Developing Resiliency in Treatment – Making the Crises of Recovery an Opportunity

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Healing Trauma Through Self-Parenting; The Resilient Woman; The girly thoughts 10 Day Detox
Introduction

• How to provide motivation for the work of treatment, and to instill hope that recovery is possible?

• How do we help our clients understand the paradox of recovery:
  • *Only you can do it, but...*
  • *You cannot do it alone*
• We can do this by developing our ability to be curious about what is right in our clients, and help our clients also be curious, about what is right with them.

• Then we assist them in making these skills/values/beliefs conscious.

• As we help them make their resilience conscious...
We help them...

- Understand the best that is in them....

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How do we begin?

- ... by letting them know....We understand their pain
Part I
What is Trauma?

“We were exiles from reality that summer. We were refugees from ourselves.”

— Chris Cleave, Little Bee
Because Pain That is Seen...

- Can be healed...
Big and *Little* Trauma

- There is the big trauma of major events, death, disaster, war, murder, accidents and natural disasters.
- There is also a smaller trauma that is just as powerful, the accumulation of experiences that the child of an alcoholic or narcissistic parent will experience as well as other forms of child abuse or neglect, illness, an unfaithful partner, being fired.
People generally don’t suffer high rates of PTSD after natural disasters. Instead, people suffer from PTSD after moral atrocities. Soldiers who’ve endured the depraved world of combat experience their own symptoms. Trauma is an expulsive cataclysm of the soul.

— David Brooks
Many Forms of Trauma

- Acute Stress Disorder
- Post Traumatic Stress Disorder
- Complex Trauma
- Secondary Trauma
- Intergenerational Trauma
Acute Stress Disorder

• Acute stress disorder is the normal response to a horrific event. Acute stress disorder usually occurs within two days of the traumatic event and lasts for a maximum of four weeks.
Post-Traumatic Stress Disorder

- Post-traumatic stress disorder is the repeated re-experiencing of a traumatic event through intrusive recollections of the event. Flashbacks, dreams, or intense physical or psychological distress are common.

- Four symptom clusters:
  - Avoidance
  - Re-experiencing
  - Negative changes in mood and cognition
  - Arousal
  - *increasing drug and alcohol use*
Complex Trauma

Trauma also develops from multiple incidences of abuse and neglect during childhood and adolescence most often by caregivers (van der Kolk 2003).
Secondary Trauma

- Secondary trauma is a condition felt by those who have witnessed a tragedy, even on TV, or experienced by those who seek to help others, such as first responders, and other helpers: counselors, parents.
- Can trigger memories of personal trauma
- Often handled by anesthetizing through drinking or drugging.
Historical or Intergenerational Trauma

- Historical or intergenerational trauma has been defined as the “cumulative emotional and psychological wounding across generations, including ones’ own life span”, (Yellow Horse Brave Heart 2005).
Part II
What are the Signs of Trauma?

- God has mercifully ordered that the human brain work slowly; first the blow, hours later the bruise.

  Walter de la Mare, The Return
Signs of Trauma

Some of the signs of trauma are:

Numbing, detachment, flashbacks, bad dreams, lack of recall of traumatic events, unable to have full range of feelings, unable to feel love, feelings of dread and doom, recurring thoughts, reliving the event, significant anxiety, anger outbursts, difficulty concentrating, hyper vigilance, startle response, shame guilt, stigma suicidal thoughts
More Signs of Trauma

- Problems in regulating moods, self-injury, helplessness, excessive sexual behavior, *alcohol and drug* use, motor restlessness, illness – psychosomatic or actual, difficulty in developing self-soothing behaviors, preoccupation with relationship with perpetrator, feelings of unique relationship with perpetrator, giving perpetrator total power, discord in intimate relationships, putting self in dangerous situations, loss of spiritual faith, thoughts of revenge, and isolation from others.
Organizing Trauma Information

- Exposure
- Experience of Trauma
- Changes in Mood Following Trauma
- Frequent avoidance of reminders associated with trauma
- Negative changes in thoughts/mood that occurred/worsened following trauma
- Changes in arousal that started or worsened following a trauma
- Increasing alcohol and drug use

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Exposure

Exposure to that involved:
  • death/threatened death,
  • actual/threatened serious injury, or
  • threatened sexual violation.

Events were experienced in following ways:
  ◦ The event was experienced by the person.
  ◦ The event was witnessed by the person as it occurred to someone else.
  ◦ The person learned about event where relative/friend experienced actual or threatened violent or accidental death.
  ◦ The person experienced repeated exposure to distressing details of an event.
Experience of Trauma

1. Unexpected/expected reoccurring, involuntary, intrusive upsetting memories of trauma

2. Repeated upsetting dreams where the content of dreams related to the trauma

3. Dissociation (ex: flashbacks) where person feels as though the trauma is happening again

4. Strong/persistent distress upon exposure to cues inside or outside of person's body connected to trauma

5. Strong bodily reaction upon exposure to a reminder of the trauma
Frequent avoidance of reminders associated with trauma, as demonstrated by:

• Avoidance of thoughts, feelings, or physical sensations that bring up memories of trauma

• Avoidance of people, places, conversations, activities, objects, situations that bring up memories of trauma
Negative changes in thoughts/mood that occurred/worsened following trauma:

1. The inability to remember an important aspect of the traumatic event

2. Persistent, elevated negative evaluations about one's self, others, or the world

3. Elevated self-blame or blame of others about the cause or consequence of a trauma

4. A negative emotional state (for example, shame, anger, fear) that is pervasive
5. Loss of interest in activities that one used to enjoy

6. Feeling detached from others

7. The inability to experience positive emotions (for example, happiness, love, joy)
Changes in arousal that started or worsened following a trauma:

1. Irritability or aggressive behavior
2. Impulsive or self-destructive behavior
3. Feeling constantly "on guard" or like danger is lurking around every corner
4. Heightened startle response
5. Difficulty concentrating
6. Problems sleeping
7. Self-medicating
Part III
The Cost of Trauma

• Misdiagnosis
• Trauma Triggers
• Trauma Reenactments
• Addiction
• Codependency
Misdiagnosis Leads to:

• Treating something else other than trauma
  • Assessing and medicating trauma as Learning Disability
  • Heart attack

• Missing major present risks

• Missing developing addiction
Trauma Triggers

- Trauma triggers are events or experiences that remind us of our earlier trauma, igniting the feelings that we had when we first experienced the trauma.

- Triggers can be anything a word, a look, a smell that unleashes floods of emotion. They can be internal such as a pain or external such as a word.

- Trauma Triggers set off an alarm in the brain, the whole body responds.
Trauma Reenactments

• Trauma reenactments are the recreation in childhood or adulthood of painful scenarios and outcomes that we experienced as a child.

• Reenactments are unconscious manifestations of our trauma that serve to reconfirm our earlier negative beliefs and often lead to a flood of emotions.
Where do Trauma Reenactments Occur?

- Anywhere including:
  - 1- In the family
  - 2- In your office
  - 3- With co-workers or supervisors
  - 4- In intimate relationships
  - 5- In school
  - 6- In Bars and social settings
  - 7- In residential care:
    - Hospital
    - Residential treatment center
    - Jails, prisons
    - Nursing homes / rehab facilities
Who is at risk for a trauma re-enactment?

- Anyone who has experienced trauma:
  - Staff
  - Clients
  - Inmates
  - Those being arrested
  - Children
  - Parents
  - Adolescents…! 
  - Those out for a good time …
Part IV
A Fatal Attraction

The Intersection of Trauma and Alcohol and Drug Use

One thing I learned in Alanon is that you’ve got to face the music because it just grows louder when you ignore it. –Vicki Covington
Many Reasons Why People Drink

• I drink to make other people more interesting.
  • Ernest Hemingway

I like to have a martini,
Two at the very most.
After three I'm under the table,
after four I'm under my host.

• Dorothy Parker, *The Collected Dorothy Parker*
• To the bottle I go
  To heal my heart and drown my woe
  • JR Tolkein

• First you take a drink, then the drink takes a drink, then the drink takes you.
  • F Scott Fitzgerald
Why even causal alcohol and drug use is a problem

- Even moderate amounts of alcohol affect the cortex, slowing thinking, just a little.
- When triggered, a person needs to use all of their resources, particularly their rational, problem-solving self.
Alcohol Use not Recommended:

- For anyone who is in trauma treatment any alcohol use is not recommended as alcohol can:
  - Slow thinking,
  - + act as an irritant, exasperating excitability

- For anyone who has had a bad day, alcohol is not recommended due to it’s re-bound effect.
Re-thinking the Diagnosis of Trauma

- Consider adding Alcohol Use exasperating Negative Consequences. May help focus clinicians on the problems of even small amounts of alcohol on the traumatized brain
The 5 Signs of Addiction—
current schema:

• Obsession—Addictive Behavior is usually compelling and consuming—life is arranged around the addiction, there is an anxiety, or excitement in preparing for the next “use”

• Negative Consequences—Harmfulness to the individual develops and there is a limiting of other sources of gratification. The person feels that this “usage” is essential to his or her functioning. There is upset or feelings of loss if usage is contemplated.

• Use Despite Negative Consequences- Relationships, Work, Finances, Psychological Health, Judgment and Behavior, Physical Health

• Lack of Control—willpower is not enough to control the pattern of use

• Denial—Usually the following two things are denied:
  - that the alcohol’s use is a problem that they cannot control
  - that the negative consequences in their lives have any connection whatsoever to the alcohol use
Part V
Where do we each first learn to deal with trauma?

Our Families…….

• *Loneliness and the feeling of being unwanted is the most terrible poverty* –Mother Theresa
Alcoholic Families

Alcoholic families are behavioral systems in which alcoholism and alcohol-related behaviors have become central organizing principles around which family is structured.

The introduction of alcoholism into family life has the potential to profoundly alter the balance that exists between growth and regulation within the family. This alteration most typically skews the family in the direction of an emphasis on short term stability (regulation) at the expense of long term growth.

The impact of alcoholism and alcohol related behaviors on family systemic functioning is most clearly seen in the types of changes that occur in regulatory behavior as the family gradually accommodates family life to the coexistent demands of alcoholism.
Wet – Dry Model

Behavioral Sequence

Family Rules Governing

<table>
<thead>
<tr>
<th>WET SIDE</th>
<th>DRY SIDE</th>
</tr>
</thead>
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How our daughters make sense of our ‘girly thoughts’ …

Source: Lily Myers “Shrinking Women” http://www.youtube.com/watch?v=zQucWXWxp3k
Codependency A
Positive Adaption

• There are many ways to react to trauma. Codependency is one of the most creative and in some ways least destructive adaptations. Essentially a individual learns to displace their needs on others as a way of trying to get their owns needs meet indirectly. We try to prove we are lovable by compulsive caretaking.

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Self-Soothing Exercise

When in doubt ... BREATHE
Diagram a family

- Pick a family you are working with:
  - What behaviors are found on the WET side?
  - What behaviors are found on the DRY side?
Adverse Childhood Experiences (ACE)

- Childhood trauma does not come in a single package

  Tirumalai S. Srivatsan

- Has the child experienced:
  1. Emotional abuse
  2. Physical abuse
  3. Neglect
  4. Lack of support within family
  5. Sexual abuse
6. Loss of a parent
7. Domestic violence
8. Substance abuse
9. Mental illness
10. Incarceration of a parent ….

Before age 18...?
Traumatized children and adolescents

- Expect to be hurt

- Respond to hurt by:
  - Aggression
  - Freezing
  - Not appear to care
  - Feeling defeated, but so what....!
  - Internalizing rage = depression

- Solve problems by:
  - Avoiding emotional experiences—including positive ones
  - Use alcohol and drug to assist them in this goal
They become *Hypervigilent,* but *Easily misinterpret* events, expecting the worst.

They define themselves *Negatively.*

They *loose trust in caregivers,* but are caught in a *crises of loyalty* with their family, and will keep the *secret.*

They give up feeling that someone will look after them, and make them feel safe.
Sample questions to assess stressors as a child

- Building on ACEs Criteria

- I. Trauma you experienced within your family:
  Verbal abuse. Did a parent or other adult in the household often or very often... Swear at you, insult you, put you down, or humiliate you? or Act in a way that made you afraid that you might be physically hurt? No ___ If Yes, enter 1 __

- II. Further trauma you experienced within your family:
  Being a caretaker. As a young child were you responsible for younger sibling(s), needing to care for them for extended periods of time without an adult available? No ___ If Yes, enter 1 ___
III. Trauma you experienced within your community:

Sexual abuse outside of your home. Did you experience sexual abuse by a member of your institutional community – a member of the clergy, a teacher, or other member of an organized group to which you had to interact?
No ___ If Yes, enter 1 ___
Do your own quick ACE Assessment

How many criteria do you meet...???

How many criteria are met by your family example?

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ACEs lead to:

- Social, Emotional, and Cognitive Impairment
- Adoption of High Risk Behaviors
- Disease, Disability and Social Challenges
- Early Death
- Alcohol and drug use to try to alleviate pain
Part VI
Interventions

• Forgiveness is giving up the hope that the past could have been any different….

Oprah Winfrey
What to do?? – Teach Self-Parenting – what families and individuals can do
A family in harmony will prosper

Asian proverb
Within the Family: Create New Family Traditions

- Connection without alcohol/drug use or drama
  - Predictable ways of being together
    - Dinner…!
    - Shared free time
    - Worshipping together
  - For couples—making time / creating appointments to:
    - Speak
    - Work on bills
    - Have alone time
Paradoxical Interventions

• The careful art of re-framing....

• Carefully calculate:
  • Prescribe the symptom
    • Not ready to stop using
    • You look so sad
  • Handle the blow-back
b. Individual —

- To thine own self be true, then thou can
- And it must follow as night follows day
- Thou canst not be false to any man
Teach Self-Soothing

- If we don’t want folks to use, to do what they are doing, we need to teach them to soothe themselves, and pretty immediately

- Self-soothing exercises are the answer
  - Quick
  - Immediate
  - Easy to teach
  - Easy to use—but requires practice
Why Begin with Self-Soothing?

- Immediate
- Works with triggers
- Helps them not self-medicate with drugs and alcohol
- Allows space for the person to
  - Feel their feelings
    - Knowing what caused it
      - Remembering feelings are temporary
      - Remembering event is in past, it is just being remembered in the present
      - Allow them to move *through* and out of the pain
Keys to Dealing with Triggers

- Learning to avoid situations in which they may occur
- Staying sober
- Remembering they are temporary
- De-sensitization
- Grounding
- Self-Soothing
Self-soothing

• Sometimes your joy is the source of your smile, but sometimes your smile can be the source of your joy
  • Thic Nhat Hanh

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Self-Soothing Exercise

Grounding Exercises

• When triggered
  • Find two objects from three different colors in front of you.
    • Find two blue things
    • Two red
    • Two green
    • ..or any other color combination
    • Breath deeply as you search for them
    • …. Give the mind something else to think about

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Resiliency

• Resiliency is the essence of a global positive framework....

• Asa Don Brown  *The effect of childhood trauma on adult perception and worldview*
c. Create a Resiliency Focus

Resilience = Reparative + Restorative Experiences
Goal of Resiliency Work

.... to be *two*-handed
Self-Assessment of Protective Factors

- The more protective factors the less the client needs to be resilient
- The less protective factors the client has, the more resilient they need to be
- Sample Protective factors:
  - Growing up in a 2 parent family
  - Active membership in a religious community
  - Outgoing personality
- Where are your clients?
- Where are you?
Teach Resiliency Skills

• Provides support for dealing with trauma
• Expands sense of self
• Make conscious skills that are useful in all areas of life
Resiliency is built through shaping stressors so that they are:

- Predictable
- Controllable, or
- Escapable
• We need to *consciously* develop our resilience.

• You work out..?

• You watch your weight..?

• You can develop your resilience -- *consciously*...!
7 Step Program to Develop

- Resilience
Step One

—Make Your Crises Meaningful: Choose to Develop Conscious Resilience

A crises is a terrible thing to waste

Paul Romer
Step Two

•—Uncover Your Hidden Resilient Voice: Use Your Own Wisdom to Determine What Is Right for You

• Do not fear your inner light. Carry it into a dark world  -- Lailah Gifty Akita
Step Three

—Create Helpful Boundaries: Take Charge and Stop Setting Yourself Up

A broken soul doesn’t invest in boundaries because the world has crossed them, without mercy — Shannon L. Alder
Step Four

—Protect Your Heart:

Love Resiliently

Above all else, guard your heart, for everything you do flows through it – Proverbs 4:23
Step Five

—Become Strong in the Hurt Places: *Heal Your Wounded Self*

*We accept the love we think we deserve*

-- Stephen Chbosky
Step Six

—Think Positively:

It’s the Best Revenge

• Find a place inside where there is joy; the joy will burn out the pain – Joseph Campbell

• It’s not your job to like me, it’s mine – Byron Katie
Step Seven

—Develop Gratitude for Who You Are and What You Have Learned

Now I walk in beauty, beauty is before me, beauty is behind me, above and below me -- Navajo Prayer

Dr. Patricia O’Gorman, Ph.D | author of The Resilient Woman | www.patriciaogorman.com | www.thepowerfulwoman.net
Resiliency is Built Through--Restorative Experiences

Restorative experiences are those that expand our sense of self through giving to others. Activities such as membership in Alcoholics Anonymous and Al-Anon are good examples of restorative experiences. But other service groups that provide for helping one another such as church support groups are also restorative experiences.
Reparative Experiences

- Reparative experiences are those we give ourselves. Learning to self-parent is a good example of a reparative experience.

- Rebuilding after a personal crisis such as being fired from a job, going through a divorce where we work on reestablishing a sense of purpose and self-worth is a reparative experience.
Self-Soothing Exercise

Sensory Stimulation

- Smell a pleasing scent:
  - Scented oil
  - Candle
  - Perfume
  - After shave
  - Favorite food
d. The Helper’s Role

Resiliency is nurtured through a responsive caregiver who is available and able to support the adolescent to understand / respond in a resilient manner

—Resiliency can enhance biological integrity

The wound is the place where light enters you—Rumi
Giving Suffering Meaning

Victor Frankl MD wrote *Man’s Search for Meaning* (1946, 2006) wrote about his experiences in the concentration camps and came up with his theory that one of the human needs most important to men is the need to give suffering meaning.

- This is also the most important task facing trauma survivors.
- Important to surface so that codependency is not the only alternative.
Meaning of Life

• According to Dr. Frankl there are three things that give meaning to life:

1. The gifts we give the world like our skills and talents.

2. Loving some one unconditionally, like we love our children.

3. The way we face unavoidable suffering.
Self-Soothing Exercise

Think Puppies

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Self-Soothing Exercise  Sensory Remembering

• Think of how good it feels to:
  • Pet your puppy
  • Cuddle your cat
  • Ride a horse
  • Swim
  • Run
  • Rubbing cream on your skin

Gives the mind a positive sensory memory – no words needed

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You need to be a full well to have others drink from you -- Phil Diaz, Patricia O’Gorman
Your goal... Helping Others Meet Themselves

Where they want to be -- as opposed to where they are ......
Helper's Mindset

- Be willing to embrace a NEW way of working
- Try on a new way of thinking
- Be courageous enough to see:
  - yourself and
  - others
  - ... All in *a positive light*
How to do this..??

Be interested, curious, not knowing

Ask clarifying questions:
  ▪ Can you tell me more about that?
  ▪ What happened then?
  ▪ Who was there when that happened?
  ▪ Can you tell me what you did?
  ▪ Was what you did helpful?
  ▪ How did that make you feel?
Ask…

- **What**
- **When**
- **Who**
- **How**

- Avoid *Why* Ask questions --
  - usually these are *personal* judgments in disguise
Don't join the *problem chorus*:  
Why did you do that?  
Can't you remember anything?  

Focus on what is *right*:  
I can see that you love your children and even your husband.  
You really stay with it!  
Wow… that was so caring!  
That takes guts!  
That was tough to do and you did it!

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Speak about the problem as *separate* from your client-- it is a *curiosity* that commands an explanation:
When you want to use, that’s like you’re being *taken over*.
That must be hard on who you really are, when you yell so much.
When you feel like hitting your kids, you are really not acting like yourself, are you?
When you want *to use*, that’s not how you want to handle things, is it?
Become part of the solution **chorus** by:

- Having your client know and verbalize their strengths so they can combat those urges
- Use their strengths *consciously* to make their life easier
- Recognizing when they are, and are not, acting according to the best that is in them

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Self-Soothing Exercise **Release Tension**

**doe-ing**

- Beginning with your head gently tap, noting where you are holding more tension – can be used alone or combined with the following full body work-out

- With fingertips tap your face

- Now your neck—gently

- Move to trapezoids and pound the heck out of these tight muscles

- Firmly tap your chest

- Now your arms up and down 3x

- Round your back and tap up and down your spinal column

- Pound your buttocks, but tap your legs up and down 3x,

- Slap the button of your feet and shake it all out

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Learning to Listen

The *key* to developing resilience ....

Learning to listen to your inner dialogues—resilient inner voice

Exercise-- who do you hear?

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Self-Soothing Exercise

One minute Meditation

- Set your phone alarm for a minute
- Sit comfortably in a chair
- Choose a neutral 2 syllable word – not your ex’s name
- Either close your eyes, or find a soft focus on the wall
- To yourself, say one syllable as you breath in and the other as you breath out
- Do this for a minute
- Gently leave this space
- Notice how you feel.. Repeat several times a day if needed

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Because life and recovery are messy ...

Patricia A. O’Gorman, PhD
12 Principles of Healing From Trauma and Codependency

- Adapted from:

  - *Healing Trauma Through Self-Parenting* (2012)

  - By

  - Patricia O’Gorman, PhD and Phil Diaz, MSW
Let's face it, it took awhile for you to get where you are. Likewise your recovery will also take time. Give yourself the gift of allowing this process of self-parenting to unfold for you. Know that it can’t be rushed. It’s a process, not an event. What is important is that it has begun.

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Healing like the development of trauma and codependency is not a rational process. It involves all parts of the body, including the brain, and spirit. The healing of trauma and codependency is more like the healing of a bad injury, proceeding more randomly than hope for but proceeding in its own way to healing and joy.
Our body and mind are connected. What we change in one area, changes the other. So even though you may live in your heads, your body knows what is happening. This is important for trauma survivors to remember the body and the mind store experiences. That is why triggers can be physical as well as mental. This needs to be respected and understood.
4 Reparative, Restorative, Self-Soothing experiences are key

• In order to heal we need to be active, not just in terms of insight garnered through therapy and meetings, but through actions in which you learn to calm yourself, and through experiences in which your positive sense of self is restored, and negative attributes are repaired.
That old age: *fake it till you make it*, is key. Our actions can help to change our thinking. And our actions can keep us safe even if our thinking is still fuzzy. So carefully go out and make some positive changes.
6 Allow Rather than Force

- Sometimes you can become really excited about recovery and try to force change instead of letting it happen naturally. It is important to encourage the heeding of the lessons that need to be learned, garner insights, and take action, but only with a real respect for your feelings, slowing down and allowing for your true feeling to emerge.

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7 Own the Power of Our Nonverbal Communication

• As important as verbally understanding and communicating are it is equally important to embrace how our clients non-verbally process trauma and co-dependency.
Part of the recovery is to move back into your body, have fun and enjoy a healthy diet. Embracing DEF allows one to integrate mind, body and spirit.
Learning how to be in the present, to self-sooth and to slow one’s responses is vital to recovery. You need to learn to slow time to slow you actions and thinking to move away from the endless self chatter and learn to be present to your sensing mind.
10 We Can Give Our Trauma Away

- Spirituality is an important component to recovery. In developing a renewed belief in a force greater than ourselves, we can experience *transcendence*, the ability to be lifted above the present moment, in this way we can move past the pain of our trauma, and process what is occurring.
11 Sometimes We Need Pharmacological Assist

- Yes sometimes in dealing with trauma medication is needed. The severe stress associated with trauma can result in the brain requiring prescribed medication to bring it into balance.
As recovery takes hold and people begin to change others will notice this change and, perhaps, not like it. It is highly recommended that you do, not take it personally. We have to learn to be independent in our recovery; how others react to your getting healthy is not your business.
Navajo Prayer

- Now I walk in beauty
- Beauty is before me
- Beauty is behind me, above and below me
Thank You…!

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