Changes of all kinds can have a profound effect on us, both in terms of our wellbeing and performance. David Murphy has worked therapeutically with people, including front-line professionals, for over 20 years, helping them to change, and adapt to change. David talks to Steven Shorrock about dealing with traumatic events and more mundane changes.

**KEY POINTS**

- People may be exposed to situations suddenly or chronically. Traumatic stress often relates to something different that has happened in response to a specific situation.
- In response to traumatic circumstances, people often have distressing reminders, thoughts, images, and feelings. People will sometimes either avoid these or re-experience them.
- People can be hyper-aroused, on high alert, or numbed to situations when they have experienced trauma, for a few weeks afterwards.
- Adaptability, openness to experience, and ability to talk about challenging changes are constructive ways of dealing with stress. Rigid thinking and denying facts about situations can problematic.
- Change is linked to our sensory experience, self-concept, and ideal self.
- We tread a line between autonomy and belonging. We may find it hard to speak out about certain things because we fear that we will be rejected by the group. Being able to communicate these conflicts in groups is healthy.
Understanding traumatic stress

David: Most of my work in relation to the police has been helping people in very specialist roles be able to cope and to manage the high levels of stress and potentially distressing aspects of life that they have to encounter. Mostly this was about dealing with child protection and other forms of trauma such as domestic violence, but also road traffic collision investigators.

These people, in different ways, are exposed to situations either quite suddenly or chronically. So child protection workers are exposed to chronic circumstances where, day in day out, they are dealing with very distressing parts of people’s lives. But road traffic people or firearms officers are going from one situation where everything is very quiet for long periods of time, and then suddenly, a very major incident has happened and they have to respond quickly. My work was nearly always with those people after the event and helping them process what they’ve encountered, and hopefully help them to continue their work in a healthy way.

Steven: You’ve mentioned two kinds of change. One is a gradual chronic change and the other is a sudden change. Is there a difference in how those changes affect individuals?

David: It’s difficult to say that there is a very clear difference, actually. One of the reasons why that would be is because often when I will meet people in a therapeutic context, from either group of people, something quite different has happened in response to this situation that isn’t what is usually happening. And it is almost impossible to predict what that might be. So, for instance, the person that was going to attend a fatal road collision could attend and process several of these without any obvious impact. And then they arrive at one and there is something about that specific set of circumstances, which for them is quite different. There is something about what’s happened that has been overwhelming, that they’ve been unable to deal with in that particular situation.

Steven: Could there be a gradual build-up of chronic stress or trauma, which is then be released by a particular episode? And if so, might there could be some signs earlier on that suggest that people need support on before they are tipped over into traumatic stress?

David: That’s possible, but one of the reasons why people experience traumatic stress is because they’ve been exposed to something which has not been able to be processed and integrated into their self-concept or view of the world in that particular moment. They might have a very fixed view of the world, let’s say. These might be ingrained but out-of-awareness beliefs. Then they are presented with a set of information that makes them have to completely re-evaluate those assumptions. Their cherished beliefs about the world are suddenly shattered.

Then people have to do something with that information. Seeing how adaptable they are, how open to integrating this new information, how they are able to talk about these differences and challenges that they are experiencing, will be all really constructive signs.

So the way people process their experiences in approaching situations might be a useful way of understanding how somebody might be able to respond to traumatic circumstances. Although an absence of support, overload of work, feeling vulnerable or insecure in your position, would be very important to try to understand.

Steven: Might some signs be visible, especially to colleagues and managers, when people are experiencing a level of change which is somehow distressing to them? Might there be signs that are more relational, that relate to our communication, or that are quite personal or behavioural?

David: People are usually experiencing in two ways in response to traumatic circumstances. They may be caught up avoiding situations: reminders, thoughts, feelings. It could be avoiding certain conversations, avoiding reading certain things, avoiding watching the TV.

The other side is that people are caught up in re-experiencing, where you are doing the opposite. You’re troubled by distressing thoughts, images, and feelings about what’s happened. It’s not only remembering. It’s remembering with distress. So, often when that’s happening, people are more agitated, irritable, showing less understanding or compassion — what is sometimes referred to as burnout. Those signs tend to be more obvious in workplace settings in relationships where people might respond in a snappy way.

The other thing is that people can be either hyper-roused or being very numbed to situations. So people might really flatten out their feelings and have strong emotional numbing or they might be actually on a really high alert. So somebody knocks their cup over on the desk next to them and they jump up out of their seat. They have such a startled response because their body system is still alert to the potential for a new danger that they’ve got to respond to. Those are the sorts of things that people might display where they have had to face circumstances beyond what they have been able to process at the time or in the immediate period afterwards.

In certain policework, it’s not uncommon to feel any of those things for quite a while after. Days or weeks wouldn’t be unusual to still be processing thoughts or images or feelings about what people have had to encounter and still maybe feeling a bit upset about that. But after a few weeks, you’d expect to see that starting to even

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*For the full article, please refer to HindSight 28 | WINTER 2018-2019.*
out and people should be more able to talk about it again without becoming upset. It takes time for that equilibrium to come back.

**Change done to us and by us**

Steven: I guess a difference between people working in emergency services compared to the readers of *HindSight* magazine, who are primarily air traffic controllers and pilots, would be that first responders would experience events that could be traumatic on a more regular basis.

Whereas a professional pilot or air traffic controller probably won’t experience that very often but they will experience lots of changes, some of which will feel like they are forced upon them. Listening to thousands of front-line practitioners as well as middle managers, it’s the changes that are done to people that seem to be the ones that cause so much stress. Where they have no agency, no choice, no control, and also where they feel that the change is not really in their favour, even if that might be the intention. Do you have any kind of experience in the work that you’ve done of working with people with those kinds of changes, which may not be traumatic but are stressful?

David: The types of changes that we might work with in therapy are those that come from the person themselves. Person-centred and experiential therapy is an approach based on humanistic psychology and the founder of the approach is psychologist Carl Rogers. With this therapy, change takes place within them as a person in the way in which they decide, in the direction at which they decide, and at the pace at which they decide. That whole approach is based on the idea that people are capable and have a right to self-determination. So external controls nearly always create conflict with a person’s sense of agency and autonomy. This only doesn’t happen when the change that’s coming from an external control is completely congruent with the direction of change that the individual is moving towards anyway.

In workplace settings any kind of change other than the change that the person is making for themselves and by themselves has to be managed knowing that there is likely to be some sort of tension.

**The self and change**

Steven: You mentioned Carl Rogers. Part of his theory on the self is this difference between life as we are experience it, moment by moment, and our self-concept, which is how we see ourselves.

Did Carl Rogers have to say about that?

David: He’s saying that inside each person a process of evaluation that will be either towards the maintenance and enhancement of the organism, and its fellows, or a threat to the organism. Every experience is evaluated internally. This is an innate capacity in living organisms to respond and evaluate to the environment.

The self-concept is thoughts and feelings about who I am in relation to my environment, and part of that environment is my family, friends, peer group, culture, etc. But it’s really very goal-directed and our behaviours are all directed towards the meeting of some kind of need.

So I might think of myself as being a good air traffic controller. My self image is of somebody as being quite competent and capable. And then a change process is instigated within the work environment where I now feel like I don’t know what I’m doing. But my self-concept is telling me, “You’ll be able to do it. You’re a competent, capable person.” But that might be grounded in a whole history of, “Just get on with it. You mustn’t fail.” There is no room for doubts or saying “I’m not really sure what’s happening here”. I’ve got to maintain this concept of myself as a capable person. Because I haven’t been able to say, “Actually I’m not always capable”, I haven’t been able to acknowledge that in my self-concept, it isn’t part of who I am. Then if I make a mistake, I’m really stressed, I’m very anxious. The way in which we’ve developed can really affect us in terms of how we approach things.

Steven: With certain professions such as air traffic control, professional pilots, doctors, there can be a superhero syndrome, that you have to be super capable at all times in order to do the job. In those professions, there is less space to admit any kind of difficulties or struggles.

David: Yes. And that’s the same with the police officers. In a specialist role, what are perceived to be signs of weakness of vulnerability might mean that they might be asked to stop doing what they do. That is to do with the culture of organisations and professional groups. And it’s probably not a very good thing to let it go unaddressed.

Steven: People might be concerned that if they admit to struggling with a change they’ve experienced, be it sudden or gradual, traumatic or non-traumatic, their licence to operate could be under threat, especially in highly regulated professions.

David: What tends to happen is people get caught up in defensive practice. If there is a culture where people feel fearful of acknowledging a struggle or a loss of confidence or some sort of doubt in their understanding or knowledge or capability, then they are far more likely to take actions to defend themselves against something that hasn’t actually yet happened. But paradoxically, when people are defending against things that might happen, they are more likely to create the situation that they are worried about.

**Personal growth and change**

Steven: Another thing that I’d like to go back to is this idea of growth that you mentioned earlier. Carl Rogers also wrote about the ideal self, which perhaps relates to how we can grow from change. What did Rogers have to say about the ideal self in relation to those other aspects of the self?
David: This idea of an ideal self is the self that I think that I should be. That might be based on something that I really want for myself but it might also be based on what other people have told me that I really ought to be. If I really think I have to be something other than what I really am currently then that can be quite a difficult thing. That’s likely to lead them into more distress or more disturbance and feeling more anxious.

Rogers also talked about the idea of a fully functioning person. He had an idea that intrinsic in each person is this motivation towards fulfilment of potentials, becoming open to our experiences, being able to trust in myself and also being able to trust others. He was saying that that’s the direction of change that people are always striving for, but they are not always able to fulfil.

Change, autonomy and belonging

Steven: I guess one possible barrier to that, especially in occupations such as the ones that we’ve talked about so far, is colleagues. You, as a young trainee air-traffic controller, pilot, police officer, or clinician, land in an established culture where the ways of doing things, the beliefs, the attitudes, the ways of expressing, are already set. The difficulty for an individual, even though there may be an inbuilt or a natural tendency to wish to be more authentic or congruent, might be disapproval of colleagues.

So for instance in the face of a major change, you may be quite okay with the change. But you may feel that you can’t say that because the group position is that the change is bad. And so a barrier to your being open in expressing what you think may be that your colleagues have made it clear that “this is our position”.

David: Yes, we’re always treading the line between autonomy and belonging. Often we find ourselves feeling that we can’t speak out about certain things because we fear that will have nothing to belong to, or we’ll be rejected by the group. This will lead to inauthenticity. However, sometimes people will or might find that the most authentic thing to do would be to be aware that that is what they feel, and that’s what the group feels, and then to make a decision based on what they decide is the right thing for them and their group, doing it with full awareness of all of the available information.

Steven: In that sense either option could be stressful because with one option you’re denying your authentic self. And with the other you’re denying belonging with a group which is conditional upon your acceptance of group norms and the group’s view. One thing that you could do initially is to name what was going on, that I feel conflicted now between my own view and what (I think) you think I should think.

David: If people are able to do that, that would be a very high functioning environment. If everybody were able to say, “I feel this. I think the group thinks this. I think the group thinks I need to do this. But if I do this I’m going to feel this”, then that’s a true dialogue amongst members of a group. If that were possible, that would be a very high functioning group. They would know what it is that they’re thinking, able to take responsibility for that, and then actually do something with it, which is speak it to the group and see what happens next.

My colleague Stephen Joseph wrote a book called ‘Authentic’, and one of the things he says in there is exactly what we’ve just been talking about. He said, know yourself, own yourself, and then be yourself. To know yourself is to have self-awareness. To own yourself is to take the responsibility having known yourself. And then to be yourself is to act in a very real, authentic, congruent way. I think that would be a good message to get across to anyone in any workplace.

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