



True Connection NE CIC

Get Back to “YOU” Program 4

Evaluation Report

December 2025

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Get Back to You!



When distressing events happen it can feel as though you have “lost” yourself – so isn’t it time to Get Back to You?

Who can take part?

I am particularly looking for clients from these groups:

- ❖ Suffering with PTSD symptoms, such as intrusive memories and/or flashbacks, isolation
- ❖ Struggling to cope after a bereavement
- ❖ Battling unwanted habits, such as comfort eating, which may have an underlying emotional cause



How to take part?

- ❖ Email: admin@trueconnectionne.co.uk
- ❖ Message via facebook: <https://www.facebook.com/trueconnectionne>

What does it involve?

You will receive:

- ❖ **3** heavily subsidised therapy sessions which focus on aiding the processing of unresolved traumatic experiences which can become “stuck” in the subconscious and which may contribute to unwanted symptoms, such as habits, flashbacks and negative emotions.
- ❖ The tools to continue your journey “back to you” in your own time and at your own pace



Susan Egan is a Certified Havening Techniques® Practitioner. Havening Techniques is a registered trade mark of Ronald Ruden, 15 East 91st Street, New York www.havening.org



Background Information

The Get Back to YOU program was devised to help anyone in South Tyneside feeling "stuck" or that they had "lost" themselves in some way - possibly due to traumatic events, a bereavement, an unhealthy relationship or slipping into an addictive habit or an unwanted behaviour.

Typical symptoms screened for during the initial intake conversations were those identifiable to the general public using non-clinical language but which are typical of trauma responses, some examples of which are:

- Feelings of Overwhelm (indicates a "freeze" trauma response)
- Sudden Anger / Loss of Control (indicates a "defiant rage" trauma response)
- Unwanted Addictive Habit (may indicate a coping mechanism to an underlying past trauma)
- Negative Thoughts ("spiralling", obsessional or paranoid thoughts may indicate a trauma response)
- Sleep Issues (nightmares, difficulty in falling asleep or restless sleep may indicate to an underlying trauma)
- Specific anxiety / Avoidance of Certain Situations or Locations (indicates a "flight" trauma response)
- PTSD symptoms (flashbacks, general low mood, specific or general anxiety etc.)

In October 2025, funding was very gratefully received from The Barbour Foundation to conduct another program, which was quickly promoted, and filled via a social media campaign, involving a gift voucher giveaway competition, and word of mouth.

The program was geared towards especially helping people for whom "loss" was a main factor in their symptoms, or struggles with behaviour.

Please see Appendix A for the relevant social media posts.



The program was structured in the same way as per round 2 & 3, with 3 sessions of ideally 2 sessions one week apart followed by the third session after a longer gap of 3-5 weeks. Each session consisted of a trauma-releasing segment (typically 75% of each session), followed by disruption of a negative habitual behaviour or thought pattern and the installation of a new, future- positive, outlook as chosen by the client.

Along with Havening Technique, a variety of techniques were used, such as installing an “anchor” (neuro-linguistic program, NLP, technique), using a “cinema screen” technique to disrupt previously triggering memories or Internal Family Systems (IFS) work with subconscious “Parts”. Please see “content of the program” below for more detailed information on techniques used.

Each modality used targeted the subconscious part of the mind and was carefully chosen in response to the unique needs of each client during the session.

Clients were fully supported with audio recordings to reinforce the main aims of the client and most techniques were taught to the clients, along with suggestions of a recommended routine at home to continue the recovery process in their own time and in a way which would fit with their individual lifestyle. A follow-up email was sent after each session recapping the session content / techniques used and recommendations.

A £20 donation to the CIC was suggested, which the majority of participants contributed. The program ran November 3rd – December 14th 2025.

Content of the Program

Havening Technique TM (www.havening.org) was chosen as the primary trauma processing tool for several reasons:

- it quickly enables the brain to process and release anchored trauma “receptors” from the amygdala, often lessening connected symptoms virtually immediately
- it can be taught very easily to clients as a self-soothing tool which can be utilised discreetly and quickly
- it quickly allows the establishment of rapport between client and practitioner on a subconscious level, thus aiding the acceptance and effectiveness of other techniques used during the sessions to disrupt habitual patterns of behaviour.

Session 1 was up to 2 hours long and typically focused on aiding processing of past traumatic events which were significantly affecting the client’s present life in some way e.g. through



PTSD symptoms, such as flashbacks or panic attacks or a coping mechanism which had become habitual, such as snacking or alcohol dependence.

Each client was taught Self-Havening and any other of a range of (primarily NLP) techniques utilised during the session, such as “SWISH” which can be used easily and independently of a practitioner. Teaching the client to use Self-Havening on a regular basis aids both reduction of negative emotions plus enables the nervous system as a whole to become more regulated.

Each client was also furnished with at least one personalised audio recording which may be used for e.g. self-relaxation, promotion of better sleep, positive future visualisation etc.

Sessions 2 and 3 focused upon gathering feedback of any qualitative/quantitative differences in symptoms plus continuation of trauma reprocessing but were typically shorter sessions.

All clients were then offered subsequent follow-up sessions at a heavily discounted rate plus an open offer of advice/support over the phone or via email going forward.

Participant feedback was obtained following the second session (see Appendix B for the feedback form).

Symptoms were scored prior to and following the completion of the program using a scale of 0 – 5, where 0 = Suffering Greatly, 2/3 = Somewhat Resolved or Reduced, 5 = Resolved or Greatly Reduced.



Feedback (quantitative & qualitative)

Symptom	% of clients affected	Ave. Score prior to program	Ave. score following program	Ave. score overall change
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Get Back to YOU Program #4 The Results are IN!

90% of participants reported feelings of "general anxiety". Following 3 sessions, **100% of participants reported an improvement**, with 44% reporting the issue as "greatly reduced or resolved".

20% of participants reported they were suffering greatly with an addictive substance. Following 3 sessions, **100% reported the issue was "greatly reduced or resolved"**.

40% of participants reported "sudden anger or loss of control". Following 3 sessions, 100% of participants reported an improvement, with **75% reporting that issue as "greatly reduced or resolved"**.

80% of participants reported feelings of "general negative thinking / emotions". Following 3 sessions, **100% of participants reported an improvement**, with 38% reporting the issue as "greatly reduced or resolved".

30% of participants reported "sleep difficulties". Following 3 sessions, 100% of participants reported an improvement, with **67% reporting the issue as "greatly reduced or resolved"**.

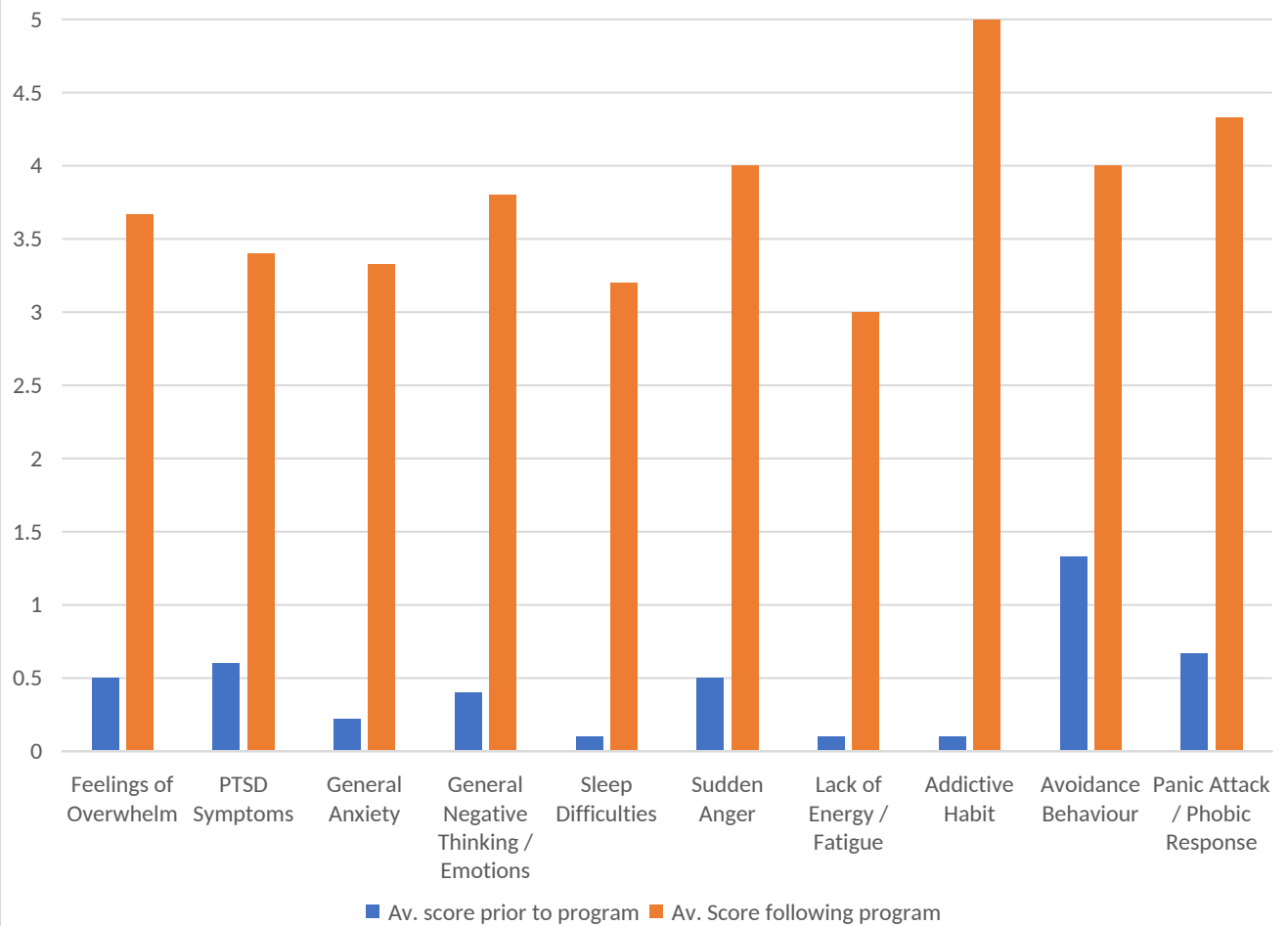
60% of participants reported feelings of "overwhelm". Following 3 sessions, **100% of participants reported an improvement**, with 50% reporting the issue as "greatly reduced or resolved".

50% of participants reported suffering symptoms of "Post Traumatic Stress Disorder". Following 3 sessions, **100% of participants reported an improvement**, with 40% reporting the issue as "greatly reduced or resolved".



Feeling of Overwhelm	60%	0.50	3.67	+3.17
PTSD Symptoms (Flashbacks, intrusive memories which induce panic attacks)	50%	0.60	3.40	+2.80
General Anxiety	90%	0.22	3.33	+3.11
General Negative Thinking / Emotions	80%	0.40	3.80	+3.40
Sleep Difficulties	30%	0.00	3.20	+3.20
Sudden Anger / Loss of Control	40%	0.50	4.00	+3.50
Fatigue / Lack of Energy	10%	0.00	3.00	+3.00
Addictive Habit (e.g. alcohol, substance misuse, binge eating)	20%	0.00	5.00	+5.00
Avoidance Behaviour	30%	1.33	4.00	+2.67
Panic attack / phobia response	30%	0.67	4.33	+3.66

Impact of Get Back to You Program 4 by Symptom



Get Back to YOU Program #4 What did participants say?

"I feel **kinder towards myself** and have created space to respond from a place where I am adult rather than hurt younger parts."

"I feel more calm, more patient and **more present.**"

"I have been able to use the **techniques** to process my PTSD & triggering behaviours."

"Feeling more positive overall and **avoiding certain things and situations less.**"

"I'm now able to go straight to **sleep**, which hasn't happened for months."

"The mental chatter is less and I just feel **more at peace.**"

"I haven't been thinking about drinking...I'm more relaxed on an evening and **don't need a drink anymore.**"

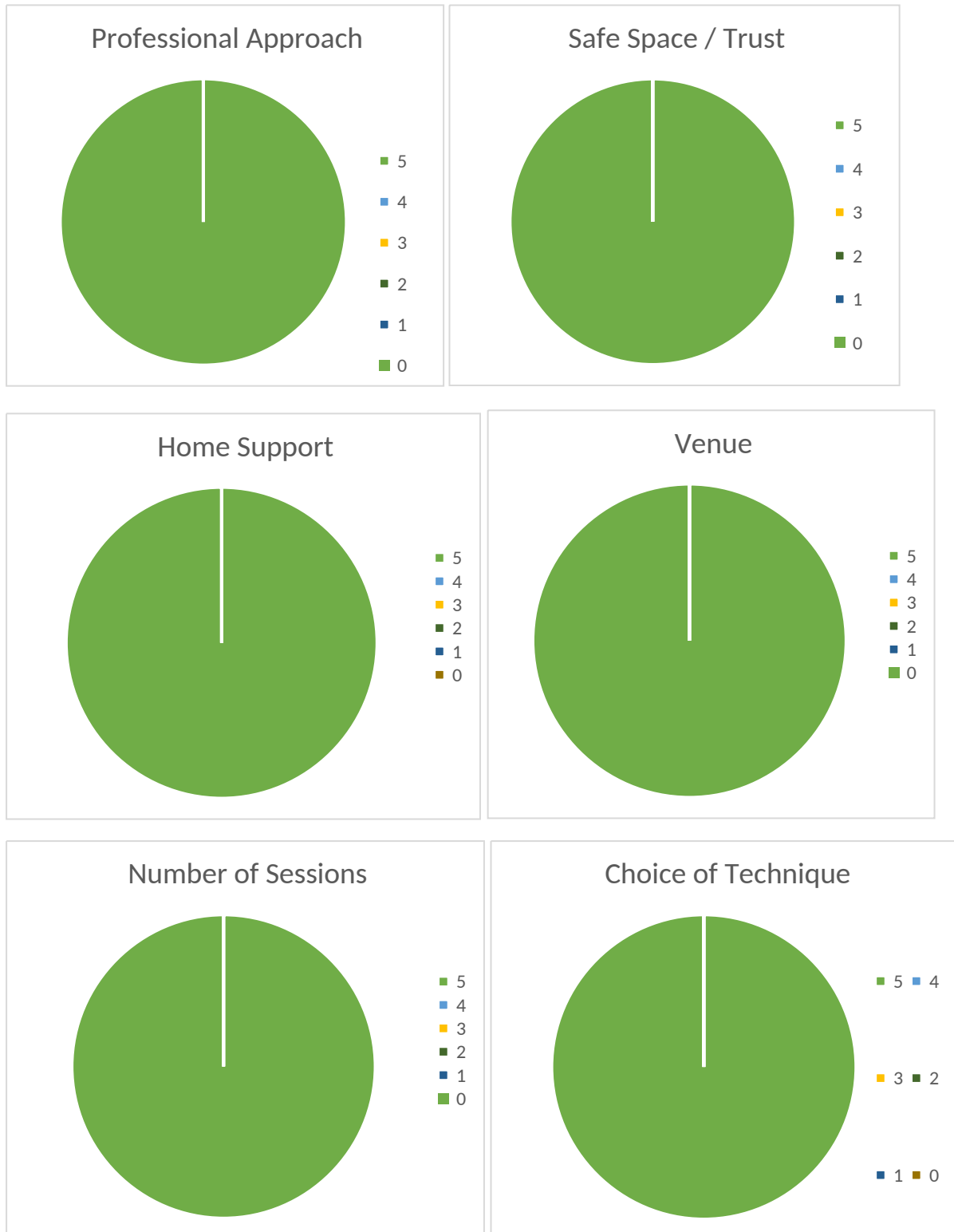
"I feel **more positive**, more approachable and more patient."

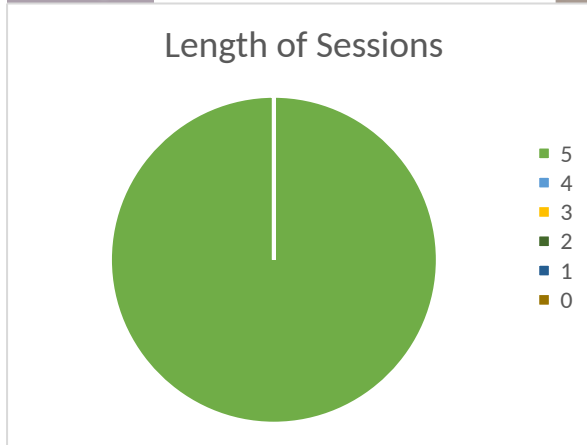
"Everything we did **just worked!**"



Feedback on the Quality of the Program

Clients were asked to rate various aspects of the program from a quality viewpoint on a scale of 0 (extremely poor) to 5 (excellent).





- 100% of attendees stated that they were **highly likely** to recommend this program, where appropriate.

Comments from participants on the quality of the program:

- This is the best therapy I have ever had...it has changed my life.
- I felt very safe to be able to explore feelings & process in ways I have never been able to before.
- This will make a difference to my PTSD and help me to be able to move forward in my life.
- Previous therapy helped me to understand “why” but didn’t “deal” with it. This has been the missing piece.
- Sessions were well paced.
- I knew I could call you if I needed support.
- The whole approach was fantastic!

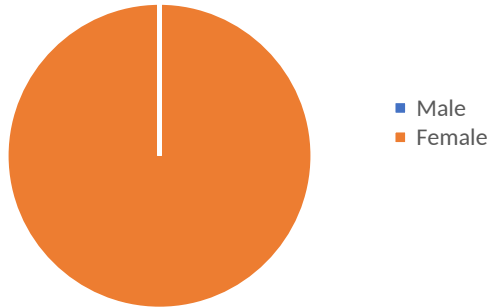
Clients were asked which techniques were effective* for them:

- 100% of participants stated Havening Technique as effective
- 82% found “parts” therapy (e.g. inner child / internal family systems) effective
- 67% stated NLP techniques, such as SWISH and creating an “anchor” were useful tools
- 64% stated that learning self-relaxation in conjunction to listening to the targeted audio recording was helpful for self-management at home

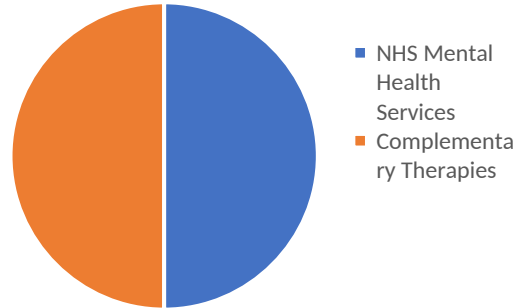
*nb/only Havening Technique was used with every participant, other techniques were chosen if deemed appropriate.

Who Participated in the Program?

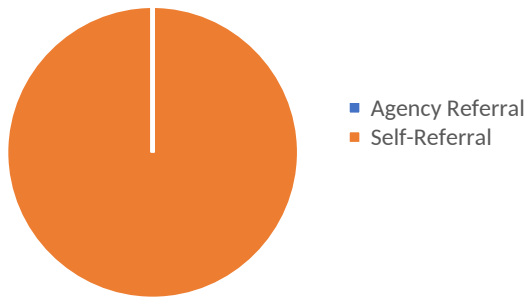
Gender



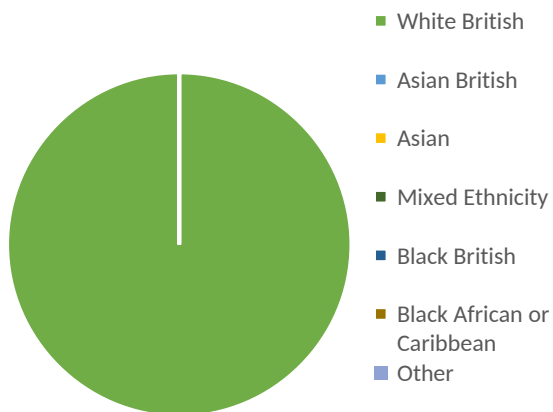
Any Prior Therapy Experience?



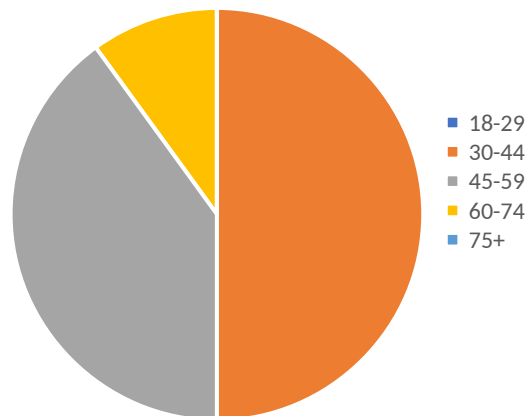
Agency or Self-Referral ?



Ethnic Group



Age Category





Brief Discussion / Areas of Improvement

The results of the program are once again extremely positive and show a clear value to the community. 90% of participants engaged fully with the program and provided feedback which is a substantial improvement over the previous program. The majority of participants were happy to donate £20 to the CIC and all referred themselves to participate in the program, rather than being referred by another agency.

Areas of Improvement

- All of the participants were female and of white-British ethnicity. A clear improvement would be to have a wider participation level of other ethnicities and also male participants. The program was offered to a local mens' mental-health oriented walking group via their facebook page but no response was gained. Time did not allow for a more persistent follow-up effort but this will be followed through in the new year.
- There were a high number of last-minute cancellations / rescheduling of appointments, mainly for childcare reasons, but the vast majority of these appointments were successfully caught up. Due to the tight window in which the program operated – with the program ending on December 14th ahead of the Christmas holidays – there was much less leeway given than previous iterations for the program to over-run. Having a firm deadline was, in fact, a positive asset to the program as it was clearly communicated to the participants that the program would end on the date and this encouraged the participants to commit more fully to attending each appointment and this will be a feature of future programs.
- One participant highlighted that “prior discussions around visualisation” would be an area for improvement as this was a “big barrier” for the client in the first session. Subsequent sessions focused upon Internal Family Systems work involving memory recall / affect in the body, rather than visualisation techniques, such as NLP Swish. This suggestion will also be incorporated in the initial phone call going forward to inform the choice of technique used in the first session.
- Several of the participants felt they had achieved their initial goal after 1 or 2 sessions only, whilst it would have benefitted several other participants to receive at least 1 more session. Going forward, a more flexible approach could be trialed whereby the funding could be spread per client, rather than per 3 sessions. This would enable clients who “finish” after 1 or 2 sessions to donate their unused sessions to those clients who would benefit from longer support.

Following this round of the program funding for future iterations will be sought without any significant changes to the content or structure of the program, apart from those highlighted.

Appendix A – Social Media Campaign

Get Back to You Program 4 will be starting up from November 3rd through my Community Interest Company **True Connection NE CIC**!

This program has been made possible through funding from The Barbour Foundation so much love and thanks to them for supporting me in supporting you!

The program supports those in the community who feel they have "lost" themselves in some way, with a particular focus on supporting those affected by grief.

There are many ways in which we can feel bereaved, and not always due to the direct loss of a loved family member or friend.

The loss of a beloved pet, a job, a home, a loved one with dementia for example are all examples in which grief can play a big role.

Similarly, grief may not "just" be about experiencing the feeling itself - the effects of grief can hit us in different ways e.g. through a coping strategy which has turned into an addictive habit, PTSD symptoms such as nightmares or avoidance of certain places or situations, leading to increased isolation.

If this speaks to you, please get in touch. If you feel you know someone to whom the above may apply please pass on the details.

To find out more about the techniques used or apply for one of the funded places, please complete the contact form on the website here:

<https://trueconnectionne.co.uk/true-connection-ne-cic/gbty/>





The 4th funded Get Back to You program is starting from November 3rd!

It is a huge privilege to have received backing from the Barbour Foundation to support people in the local community who are going through a tough time - especially in the run up to Christmas.

The focus this time is on issues caused by, or associated with, underlying grief of any kind.

Please help me to get this program filled asap by sharing this or reaching out to friends or family.

Sadly we don't always know how much people are struggling, so please help me to put this funding to good use 🙏

To get in touch about the program please go to the website via the link in this post, read the info and check out the evaluation reports from the previous programs. There is a contact form at the bottom of the page to register your interest. Thankyou 🙏

<https://trueconnectionne.co.uk/true-connection-ne-cic/gbty/>



When distressing events happen it can feel as though you have "lost" yourself – so isn't it time to Get Back to You?

Who can take part?
I am particularly looking for clients from these groups:

- ❖ Suffering with PTSD symptoms, such as intrusive memories and/or flashbacks, isolation
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How to take part?

- ❖ Email: admin@trueconnectionne.co.uk
- ❖ Message via facebook: <https://www.facebook.com/trueconnectionne>

What does it involve?
You will receive:

- ❖ 3 heavily subsidised therapy sessions which focus on aiding the processing of unresolved traumatic experiences which can become "stuck" in the subconscious and which may contribute to unwanted symptoms, such as habits, flashbacks and negative emotions.
- ❖ The tools to continue your journey "back to you" in your own time and at your own pace



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Competition Time

Last November I ran a gift voucher competition - I'm running another now to tie in with getting my funded program filled by the end of next week to hit my Nov 3rd starting deadline!

So, please like & SHARE the below post (not this one!) to be entered into a gift voucher draw.

I'm giving not one, but TWO gift vouchers for a full session which could be either for relaxation and rejuvenation or to tackle a specific issue. The gift voucher can also be given to friends / family (early Christmas present?).

So please LIKE & SHARE the below post and help me fill this funded program!





Ready for Halloween Parkrun!

Don't forget to like & share my competition post or I'll be after you 📸

Competition Time

I'm running a gift voucher giveaway to tie in with filling the last few spaces of my "Get Back to YOU" funded program by the end of the week to hit my Nov 3rd starting deadline!

Only 5 spaces remaining!

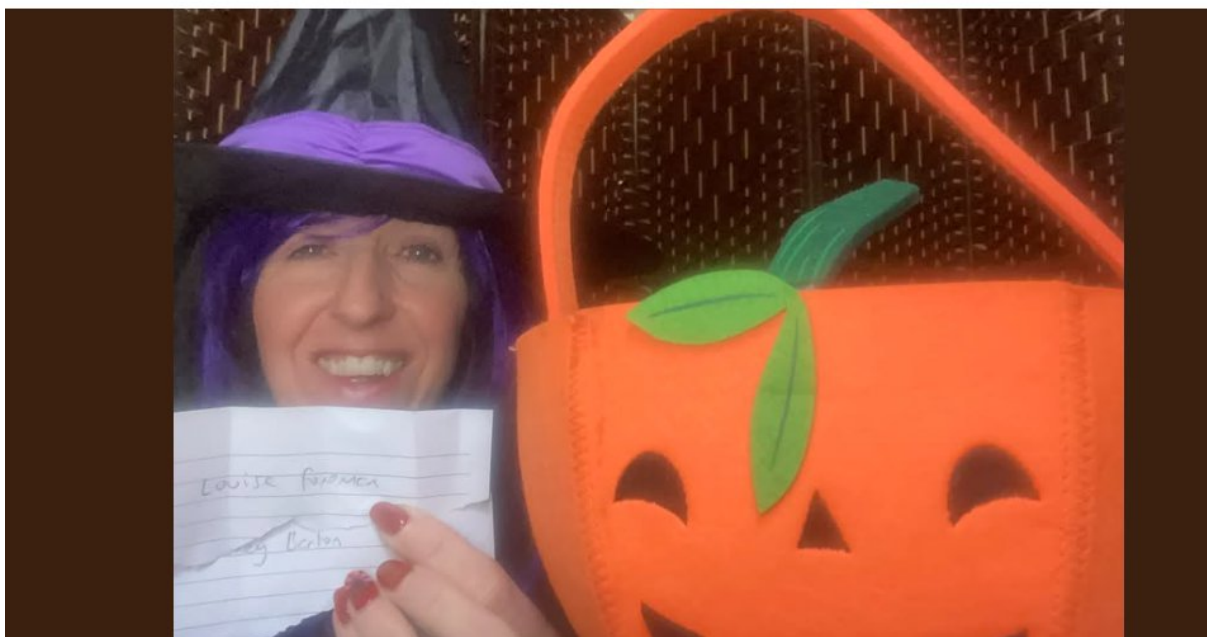
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So please LIKE & SHARE the below post and help me fill this funded program! 🙌🙏

Competition Winners

Well done and thankyou to Louise Foreman and Shaney Barton for sharing my post - I'll be in touch ASAP with your prizes!... **See more**





Appendix B – Participant Feedback Form

True Connection NE CIC Participant Feedback Form

Program: Get Back to You, Nov - Dec 2025

Introduction

Many thanks for participating in the “Get Back To You” funded program, delivered by True Connection NE CIC.

The feedback that you give is hugely appreciated and will enable us to:

- ✓ evaluate the overall impact of the program
- ✓ determine its strengths and weaknesses
- ✓ discover which participants benefitted the most / least
- ✓ implement changes to the way in which the program is delivered in the future

This feedback will be shared with potential funders when applying for future grants.

Please be as honest as possible.

All feedback given will be anonymised and no personal details will be shared with any other organization.

Section 1: About You

1. What were your reasons for participating in the program? (Please tick all that apply).

1. Bereavement ()

10. Sudden anger / irritability / loss of



- | | |
|---|--|
| 2. PTSD symptoms (e.g. flashbacks, panic attacks) () | control () |
| 3. Physical reaction (e.g. panic attack / phobia response) to a specific situation () | 11. Difficulty falling asleep () |
| 4. Loss of interest in previous activities () | 12. Restless / interrupted sleep () |
| 5. Avoidance of certain situations () | 13. Lack of energy / fatigue () |
| 6. Eating / weight issues () | 14. Isolation () |
| 7. Feelings of overwhelm () | 15. Negative thinking () |
| 8. Nightmares () | 16. Addictive habit (e.g. substance misuse / alcohol / smoking) () |
| 9. General anxiety () | 17. General negative emotions () |
| | 18. Poor concentration () |

19. Other (please describe)

2. What support / therapies have you previously tried to help with the current issue? (Please tick all that apply).

No previous support / therapy ()

Private counselling ()

Currently on NHS mental health

Private hypnotherapy ()



services waiting list ()

Previously used NHS mental health services (e.g. counselling, bereavement support, CBT, Lifecycle) ()

Previously experienced trauma therapy e.g. EMDR ()

Other complementary therapy e.g. reiki, sound healing, kundalini yoga, crystal healing, art therapy etc.
please describe below ()

3. Using the number list in Q.1 (e.g. 1 = Bereavement, 2 = PTSD) please rate how you felt prior to participating in the sessions compared to after the sessions.

0 = suffering greatly, 3 = issue somewhat resolved / reduced, 5 = issue resolved or greatly reduced

Reason for attending (use number list from Q1)	Score prior to sessions (0 – 5)	Score following 2 sessions (0-5)	Score 1 month following completion of sessions (0-5)



4. If you have previously tried any other therapies (see Q2.), how would you compare effectiveness? _____

5. Which techniques used during the sessions were the most effective for you?
(Please tick all that apply)

Havening Technique TM () “Cinema Screen” () Anchor () Future Pacing ()

Stop Sign () “Parts” therapy ()

“Inner child” therapy () EFT / Tapping () Self-relaxation ()

Any other:



6. Which techniques used during the session were the least effective for you?

(Please tick all that apply)

Havening Technique TM () “Cinema Screen” () Anchor () Future Pacing ()

Stop Sign () “Parts” therapy ()

“Inner child” therapy () EFT / Tapping () Self-relaxation ()

Any other:

7. Which techniques have you found useful for yourself between / after sessions? (Please tick all that apply)

Havening Technique () Self-relaxation () Anchor ()

“Cinema screen” () Listened to audio recording, if provided () EFT / Tapping

() “Parts” work () “Inner child” work ()

Any other:

↩ How would you rate the following: (0 = extremely poor, 5 = excellent)

Professional approach () Safe Space / Trust ()



Choice of techniques used ()

Explanation of techniques / handouts etc. to support use at home ()

Feeling supported between / following sessions, if appropriate () Length of

session 1 () Length of session 2 () Number of sessions ()

Length of time between sessions () Venue ()

Any other comments:

9. Please use this space to provide any feedback regarding any changes you have noticed in the way you are feeling / thinking / behaving following the sessions.

Include anything you feel more likely to do e.g. socialise more, try a new activity, return to a previous hobby, use public transport etc.



10. How likely would you be to recommend this program to someone else with similar issues? (0 – not likely, 3 – somewhat likely, 5 – extremely likely) ()

11. How could this program be improved for the future?

Demographics

What is your ethnic group? (Please tick one option that best describes your ethnic group or background)

White

Mixed / Multiple ethnic groups

1. English / Welsh / Scottish / Northern Irish /



British ()

2. Irish ()

3. Gypsy or Irish Traveller ()

4. Any other White background, please describe _____



1. White and Black Caribbean ()

2. White and Black African ()

3. White and Asian ()

4. Any other Mixed / Multiple ethnic background, please describe _____



Asian / Asian British

1. Indian ()

2. Pakistani ()

3. Bangladeshi ()

4. Chinese ()

5. Any other Asian background, please describe _____

Black / African / Caribbean / Black British

1. African ()

2. Caribbean ()

3. Any other Black / African / Caribbean background, please describe _____

Other ethnic group

1. Arab ()

2. Any other ethnic group, please describe _____

What is your gender? (Please tick one option)

Male () Female ()

What is your age category? (Please tick one option)

18 – 29 () 30 – 44 () 45 – 59 () 60 – 74 () 75+ ()



Many thanks for taking the time to provide this feedback, it is greatly appreciated←