

The background of the slide is a light blue gradient. It is decorated with numerous realistic water droplets of various sizes, some with highlights and shadows, giving them a 3D appearance. The droplets are scattered across the slide, with a higher concentration in the top-left and bottom-right corners.

SOLUTION-FOCUSED THERAPY FOR SEVERE TRAUMA

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Aims

The purpose of this presentation is to provide attendees with:

- A greater understanding of this important area of work
- Increased confidence in working with this group of service users
- An appreciation of the importance for service users to move through the 3 transitional stages of survival
- A range of tools and techniques for working with trauma and/or stress

SCALING CONFIDENCE

“ON A SCALE OF 1 – 10, HOW CONFIDENT ARE YOU RIGHT NOW, GENERALLY, IN WORKING WITH SURVIVORS OF SEVERE TRAUMA & STRESS?”

- A) HOW COME IT IS ‘Y’ AND NOT ‘X’?
- B) WHAT WOULD YOU HAVE TO DO, OVER THE NEXT MONTH OR TWO, TO MOVE UP JUST HALF A POINT?

3 REASONS SOME PRACTITIONERS AVOID

1. FEAR OF SAYING SOMETHING THAT WILL MAKE THE CLIENT WORSE
2. FEAR OF VICARIOUS TRAUMATISATION
3. THE MISTAKEN BELIEF THAT THERE ARE THOUSANDS OF SPECIALISTS 'OUT THERE' WAITING FOR THE PHONE TO RING

Formula first session task

(adapted for severe trauma survivors)

❖ *Important to slow down pace of speech and lower voice tone, before delivery*

“Between now and when we meet, I would like you to notice what you have done/are doing already to put the memory of this incident away safely/make sense of it. Can you do this for me?”

Purpose of FFST:

- Shifts the context from a problem focus to a solution orientation
- Helps the work go more smoothly
- Helps client achieve goals more quickly

The 6 main areas of concern

1. Triggers
2. Flashbacks
3. Unwelcome (unwanted or intrusive) thoughts
4. 'The lows'
5. Sleep disturbance
6. Living life to the full (thriving)

Techniques for triggers

1. The most effective technique:

“That was then, this is *Now!!....*”

2. Diaphragmatic (7/11) breathing

- Very simple, yet very powerful technique
- Easy to learn and apply
- Good for gaining control over panic attacks
- Teach it in the session and give it as homework, to practise

The 3 stages of recovery:

(With full acknowledgement to Yvonne Dolan)

1. VICTIM
2. SURVIVOR
3. THRIVER (Living life to the Full)

FIGHT

FLIGHT

FREEZE

FACE!

Presuppositional language

The use of presuppositional language as a use of indirect communication was one of Milton Erickson's major innovations.

Presuppositions are ways of talking that presume something without stating it directly: they are "implicit, unconscious suggestions."

Counsellors and therapists can use presuppositions to introduce change notions and expectations during the counselling or therapy session.

Some useful examples of pre-suppositional language are as follows:

"Which problem do you want to solve first, a or b?"

"When you have got through this time of difficulty, what other changes will you make in your life?"

"Tell me about a time when the problem was less of a problem."

Presuppositional language, *continued*

- “When you have had similar difficulties in the past, what strategy/ies did you use to solve them?”
- T: “Tell me about a time when things were better.”
- C: “There have been none.”
- T: “So, you can’t remember a time right now.”
- “Who will be the first to notice when you’ve cut back on your drinking?”
- “When you are attending school on a more regular basis, what will be the main reasons for doing so?”
- “How have you coped with things being worse?”
- “When things are better again, how might you have got that to happen?”

TECHNIQUES FOR INTRUSIVE/UNWANTED THOUGHTS

1. The “Stop!” technique (+ replaying the video later)

2. Let it go . . . Let it go . . . Let it go . . .”

3. Tackle ‘the guilt trip’

Survivor guilt is a common feature:

“It was all my fault . . .”

“If only . . .”

“I feel so guilty because he died and I survived”

There are 2 strategies:

i) “It was not your fault...”

- reality check

ii) “You are not wholly to blame”

%ages exercise:

- get a realistic %age of blame

- ‘guilt shared, is more than halved’

4. Write, read & burn(or shred)

(With full acknowledgement to Yvonne Dolan)

Many find this technique extremely effective in dealing with unwelcome thoughts.

The Steps:

- First, write down the details of the memory, thought, or image that troubles you.
- Now, write down any feelings you have about the memory, thought or image. If another person is involved in the memory, address these feelings to the person, where appropriate. Include anything you would wish to say or wish you could say to that person.
- Now re-read what you have written, reading it aloud. *
- Once you have done so, burn (or shred) the pages.

Techniques for flashbacks

1. Dual awareness
2. Purposely, bring on a pleasant flashback

Dealing with 'the lows'

1. The rainy day letter
2. Make contact with a nurturing friend
3. Maintain good exercise, diet, fluid intake and sleep pattern

The solution focused feelings tank

- A very visual tool
- Especially good for healthy discharge of anger
- May be used for the whole range of negative emotions

6 Positive ways to deal with anger

- Talk with co-worker or good friend
- Write down the feelings in a diary or journal; writing 'as if' letters
- Take energetic physical exercise: punch bags/cycling/fast walking/gym workouts/swimming/etc.
- Shout it out
- Paint it or draw it (best for children?)
- Play choice of music, loudly

Permission giving statements

1. “In all the years I have been doing this work, I have heard just about everything there is to hear about what can happen to people; and, what one person/people can do to another.”
2. “You may want to tell me what happened, either now or in the future. You may want to tell someone else. Also, you don’t have to tell anyone at all. All of these are okay...”

8 Key Points to Avoid Retraumatisation or Re-victimisation, When Clients Disclose

1. Show compassion and deep empathy
2. As the service user discloses:
acknowledge, validate and normalise all feelings & sensations expressed
3. Ask strength-based questions, interrupting as appropriate whilst the client is disclosing, as follows:
 - How did you cope at the time?
 - What got you through all this?
 - What most helped?
 - How did you do that?
 - How did you know how to do that?
 - Looking back on what happened, in what ways has it made you a more determined and/or stronger person?
 - Awful though it was, which aspects of surviving it have made you a better person?

4. It is important to compliment sincerely, where appropriate, both as the service user is disclosing; and most importantly at the end of the session
5. Treat the content with care, respect and in a supportive manner
6. Value and affirm throughout, both verbally and non-verbally
7. Keep your own and your service user's eyes on the treatment goals
8. Keep to the '5 o'clock rule'

BLOCKS TO DISCLOSING

- OVER 25 POSSIBLE REASONS!

Gender of worker	guilt	shame
Not being believed		poor basic personal skills
Fear of consequences	fear of rejection	
Loss of control	rank/perceived status of worker	
Special needs disability	inarticulation	denial
Feeling unsafe	non-recognition	
Feeling dirty, damaged goods and not wanting to infect/affect worker		
Not wanting to be seen in poor light by worker		embarrassment
Religious beliefs	reaction of worker unsure	
Previous poor experiences when disclosing		
Fear of being judged		cultural
Fear of being seen as weak/different/abnormal		
Not trusting the environment (answerphone for messages, paper thin walls, too many windows, etc.)		
Believing the worker's knowledge of the subject is insufficient		
Feeling the worker has undeclared secrets of their own, in the same territory		

Sleep disturbance

Over 40 techniques in the following categories:

1. Preparing for bed
2. Getting off the sleep
3. Getting back to sleep, if awakened

Degrimming

- Use of black humour
- As & when appropriate
- If in doubt, don't
- Lightens the session + makes the work more enjoyable for both client and worker

(“Try and get the client to laugh in the first session.” Insoo Kim Berg, personal communication, 1995)

The (most important) Thriver Stage

- Principle focus of client
- Meaning & purpose; direction in life
- Visualisation is important (e.g. Letter from the future)
- More freedom than at earlier stages
- Real future possibilities & dreams can be explored
- Allows more compelling presents to be experienced
- Enjoy life to the full

Thriving

(Attributed to UK SF Practitioner, Roger Meeson)

- Living life to the Full
- Living the life you richly deserve
- Living the Authentic Life
- Living life as Full as Possible

Meaning & purpose; and direction in life

- Letter from the future

Supplanting Victim-Survivor-Thriver on the 1 – 10 progress scale

1

VICTIM

5

SURVIVOR

10

THRIVER

The triple twins of SF success

1. Patience & Persistence
2. Hope & Optimism
3. Curiosity & Creativity

For second and subsequent sessions

1. **Elicit Positive Change:** “what’s better?”
2. **Reinforce the Change:** “How did you do that?”, “How did you know how to do that?”
3. **Amplify the Change:** “What else is better?”, “What else . . .?”, “Who has noticed?”, “What have they noticed?”
4. **Build on Improvement:** “What other changes might you make as a result of this happening?”, “What will be your first small step?”, “How will you know when you’ve got where you want to be?”

3 x Part ending

1. Acknowledge, Validate & Compliment
2. Bridging statement/rationale for the task
3. Task/homework/something to experiment with:
 - a) Do
 - b) Think about
 - c) Notice

Time and date of next appointment. Finish assertively

- VICTIM'S WORLD - Small; compact
- SURVIVOR'S WORLD - Pushing at the boundaries of their comfort zone
- THRIVER'S WORLD - The sky is the limit

Scaling confidence

“On a scale of 1-10, how confident are you right now in working, generally, with survivors of severe trauma and stress?”

THE END