

Working Therapeutically with Complex Trauma

Tanya, a thirty-six year old single mother of two girls, Summer, 16, and Brittany, 9, has been attending, albeit erratically (cancelling sessions at late notice or turning up late in a clearly conflicted state), monthly appointments with you, a local female psychologist, for the past eight months. Much has happened in that time. You are about to go to supervision and have decided to speak about Tanya in the session.

Over the time you have known Tanya, it is not only her punctuality which has been erratic - her mood and manner have been difficult to predict and changeable between and within sessions. Despite initially being overweight, over the eight months Tanya has lost a significant amount of weight. She talks of being troubled by nightmares in which both her father and step-father feature. She expresses an aversion for most foods and indeed for the sensation of having most foods in her mouth. She continues to periodically drink alcohol and to regularly consume a lot of Pepsi-Max. She complains regularly about a range of somatic health issues, including fatigue, nausea and periodic breathlessness. Her job at the local supermarket in Coolangatta, which she has held for the past 15 years, is under threat as she often calls in sick.

Recently Ramona, a fifty-two year old local woman, joined the team at the supermarket. Tanya and Ramona have become close. Ramona, a great cook, started bringing in home-cooked meals for Tanya to take home to enjoy with her girls; now Ramona spends every Thursday evening with Tanya and the girls at their place, sharing dinner cooked by Ramona and watching their favourite reality tv show. Tanya says it is the first time in her life she has been able to mix socially without drinking.

Tanya has confided in you that when she has been drinking, she often wakes up the next day either with Sean (Brittany's father and Tanya's 'on again, mainly off again boyfriend') or random men, with an unexplainable feeling of self loathing and her head swimming with questions, *"How did I get here? What happened? Where have I been?"*. By the time she gets home she often feels a strong urge to cut. *"I know I shouldn't do it, but that little voice inside of me tells me how useless I am. I don't know, it is like once I'm on those tracks I just can't seem to get off"*.

Tanya states that she has been drawn to these sort of encounters more since she started therapy with you. She has decided to seek out her mother, with whom she has not had any contact since she was nine years old and was placed in foster care when it was alleged her mother's boyfriend at the time was interfering with her. *"I need my mum.....it's times like these that only a mother's love can take the pain away..."* Tanya says in a soft and childlike voice.

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One day you are called out of the blue by a community case worker who sees the family semi regularly, mainly when they come to her agency to request food parcels or vouchers. The community case worker was very distressed. Tanya had called her and said she was going to take a handful of pills and that she wanted the case worker to pass on to you her thanks for all your efforts.

You called Tanya straight away. She said she didn't remember making the call and that the case worker "*often talks crap*". Tanya quickly diverted the conversation and shared that last night on her return home after a big drinking session Summer walked in on her self harming. Tanya went on to say that Summer got angry with her and said that if she caught her doing it again she'd definitely move out. Tanya became quite agitated, "*they are already on to me, those child safety people.....if they found out about this they will help Summer move out.....I couldn't go on if she left, please you have to sort things out with child safety*". You asked how Brittany fits in with this and she replied dismissively "*oh that Brittany, she is a survivor that one*".

You ended the call with a commitment from Tanya to attend her next scheduled appointment, which happens to be the one before your scheduled supervision.

Surprisingly, for the first time in eight months Tanya turns up on time. Early in the session she asks you with little emotion, "*Do you want to have sex with me? I'm pretty good with girls – got my practice up at the girls' home*".

What to learn more about Tanya's initial visit to her GP and her first appointment with her psychologist?

- [Read the vignette outlining the GP visit](#) and [watch the recording](#) of the interdisciplinary panel discussion responding to her presentation.
- [Read the vignette outlining her first psychologist appointment](#) and [watch the recording](#) of the resulting interdisciplinary panel discussion.

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This is a de-identified vignette.

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