

Grounding Tool¹

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June 19, 2014

I. What is Grounding?

Grounding techniques are used when working with a trauma survivor who may become overwhelmed or enter a dissociated state when recounting memories or strong emotions associated with a traumatic event. The U.S. Department of Health and Human Services (HHS) has noted that “grounding techniques are important skills for assessors and all other behavioral health service providers who interact with traumatized clients (e.g., nurses, security, administrators, clinicians).”² While advocates and attorneys do not provide therapy for their clients, knowledge of grounding can help defuse an escalating situation or calm a client who may become overwhelmed by the assessment process. Effective grounding strategies help the client become aware of the “here and now” and help the client recognize that the strong and traumatic memories that he or she is experiencing are from the past. HHS describes this process with a metaphor of the experience of walking out of a movie theater: “When the person dissociates or has a flashback, it’s like watching a mental movie; grounding techniques help him or her step out of the movie theater into the daylight and the present environment.”³

II. When Should You Use this Grounding Tool?

This tool should be referenced whenever you ask a client to share their experiences. This can occur when you are interviewing a client to determine their legal rights, eligibility for legal remedies, victim based services, public benefits, and immigration relief. This tool can be particularly helpful when you are serving a client who has dealt with, or who you believe has dealt with, past trauma. You cannot assume, based on a brief intake, that a client has not dealt with trauma. Some clients may be comfortable tackling traumatic events during your first intake while others may wait to gain your trust and share traumatic experiences after several meetings. This tool can be especially useful when the client is recounting her story, which is needed to develop the client’s affidavit for her VAWA self-petition or U visa application.

Educate your client ahead of time about triggers and flashbacks, normalizing these as typical responses to recalling trauma. If you know the client has a history of dissociating or becoming overwhelmed when attempting to discuss parts of their past, it can also be useful to talk about potential grounding techniques before this discussion begins. By establishing potentially useful options ahead of time, you will be better able to bring the client back to a present, calm state. These techniques can also help the client determine tactics that they might use during stressful times when you are not present.

¹ This tool was adapted from the Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health and Human Services (HHS), *A Treatment Improvement Protocol (TIP): Trauma-Informed Care in Behavioral Health Services*, TIP 57 (2014), available at: <http://store.samhsa.gov/shin/content/SMA14-4816/SMA14-4816.pdf>

² *Id.* at 98 (citing S.M. Melnick & E.L. Bassuk, *Identifying and Responding to Violence Among Poor and Homeless Women* (National Healthcare for the Homeless Council 2000)).

³ *Id.*

This project was supported by Grant No. 2013-TA-AX-K009 awarded by the Office on Violence Against Women, U.S. Department of Justice. The opinions, findings, conclusions and recommendations expressed in this publication are those of the author(s) and do not necessarily reflect the views of the Department of Justice, Office on Violence Against Women.

III. Grounding Techniques⁴

A. For an anxious client:

- Ask whether the client feels safe
- Assure the client that they are in a safe space
- Express that you want to make the space safe based on the client's definition of “safe”
- Consider what factors may make the context of your meeting feel “unsafe”
 - E.g. the formality, the presence of authority figures
- Ask about previous experiences the client has had when having to tell their story
- Be clear about the steps in the process: break it into manageable chunks based on a timeline that fits the needs of the client and the organization
- Point out the client's successes and courage so far in the process, even just coming in for help
 - This helps to build self-esteem and counter some of the anxieties and insecurities that can slow the process and prevent healing
- If it is the mass of paperwork that is overwhelming, prioritize the important documents. Even if the client will ultimately need to review and sign all of them, setting smaller goals can make the entire process easier for the immigrant client to handle.
- Offer to allow for a pause or a few minutes of relaxation:
 - deep breaths;
 - awareness of present surroundings;
 - reassurance of the safety of the surrounding;
 - standing up;
 - getting a cup of water;
 - taking a walk down the hall; and
 - other such distractions
- Encourage the client to ask for more pauses or a change of pace whenever needed
- If overwhelmed by reliving the experience:
 - get the person back into the here-and-now by asking them to notice and feel anything that's literal, concrete, and now;
 - keep eyes open;
 - ask them to look at you or your hand or an object in the room (if eye contact is too uncomfortable);
 - make sure they focus on what's right here rather than back there;
 - get them to engage and describe what they're seeing in precise detail; and
 - recognize that anything can bring someone back into a dissociative place, so be aware
- Be aware of your tone, body language, and speaking speed. Speaking quickly and loudly can exacerbate anxiety, while slowing down and speaking very calmly can be soothing.
- Reassure the client that you do not expect everything to happen today – this is part of an ongoing process that can go at whatever pace feels comfortable.

⁴ For a live demonstration of these techniques, see Scenario 3 (anxious client) and Scenario 4 (shutdown client) of the National Immigrant Women's Advocacy Project's training video, *Hands on Training for advocates and Attorneys on Trauma-Informed Work with Immigrant Women Who Are Survivors of Domestic Violence and Sexual Assault* (Feb. 24, 2014), <https://www.youtube.com/watch?v=05Z95q1bkG4>

- Guided imagery can be useful in helping some clients, whether guiding them to visualize a safe space, a dial with which they can reduce the intensity of their emotions, or a more personalized scenario.⁵

B. For a client who has “shut down” or is unwilling to discuss necessary details:

- Begin the discussion with the issues and parts of the story with which the client is most comfortable.
- Try to explain in context why the details you are asking for are necessary.
- Acknowledge that sharing these details can be difficult and that therapy can be useful for some individuals (see below on how to broach this subject).
- Employ motivational interviewing:
 - Ask the client to ask themselves, “What are the reasons I want to do this and the reasons I don’t want to do this? What are the pros and cons of talking about it and the pros and cons of not talking about it?”
 - Help the client weigh the decisions in a non-judgmental way, leaving an open space for him/her to consider each option and make an informed choice.
- Sometimes separating out the processes can help – the client could tell you the story, and then decide later whether s/he wants to pursue the relief. This way the client can practice what it would be like to tell you without the pressure of making an official report or interacting with law enforcement. By decoupling the act of telling you the story from the official reporting processes, the client may feel more comfortable recounting the past and you can use this information to advise the client on the potential options available.
- Recognize that all you can do is help clients explore all of their options in a non-coercive way and assure them that the decision is always ultimately in their hands. Reassure your client that your door is always open – it’s not all about making the decision today. Factors change and the client may want or need your help or advice later on down the road.
- When suggesting the sensitive topic of seeking therapy: Prepare how you will broach this subject with clients when you believe it could be helpful. When suggesting therapy, acknowledge your inadequacy in playing that role (“I can help you with the legal aspects, but not with the hurt in your heart and mind. There’s someone else who might be better to talk with about that,” or, “Would it help to talk to someone to help soothe what hurts?”). Acknowledge that “therapy” might mean something different or carry a different stigma in their culture, but that it is more widely accepted and encouraged here. Be sure to phrase therapy as an option that might be useful “now or at some point,” avoiding the potential interpretation that they must seek therapy now or they will have failed and never have the option again.
- Some clients may like to discuss their dissociative episodes after they’ve recovered. This can help you both better understand what their triggers are and potentially avoid them or handle them differently in the future.⁶

⁵ See SAMHSA HHS TIP 57, available at: <http://store.samhsa.gov/shin/content//SMA14-4816/SMA14-4816.pdf>

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