

In this second of a series of SBW Notes that focus on evidence-based practice, SBW Associate, Dr. Marie L. McCormick discusses one of several under-recognized issues in the mental health of older women.

**"Why am I still having these dreams?" PTSD in the lives of older women survivors of intimate partner violence**

This reflection suggests the real and present phenomenon of post traumatic stress disorder (PTSD) in the lives of older women survivors of intimate partner violence (IPV). Based on clinical practice with women who are experiencing violence in their current intimate partner relationships, this issue has begun to receive some empirical attention. However, post traumatic stress that results from IPV experienced in earlier intimate relationships is a less recognized phenomenon that has received scant empirical attention. Knowledge generated from my research - briefly presented here - enhances the capacity of clinical social workers to recognize and care for this vulnerable, under-recognized population of trauma survivors.

Survivors of IPV are usually thought of as women in their childbearing years. It is only in the past several years that domestic violence has been recognized as a problem for women across the lifespan. While knowledge of IPV history would include screening for symptoms of post traumatic stress in younger women, it is less likely that mental health clinicians evaluating older women would look for or elicit historical information about IPV. Dissociative symptoms may be normalized by the survivor and therefore not reported. Similarly, symptoms such as depression and anxiety, when presented by an older woman, might not be associated with post traumatic stress resulting from IPV.

In a qualitative project I asked 15 older women during a series of in-depth interviews to reflect on their 'self'(s) in their bodies through the lens of food and eating.\* Three of the fifteen participants disclosed histories of intimate partner violence during the course of their marriages. Each of these women was widowed or divorced for thirty to forty years, yet the memories of the abuse - the terror and pain - were as alive as if it had occurred just weeks before. Each woman experienced significant anxiety and episodes of depression, received psychotropic medication for these clinical presentations,

experienced flashbacks, intrusive recollections and nightmares, and avoided situations and places that were evocative of the abuse (criteria for a DSM IV-TR diagnosis of PTSD). Strikingly common in each woman's story was that she had never disclosed her history of violence and abuse to a healthcare or mental health provider. Essentially, no one had asked for a history beyond the recent past; symptoms were interpreted as a response to old age, loneliness, or simply histrionics.

At the beginning of one of my interviews, one woman asked "why am I still having these dreams?" A story of twenty years of violent, life-threatening abuse unfolded. Her story burst forth, with no prompting from me other than curiosity and willingness to listen. Following this disclosure I was able to answer her question - she was experiencing the consequences of trauma. Framing this for her empowered her to go to her therapist and share her history, which prompted the therapist to assure her that now she "knew how to help."

This unanticipated discovery illustrates the clinical importance of curiosity that allows another's life to unfold; the healing power of listening that is a key component of both qualitative research and social work practice; and the potential of research to make visible what has been formerly unseen and unknown. The discovery process that is qualitative research in social work can lead to genuine and accessible helping outcomes for the social work practitioner and her clients.

\*McCormick, Marie L. (2008). My body my self: Aging and the lived experience of embodied womanhood. Dissertation Abstracts International Section A: Humanities and Social Sciences 69(4-A), 1544.

Marie L. McCormick, PhD., LCSW is in private practice in NYC specializing in work with women survivors of abuse. She is an adjunct instructor at Fordham University Graduate School of Social Service and an Associate of SBW Partners.

**We look forward to your comments and experiences.**

**SBW Partners** is a fee-for-service firm devoted to advancing social work practice in aging. Services are provided by Dr. Barbara Silverstone and Dr. Ann Burack-Weiss, the firm's founding partners, and a group of associates. For more information, please visit [www.sbwpartners.com](http://www.sbwpartners.com) or call 212.337.2555.