Training for Clinicians and Care Providers Working with Jewish Survivors of Abuse

The use of ritual as a healing modality is a universal phenomenon. All cultures practice ritual as a means of facilitating health and harmony among their members. Therese Rando describes ritual as a “specific behavior or activity, which gives symbolic expression to certain feelings and thoughts of the actor(s) individually or as a group” (Treatment of Complicated Mourning, 1993). Rituals or ceremonies can be singular events, such as graduation or a funeral, or regular occurrences, such as holiday celebrations or prayers. Ritual has the power to transform experiences, provide meaning, and mark transitions. It offers the opportunity to bypass cognitive functions by providing concepts, symbols, and ceremonies that transform the effects of stigma, shame, or dissociation from self and others. It can facilitate the process of change and help alleviate suffering which are key parts of human existence also addressed by psychotherapy.

The rituals and practices of Judaism stem from the Torah (the five books of Moses) and its rabbinic interpretations, or have been developed as customs in the community. These rituals and practices provide members of the Jewish community with a sense of commonality while also serving as resources for individual comfort, connection, and transformation.

Mikveh (Jewish ritual bath) is one example of an ancient ritual that still helps to mark life transitions today. People use water rituals for symbolic cleansing, purification, or healing in many world religions, including Christianity, Islam, Hinduism, the Rastafari movement, Shinto, Taoism, Sikhism, Wicca and Judaism. The importance of water in Judaism comes from the Torah: in the book of Genesis, water is an important element in Creation; the book of Exodus has references to the use of water for purification purposes; and the book of Leviticus introduces specific laws regarding water rituals and building a kosher mikveh. Today there are many reasons Jews immerse themselves in the mikveh: married women mark the end of menstruation or niddah; brides immerse before their weddings; men, women, and children immerse when they convert to Judaism; people immerse before a sacred task, such as writing a Torah scroll, or before the Jewish Sabbath or Festivals to mark the transition from secular days to holy-days. The mikveh’s role in marking transition makes it powerful for many other reasons including times of celebration and for healing, including for survivors of abuse and trauma.

CORE CONCEPTS

- The mikveh can be a resource for marking life milestones and for healing.

- Mikveh can be a valuable therapeutic resource for working with survivors of trauma and abuse in a Jewish context.

OUTLINE OF SESSION

CONNECTION TOGETHER
10 minutes Introduction and Community Building

HEART OF THE MATTER
60 minutes Domestic Violence and the Jewish Community
30 minutes  Trauma and the Uses of Mikveh
15 minutes  What Happens at the Mikveh
45 minutes  Referrals to the Mikveh
10 minutes  Clinician Self-Care

HOME REFLECTIONS
Suggested Readings

WRAP UP
10 minutes  Evaluation

CONNECTING TOGETHER

Participants introduce themselves to the whole group (if small enough) or a smaller group by sharing their reasons for coming to this training and a ritual that they have found helpful in their own life growth.

HEART OF THE MATTER

Domestic Violence and the Jewish Community

Note: This outline assumes that clinicians attending the training have a basic understanding of domestic abuse. If this is not the case, a general training on domestic abuse should be provided by a local domestic abuse program. Information may include:

- Myths and facts about domestic abuse and its prevalence
- Dynamics of domestic abuse
- How to recognize abuse/warning signs
- Why it can be hard for survivors to leave an abusive relationship and what can make it easier to leave or to be safer at home
- How to respond effectively if someone discloses abuse
- What local services are available for survivors and how to access them

What is Judaism?

- Religion
- Culture
- Civilization
- People who identify as Jewish represent a broad spectrum of beliefs and practices. This training is applicable to anyone who identifies themselves as Jewish.

Demographic Information

- Domestic abuse occurs at roughly the same rate in the Jewish community as it does in the general public.
- Domestic abuse occurs across denominations; it is not concentrated in any one branch of Judaism.

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**Spiritual Abuse**

- Abusers employ many tactics -- including physical, emotional/verbal, sexual, financial and spiritual abuse -- in gaining power and control over an intimate partner.

- Examples of spiritual abuse include
  - forcing a person to be more or less observant than he or she would otherwise choose to be
  - deliberately violating religious practices/observances such as keeping kosher, the Sabbath, or mikveh
  - forcing one’s partner to violate those practices/observances
  - breaking or misusing ritual objects
  - mocking a person’s beliefs or practices
  - using isolated pieces of Jewish law, teaching or tradition to justify abusive behavior

**Be Careful with Assumptions and Language**

- Don’t focus too much on the label (Orthodox, Reform, Humanist, etc.) that a person chooses. Instead, listen to how people describe their practice rather than what label they assign themselves.

- Avoid the word religious.
  - Many non-Orthodox Jews consider themselves deeply religious. The differences between Orthodox and non-Orthodox Jews lie in practice, not commitment or faith.

**Barriers and Challenges for Jewish Survivors**

Due to a combination of cultural issues and pressures— as well as additional complications for observant Jews -- Jewish survivors tend to stay in abusive marriages five to seven years longer than other survivors. Jewish survivors encounter several specific barriers in accessing help. Cultural issues (many of which are not unique to Jews) may include:

- Denial:
  - “Abuse doesn’t happen in Jewish relationships.” “This isn’t our problem.”

- Shanda (shame), which operates at two levels:
  - Individual shame: People who are being abused might feel embarrassed or humiliated that they are “letting it happen to them.” Many (if not most) Jews would identify domestic abuse as a shanda, and no one wants to be thought of in that way.
  - Community shame: There’s a dirty laundry factor at work, too. Many Jews collectively cringe when a Jew is publicly caught doing something unethical or illegal, fearing that it will tarnish the reputation of the whole community. This can make it harder for survivors to come forward, as well as for bystanders in the community to encourage survivors to involve the police, child protective services or other secular authorities who could help.
• **Shalom bayit** (peace at home):
  - Home is traditionally a woman’s responsibility, which results in the cultural myth/assumption that if there’s not peace at home and a woman is being abused, she must be at least partially at fault.
  - There is strong cultural pressure to have a happy home and a complete, intact family.

• **Issues within the synagogue community**
  - Fear of living “in a fishbowl” if people find out.
  - Fear that disclosing abuse will be divisive for the community and that other community members will choose sides.
  - Concern about whether it will be possible to separate from an abusive partner and still safely remain a part of the community.

• **Clergy:**
  - Concerns about clergy disapproval or judgment, particularly if the clergy person performed the wedding or knows the abuser well

• **Lashon hora** (evil tongue, gossip or slander):
  - A survivor may worry that telling someone in the community about the abuse amounts to gossiping or speaking ill of the abuser.

There are also practical matters that can make it hard for an observant survivor to leave an abusive situation. These include:

• Concern about keeping kosher in a shelter or hotel
• Concern about the process of asking for and being granted agot (Jewish divorce)
• Concern about breaking marriage vows
• Concern about finding new housing that is both affordable and within walking distance of the synagogue
  - Living close to the abuser may not feel safe, but moving farther away means giving up the whole synagogue community (and possible support system) since it becomes impossible to get there (without driving) on Shabbat and festivals.

• Concern about being accused of acting as a rebellious wife

Note: Not all survivors have to leave their homes. It is sometimes possible for an abusive spouse to be ordered out of the house by a judge or for a survivor to be allowed to remain in the house through a separation or divorce agreement.

**Jewish Values to Emphasize in Working with Survivors**

• **Kavod:** individual honor, dignity, respect
• **Pikuah nefesh:** saving a life
• **Tikkun olam:** repairing the world

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Stereotypes Exercise

This exercise is intended to show how cultural stereotypes of American Jewish men and women can create additional barriers for American Jewish women who are considering talking to someone about an abusive situation.

Supplies: This exercise involves brainstorming and writing the responses in a place where everyone can clearly see them, so you will need chart paper (and a way to affix it to the wall or stand it on an easel), a black or whiteboard (with chalk or markers), or an electronic way to capture the answers and project them on a wall or screen.

The Exercise

- Begin by introducing the exercise as a way to think about our stereotypes of American Jewish men and women.

- Ask the group to identify common stereotypes of American Jewish men. Emphasize that you are talking about stereotypes, not what individual participants really think. You’ll likely get a wide range of responses, but some of the common ones might include good provider, nice Jewish boy, doctor/lawyer/banker, smart, educated, takes care of his mother (or, put more negatively, a mama’s boy), family man, affluent, etc. Note the responses in a column for everyone to see.

- Then ask the group to identify common stereotypes of American Jewish women. Re-emphasize that these are stereotypes, not what people really think. Again, you’ll likely get a range of responses, but it’s also likely to be a mix of positive and negative attributes. Common responses might include smart and educated, but also aggressive, nagging, demanding, gold-digging or materialistic, JAP (Jewish American Princess), overbearing, loud, opinionated, etc. Note these responses in a second column for everyone to see.

- Discuss, using the following questions as prompts:
  - What does it mean when someone who lives in the shadow of the stereotype of the smart, educated, demanding, materialistic, nagging Jewish woman says that her husband—with the stereotype of being a nice Jewish boy, good provider and real family man—is abusing her? Who tends to have more credibility? How might our stereotypes influence the response that she gets from community members?
  - How do myths about domestic violence and affluence, education, etc. influence the survivor’s credibility? How much do those myths influence how seriously a friend, family member or clergy person might take the situation? How does this influence a friend, family member or clergy person’s view of the dangerousness of a situation? How do they influence the survivor (feeling perhaps that she is smart and educated and so “should have known better” or “been smarter than this”)?

- Conclude by reflecting back the group’s observations about how cultural stereotypes might influence a survivor’s experience of either thinking about reaching out or actually telling someone about the abuse.
  - Acknowledge that this isn’t the whole story. People certainly are far more complicated than stereotypes.

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- Invite the group to reflect on how these stereotypes might affect a Jewish man who is being abused by his wife or girlfriend.
- Acknowledge that this exercise is limited because of its focus on heterosexual relationships. If there is time, invite the group to reflect on the ways in which our cultural ideas of a Jewish marriage and a Jewish family might impact gay, lesbian, bisexual and transgender Jews who are thinking about reaching out for help with an abusive relationship.

**Trauma and the Uses of Mikveh**

According to the American Psychiatric Association, there are two essential criteria that characterize trauma: “1) The person experienced, witnessed, or was confronted with an event or events that involved or threatened death or serious injury, or a threat to the physical integrity of self or others, and 2) The person’s response was one of intense fear, helplessness or horror” (DSM-IV).

The events that generate trauma can have natural causes, like earthquakes and hurricanes, but this workshop focuses on trauma caused by other people. Such trauma can be personal (child abuse, rape, domestic abuse, etc.) or communal (e.g. terrorism, hate crimes, war). Trauma can include physical, sexual, economic, emotional, financial, and spiritual violations, as well as less threatening abusive situations such as sexual harassment. The essential experiences of trauma include: loss of control and power, violation of boundaries, lack of safety, difficulty with trust, deregulation of affect, disconnection from one’s body, vulnerability, concentration or memory problems, and spiritual/community disruption. One of the key factors in trauma, whether caused by nature or humans, is its long-term effects on survivors.

**The Impact of Trauma**

Reactions to trauma are extremely varied and individual. Mary Harvey (1996) explains that reactions are determined by the following factors:

- **The person**: background/characteristics; history of trauma; functioning and coping abilities; perceptions of the events; cultural, religious, racial, sexual orientation variables
- **The events**: severity, duration and frequency (i.e. a one-time event like rape, or a chronic series of events, as in domestic abuse); whether shared with others or experienced alone; degree of violation
- **The environment**: the physical and social environment in which the trauma took place; how the community responded after the trauma; community attitudes and values; physical and emotional safety

During or immediately after the traumatic event(s), common reactions, mediated by the individual’s survival instincts, are characterized as fight, flight, or freeze. In the long run, the impact of trauma can range from invisible or intermittent to profoundly effecting daily functioning. Trauma can affect survivors on many levels and in many different (and sometimes contradictory) ways:

- **Physical** (injuries or somatic reactions, bad health, nightmares, neurobiological reactions, difficulties in daily functioning)
- **Cognitive** (disruption in mental functioning, perceptions, views of self, others or the world)
- **Psychological** (intermittent or ongoing feelings of shock, fear, hopelessness, shame, loss guilt, grief, anxiety, etc.)

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• Relational (disconnection from others, mistrust, withdrawal, neediness)
• Spiritual (loss of faith, strengthening of faith, meaning-making)

Some survivors suffer from Post Traumatic Stress Disorder, which can manifest as intrusive recollection of the events, numbness, or dissociation from the events. Especially when inflicted by other people, trauma can lead to loss of control and of trust in oneself, others, community and the possibility of order in the world.

By understanding the definition and impact of trauma, clinicians can better understand the stages of recovery and the possible uses of mikveh for Jewish survivors.

The Stages of Recovery and the Uses of Mikveh

The recovery process also varies, but often progresses through a series of stages which can continue throughout the lifespan in an ongoing process (Judith Herman, 1992). It is important to note, however, that these stages of recovery are not necessarily linear; survivors may experience them out of order, move back and forth between them, etc.

1. Safety and Self Care: During this state, the survivor focuses on creating physical and emotional safety, a safe environment, secure finances, safe relationships, stable physical health, and healthy strategies for dealing with emotions. Priorities during this stage, which can take place of a significant span of time, include comforting oneself, resolving disruptions from trauma, and coping with stress.

   During this stage, individuals may come to the mikveh specifically for the purpose of assisting in the process of recovery. They may also come for other reasons and not identify that they are survivors or still in an unsafe situation. The function of the mikveh experience at this point is to provide privacy, respect and dignity, while also making information available, if the immersee requests it, or even if she doesn’t. It is helpful to make domestic abuse and sexual assault resource lists available in the mikveh preparation rooms, to let the immersee know that help is available and mikveh staff is aware that domestic and sexual abuse is a concern in the Jewish community. Ideally, mikveh staff should also be trained in recognizing signs of abuse and trauma and supporting women implicitly and, where appropriate, explicitly.

2. Remembrance, Mourning, Integration: Once safety has been established, the survivor may be ready to explore the impact of the traumatic events. This can involve retelling the story of what happened, grieving physical and emotional losses, and continuing to establish self-care and comfort. Individual and/or group therapy are often critical supports during this stage.

   Coming to the mikveh during this phase can be part of the letting go, release, relief and unburdening process of dealing with trauma. Specific immersion ceremonies for Healing, Recovering from Abuse, Recovering from Sexual Assault, and Gratitude, to name a few, can help with this process. Even if the details of the trauma are not discussed, the ritual can bypass the rational mind and connect survivors to their inner awareness of being made in the divine’s image.

3. Reconnecting with Others: This stage is marked by a new understanding of the effects of the traumatic events. Although the reality of the trauma remains, the traumatic impact becomes less disruptive and the survivor, knowing that healing will be ongoing, has more reliable coping strategies and more ability to expand to life and connect with others.

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Individuals may return to using the mikveh for routine purposes, or for celebratory or healing times that are not focused on the events of the trauma, though they may still wish to acknowledge their trauma and its effects.

What Happens at the Mikveh

[Note: The description below describes the mikveh experience at Mayyim Hayyim, the mikveh in Newton, Massachusetts that piloted this training. Ideally, local mikvehs will provide resources and information or supplementary information for this section of the training.]

At Mayyim Hayyim, “Mikveh Guides” greet all visitors, explain the immersion process to them, answer their questions, and provide support. When appropriate, Mikveh Guides witness immersions and let immersees know that the immersion was kosher (complete). Many first-time visitors to the mikveh ask Mayyim Hayyim for a tour before they immerse.

There is no need for adornment or artifice in the mikveh. So, traditionally, when you immerse in the mikveh, you remove all physical barriers between yourself and the water. Before you enter the mikveh you clean your body. Mayyim Hayyim provides visitors with everything they need—soap, shampoo, nail polish remover, combs, and towels—in private preparation suites.

To have a meaningful mikveh experience you must remove spiritual barriers as well. To connect the physical with the mental, emotional, and spiritual, Mayyim Hayyim provides visitors with seven kavanot—intentions—to help them slow down, center, and be present in the moment. To prepare to use the mikveh you may also say traditional prayers or meditate.

Seven steps lead into the warm water of the mikveh. It is customary to immerse fully—covering every strand of hair with water—a total of three times. According to tradition, a brachah—blessing—is recited after the first immersion. You may add private prayers or songs between immersions. After the last immersion, some people say the sheheheyanu blessing, in which you give thanks that you’ve been able to participate in this event.

** Trauma survivors coming to the mikveh may wish simply to participate in the standard ritual, but they may also (or instead) want to engage in a ceremony specific to their circumstances. Examples of such ceremonies can be found in the Appendix."

Referrals to the Mikveh

As with all care, clinicians should use their basic clinical guidelines to evaluate whether to refer a client to the mikveh. Indicators may include the client’s connections to their sense of spirituality, their relationship to Judaism and Jewish practices, their stage of recovery, and the clinician’s own motivations for suggestion ritual immersion. There is not necessarily a correlation between one’s observance level or religiosity and a desire to use the mikveh. Clinicians should not make assumptions about a client’s interests in visiting the mikveh prior to having a conversation about it. It is important to connect with the local community mikveh to understand its orientation and the training its mikveh attendants receive, in order to assess its sensitivity to abuse/trauma survivors. Within appropriate boundaries, it may be useful to help clients plan their ritual, as well as what will happen after the ritual.

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To consider various implications and scenarios for the use of mikveh in addressing trauma, participants should discuss the case study below, and then brainstorm responses to the following therapeutic questions.

Case Study

Miriam is a 35-year-old Jewish woman who is coming to treatment for the first time before her upcoming marriage. She is worried and anxious because she “doesn’t want to screw this up.” Miriam reports that she grew up in a family where her father was always putting her mother and the children down, and her mother never spoke up. Miriam herself was sexually abused by a neighborhood boy at the age of 16. She never told anyone about this because she felt that no one would believe her since he was president of the youth group at her synagogue. She suffers from insomnia and disordered eating, and says that she feels alone and isolated, not trusting men because of her father and not trusting women because of her mother.

Therapeutic Interventions: Miriam needs a fuller evaluation, including her connection and disconnection with Jewish community; the ways that she finds peace, solace, and meaning; and her assumptions and stereotypes (e.g.; Jewish boys don’t do that). First stage support should include symptom management; psychoeducation about the impact of violation, including the emotional violations of mother and father and the sexual abuse; support in becoming more self caring and respecting of her body and building relational trust; connections with other survivors through group treatment to break isolation.

Mikveh can be a resource for Miriam in many ways:

1. As Miriam begins her healing process, the mikveh can serve as a place for transforming negative connection to her body and accessing the holiness of her spirit, regardless of sexual violation; and as an environment of peace and calm to assist in transitioning from inner turmoil and negative self talk to reclaiming a healthier outlook for herself as she finds more peaceful sleep patterns and better eating patterns. She would not have to identify why she is using the mikveh, though the Mikveh director could be a resource for helping her to plan, anticipate, and be more in control of her experiences. This planning can be an important part of overcoming the impact of childhood trauma for young people who did not have control of their environments.

2. As Miriam explores the ways in which sexual violation impacted her connection with herself, her body, and her sexuality, she can choose to release, reclaim, and renew herself through specific rituals written for and by survivors of abuse.

3. As Miriam enters her new marriage, she may choose to immerse to mark the transition from her childhood to adulthood and ‘starting anew.’

4. Miriam may choose to use the mikveh in an ongoing way for monthly immersions, marking other sacred times or continuing to release and unburden prior traumatic memories as they may reappear over the course of her lifetime. For survivors of child sexual abuse, memories and emotions can re-surface when they have a child who reaches the age they were when abuse occurred. If patterns of abuse begin to emerge within the marriage, the mikveh can continue to be a resource for courage, peace and space.
Therapeutic Questions

1. I think that the mikveh would be a wonderful resource for my client. How do I raise the idea?

As with any therapeutic intervention, a clinician must consider their own motivation for making a suggestion and the power that their suggestions might hold for their clients. Since ritual has a strong potential for helping and healing, it can be helpful to engage the client in brainstorming about rituals in general and the use of mikveh in particular. Be aware that clients may have strong sentiments about the use of mikveh: some may find it too religious, some too foreign, some anti-woman. However, it is important to remember that you do not have to believe in something wholeheartedly to try it, or for it to have meaning. If you are not Jewish, your own feelings may be more neutral, but understanding the cultural context is important. Likewise, while many mikvehs are welcoming for a wide array of usage, some are open only for traditional purposes. A list of community mikvehs where visitors have found a warm welcome and the freedom to explore the ritual of immersion on their own terms can be found in the Resources & Consultation section of www.mayyimhayyim.org.

2. My client heard about the mikveh and definitely wants to go. She would like me to be there as a witness since she has been a client for several years. What should I do?

We do not recommend that a therapist be a witness for an immersion. Since the immersee enters the water naked, it breaks therapeutic boundaries. It is important to explore the meaning of this request: Is it because you know them and they would feel safer with you there? Is it because they are afraid of the unknown environment and their own reactions? Is it because they would like you to be a part of this extended circle of healing?

We have found that it is most helpful if the therapeutic relationship offers a place of exploration, planning and debriefing about the mikveh experience. The mikveh staff are the appropriate people to shepherd the client through the actual experience, though it is important to find out what kind of experience they have with survivors to make sure that the client will be safe. Coming to the mikveh and connecting to a community resource can expand the survivor’s world and enhance their connections beyond the therapy relationship.

In specific situations, you might decide that it makes clinical sense for you to accompany a client on a pre-immersion tour. If you decide that it makes clinical sense to accompany a survivor to an immersion, you should wait in the reception area while the actual immersion takes place.

Should a client request this kind of personal connection, we recommend that you discuss this in consultation with your peers, your supervisor, and/or the director of the mikveh.

3. My client would like to immerse in the mikveh, but I don’t think it is therapeutically wise. What should I do?

Explore with the client their hopes for the immersion experience so that you can normalize and validate their desire to use ritual for healing, make meaning, etc. It is important to understand your own reactions and concerns. If you are afraid that this experience may increase dissociation, or other symptoms, you can help your client plan for this eventuality. Be transparent about the factors that can affect the healing process, as well as the importance of safety and self-care (the client may already have thought about this and mobilized their own resources to address it). You can encourage the client to think more thoroughly about the implications of the mikveh with you and to plan it in a more paced way. For instance, you might suggest that the client consult with the mikveh director about how other survivors have ensured that the environment feels

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safe for them. It is also possible to create a ritual that is less threatening, for instance using handwashing or using the kavanah (intentions) while being dressed and immersing only one’s feet. Helping the client take control of the process and collaborate with the mikveh staff is in and of itself an antidote to the experience of violation, trauma and abuse.

4. I am seeing an Orthodox woman for treatment for psychological issues secondary to infertility. She visits the mikveh monthly and for the first time mentioned that she saw flier about abuse in the dressing room and has begun to wonder whether her husband is emotionally abusive. He insists their fertility issues are her fault and sometimes insists on having sex several times a day during her fertile times, even if she doesn’t want to. This came as a shock since I have been seeing her for several years and she never mentioned this.

It is quite common for survivors not to talk about their abuse for a long time. This can happen for many reasons. One is not naming the experience as abuse. Since the client saw the flier, it gave her some insights about her experience. She may also have felt ashamed to talk about it, thinking that it might be lashon ha-ra, or a shanda. She could also have been minimizing the effects of her husband’s reactions so as not to disrupt shalom hayit, or because she needs his economic support and they have a good family life in other ways.

This situation can occur in heterosexual relationships or homosexual relationships. There may be still be childbearing concerns, emotional abuse, and forced sexual relations, whether possible conception is a factor or not. Validation, normalizing common reactions, universalizing the experience and appreciating the sharing will help survivors feel comfortable, safe and understood.

In any event, it is often a shock to therapists to find out such basic information after having treated someone for several years. It can stir up clinical questions, professional doubts and disruptions of one’s own world views, and it is important in these cases for the clinician to get the help and support they need.

Clinician Self-Care

As with all therapeutic situations, clinicians need to be aware of their own backgrounds and reactions to their clients and to the material they hear in treatment. In working with Jewish clients, ritual, and mikveh, their responses to their own Jewish identities or their client’s Jewish identities can be activated, as well as their comfort level with offering rituals in addition to more traditional psychotherapy. These topics should be part of their clinical supervision/consultation and self care routine. Jewish therapists may wish to consider using mikveh as a resource for themselves.

At this point, participants may wish to share their personal responses to the training.

HOME REFLECTIONS

Suggested Readings

“50 Ways Not to Leave an Abusive Spouse” Hadassah (September 1998),
“Surviving Abuse,” Jewish Woman (Spring 2003)
“No Ordinary Bath: The Use of the Mikvah in Healing From Incest” (Ritualwell.org)

Mayyim Hayyim ceremonies for Healing, Recovering from Abuse, Recovering from Sexual Assault, Gratitude

WRAP UP

Evaluation

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