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# NF93-149 Helping the Hurting Guidelines for the Helping Professional

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## Helping the Hurting *Guidelines for the Helping Professional*

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*Herbert G. Lingren, Extension Family Life Specialist*

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The circumstances may vary, but at one time or another you are likely to receive a call from someone that will place you unexpectedly in a non-traditional helping role. How you proceed as helper and as a person may determine how supportive or helpful you end up being.

As important as knowing how to help someone in need is being aware of the things you should **not** do when placed in the role of confidant to a troubled person.

### **Don't assume responsibility for solving problems**

Your first impulse may be to try to "fix" the problem. We are all subject to the "Lone Ranger Syndrome" where we see ourselves sweeping in to solve the dilemma and leaving the scene with the spectators marveling and awestruck at the wonders of "that masked man."

In reality, the person may not ask for solutions but may need support and reassurance. You do the person seeking help no favor by taking over and imposing your own advice. Rather, you want to enable the person to seek solutions that are healthful. Each person is unique and sees things from a particular perspective. What would be good and healthy for one person could be threatening and life-sapping for someone else. You don't really have the answers for someone else.

### **Don't be judgmental**

There is often the temptation to stamp your own mark of approval or correctness on a situation. That may make the person giving advice feel superior and in control, but flippant comments like, "I think that's awful," "You were really dumb to...," or "I don't know why you...," can undermine and destroy the sense of goodness hurting people have about themselves. It is corrosive to hurl judgments, and ultimately may handicap the person in crisis.

### **Don't rush the hurting person**

In our busy lives we tend to be brisk and very much agenda-oriented. We Americans are a driven people and we impatiently demand, "Let's get on with it!"

Time slows, however, for the hurting person. There is a sense of being "wrapped in cotton." Numbness takes over, and the motions of living are gone through without much thought. The normal grief process for a severe loss, the death of a loved one, for example, takes at least two years. A hurting person also needs time to sort, search and regain strength to go on with life.

How then should you proceed if you truly want to help? Many times the best help comes from those who assume the role of **listener** and **facilitator**. It is a role similar to that of a travel agent for the would-be traveler. As a facilitator the agent gathers pertinent information such as time, budget, expectations, and then points to possibilities and reasonable alternatives. A listener and a resource person helps provide perspective on the overall travel arrangements. As you facilitate, you will want to:

1. Identify feelings,
2. Identify desires,
3. Explore consequences and alternatives.

The instinctive ways in which many of us listen to a hurting person may be sound, but you can listen best if you develop the psychological principle of "active" or "reflective" listening. With this tool you can better help individuals **identify** their own **feelings**. This becomes the groundwork from which all future actions can come. It requires intense concentration as it is a process of feeding back or mirroring back that which the person says. Key words in doing this are:

"It sounds as if..."  
"You mean that..."  
"What's going on with you is..."

Often, when in pain, a person gets stuck in the feeling stage and will repeat "I'm tired — just tired" or "I'm so mad — I'm sick of the whole thing!" By using active listening you can prod the person a bit and help clarify the feelings he or she is experiencing. By hearing these feelings expressed by someone else, the hurting person can correct inaccurate impressions or feel affirmed. In this way, you enable the troubled person to move beyond the surface emotions and to touch the hurt that is hidden beneath.

There may be some shyness in talking and the person may toss out subtle invitations to you: "I'm confused" or "I don't know what to think." Saying, "I'm sure you are confused" or "I understand why you wouldn't know what to think" can limit the conversation. Say instead, "How are you confused?" or "What is confusing you?" This allows the person to articulate and delve deeper into his/her hidden struggles.

Trauma, whether created by a sudden loss or the destruction of something very dear to us, creates a real dilemma for most of us. On the one hand, we believe that no one can hurt as badly as we hurt, or really understand the depth of our loss, yet we desperately want reassurance that we aren't strange in our pain, that we aren't alone. So it is important to acknowledge a common bond with the person's pain: "I may have felt that way when..." while being cautious not to compete with the person over feelings. Saying "I remember when I ..." lowers the experience to comparing surgical scars and doesn't lead to a better understanding of the person we're trying to help.

The next step in the facilitation process is to help the person **identify desires**. The question now becomes "What do you want to do?"

It is a freeing question. It tells the person that, in spite of the hurt being experienced, there are alternatives to pursue. It helps raise awareness that one has some say in the future and it opens the door to discovering personal potential.

Linked with identifying desires is exploring consequences. "If you do what you want, what is likely to happen?" "Are the consequences something you are comfortable with?"

Frequently, people simply don't know what they want, or in some instances they may come up with actions that would be harmful to themselves or others. It is then that as a resource person, you may suggest possible alternatives.

This is a critical point for the facilitator because it is all too easy to slip into advice giving. Remember you are not there to solve problems! If all alternatives are nonsense, it is possible to suggest actions, but never say, "Why don't you...". It will be heard as "you should."

Try instead, "Have you thought about...?" or "What would happen if...?" You provide information to the person to help in decision making. You may offer direction, suggesting some of the various self-help or support groups available in your community.

### **Remember the importance of touch**

Words do indeed sometimes fail us. We blunder so easily in our efforts to say the right thing. Our intention to heal, to soothe, gets garbled as it transfers from our hearts to our tongues. If a picture is worth a thousand words, then touch is worth a million. Our support, our caring, can be transmitted with a caress, a hug. By holding a hand, we cement a bond: we give strength. Touching is a presence and those who hurt may hunger for it. Always remember, however, that touch must be appropriate, and comfortable to the person you are working with.

### **Remember the importance of confidentiality**

You are a privileged person when someone turns to you for help. You have been given the gift of trust. It is important not to betray that trust, to trivialize it by wantonly gossiping about others' misfortune. One person has suggested that this kind of sharing should be treated with the sacredness of the confessional. So hold your tongue: respect yourself as well as the person who turned to you.

### **Recognize your own vulnerability**

You are working with someone you care about and as they hurt, so do you. As they mourn, so do you. Don't deny your own feelings — take some time for yourself to get in touch with your own pain. Feed yourself emotionally and spiritually so that you will continue to have the strength to care for and nurture others.

You also might be a bit suspicious of yourself. What are your motives for getting involved? Do you see yourself as a "rescuer" trying to "save" your victim? What are your expectations of the person you're helping? Are they to be grateful to you? Do you put a price tag on your caring?

In reality, the hurting person may feel embarrassed or shamed by the admitted "weakness." Experiencing the feeling of having failed you, he or she may gradually pull away from you. A distance may develop. That is what is so difficult: that in our love for someone we may be called to let go, to allow him or her to grow, to develop, to reach beyond our own limiting vision. We are so vulnerable when we seek to

help.

## How to refer a person for help

1. Be aware of agencies and resources available in your community. Get to know the professionals and volunteers in your community who can help — find out what services they offer and what their limitations are. Be sure to touch base with the following: Extension, social services, mental health, community action, food pantries (often church-sponsored) and support groups.
2. Listen for signs and symptoms that the person or family needs help that you can't provide (i.e., legal advice, financial advice, personal counseling). Remember, you are not a financial advisor or personal counselor. But you can link the person or family with resources that can help them deal better with their situation.
3. Assess what agency or community resource would be most appropriate to address the person's (or family's) problem. This is why it's important to know what community resources are available. If you have any questions about whether an organization could be of help, give them a call and ask.
4. Discuss the referral with the person or family. You might say, "I sense that you need help with \_\_\_\_\_. I think \_\_\_\_\_ organization can help you." It's even more useful if you can say, "I know of a farm family that went to \_\_\_\_\_ organization and they found it to be very helpful." In short, if you know of farm families who have been helped, share their experience but keep their names confidential.
5. Explore the individual's or family's willingness to contact the community resource. You might say, "Does it make sense to you to contact \_\_\_\_\_?" or "how do you feel about seeking help from this agency?" If the person or family feels comfortable making the contact, simply urge them to do so.
6. If the person or family is unwilling to make the contact or if there is some danger if action is not taken, you should take the initiative:
  - a. Call the agency and ask to speak with the intake worker (if there is one).
  - b. Identify yourself and your relationship with the person or family.
  - c. State what you think the person's or family's needs are (depressed, suicidal, needs food or fuel, needs legal advice.)
  - d. Ask the agency what follow-up action they will take and what (if anything) you can do.
7. Try to find out whether the person or family contacted the resource and whether they were helped. Don't pry for details — just make sure they know that you care and that you want them to get the help they need.

Henri Nouwen, in his book *Reaching Out*, writes, "...it is exactly in this willingness to know the other fully that we can really reach out to him or her and become healers. Therefore healing means, first of all, the creation of an empty but friendly space where those who suffer can tell their story to someone who can listen with real attention... It needs the full and real presence of people to each other. It is indeed one of the highest forms of hospitality."

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