









THE BEGINNING OF UNDERSTANDING – PART 2



by Helena Garner

The beginning of understanding was really just that – a beginning. Little did I know how much I had to learn and how much I really didn't know. When my peer supervisor mentioned to me this strange word 'dissociation', it was an entirely new concept to me. Now I wonder how that can be. How had I done hundreds of hours of training, worked for a number of years as a counsellor, had supervision and peer supervision, gone on CPD courses, read a shelf full of books, and never heard of it?

I wasn't even sure if the word was 'dissociation' or 'dis-association'. Did it mean 'switching off'? Did it mean the opposite of associating, and if so what did associating mean in terms of a person's mind? What was it all about? I was quite stunned to realise what a significant literature there is on the subject, and it was a breakthrough for me, not just with this first 'dissociative' client, but with all my clients, to come across Carolyn Spring and the wealth of information in her publications and on her website.

I continued to work warily with this first dissociative client. Mainly I felt out of my depth, and it was a constant struggle not to feel frozen with a sense of inadequacy. But something kept drawing me on. I suppose partly it was that in amongst the confusion – and the terror that I was working beyond my competency - I saw in front of me a real human being who was just struggling to understand herself and was yearning to be accepted. It didn't feel right to me to shame her - because that was what it would do - by saying that she was too much for me, that I couldn't work with her, that her case was too complex, or that I didn't feel that I could help her.



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I believed strongly that I only needed to be a 'good enough therapist': a lot of my training had brought that out as a concept, and I had found it cognitively a good fit for what I wanted to believe. For one thing it stood against my inherent perfectionistic drive. But it was a different kettle of fish to have to keep believing that I was good enough when working with the kind of trauma that I had never even dreamt took place.

As we worked, gradually and in a very halting way, she began to disclose some of the things that had happened to her. Always, it was the same: she 'switched' first. I didn't recognise it as a switch for a long time; I thought of it merely as her becoming stressed and distressed, as you would expect, before disclosing something so terrible. But her whole demeanour and body language changed, sometimes subtly but sometimes strikingly so. And the narrative came out as a mish-mash of phrases, splurted out in between big gasps of air. I hated the fact that it was so clear what she was saying, and yet there were so many gaps: I desperately didn't want what she was hinting at to be true.

I caught myself a number of times being on the verge of saying to her, 'Are you sure that happened? Really?' And it wasn't because I didn't believe her. It was because I did believe her, and it was too awful. It made me feel sick to the very pit of my stomach to hear how appallingly she had been treated, and my mind didn't want to accept it – just as hers hadn't. I didn't want to believe that human beings could treat each other in that way. As I grew closer to her over the ensuing months, I didn't want to believe that she could have been treated this way. So sometimes it was as if I just grasped at straws, and tried to disbelieve her so that I wouldn't have to face the reality of the horrors that had been done to her.

Some of the time I was able to keep those mental images in the room, but many times, at least to start with, they followed me around for the rest of the day and night and indeed for many, many weeks. I knew that this was nothing compared to her experience, of actually having gone through this stuff, and being overwhelmed by flashbacks and body memories alone at home on her own through every endless night. But, I realised, if this is how awful it is for me to just hear about what she went through, if it's so difficult for me to get those scenes out of my head, how much harder is it for her?

That stirred within me deep а compassion for her, but sometimes it made it difficult for me to step back. I desperately wanted to rescue her, but I also knew that I mustn't. I think sometimes that it takes all we are as counsellors to hold ourselves back from just wading in and holding our clients in our arms and crying for them. More than once, after a session, after she'd gone, I'd sit and weep. It is a deep pain in your chest that you have to relieve; crying feels so inadequate as a response.



Sometimes it got too much for me and I ended up at the edge of vicarious traumatisation. I woke in the night, sweating and afraid, after a nightmare in which my client was being abused and I was impotent to do anything about it. I was nearly sick with the emotion of it. I would walk down the street and look at people in a new light. How many were abusers? How many were going home to do unspeakable things to helpless children? How many were survivors? How much pain and suffering was there really in the world? I couldn't bear to watch certain news stories any more. When some separate personal circumstances crashed in on me temporarily, I really didn't know if I could cope any more.

But I am fortunate to have good support and secure attachments, and I was able to pull back from the brink. It made me realise how reasonable my clients' behaviours were: her self-harming, suicidal ideation, and frequent need to drown everything out with drink. Of course she would do that – here I was, never abused, never profoundly hurt, always loved and with positive self-image, and I was finding it hard at times to just hear about the things that happened to her, and I was struggling to sleep at night with it all, so how much worse was it for her?

I met her parts gradually. It was as if most of them needed to check me out briefly first, and took their time to build up trust of me. With some, it was evident from the beginning that they didn't trust me and had no intention of doing so. I read in some of the literature about 'protector parts' and this made some sense to me – these were parts whose 'job', so to speak, was to be a protective wall so that no one else would abuse her. They had high, almost impossible standards. They scrutinised everything I said and reminded me months later of exact wording that I had used, and called me to account when what I'd said I would do wasn't literally, exactly carried out.

I learned from them to be careful about what I promised, and to add in caveats to most of my plans. So I could say, 'All being well, we can talk about this next week.' But they were suspicious of a plain, 'We will talk about this next week.' It wasn't sure enough. 'How do you know we will?' they would say. 'Something might happen. We might not be able to. You might be ill. We might not turn up.' To start with I thought that this was an unnecessary splitting of hairs, or being 'resistant' to me, picking at me critically.

Over time I learned to see it from their point of view – that trauma had shaped their outlook so that they didn't know whether something terrible might happen tonight, and if it did then it would change everything. I assumed the best in life, because really bad stuff had never happened to me. They couldn't dare to hope that good stuff would happen and that bad stuff wouldn't. By insisting that I promise nothing unless I was absolutely certain that nothing could happen to



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prevent it, they taught me about their worldview and how difficult hope was for them.

Some of the parts were sweet and charming and pulled at my heartstrings in a way that I hadn't expected. These were the 'littles' as this client referred to them, or 'little ones' as another did. I grasped fairly early on that their role was to enlist my help and support, that in attachment terms they were proximity-seeking and trying to use me as a secure base and a safe haven.

I've had two children myself and these parts pushed every maternal button in me. I was surprised by the force of it. It was like nothing I'd experienced with any other clients. I quite simply wanted to take care of them and make sure that nothing bad happened to them. When these parts were distressed, it was almost intolerable. It took me a while to realise that they were seeking in me, as a new attachment figure, experiences of care and soothing that they had never experienced with their parents.

At times I felt pressured by that to be the perfect alternative, but most of the time I realised that I couldn't be perfect and that I shouldn't try, and that although these parts presented as children, they were still part of an adult client and I had to hold that balance of how they perceived themselves with the need for appropriate professional boundaries.

CAROLYN SPRING

My client was always terribly ashamed when I told her that the 'littles' had made an appearance during the session. She seemed convinced that I would be put off by their neediness and their craving for affection. Nothing could be further from the truth, but understandably she didn't see it that way.

One of the biggest areas of conflict that we worked on together was her attitude towards these young, traumatised parts of her self. I could see quite easily why they were 'dissociated', in the sense of being cut off from her sense of identity and consciousness: she quite literally loathed them. She couldn't tolerate their expressions of need, and was terrified by their relational closeness and vulnerability.

I felt immediately caught in a bizarre situation, as being a kind of umpire or mediator between my client in her main adult self and my client in these child selves. She had never expressed this level of hatred or loathing towards anyone else, outside of herself, so it was a bit of a shock. She seemed in fact to be taking her father's role towards herself, and being highly abusive, critical and neglectful, which was painful to watch. I struggled for a long time with whether to say this to her or whether pointing it out would just increase the shame and the separateness.

In all my previous work, I believed strongly in psychodynamic principles and in the need of the client to come to their own understanding and insights into what was going on. But being dissociative and quite literally unaware of whole parts of their own psyche, it seemed that my usual approach was going to fall short. It was a jolt at times to watch someone who had so much knowledge about a range of topics, and who was so successful in her career, have so little understanding of the workings of her own mind, and so little awareness of these disowned parts of her.

I found myself therefore in the position of go-between, trying to help my client raise awareness of the different aspects of herself. It wasn't an easy role to play, because as I eventually understood, she had spent her entire life surviving the trauma by keeping awareness of it at bay. That awareness was held by these dissociated parts of her self, and so naturally she didn't want to become aware of them.

It was almost as if she had a mental cutoff switch and many times as soon as I ventured to mention these other parts to her, she would switch, to a belligerent adolescent part who told me endlessly that I didn't know what I was doing (and mostly they were right). Many times it was very difficult to get her to stay present in her adult self. Sometimes she remained as the adult for a whole session, and to start with I thought that this was some kind of success – either on her part or on mine, I wasn't quite sure. But gradually I began to see that when she stayed present as the adult, although she often talked at a hundred miles an hour, she said very little. We talked around the subject, but we never actually broached it – regardless of what that subject was. She seemed sometimes to be intentionally trying to keep me at bay by dominating the airspace, whereas at other times she seemed perfectly unaware that she wasn't letting me get a word in edgeways because when I did, I would invariably remind her of why she was here.

I hadn't realised, I suppose, how 'repulsive' trauma is: how much the mind unconsciously avoids it. I sometimes felt that we were two negatively charged magnets repelling each other and the closer I tried to get to her as a person, or her trauma, the further away from me she moved. And she did it to herself too and sometimes she would notice it happening, and she was very upset about it. She would often dissolve into a mini-rage at herself that she had 'wasted' her session again. Of course. I didn't see it as a waste - not least because she had had a glimpse of the dynamics at work. But at least one session in every two or three, it would feel as if we weren't getting anywhere because of this invisible forcefield, and the need of her own mind to shield herself from what was unbearable. It made the work slow and at times frustrating for both of us.

It took a long time for me to feel that I was getting into any kind of rhythm in the work with her. Sometimes she just threw me off balance with a sudden, almost involuntary, phrase or sentence that seemed to have nothing to do with what we were talking about and yet evidently came either from another part of her or from her disjointed trauma narrative. I never knew whether to draw her attention to it, or let it go: there were no easy answers on that, and my supervisor was as nonplussed as me.

At other times it felt as if I was enveloped in the session by the same kind of fog that she seemed to live in most of the time: a dark, confused place where I couldn't think clearly and where my feelings were all muddled up and everything seemed to be on the other side of a thick, frosty pane of glass. After a while I began to recognise it and I eventually understood that this was my client's dissociation being evoked in me, that somehow she was transmitting to me how she was feeling, what was going on for her – presumably in some kind of right brain to right brain attunement.

I didn't understand the science well enough to fully formulate it in my mind, but I began to recognise that when this happened, we were usually on the edge of something breaking through. Usually it meant that some piece of the trauma jigsaw was about to force its way into consciousness and that all her mental alarms were sounding, telling her – and me – not to go there. I felt it at a very visceral level, in my guts, and in a way that was difficult even for me to put into words, so it made sense that my client – the one who had actually experienced these traumatic events – would struggle to articulate it.

But all of my training had been about making the unconscious conscious and giving words to our experience. I realised fairly early on that I would be a more effective therapist if I better understood some non-verbal approaches to treating trauma, such as Sensorimotor Psychotherapy or art therapy, and the urge remained, week in week out, to throw my hands up and say, 'You'd be better off working with someone more qualified...'

But whenever I even hinted at it, my client recoiled in horror, because as she herself said, she felt safe with me. I wasn't quite sure how I'd managed that, except by actually being safe, and most of the time it seemed that on the contrary she was in deep terror of me throughout every session. But I kept taking the issue to supervision and fortunately my supervisor kept insisting that it's the relationship ultimately that counts, and the relationship seemed to be going well.

Or at least, it seemed to be going well some of the time. I was astounded that this woman, who had suffered so much abuse and been treated so appallingly by so many people from such a young age, would even begin to consider



trusting me, and I felt very humbled by that and as if I had been given a precious gift. And of course I had – trust from any human being is a valuable thing, but I didn't really believe that I deserved it from this client. And as if to agree with me, sometimes the smallest thing would erupt into a major rupture between us. I'm not meaning to say 'smallest thing' as if it were trivial and inconsequential – it certainly wasn't for my client, and I understand why. But I intended no harm.

One incident came about when she had sent me a lengthy email to read the night before our session. Unbeknown to her, I had been dealing with a domestic situation with my teenage son that had caused me great alarm, and I had slept very little. I had seen the email come in and had meant to read it, but was overtaken in the events of my own mini crisis. When I sat down with her at the beginning of the session, I had regained my composure and felt ready and willing to work. But she was unusually edgy, almost like a previous client I had worked with who used to come to sessions high on amphetamines (the work wasn't particularly successful). I tried repeatedly to make a connection with her, but felt rebuffed and there was a feeling in the room of great dead, a sense of horror and shame. I tuned into it so quickly simply because it was so striking.

Eventually, nervous and jittery, she spoke: 'Did you read it?' My mind was

blank with what she was referring to. 'Read what?' The look on her face at my guileless reply made my heart sink with apprehension. This was obviously something really, really important, and I had made some huge, heinous mistake. Her agitation increased from its already dramatic level to a precipitous one. As tears fell out of her eyes, I searched frantically in my mind for what she was referring to, as she couldn't articulate it to me.

Eventually I remembered the email that had come in late the previous night and which I hadn't read because of my own frantic search for a missing son (he had turned up at 4.00 am, which on a school night was unacceptable and my mind had imagined a thousand scenarios to explain his absence and his phone being dead, none of them pretty.)

'Do you mean the email you sent last night?' I asked. She looked at me in what seemed to be half panic and half rage. 'I'm afraid I didn't get the chance.' And then it was like a volcano blowing, partly with anger but mixed with lots of other feelings too, the most dominant of which seemed to be shame and a fear of rejection. I could tell that she didn't know whether to believe me about not reading the email, and as the session stuttered along, I eventually figured out that the email had disclosed some terrible trauma which she felt responsible for, and which had led to extreme shame and self-loathing.



She had been on the verge of not coming today because she had struggled all night with fears around how I would react, whether I would reject her, whether I would hate her, things like that. It had taken extraordinary courage for her to put this trauma into words, then put it in an email and send it to another human being. And as luck would have it, it arrived on the night when my mind was elsewhere – for good reasons, but that didn't make it any less difficult for her.

It took months to repair that breach - many, many sessions of rebuilding trust, encouraging reflection, starting from the bottom again. But it was also the start of a new level in our working relationship, and in many ways it was when I first began to really understand the devastating effect of trauma on people's interpersonal relationships.

Trust is something that we take for granted in most of our therapy with non-traumatised clients and forms the bedrock of our work together. But for those, like this client, who have suffered extensive relational trauma. an understandable lack of trust in the goodwill of other human beings pervades every session and every moment in between sessions. My supervisor had been reassuring because she had believed in our relationship, but this rupture undermined my confidence that trust could ever be built between us. What would it take for me to make the breakthrough that this client so desperately needed? •

