TYBI E1: Undiagnosed: Misunderstood symptoms of PTSD

[00:00:00] **Rebecca:** Episode one undiagnosed PTSD trauma symptoms that often go overlooked and are misunderstood.

[00:00:10] Welcome survivors to Tuck Your Boobs In, the podcast that prepares survivors for the battle of overcoming trauma and helps you get your shit together after crisis.

[00:00:20] I'm, your host, Rebecca Cia and on this week's episode, we're going to talk about undiagnosed PTSD and what that really means. I'm going to reveal some of the often [00:00:30] overlooked symptoms of trauma and how trauma may be sabotaging your life. And finally, I'm going to share with you some of my own resources for undoing the damage that trauma has done and how you can take your life back.

[00:00:44] So go ahead, take a deep breath, Tuck your boobs in and let's get started.

[00:00:53] Most people who have experienced sexual violence or any other type of traumatic event are actually not [00:01:00] diagnosed with PTSD. And technically they don't meet the clinical definition in that giant reference manual, that's sitting on the bookshelf at your therapist's office. The DSM-5. It's the diagnostic and statistical manual of mental disorders. Volume five.

[00:01:18] Now, according to the national council for behavioral health, about 70% of US adults have experienced at least one significant traumatic event in their lives. [00:01:30] Yet, according to the American psychiatric association, only about three and a half percent are clinically diagnosed with PTSD. Now, this could be for many reasons, right?

[00:01:44] Including a lack of access to trauma informed care, or because so many of the symptoms of trauma aren't as straightforward as the heavily stigmatized symptoms such as nightmares and flashbacks.

[00:01:57] But before we get into those, I want to talk [00:02:00] about the clinical definition of PTSD . What is PTSD? Well, according to the DSM-V meeting, a complex set of criteria will earn you a diagnosis. Now there are five main boxes that must be checked off. Number one, exposure to a traumatic event. Number two, one or more intrusive symptoms,

[00:02:20] number three, one or more avoidance symptoms. Number 4 two or more changes in mood or negative feelings and number [00:02:30] five, two or more changes in arousal or reactivity. Now let me explain these in a little more detail.

[00:02:38] Number one, exposure to a traumatic event. A traumatic event is actually defined as. Death threatened death, actual or threatened serious injury or actual or threatened sexual violence. Now this can be either directly to yourself.

[00:02:55] It can be as you witness it occurring to someone else, it could also [00:03:00] mean learning that either a close friend or a relative had experienced actual or threatened violence or accidental death or. Having repeated exposure such as a police officer or a firefighter or even military

[00:03:14] who is often exposed to witnessing or hearing stories of these traumatic events.

[00:03:20] Number two, intrusive symptoms. So I want to talk to you a little bit about what intrusive symptoms are and How these might be showing up. So [00:03:30] intrusive symptoms are reoccurring involuntary, intrusive, or upsetting memories or thoughts of the event.

[00:03:39] It can come out as repeated or upsetting dreams or nightmares dissociation such as flashbacks or feeling as though the events happening again, or just completely disassociating from a current scenario. Especially after a trigger you can have strong and persistent distress cues connected to the event that are either inside or outside of the [00:04:00] body. And what that means is trigger responses.

[00:04:03] Number three, avoidance symptoms. So avoidance people with PTSD may avoid specific people, places, certain types of conversations, activities. Certain objects or situations that bring up memories at the event, they may also avoid trying to think about certain things.

[00:04:23] They may also reject or avoid feeling certain things, feeling a certain way, for example or they would [00:04:30] maybe even avoid certain physical sensations that might recall the event.

[00:04:33] Number four changes in thoughts and mood. Now, what this means is people with PTSD may experience a pervasive, negative emotional state. For example, they may constantly feel fear or be angry all the time or feel shame, but there's other symptoms in this category. . This could be something like an inability to remember important aspects of the event or persistent and [00:05:00] elevated negative evaluations about oneself.

[00:05:02] So things like I am not lovable or the world is an evil place, or I am damaged goods. This can also show up as self-blame or even blaming others aggressively for the consequences of an event. This could also include loss of interest in things that you used to enjoy.

[00:05:21] You can feel detached from others and inability to experience positive emotions. So forgetting what it feels like to [00:05:30] be happy or experience joy or even love.

[00:05:36] Number five changes in reactivity or arousal. And what this means is that with PTSD people often feel like they're constantly on guard or like danger is lurking around every corner.

[00:05:49] This can show up as hypervigilance, or you could have a difficulty concentrating, you can feel impulsive or have self-destructive behavior irritability or aggressive [00:06:00] behavior, just being angry all the time. And you could have problems sleeping where either you can't sleep at all, or all you want to do is sleep.

[00:06:10] Now you might be thinking, yep. This is me. I have PTSD. So why does it make therapist officially diagnose me already? Well, first of all, self-diagnosis is okay. Sometimes your therapists are not trauma informed or they only see you for an hour once a week. And sometimes we don't tell [00:06:30] them all. Either because we're embarrassed or because we forget, but there are a few more criteria that may actually be excluding you from the official diagnosis.

[00:06:40] Number one have the symptoms lasted for more than a month. Consider. But are they occurring at least six months after the trauma? Number two, are these symptoms creating a functional impairment? Meaning are you no longer able to do your job or participate in daily activities like [00:07:00] going grocery shopping or even household chores and last but not least.

[00:07:05] Is it possible that any of your symptoms or effects could be caused by or enhanced by any medication substances or any other illnesses or disorders or pre-existing conditions like add or ADHD, anxiety, medications, drinking auto-immune disorders or any other medical diagnosis. [00:07:30] Now this is often where people go under-diagnosed . What I mean by this is if you've experienced a crisis or trauma as an adult and are showing signs of PTSD, they may be dismissed by a therapist due to a previously existing condition. However, these previous conditions may also be the result of earlier trauma. Such as something that occurred in your early childhood, but even if you have no recollection of it, this often shows [00:08:00] up as ADD

[00:08:01] are you confused? Many therapists are too, because these are rigid clinical guidelines, but there are so many variables to trauma. So what can you do? What if you don't meet the criteria for a diagnosis, but you still know something isn't right. Even if you don't meet the DSM five clinical definition of having post-traumatic stress disorder, it doesn't mean that you don't have post-traumatic stress or trauma. And a lack of clinical [00:08:30] diagnosis does not mean that there is a no hope for you. In fact, in some. It's actually better. Look, I get it. It can feel like a huge relief. When we finally have a label to explain all the weird things that are happening inside our mind and messing with our emotions, our thoughts and behaviors.

[00:08:49] It's like a huge exhale. When we finally have an answer. It's validating and proof that we aren't going crazy or imagining it all. [00:09:00] However, oftentimes we are labeled with PTSD or any other diagnosis. It can actually hold us back and our recovery.

[00:09:08] This is because our subconscious minds are always on the lookout for reasons and rules and the way we categorize and organize these rules is with labels. Now these labels become our identities and actually have a major influence on our thoughts, beliefs, decisions, and actions so much so that [00:09:30] when we hold a belief that a label fits,

[00:09:32] our subconscious mind will make decisions and create scenarios as proof to support this belief. Which means constantly reminding yourself that you have PTSD may actually be prolonging your suffering and holding you back from healing. So it's okay. If you have been told that you don't have PTSD. I was told that I never fit all the criteria for a clinical diagnosis, [00:10:00] but I still knew something wasn't right.

[00:10:01] And I felt like I was losing my mind, like I was damaged goods and that the future was hopeless. And even that my body was giving up on me. I was worried because I thought that if I wasn't diagnosed, I wouldn't receive the right help or that no one would believe me when I was struggling. But what I eventually learned is that the diagnosis for trauma, it's not like a broken arm with a broken arm, you either have it, or you don't, it's either broken or it's not, [00:10:30] but traumatic stress happens on a spectrum. Most extreme events in our lives, provoke, a stress response. Someone cuts you off in traffic and you slam on your brakes, your heart races, and you may hold your breath.

[00:10:43] And then you start swearing at the other driver, like a trucker on any day but Sunday.

[00:10:48] This is our fight flight freeze response, kicking in and redirecting resources to different parts of your body to help you navigate the threat. But usually after a few minutes, we calm back down [00:11:00] and we go back to thinking about where to have lunch or the excuse we're going to give our boss as to why we are late. When we experience something more traumatic, such as rape or violence, the event may last longer than the split. Second, it took for that asset to cut you off in traffic. And the stress response likely will not dissipate as quickly. Now, as I mentioned, post-traumatic stress happens on a spectrum. There are different levels.

[00:11:29] So [00:11:30] level one is called acute stress. This occurs for about two to three weeks after a traumatic or emotionally charged event. In most cases with proper care, the trauma response dissipates dramatically after a crisis, and the nervous system begins to regulate itself. Your sleep cycle returned to normal.

[00:11:50] Your anxiety and irritability will dissipate. And over the course of the next few months, things will return to normal and you'll begin to feel like yourself.[00:12:00] Level two. This is post-traumatic stress. This is when severe symptoms last, longer than six months and meet all of the criteria we just talked about in the DSM five.

[00:12:13] Number three complex post-traumatic stress. This is what it is called when there is longer-term exposure to repeated traumatic events, especially that occurred in early childhood specifically before the age of seven and where the symptoms [00:12:30] persist into adulthood. Now most people fall somewhere between level one and two, after a single traumatic event with some persistent symptoms and some self-sabotaging behaviors.

[00:12:41] And if you're a survivor of childhood rape or abuse, you are more likely struggling with complex post-traumatic stress. Now I'm going to take a small detour here. I don't actually believe in calling it PTSD where the D is for disorder. The stress response we experience, [00:13:00] regardless of how long it lasts is not a disorder.

[00:13:03] It's actually a completely normal function of the brain and body that is leftover from when we were lizards roaming the earth, and it is designed to alert you to danger, and it is designed to keep you safe. Now you may have heard the term lizard brain before, and this is the survival area of the brain located at the back of your head, that detects danger, and it takes over motor functions in crisis.

[00:13:27] Also, I want to mention that we often [00:13:30] confuse the meaning of the words, common and normal. In most cases of a stressful event, it is common for the stress response to resolve themselves in about two to three weeks or so. It is normal for the brain to heal itself and regulate the nervous system. However, it is also normal for our brains and body to continue to respond to a traumatic experience if it does not have the resources, it needs to resolve the response, or if the event is repetitive and [00:14:00] ongoing. This is not a dysfunction or a disorder. If you are experiencing progressive stress response symptoms, this is a sign that your survival brain is functioning properly, but just on hyperdrive. And if your symptoms seem to be getting worse or you're experiencing new symptoms, this may be your brain and body's way of trying harder to tell you something.

[00:14:25] So if you think of your lizard brain as your super annoying little brother, [00:14:30] trying to tell you that he's scared of a thunderstorm, but instead of using his words, he starts shooting his Nerf darts into your face, and it knocks all your papers off your desk and steals your shoes and runs away.

[00:14:41] All of this gets your attention, but it doesn't actually deliver the message. Right? the post-traumatic stress symptoms that we're experiencing get our attention and often make us feel like damaged goods. The mistake we often make is turning all of our attention to calming the symptoms, like [00:15:00] picking up the papers or chasing your brother down the hall to retrieve your stolen goods instead of calming the lizard brain and deciphering the message.

[00:15:09] Okay. So let's talk about some of the other ways trauma is showing up in your life that aren't as obvious and may not fit the clinical definition of PTSD.

[00:15:21] Every single problem you're experiencing in your life is going to fall into one of these four categories. I like to call them struggle bubbles. They are [00:15:30] health, wealth, love, and happiness.

[00:15:34] Health, obviously this pertains to our wellness. How is your body doing ?Wealth. Yes, this is about financial security, but it's more about your self-worth love. You guessed it. This is about your relationships with others, your friends, your family, but also with yourself and happiness. This is where your mental health and wellbeing fits in and could also include your [00:16:00] spirituality.

[00:16:01] Now determining if your issues are a trauma response or just hashtag first world problems can take a bit more work, but I'm going to help you get there. So let's look at each of the struggle, bubbles, and talk about how trauma may be showing up in these areas for survivors of childhood sexual abuse or sexual assault.

[00:16:23] Number one, our health trauma actually has a major impact on our health. We often [00:16:30] associate trauma with psychological symptoms, such as depression and anxiety or more overt responses, such as flashbacks and nightmares. And we all know that this can affect our ability to regulate things like our sleep or our weight effectively, but this actually goes much deeper.

[00:16:47] Trauma is not in your mind, it's in your body. And what I mean by that is that trauma is not a psychological condition. It's actually a neurological response.

[00:16:57] Unresolved trauma often shows up [00:17:00] through the nervous system in the form of disease and illness. Several studies have found a significant correlation between sexual abuse and sexual assault and the early onset of autoimmune disorders and other chronic illnesses and diseases such as fibromyalgia, IBS, obesity, inflammation, and arthritis,

[00:17:20] diabetes, chronic fatigue syndrome, MS pCOS which is polycystic ovarian syndrome, and even certain [00:17:30] cancers. In fact about 70% of women with chronic illnesses, diseases and auto-immune disorders are actually reportedly survivors of childhood sexual abuse or sexual assault. This is a hugely disproportionate number and clear evidence a correlation between trauma and our health.

[00:17:50] Oftentimes a lack of trauma informed medical professionals dismiss these as inherited diseases and conditions developed due to poor lifestyle. [00:18:00] However, there is new evidence in the study of epigenetics, but has actually discovered that trauma responses are imprinted into our DNA and can even be inherited.

[00:18:10] Meaning trauma can be passed down to the next generation. In fact, they've been able to trace trauma markers as far back as five generations.

[00:18:19] This means your grandmother's great grandmother. I know this kind of sounds bananas, right? But this is a promising discovery because it means that many [00:18:30] diseases and illnesses may be treated or even preventable by addressing the trauma response on the neurological level.

[00:18:38] Okay. Moving on to wealth. Did you know that women survivors of sexual abuse or assault will lose about a million dollars over the course of their lifetime. This is a pretty big deal. So I actually have an upcoming episode on this topic with a financial expert to help navigate the depths of this issue.

[00:18:57] But for now I want to give you an overview of the [00:19:00] major contributing factors to this. Number one being paid less. Yup. Survivors are paid less for the same job despite being equally or better qualified. Now this is rooted in a lack of self-worth. Oftentimes trauma ingrains us with a belief that our self-worth is measured by our productivity and the opinions of others, but

[00:19:25] we often fail to advocate for ourselves, especially when it comes to negotiating our [00:19:30] salaries resulting in as much as 30% less pay. And we often do work for free to avoid the discomfort of having to ask for money. And I know I am guilty of this for sure.

[00:19:43] Number two, another contributing factor is missing work because of illness, depression, anxiety, or any other post traumatic stress symptoms. This includes missing work hours, but it often leads to job insecurity. Whereas as many as 50% of [00:20:00] survivors are fired for what appears to be poor work ethic, or they quit due to prolonged symptoms, which means it can be hard to maintain stable employment.

[00:20:08] And over time, this contributes to lower salaries and less career advancement. Number three, a lower credit rating trauma survivors on average have poor credit score. Now, this is due to overwhelm disorganization and financial hardships. And did you know there was something called bill [00:20:30] pay anxiety, which comes from a deep seated lack of self-worth and prolonged financial insecurity.

[00:20:37] And all of this means that you will pay more for everything from your car, to your house and anything you charge to your credit cards. Okay. Last but not least number four. The cost of healthcare, prescription medications, as well as the often out of pocket costs of mental health care and therapy. We talked about the effects trauma can have on our [00:21:00] physical health and all of that comes with a cost of thousands of extra dollars per year to be specific on average, $2084 a year and out of pocket healthcare costs.

[00:21:12] And a 19% higher cost of health insurance fees. Many times insurance will not cover the cost of therapy or alternative medicines such as acupuncture or bodywork. And on average, this can cost the survivor an additional $7,800 a [00:21:30] year. And all of this adds up fast. So no wonder why so many survivors feel like they can't get.

[00:21:44] Onto the next struggle. Bubble love trauma infiltrates our ability to love and feel loved. This most often sounds like I don't fit in. I'm different. You wouldn't understand. I'm not like them, or I feel [00:22:00] so misunderstood. I'm just damaged goods. This is the trauma talking and has a big fat lie, but trauma is such a good liar.

[00:22:09] And we all too often believe the lies and it reflects in the quality of our relationships. More than half of childhood sexual abuse and sexual assault survivors report significant or severe relationship problems in adulthood, including lack of relationship, satisfaction and insecurity in their relationships.

[00:22:28] This can cause feelings of [00:22:30] severe isolation and depression, and it's a major contributor to the high divorce rates as well as continued abuse.. In fact survivors are between two and 13 times more likely to experience a second or even multiple acts of sexual violence in their lifetimes. Now these issues stem from a lack of self-love and we tend to tolerate behavior that is toxic or harmful because we believe deep down that we deserve it or that we'll never find [00:23:00] anyone better.

[00:23:01] After sexual assault, many survivors have an aversion to dating again, due to fear of revictimization or a generalized negative worldview, where in an attempt to protect ourselves, we generate beliefs. Like all men are bad. on the opposite end of the spectrum, it's common for survivors to become hypersexual.

[00:23:21] Now this is a subconscious response and it's your brain's way of attempting to make sense of what has occurred by gathering more information through experience [00:23:30] and as a way of trying to gain control society loves to slut shame women for enjoying sex or even expressing their sexuality and to society.

[00:23:41] I say.

[00:23:42] **Salt n Peppa:**

[00:23:42] If I want to take a guy home with me tonight.It's none of your business. If she wanna be a freak and Sell it on a weekend. Now you shouldn't even getting to give a skins too.

[00:23:59] I'll tell you [00:24:00] one more time....

[00:24:02] **Rebecca:** Thank you, salt and pepper for paving the way to taking down the patriarchy. If you're a woman who has a healthy sex drive and enjoy sex, all the power to you, sister , you are responsible for determining whether your sexual behaviors are healthy or not. Now, if you're not sure if your sexual behavior is unhealthy, please don't be shy in talking to your therapist, your doctor, or a trusted friend who, you know, will tell you the truth. Try [00:24:30] to understand the emotional needs you are seeking to be met through this behavior and start to look for new ways to get this need met. Now being 100% honest and real with ourselves and knowing how to call our own BS is the most important step in healing from our trauma wounds. Our romantic or sexual relationships are not the only ones that suffer after trauma.Trauma can affect our friendships and our family relationships as well. Now, many times the sexual abuse or assault is [00:25:00] committed by someone known to the victim. In fact, only about 7% of sexual violence is committed by a stranger.

[00:25:09] 43% are committed by a family member. And 59% are committed by friends or acquaintances. Many cases of sexual abuse or rapes by a family member can cause a particular strain on family relationships. this is called incest and it's a very dirty word, surrounded by shame and secrecy. this causes [00:25:30] a lack of open communication in general.

[00:25:33] No one wants to talk. Whether they are the victim or a bystander, and this can lead a victim to never learning about properly expressing their emotions or needs in a healthy way. There can be a feeling of isolation or abandonment, especially if the abuser and the victim are peers like siblings or cousins. And this is because a parent will often struggle with choosing between their children. In healthy parenting environments, it seems like a clear [00:26:00] choice to defend the victim and ostracize the abuser.

[00:26:03] However, I am painfully aware of cases where a parent has chosen to protect the offender from legal prosecution and has isolated the victim through gaslighting and shaming.

[00:26:15] Sexual violence affects friendships. as well. In 59% of cases of rape the victim and rapist know each other and may even have mutual friends, which means those friends will have to take [00:26:30] sides.

[00:26:31] People are often in disbelief that their friend could commit such an act because they fear it reflects poorly on themselves. So a common reaction is denial. I can't believe that he would do that. Are you sure it was him?! These are just a few of responses I've heard. And there are many more like, well, you were probably just both drunk or this is going to ruin his reputation.

[00:26:56] If you feel like you have to explain yourself to your friends [00:27:00] or defend yourself about what happened, then these are not your friends or your support system. So please walk away. Walking away from people that you thought were your friends can be very hard and there is a tendency to isolate ourselves. Or on the other end of the spectrum, survivors often feel the need to tell everyone they meet their story.

[00:27:21] This isn't an attempt to feel validated. But the problem is this can be really unhealthy as well,

[00:27:27] finding the right people to share your story with [00:27:30] is important and understanding your own needs and finding healthy ways to get them met are also very important.

[00:27:37] You may find yourself losing friends as a survivor. Like sometimes survivors can come across as difficult or self-absorbed, but this is a good thing because it means you have created new boundaries and your standards. And those people who don't rise up to your new standards will often be angry or resentful that you're leaving them behind.[00:28:00]

[00:28:00] Let's move on to struggle, but one number four, happiness, 90% of women who experienced rape or sexual abuse report, having mental health symptoms, including anxiety, depression, and other post-traumatic stress symptoms. At some point after the event, however, as time progresses, many survivors don't identify as being depressed, but rather frustrated or angry, or even unable to identify their emotions.

[00:28:27] Now what could be happening here is [00:28:30] a lack of control or a lack of sense of security. , this often shows up as hypervigilance being an over planner, not comfortable with surprises and wanting to know all the details before heading out with friends. Sometimes we feel a lack of motivation, especially for growth.

[00:28:47] We excuse ourselves for being lazy about looking for a better job or asking for a raise, or we're just unmotivated to read that book or take that class, even though, you know, it could actually help you. [00:29:00] this could be due to something called neophobia, which literally means a fear of new things. We may be unhappy with where we are, but at least we're familiar, with what to expect and the idea of something new is just way too uncomfortable, or this can be caused by an internal belief system that we are not worthy.

[00:29:21] We talked a little bit about this on wealth, but an internal belief of unworthiness starts to dictate the rules in which we live by. And we [00:29:30] may be sabotaging our own happiness in every area of our life. Okay. Now, another way this shows up is you may be feeling stuck.

[00:29:39] This looks like in decisiveness or unsure what to do next. AKA analysis paralysis, where you analyze every option at nauseum and then end up taking no action at all. And another big one I encounter often with my clients is knowing what they want, but feeling like it's not available to you now, [00:30:00] this is actually a combination of a lot of things, including our belief system, fear of success, or fear of failure, our self view, our worldview, and even our future view.

[00:30:10] . Last but not least. I want to talk about imposter syndrome. Imposter syndrome is a psychological term that refers to a heightened sense of self doubt. Typically in a professional setting, it's the feeling that you have not earned your seat at the table or that you aren't good enough and you [00:30:30] are afraid everyone is going to find Anyone can experience this. It's not just exclusively for trauma survivors. However, there is a particular flavor of imposter syndrome that manifests in survivors. This can be things like downplaying your experiences or saying things like, well, other people had it much worse than me, or it wasn't that bad.

[00:30:52] At least I survived or a failure to report the incident because the fear it will ruin your reputation. [00:31:00] This can be working twice as hard as anyone around you just to prove your worth and all of this stems from shame and guilt, which are among the most common emotions survivors report after abuse and assault.

[00:31:15] If you can relate to any of these struggle bubbles, what can you do about it?

[00:31:21] Number one, seek trauma informed care. Look for a therapist who is specifically trauma informed or find a coach who [00:31:30] specializes in helping trauma survivors overcome some of your specific concerns. Sometimes a coach will offer a less clinical and more practical approach to overcoming challenges. And chances are they can empathize with what you've gone through because most coaches become coaches because they have been there and done that.

[00:31:49] Number two, start a daily practice of regulating your nervous system. Training your nervous system to regulate and calm itself will actually help [00:32:00] alleviate the symptoms like anxiety, depression, and dysregulation, and it will help you gain the resources you need to start to process the unresolved trauma.

[00:32:09] And you can check out my website, www.rebeccacia.com/resources forward slash resources for great free resources and daily practices to help you do just this.

[00:32:20] Number three, work on building resilience. Now. I know. Hearing this word may make some of you cringe, but [00:32:30] resilience is actually a function of the brain. It's not just some toxic positivity buzzword.

[00:32:35] And there are actually things that you can do to strengthen regions of your brain that will help you manage stress and can help you bounce back more quickly after a crisis.

[00:32:45] I'm going to have an upcoming workshop on this that I will announce on social media. So please go over and follow me @rebeccacia.co on Instagram so that you can get all the updates on this.

[00:32:56] Number four, when you're ready, [00:33:00] you can begin to work on releasing the trauma from your mind and your body.

[00:33:04] I will actually have a great episode coming up with a bodyworker who's going to share some great tips on this. So please subscribe to the tuck, your boobs in podcast. Or find me on instagram @rebeccacia.co to get notifications and updates on this episode.

[00:33:18] Number five. If you want to learn how to stop the self-sabotaging trauma responses, please check out my master class called why the F does this keep happening to me? This is where I go into the six leading [00:33:30] factors in sexual assault. Revictimization and I explained what is happening in the brain and in the mind.

[00:33:36] So you can stop the trauma cycle and start living your #bestlife.

[00:33:40] All right, survivors. That is it for this episode of tuck your boobs in the place that prepares survivors for the battle of overcoming trauma and helps you get your shit together after childhood sexual abuse and sexual assault.

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[00:33:52] Share this with a friend who is struggling and if you have any questions or would like to add some of your own personal experiences, please feel free to [00:34:00] DM me @rebeccacia.co and as always ladies, thanks for listening.