Good Practice Sharing on Trauma Intervention

Extra-Marital Affairs Counselling Service
Presented by: Anna Yuen

Registered Social Worker
Caritas Family Service-Project on Extra-Marital Affairs

Date: 6 December 2007

Caritas EMA Counselling Introduction

- Pioneer service project started with EMA Hotline counselling in 1995
- EMA Hotline (25377247) provides 24 hours practical information and ideas in handling affairs for different parties and night time counselling service started in 1997
- The Hotline also connects people with community resources for further follow-up service such as casework, group work etc.
- From 2000 to 2006, the EMA Hotline received a total of 107,805 calls.
 On average, about 1,000 new EMA hotline calls monthly.
- Profile of callers: 90% female callers, 10% male callers
- Among the female callers, majority are female non-participating parties (FNPP)
- Medium age range of callers and their spouses: 36-45 years old

EMA Hotline 2537 7247

24 Hours practical Information & Night Time Telephone Counselling Service



Individual and/Or Couple Counselling Service



Group Work Service for parties affected by EMA



Users' Participation in

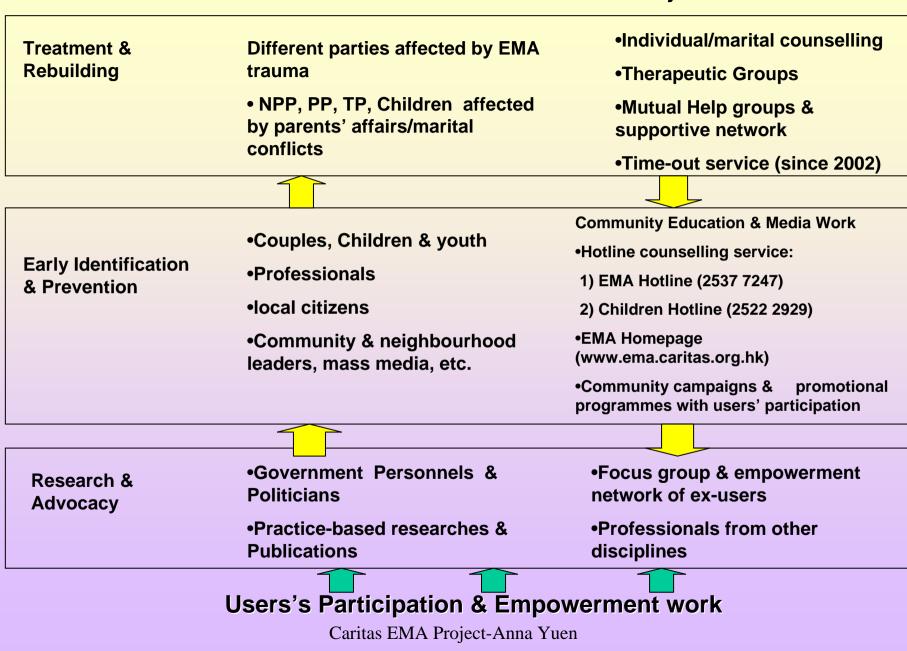
Community Education Programmes



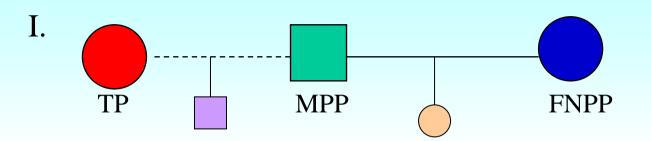
Users' Participation -- Audio-visual production by ex-users

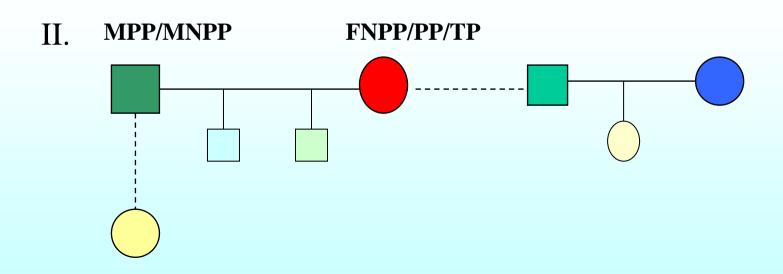


Intervention Framework of Caritas EIVIA Project Service



Complexity of EMA crisis





Possible 'traumatic' impacts for different parties in EMA crisis

a) Participating Parties

- stressful in handling the 'reactive' responses upon disclosure of the affairs
- stressful in covering up/keeping the secrecy(short term/long term)
- stressful in anticipating and managing the possible consequences when and how the EMA would be discovered by spouse

b) Non-participating parties

- -emotional crisis/emotional outbursts are common upon EMA discovery
- majority of the clientele who seek professional help

C) Third parties

- -highly sensitive and aware of the current socio-cultural background in a monogamy society
- -TP as an individual who invades upon another person's marriage and family integrity
- prolonged stress for the 'hidden' romance and non-secured relationship
- -social isolation from other interpersonal relationships
- -sudden separation and loss of the affairs relationship

d) Children affected by parents' EMA

- -witness parents' intense marital conflicts/violence upon and after EMA discovery
- -witness PP dating/having intimate conversations with TP

Common Emotional responses of Female Non-participating parties

- Shock/All of a sudden
- Anger
- Anxiety
- Ambivalent
- Bargaining
- Confused
- Denial
- Depressed
- ⇒ Fear of losing the spouse
- ⇒ Fear of losing the marriage & family integrity
- Loss of 'face'
- Hurt and Sad

- **⇒** Affect self esteem & self image
- Self-harming, suicidal ideas & attempts
- **⇒** Highly suspicious towards PP
- Loss of trust and confidence in PP and/or in other interpersonal relationships
- Difficulty to 'digest' the EMA reality
- ⇒ Repeated thinking of the traumatic episodes of EMA
- Overwhelming thoughts of the EMA evidence-finding process and the attitude of PP upon the discovery

Common Emotional response for Male Participating Parties

- Ambivalence
- Sense of Excitement at the initial phase
- Confused
- Guilt
- Easily get Irritated/agitating
- Self-defense (eg. Avoiding, Hostility towards NPP)
- Feeling stressful in keeping the EMA secrecy
- Struggles in 'balancing' the expectations of NPP & TP upon discovery
- Struggles in decision-making
- Suicidal ideation & attempts

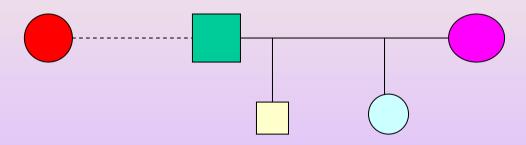
Common Emotional responses for Third Parties

- Sense of Excitement at initial phase (usually before the EMA discovery)
- Ambivalent
- Anxiety
- Irritability
- Confused
- Acute/Chronic depression
- Guilt
- Jealousy
- Grieving of sudden/unprepared separation & loss for the romantic relationship upon discovery by PP's spouse
- Competition and revenging ideas
- Suicidal ideation & attempts
- Struggles in decision making

A case illustration

- Principal client: FNPP, married for 17 years, with 2 adolescent age children
- Client self approached EMA Hotline counselling service
- Presenting Problem:

Discovered husband having an affairs in China 3 months ago and the duration of the affairs lasted for 4 years



Some commonly asked questions for assessment and intervention for EMA crisis case:

- What is the significant event/critical incident?(eg. discovery of the EMA)
- When the critical incident(EMA) happened? (eg. Last week/Last month/Last year)
- Where did the critical incident happened to client ?(eg. at home, at detective's office, on the street etc.)
- *How much* did client know the affairs? (eg. any photos, images, video-tapes, audio messages, duration, intensity & toxicity of the 'evidence-finding' process)
- *How long/duration* for the affairs lasted?
- What are the impacts/effects on client's physical health/daily life functioning/mental health state? (eg. Sexually transmitted disease, check out for depressive symptoms)
- How far are the impacts of the EMA discovery affect the individual's daily functioning, significant others, interpersonal relationships and other aspects of his/her life?
- What is the degree of anxiety/shock/acceptance of the EMA reality?
- What is/are client's feelings towards the incident? Any suicidal thoughts & /attempts?
- What is/are client's spouse's attidtude/feelings/behaviours during the critical incident?
- What has client done to cope with the critical incident before coming for counselling(seeking relatives and social network support, any suicidal attempt, intensified marital conflicts and/or open discussion with spouse etc.?)
- Any pre-sessional progress of clients in his/her view?
- Set priority of counselling goals if there are more than one.

Therapeutic and supportive Groups

- Establish collaborative and supportive network in facing the marital crisis, not being alone
- positively rebuilding self and facing the adversity of marriage
- Sharing of group members(audio CD)

Some Keys for Minimizing traumatic impacts of EMA crisis

Life and Death issue on Top priority

Stop Violence and intense marital conflicts before putting couples for joint session

Rapport and Pacing with client in decreasing the emotional intensity and detoxification process of the 'traumatic' episodes of the EMA crisis

Engage client's cooperation for other professional support such as psychiatric assessment, clinical psychological service, time-out service etc.

No hurry for decision-making

Explore and validate client's own strengths/experience, supportive network before coming for professional help; and equip with other community resources

Instilling hope and positive attitude in handling the adversity situation with client

Be ready for providing prompt crisis intervention during and even after the critical stage of EMA crisis

Take care of worker's own mental health state and equip with team members' support and community resources

Beware of worker's own value dilemma and beliefs about love, marriage, EMA and divorce issues

Caritas EMA Project-Anna Yuen

