WORKING WITH TRAUMATISED CLIENTS
BY HELENA FONE FNCP

Traumatic experiences can affect your client’s belief about the world and those in it and shape their relationships, which includes you their therapist. When working with traumatised clients I use the energetic protocol known as Emotional Freedom Techniques (EFT) which works swiftly and elegantly with traumatic memories. However, it still helps to become acquainted with a range of safety techniques that will help modulate hyper-arousal and low arousal states in your client. There are various stages of therapy that can be quite de-stabilizing, yet maintaining stabilization through containment is a fundamental building block of therapy. Sometimes it may seem as if you’re going two steps forward and one step back. It is a very fine balance and to do the healing work required for trauma survivors to gain overall life stability, these survivors have to address painful and often difficult issues that are potentially de-stabilizing. I give below some techniques to help your client and yourself through the stabilising and containment process. In the next issue I will discuss techniques that can be used with the symptoms of trauma.

Safety for the client

- **Initial interview**: This should include questions about their health, external support, lifestyle and type of medication they are taking. Remind them with EFT that they have some support when in a crisis. The side effects of some psychototropic drugs may include drowsiness for example. At this time it’s also important to inform the client that they are in charge of the process and you will guide them. If at any time they feel uncomfortable, they must alert you so that you can adjust the session accordingly. Clients who have been abused for instance need to know they are in control and can end or leave the session at any time. (If you are using EFT then you can assure them that there are gentle ways of tackling the trauma which will not be as painful as with conventional therapies.)

- **Preparation**: Discuss beforehand the side effects of EFT such as tingling, tightness, yawning, light headiness or energy moving around the body. Explain how EFT accesses the subconscious but that these signs are all normal and indicative that good work is being done. Mindfulness practice could be introduced prior to treatment. Learning to observe internal reactions without judgment and to accept feelings, sensations, and thoughts as they arise might usefully prepare a client to tolerate the unpleasant emotions that trauma processing elicits.

- **Rapport and Trust**: Most traumatised clients have learned not to trust and may not be ready to open up to you or anyone just yet. Be patient and don’t rush the process – go at their pace and regularly check in with them that they are comfortable moving forwards. Building rapport takes time and patience.
- **Verbal triggers**: Discuss with your client any words that may activate an unpleasant trigger. I once had a client who didn’t like me using the words “father” and “night time”.

- **Non-verbal triggers**: It is absolutely essential to ask your client’s permission before touching them in any way, whether it’s a hand on their shoulder even or tapping on them with EFT. If they’re OK with a touch, remember that they may not be OK with sudden gestures or movements. Ask the client if there is anything in the room that makes them feel uncomfortable or anything you can do to make them feel at ease. A photo or vase of flowers for instance may activate a memory. Ask if the distance between you both is comfortable? Would they prefer you were behind the desk rather than at the side?

- **Transference**: Is your client being “triggered” by your demeanour, body language, voice etc?

- **Safe place**: Asking your client to create a “safe place” of their choosing is a visualisation technique that can be useful for severely traumatised clients. Ideally, this place should be very secure with windows and doors with locks so no-one can get in. Some clients may choose their childhood home where their parents would keep them safe. Others may choose a clinical room, a church or a sanctuary. It doesn’t matter where this safe place is as long as when the client thinks of it, they feel protected. Sometimes I use a “script” that asks them to imagine how this joyous place looks and feels. Asking them to take in the colours of the room, how the light and texture feels soothing. How the sounds deepen their relaxation and how they can move about this safe place, memorising it, taking it all in and knowing they can return there any time they feel threatened. I may ask them to gently leave this place then ask them to go back in again a few times to check they are OK with this. It helps to associate the good feelings that go with each of the senses whilst in their safe place.

- **Pace and Lead**: Remind your client that it’s normal to feel strong emotions when accessing a memory and they are not crazy. Reassure them you have techniques that can safely and gently help them through the process and calm them down. However, you must observe if they are becoming over-distressed and put your foot on the brake and only accelerate when the client is comfortable. Pace yourself to avoid hurtling into an area where your client doesn’t want to go to yet. When they are ready, lead them safely and gently.

- **Grounding**: Therapists use a variety of grounding techniques from asking their client to hold an object to taking them to a safe place whenever they become distressed. Grounding can also refer to counteracting an energy surge in the body. Conductors and breakers are used to divert electricity to another source and therefore avoid the risk of an electrical shock. In the same way, when using energy work such as EFT, we can protect the body from an “energy” surge during therapy by putting into place simple techniques to instil safety. In therapy, one grounding technique is asking the client to place their feet firmly onto the floor during the session. Asking them to imagine they have roots at the bottom of their feet going into the ground, just
like the roots of a tree. Another technique would be to ask them to breathe deeply and evenly or to touch themselves to elicit tactile stimulation. Encourage the client to use their body as a resource by focusing on how their body sits in the chair or how their feet feel in the shoes they’re wearing.

Each client will have their own self-soothing strategies so work with what’s best for them.

- **Pendulation**: According to Peter Levine (Author of Waking the Tiger) “Pendulation is the primal rhythm expressed as movement from constriction to expansion, but gradually opening to more and more expansion. It is an involuntary, internal rocking back and forth between these two polarities.” There are many ways of practicing pendulation but one way is when the client feels they cannot breathe perhaps is to ask them to draw attention to another part of their body that feels OK right now.

- **Engage left and right brains** You can do this by asking the client to read some text then look at some photos. To divide 50 by 4 and then ask them what colour their front door is. This technique enables the nervous system to regain some balance.

- **Dissociation**: A strategy used to avoid connecting with the experience. If you notice your client seems distant or their eyes have a fixed focused, bring them back to the present by encouraging them to name items around the room that are red or blue for example or ask them what day it is or the colour of your eyes. Practice **habituation** (exposure to the memory) ONLY when safe to do so and whilst regulating with the client.

- **Depersonalisation** (or derealisation) is not always easy to detect. Symptoms include “feeling cut off from the world” “not feeling frightened in situations that would normally be frightening” “objects in room seem smaller or further away”. Again, some clients adopt this strategy when confronted by an emotional “trigger”.

[The Cambridge Depersonalisation Scale is a new instrument for measuring depersonalisation used by psychiatrists and by appropriately trained mental health professionals]

**Safety for yourself**

It is common for those who specialise in trauma treatment to be impacted personally as a result of working directly with traumatised clients. It is important therefore that every therapist is aware of issues such as compassion fatigue, secondary trauma, vicarious trauma, and burnout. Please consult with another professional or your supervisor if you feel you are being affected by any of these issues.
• Prepare yourself for the session by using any relaxation or calming techniques.

• Avoid counter-transferance (you being “triggered”) during a session by ensuring your own traumas have been discharged. See “transference” above.

• If you are unable to cope with hearing explicitly gruesome details, refer your client onto another therapist.

• Do you feel safe working on your own with the client?

• Practice taking care of yourself outside of work by cultivating leisure activities

• Speak with your mentor/supervisor on a regular basis

• Remind yourself to remain calm and in control at all times.

• Consider taking a specialised course

• Recommended reading


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