

STELLA'S STORIES – RESPONSES TO TRAUMA

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Abstract

This article begins with an introduction to trauma responses and a brief comparison of Client-Centered Therapy (CCT) and Cognitive Behavioral Therapy (CBT). It then presents three stories written by a former client who had experienced persistent trauma both as a child within her family and as a young adult living under a repressive regime. The first two stories describe events from her past and the third offers an example of the lasting effects of her experiences. The article concludes with Stella's and my reflections on the therapeutic process. Stella chose the pseudonyms to protect confidentiality and has given written permission for her material to be published.

Introduction

Traumatic events may take us to the edges of human experience. They are unpredictable, they upset our sense of normality and we are powerfully reminded of the fragility and uncertainty of living. At times of trauma our particular social norms may no longer operate and we may react in ways that feel unfamiliar. One person may say, for example, "I didn't think I'd be one to panic;" another perhaps, "I was amazed how cool I stayed." After such an event the structures of our world may no longer seem secure. It may no longer feel safe to take a train or walk along a certain street. Reality no longer feels dependable. Many of us will have gone through a traumatic episode but our way of experiencing it will be subjective and unique. Some will be able to integrate the event into their life and not find it disruptive, and for others the effects will continue to interrupt their daily existence. Some people may, for example, re-experience the event, feel always on guard in case something else happens or avoid the place or situation where the event occurred. When this happens and people seek help they are often diagnosed as suffering from Post Traumatic Stress Disorder (PTSD). The history of the development of this concept is charted in a paper by Lamprecht and Sack (2002), which demonstrates how the idea of a syndrome and its diagnostic criteria gradually became more detailed and specific. The criteria in current use in the Diagnostic and Statistical Manual (DSM IV) of the

American Psychiatric Association include a number of reactions (for example, persistent avoidance of stimuli associated with the trauma or persistent symptoms of increased arousal) to events involving death, injury or threat to physical integrity which caused someone to feel intense fear, helplessness or horror and which last longer than a given time period. Lamprecht and Sack conclude "the current diagnostic criteria cover only a small section of the overall spectrum of frequently occurring psychic and psychosomatic symptoms after traumatization" (p. 232), and believe that "a further empirical evaluation of these criteria is still urgently required" (p. 233).

As a client-centered therapist I would not want to make a diagnosis about clients who have experienced trauma or to look at their suffering in terms of symptoms, but instead to attempt to understand the meanings of these events as they experience them. My starting point is the client's subjective evaluation of their experience rather than an externally formulated definition into which they may or may not fit. Interestingly, there are people in the medical world who also question the whole concept of PTSD. Dr. David Straton, for example, a psychiatrist working in Australia, writes "PTSD is, I think, the only category in the DSM IV which is defined primarily by its cause," and goes on to say it is a "dehumanising category which reduces people to the status of car-wrecks" (Straton, 1999, p.3). Dr. Derek Summerfield, until recently principal psychiatrist at the Medical Foundation (London, England – a foundation that works with victims of torture) also throws doubt on the usefulness of PTSD as an adequate model for trauma responses. He suggests that it "does not easily encompass the complex and shifting relationship between subjective mental life and observable behaviour" (Summerfield, 1995, p. 1). Summerfield has worked with many survivors of conflict in different parts of the world and he stresses the cultural aspects of how people react to and conceptualise their experiences. He writes, "Victims react to extreme trauma in accordance with what it means to them. Generating these meanings is an activity that is socially, culturally, and often politically framed. Enduring, evolving over time, meanings are what count rather than diagnoses" (p. 2). Although he is not writing from a client-centered perspective, his views fit well into the approach.

The most common therapeutic approach for people suffering the effects of trauma in the UK is Cognitive-Behavioral Therapy (CBT). I have based my information here on the book by Scott and Stradling (1992), *Counselling for post-traumatic stress disorder*, which is written from the CBT perspective. I agree with them when they say "probably the most reliable finding in studies of the development of PTSD is the variability of people's responses to trauma" (p. 21). The most significant aspect where I part company from them is their emphasis on the therapist as expert. They suggest "each emotional disorder or problem in living [has] its own characteristic set of negative automatic thoughts and typical schemata" (p. 20). The aim of therapy is to change client's thoughts to bring them into line with an external, objective reality, and this is brought about by the therapist "posing questions about the veracity of their negative beliefs" (p. 33). As a CC therapist I believe that only clients are experts on their world. Beliefs are not evaluated or categorised – all are valued. There is thus a considerable difference between the two approaches, but I do not wish to suggest that 'we' are 'right' and 'they' are 'wrong,' but rather that we set out from different assumptions and work in different ways. I believe that the therapy approach must fit the therapist for effective work to be done. If, as seems to be widely acknowledged, the relationship between client and therapist is at the heart

of the therapeutic venture, it is reasonable to assume that both CCT and CBT can offer benefits to people struggling to regain their footing after traumatic experiences. The following accounts and reflections will, I hope, give a flavour of working from a client-centered perspective.

Stella

Stella was my client in client-centered therapy for five years until she left the UK. During that time she experienced both inner and outer changes. When we first met, she was timid, hiding away and not daring to be seen, almost invisible in her place of work. With time she became more and more visible, far more certain of what she wanted and is now recognised and respected in her field. She is a woman of great courage and vitality whose zest for life has survived very difficult and painful circumstances.

Stella grew up in Argentina with an extremely authoritarian and demanding father whom she both revered and feared. As a child she developed her own strategies for preserving herself in the face of unreasonable, threatening and often physically violent behavior. She learned that to avoid danger it paid to be invisible. Her 'antennae' became very sensitive and she created inner worlds of her own where she could be more in control. She strove to please and be acceptable and yet, in spite of great academic success, she was never 'good enough.' She took the idea that she was not good enough into her self-concept and made it her own. She felt she always had to prove herself -- to aspire to be perfect. She was driven to avoid the 'ravine' she feared was waiting for her if she fell short. Any positive feedback Stella received was inadmissible to her perception of herself. When she began to receive acclaim for her work she was both surprised and dismissive -- "I don't deserve it." In the external world she came to believe that men are dangerous, and often felt paralysed in her contact with them. By the time the military took over power in her country, Stella had already had traumatic experiences that both added to her fear of violent or terrorising events and also allowed her to find ways to cope with them. She knew how to hide and avoid danger; her sensitive antennae were very useful under a regime where police carried and used guns, soldiers were on the streets, arrests were arbitrary and people 'disappeared.' The strategies she had evolved in response to the injuries she had suffered from her early trauma helped protect her when she needed to survive.

The first two stories written by Stella, *The Phone* and *The Story of Yanina*, are about the past, and the third, *A Sunday Morning at McDonald's*, demonstrates some of the persistent effects of past events.

The Phone

The Phone relates an episode from Stella's life that vividly illustrates the terror and powerless she felt as a witness to violence at home, and the urgent need she had to escape from what was happening. Also significant is the sense of normality on the day following, where her experience was not acknowledged in any way, offering such a contrast with her reality of the night before.

It was a wintry night in the green suburban neighborhood of Buenos Aires. My family lived in a nice bungalow,

surrounded by a garden full of flowers and trees. I was 20 years old and my sister, Lucy, was 18. Lucy had a boyfriend called Maximilian (we all called him Maxi). He came from an aristocratic (though no longer influential) family. My dad hated him. He hated everything Maxi represented: his beauty, his youth, his pride, his attitude, the hold he had upon my sister, his defiance, his flamboyance. "Why did Lucy choose him? Why does she defy my principles, why does she go after superficial values? How can she love him? It has to be stopped!" My dad did everything he could to make their lives really miserable and difficult. That night, the phone rang, it was Maxi! My dad screamed, "You have five minutes, after that I will cut off the phone." Five minutes passed. Lucy was defiant. She carried on talking. My dad's voice started to rise. At this point I shut myself in the bathroom, opened the taps to get the water running, put my fingers in my ears and started singing. I did not want to hear, I did not want to be the witness of his violence. I was petrified. I did not want my dad to hurt Lucy. Lucy was a gutsy girl. She always defied my dad. Sometimes I envied her. She seemed not to fear him, not to fear the shouts, the blows. My dad's rage grew and grew. In spite of all my efforts, I could still hear him screaming, he ripped the phone off the wall! "I will go to talk to Maxi from the public phone," retorted my sister. "Don't you dare! If you do you are not coming back into this house," screamed my father. It was late at night, it was cold and wet, the neighbourhood was very secluded, the streets were not well lit and the public phone was five blocks away. Lucy went. The house was in silence. The minutes seemed hours, the time dragged on. I was still in the bathroom. I wanted to be invisible. I wanted to disappear. My heart thumped inside my chest. Will Lucy be coming back? Sometime later, I could hear a knock on the front door. It was Lucy. She did come back. She was safe! The door was locked and only my father had the keys. "You are not coming in," he shouted. "You are spending the night outside!" I do not know how long this went on, the cries of my sister, the immutability of my father. He was not moved. He felt powerful. He had control over our lives. He could manipulate us. He could abuse us. Nothing and nobody could stop him. I do not know how long the pleading went on. I lost sense of the time. Finally the door was opened. I did not see Lucy's face. I was devastated. All I wanted to do was curl up in bed and cry myself to sleep. The next morning it was as if nothing had happened.... Was it real or had I dreamt the whole thing? My father was calm and relaxed. Our household was a model of harmony and discipline. It was the calm after the storm! I do not like phones! Especially in my house, still today, if I can avoid it, I will not answer the phone. Its rings startle me. They pierce my heart. I did tackle this in my therapy sessions and I feel much better about phones now, although my relationship with them is still uneasy.

The story of Yanina

The story of Yanina took place during the military dictatorship when life was cheap and all dissent and opposition was crushed in a brutal way. Although Stella herself was never taken into custody, as a student she was suspect and had to be vigilant and at times she had to hide from the soldiers so as not to be arrested. She also witnessed terrible events. As when she was a child, she lived in an atmosphere of fear, threat and unpredictability. The effects of childhood trauma were continued and reinforced into her adult life.

It was a sunny autumn, as they usually are in my country. Yellow leaves on the streets and that very peculiar smell when you kick them as you walk along the pavement. There was a student demonstration that morning to ask for the "non closure" of the students' dining halls. The military dictators had decided that the dining halls were a breeding field for subversives, communists, terrorists and whatever else you want to imagine (bad of course). I was supposed to be meeting with a classmate and friend of mine so we could go to the peaceful demonstration together. I woke up full of excitement. I was going to do something worthwhile that day, I was going to assert my right to speak up, to say what I believed in. I told my mother in passing. Her response was instantaneous. "You are not going, you can't possibly go!" "Yes, I am!" I replied indignantly. "How can you be such a chicken? If you do not defend your rights, who is going to do it?" My mother hesitated. She changed tactics. "You see Mr Jones (our neighbour who was very ill from a cardiac condition) needs this medicine. It's very urgent and he asked if you could get it for him." My mother ran a pharmacy shop and provided a personalised service for her customers and neighbours. "After you come back, you can go to the demonstration." Oh! She touched a chord in me. "OK," I said reluctantly. "I'll get the medicine, but I am definitely going afterwards." I ran to the bus stop, I was frantic, I needed to be on time. I got the medicine, but by the time I got back it was not even worth me going. The daily trip to the university took two hours each way! I sank into a momentary desperation mixed with anger and frustration. I had failed my friend. I had failed myself! The next day, I gathered all my strength and put on a brave face and got on the train to attend a chemistry class. As I was approaching the amphitheatre, a friend runs to me, "Did you hear, did you hear?" "What?" I shouted, "What happened?" "They took Yanina away! They bundled her into a car and took her away! She resisted but it was in vain. A passer-by tried to help, he got knocked on the head!" I was stunned. I walked into the class and felt like a zombie for the rest of the day and for many days after that day. My feelings were numbed. I could not speak about it. I could not tell my mum that maybe she had saved my life. I even forgot the name of my friend: Yanina Costa. Her name came back to me during a counselling session. I will never forget your name Yanina! Your memory will live in me and it will transcend me as my

son knows your story. Writing this story made me cry. I felt good after doing it.

A Sunday morning at McDonald's

This episode took place many years later in England, in a place of safety. It demonstrates the ongoing and lasting effects of traumatic experiences where past and present realities converge. Stella loses all sense of safety and feels just as she did when her life really was in danger – there is no separation or distance from which she can observe her reactions. She is totally overwhelmed and reliving her terror.

It was so unlike me. A sunny Sunday morning and I had just dropped off my son, Harry, at his two-hour karate lesson at the leisure center. My routine was to buy the Sunday newspapers and enjoy a good cup of coffee at the local café. That Sunday it was opening later so I decided to walk to a nearby McDonald's and enjoy my papers. I found a quiet table next to the window so I could enjoy the sun, and I slowly began to sip my coffee and read the gossip column in the Sunday Times magazine. My relaxing time did not last long. I started to notice the gaze of a man who was sitting opposite me a few tables away. At first, I tried to ignore it. I tried to concentrate on my reading and continue to sip my coffee. All my efforts were in vain. My anxiety grew. My uneasiness was reflected in my trying to figure out if this man was still looking at me. Trying to predict his next move, his next gaze. I tried to keep calm, to talk myself out of this situation. I repeated in my head "Don't worry, you are safe, look around you, there are so many people, it is broad daylight, you are in a family venue. Relax!" Impossible. An incredibly powerful feeling got hold of me. I had to get out! My life was in danger. That man was going to hurt me. Without a second to lose, I grabbed my coat, my newspapers and ran out of the place. I continued to run, out of breath, looking over my shoulder. In my mind the man was coming after me! Only a few blocks away and completely out of breath, I could really stop and look back. The man was not there. Nobody was after me. Nobody was going to harm me! I was still out of breath, panting, shaking from head to toe, but I could relax, let go. I was safe. I came back to my new reality. I am in England now. The oppressors are gone. My father is gone. I walked back to the nice café, which by now was open, and I could still enjoy my cup of coffee and the Sunday papers!

Reflections

I asked Stella to reflect on our work together and how her traumatic experiences came into her therapy and this is what she wrote:

It was weird to see the way these memories came back to me during our sessions. Sometimes they would be triggered

by something which had happened very recently, for example, the McDonald's incident, and then I would bring this event to the session and this would lead to me exploring my relation, feelings and reactions to trauma and how this event would relate to something which had happened in the past, but had provoked the same sensations of terror, fear, powerlessness. What was interesting to me was that the sensations which I felt during the incidents were identical to the ones which I felt when these things were really happening (kidnapping of friends, killing of classmates, seeing bombs go off in front of me, seeing people being machine gunned in front of me or a few feet away, learning that your best friend had been 'disappeared' and that you would NEVER see that person ever again, having the constant certainty that this could happen to me at any time, anywhere, living with the fear that I was NEVER safe, no matter where I was).

I think that these events were like windows of opportunity for me to explore these feelings again, to go back from a point of safety and still be able to recall all those horrific things which happened to me and be able to accept that now I am safe, that I do not need to live in fear any more. I could bring these issues to our sessions and analyse all that was and had been going on for me during all these years of dormancy!

Otherwise, the events which I lived in Argentina had been so traumatic that my normal reaction was to not talk about them ever again, but be left with the unresolved fears and terrors. I feel that after the sessions, I came out with a better sense of my actual reality. I could step back and realize that those days were long gone and that now I was and still am safe. I do still have a problem in relating to Argentina and all its dramas. For me it is like a horrific nightmare from which now I have woken up! And if I had a choice, I would NEVER go back. Therapy allowed me to talk about it in a safe place, with no pressures and in my own time. It also allowed me to explore my deepest fears and terrors and learn to dispel them in some cases or accept them in others. I now do not feel inadequate for feeling this way; I have learned to accept myself with all the good bits and also my limitations.

As a therapist, I wanted to offer Stella a safe place where she could explore her experiences. Although we worked a lot on other areas of her life, Stella found it difficult to connect with the most terrified parts of herself. She took time to approach them and then would touch on them and move away again. With time, she was able to experience the terror and at one significant period she expressed her pain in some powerful paintings, one of them being a representation of Yanina's 'disappearance'. Exploring these together enabled her to come closer, to understand better how her experiences had affected her. To me it was important not to try to direct her in any way, to work at her pace and to wait until she was ready to go more deeply into her painful areas – and then to be a willing witness and companion, to acknowledge and validate her experiences.

While I do not believe traumatic experiences can ever be eradicated from our being, I do believe that facing them in a safe and accepting environment can reduce their power to overwhelm us again. Stella's fear of men did not go away completely but gradually lessened to the point where she could see the individual behind the man. The gap between her inner reality and the external circumstances reduced and she was able to estimate better the level of danger. It was a privilege for me to work with Stella and our work reinforced my admiration for the power of human beings to overcome and find creative ways to live with the effects of trauma.

When I looked at the literature on trauma responses, I found very little written from a specifically client-centered perspective. Of course there are many excellent books on client-centered therapy, and allusions may be made to working with people after traumatic events, but this is not their main focus. This may well be because client-centered practitioners do not diagnose client distress or see working with people in this situation as essentially different in some way. I refer the reader to a book edited by Ditty Doktor (1998) which contains some moving and thought-provoking (although not client-centered) accounts of therapy, an interesting article by Rogers (1944) on his experience of working with ex-servicemen in WWII and a paper by Margaret Warner (2000) on the effects of early childhood trauma. *TRAUMATOLOGYe* is an electronic journal that started in 1995 and considers "innovations in the study of traumatization process and methods for reducing or eliminating related human suffering."

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