantic interest, colleague, co-worker, spouse, or any other known person.

**Visual Sexual Abuse:** may involve exposing a victim to pornography or to any other sexually provocative scene, including exposure to showering, intercourse, or various states of undress.

**Verbal Sexual Abuse:** involves an attempt to seduce or shame a child by the use of sexual words, suggestive words, or yelling. (Occasionally; however, this shaming may be unintentional. The child internalizes the words that a careless adult uses toward her and grows up bearing that false image).

**Psychological Sexual Abuse:** includes interactions where a child is regularly used to play the role of an adult spouse, confidant or counselor.

**Spousal Abuse or Battering:** a pattern of coercive behaviors used to establish control over another person through fear, intimidation, emotional abuse, or social isolation; often including the use of or threat of physical or sexual violence. Spousal sexual abuse involves any contact or interaction where by a vulnerable person (the spouse) is used for the sexual satisfaction, control or revenge of the other spouse.

**Emotional Abuse:** may be verbal or nonverbal. Verbal abuse includes defensive anger, which is used to threaten, intimidate, or distance another. It may include name calling, cursing, continual blame-shifting, threats and the use of "zingers" as well as being argumentative, changing the subject, withholding support, humiliating, shaming, dominating, controlling, forgetting, denying, and rewriting the past. Nonverbal abuse occurs through emotional abandonment. It may be experienced in degrading gestures such as "flipping the bird," the silent treatment, looking down and shaking one's head, refusing to acknowledge someone when he/she enters the room, turning one's back to another when support is needed and/or appropriate. Economic unfairness may also be a form of nonverbal abuse as well as the unspoken use of "male privilege." Emotional abuse may be active or passive. Active emotional abuse (of the type listed above) damages because of its presence. Passive emotional abuse damages because of its absence. The following are examples:

- Not being cherished and celebrated by one's parents simply by virtue of one's existence.
- Not having the experience of being a delight.
- Not having a parent take the time to understand who you are – encouraging you to share who you are, **what you think and what you feel.**
- Not receiving large amounts of non-sexual physical nurturing – **laps to sit on, arms to hold, and a willingness to let you go when you have had enough.**
- Not receiving age-appropriate limits and having those limits enforced in ways that do not call your value into question.
- Not being given adequate food, clothing, shelter, or medical and dental care.
- Not being taught how to do hard things – to problem solve and to develop persistence.
- Not being given opportunities to develop personal resources and talents.

**Physical Abuse:** is any kind of physical harm from hair pulling, squeezing, hitting, slapping, pushing and kicking to use of a weapon to injure and/or kill.

**Spiritual Abuse:** the misuse of Scriptures to manipulate, control, or demand submission. Male authority may be misused to justify inappropriate behavior or deny another the right to attend church or engage in worship. Legalism (non biblical rules) demanding performance to attain a good status in the church is non biblical and gives a false sense of self righteousness. Any minimizing the pain of the wounded as unspiritual, needing to pray more, read the Bible more rather than entering their pain can feel re-abusive. Ministries to the wounded need the protection of church leaders. Failure to believe reports of abuse in the church and not valuing a person's voice, regardless of age or gender, gives entrance to abuse.

**Satanic Ritual Abuse:** includes abuse from families who have been involved in the occult (sometimes for generations), people who have been pulled in as children themselves and are programmed to be perpetrators and people from secret lodges, often from the wealthy, educated segments of society. These abusers hide in their power to perform supernatural acts by calling Satan to manifest himself in the group rituals, meetings and ceremonies. Their intent is to gain power through harming and killing the innocent. The most innocent would be an unborn baby. All that they do is a designed perversion of Christianity. The leaders are addicted to evil, engaging in progressively in more evil activities. They use alcohol and then drugs to dull their consciences and the pain of what their addiction demands that they do. Their consciences become seared. They serve Satan.

## RELATIONAL STYLES DESCRIPTORS

### **Tough Guy / Girl**

I am a task-driven individual. I am a fortress with thick, impenetrable walls. I view longings as weak and sentimental. I keep my distance with a look, sarcasm, or a do-not-disturb air. I am lonely. The better I perform, the emptier I become. I hate to be dependent on others. I tend to be indifferent to the feelings of others. I usually feel anger when others may feel sadness or fear. When challenged, I tend to go toe-to-toe with others. I am not thought of as warm or gentle. I am known for my strong opinions.

### **Good Guy / Girl**

I tend to avoid anger and am thought to be pleasant, a good performer, and a peacemaker. I avoid confrontation and find it difficult to say 'No'. It feels selfish to long for love, intimacy, and protection. When people around me are unhappy, I tend to feel as though it is my fault. I don't like to impose on other people, but people seem free to impose upon me. It is important for me to be liked by others. I rarely lose my temper, but people would be surprised if they knew how angry I was inside. I let others make choices for me so I am not responsible for the outcomes. I often feel lonely and inadequate.

### **Party Guy / Girl**

I am the life of the party and really enjoy a good time. I am only superficially aware of what I want. I often have self-contempt and other-centered contempt. I have both a hunger for and a hatred of relationships and intimacy. I tend to procrastinate. I fear being trapped and will abandon a relationship if it seems to be getting too close. People might describe me as "smooth". You can count on me to be unpredictable. I can easily talk my way out of trouble almost every time. I often have moderate or wild mood swings. I may use gifts and money to draw people to me but often lose interest in friendship.

### **Holy Joe / Jane**

I have a sincere interest in people and am dependable. People tend to think of me as dogmatic or legalistic while I just think I have strong biblical convictions. I feel a strong need to be used by God. I often use scripture to protect myself from the anger or threats of others. I can be kind and gracious but have a difficult time being spontaneous or fun. I sometimes feel a lack of connection with others when I use my spiritual knowledge or insights. It is important to me to be "heard" and "right". I am a good volunteer, church attendee, and witness; but I find myself tired a lot and on the edge of burnout. I know my Bible verses well and never miss my quiet time. When I feel challenged I use the Bible as a shield to prove I am right. I often give trite answers such as, pray more, read the Bible more, or spend more time at church when people come to me with questions or problems. I feel a lot of passion, but not necessarily compassion.