Chapter 5
Skills

"Traumatic events call into question basic human relationships. They breach the attachments of family, friendship, love and community. They shatter the construction of the self that is formed and sustained in relation to others. They undermine the belief systems that give meaning to human experience. They violate the victim's faith in a natural or divine order and cast the victim into a state of existential crisis." ~Judith Herman[1]

OBJECTIVES FOR THIS CHAPTER

- Understand the victim's world: beliefs, values, rules, feelings, trauma, current situation and options
- Learn the advocate's ethical scope of practice and limits
- Understand victims' needs and why some needs must be met before others
- Combine knowledge of sexual trauma and resources with helping skills for effective phone and in-person crisis counseling

Advocates listen, support, validate, clarify, educate, and refer callers. Advocates do not need to be professional counselors to have a profound positive impact on others. Advocacy involves the short-term use of specific skills and strategies to help people cope with the turmoil of sexual trauma and its issues. The main goal of advocacy is, first and foremost, to be a non-judgmental, supportive listener.

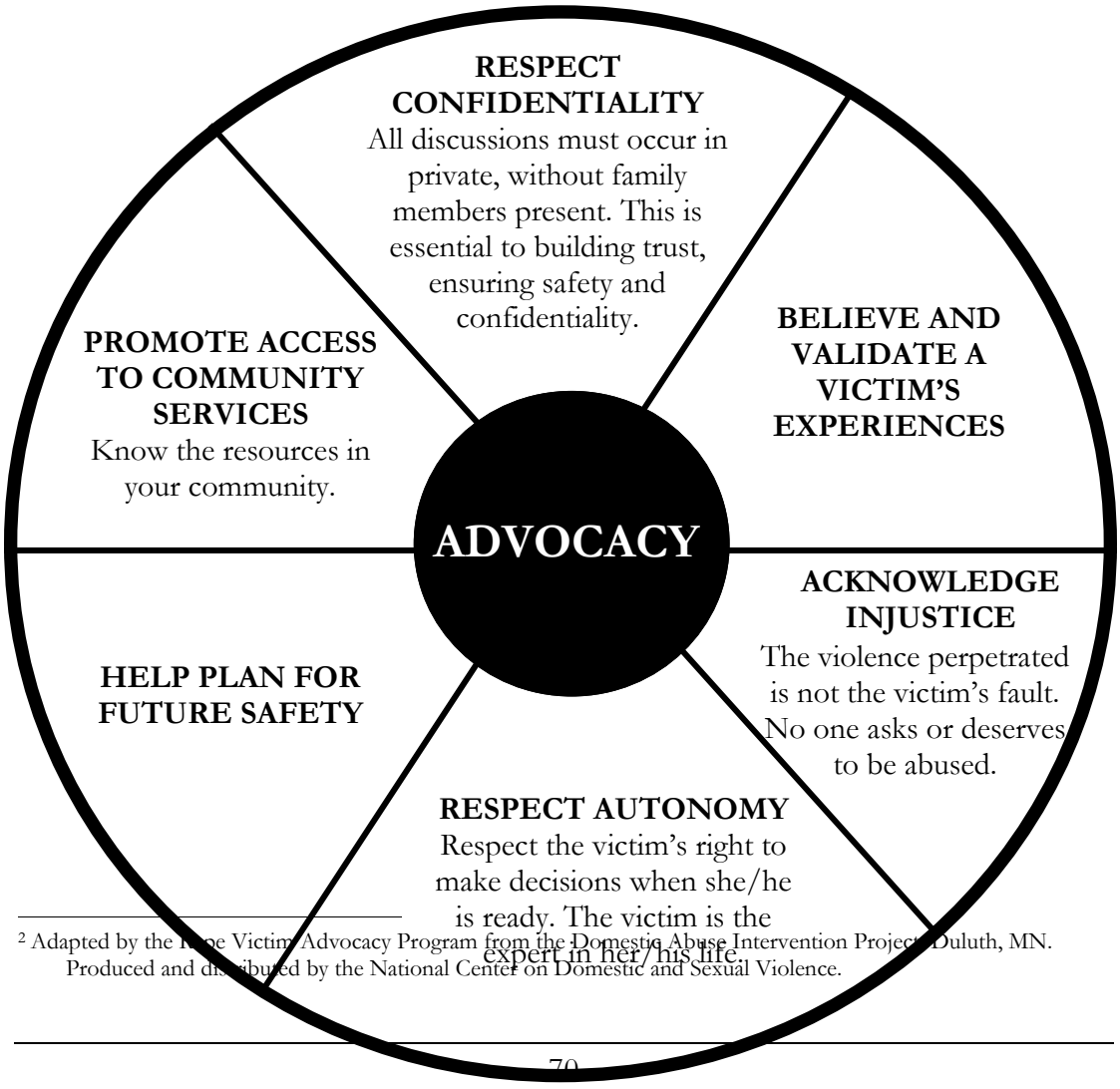
As you learn about victim impact, you will find that core life issues (e.g., trust, control and identity) are called into question. Such attacks shatter victims' perception of the world as a safe place. It destroys the sense that if a person is good, things like this will not happen to them. Abuse disrupts connections to other people, leaving wounded individuals isolated, alone and separated from the familiarity of themselves and others.

[1] Herman, Judith. *Trauma and Recovery: The Aftermath of Violence–from Domestic Abuse to Political Terror*. New York: Basic Books, 1997. Print.

THE ADVOCATE'S COUNSELING ROLE

Advocates assist victims by helping them empower themselves. Advocates validate feelings, discuss options and ensure that victims' wishes are recognized and carried out to the extent possible, given systems limitations. **This requires advocates to forego making decisions for victims, even when it seems easier or faster to do so—*especially* when advocates are asked by victims or others to make decisions.** Victims are experts at their own lives, experiences, and needs (although they may have difficulty identifying them). Advocates have specific skills, training and insights that can provide a victim with new ways to think about what happened, help the victim understand options, and make the best choices for themselves. This partnership facilitates healing.

Advocacy Wheel[2]



[2] Adapted by the Rape Victim Advocacy Program from the Domestic Abuse Intervention Project, Duluth, MN. Produced and distributed by the National Center on Domestic and Sexual Violence.

Victims/Survivors as Advocates

Survivors of sexual abuse can be powerful advocates for others. These advocates report feeling empowered by successfully completing training and helping others.

Sometimes when a client has similar circumstances as an advocate, an advocate's own issues may be triggered. This can be true for all advocates but especially for those who identify as victims/survivors. When this happens, advocates are surprised by the intensity of their feelings. We encourage advocates to take care of themselves and take a break from volunteering if or when they find it is too difficult. Sometimes a leave of absence from volunteering helps. RVAP staff can work with you to discuss any concerns you have.

Advocates' Scope of Practice

Advocates are trained to provide crisis counseling, support and information, and in-person advocacy. RVAP staff members also provide short-term counseling, support groups and educational programming. Why is it important for staff and volunteers to know their scope of practice? Because providing services outside of your scope of practice is uncomfortable, harmful and unethical.

Training, case processing and continuing education provide the knowledge, skills, and emotional health that result in high quality services. An omission of any of these three factors can result in making potentially harmful mistakes. Examples include relaying inaccurate information to the survivor and making insensitive responses or remarks.

Compassionate No

People who are in pain from interpersonal violence and its impact naturally want the pain to stop. Sometimes advocates are asked to meet needs that fall outside of the scope of practice. Assessing and managing long-term issues related to conditions such as eating disorders, sexual orientation, dissociative disorders, and mental health issues fall within the purview of professional therapists.

Advocates <u>can</u> help victims who are experiencing safety concerns or feelings such as anger, difficulties with trust, intrusive memories, flashbacks, and other posttraumatic stress symptoms. Those concerns are within the ethical scope of advocates.

Boundaries

Boundaries are rules or limitations that create the "safe space" in any helping relationship. Healthy boundaries allow the advocate and client to understand the nature and limitations of the services we can provide.

Advocates maintain healthy, ethical boundaries by: recognizing the inherent power of an advocate; respecting self and others; being authentic, sincere, and honest in interactions with callers, and identifying unresolved issues that may interfere with effectiveness. Further ways to remain effective include processing feelings and experiences with staff and other volunteers; recognizing fatigue, anxiety, or fear and processing those feelings with staff; using techniques that are relaxing and rejuvenating, and maintaining a professional relationship with clients.

Some actions may compromise healthy boundaries by blurring the advocate-client relationship. Advocates should never give callers their personal information (e.g., phone number, address, email). Likewise, advocates should not meet with callers for coffee, lunch, etc., due to the inherent and unavoidable power imbalance. Intimate or sexual relationships with current or former RVAP clients are unethical and forbidden.

Group Wisdom

Group wisdom is the body of knowledge, policies and procedures, boundaries and limits established from our collective learning and experience. Group wisdom guides staff and advocates in providing quality services and operating within their scope of practice.

Ignoring group wisdom makes advocates vulnerable to making mistakes, like re-enacting unhealthy and harmful power dynamics similar to ones that clients have suffered. For example, offenders often give and then take away attention or things that victims need. By promising more than we can deliver (e.g., being available to talk any time), we have to rescind the offer because it is not therapeutic or helpful but to the caller, it looks like the same as their previous experiences.

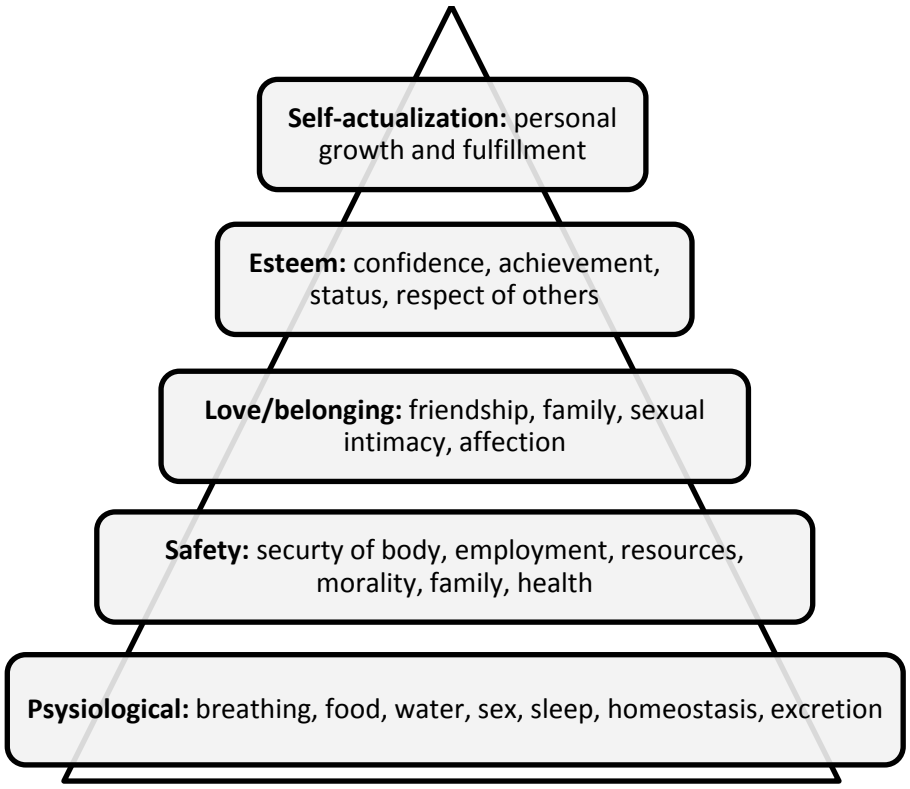
You have the responsibility to bring any concern regarding boundaries to the RVAP staff as soon as possible. The staff should be able to explain the reasoning behind the group wisdom.

DEVELOPMENTAL HELPING MODEL

Maslow's Hierarchy of Needs[3]

To build a working relationship, it is helpful to understand the capacity people have to absorb new information before they can deal with new issues. For example, if a client is in fear, nothing else will matter until the individual feels safer and has become calmer.

Basic needs such as safety, food, shelter and clothing will always take precedence. Until those needs are met, a traumatized individual simply cannot attend to anything else.



RVAP uses a variety of skills and techniques to help victims, which we refer to as "the developmental helping model." These components have been developed over the years by many professionals including psychologist Carl Rogers (client-centered therapy using empathy and genuineness)[4] social scientist Robert Carkhuff (model including empathy,

[3] Pyramid adapted from "Maslow's Hierarchy of Needs." *wikipedia.com*. Wikipedia,6 Dec. 2010. Web. 10 Jan. 2011. <http://en.wikipedia.org/wiki/Maslow's_hierarchy_of_needs>

[4] "Client Centered Therapy" *psychology.jrank.org*. Psychology Encyclopedia, 2011. Web. 26 Jan. 2011. <http://psychology.jrank.org/pages/118/Client-Centered-Therapy.html>

genuineness, concreteness and action planning)[5,6] and professor/author Gerard Egan (skilled helper model). Here, we will discuss the following skills and techniques:[7]

- Active listening
- Genuineness
- Respect
- Empathy
- Additive empathy
- Concreteness
- Action planning

ACTIVE LISTENING

Active listening is the most important tool in crisis support. Good communication skills form the foundation of effective intervention and counseling. An advocate's primary task is listening closely and reflecting back what the client has just said. It is a continuing process of clarification and reflection. As an advocate, you gather information and feelings using your senses and experience to understand. Such attention signals respect.

Active listening is a learned skill requiring energy, concentration, and practice of specific techniques. It is not the same as simply hearing and replying. The advocate works to comprehend, reflect, and respond to the caller's words and feelings instead of passively hearing the caller's words.

Techniques for Active Listening

Behave as a good listener. Be alert and focused. Aim for open body language and calm tone of voice.

Share responsibility for communicating. If you cannot understand what a client is trying to say, ask for clarification. If the client is too upset to talk, the client can practice deep breathing or choose to be silent. The advocate should learn to be comfortable with silence.

Monitor negative or defensive reactions. React to what the client is trying to say, as opposed to how the client is saying it (choice of words, tone).

---

[5] Horan, John. "Dynamic Approaches to Decision-Making Counseling."*asu.edu.* Arizona State University, n.d. Web. 26 Jan. 2011. <http://horan.asu.edu/cfedm/chapter7.php>

[6] O'Brien, Michael. "Counselor Values--Client Freedom." Pastorial Psychology 33.1 (2005): 25-34. Print.

[7] Hartley, Carolyn, et al, ed. "A Strengths-Based Communications Model: Interpersonal Skills for the Helping Relationship." *uiowa.edu.* University of Iowa School of Social Work. 2001. Web. 26 Jan. 2011. <http://www.uiowa.edu/~socialwk/Skills_manual_revision.pdf>

Be "in the moment" with the client. Think about what the client is saying rather than planning how you will respond.

Pay attention to body language and voice tones. Is the victim sitting, pacing, shaking, balling up fists, not breathing? The body often conveys information not spoken. Voice tone can reveal unspoken feelings. Focus your attention on the client's ideas, tone, pitch, and breathing.

Pay as much attention to what a client is implying as to what is being said. Many people feel safer expressing themselves indirectly through innuendo, metaphor, and analogy. Be sensitive and unafraid to ask for clarification if a meaning is too vague, or to ask if an interpretation you have made is correct.

Keep your emotions separate from the client's. You will often feel what a client is feeling and that is an important part of empathy. Try not to get distracted by your own responses.

Stop talking. In most communication, we are in the habit of feeling 50% or more responsible, for keeping a conversation going. In crisis counseling, the goal is to listen. Your contribution to the conversation is minimal. If a client chooses to be silent, let them. Simply being present is enough.

Avoid spontaneous responses. Let the client talk. Make sure that the client is feeling heard before moving on.

Be concise. Say what you have to say in as few words as possible. Paraphrasing and summarizing will help provide clarity.

Use minimal encouragers. Use phrases such as "uh huh," "I see," "oh, I understand," and "sure" to prompt the client to keep talking and convey that you are listening. However, DO NOT overuse them. If overused, a client may feel as though you are bored, disengaged, or otherwise not listening.

Use broad openers. Encourage dialogue with phrases like "tell me about it," "let's discuss that," "this seems like something important to you," "can you tell me more about…," and "go ahead, I'm listening."

Use open-ended questions. To facilitate information sharing, ask "what" and "how" questions. Open-ended questions will be discussed in depth later in this chapter.

Avoid using too many questions in a row. You do not want to come off as an inquisitor by asking too much.

Barriers to Listening

Physical Noise: Loud music, conversations and other environmental distractions make it difficult to focus on listening.

Physiological Noise: Feeling ill, in pain, cold or uncomfortable, or having to go to the bathroom can all serve to distract the advocate's attention.

Psychological Noise: Defensiveness, fear, anxiety, anger, judgment, and analyzing can make communicating difficult or impossible. These responses can create barriers when the advocate projects feelings and values onto what the client is saying. This distortion may cause very little real communication to occur.

Psychological Barriers

Red Flag Listening: Sometimes, certain words raise an alarmed response for the advocate. These words cause us to get upset and stop listening. We lose contact with the caller and stop trying to understand what is being expressed. "Suicide," "fundamentalist," "lesbian," "cult abuse," and "abortion" are examples of such words. Other red flag issues may include the victim expressing love or loyalty for the perpetrator or wanting to stay in a dangerous relationship. It is important to know that the survivor is doing what is needed to cope; the advocate's role is to be non-judgmental and supportive.

Open Ears/Closed Mind Listening: Sometimes we think we can predict what the client wants or is trying to say. In this way, we fail to listen to what is actually being said. Instead, the advocate should listen more carefully to explore the context.

Fact Listening: Often, we try to remember everything the client is saying to us. In the process of repeating the facts to ourselves, we miss the next message and lose the client. Remembering only the important facts and main ideas allows the advocate to listen more closely. The advocate's most important role is to pay attention to the client's feelings and understand the context.

Pencil Listening: Writing down notes can work well for some advocates. However, writing everything down can become distracting. Jotting notes with only key words, major issues, feelings or ideas is a good compromise.

GENUINENESS

Genuineness is providing a human response to a human need and includes the following:

Freedom from role: The advocate and the client share the power of the relationship by bringing important strengths together. The advocate has training and knowledge to share, and client's bring their knowledge about their lives and experiences, along with ways in which they have coped. By avoiding a one-up role and rejecting the "I have the answers and you don't" attitude, the advocate interacts in a natural way that joins with the client. This also allows the advocate to model openness.

Non-defensive listening: The advocate should respond genuinely to feedback from clients. By taking positive or negative feedback seriously, it validates the advocate's willingness to participate in the helping relationship.

Sharing what is helpful: The advocate should consider the client's needs and readiness to hear feedback, as well as the possible reactions to that feedback. Feedback for clients should be well timed and thoughtful.

RESPECT

Respect refers to our verbal responses and other behaviors that communicate a basic attitude of deep caring and valuing of the client's unique feelings and experiences. A good advocate also acknowledges the client's strengths and potential for developing strengths. Additionally, avoiding the use of labels shows respect for everyone. Attitudes that underlie the dimension of respect include:

Unconditional positive regard: The advocate should view the client as valued and cared for simply because they are a human being seeking help. We must suspend judgments of the client's worthiness.

Regard for self-determination: The advocate should recognize the client's right and responsibility to make choices and take action. We must respect the client's decisions, and facilitate the client's examination of consequences involved.

Assume clients know what they need: The advocate should believe that the client is able to assess their emerging needs and assert what changes are wanted. We must recognize the client's potential for wanting to do things differently even when they continually enact self-defeating behaviors. The story below is a good illustration of this concept.

EMPATHY

When you listen actively, you will want to try to see and hear the world through the client's eyes and ears. Empathy means to understand what another person is feeling as if it were your own experience, without becoming entangled in the fear, delight, anger or confusion of your own reaction to the situation. Empathy is not sympathy, which is to feel sorry for someone. Trying to figure out what you would feel if you were in the same situation is not empathy, either. You and the client are different people; empathy means understanding the client's feelings.

Be non-judgmental:

- *What was that like for you?*
- *How are you feeling about that?*

- *It's okay to feel angry. What they did to you was not right.*
- *Yes, that was horrible.*

Offer reassurance, nurturing and acceptance:

- *You are taking care of yourself now.*
- *I'm glad that you reached out.*
- *It wasn't your fault. You do not deserve to be hurt that way.*

Reflective Listening

To express empathy, you will use reflective listening, acknowledging both the feelings and the content of what the client tells you.

Reflecting feelings: State in your own words how the client appears to be feeling, according to information given, both verbally and non-verbally. This gives the client a chance to compare, process, and feel relief from tension. Choosing more exact feeling words shows the client you are listening and helps the client move from superficial ("glad," "mad," "sad," or "bad") to deeper, underlying emotions or thoughts.

It is often helpful to use the following "stems" to help reflect feelings:

- *It sounds like you feel_____*
- *You feel_____*
- *You are feeling_____*

Example of reflecting feelings:

- Speaker: *I usually drive to work with Patty, but when I got to her house yesterday, she had already left. She knew I was coming and that I'd have to walk four miles to get to work.*
- Response: *It sounds like you feel angry at Patty.*

Reflecting Content: State in your own words the facts or concepts which the client said by paraphrasing and summarizing. Use this type of reflection to make sure you understand what is said, to clarify miscommunications, and to encourage the client to talk. If you restate in a questioning or tentative tone of voice, the other person will be able to consider the accuracy of the reflection and may facilitate the conversation in going forward.

The following stems help reflect content by adding "because" to the reflecting feeling stem.

- *You feel _____ because _____.*
- *Sounds like you feel_____because_____.*

Example of reflecting content:

- Speaker: *I thought this was going to be a great job. It's not the way they described it the first day. I thought it was what I was looking for but it's not going anywhere. Same old thing, it's just like any other job—boring.*
- Response: *It sounds like you feel unhappy because it doesn't meet your initial feelings.*

CONCRETENESS

Advocates should use exploratory questions, summaries, and validation techniques to gain a clear understanding of the caller's perceptions.

Exploratory Questions

Questions should be used to clarify and expand the client's worldview, not just out of curiosity, to keep a conversation going or to distract the client from stressful topics. Open-ended questions beginning with "how" and "what" encourage self-exploration by clients. "Why" questions usually lead to justifications and explanations, and may sound blaming. Questions should be consistently followed by a sequence of empathy statements.

When asking exploratory questions, let the client lead as much as possible by allowing the client to say as much or as little as about their situation as they choose. It is okay if you do not know all the details, or feel like you do not have the full picture of what happened. You do not need to know the details in order to be supportive. Details will likely emerge.

Try to understand the meaning of the event for the client. Use intuition and questions to get a sense of the level of the client's distress. At this point, you are gathering an initial overview of the situation.

- *How are you feeling right now?*
- *What's it like for you to talk about it?*
- *Have you ever told anyone before?*
- *Did you feel like they were supportive of you?*

Summaries

Summaries are structured like empathy statements; however, they cover a longer period of conversation and contain a broader range of feelings and context. They contain specific and concise language, capturing the most relevant feelings and issues. To avoid rambling or storytelling, summaries should be frequent and leave the client room to choose the next direction of the conversation. Finally, summaries should relate past events to here and now.

Validation

Validating feelings is crucial to let the client know that you are non-judgmental and that the client's feelings are understandable and important.

Validating Statements:

- *It took a lot of courage to talk about this; I'm glad you did.*
- *Sometimes you feel like you hate her for what happened. You're allowed to feel angry.*
- *No, I don't think you're crazy; your fear makes a lot of sense to me. It sounds like you're worried about being crazy. What would that mean to you?*

ADDITIVE EMPATHY

Once the advocate and client have developed a clear picture of the client's feelings, behaviors and experiences, the advocate then moves into using the information gained to provide a bigger picture or alternative frame of reference.

In making additive empathy statements, the advocate integrates the pieces of information that seem to fit together and points out possible implications. In this process, the advocate assists the client in increasing self-exploration skills, personalizing problems and goals, looking at areas of vulnerability, and seeing patterns in behaviors and feeling reactions.

The client needs to process what the advocate says by determining its accuracy and searching out new meanings and implications. The advocate may want to initiate listening checks:

- *How are you feeling about what I just said?*
- *I'm aware that you've gotten quieter, and I'm wondering how you feel?*
- *While you say you're feeling (expressed feeling), it sounds like you're also feeling (underlying feeling) because (cause of feeling).*

Other Helping Steps

Explore options: Explore what the client would like to change or would like to see happen. Reflect what you hear.

- *What would be helpful for you right now? What has helped in the past?*
- *It sounds like right now you mostly want to be able to sleep through the night without being scared.*
- *What kind of support system do you have?*

Identify and reinforce healthy coping skills: Identify the client's strengths that can help with coping.

- *Reaching out to us is a first step. You're taking good care of yourself.*
- *Yes, sometimes talking with a close friend can be helpful.*
- *Good idea, walking the dog can really help you to relax.*

Identify support: Identify and reinforce close support systems—family, friends, co-workers, therapist, etc.

- *Is there someone you would feel comfortable talking to about this?*
- *Is there someone you could stay with tonight?*
- *Do you have a friend who you can confide in?*

Identify resources: Provide information about advocacy and referrals—medical, legal, counseling, etc.

- *Would you like some information about an agency that could help you with this?*
- *The RVAP staff has a lot of experience helping people who have been sexually assaulted. You're welcome to call there during the day (or leave a message on business line) and make an appointment.*

ACTION PLANNING

Repeat the options that the client is most interested in. Explore with the client ways to follow up on those actions. Help the client evaluate the pros and cons of any action being considered. Emphasize the available support system the caller identified.

- *So we talked about options that you think would work. How would you proceed with those?*
- *What do you see as the positives (with that action)?*
- *What might be drawbacks or negatives (with that action)?*
- *How could you use the support system you told me about in this plan?*

WHAT YOU NEED TO KNOW

- Victims/survivors are the experts of their own healing.
- What boundaries are and why they are important.
- Remember that you are a counselor—not a therapist—so work within the ethical scope of practice.
- What advocate tools are and how they can be used effectively.
- Active listening is the most important tool in crisis support.

FOR FURTHER READING

Cowley, Geoffrey. "Our Bodies, Our Fears." *Newsweek*, 24 February 2003: 43-49. Print.

Herman, Judith. *Trauma and Recovery: The Aftermath of Violence--from Domestic Abuse to Political Terror*. New York: Basic Books, 1997. Print.

Katherine, Anne. *Boundaries: Where You End and I Begin*. IL: Parkside Publishing, 1991. Print.

LeDoux, Joseph. *The Emotional Brain: The Mysterious Underpinnings of Emotional Life*. NY: Simon & Schuster, 1996. Print.

Solomon, Marion and Daniel Siegel. *Healing Trauma: Attachment, Mind, Body, and Brain*. NY: W.W. Norton, 2003. Print.

Stamm, B. Hudnall. *Secondary Traumatic Stress: Self-Care Issues for Clinicians, Researchers, and Educators*. 2nd ed. Baltimore: Sidran Press, 1999. Print.