

## Integrative ideas for the process-oriented psychotherapist

**Q. I don't believe very much of what he says.**

**A.** In psychotherapy, the facts are often unimportant. I suggest you pay more attention to the relationships the person has with the people, places, things, and events in their story than whether or not the story is true.

In general, we remember what is important to us. Most often, we retain the memory of our emotional response quite clearly, and have a hazy recollection of all but a few of the facts. In every moment, there are a thousand sounds, smells, sights, sensations, and peripheral goings-on. As I understand it, the human brain filters out most of what it considers to be non-essential.

Even if someone is telling what he perceives to be the absolute truth about a particular moment in time, he will recall only the parts of the event that his brain thought were important enough to remember. So unless you are representing the legal establishment, let go of the need for a client to render the absolute facts in session. More important is his relationship to what he remembers and what it represents to him. There is material for psychological exploration in almost any memory.

For example, suppose a client says, "I went to the store to buy a carton of milk." Even if that is a lie, you can still work with it. You might conclude from such a short description that all you have to work with is the "I," the "wanting," the store, the "buying," a carton, and the idea of milk.

You might think, "yawn, no big deal." You might be more than tempted to say, "... Uh huh. And then what happened?" However, I suggest even such a simple statement about buying milk is rich with psychological possibilities. How this person relates to himself and to the people in his life is manifested in his interpretations of, and his projections onto, the content of any sentence he utters.

Scenario one.

Clnt: I went to the store to buy a carton of milk.

Thst: Say that again as if it is happening right now.

Clnt: I'm going to the store to buy some milk.

Thst: Be the milk and tell the story again.

Clnt: I'm the milk and someone's coming to get me.

Thst: Milk, talk to Johnny who is coming to get you.

Milk: I'm cold and not looking forward to ending up in your stomach.

Thst: (to client) What's your response?

Clnt: I don't care.

Thst: Tell that to the milk

Clnt: Hey, milk, I don't care what you think.

Thst: What's your response, Milk?

Clnt (as the milk) Well, I *resent* that, and...  
(and so the work begins)

Scenario two:

Clnt: I'm going to the store to buy some milk.

Thst: Say that again, more slowly and with detail.

Clnt: Well, I'm walking toward the store and . . .

Thst: (interrupting) What do you notice about yourself as you walk toward the store?

Clnt: Oh, I'm tired, annoyed, and I don't want to be here.

Thst: So who else do you need to tell *that* to?

Clnt: My wife. My inner nice-guy.

Thst: Tell both of them now.

(and so the work begins)

□ You can *prefer* the truth if you like, but I suggest you find a way to avoid the *need* for the truth. Work in metaphor whenever you can.

□ In fact, think of everything the client says as metaphor. Invite dreams, imagery, stories, physical enactments, art, sandtray, roleplay, and somatic work.

□ Invite exploration of the relationship between the two of you.

□ Work experientially; doggedly invite the client into the here and now.

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**Q. She has a recurring dream in which one figure is lurking by her bed and another is touching her. How do I work with dreams in general?**

**A.** There are many different beliefs and ideas about dreams and the purpose of



Dear Colleague,

**With the thought in mind that a good deal of psychotherapy is about the reparenting of the wounded inner-child, consider this possibility:**

**When primary nurturer is crazy, wrong, or imperfect and she (or he) denies it, most kids go a bit crazy.**

**However, when primary nurturer is crazy, wrong, or imperfect and she (or he) admits it, most kids may end up being ticked off at primary nurturer, but they are not crazy.**

**Similarly, in a psychotherapy session, a rookie therapist who makes mistakes and admits them may be, in that moment, doing more productive work than the therapist who makes no errors and never has to rolemodel that mistakes are not shameful.**

Carol Nichols Hadlock

dreaming. I invite you to think of a dream as a canvas on which the dreamer has painted a projection of herself. Every thing, every symbol, every picture, every emotion, every representation, every recollection in or about the dream comes directly from the dreamer's mind.

Treat each dream as a ready-made metaphor for some part of the dreamer's life, her experience, or her relationship with some part of the universe. It is a virgin metaphor, unmolested by other people's interpretations, and one which *you* have had zero part in bringing to the session. Assume that whatever else dreaming is, everything in the dream (or at least the part she brings to the psychotherapy session) represents some part of the dreamer's personality.

In this case we have the dreamer, the other, the two figures, the lurking, the bed, the touching, the

body part being touched, the being-done-to, anything she has managed to forget to tell you, as well as any dream parts she may recall as the work progresses. Treat *all* as parts of herself.

I prefer to work internally and suggest you start out by offering some version of the following:

1. Bring the dream into the present moment. Encourage the dreamer to connect with her experience as she works.

*"Tell the dream again as if it is happening right now."*

2. Then invite the dreamer to tell the dream again, in the present tense, from each part's point of view in turn: "I'm the voice of the figure in the dream lurking by the bed where Susie is sleeping. Someone comes in and . . ."

3. Invite an exploration of each part, its purpose and what it wants.

*"I'm the bed and I'm here in this dream because. . ."*

*"I am the lurking. What I notice about myself is . . ."*

4. Invite the parts to dialogue with each other.

5. Direct the dreamer, using imagery, to finish the dream to its apparent conclusion, pleasant or unpleasant.

6. Direct the dreamer to experiment with finishing the dream to different, more satisfying conclusions.

Here are some other ideas:

Invite the worst ending possible. This invites the dreamer to explore one of his worst fears.

Use other mediums for dreamwork besides imagery.

*"Where in your body are you holding that part of your dream?"*

*"Breathe from your diaphragm. Recall the dream. Breathe. Experience." What comes up for you now?"*

Direct the dreamer to represent the dream out here in the physical world.

*"Tell the dream as a fairy tale."*

*"Draw, dance, sculpt a representative of the dream."*

*"Enact the dream in the room. Use the chairs and other objects. Act out the whole dream from start to finish."*

*"Show me, in the sandtray."*

When the dreamer thinks, speaks, and feels as if she were the various parts of her dream, she is encouraged to acknowledge, accept, and begin integrating these unowned components of her personality.

Encourage her to connect with both her emotional experience and her physical sensations as she works. This invites her to move into and through the subconscious experiences and symptoms that accompany any unresolved processes which the dream represents.

Suggest the keeping of a dream journal.

When dreams recur, invite the dreamer to look for the common thread, and attend to changes as they occur each night

Invite a cognitive connection of the dream to the person's nuclear family or to their current relationships.

*"Tell the dream."*

*"What do you think that means?"*

*"How does that manifest itself in your life?"*

*"What did you avoid by waking up?"*

Whenever you can, use the subject matter in the dream to invite work in the present.

*"How are you doing that (whatever the topic is) right now, here with me, in this room?"*

### **What if the dream isn't a dream but is a memory?**

It does not matter whether she is working with dream or memory. Everything she sees in her mind's eye is a projection of, and a metaphor for, a part of herself. There was probably much more to the incident, dream, or memory than she remembers.

## *Allowing Myself Not-to-Know*

*by Leslie Whitcomb*

Recently, it was my turn to be a therapist in a mirror session. Shortly before we started, our supervisor turned to me and said, "Today, I suggest you do something different. Instead of accessing the get-good-grades, smart-part of yourself, I invite you to not-know anything. For example, before you do or say something, I'd like you not to think it through first. Find a way to know nothing. Assume nothing. Instead, access a more humble, almost-stupid, I-don't-get-it, part of yourself. See what happens." This went right to the heart of my usual countertransference.

My defense against childhood trauma was to see all and know everything. I needed to get out of the way quickly – or pay a very high price. And as an adult, my identity as an experienced therapist has been grounded in

being able to see all and know my clients. My supervisor's invitation for me to not-know, to go blind for a while, even in the presence of a client, was an invitation to take a moment out of countertransference and enter a moment of allowing process.

I was amazed how, in that particular session, I perceived the client's spoken expression as something like static on a TV screen. So, rather than see her and try to understand her, which can be wonderful tools, but which are not the only tools in the kit, I kept asking her to "show me" what she meant.

I asked her to show me her sense of her issues by body sculpting, acting the role, and enacting the postures of herself with her family. In order to keep joining her in her re-enactments, and stay out of my knowing-therapist persona, I

found I had to be more with myself, breathe, and focus on being grounded. This has been a wonderful, kinesthetic model that I now carry in my body memory.

This session was a moment of replacing my body's experience of being in the world as an unsafe toddler, with the experience of being in the world held and loved in my own being. It was a moment remembering that my identity as a therapist can change with each breath and can be grounded in my own safety.

And how did this help the client? Well, the client expressed that she was more present to her experience of the issue rather than present to the understanding of the issue. I guess it helped most because in being with myself, I stayed out of her way and left more room for her to be with herself.



Mostly, the things we take away from any event are those about which we had an emotional response. If the dream is, in fact, a memory, part of her task may be to connect to the real events and distinguish between the remembered and the dreamed. Your task, however, does not change. Continue to invite her to connect with and experience all parts of any memory, dream, or other projection that she brings into session.

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**Q. She is experiencing anxiety about an upcoming operation.**

**A.** Imagery is a useful medium for surgery anxiety. Here is one I've used many times.

- Invite her to *be* the different body parts involved, and speak as if she were each of them individually
- Then invite her to engage each of them in dialogue with herself.
- Allow each part to express its concern, anger, or grief at the upcoming invasion.
- Encourage the appropriate parts to agree either to be fiddled with or removed from the body because they are diseased, causing pain, or whatever. Invite each of them to come to completion with their soon-to-be former host. Often this takes some form of, "I've loved loving you; goodbye."
- Encourage the cells of adjacent body parts to agree to cooperate with the anesthesiologist and the surgeon. I often propose that since the cells know more than the surgeon does about *exactly* where they might separate from each other with minimal damage, they prepare to separate immediately *in front of* the surgeon's scalpel, so that prompt healing will be maximized.
- Normalize feelings of post-surgical grief. Suggest that while recuperating, if she feels like crying, she might allow, rather than suppress it.

As an example, imagine she is having a wisdom tooth removed. Invite her to speak from the voices of the wisdom tooth, the jaw bone, and the gum tissue. Depending on the situation, she might include the other teeth, the nerves surrounding the affected area, the bacteria (if there is an infection), the white blood-cell factory in her bone marrow, her immune system, the part of the brain that governs

consciousness, and any other body part or system that will be involved with or affected by the operation.

Possibilities include that the gum might complain it is in constant pain, the jaw bone that it is being imposed on, or the wisdom tooth that it never wanted to cause any pain to anybody, it just wanted enough room. Encourage the various parts to dialogue with one another and ultimately find a way to say goodbye.

Through this imagery work she has an opportunity, in the guise of representing her gum and jaw bone, to experience anger at being invaded, feel grief at losing part of herself no matter how diseased, and to make a decision to cooperate during the operation so as not to sabotage or resist either the surgeon or the laws of physics.

If you predict, even prescribe, post-surgical grief, she may give herself permission to experience and let go of whatever emotions surface after the operation. Also, you might invent with her, the use of imagery to speed her physical healing such as armies of white blood cells fighting off bacteria, or strong but tiny replicas of herself inside the wound guarding and tending the stitches.

**What if the surgeon wants to add something rather than take something away?**

Suggest she request permission from all the body parts involved to take on something new and/or to grieve over the fact that there will be Change.

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**Q. You say not to initiate anything at the beginning of the session. Sometimes a person comes in and just sits there, looking at me. So I usually begin.**

**A.** The client's psyche brings him to therapy with its own agenda. Whether he is conscious of it or not, he comes to session in order to encounter *himself*. Wait until the client initiates the session.

First communication doesn't have to be verbal. It might be eye contact, lifted eyebrows, body movement, or anything else that indicates, "I'm looking to you to begin." When you start right in with "Hi, how was your week," you are also saying, "First, I want you to put aside anything you were thinking about or planning to say or do. Second, I want you to acknowledge my existence and third, I want you to answer a question. Oh,

*and since I'm running the show here, I'm deciding that the first topic of conversation will be the content of your previous week on this planet."*

It's two seconds into the session and already the therapist is demanding that the client focus on a subject of the therapist's choosing. I realize some clients will say they *want* you to tell them what to work on, and, occasionally, I will "be the boss" as an intervention. But if a psychotherapist actually thinks that he knows what issue another human being should work on today, I call that being countertransferred.

**I'm just trying to be friendly.**

Of course you are, but the psychotherapy session is not an encounter between friends. Everything that transpires from the moment the client crosses the threshold to the moment he leaves the building, is about his therapy: his thinking, his behavior, his words, his physicality, his not-starting the session until he is ready. Everything.

**But isn't being friendly the way to build trust with your client?**

Again, the psychotherapy session is not a social event. If you want to invite another person's trust, be trustworthy. If a client doesn't trust you, that's a major part of his work.

Easy diagnosis there. Even then, it isn't *you* he doesn't trust. You are just a stand-in, a physical metaphor for a part of himself he doesn't own, or for someone from his childhood with whom he is unresolved.

Ultimately, the client has to trust *himself*, not you. If *you* are the person who desires trust, my words to you are the same as they would be to this client:

- You are the only person whom you can trust completely. Don't trust me; don't trust the Other Guy. Trust yourself.
- You have more vested interest in your welfare than anyone else on the planet. And, you are the only person on whom you can count to care enough about you to choose you, always, for the rest of your life.
- The different sides of you may argue, disagree completely, compete with each other for your attention, even plot how to get you to see things their way. Even so, all these parts love you and want the best for you. They may be crazy or sane, but they are always on your side.

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**Q. She whines.**

**A.** Every whiner is fundamentally hopeful. The positive part of whining is the ever hopeful illusion that everything may finally work out all right. The negative part is the refusal to accept the reality that one cannot have what one wants.

□ As an intervention, encourage her to do more of whatever she is doing. This respectful intervention presumes the human organism is moving in the direction of resolution. When a person exaggerates certain behaviors, she is invited to become more connected to any internal messages or underlying emotions the behavior is attempting to express.

□ Ask her how old she is as she whines. Chances are she will be two or three years old. Invite her to regress to that age, whine more and louder, then begin to investigate what it is that she needs. By the way, what do *you* need when *you* are whining?

**I certainly don't need someone to tell me to stop. Probably someone to touch me and tell me even if things don't work out okay, I'll still be loved.**

Yeah, me too.



**Q. He's a pro. By the end of the first session, I had agreed to call and write to an agency on his behalf. And I'm not getting paid. I think I won't accept him into treatment. I don't need someone to come and con me.**

**A.** If you need to learn how not to be conned, perhaps you *do* need this person in your internship experience.

Take responsibility for your part of what happened.

- You were the one who believed him rather than believe yourself.
- You were the one who said yes when, in fact, you did not want to *do* yes.

Use the opportunities this man provides to learn how to take better care of yourself, set and keep clear limits, say no, and learn to listen to and trust your internal signals during session.

If after treatment is finished you have learned these things, you will have given yourself a very great gift indeed.

One theory has it that each of us invites people and situations into our life in a continuing quest to teach ourselves unlearned lessons and resolve our unfinished business. If the theory is true

*Just a Little Story About . . .*

*by Carol Hadlock*

Sally, a good little girl, is playing in the indoor sandbox. She is 5 years old and very, very mad at her mother. Her mother is standing right over there, rummaging around in that closet.

Suddenly Sally gets this great idea and before she thinks about it much, she jumps out of the sandbox, runs over to the closet, and shuts the door on her mother. Oops, there is no doorknob on the inside of the closet and her mother can't get out.

Sally is both awed and frightened by her own power. She hadn't known she could produce so much change, and she is terrified as she rejoices in the awareness of her mother's discomfort. So there she stands in front of the now rather noisy closet, locked in a double bind that she did not mean to create. If she leaves her mother in the closet, no one will take care of her and Sally will die. If she lets her mother out of the closet, her mother will kill her and Sally will die.

Sally solves the dilemma by deadening a part of herself. As she lets her mother out of the closet in the house, a part of Sally enters a closet in her mind. Depositing the unwanted elements of herself, she closes the door on all awareness of her ability to be assertive and angry, or to experience the temporary delight of revenge.

Back in the sandbox, she accesses a more passive persona which enables her to be frightened, tentative, and powerless in her relationships. As she grows up, her parents are proud that she is such a very good girl. And later on, as an adult, she chooses a profession in which she gets to spend her time worrying about other people's pain and discomfort, often at her own expense.

and if you decide not to accept this man into treatment, expect a run of manipulative people phoning you soon, all of whom want appointments immediately.

□ At the beginning of the next session, take time to clean up your mess. Tell him you abandoned yourself last time and that you may do it again. Tell him about your commitment to reclaiming yourself and that you will be taking time to reconnect with yourself and find your truth. This would be a good time to revisit and revise your previous agreements with him.

□ Should he get concerned, tell him you are the perfect therapist for him because you are one person in his life who will take responsibility and tell him the truth rather than allow yourself to be manipulated and then blame him.

□ Expect that the very next thing he says, will be an attempt to con you. Breathe. Let go of needing him to be any different.

□ Let the client's response to your limits be part of his work. He's been waiting a long time for "Mommy" to stand up solidly for herself and provide a safe container for him to grow up within.



**Q. I want to give him a certain book to read. What about giving gifts?**

**A.** The words "want" and "to read" are

clues that you may be countertransferred here. If you have an expectation he will read this book, like the book, perhaps appreciate you, get fixed, or find inspiration, you are doomed in the giving-your-power-away department. You might recommend that this particular person buy a copy of the book instead, but if you *want* him to read it, keep it, or use it, you are countertransferred.

□ If in the future, when you give a client a book, give it as a gift to yourself. Celebrate your competency. Let it be the same to you if he reads the book or throws it away.

□ Use both the giving and the book as therapeutic interventions. If the receiver has a response to the giving, to the receiving, or to the content of the book, work with that. If he has no response, work with that. The book itself is only a medium through which you invite the client to show up. How the person reacts is his process. Work with that.



**Q. A rigid family has made some movement. I'm very proud of them. But now the teenager doesn't want so much freedom. I'm floored. I don't know how to interpret all this.**

**A.** How about this interpretation, "Some people sure are different than I am."

A major task of your therapeutic internship is getting free from grandiosity and a sense that you know what is good for someone else. Your words indicate that at least a part of you believes movement is good and, possibly, non-movement is not-good. As you perceive "good" and "not-good" in relation to this family, you are judging them. When you feel "proud" of this family, you are coming from an ownership position. You have taken on the role of the parent who feels a pleasurable feeling (pride) when the children behave in a way that reflects positively on the parenting.

Since you experienced surprise, you may have been expecting something else. And if you were expecting something else, then either you were in the I-know-what's-best-for-you, one-up position, or you were in a child ego state of naively assuming things will go as you imagine. Or both. Either way points to countertransference.

Put some distance between yourself and this family. Get back into neutrality. Turn your "floored" response into curiosity. Wonder out loud about everything that is going on in session.

Verbalize your observations, guesses, and amazements to the family. Notice to them that the parents have loosened up a little. Notice their teenager's response. Wonder if perhaps she is demonstrating she has learned some of the lessons her parents taught her.

Explore with the daughter what she hopes for when she says she doesn't want "so much freedom." Invite her to explore her intent, motivation, or anticipated payoff, etc.

Invite the daughter to tell her parents how safe she has felt with all their restrictions, even though she struggles against them.

Wonder if the parents were as amazed as you were at their daughter's response.



**Q. He does some work but he wants to externalize.**

**A.** Sounds like you think externalizing is not okay.

**Yes. This training is about getting internal.**

Actually, this training is about you paying attention to process, whether it is internal or external. It is about inviting internal awareness and at the same time respecting a person's external focus. "Attending to Self" can be anxiety-producing as well as rewarding. In order to tolerate their anxiety, many people go in and out of internal work all session. Let go of needing them to be any different.

Invite this man to become aware of his in-and-out process. Ironically, the moment it occurs to him that he is external, he is not external. He has had to introspect in order to conclude that he is externally focused.

**So he noticed he's external. So what? Now what?**

From your language, "noticing" himself is what he is currently doing. Stay with his process. Wonder out-loud what *else* he notices about himself. Or, invite him to notice himself *more*.

If he decides he notices nothing, you can notice something and wonder out loud if it is true. Or, you can ask him what *else* he does not notice.

**Like what things might I notice?**

This man is not here with us right now so all we have to go on is your language and our combined life experience. Perhaps,

- He is anxious.
- He appreciates himself.
- He is embarrassed.
- He is wondering how to hide.
- He struggles between bolting and staying.
- He is afraid you disapprove of his being external.
- He does not like what he experiences when he is internal.
- He is almost connected to his scared, sad, glad, or mad feelings.
- He senses he is about to discover something about himself.

As always, after you share your guess, put the attention back on him. Make your guess into an invitation.

*"My guess about you right now is . . . ; is that true? "*

*"Do that more. Allow it to happen more."*

*"Explore that."*

*"Find out what happens if you Don't do that."*

**What if he gets intellectual and starts discussing the idea?**

Wait for a break and say a version of, *"Ready to go back inside, yet?"*

He has to check inside in order to answer your question.

If he says no, continue to wonder how he is doing what he is doing.

*"What do you need, right now? Find a way to get it in this room."*

*"How do you know you're not ready?"*

Interventions of this type direct the person to attend to his internal self, perhaps at a less deep level than he was working before, but internal nevertheless.

**Why not just say what I observe, "You're external right now."**

Well, for one thing, you don't know for absolutely sure if you are correct or not. That he is external is your guess, your fantasy, the story you are making up about him. The mirroring neurons in your brain are sending you the message, "If I were behaving like he is, I'd be external." That's all you really know. If you choose

On becoming a Psychotherapist  
**In session.....**

Psychotherapy is an art, as well as a science.  
Even if they are just "your stuff," your in-session experiences usually have *something* to do with the client's work. Trust them.

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to relate your observation in session, own it as yours, rather than express it as a fact.

*"You appear to be external right now. What's going on?"*

Of the response possibilities that include sharing, inviting, naming, and guessing, consider "inviting" as your first choice in most situations. Among the more useful tools a person learns in psychotherapy is the ability to be aware of and name his own process. When the therapist's usual first intervention is to name what she sees, she demonstrates her observational prowess, but does little to provide an opportunity for the client to expand his own awareness skills.

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**Q. An eight-year-old constantly says some version of, "Nobody likes me. I'm no good. Nobody wants to play with me. I can't do anything right."**

**A.** First of all, arrange both your attitude and the physical environment of the therapy room so that he *cannot* do anything wrong. Clear the room of objects you don't want him to use or break, and find a way to let go of wanting him to change his internal dialogue of on-going grief. Even though you might really rather begin by teaching him alternative ways to think about himself, start by going with his process. Join him.

Tell parallel stories.

*"I knew this fellow once who couldn't do anything right and.."*

"I read a book recently about a dog who

Accept and encourage his need to explore the part of him that may not be acceptable to other people. Invite him to do whatever it is he is doing, more.

Since he is complaining, invite him to complain more.

Suggest he represent the Part-That-No-One-Likes by drawing it or sculpting it.

Invite him to interact with that part. He might talk to it, teach it, yell at it, tear it up, or even kill it.

Suggest he work with that part in imagery.

**Okay, he got his anger out and the thing is dead. Now what?**

Wait. Pay attention. He may still be in process.

Say, "You were very angry. Okay, the thing is dead. Now what?"

When he is done with his anger he may say something positive about himself. He may even be available to learn a new behavior.

Should he start in again about the part of him who nobody likes, say something along the lines of,

*"Oh, oh! He's baaaack. He didn't stay in the garbage. What would you like to do this time?"*

*Or, "How would you like to get rid of him this time?"*

Assist him to celebrate the unlikable, alone part of him. For example, he might draw it, costume it, or have fantasies where he is the king of the world and stomps everybody.

Whatever he does, invite him to do it more and connect with himself while he does it.



**He draws guns all around himself.**

Again, trust his ongoing process. Invite him to do *more* of what he is doing.

*"Hmmm, I see an inch there on the paper that doesn't have a gun. Does he need one there too? His eyes are showing, how about guns coming out of his eyes."*

*"And while you're at it, how about his nose, ears and mouth too? His hairs are poison darts, how about poison gas that comes out of his pores? Are the bottoms of his feet protected too?"*

Keep supporting the negativity until he indicates by something he says, or something he does, "That's enough." Keep in mind that by the phrase, "supporting the negativity," I do not mean supporting violence in the real world. Supporting his negativity means supporting *him* while you provide a safe environment where his anger and grief can be expressed without judgment or fear of negative consequences.

**Okay, so he feels finished with the negativity. What should he do then?**

There are no "shoulds." Try trusting yourself. One idea is to use your question as an intervention.

Say, "I wonder what you'll do now?"

**He'd say, "Shoot everybody."**

Okay. Say, "Oh. I'll watch."

Later, after everybody on the planet has been shot and perhaps shot again, continue to encourage the intensity.

"How about shooting the animals too?"

**He'd say, "No, they're nice. I wanna pet the dog."**

Since you do not have an investment in whether he shoots the animals or not, move in this new direction.

You: I wonder how you're going to pet the dog since you're covered with guns.

Him: I guess I don't need the guns on my hands anymore.

Viola! There is a change in behavior. He is available to connect in another way.

Invite him to speak from his other side, the part that does not agree that he is not good enough.

Invite him to speak from the point of view of the dog.

**Does an eight-year-old understand that?**

Find out.

If he does not understand, or if it occurs to you to introduce the idea, use puppets, role play, or fantasy. Verbalize the dog's part a time or two to teach him the kinds of words that might go with another stance. Let go of any need you have that he will understand. He will learn what he needs to know about it.

**What if he won't cooperate?**

It is not important that he do what you say. It is important only that you invite him. Focus on how he responds to your invitation. Notice and validate everything he says and does. By your actions, give the underlying message that you think he is okay to play with.

Say, "Oh, so you don't want to do that right now. I wonder what you're going to do instead."



In working with clients, my goal is to help them connect with their processes so that they can experience them in a new way, other than just “talking about it” again. One of the ways I do that is through the use of metaphor. I find that metaphors present abstract concepts in ways that a person can experience them in a more active, creative way. Much as sand tray and enactments do, metaphors in the session give the client new ways of being “in” their experience rather than looking at it from the “outside.”

Here are some examples. A man is presenting his current situation - problems of his finances, a relationship outside his marriage, a daughter with an alcohol problem, and a wife with alcohol problems. He says, “I want to get back to my religious roots and find some peace, but I have all these things I have to deal with. I don’t know which one to deal with first, and I can’t sleep worrying about them.” I say, “Have you ever heard about what you should do and not-do if you fall into quicksand?” He stops, thinks, and says, “You’re supposed to not-struggle and try to be still.” “Yes,” I say, “I’ve heard that the more you try to pull yourself out, the more it sucks you down.” He takes a deep breath and says, “You’re right. I’m trying to do everything at once and I’m just getting more worried.” We then talk about ways he can focus on calming, meditating experiences and I hear how he has an offer to spend some time with a male friend in another state to relax and “gather himself” before he tries to work on these problems.

In another session with the same client, he is bewildered by his going outside his marriage (and violating his own value system) to find what

he describes as the “sense of peace, acceptance, and understanding” he gets in that relationship. This makes it hard for him to give it up. (Ironic, isn’t it that he is using this outside the marriage relationship for relief and comfort the same way his wife and daughter are using alcohol to get comfort from their problems). I say, “Did you know that pregnant women in the South sometimes eat dirt?” He looks surprised and says, “No.” “Can you guess why?” I ask. “No,” he replies. I say, “They lack some essential nutrients needed during pregnancy and they eat dirt rich in some of those minerals. Do you know why I bring up that information now?” He thinks and wonders, “Maybe I’m getting something in this outside relationship that is essential for me?”

I repeat the things he listed that he gets from the relationship, “peace, acceptance, understanding,” and suggest that those are essential needs for everyone. We then explore how he felt he wasn’t able to feel he got those things anymore in his marriage or in his religious practices (even more so now that he is “committing adultery”) and how he might do the internal work necessary to get those things for himself rather than relying on others to give them to him.

In both these instances, this client was able to use the metaphor to feel more deeply, consider his experience in a new light, and then to make a choice to move in a new way. I love working this way because the metaphors come from a creative, more intuitive, place inside me and bring an “aliveness” to my work. At times, when a metaphor occurs to me, I use it internally to invite the client into an enactment and then move from there with their work.

**And what if this child *never* gets to the “that’s enough” place. I mean, if he never gets enough of the violence maybe even outside of session, too.**

Well, should that turn out to be *literally* true, you might have a sociopath on your hands. My claim to any kind of competency applies only to normally neurotic people like myself.

Otherwise hang in there. He’ll be okay. ♪

**Q. When he perceives me as “probing” with questions, he freezes up.**

**A.** You can work with the freezing up, his perceptions, his definition of probing, or the questions. Even for a non-probed, non-frozen person, questions tend to keep a person in his intellect, invite content, and encourage defenses. Anytime you intervene in session, watch the client’s reaction. Notice whether the client uses your intervention to connect with himself and deepen the work, or comes out of the work to think-about, talk-about, or turn the attention away from himself.

Work with *your* part of the interaction. Check yourself for intent. Are you, in fact, probing? Is there any judgment underlying your question? Is your question a thinly disguised demand for him to address issues you suspect are important?

Find the part of the probing process of which you do have a part. Own up to it. Then use that as an intervention.

*“Maybe I Am probing. Sometimes when I wonder about something in the form of a question and you freeze up a little, I figure we’re onto something important so I start probing deeper, you freeze up more, and pretty soon we’re into a power struggle. Thanks for pointing that out. If I do it again, I would appreciate you noticing that out-loud. (Introspects for a moment and chuckles at her inclination to ask another probing question.) Right now I’m wondering what your response is to what I just said!” (Breathes and lets go of any assumption that he is going to respond at all.)*

Find out what happens when you *don’t* ask questions.

It is possible that this person comes to session in a narcissistic state. Whether personality disorder or temporary defense mechanism:

Consider limiting your interventions to wondering, sharing, validating, and reframing positively.

Direct most of your work to the relationship between the two of you.

Should you decide to return questioning to your repertoire of interventions with this client,

Tell him your plan ahead of time. Remind him that the answers to your questions are really none of your business and that you offer questions only as a way to stimulate his internal reflections.

Tell him that your job is not to judge or fix him but to invite him to work out the answers for himself.

Ask him what he wants from you.

*“So, help me out. How might I say that in another way besides asking a question?”*

Appreciate him for taking care of himself when he perceives he is being probed.

□ Direct him to draw a picture what “probed” looks like. Work with the picture as you would a dream.

□ Invite imagery around the words probing and freezing.

□ Invite him to explore how he is a prober; a freezer.

### **He hates it when his wife probes him with questions, too.**

Common defenses to probing include whining, attacking (probing) back, developing a sarcastic wit, provoking guilt, saying nothing to someone’s face at the time but saying negative things about them to others, or even better, waiting until they are out in public and then embarrassing the suspected prober.

□ If he wants other options, the two of you can develop a system of loving confrontation compatible with his personality. Invite him to practice on *you*.

□ You might start by asking a question which he perceives as probing. Invite him to introspect, become aware of his blood pressure changing, and feel that familiar biochemical invitation to freeze up. Suggest he breathe deeply, let the freezing tendency flow out of his body, and remind himself that he chooses a non-negative relationship with the person he is with right now (you). Teach him to give:

- A statement of the problem totally owned: “I’m having a problem with questions again, and I can feel myself freezing up.
- A statement of the solution totally owned: “I need a couple of minutes to recover and get back to normal.”
- A guess at the other person’s positive intent: “I guess it’s possible you’re not probing at all and just want to know the answer.”
- A statement of what he would like, in an ideal world, from the other person right here & now, “Ms. H. I’d be better able to hear you if you would say it this way, “...”



**Q. What exactly do you mean when you refer to the “edge?” Stepping off the edge sounds like falling to your death. That’s the part I’m concerned about—suggesting the client go out on his edge. That seems really dangerous. I feel totally incompetent about that.**

**A.** It is not our job to protect the client from his work. Just walking into the therapy office is an edge for some people. Another edge for many folks is learning to pinpoint a here-and-

now emotional experience and name it out loud as it happens.

Some people run into shame or feel invaded if asked a question, so for them an edge might be telling a simple truth. For others, a major edge is to sit quietly; for many it is to listen to themselves.

Psychotherapy invites a person to have a fuller relationship with himself. For most people, introspection, awareness, and mindfulness are all “edges” and are usually accompanied by anxiety and resistance.

Change may be the birth of possibility, but stepping off one’s psychological edge into the psychological unknown can feel a bit like dying.

So by “edge,” I mean the psychological point at which the psyche’s desire to resolve an issue meets head on with the person’s fear of change (the death of what-used-to-be) and his tolerance for discomfort and dysfunction.

Think of a mountain cliff overlooking an abyss. Most of us spend much of our emotional and social life on a narrow psychological path which parallels the edge of the cliff. As we move closer, we become more aware how uncomfortable our life on this path is. However as we are drawn toward the edge and toward change, we resist and pull back. But not a lot. In fact, most of us never leave our narrow path.

Bemoaning our lot all the while, we tend to stay within our level of tolerance for discomfort. We choose the dysfunctional familiar, flirting with the edge of the abyss, yet never getting too close nor too far from it. Consider the idea that if you don’t suggest the client move closer, ever closer, and even consider jumping off the edge, you are co-behaving him.

That by not inviting him to turn up the emotional heat, you are aiding and abetting him to stay in that safe but uncomfortable and dysfunctional place in which he has lived for years. You are inviting him to continue doing exactly what he has always done, i.e. solving “the problem” in the same way he always has. He doesn’t need you for that.

In fact, he can do that quite effectively by staying at home. He has brought himself to psychotherapy to be invited to do something different.

He has come to find a way to expand his repertoire of behavioral, emotional and psychological choices. Do your job. Invite him up to and into his full potential. Then let go, of course, of any attachment that he take your invitation.



**Q. This elderly couple is so quiet, they make me crazy. They talk, move slowly, and think a long time before doing or saying anything.**



**A.** What is your need for them to hurry? Impatience dilutes the therapeutic environment. Detach from your judgments. Reframe their behavior as self-care.

Unconditional positive regard connotes an attitude of,

“You are okay the way you are,”  
*not*

“I would be more comfortable if you were different.”

Acknowledge and explore the part of you who has a need for other people to be as you want them to be. Make friends with the part of you who is quiet and thinks about things before he does or says them.



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