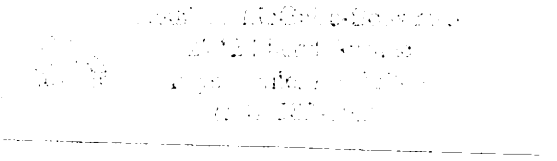


# THE EXPERIENTIAL DIMENSION IN THERAPY

*by Kathleen N. McGuire, Ph.D.*

# THE EXPERIENTIAL DIMENSION IN PSYCHOTHERAPY



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# INTRODUCTION

Most theoreticians and clinicians would agree that intellectual understanding by the client is not sufficient for change in verbal psychotherapy. Something must happen at a deeper level. The client must experience an insight. Cognition and experiencing must interact.

In the same way, therapists don't only depend upon cognition when relating to clients but often operate out of intuition, or a preverbal "feel" for what is going on in the client or between client and therapist.

Most theories of psychotherapy emphasize the cognitive dimension. The present book does not lessen the importance of cognition but places emphasis on the less described experiential dimension in psychotherapy. It attempts to describe the interaction between cognitions and other symbols and experiencing as that occurs in both client and therapist in verbal psychotherapy.

The action in psychotherapy happens on a very thin line between the known and the unknown. That which is thoroughly known circles around dryly as "intellectualization;" that which is thoroughly"unconscious"is so far from the client's present ability to grasp it that, even if guessed at by the therapist but not expressed in a way that resonates with the client's present experiencing, it is useless. The action takes place with material that is so embodied in the present moment that

it is palpable in the room. It is right here if only words can be found for it. Therapists often first come in contact with this material experientially--preverbally, as a bodily sensing without words. They then must struggle to symbolize the material to themselves as well as to the client. If we are to teach psychotherapy, then we must describe this process of sensing into, and making symbols for, the client's present experiencing.

Many therapists operate experientially without ever using that term for their work. Whenever a therapist asks a client to refer to and to articulate inner experiencing ("What are you feeling?"; "How does that make you feel?"; "It seems that you are sad;" "What did it mean to you when he did that?"), the therapist is working experientially. "Experiential psychotherapy" as defined by Eugene T. Gendlin (1983;1974;1973;1968;1967;1966) is the name used when the use of the experiential dimension has been potentiated through the skills of "experiential focusing" and "reflection of felt meaning." However, the experiential approach is not confined to a particular school of psychotherapy but can be combined with other approaches.

The writings by Gendlin give specific instruction in these skills. It is the intent of the present book to enable therapists to recognize where they already use focusing and reflection in order to work with the experiential dimension and to strengthen this work through a more conscious application of these techniques. The book also attempts to illustrate

the natural interplay between work with the experiential dimension and with cognitive, behavioral, and cathartic techniques.

The initial chapters present a theoretical metaphor for the interaction between symbols and felt experiencing in psychotherapy. The final chapter outlines a strategy for researching this interaction. The body of the book consists of transcripts of two lengthy psychotherapy sessions. The 2nd, with a highly intellectualized client, illustrates the need for interaction between cognition and experiencing; the first with a highly emotional client, the need for interaction between emotion and experiencing. Each page of transcript is accompanied by the therapist's attempt, upon replay of an audiotape immediately after the session, to recall the thoughts, feelings, and intuitions that guided interventions. Further commentary elucidates the interaction between symbols and the preverbal as it occurs in the transcripts.

The book is experiential on another level. The writing is meant to engender a felt response in the reader, a gut reaction of "Oh, yes, I know exactly what she's talking about. It's when such and such is happening interpersonally, and it feels like this..." The balance and coordination needed to ride a bicycle depend upon a bodily feel, as well as a consciously articulated understanding of how bicycles work. In the same way, the process of therapy must be grasped through a bodily resonance, a felt understanding, as well as intellectually. Experiential learning deepens the

ability to apply new learning in the practice of psychotherapy in a way that intellectual understanding of a theory alone does not.

In scientific writing, words describe external, observable events. They are purposefully stripped of metaphorical meanings. However, inner experiencing can never be put totally into words. The words to describe it must serve a pointing function. They must refer to the experiences they attempt to describe. They attempt to call forth in the reader similar experiences. The words carry, not only their face value, but a larger load of implicit meaning. The most typical form for such "meaninged" words is the metaphor. The poet says: "My love's voice is as sweet as honey." The reader is invited to imagine a voice with this quality. The words call up a wordless feeling, a felt sense of a voice lovely in that way. Again, the poet has not been able to put the experience totally into words, but, if the metaphor is a good one, the reader has a similar experience. The reader also cannot put the experience completely into words but must invent another metaphor to show comprehension: "Oh, yes, a voice...well, like the smoothness of a lake at sunset" or "As if it were filtering through dappled sunshine." As you will see, this metaphorical usage of words parallels the experiential work in therapy--the attempt, through the use of symbols as metaphors, to enable clients to experience their own inner meanings.

In the same way, theoretical concepts can be used metaphorically--for their capacity to call forth and differentiate aspects of inner experiencing. As metaphor, any theory can be useful. Any theory should have begun as an attempt to describe an experienced phenomenon. When that phenomenon is called forth by the theoretical words, it becomes accessible for study in-itself. A theory's usefulness lies in its ability to differentiate aspects of the phenomenal field which have otherwise not been differentiated. In such a usage, theories are read as metaphors rather than as logical treatises or proofs. I quote Jung (1966) on the relativity of theories:

> ...I have never succeeded in the long run in not giving divergent opinions their due. Such opinions could never arise, much less secure a following, if they did not correspond to some special disposition, some special character, some fundamental psychological fact that is more or less universal.(p.36)
> ...Each of them rests on special psychological assumptions and produces special psychological results; comparison between them is difficult and often well-nigh impossible. Consequently it was quite natural that the champions of any one point of view should, in order to simplify matters, treat the opinions of the others as erroneous. Objective appraisal of the facts shows, however, that each can boast not only of certain successes but of psychological data that largely prove its particular assumption. Thus we are face in psychotherapy with a situation comparable with that in modern physics where, for instance, there are two contradictory theories of light. And just as physics does not find this

> contradiction unbridgeable, so the existence of many possible standpoints in psychology should not give grounds for assuming that the contradictions are irreconcilable and the various views merely subjective and therefore incommensurable. Contradictions in a department of science merely indicate that its subject displays characteristics which at present can be grasped only by means of antinomies--witness the wave theory and the corpuscular theory of light. Now the psyche is infinitely more complicated than light; hence a great number of antinomies is required to describe the nature of the psyche satisfactorily.(p.4)

For example, Leadbeater's(1927) theosophical theory of "energy chakras" made me aware of experiences I had while doing therapy which I had not even consciously articulated until his words pointed to them. However, I am not comfortable with all of the theoretical premises of theosophical theory. I set that theory aside and go to the experiences themselves, now that they have been called forth or constituted out of my background experiencing by Leadbeater's words. I continue to explore the phenomena, creating my own words to describe them and, perhaps, eventually, my own theory to explain them.

Gendlin's (1962) theory of experiencing and the creation of meaning provides powerful metaphors for the experiential aspect of psychotherapy. This theory is used throughout the book as a metaphor for aspects of the process of psychotherapy that are not so clearly called forth and differentiated by other theoretical metaphors. The theory is not offered as a replacement for other theories of therapy.

Each theory differentiates different aspects of the process, and each is valuable for what it allows to emerge. I ask you to judge Gendlin's theory by its capacity to allow you to make new differentiations in your experiencing. Such enrichment should not involve the putting down of any other theoretical frames which are helpful in describing the process of psychotherapy.

# CHAPTER ONE

# AN EXPERIENTIAL METAPHOR FOR PSYCHOTHERAPY

## The Interaction of Symbols and Experiencing

Gendlin(1962) articulates two levels of inner activity that go on simultaneously and in mutual interaction. Each affects and conditions the other. Neither can move from Point One to Point Two without interaction with the other. One level is "symbols." The term"symbol" in this case includes perceptions of the physical body,of behavior, and of the environment, as well as cognitions, emotions, dreams, images--in fact, all inner phenomena except experiencing. The other level is "experiencing." "Experiencing" is the preverbal, presymbolic sentience which flows along underneath and gives meaning to symbols.

Human process is a constant back and forth between symbols and felt experiencing. Symbols (cognitions, perceptions, behaviors, emotions) have meaning only through their grounding in felt experiencing. At the same time, symbols form experiencing, calling forth or articulating specific aspects out of the preverbal ground. The process of creating words or other symbols to describe felt experiencing immediately influences experiencing. The symbols created reflect back upon experiencing, calling forth new or further aspects of it. For instance, the act of saying, "I am angry" may immedi-

ately allow a next aspect of experiencing to arise: "No, I'm not angry anymore. Now I'm aware of being sad."

Although all psychotherapies may share similar long-term goals, the idea of what exactly about the person has to change in order to achieve these long-term goals varies. Theorists tend to divide the human being into behavior, cognition, and emotion, and then take differing perspectives on which causes change in the others. Gendlin points out the commonality between behavior, cognition, and emotion (each is a form of symbolization) and shows that it is in the meaning-creating interaction between any of these and experiencing that the possibility for change resides.

Following Gendlin, I use the words "felt sense," "felt meaning," "felt experiencing," "the preverbal," "the implicit" to refer to the bodily ongoingness which exists independent of words or other symbols. I also use the word "sentience" for this preverbal quality, and the word "feeling," as in "I just have a feeling about it;" "I can just feel it in my bones." I sometimes use the term "energy" as a way of pointing to the palpable, non-cognitive nature of the phenomenon. The choice of one term would be theoretically cleaner. However, many different metaphors are used in hopes that one of them will succeed in evoking the phenomenon for a particular reader. "Felt experiencing" is not an abstract concept but points to an inner experience of "ongoingness" which can be experienced by the reader through a moment of silent attention to inner experiencing.

A distinction must be made between emotion, affective words, and felt experiencing. "Emotion," as defined here, is equal to physiological arousal. It need not be named. One can be angry without knowing it. Emotions are one form of symbolization that interacts with felt experiencing. As with any symbol, in order to experience the meaning of an emotion, one must step out of the emotion as symbol and refer to the felt experiencing which is its ground. Felt experiencing is broader than emotion. Felt experiencing implicitly contains the situational referents which give meaning to an emotion:

> ...Let us also compare "experiencing" with the common term "emotion." We said that "experiencing" is a felt datum, and this word "felt" may suggest that it must be an emotion. Often, some emotion is the most important aspect of some present "this" or experiencing. However, just as often,a client will refer to "this feeling" and when he comes to conceptualize it later it will turn out to be a complex of many meanings (such as "I know what is really at the bottom of it, it's that I feel so inferior in action and people will despise me because..." and so on at length). In this last-mentioned example, it is clear that the client has for some minutes been trying to "get at" just what the "feel" of what he is talking about is. This "feel" isn't just an emotion (in this case). It is a directly felt datum that implicitly means a great deal. Therapy is largely the process of directly referring to, "getting at," "feeling out" the feel of what the client first talks about. Thus, "experiencing" may be defined as the (directly referred-to) "feel" of some situation, concept, object, personal relationship, content, or the like.
>
> (Gendlin, Experiencing and the Creation of Meaning, p.243 ff., n. 9c)

It is only after a moment of reference to felt experiencing that one can find words for an emotion. Affective words ("I am angry," etc.) arise as symbolizations of felt experiencing. Felt experiencing is broader than any affective words used to describe it. A moment of experiencing implicitly contains and can be specified into many different affects, all at the same time. For instance, after a disquieting life event, a person might say, "I feel sad and angry and shocked! I feel confused, shattered, torn. I feel completely disillusioned and resentful and untrusting." Likewise, while a moment of experiencing might be specified and expressed with affective words, it could also be formed and expressed as music, images or action.

At least one component of mental health is the ability to move flexibly between one's symbolizations and the felt experiencing underlying them. Thus, as experiencing changes through interaction with new life events, symbolizations will change. The most creative thinking is that which moves freely and continuously between cognitive symbols and the preverbal; the most adaptive behaving is that which is continuously kept in tune through reference to bodily felt experiencing; the healthiest emotion is that which is quickly grounded in felt meaning. When large areas of experiencing are "bound off" in rigid symbolizations (whether repetitive thoughts, behaviors, or emotions), human being is narrowed and impeded. Psychotherapeutic change involves freeing experiencing from rigid symbolizations and allowing new symbolizations to be created out of the experiential ground

which are more flexible, less binding of experiencing, more open to change and continuous reformation through interaction with new experiencing. Therapists can work primarily with cognition, emotion, or behavior (or, better yet, with all three at once) and produce change as long as they are maximizing the interaction between any of these and present felt experiencing as the ground for the coming of the new.

## The Process of Change

To change a symbol, the therapist must help the client to step out of existing thought or behavior structures and to be in touch with experiencing for a moment, without any concepts or other symbols. It is in these moments where the client goes from structure to process that change resides. Existing personality and behavior patterns melt back into the experiential whole for a moment. In this cauldron of free flowing experiencing, a new pattern can emerge, a moment of transformation occur, the kaleidescope turn. After a few seconds or at most a minute or two, concepts, images, symbols, structures will again emerge from experiencing, but they will be slightly new. The person, the experiential whole, will be changed. New behaviors, thoughts, ways of perceiving and feeling can be expected to follow.

Gendlin calls this moment without symbols "direct reference" to felt experiencing. It is in the continuous attempts to produce direct reference that the work of therapists working experientially can be recognized. Sessions do not proceed in a linear, intellectual, conversational style. Every few moments there is a pointing down,

an invitation to step out of words and into the felt texture underlying them.

Gendlin has developed the "focusing technique"(Gendlin, 1981, 1978 ; Gendlin and Olsen, 1970; Gendlin, Beebe, Cassens, Klein , and Oberlander, 1968) as a way that therapists can teach clients to "focus" upon felt experiencing, thereby potentiating direct reference and the opportunity for change. The client learns to set aside existing cognitive and other symbols and to sit quietly, waiting for a "felt sense" of the whole issue to arise inside.

Direct reference is only the first step toward personality change. Experiencing must interact with symbols in order for new meanings to arise. As direct reference proceeds, symbols (words, images, actions, emotions) arise from felt experiencing. At this point, therapists working experientially turn to client-centered "reflection of feeling." The reflection of the client's words and images sets up meaning-creating interaction between symbols and felt experiencing. Aspects of felt experiencing are called up more clearly and further differentiated as the new symbols interact. Clients find more accurate words or images for their felt experiencing. These symbols are also reflected back so that they can interact with felt meaning. When, through the process of direct reference, articulation, and reflection, exactly accurate symbols are found for the felt experiencing, then the felt meaning changes. Gendlin calls this change a "felt shift" (Gendlin, 1964). The "felt shift" is not only an abstract

theoretical concept. The words point to an experience at the preverbal level which can be felt by both therapist and client. After a few minutes of integration in this new place, the process begins over again. Clients are encouraged to focus upon the new felt meaning, and the process of articulation through interaction with symbols begins again.

A Unifying Metaphor For Techniques of Therapy

All of clients' various outputs can be looked at as symbols. In hearing words and dreams, in seeing body posture and gestures and behavior, therapists can see symbol and implicit meaning, words and the not-yet-said, body rigidities and underlying experiencing. If all client outputs are viewed as symbolizations of present felt experiencing, it becomes possible to create a unifying metaphor for many different techniques of therapy. Bioenergetic therapists reflect body posture; Gestalt therapists enable clients to experience the meanings symbolized in gestures and other symbols; Jungians interact dream metaphors with inner experiencing; Rogerians reflect felt meanings; psychoanalysts use free association to create moments of direct reference. Each technique can be seen as an attempt to bring symbols and felt experiencing into a relationship which produces direct reference to felt experiencing and thus the chance for creation of the new through articulation into new symbols. In each case, the therapeutic task is bringing the client's symbols into interaction with the client's experiencing. The use of Gendlin's theoretical metaphor allows therapists to articulate this function more clearly and to use it more effectively.

Viewed through this metaphor, the success of behavior modification when true, long-lasting change is achieved, can also be described. As clients behave in new ways, the new behavior and the new responses it elicits from the environment reflect back upon and interact with inner experiencing, creating new differentiations. Once this symbolizing function of behavior is understood, therapists working experientially can also use behavior modification as an effective tool. The client tries a program to overcome shyness or agoraphobia or smoking or overweight. New behaviors and environmental reinforcers interact with experiencing and create a felt sense. During therapy sessions, the therapist hears a report of the new events and tries to get the client to focus upon experiencing as it has arisen in this new interaction. The client is helped to articulate this new experiencing. If the articulation is successful, new symbolizations, a step of personality change, will arise. Although some new symbolization will happen simply through the interaction of new behaviors and experiencing while the program is carried out, the purposeful use of focusing and articulation during sessions can greatly speed and solidify the gains in terms of felt shifts and new symbolizations, verbal as well as behavioral.

Expressive, cathartic therapies can also be done more effectively, once the need for interaction between emotion and felt experiencing has been understood. Techniques from these therapies can be especially successful in calling forth strong emotions. However, if emotions are aroused without reference to the felt experiencing underlying them and the

articulation of new symbols, then the same emotion can be aroused over and over again without anything changing. Once an emotion has been aroused, the client must be helped to focus upon and to articulate the meanings implicit in the felt experiencing associated with the emotion.

## Therapist Focusing: A Definition of Intuition

Focusing upon and articulating inner experiencing is the primary activity which therapists must facilitate in clients if personality change is to be maximized. Initially, the therapist does much of the resonating and focusing for the client. The therapist focuses upon and articulates his or her own inner experiencing as it is called forth through interaction with the client's symbols.

As the client's symbols interact with the therapist's felt experiencing, resonances are set up which are first felt or experienced by the therapist and only shortly thereafter, understood through the creation of words or images. The client plays the same note, or a theme, over and over again. The therapist experiences it and tries to find words or images or theories to make it communicable.

The therapist becomes able to guess at the client's inner meanings through reflecting upon his or her own experiencing while in interaction with the client's symbols. Such attention to felt meaning quickly becomes interactive with symbols in the attempt to find words or images to describe the experiencing. This "sentience-to-symbol-and back again" process goes on almost unnoticed in the back of awareness. The therapist finds and follows a feeling sense, throughout

minutes or sometimes several sessions or even months, until the sense of a pattern becomes articulated enough in the therapist's own experiencing to be described to the client: "I think there's something like such-and-such going on between us. Do you know what I mean?" "I think there's something that you do there that you've done before that has the quality of...Can you feel that?" This crafting of words or images that can capture the nuance of preverbal felt experiencing is the intuitive work of therapists.

An approach to therapy which describes the process of making interpretations without reference to the continual experiential side of the therapist's activity leaves undescribed a good half of what the therapist is actually doing. In order for an interpretation to work, it must be an articulation of the client's present experiencing. The interpretation must point to the client's own experiencing so that the client can feel it, as the metaphors in a poem point to and create in the reader experiencing that can never be put completely into words. Such communications are not aimed at the logical or rationalizing ability, but at the client's felt experiencing. Although words must be used, the communication is from feeling to feeling. The therapist has intuited the client's felt meanings and now must convey them in such a way that the client can experience them. The right time to make an interpretation is when the interpretation is a precise metaphor for the preverbal experiencing present at that moment in the client. The interpretation then functions as a reflection of this felt quality. Otherwise, the inter-

pretation becomes one more intellectualization, one more explanation of the problem which still doesn't produce change.

If the making of interpretations is cast as a purely cognitive activity, therapists-in-training are left trying to apply a set of logically derived postulates with no sensitivity to the experiential ground which makes them relevant to a particular client at a particular moment. If, instead, interpretations are seen as the therapist's attempt to symbolize his or her own experiencing as it is arising at the moment in relation to the client's present experiencing, then interpretations will be timed for that moment when they are most likely to present a metaphor for the client's present experiencing.

The same is true when reflection of feeling, or empathic understanding, is described without reference to the therapist's reliance upon felt meaning. The parroting of words is not sufficient. That which will allow for change, which will allow something new to arise, is by definition not present in the client's words per se. If it is presently cognitively known and can be verbalized, then it is not new. The therapist's task is to locate, to feel for, to feel into the meanings implicit in the words and other symbols. It is this implicit meaning that must be reflected to the client.

## The Experiential Metaphor

I have not pretended to offer a complete theory of personality change. Gendlin continues to work on a process theory that can explain the reforming of the relationship

between experiencing and symbols such that changes in symbols are manifest. Part of the problem of such theorizing is the need to create new terms and ways of thinking which can apply to process. We have many terms for contents (personality contents, dream contents, cognitive contents, unconscious contents) and scales to measure change in contents, but we have very few terms for describing how one gets from one content to the next (Gendlin, 1964).

My purpose has been the delineation of a crux metaphor for the experiential dimension in psychotherapy. Psychotherapy can be envisioned as a process of moving between symbols and the preverbal and back again. The goal of interventions is to move the client out of symbol and into experiential process for a moment before new symbolizations are articulated. These new symbols can then reflect back upon experiencing and allow another step of articulation to arise. Such steps in the resymbolization of felt meaning are the essence of personality change. The process of direct reference to and articulation of felt experiencing is the crux metaphor for what goes on inside of the therapist and for what the therapist is trying to facilitate in the client.

The process of training a therapist to work experientially is one of producing a bodily inner experiencing which is as finely tuned as a great harp. Where a master musician will learn to discriminate distinctions among tones which a less trained ear will be incapable of noticing, a master therapist has spent equal time in becoming acquainted with distinctions in his or her own inner experiencing. The experiential

therapist must have the ability to move between felt resonances and words or images in a fluid manner.

Much of the training of the therapist consists of interacting with different practice clients and sensing the changes in one's own experiencing during interaction with these different people and at different times during a therapy session with one person. Using "focusing" to sort out and to make words for the nuance of feelings, the therapist gains facility in articulating his or her experiencing in relation to the client. Where the nontherapist may have limited words to describe such inner experiencing, the experienced therapist will be able to make many distinctions in his or her experiencing in different situations. As in harp playing, it takes, perhaps, some innate talent and a lot of practice.

# CHAPTER TWO

# THE THERAPIST'S EXPERIENCE WHILE WORKING EXPERIENTIALLY

## The Intuitive Stance

Before a session, I spend some time focusing--getting centered, clearing my inner experiencing. I want my experiencing to be able to act as a sounding board, picking up, resonating with, and amplifying the client's symbols and meanings.

The client arrives and begins to talk. I listen to the words. I also take in the voice tone and quality and body posture. My impressions are often preverbal before they are symbolically articulated.

I listen, not only to the client's words but to every nuance and shading of meaning that is in the room. I attend to my experiencing of the feeling quality between us. I hold more different areas of information all at the same time than could ever be done if they were all in words: everything I already know about this client and everything I know about clients in general, psychotherapy, and personality theories. The sensing happens, not only in my head and the paths of my memory, but in a preverbal space that lies between my throat and my belly. I turn to the preverbal as in meditation, focusing my attention upon my inner experiencing, trying to find words or an image for what I am experiencing. I continuously ask myself, "What am I feeling?" and "What is going on here?"

I continue "listening" in this way until something intuitively grasped arises in me. At first, this intuition will be without words. I try to find words or images that are just right for expressing this subtle meaning. I offer my symbolization to the client. My words are fumbling as I grope at the edges of the preverbal. They are studded with metaphors ("It's as if...") and images ("I get an image of you...") as I try to find words for subtle feeling. They are most often phrased tentatively, as a question ("I'm sensing something like this...Does that make any sense to you?"). Since I can only guess at the client's experiencing through reflecting upon my own experiencing, I cannot be sure that I am right. However, even a wrong guess can stir an interaction with the client's experiencing, giving the client a chance to refer directly to the experiencing thus constituted and to find better words than mine to express it.

I look for the effect of my words on the client. Is there a deepening of nuance? A softening around the eyes or mouth? A trace of tears? Deeper breathing? A sigh? Some exclamation of recognition? Or is there a befuddled look at me, a brow furrowed with confusion, a question mark coming back at me, a defense. If the former, I use reflection of feeling to help the client articulate the experiencing which has become present. If the latter, I communicate: "Never mind. I can see that wasn't helpful. Let's go back to what you were saying, where you were." If I continue to experience the same felt sense strongly, I may try to convey it to the client again a little later, using different symbols.

Sometimes this circling for felt meaning goes on for several sessions before I am able to put the intuition into words. More often, some early feeling word or metaphor for inner experiencing offered by the client puts me on the track toward the implicit meaning pointed to by these symbols. I may have to bring the client back to this place of meaning many times throughout the session. Eventually, the meaning pointed to by the symbols will become articulated enough that it can be grasped by the client experientially. At that moment, there will be a felt shift: a rush of energy, an opening of the boundaries between us, a moment of transformation. This moment of transformation will be felt by the client and by me. When it has not happened yet in the session, I feel this in my body--a tautness, a separation from the client, a compression and flattening of my own experiencing.

An image I have of the intuitive process involves a circling of my hand, palm down, over an energy field, trying to find the spot where there is a magnetic pull, where there is some heat that interacts with my hand. Carlos Castaneda ( ) offers another metaphor for this different way of seeing. He describes a slight shift of attention where, in looking at another human being, one sees, not skin and body form, but a luminous "egg" of energy strands swirling in the middle of the body, and threads of energy coming out of the belly and connecting with other people. A Jungian therapist I had used the metaphor of "wetness/dryness." As I talked in therapy, he might say, "No, now it's getting dry. Go back to...Where the wetness was," and he would make a movement

with his hand-the rubbing together of the finger tips which symbolizes something palpable, something that can be felt but not put into words, the "indescribable flavor."

"Energy" as a Metaphor

A theory which I have found helpful in describing this kind of bodily experience is that of energy chakras(Kreuger, ; Miller, 1975; Leadbeater, 1927). I offer this theory, not as an intellectual bone to pick , but as a metaphor which may be helpful in pointing to the experience which I am trying to describe. I refer you to the referenced readings for intellectual presentations of the theory. I will present it here as images which resonated with my own experiencing and helped me to articulate some aspects of it.

The theory talks about the body, not in terms of muscles and bones and nerves--the concrete manifestations we usually associate with "body"--but in terms of energy, energy centers, energy channels, a more subtle kind of "ethereal" body that can be experienced if attention is turned to it. Energy is seen as diffused throughout the physical body and even several inches further out from the skin in the ethereal body, where it can interact with the energy of other people. The existentialists also talk about the body in this "non-skin bounded" and interactive way, but not as concretely. The theory also describes seven energy centers spread from the top of the head to the root of the spine, which are especially sensitive. It describes how each of these centers can be more or less open (receptive to energies) or closed and how each may be

associated with particular feelings or qualities of being. These centers are called "chakra." One can have an actual physical experience of the openness/closedness of one's own chakras through meditation upon the various energy centers and/or by having another person (particularly one who is sensitized to energic experiences, e.g., a psychic healer or practitioner of therapeutic touch) pass his or her hands over the various energy centers yet a few inches away from contact with the physical body (in the ethereal body). Kreuger and others are attempting to subject the theory to the rigors of experimental science. However, the possibility of subjecting the theory to scientific tests is of secondary importance to me. The theory, as metaphor, has already served its purpose for me. It has helped me to make words for experiences which I have while doing therapy, specifically being attuned to subtle feeling in a way which enables me to make distinctions in what is going on between me and a particular client at a particular time.

## The Experience of Change

The presence or absence of felt shifts in the client's experiencing lets me know, moment to moment during a particular session, whether my techniques are being successful or whether I need to try something new. I will try to describe the ways in which I know whether the client is experiencing a felt shift. My description will include observable and experienced indicators.

When a client has a felt shift, very often the client's eyes get teary. There is a subtle misting of the eyes when the client touches down into felt meaning. The appearance of this mist is only the first step. Words or images for the tearful place must be found in order to carry the implicit meaning forward and produce the permanent change in felt meaningwhich constitutes a felt shift. There are often more tears as the implicit meaning unfolds.

There is a change in the client's voice tone(Rice,1974). The voice becomes softer. There is a sense of"deepening": a greater sense of inwardness and self-intimacy.

The felt shift usually follows a pregnant silence. It's a full silence. There is definitely something going on during it, but the something is not cognitive and verbal but at the level of sentience. It's as if a bodily, preverbal shaping and reforming is going on.

There are often some deep sighs similar to those accompanying the relaxation response--again, a sign that something is going on in the body. There is often a visible relaxation in body posture--a letting go, relaxing. Tightened shoulders may drop down visibly.

There is a change in verbal content, from hypothetical expressions like "Well, it could be thus and so..." or "It might be this way..." or "Well, of course, it must be that this and that relate in this way" to expressions of inner sureness: "Oh, yes, that's it..." or "I can see it now...It's perfectly clear" or "Oh, that's why! I can feel it."

When the client begins speaking again, there is some discontinuity in the verbal content. The client does not pick up exactly as before but begins from a somewhat different perspective. It's as if the whole problem had been turned about $45^{o}$ and can now be seen from a slightly different angle.

I also experience the felt shift in my own body. Where earlier I had been aware of holding some tension, suddenly I feel a release--whoosh! Like a wash of clean energy. I feel whole, untense, flowing, energized. It's as though a barrier has come down between the client and me. It seems to me that energy is flowing in a circle between the client and me and through each of us. There is a palpable connection between us--a feeling of closeness, intimacy, inner touching. Quite often, I have tears of empathy in my eyes.

I describe this experience of release especially as its absense lets me know when a felt shift hasn't yet happened. Until the shift, I am kept alert to the need for new interventions. I know that my work isn't done until my body relaxes. Because theoretically I believe that personality change is made up of just such experiential steps, facilitating a felt shift, or more than one, during a therapy hour is my explicit goal.

This moment of relaxation and intimacy is not meant to imply an infinite state of nirvana and boundarilessness. If there is time remaining in the session, the next moment, the client and I will pick up the unwieldy bundle of the "not yet

known" again: "Okay, given that we've arrived at this new step, now what's next? What's in the way of going on from here? How is it that this is meaningful?",and the work of trying to go from symbol to process will be reinstituted.

The goal of each intervention is to bring the client closer to the implicit. The goal is to enable to client to have a moment of concretely feeling present bodily experiencing rather than thinking or symbolizing in some other way. If the therapist can facilitate this direct reference, then a felt shift is likely to follow. The therapist experiences client direct reference, or focusing, as a silence that is heavy with sentience, like the feeling in the air before a thunderstorm. The presence of inner experiencing commands respect, as though approaching something sacred. It calls forth a feeling of tenderness, gentleness, empathy in the deepest sense--as though one were approaching a small, vulnerable child or a forest creature who will flee at the slightest movement. I often speak of "the little child" or "the little person inside of you" when trying to give clients a metaphor to help them find that quality of experiencing inside. Or client's create their own metaphors: "It's like a little, shy fawn inside of me;" "It's like a small animal that wants to hide and lick its wounds;" "It's like a butterfly;" "It's like a sacred church;" "It's a deep well at my center;" "It's just my Self." Such metaphors help clients to locate the preverbal experience of felt meaning within themselves.

Therapist Techniques

The therapist working experientially teaches the client to focus. Sometimes I might simply say, "Can you be silent for a moment and let yourself feel that sadness?" "Can you just be with that loneliness for a moment?" "How does that stuckness feel?" "What's in that anger?" "Can you just be silent for a moment and see what comes?" Sometimes I give more lengthy focusing instructions (Boukydis, 1981; Gendlin, 1978).

I also use techniques from many other approaches to therapy to elicit felt meaning, and then I ask the client to focus upon the felt meaning that has become available. I may ask the client to role play her mother or to pound a pillow, or to go back and forth in dialogue between two parts of herself. I stop the exercise as soon as I can tell that the felt meaning that goes with the situation has been stirred and is now sentiently present. At that point, I invite the client to focus on the feeling, to sit with the sentience quietly for a moment and see what new words or images arise from it. I use empathic reflection so that the client's attempts at finding words will have a chance to reflect back upon the experiencing and allow more accurate symbolizations to arise. Sometimes, after a reasonable period of time, I can tell that a particular exercise is not allowing the implicit to become present. In that case, I leave the exercise and try another way of coming to felt meaning. I might ask the client to tell some dreams, and then to focus upon or to feel into an image in the dream that seems a metaphor for

present experiencing. Again, I turn to empathic reflection as the client tries out words for the felt sense. With a client who "wants some change fast" but is miles from direct reference to felt meaning, I may suggest a behavior modification plan to change the offending behavior and then see what comes in response (for instance, the feeling of "Oh, no, I couldn't do that because of this that's in the way") and focus on that feeling. Sometimes, I give an interpretation or a reflection of feeling which closely encompasses the felt meaning so that it comes forth. And sometimes the client may stumble into the place of implicit meaning quite accidentaly as words or images or memories open the door.

My decision to try a particular intervention is based upon my sense of its efficacy in facilitating a felt shift in the client's experiencing <u>at this moment</u>. I can assess the efficacy of each intervention immediately after trying it: did it bring the client closer to the preverbal? Or did it lead the client away or have no effect on experiencing? If the intervention did not have the desired effect, I lay it aside and try a different one.

Although I may seem eclectic in the kinds of tools that I use, I am not "eclectic" in the way that I apply them. The consistent application of experiential theory guides my work. When I use behavior modification techniques, I do not switch to a behavior modification theory of the world and the nature of the human being. Although I may use "interpretation" or "free association" as a tool, I do not assume Freud's way of seeing the client. I use each technique with the goal of creating an interaction between symbols and client experiencing.

## Combining Experiential and Other Techniques: A Sample Session

The following is a paraphrased account of an actual therapy session, showing the way in which various forms of symbolization and various metaphorical techniques can be used to try to help the client to find and articulate present felt experiencing. I have been seeing the client for about three sessions. She is in her early 50's, mother of five, divorced twenty years ago. She wants help in finding the motivation to find better work for herself. I have noticed that she carries a depressed, perhaps resigned air about her, a background tone. She enters and sits slumped in the chair:

| TECHNIQUE | | |
|---|---|---|
| | | C: I feel sad. I don't know why. |
| Foc. Instr. | T: Can you feel into that sadness? | |
| | | C: Nothing comes. No words. Don't know what it's about. |
| Intuition. | T: I've noticed that you carry an air of something | |
| Body Reflectn. | like resignation about you. Even in the way you sit...sort of slumped down. | |
| Foc. Instr. | Can you see if you can feel something like that? | |
| | | C: (closes eyes; is silent for about a minute; some tears appear on eyelids--DIRECT REFERENCE, FOCUSING Yeh...I guess so. |
| Foc. Instr. | T: Can you find some words for those tears? | |
| | | C: "I feel overwhelmed...hopeless." |

Foc. Instr. T: I'm wondering if you can remember times in your past life when it

Reflection felt like that--over-whelming, and like needing to resign your-

Interpretation self...I'm thinking especially around raising all those kids alone...

C: (quiet for a moment-DIRECT REFERENCE) Well, it was sure like that the first time my husband left me and took all the kids. It took me three years to get them back.

Reflection T: Boy, that sounds like a terrible, tiring situation.

Foc. Instr. Can you feel how you're still carrying that weight in your body?

C: (quiet DIRECT REFERENCE, more tears) Yeh. That was terrible...Every-body kept saying it couldn't be done, but I just kept trying. I had to get those kids back.

Reflection T: So there was a feeling that, no matter what it took, you were going to get those kids back.

C: (quiet DIRECT REFERENCE, more tears) Yeh, I had to get those kids. There was no way I could stop trying.

| | | |
|---|---|---|
| Reflection | T: So you just had to get those kids...no question...like a blind thing you had to do. | C: (tears, but also laughter--FELT SHIFT) Yeh, I never give up! (INSIGHT: there is not only a depressed part of me but a strong part that hasn't given up) |
| Body Posture | T: Can you try to sit up real straight and proud and say, "I never give up." | C: (Sits up, laughs and cries) I never give up! (laughs and cries)...Not me. I never give up! (laughs and cries) |
| Reflection | T: Seems like there's a lot of pain there around trying to do something that was almost impossible, and yet a good feeling, too. | C: (More tears and laughter) Yeh, that's me. I never give up. |
| Foc. Instr. | T: Can you check in your body and see if it feels lighter somehow...as if some of that resignation has gone away? | C: Yeh, I do feel better. |
| Interpretation | T: I think those past hard times of raising those kids all alone are still with you and are making it hard for you to find the energy and hope to change jobs now. | C: Yeh, I can see that. |
| | T: So we need to keep working on these memories here and | |

| | | |
|---|---|---|
| | go through some of those sad and maybe angry feelings. | |
| | | C: Yeh. You know what I'm thinking of now (some tears in eyes-DIRECT REFERENCE).. I'm thinking of when I used to work with my father in his garden in the evenings (more tears--FELT SHIFT: memory of good feeling emerges). |
| Reflection | T: So it moves you to remember that time in the garden with your dad... | |
| | | C: (nod, more tears--continued DIRECT REFERENCE) |
| Interpretation | T: From what you've said before, I'm thinking that maybe that was one of the few times when you got some help, when you didn't feel as alone, when there was some nurturance for you. | |
| | | C: Yeh, maybe so...maybe there was some warmth there. |
| Foc. Instr. | T: Can you close your eyes for a minute and try to feel into that memory. See if you can feel some of that warmth? | |
| | | C: (DIRECT REFERENCE, more tears) Yeh...It feels good...like there was some sense of communion there. |

| | | |
|---|---|---|
| Reflection | T: So in those moments there was a sense of being connected to someone else, of communion. | |
| | | C: Yeh, and things didn't seem so hard (continued consolidation of FELT SHIFT) |
| Reflection | T: And, when your dad was there, too, then the things you had to do didn't seem so overwhelming? | |
| | | C: Yeh...(laughs and cries again--(continued Felt SHIFT) That's me. I never give up. |
| Reflection | T: So again there's that funny feeling of "Well, you can't get me down. I never give up! | |
| | | C: (laughs and cries) |
| Cognitive Therapy | T: We have to stop for today. I'm thinking it might help if you remember that sentence, "I never give up," and say it in that proud way whenever you feel the resignation feeling coming up. | |
| | | C: I'll try. I also think I might do something about following up on that job lead(evidence of FELT SHIFT: energy available for action). |

T: And it might also help to remember what it feels like to have help, and that that really makes a difference in the tiredness.

C: Okay. See you next week.

The session has a rhythm to it, a flow from words to direct reference to felt experiencing to words or images again. Childhood memories, present life situation, body posture, cognitions are all seen as forms of symbolization that can be reflected back upon felt experiencing.

The therapist could have as easily used dreams, body movement, drawing, interpretation of interpersonal dynamics between therapist and client. The point is to take any material offered and see it as a form of symbolizing present felt experiencing and to use it to help the client to refer directly to that felt experiencing. Again, once direct reference to a felt sense has been made, the therapist turns to reflection of felt meaning as a means of carrying forward and articulating the implicit meanings.

# CHAPTER THREE

# INTRODUCTION TO TRANSCRIPTS

## The Clients

Chapters Four and Five present two lengthy transcripts of actual work with clients, each the major part of a typical one hour therapy session.

The two clients are representative of the bulk of clients in an outpatient private practice. They were also chosen because they present a good contrast between two types of the relationship between symbols and the preverbal.

Sally, in Chapter Four, comes to sessions with lots of emotion. Sessions with Sally are marked by the attempt to create a relationship between emotions and the underlying felt meaning. The session with Sally demonstrates that the expression of emotion is not enough for personality change.

Phillip, in Chapter Five, comes to sessions full of intellectual explanations for his problems. Sessions with Phillip revolve around the attempt to create an interplay between cognitions and bodily felt meanings. The session demonstrates the use of focusing instructions to create a felt referent which can then be articulated.

Sally and Phillip differ on another dimension. Research by Gendlin and his co-workers (Rogers, 1967; Gendlin,Beebe, Cassens, Klein, and Oberlander, 1968) has shown that much of the difference in the effectiveness of psychotherapy

depends, not upon therapist technique, but rather upon the initial capacity of the client to focus upon and to articulate felt meaning. The success of a particular client in verbal psychotherapy can be predicted with a high degree of accuracy simply by measuring the clients "experiencing level"(Gendlin and Tomlinson, 1967), or the ability to articulate felt meaning, during the first four sessions of therapy.

Sally entered therapy with the ability to attend to and to articulate implicit meaning. She often directs the process toward the implicit herself, saying, "I need to work on this feeling" or "Here's where the meaning is for me" or "I know that all of these incidents relate to this same feeling of being unprotected." Her speech contains many feeling words and metaphors, all ofwhich point to meaning which can be further articulated. The therapist's task is to help Sally to sit with the felt sense and to respond with empathic reflection as Sally attempts to make words for felt experiencing.

The work with Phillip is more difficult and more exemplary of the distinguishing characteristics of the experiential psychotherapist. Phillip is less aware of the level of implicit meaning. His speech contains many fewer references to his inner experiencing. Phillip has many guesses about the causes of his problem, but he is unable to check any particular guess against an inward felt referent which,

through its response, would tell him whether he is on the right track or not.

It is important to keep the two dimensions("emotion vs. cognition"and "experiencing level") separate. It would be tempting to say that the work with Sally moved faster because she had more emotions. However, the difference between Phillip and Sally lies, not in the presence or absence of emotion but in the flexibility in moving from either emotion or cognition (symbol) to focusing upon and articulating implicit felt meaning. Emotions can be just as rigidly symbolized as obsessive thoughts or compulsive behaviors. For instance, a client diagnosed as a borderline personality exhibits and overwhelming amount of emotion (anger, terror, anxiety). But the client does not have the capacity to focus upon the felt meanings symbolized in the emotions. The emotions will repeat and repeat without changing unless the therapist can enable the client to experience the underlying felt meanings.

The temptation in writing a book on therapy is to select transcripts like the one with Sally. Here, there is lots of process movement, obvious profound change, and the therapist's techniques seem to sparkle. However, it is the work with Phillip which places the greatest demand upon the therapist. The therapist needs the client's experiential resonances to interpretations in order to know which interpretations are right. In the session with Phillip, the therapist is almost as afloat as the client, grasping at the few shreds of felt

meaning presented and guessing at possible explanations. The session with Sally is much easier for and on the therapist. When the therapist is really at a loss, she asks for help from the client ("Can you look and see if you can tell me what all of this feeling is about?"), and the client answers from felt meaning, indicating the track they should be on.

Besides not knowing how to look inside, Phillip is also afraid to look inside. "Feeling things" has taken on negative meanings for him. So the therapist must balance teaching Phillip to look for felt meaning with attempting to understand and to heal his fears of discovering his inner experiencing. It was in response to clients like Phillip that Gendlin created the focusing technique. "Focusing" is a way of teaching clients how to refer to the implicit, so that they can engage in verbal psychotherapy in a meaningful way.

## Structure of a Session

Short examples of therapy can be chosen to demonstrate specific points of technique. But what of the actual therapy session? How is it that the therapist finds or selects the areas of implicit meaning to be focused upon? How does the therapist stay with one pattern of meaning when the client moves from topic to topic? What is the timing of interpretations? Where do intuitions come from? Why does the therapist decide upon one tactic rather than another? How does the therapist deal with his/her own frustration or boredom? Lengthy transcripts have been used in an attempt to answer such questions about the psychotherapy session.

The basic form of a session is as follows: The therapist listens for the first major place where the client refers to something that is unresolved, unclear, needing to be looked at. Rather than being distracted from this place by newly introduced, equally important issues or by new stories or intellectualizations, the therapist holds on to this place of felt meaning and keeps trying to find ways of bring the client back to feel into the felt sense. The felt meaning is articulated through a back and forth between new words or images or emotions and the felt sense.

Feelings are the experiential side of existential ways of being. A guiding question for the therapist is: "Where is this person stuck in his life?" Metaphors for inner experiencing are reflected back in the hopes of calling forth the implicit felt meaning. The therapist will also spend time trying to teach the client to focus--to look for the bodily felt referents beneath his or her words.

Several different stories or incidences in the session may be found to be related to the felt meaning that the therapist is sensing and staying in touch with. The limbs of the tree may be recognized because each brings tears to the client's eyes. This was the case in the session with Sally. The therapist then must look for the metaphorical links that make the issues all manifestations of the same root. At this point, it is not sufficient to interpret the pattern to the client. The therapist must help the

client to go down to the root and to work there with the felt meaning--the unarticulated, below-the-surface felt experiencing. With a client who is far from bodily felt meaning, the therapist must listen even harder for the metaphorical aspect of the client's words--the words which point to inner experiencing.

The transcript with Sally starts with a good, strong felt referent. The rest of the session was used to articulate the meanings implicit in this felt sense of a problem. There are many instances of the kind of felt shifts in inner experiencing which make up personality change.

Much of the session with Phillip was spent just in consolidating a felt referent out of the many issues he verbalized. There are fewer major felt shifts, although there are several shifts in the cognitive frames used to symbolize his experiencing. These new symbols begin to interact with implicit meaning, allowing new insights to emerge. Four sessions later, there was a major felt shift, as the meanings implicit in his present way of being became immediately available for resymbolization. A small segment of this later session has been included.

The Therapist Recall Process

Reflections upon my own experiencing as therapist during the sessions were acquired by playing the tape of a session immediately after the session. I stopped the tape as often as I wanted and recalled my thoughts and feelings at the time.

The procedure is flawed in two ways. Firstly, the descriptions were given in retrospect rather than at the actual moment during the session and can be said to be affected by hindsight. However, I can say as the therapist that I felt quite caught up in the flow of the session when hearing it on tape and felt myself operating intuitively as I had been in the actual session. Often, I would suggest or predict a particular therapist approach upon hearing the tape and find myself taking it on the tape some moments later.

More importantly, the recall is an attempt to put into words felt meanings which, for the most part, were acted upon without being verbalized during the sessions themselves. After being formulated in words during recall, these "intuitions" have the look of thoughts that the therapist had at the time, leading the therapist's process to look more cognitive than it was in reality.

Because the transcripts give almost the complete session, rather than selecting out only the highlights or most exemplary passages ,readers may find their attention wandering, may feel bored, or may even find themselves feeling irritated with the client or therapist. Rather than seeing these simply as reactions to too long transcripts, I would like to suggest that such experiential reactions on the part of the reader are the parallel to the therapist's experiencing during the session. By attending to and making words for just such experiences in her own body, the therapist acquires one more source of knowledge about the client's way of being in the world. Often, when the therapist and reader are feeling

bored, it's because the client is going from topic to topic without touching upon deeper meanings. If the therapist can articulate her own feeling of boredom and interpret it to the client, the session may be enlivened. In the session with Phillip, I found myself irritated. Articulation of this feeling led me to become more aware of the way he was evading me and more active in bringing that to his attention. So I ask readers to give credence to the bodily felt meanings stirred in them by the transcripts and, through attempting to articulate these nuances, to have a first-hand experience of one aspect of the experiential therapist's work.

# CHAPTER FOUR

# THE INTERACTION OF EMOTION AND EXPERIENCING: THE SESSION WITH SALLY

List of People Mentioned in the Transcript

| Name | Role |
|---|---|
| Kathy | Therapist |
| Sally | Client |
| Will | Client's son, age ten |
| Roger | Client's first husband, Will's father, deceased ten years ago |
| Steve | Client's older male friend, recently deceased |
| Frank | Client's partner of three years |
| Terry | Client's partner's therapist |
| Linda | Woman friend of client's partner |

Background Information

Sally is forty years old, mother of a grade-school aged boy. At the time of the taping, I had been seeing Sally on a weekly basis for approximately thirty-six weeks (nine months). Prior to referral to me, Sally and her partner Frank had been seeing a colleague of mine for couples therapy for over a year. Sally was referred to me at a time of crisis in the relationship. The couple had decided to live separately and each work separately with a therapist for a six-week period. After that time period, they came back together and, while each continued in individual therapy, they were also seen as a couple by my colleague and myself as co-therapists.

A major issue for Sally was Frank's tendency to withdraw into himself for several days at a time. Sally reacted with fury at experiencing herself as cut-off from him and panic that he was going to leave the relationship. Although they had lived together for three years, Frank verbalized serious ambivalences about the relationship. In Sally's perception, he also frequently compared her unfavorably with other women. The six-week separation was brought on in part by Frank's desire to pursue a friendship with another woman, Linda. Sally believed that the friendship had sexual overtones and was a threat to their relationship.

Sally's family of origin consisted of mother, father, and a slightly younger sister. By Sally's report, her parents had isolated her as a punishment when she did not conform to their will. They would go for several days without speaking to her, acting as if she didn't exist.

In an earlier marriage, Sally had experienced symptoms of agoraphobia. She managed to overcome the symptoms, although the panic at being left alone remains. Sally's husband, Roger, died after a long illness ten years ago. A good number of therapy sessions had focused on grief for that death and the remaining fear that no love relationship could really last. At the time of the taping, Sally was also still working through the death of an older male friend, Steve, who had been killed in a car accident two months earlier.

Present Session:

After more than a year of work around the issues of distance/closeness and other women, Sally and Frank had negotiated some terms for being together and being apart and had learned skills for communicating around conflict. Although Frank still expressed ambivalences about the relationship, he had agreed not to see other women. However, in the week before the present session, old issues had been stirred up because Frank had received a letter from Linda, attempting to open up communication again. When Frank had indicated that he might want to see her as a friend, Sally had felt their relationship threatened.

Sally spent the first twenty minutes of the present session describing this event in detail. She reports that she and Frank had been able to work on their feelings openly at home and had come to a good resolution. She talks about how good it felt for them to be able to work the conflict through on their own and how much more solid the relationship feels than it did a year before. Since this part of the session is mainly the recounting of "news" rather than new therapeutic work, I did not include it. However, after recounting the good news, Sally turns to another incident which has upset her. Frank had announced that he was going to reduce his sessions of individual therapy from weekly to biweekly. Sally found herself very upset by the news. It is these feelings which she wishes to unravel in the present session, and it is here that the transcript begins (twenty minutes into a one-hour session). Experiencing Scale (EXP) ratings are given in the left hand margin (See Six for explanation).

I have felt a little anxious during the first twenty minutes of the session. I found myself scanning Sally's words, looking for something that was unresolved, a place of implicit meaning, the articulation of which would be the material for the session today. I decided to let her continue to tell the story, because the week before I had suggested that she had a tendency to overlook the positive things happening in the relationship. She is now reporting on a positive interaction. However, I would like to spend some of the session articulating the new. I have felt the need to intervene to bring us to a deeper level. For instance, I might say: "I think it's great that you noticed this good thing that happened between the two of you, and I'm glad to hear that the two of you handled it so well. That's a step forward. But I'm also wondering if you could tell me about the rest of the week?" or "Was there anything in the week that didn't work out so well?" or "Is there something that you need to work on today?", etc. However, as it turned out, Sally gives us the lead herself.

EXP

CL: But I'm thinking if I tell you what happened about his seeing Terry less, I can get into the feelings for me, because I don't know whether it was the Linda thing or seeing Terry less, but I remember saying that I felt very unprotected, and I said: "I don't know where to move with this, but I know Kathy will know!" (Therapist and client laugh)

2 (3 peak)

I feel relieved: "Here we go." Her words "I can get into the feelings for me" and "I felt very unprotected" and "I don't know where to move with this" indicate her awareness of a felt sense: a bodily felt experience that is without words, is confusing to her, and is blocking her action. Where with Phillip, I had to work very hard to create a felt sense, with Sally it is present in her own awareness.

CL: "I don't know how to be more protected about this, but she will know how." (laugh) And it was just a little bit of safety that somebody knew somewhere. So I waited up for him Monday, and he came in, and he told me that he decided to see Terry every other week. And it was a shock to me because the last time we talked about it, I offered to see you every other week and that would free up that much money, and he could be doing his work regularly. So,that, just like the logistics or the process I felt left out of, and I told him. I told him, I said, "I feel totally left out of what you've done. You could come home and say, you're changing jobs or you're going to graduate school or you're stopping therapy; I mean , short of leaving me, I see those as big time decisions because they're all real important." And he said, well, he wanted to have the time, and he and Terry worked it all out. It was a fine, I guess, therapeutic decision for him. He wanted to consolidate things and experiment with the stuff that he's learned. And I said, "This is so rare what you have there, and it's been so rare in your life, it would seem to me that it would be very important to really stay with it in a very regular way." He said, yeah, that was true, he could see that, it was an experiment, they both saw it as that.

2(3)

TH: Was it partly, though, that it made you feel scared--that somehow his seeing Terry insured that he would become more and more able to be "out" with you?

I'm afraid that she's going to continue at the level of recounting events, and I want us to work with felt meaning. She is talking about past feelings and not being aware of the feelings she is experiencing now. I want to direct her to check with her present, felt experiencing in relation to the situation.

She's telling the story angrily, but I also hear fear in her voice, panic, especially when she says "I feel totally left out." I intervene to bring her in contact with her present experiencing. I try to articulate some of the feeling that is implicit, guessing at felt meaning: "Was it partly, though, that it made you feel scared...?" If my guess is wrong, she will still have the opportunity to check with her bodily feel of the issue and to come up with more accurate words for what she is feeling. Either way, I will have succeeded in helping her to refer to her felt experiencing instead of repeating rigidly symbolized emotions.

CL: I said, I have a big stake. I'm ... heavy way on how you get your work done, how clearly you get to see things, how much of it gets healed. So
2(3) much of my life depends on what you do there." I mean, I could say why I was feeling so urgent. (urgency in voice)

She is still telling the story instead of exploring present felt experiencing. But she finds words for the feeling ("...feeling so urgent") instead of just emoting urgently.

CL: That was another chunk of it. Then he said--I said, "Alright then where is this work going to get done?," and he said, in the world, that what he had with Terry he's going to try, which is the goal anyway, to reproduce it and to take the risks that are necessary, to have nourishing and trusting relationships in the world.
2 And then there's the group Sunday. I said, "Okay, (pounds table), now I see." I said,"Okay. Men don't usually look for trusting nurturing relationships with other men so I assume this looking for nurturing and affection is going to be women that--" and I was really tempted to say "who understand you" but that was just so glib, I said, "that don't give you a hard time but are more this, less that, that whatever it is, I just see you going out and looking for it."

Here the issue of the "other women" emerges again. Now I see how the letter from Linda which occupied the first twenty minutes and Frank's decision about less therapy connect. They are both symbolizations from the same felt meaning. The issue about "other women" is related to "feeling left out," "feeling unprotected."

I do not impose a connection between the issues theoretically. I see that there is a connection because both issues call forth the sheen of tears that indicates a felt referent. I then try to figure out how they could be connected and look to see how the felt meaning emerges as the client continues to work between the symbols and the felt sense.

A strong, coherent felt sense is emerging in relation to the symbolizations. I ask myself, "Okay, what's going on here? What's in this being threatened? What's she afraid of? What do 'other women' mean to her? How is this connected to 'being on the outside?" I am also feeling some urgency to get into the felt meaning soon because so much of the ses-

sion has gone by, and we're just beginning to circle toward where the possibility of change resides. I am aware of the need to intervene actively, using focusing questions and reflections to point us toward the felt referent.

3 CL: I was getting really sunk, and I think I said that it felt like Karma to me.
TH: Like what?
2 CL: Karma. (pause) "There's no way you can do it...if it's not going to be, it just can't." So he said, he had tears in his eyes, he said what he wanted to do was look for the nurturing with me and Will in ways that he
3 hadn't permitted before. And I said, "Well, that made all the difference in the world to me." (pause) We stayed with it a while longer and neither one of us felt good about how and where the whole thing had come from. Oh, but he kept saying--it was really nice what he tried to do, though I couldn't do it. He kept saying "Well, let's see how it goes, and really let me know if you notice different things about me and we can just rethink it."
I said, "I really appreciate how you're drawing me in, but I feel like I'm genuinely...(tears in eyes)

Although she is still telling the story of past emotion, I'm aware of some thickness in her voice and a strained look in her face and the coming and going of a sheen of tears in her eyes. The tears let me know that she is circling around a felt sense, that there is feeling present <u>now</u> that could be directly referred to. I am still wondering about the felt meaning of all the emotionality.

CL: ...on the outside of this and to just move in, although it would feel very good, it's not real here, it's not
4 how it really happened."

The words "Feeling on the outside" symbolize a place of deep meaning for her. Her voice is breaking, and there are more tears in her eyes. My question to myself is still, "What's so hard for her about 'feeling on the outside'? What's the felt meaning of 'being on the outside'?" This is the meaning that needs to be articulated.

4 CL: "So what I think I'd better do," and these are feelings that probably I can work on,

She labels the implicit for us: "And these are feelings I probably can work on." She is aware that there is something preverbal that needs to be articulated.

4 CL: "I need to feel about where I am in this -- sometimes I just have no idea (tears in eyes) how I fit into your life when you throw these things at me," and he could really see it. I said, "I think I just better deal with what it means to be outside of this, (tears), and acknowledge that it's nice that you're trying to do something different."

I continue to see tears in her eyes and to hear a tremor in her voice, so again I know that the words she is saying call forth a powerful felt meaning. We need to stop the words and feel into the preverbal sensing connected to the tears so that new symbols can emerge directly from the preverbal.

CL: So I said, "I really think I'd better-- in other words, stay where I am, where my feelings are, without really holding onto them, and just see. (voice is getting quieter)

TH: And the feelings are around having a decision made without him sort of realizing that it affects you? It seems to me that that's the hardest part, like, "My god, why didn't he realize that this is a decision that affects both of us, that it affects my life what he does or doesn't do in therapy."

I thought she was going to focus down a moment ago, but she hasn't. She continues to skim the surface. I try to help her to focus upon the present experiencing by reflecting some possible meanings.

CL: Yeah, there was that whole part of it, but I got really stopped by respecting their relationship and how private and intimate and sacred that can be to the two people. I was really willing to acknowledge all the different pieces and I couldn't really make them all fit too well. So I said, "It's clear to me that I have very little information about this and why you did it and where it came from and ta da ta da; but I have a lot of feelings," and those I could say. So that...it's thick, though, between us. (tears in eyes, voice breaks)

4

TH: And that feels good?

CL: Yeah.

TH: Like you could struggle with anything as long as it feels thick between you.

CL: Yeah, really.

She points up the positive feeling she's beginning to experience in the relationship. I reflect it, getting the message that keeping the positive in view makes it safer for her to explore the negative feelings.

"Things being thick between them" and "being outside, being left out" both bring tears of meaning for her, and this leads me to look for a connection between them. I ask myself: "How could these be symbolizations of the same felt sense?" I realize that "things being thick" is the antithesis of "being outside."

CL: These are not easy things. They're not even different things than I've talked to you about before, (tearful), but I don't know (pause), a lot of them made me really sad, (tears in eyes), and I went to sleep that night. I mean, last week just really overwhelmed me, and I just really didn't want anymore, and this was Monday. And I went to sleep and I got this picture of Steve (client's older male friend who died in car accident two months before) this way that he might cheer me up or just flutter around me in this whimsical funny way, and it hurt so bad that I couldn't breathe, and I couldn't push him away either, and I figured maybe that's where Steve will fit for me. I'm going to have him in his comforting wonderful way.

4

She is still talking about the sadness as in the past, instead of focusing into the sadness as she is experiencing it right now.

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The above pages are an example of the difficulty in work with Sally. She has told me consistently that she needs to work on this feeling (felt meaning)...and this other feeling ...and this other feeling. She has gotten very close to exploring the experience of "being left out," but moved on to "things being thick" and on from there to sadness about Steve. Because each calls forth the felt sense strongly (brings tears to her eyes), I know that all of these things are connected. Eventually I could figure out a way of connecting them and interpret or reflect this connection to her. But I know that, interpretation or not, eventually she must sit with the wordless feeling quality under all of these areas until something new is articulated <u>from</u> <u>there</u>. It is my task as therapist to enable her to "focus" in this way.

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CL: **Maybe eventually that's how I'm going to be able to use him and always have him because there was this sense of just being very soothed by remembering a light, wonderful way that he had (tears, voice cracking).**

4

She touches on tears again, confirming that the issue of Steve's death is connected to the same issue.

TH: It's sort of like when I try to tell you to turn around and hug the little girl, it's like you use him in the same way.

CL: Well, I started to do that, and that's how it all happened. I got this vision of him, and at first it was so painful, I just wanted it to go away, and I couldn't make it go away.

TH: Then you let yourself feel nurtured by this image?

Here I attempt to set up an interaction between the image as symbol and the underlying felt meaning.

CL: Yeah, yeah, I said, "Oh, maybe that's what's going to happen with this." It was my first glimmer that he could do anything like that. You told me once you had wonderful comforting dreams, (about my sister who had died) and I said, "Oh how nice." (laugh)

TH: For me!

CL: Anybody that could do it. But I've never been able to do it.

TH: Will you just tell me briefly what was so horrible about your week, and then we can go back to the feelings?

I'm still looking for the meaning underlying all of the emotionality. Sally said early in the session that she was overwhelmed by her week. I'm wondering if there was something else that happened that contributed to everything being so emotion-laden. I'm not afraid of losing the felt sense. I have several powerful symbols ("other women," "being left outside," "feeling unprotected," "Steve dying") to use in calling it forth again.

CL: Will (client's son) got hurt...twice, and nothing was serious, but I didn't always know that. I got hurt really -- I tripped in a dark room and hurt my leg. It's still sore. It hurt so much I thought I was going to throw up. I couldn't move. There was a big

struggle with Frank (client's partner). There were... just having to get this letter in the mail... getting my period, just piles and piles of stuff.

TH: It made you feel like it would be very nice to have a nurturing person like Steve around?

I reflect a possible connection (felt meaning).

CL: (laugh) And he would have been there in the past. He felt wonderful being needed that way. That was how the hooks happened in a good way. But I got a call from school and they said that Will was hurt, and it was a few seconds before I heard that he was alright. In a game, a ball had ripped his fingernail backwards off; he was in a lot of pain and I should come and he should see a doctor. I said,, "Okay, could I talk to him." (tears in eyes)

2

Another issue that brings tears: her son getting hurt. I note it, wondering,"How is this another symbolization of the felt meaning we are trying to get to?"

CL: He got on the phone and there was this little small voice cause he was hurt again. He had gotten hurt in Karate a couple of days before. I said, "Okay, I'm going to call the doctor..." So he said, "Yes, bring him right away." And I just turned into this machine because all I knew was that Will was hurt and everything was automatic, and I poured everything into just easing things for him. And it was one, two, three, at the doctor's. He put on two pieces of tape and I said, "You went to medical school for that?" There was just this whole funny exchange, but Will, he got traumatized inside, and I really spent the rest of the day paying attention to that and being soft with him and making him something special. He got into his nightgown and got under his quilt, and he really was...you couldn't see the more important hurt as far as I was concerned and that's what he was saying too.

2

I hear her way of talking about her son as a possible metaphor for the way that the "small person" aspect of her feels. I will see if it makes sense to reflect that metaphor to her when I want to help her to feel nurturing toward the small, vulnerable, unprotected aspect of herself.

TH: That must have been tremendously painful.

CL; Yeah, and they said he was going to lose his nail. It
2 was all cracked, messy. He was like sweaty and cold and I guess he was basically very, very scared -- something that hurts so much. So when Frank came home, we just sort of cruised around each other a little while...and I told him what had happened. I said that it had been a hard day and he made some gesture, like, "So?", and I said, "Well, okay, I'm going to go see to Will." He really didn't like my tone of voice so he just went into the other room and was watching television. I was getting more and more upset. I
3 didn't know totally why, and I went in there and I said that it was really a bad thing for me that the television was that important always and so quickly... Why couldn't we have a little bit of time? He was angry at me because of what I said, and he wouldn't turn off the television, and I got more and more upset, and this went on for a long time. We really hated each other, and I got very angry, and he got very angry. He was screaming at me, which for him is unusual, so then I really got to what was bothering me.

TH: Which was?

CL: Which was, I had'nt realized how scared I get when a
4 telephone call comes and tells me something bad, and I was just dying and didn't know it.

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Here is another example of the difference between "emotion" and "felt meaning." At home she had a lot of emotion, she was very, very upset and angry, but neither she nor her partner knew what she was upset <u>about.</u> Finally, she asked herself a focusing question: "I'm noticing that I'm having a lot of emotion. What's that about?"

The focusing at home worked. She found the felt referent for the situation and was able to articulate it: "Oh, that's what it's about--I'm scared about what happened with my son because it reminds me of former hurts (especially the death of her husband)".

The following segment contains a good example of using interpretation experientially.

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I can hear from the thickness of her voice and her tears that there is more unarticulated . . . felt meaning around this issue of people being hurt or dying. This kind of feeling is very different from the upset, out-of-touch, sheer emotion that she had when she didn't know what she was upset about. I'm thinking that we can go back to this grieving in another session, that the work for today is more centrally focused upon "feeling left out," but I decide to check this out with the client when I get a chance.

CL: And I just... It was just...(tearful)
TH: Yes, it is very powerful because just when you were telling about it, I had all these tears too, and I was saying, "I know that Will is alright," and still I have all these tears because of the idea of him being so little and vulnerable and hurting.

Here, I'm validating the feeling for her. I'm saying, "Yes, feel it deeply. You're not a fool to be upset about it."

CL: Yeah. Yeah. He got his spirit back even before we got to the doctor. And so I was so involved with him and
4 supper and just extra things that I wasn't at all linking up where it went for me. You know how you can cry so hard it just goes off into a screech, and then you can't do it anymore-- I just was drenched. So that was...

TH: Do you want to do some more of that or do you think that's about fixed? About what would it mean if Will should be hurt?

I present an option to the client, and I let her decide. She's the one with immediate access to her inner process. I trust that she can check with her inner sensing and let me know where she needs to go. With a client who is less in touch with an implicit, bodily referent as a guide to what he needs to do (as with Phillip), I maysuggest more strongly: "I think you need to go here." But even so, if the client has a strong sense of needing to do something else, I will follow his lead at least for awhile. If I continue to feel that we are being led away from felt meaning, I will make my suggestion again.

CL: I think I got--I finally did get the attention which I hated him for withholding. I worked really hard, and
4 I think I cleaned out that...

The word "withholding" stands out for me: It doesn't jive with my sense of what was going on. He did not withhold--she never asked for what she needed. I'm feeling a need to point this incongruity out to her, but I must find a way of presenting my insight that will touch upon the felt meaning, rather than threatening her into defense. I struggle inside to find a way to point to the issue.

2 CL: ..But it's there. I disconnect my telephone at night, because I don't want to know anymore. Once it's disconnected, I can't be reached for any...and I started doing that after Roger died. I did not want to be connected to the world when it was dark, and that was the only way that I was going to be able to sleep. The only way I could rest.

TH: That you didn't want the possibility of that kind of shock...

3 CL: No, that's right...I couldn't bear it.

TH: And that's what phone calls in the middle of the night are always about.

CL: The next day we talked about how it was for both of us, and he said that he was really glad, finally that he
3 could be there for me. And I said that I felt okay about it, and I kept reminding myself that I made him very angry and that's where he was for a part of the time.

Here's an opening for my interpretation. She reminds herself that she made him angry. Since she's aware of this, she may be able to look at what she might have contributed to the situation. So I try my interpretation.

TH: You just said you were mad at him for withholding, but was that just part of you speaking--like, on the other hand, do you also know that you didn't ask for it? It wasn't like you had asked and he said "No," it was, like, he didn't understand what you were so grumpy about.

CL: Yeah, and also when I went in there with not really knowing why, he was already very angry, and he felt
2 that I had done something to him, and I mean, he held onto it, that's true.

TH: And it might have been nice if he had realized without your having to tell him that you would, of course, need some special attention after what happened with Will.

Here I'm trying to support her some, so that she can look at her conribution without becoming defensive and losing the balance she would need to examine herself. I do this by empathizing with the felt meaning that was symbolized in the maladaptive behavior.

CL: We got into all kinds of red herring, mean stuff, but
2 then it just fell away, and it was like letting go of it.

TH: It makes me think that we should watch and see if there is some pattern, something around the special meaning of Steve (older friend), a male maybe--maybe it doesn't matter, but let's just say a nurturing man, someone who will really come and let you be the little one and take care of you and that, when you need that from Frank... that it's real hard for you to ask for that, and that gets you into a mess.

Here I draw together the various places during the session that touch the felt sense, that bring tears. I give a global interpretation of how it might fit together: what she said about feeling unprotected in a situation with her partner and how that night she got into warm memories of this other man who had been very nurturing for her, and also what I learned from her way of responding to her son, seeing that as a symbolization of how she would also like to be taken care of in her vulnerable part. I make the interpretation in the context of empathizing with the felt meaning of the behavior to her. Again, the interpretation, the linkage, the felt meaning arises out of her process. I do not find it in a theoretical framework and impose it upon her experience, although my sensing of her <u>interacts with</u> and is articulated by my theoretical knowledge.

CL: Directly, maybe...
I didn't know where it had gone for me until I totally collapsed, and I'm usually more in touch, but I didn't know until I was so far gone that I couldn't speak and couldn't breath and there was just this writhing of a-
4 gony of what I was so afraid of, but just coped, you know, that's what you do when there's an emergency or there are things to be done. ...And I just wasn't wise enough to back track and pick it up.

I notice that she has side stepped my interpretation. I was trying to say to her, "You need to be more responsible," and she answers, "In this case I couldn't be. I just was out of touch." This sounds like a justification: "If I feel upset, I'm not exactly responsible for what I do."

TH: But at the point where, very early on, in the very early interchanges when he went in--you said something and he went in to watch T.V. You said something sharp or, what did you say?

So, I try again to have us look at her part in the interaction.

CL: I said something about the day, and he just made this
2 resigned gesture, like, and I took it to mean, "Oh, what are you complaining about, everybody has hard days. I had a terrible day, there's nothing to complain about and it won't do any good anyway, so what are you telling
3 me for?" So I said, "Well, I'm not going to get any sympathy here," and I left, and he felt like I slugged him. So that was... (pause).. so those kinds of big things took up a good part of the week, and then Thursday, here was more, and what I wanted to work on more
4 was the little girl and being wanted and feeling on the outside of somebody who's that important.

Again, she side steps. I sense a lot of defensiveness, unreadiness to hear my analysis. However, she tells me what the next step in her own process is. I hear that she will not be able to take in my interpretation (experienced as criticism) until some more time is spent with the felt meaning that is symbolized as the little girl who is feeling on the outside. I could keep pressing my interpretation, but her process is telling me it won't work. I note that I will have to come back to this spot another time. Now I must go with the next possible step for her. Again she labels exactly the felt referent that she needs to go into. Hopefully I now have enough metaphors to reflect to her that we'll be able to get directly in touch with the felt meaning.

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TH: You had said about wanting to respect his relationship with Terry, and I was worrying that you were bending over backwards a little bit to be understanding, and my definite feeling was, "No--it was wrong, he should have consulted you"; or that it showed some lack of togetherness-thinking on his part, which is the scary thing when you know that a man has that, that they don't quite in the same way as you think about the two of you as a unit or something.

CL: Yeah.

Here I'm trying to validate the legitimacy of her vulnerable feeling. I noticed that when she talked about it before, she talked herself out of the feeling by saying "Well, I have to be understanding of his contract with his therapist." So now I'm trying to go back and loosen up that symbolization which covers over the feeling and say, "Even though that's there too, your feeling was legitimate. You were on to something, this has happened before. We've talked about how your partner and men in general act more independently, and it hurts you because you tend to think of the two of you as a unit." I'm trying to legitimate the feeling so that the symbols which keep her from referring to it directly may be removed.

CL: Yes. I felt both ways, and I said both things 'cause I didn't know how they fit. No, the process was rotten. When I made the decision about here: I'd come to the point where I was going to talk to you about changing what we were doing, I let him know. I didn't ask for his approval or, but I let him know how I got to it, and was willing to hear. And it definitely had to do with things that concerned him. So he said he could see how he did it really badly, and he was genuinely sorry...

Here I'm being a little surprised and a little at a loss and frustrated because after saying she wants to work on the little girl and feeling outside, once again she has drifted away from the felt sense and back into the story. She's able to bring herself right up to the edge of the felt sense, but not able to go the extra step of quietly sensing into it and letting new symbols arise.

CL: I was remembering the time about graduate school that he called up and told me what he was thinking of doing and I just said, "I don't want to talk to you." The thing just seemed so off the wall.

TH: Is there a way that you would have wished that he would go back and remake the whole decision about therapy again? He only went so far as to say, "Well let's try it, and if you don't like it, we can go back and fix it." Would you have liked it if he had said, "Yeah, I did it wrong, let's start over again. Let's you and I talk about it, and then...?"

CL: No, the way I feel about that--Frank's got to do what he did, that it's done, and that particular thing is not repairable. We can learn something from it and do it differently the next time, or he can--it's almost like patterns in his brain haven't been eeked out, and they have to be dug, and I don't know how many times he'll have to do it and learn before those channels work.

TH: Could you just right now try to feel what all your feeling is about? It seems like almost this whole hour there have been tears right behind your talking, and I've been trying to figure out what they are and I haven't come up with it. It's like you're strained still with something.

So, I directly ask her to focus, I ask her to get the bodily feel (felt sense) for what all her emotion is about. I'm asking her to stop, to be silent for a moment, and to let the felt sense of the whole situation arise. It is this felt sense that we must work with directly.

CL: Well, (tears in eyes, voice cracking), I know the hard places for me are being left out because I am one step away from being not wanted...(voice fading)

She does pretty well. She speaks in the present tense for the first time, articulating words directly from present experiencing. She goes back to "feeling outside", gets the bodily feel, and a new step emerges: Why is it so hard to be left out of the decision? Because, for her, "being left out" is "one step away from being not wanted".

Something new has arisen. There has been a small felt shift. I can feel that there's some real anguish right on the verge, but again it's not releasing. She touches on it, then slips away again. We need to check the new words against the felt sense and see what other steps of articulation emerge.

TH: And so that's still very real for you?
CL: Absolutely real.
TH: Even though you talked it through in that situation...
CL: It's in its place. You know, it doesn't take over so much because the other stuff gets out and I can say, "This is the way this makes me feel, and I've been getting comforting stuff, (tearful, voice cracking) but you said, I remember because I wondered if you were right, that, whatever I got back, it was so sore that it probably wouldn't make any difference, and I think that's what you were saying, 'cause it doesn't, in the deepest possible way. In terms of functioning and being reasonable with somebody, and staying out and being loving, yeah, it does make a huge difference...but not for the little girl, I guess.
TH: So underneath it all there's still a very sore spot that got touched by that, and is still wounded and got opened up.

The "little girl" is a metaphor we have created in past sessions to refer to the place of unarticulated meanings. I use her own word, "sore", and I try to paint the strongest metaphor for the felt sense that I can. I call it a "sore spot." I point out that it's been really "wounded." It's an "open wounded gaping sore". I'm hoping with the power of that metaphor to help her to feel the pain instead of just touching on it.

CL: And I said that it was the same thing about Linda (the other woman), the same thing about things happening... ...Losing somebody that you love and not being able to protect (tearful, voice cracking) them or yourself from it (crying) (long pause) whether it's some accident or somebody deciding (crying) you know, saying they're not going to do this (relationship) anymore. (crying)

6

Her experiential process draws together all the different issues. She says, "This same raw hurting place is under all of the issues that I've talked about today. The issue about the other woman, the issue about being left out of the decision, and the issue about possibly losing my son through having him hurt.

Now she is getting deeper, I feel the quality of touching on very old pain. I feel relieved: "Now we're here." I also notice the deep focusing silences-- being with the preverbal, directly, until new symbols emerge from it. This is a different level of process than the sheer emotion that she had before: the anger, the panic, the upsetness.

TH: Can we stay with the deciding one maybe for awhile cause we've done the, having someone die, but it seems like it's a different case to think, the feeling that the person could just decide to stop loving you or could push you out of his life.

In the past, we've worked a lot on the situation where her husband died. Although there is more to work on there, I don't want to lose the chance to get back to the unarticulated felt meanings from childhood that are part of this felt sense. I think that's where the deepest kind of healing needs to go on. From what she has said about her family situation, I know there were some real decisions made on her parents' part to punish her by ignoring her. Now I see a

chance for her to re-experience the felt meanings around those situations and to symbolize this place around "being left out" newly. The husbands' death meant what it did to her partly because it was built on top of this child's view of being left. Painful as it is, it is still easier for her to deal with the husband's death than to go back to the vulnerable feelings of childhood.

6 CL: It's like a death to me. (tearful)

Here again the felt sense tells us that these things (the childhood and the husband's death) are related. I respect the connections as they arise from her felt experiencing. Notice the great difference in the "sure" quality of the connections that can be checked against a felt referent as compared with the tentative nature of the conclusions with Phillip.

TH: Uh huh. So maybe they are together.
CL: I think they're not too far apart for me, but we can
5 work on that part.
TH: It seemed the second one is more of what it was like in your family, that they would just decide not to love you anymore, decide to leave you on the outside, that there wasn't anything you could do.
CL: (long pause--crying) I don't know how other people de-
5 cide things. (crying)

My intuition is born out. There is the powerful, filled silence of change and healing as she sits in touch with the preverbal. There are deep tears, deep sighs of being in touch with old pain. She speaks in the present tense. New words are articulated directly out of the felt sense: "I don't know how other people decide things." People can just decide not to love her; she can't know the reasons, can't predict. It makes her anxious to be in her present relationship because

she feels she doesn't know how he decides, and he could decide to leave her any moment. That anxiety pushes her to pressure him, which might actully lead to his leaving. We can only diminish that anxiety by exploring its roots in the realistic helplessness of childhood and resymbolizing the experiencing presently symbolized in the anxiety.

CL: (crying--pause) I really I...(pause) Frank has a hard time distinguishing between what's bad and what's hard (about the relationship). I see clearly what's good, and I see what's hard as projects, and so I get so hopeless because of this bad stuff that just piles up for him, and he can't see the rest (tearful).

Again, the connection between the present situation with her partner and her own past history with her family emerges from her felt sense. In the family, she didn't know what would make them decide to love her or stop loving her-- it was totally out of her control, and that's what she's afraid of in this present relationship, too. She thinks that her partner has a different way than she has of deciding whether to stay in the relationship or not. She will stay no matter how hard it is as long as they're working on the hard places-- she'll stay forever. But she's afraid that it works differently for him, that the negative things pile up in such a way that one day he's going to announce that he's decided not to be with her anymore, that the relationship is over. This fear has always underlain the present relationship. Hopefully, she will become able to symbolize the present situation freshly, as different from the past with her parents.

I've also tried to assess whether I think that Frank is able to make a committment which I think she has overlooked. This has suggested that there are rigid symbolizations operating to distort her experiencing of the present situation. However, her partner also verbalizes ambivalence often, say-

ing that he's not sure this is the right relationship, that it's too hard, that he finds himself looking at other women, etc. That's really all that's needed to throw her back into her own fears. So both things are present-- ambiguity in the present relationship, but also the symbolizations from her own past history leading her to interpret very stongly in one direction, perhaps more strongly than is realistic.

TH: That the feeling is "I just don't understand how other people decide," and it makes you always tenuous, like, since you don't understand how Frank decides, it leaves you vulnerable to him coming home someday, and saying, "I've decided to put you out of my life?"

I reflect her words in an attempt to further the articulation of the felt sense. If she can check these words against the felt referent, more new steps of symbolization may emerge. Again the connections are arising from her own process, "insight" born of new symbolization of the implicit.

CL: It's that he'll decide not seeing the whole picture (voice cracking) because he has all these filters. Although he did say that this is more important to him now that it was before. The implication was that he's not as likely to make stupid blunders. His values are getting clearer. (voice cracking, tearful)

2 (5 in context)

TH: Can you go back to that really sore spot, now we're getting farther away. Just go to that rawness if you can. You don't even have to have words if you can just feel that fear of being left out or losing people, just being cut out of their lives or cut off from them and not having any control over that, not being able to protect them or yourself.

She slides toward telling the story in past tense, words she has thought before. I actively ask her to check with the felt referent and to let the words come from there. I reflect

the new symbols so that they can interact with the felt referent. I expect further steps to emerge from the implicit when we interact these new symbols with it. This is the process of change.

CL: (sobbing, long pause)

There are the deep tears of transformation, touching upon and being with a very deep felt meaning that has been rigidly symbolized and left implicit since childhood. It needs to be re-explored and made explicit so it won't make its appearance in uncontrolled ways in her present life.

CL: (long pause--crying) (very long pause for crying)
TH: Can you find any words for that that are from a little child's place? You just look like a child in pain.
CL: Uh, (slight chuckle).

Again, I'm trying to get the articulation to come directly out of the inarticulate experiencing. I use the metaphor of "a little child" to help her find that aspect of her experiencing. There must be a back and forth between being in touch with the implicit felt meaning and trying to symbolize it.

CL: It has to do with losing people and it has to do with being lost myself.

Her words are being created in the present moment as new articulations of implicit meaning.

TH: Being lost yourself?
CL: It seems to be two sides of it--one of losing people
5 that I love and the other side of it is what it feels like to be lost and not wanted by people.
TH: To be lost to people that you care about, that they're still alive, but they have forgotten you...or put you out and thats a horrible feeling?

The connections arise out her own process, as articulation of felt meaning, not intellectual but experiential insight. These are words for the crux of the issue, for both sides of it, for how people dying fits together with people deciding not to care about her anymore. It's a double fear. At any point, she could lose someone that she cares about through death. On the other hand, at any point, she could become lost to them. They could decide not to see her anymore,not to know her anymore. I reflect the new symbols so that she can check them against the felt meaning and see what else emerges. It was not until much later sessions that we were able to answer the question: "What's so bad about that?" and get to the fear under the fear: an agoraphobic terror of what it feels like to suddenly be left alone.

CL: I always--when we'd travel or we would do anything, I always thought--they were my parents and my sister, I always thought of them as three and me. My sister has said, (laughs), that she thought of it in totally other way, that she never felt connected to them (laughing). I said, "No, it was you and them," "Oh no, it was you and them." (laughing)

5(in context)

She's much lighter, there's been a release of energy. We both feel it. Lots of new symbolizations are arising after the direct reference to the implicit new connections of past and present. More new memories emerge (Gendlin's "global application"). We start to articulate that childhood exper-

iencing some more. The memories follow upon the felt shift. There's a real bodily change going on, a resymbolization. She'll be somewhat different in relation to these issues in the future.

CL: I was always,--I remember they would sit in the front of the car and I would always sit in the back so I talked to my reflection in the glass, (laughs)...ugh...and that must be a very lonely isolated place to be. I really took that as meaning something very deep that I always was in the back by myself. So feeling left out and cut off and pushed away--those are very hard things.

Again I hear a powerful metaphor for felt experiencing.

TH: That seems almost worse than having someone die.
CL: Because there's the possibility...
TH: So much more meaning--it's like they're doing it on purpose. That's what hurts about it, to think they are consciously deciding to push you out of thier lives.
CL: Or even unconsciously, but when people are around who do it, there's always the possibility that the next moment they will love you. That must be what battered kids--you know how they keep loving their parents because they think if they get through this, the next instant...

These are all very powerful symbols ("reflection in window", "isolated, alone";"battered children hoping things will get better") for the felt referent. I will store them and use them when I need to help her get back in touch with the felt sense in the future.

TH: Can you feel that feeling, that there's always the chance that maybe they'll love you?

I ask her to focus on the felt meaning that is implicit in the metaphors.

CL: (laughing) I don't want to. (laughing)
TH: (laughing) What a grim little feeling to go around with!
CL: That's why it's so different when Frank is around, you know, and in one of his withdrawn places, or if he's at work, you know. I mean that's how it used to be those beginning years when he was around and just totally remote like on some ice cap, and I figured if I could just get through this, any minute he could be warm and loving. It amazes me how far people will go.
Those were some of the hardest times in my life I think, waiting for things like that to change. (pause, crying)

Connections between her childhood experiences and her present relationship arise as new articulations of her experiencing. These are insights arising from experiencing, not intellectual "guesses".

CL: That's why I've tried to do it so differently with Will. A couple of nights ago, I was cleaning up after supper or something, and he said, "You know, I think I just need to be a little closer. I feel like we're too separate" (laughing), and you know we had been doing separate things, and for weeks it won't matter. I said, "Okay, what do you need?" He said, "I just need a hug and just to be a little closer."
TH: Just that he can feel free to say that and can even verbalize it in that way shows that you've indicated to him that closeness is something that's okay and that one can expect it.
CL: And what a wonderful thing, you know, (voice cracking) to be able to walk up to somebody and say, "I need to be closer," and they say, "Oh terrific. I'll be closer then,"--Can you imagine? (Laughs, sighs)
TH: Can you imagine what that would have been like in your situation?

Here's a good example of how everything that a person generates can be used as a symbolization of his/her inner experiencing. The client's way fo being with her son is a metaphor for felt meaning.

I ask her to focus directly upon the experiencing implicit in the metaphor.

6 CL: (laughs) I'd feel like it was a miracle (crying, pause)
TH: But in your case, you felt that way-- "I need to be closer" and there wasn't anything you could do except wait for them to change.

I reflect the symbols to her so that she can refer to her felt experiencing again and perhaps have some further articulation arise.

CL: It was so hostile and so cold and so punitive--that's
6 what I remember. (crying) It comes from such terrible places. (crying--pause) I just see this mouth just shouting and judging and judging and shouting.
TH: That was your mother?
CL: (nods) (crying-pause)

We've succeeded in getting back in touch with felt experiencing. Another new step emerges-- a direct connection to an image of her mother judging her.

TH: And there wasn't anywhere to go for warmth?
2 CL: My uncle _____. He was very erratic. Sometimes we saw him once or twice a year.
TH: That's not much warmth!
CL: But I don't know any other place. (sighs, long pause) I'm really glad I came out (laughs) being able to do what I can do. You know, having it and being able to give it away. (pause) And seeing how different it can be for somebody else when they get it (voice cracking). I was really determined that I would never do that to anybody, and that it would be different for Will. (pause)
6-7?

TH: Do you have a sense of whether that place in you can ever be healed or what it would take to ever heal it?

The session is almost over. I want to draw things together in a forward-moving, positive way. I ask her a focusing question: "What would make this all okay?"

6
CL: I think to be with somebody (voice cracking) for a long time, and just to--be safer-- I don't think it would take it away, but I think it would probably make it as good for me as it could be, and I'll make my peace with it, you know.
TH: Does it feel like that's what Steve (older friend) did for you, symbolically?

Again, I draw together different things from the session on the assumption that they all touch on the same issue. In this case, it's the opposite side of the coin: tears around the way it feels when she does get some nurturing and consistent connection that she missed in her childhood. It's a further elaboration of the same felt meaning and a strenthening of new symbolizations.

4
CL: He was constant (pause) I can hear him (crying-pause)
TH: Hear him say what?
CL: I could just pick up the telephone, and I can hear every inflection. (laughs, cries, sighs)
I'm starting to believe that in some ways I can still have him.
TH: But it was , like, with him, there was always instant warmth as soon as you made touch with him? He didn't come and go like Frank?

Here I'm trying to consolidate new symbolizations. Steve was an older man who had been a father figure/nurturing friend and who was killed in an accident just a few months before.

His death had very deep meanings for the client (there were lots of tears around it). I've been trying to find what he symbolized for her, to further articulate the meaning of his death. Here we're getting more information-- his dying was so important because he was one of very few people who fed that deeply sore and wounded place around not being connected and nurtured.

CL: Once or twice I sensed that there was something. I asked him but we got it worked out.

3 I found out recently that when Frank and I were separated and I was staying with Steve, and Frank called him just to find out how I was and what I was thinking. And Steve said, really, to leave me alone and if we were going to do something, we could do it in a few months as well and that he really should leave me alone. When I was staying with Steve a little bit, and he said, he was saying, my understanding was that I really wasn't going to see Frank again and Steve would say different things and I couldn't understand why he was--like either he wasn't hearing me and that was the reason. I just found out a little while ago.

TH: Because he had talked with Frank and knew that Frank was still wanting to be with you?

CL: Yeah. And Frank tried to reach another friend, and I said, "Well why did you decide to do something different than what he said," and he said that he was really too

4 scared, that if I had enough time by myself that I really would never do it again, and that's probably true. Once I found safety in another place, it was less likely that I would be exposed all over to him. It was interesting to find that out. (voice getting softer-- sighing) (pause)

TH: I can see comically why you and Frank are together.

I know the time is almost up. I want to help her move away from deep feelings and back to the present before she leaves, so I move to a more conversational tone.

CL: (laughs) I can't either.
TH: You can't?
CL: No. I don't know. It seems like it happened and the connections are there now, and it's too late in a way. It's really hard.

TH: You heard me to say that I can see it, not that I can't?
CL: Oh. I know that I feel basically better about it than I have. If it works out well (laughs) and I'll be able to look back and say, "Oh, I can see why we did all that, but if it doesn't work out, I just won't know." (laugh)
TH: Or you'll say, "I wish I had landed and gotten connected to someone else and never had to go through it." Can I tell you why I think?--
JP: Yeah.
TH: It's only one theory of why people are together. It's not the only one, but within that theory it stood out quite clearly. Just you have this horrible place to work out about being connected and being pushed away, and Frank having his own side of that which has to do with needing to push away or being scared around wanting to be closer or whatever. If you see your life as that you have to work those things out sooner or later, what better place to be than where you have to work on it consistently? (laughs)

Here I use one theory of relationships (not the only one that I find useful) because I think it provides symbols that might interact with her experiencing in a useful way.)

CL: (laughing) That is such a sadistic philosophy!
TH: But it also makes sense in a way if there's this place that has to grow, that it has to get something to touch it or else it'll just sit there ungrown.
CL: I guess the grass always looks greener. I wanted to tell you, though, we're doing really funny things together. I don't know-- we have funny good times. It's softer and it's more open. (pause) It's not always glib, superficial funny. It's like warmer, connected, "we know each other so well " sort of funny. I just really like that.
TH: I like what you said way at the beginning that you and Frank have hard places that you go through, but you're just deciding that you both like each other. I can't

remember exactly how you said it. It had something to do with just deciding that you still like each other, and I thought, "Yes that's the difference." Even though you still have hard places, you get to this place where you know that you like each other.

6 CL: Yeah, it's really true.

TH: It's a different kind of base to be working from.

6 CL: Yeah. It's really true.

TH: I feel glad for that. I also think that we did really well today to just sit with that real painful raw place.

CL: I guess that's what I should keep doing. I don't like it, but I'm seeing that, when hard things happen, I can handle them to a certain point and then that gets hit, and that's what makes a lot of complication for me. I agree.

6

Here's a good symbolization from her of the whole situation. Again, although it's a step, it's also a good example of how being able to "interpret" the problem to oneself doesn't make it go away.

TH: And that somehow when you're sitting there, just having the tears from that place, I can feel that healing is going on. I can't exactly say why, but I know that that's right to just be sitting there and letting those...it's a certain kind of tears. It has lots of sighs. I don't know. I can't exactly describe it, but is feels like very deep, and like something is healing.

Here again I validate feeling.

# CHAPTER FIVE

# THE INTERACTION OF COGNITION AND EXPERIENCING: THE SESSION WITH PHILLIP

List of People Mentioned in the Transcript

| Name | Role |
|---|---|
| Kathy | Therapist |
| Phillip | Client |
| Mindy | Client's woman friend |

*****

Phillip is a forty year old male who works as a mental health aide.

He received a college degree at age 26, held several jobs in college administration, but has also spent a number of years bouncing between interesting, alternative jobs and the relative freedom of living on unemployment and travelling a good deal. He came into therapy because of an emotional crisis compounded of his fortieth birthday, and rejection by a lover for his lack of career direction and ambition. His father had had a nervous breakdown shortly after the father's own fortieth birthday. The transcribed interview is approximately the 25th interview in a once-weekly schedule of psychotherapy.

The therapy has focused upon Phillip's lack of motivation, his inability to finish things, the impossibility of deciding what he wants to do. Several times we have decided upon a particular career direction. The client has set out to actualize it, only to lose his sureness that that's what he wants to do and to start mulling the problem over again. He has talked a lot about his fear of taking a risk, and how it reminds him of his father's fear of taking a risk and consequent staying with the same job for 25 years. The present session is a continuation of these explorations. Experiencing Scale(EXP) ratings are in the left-hand margin(See Chapter Six).

*****

| EXP Level | | |
|---|---|---|
| 2 | CL: | Um...let's see...About an hour ago I was talking to my friend Mindy and, I don't know, I've had this feeling that she thought there was like one major block and not a whole bunch of complicated things. I mean, I always feel that I'm right at the edge and, if I just go one little bit further, I'll be free. |

I hear the words, "one major block", "I'm right on the edge", and "if I could just get over it, I'd be free". I store them . They point to inner experiencing. Past work with this client has shown me that such pointing words are few and that I'll have to be the one to hold on to them. The client will soon lose himself in a welter of intellectual reasons for his feelings.

CL: I'm not sure what that little block is, but, really, sometimes it really frustrates me. Now, I've found there
3 are all sorts of reasons. Sometimes it's 'cause I'm tired like I said last time, and sometimes 'cause, because maybe I went out and spent a lot of money on something that I shouldn't have. I mostly have this feeling of being trapped.

"The block....frustrates me", and " I have this feeling of being trapped" are other words for unarticulated felt meaning, so I hold on to them as well. I don't feel that the client is close enough to being able to experience the felt meaning for me to use the metaphors effectively now: there is no sign of tears, no sentience connected to the words. I will wait until we have called forth some sentience through focusing.

TH: Are you saying that Mindy was agreeing with you, that...
2 CL: Well, she was putting it in a succinct sort of way.
TH: And she said...
CL: That there was one little block and it seemed that she
2 had a feeling if I could only just get over it or get past that or through it or whatever and...
TH: And what did you just say that you think the block is? You just said one word.

I am frustrated in my attempts to slow him down and to create an interaction between symbols and felt experiencing through reflection. He doesn't allow me to finish my sentences.

I am getting lost; I'm already having

trouble remembering the words that would lead to the implicit. I am not usually given to such lapses. It happens here in interaction with his tendency to go from onefeeling to another.

CL: Well, I always thought, I mean for a while I thought that there's a threshold, it's almost maybe a threshold of believing or not believing. It's like somebody once said
2 to me, "Have faith." I have no faith, I mean, and that's, that's true, I mean, I think of that a lot of times when I'm doing stuff: "You have no faith." Now if I'm early and I'm waiting for someone, if they're going to be late, something's going to happen, they're not going to show up or if I have arranged a meeting with somebody or a date or something, I always think they're not going to make it.
3? It's going to be called off. It's going to somehow be taken away.

I'm feeling confused. The areas of felt meaning I had hold of are slipping away from me. I ask him to check with his implicit sensing to find a word. He does not refer to such a felt referent, but comes up with a totally different issue- a real one, but still one more in a chain that is not going any deeper. I grasp at straws.

TH: Can you remember just after you described about Mindy, then you said,"And I've always thought that it's ..." You said just one word.
2 CL: I thought I said threshold.
TH: Failure? Fear?
CL: No, I think it's fear, it may have been, of course that
2 was something else, but I don't think I...I don't know what it was.

So here we are, guessing. He is unable to check with his bodily experiencing. I have the feeling that almost any words will do. We go from topic to topic.

TH: Maybe we could play it back. (laugh)

CL: Fear is a real thing. I was talking to one of the nurses I work with the other night about fear. I mean, fear of sticking my neck out. Fear of becoming, you know, quitting my job. And she's somebody I've worked with and talked to a lot about stuff, and we have a lot of similar anxieties. And she said, "I think you should leave here. I don't think you should stay at this hospital. I don't think you should stay working here at all." And I agree with her. I couldn't agree more, but I'm afraid. And so I set myself up. You know, I say, "Well, you can't leave until you get out of debt." And what happens? I go like a junkie and buy books and get myself more in debt. Not that I'm charging books any more, but I'm not using the money from not buying books to pay off the debts.

I'm losing the thread. He has changed the subject again. If I can't succeed in holding on to one place of felt meaning and taking him back to go into it more deeply, we will both be lost in a sea of issues, each mentioned superficially, none newly articulated.

I also hear the phrase, "fear of sticking my neck out." It sounds like it could be important, except we've talked about that a lot in the past, and it hasn't really allowed the felt meaning to open. So I hold onto it, but I'm not following it as strongly as some of the earlier metaphors about there "being a block", and "being on the edge".

TH: But you don't know where you would want to go if you left anyway.

CL: To go to work? Well...

TH: Where you want to go with your life if you left the hospital.

Here I try to break out of the wandering by intervening strongly, trying to shock him back to reality. I don't want him to squirm away from the dilemma. I'm reminding him that it's not the job. The problem is more about knowing what he wants to do or wanting to do anything at all. So I'm trying to keep the finger on that living place of stuckness.

2 CL: Oh, don't put it like that. I mean, there are people that live at H_____. Both staff and patients that were there forever.

TH: I didn't mean it exactly like that, but, if you left H____, what would you do? You don't have a big drive toward anything that you want to do.

CL: I know, and I don't know how to get one. Like I could get really behind going to school and getting a certificate in Family Therapy, and then I also think I could get behind going and getting a degree in Law. And I'm to the point where, at this point I think, I mean, I really think I could do well in school right now. I really think I would be interested in sitting down and reading stuff just because I take textbooks to work and sit and read them. I cannot stay awake to read a novel, but I can stay awake to read a textbook.

2

My feeling here is, "Oh, we've been through this before"., this whole thing about what career he's going to follow and where he's going to go. Would he like to get a law degree, or would he like to get such and such, and we've pursued one after the other and none of them have happened. I don't want to get caught up in a conversation about which career he should pursue. I want to stick with the issue: <u>that there is a block that keeps him from pursuing anything</u>. I want us to get through that block.

From the very beginning of the session I've been keeping the words "there's a block", and "I'm on the edge." I've wanted to ask him to focus on the block. It's out of this preverbal feeling that something new could be articulated. I've been waiting until I had enough metaphorical statements from him to help me paint the picture of that feeling. Then I can ask him to focus.

3 CL: Maybe it's because I don't have to. Umm...Right now I feel myself tightening up because I'm facing this issue, and I want to say, "What difference does it make?" But I can't do that because I know what difference it makes.

Here I may have missed a chance. I could have asked him to focus upon the "tightening up" feeling, to ask himself "what difference does it make? " The "tightening up" is the first thing he has experienced in his body and could have led to the articulation of something new.

CL: One of my patients was saying that she didn't want to go to another hospital. She didn't want to go to a halfway house. She was going to go home. And I said, "You know what's going to happen if you go home." What's going to happen is she's going to go out and get high and be right back into drugs. And I heard myself saying. "Yah, well, you can make it the way you want it. You, know, you don't have to do that. That's a lot of bullshit."

So I'm storing those words too, the words that he said to his patient, which are something like "things are the way that you make them", and then she said, "Well, that's just the way it is." Those words also seem like symbols for the way he lives in his body, the way that he's stuck; some sense of resignation, of "that's the way it is". I may use the symbols to enable him to experience that resignation and to get in touch with the felt experiencing that is symbolized in it.

TH: That as long as you believe that's the way it is...
CL: Right. And here I am telling her this, and thinking to myself, "Why don't you practice what you preach?"(laughter) And I do sometimes...And I have this feeling. The reason I brought this up with Mindy today is because I said to her that I felt that I build up distractions from my major purpose. I know I get all these things that enrich my life, to make my life quite pleasant, while meanwhile not progressing toward any goals at all. I mean, I've enjoyed the last two months, even though, you know, I've not been achieving things I want to achieve. Um, it's not terrible. I mean, the last two years working nights haven't been, that's been bad, but I haven't exactly been wretched the whole time.

I hear his voice tone behind the words. Even when he's saying "it's not terrible" and "I haven't been wretched", there is a lackadaisical quality to his talking. It's not happy and fresh. It's sort of bored, stuck , the voice of somebody who's not going anywhere. As he says, it's not miserable but it's certainly not great either. At some point I want to reflect that voice tone back to him to see if he can experience that lackadaisical, non-hopeful, resigned, stuck way of being. The felt meanings beneath it need to be reexperienced, carried forward, resymbolized.

CL: And I sort of have this feeling that I almost want to reduce my life to going to work, coming home, going to sleep, and
2 maybe doing some exercise on my own, alone, but never making plans to do anything. Maybe doing things spontaneously. But I sort of have this urge to cut myself off completely from everything except what is the bare, barely necessary,and see how long I can stand it.

TH: Why do you want to do that? So you'll concentrate on...

CL: So I can focus on something. It's like...maybe if I were, I mean, I used to think if I were, if I could only lie in bed
2 for three days, I'd get so sick of it that I would get a burst of energy and go do something, but I can never find the three days to do that. It doesn't really work that way, you know.

TH: I'm thinking, I'd like you to try something if you would.

Here he gives me an in. He is telling me that he wants to focus on something. I can ask him to focus right now.

CL: UH huh.

TH: Partly I'm thinking, well...the special problem is that you're forty and having to figure out what to do.

CL: Uh hmmm.

TH: And it came to me to have you try to, that the question is, what was in the way in the earlier years? Like, if you could focus on that. Like, don't try to answer from your head, but, instead of our staying focused on "Now that you're forty, how are you going to get your life together?", it seems that we need to get in touch with Mindy and you agreeing that there's a block. That if we put it in the context of...

I begin some focusing instructions: "What was in the way in the early years?...focus on that...don't try to answer from your head... ". Directing him to the past was an intuitive leap. Although I did not articulate reasons for the intuition at the time, I have tried to piece it together in retrospect. Somehow it seemed ironical to be sitting with a 40-year-old having the content of the conversation be, "Oh, I just can't decide what career to follow", as though we were in career counseling with a nineteen-year-old. I needed that to be pointed at. Career counseling really isn't the problem for him at forty years old. He needs to reexperience what blocked him when it would have been the right time to get moving in choosing things. So I ask him to go to that time. If he were a person who has an easier time turning to the implicit, I could have just said, "Can you focus on the block? ".

2 CL: I've thought a lot about this.
TH: ...when you would have been first making your decision to get into a career.
2 CL: I've thought a lot about this, where these things come from.

He has answered much too quickly. Focusing needs <u>at least</u> three seconds of absolute silence. I'm saying to myself, "I don't think he's focused. I'm going to have to go back and try this again. " An answer that comes this quickly is likely to be something that he's thought before, rigid symbols.

TH: But can you feel it? I want you to answer, you can tell me your thoughts later. Right now can you just try to go back to first being in college and not doing it, dropping out or not doing it, just try to see if you can sense in your body, like in your stomach or somewhere, a big knot, a blockage, not being...

I continue with focusing instructions. I try to get him to stop the thoughts and stay longer in silence, waiting for a felt referent to form. I point him toward his body, a location other than his head where he must turn his awareness

to find a felt referent. I also try to make a metaphor, to paint as richly as I can the quality of being in college. I'm hoping these new symbols will call forth a felt sense, the preverbal experiencing of that situation.

2 CL: I mean, it must have been this thing that kept me from getting good grades.

Again he answers immediately,guessing: "It must have been..." Again I know that the focusing couldn't have happened that quickly, that it needs silence. I'll have to try to bring him down again.

TH: Do you have a sense of what that was?

He's answered from his head; I say, "Do you have a sense of what that was?", again trying to point toward the implicit, the felt sense behind the words, the preverbal experiencing.

2 CL: No.
TH: I guess I'm thinking, remembering that your brother was, has always been real successful...

He thwarts me, so I try another tactic. I try out an interpretation or an intuition: "Maybe it has to do with your brother, that he was always very successful, some kind of competition with him." I'm again trying to make a metaphor: "Does it bring up more of a sense of the stuck feeling if I mention your brother? Does that help you get a bodily grasp of what it felt like to be in that situation?"

1(2 in context) CL: Yeah, but he was pretty young. I mean, when I was, when I was eighteen, graduating from high school, he was twelve. No, he was ten.
TH: Oh, so he didn't, it's not like you were comparing...
2 CL: No. I don't think it was a competitive thing.

TH: Can you try to remember back to not getting good grades in college and think what was going on? Like, were you rebelling against your father and mother or something?

So that was a wrong guess. I try again to get him to refer to the felt sense, trying out another guess to see if it stirs anything. If a person can easily go to a felt referent, I guess less and simply ask him or her to check with the feeling and see what it's about. But when the person can't find a felt sense, I guess more, hoping I will hit upon some symbols that will call forth the felt meaning strongly enough that the person will be able to experience it.

Again when I say, "Can you remember back?", what I would really like him to do is focus, feel into that past. I'm thinking that the word "remember" might give him a better idea of how to go about finding the felt sense.

Looking at our interaction from the outside, this situation where I'm doing most of the work as a transference dynamic is already obvious. The issue comes to the fore later, as I become aware of my frustration and try to verbalize it.

2 CL: I thought about this a whole lot. I tried to really figure out why.

Already he answers immediately, and his use of the word "thought" and the past tense makes me say, "Yes, but thoughts, I don't want thoughts. This is going to be old things that you've thought before. And that's not the same as getting in touch with the felt sense of it, the way that it is in your body right now."

2 CL: Because I always hung around with people that got good grades. Um, I mean, most of my friends today were Dean's list, Summa Cum Laude types. Um, (pause) I really don't know. The time I got consistently good grades...

There is a slight pause, a first chance for the implicit to be experienced, but he goes on again. At least the focusing questions have forced the beginnings of a chance to check with the preverbal.

At this point, I give up on focusing for a while, and I allow him to go into a number of possible explanations for his problem: getting better grades when he had lots of money and didn't have to work; the problem of living at home; worry about people liking him. I listen for any clues to the present situation, but I am also gathering my forces: trying to figure out what was going on between us in the focusing interactions and how I can make another attempt at bringing us deeper. I have cut out approximately five minutes of transcript here.

(Five minutes later)

CL: Well, I mean, the place where I lived may have been filled with riff raff, and that's a good reason, but it's not a healthy situation or it's an unusual situation. And at W_____, I think I just didn't, I mean, I can remember talking to my professors and they would say things like, "Well, why didn't
2 you write that on the exam, why didn't you, you didn't say that ," and Dr. ____ said to me, "Get on the stick, Ned. You cannot afford to get C's and B's. Because when you get out of here, you're going to, in order to be happy, you'll have to go to graduate school because your brains will be frustrated as hell otherwise. It may be fine for your friend ____. He's not going to graduate school. He doesn't need to go to graduate school. He'll do just fine where he's going. But, gee," he said, "you're, you've got, you're a different temperament." And he was probably right. I had no, it's very convenient to say it's because I was living at home and everything was so like, you know, the same...

So here I see an in for me again. I hear feeling in his voice as he says the words of the professor. I seize on these words because they seem like a metaphor for the client's whole experience. The professor asked, "Why didn't you put that on the exam?" I hope that I can get the client to take that same question and use it as a focusing question to himself: "Yes, can you ask yourself, 'Why didn't I?', and see if you can get a feeling from that?" Borrowing the words of the professor, a situation where he has detailed memory as symbols, should help him get back the felt meaning that goes with the question.

2 CL: I mean, it wasn't until '63 that I moved out of the house.
TH: And why didn't you write the good things down on your exam? Like, when he asked that, what would be the answer?

Here I'm trying out my intuition that he might be able to get to the felt referent if he asks himself that as a focusing question now.

CL: Maybe I didn't think of that. I mean, I don't know...
2 My blue book exams were terrible.

Again he answers too immediately and starts out with a " maybe " instead of checking with the feeling. There is a slight moment of the implicit( "I don't know...pause ") as the question forces him to look inside, but again he goes on too soon. Here I will skip another few minutes of transcript where I have given up on focusing and returned to gathering information.

In the following portion of the session, there are classic examples of defenses, resistance, transference, and counter-transference. A theoretical understanding of these dynamics is important background information for any therapist. However, in what follows, I will stay away from psychoanalytic terms and analyses except as they were part of my experience in the moment as the therapist. In general, such theoretical grounding is far at the periphery of my consciousness, serving me well but not in the center of my attention. In the following portion of the transcript, experientially, I am more aware of happenings such as the following:

1) I am aware that a "sadness," and all the implicit meanings symbolized in it, is present in the room. I feel empathic in relation to this "sadness."

2) I am also aware of feeling frustrated, feeling angry in relation to another aspect of the client's behavior. I attend to this bodily experience of the interpersonal texture, trying to make words for it: "It's as if every time I ask him to do something, he slips away, he goes the other direction--a push and pull." I try to think of some way that I could convey this interpersonal dynamic to him such that he could experience the felt meaning implicit in this way of acting. I try to empathize with him and to imagine what could be going on for him that I would experience in this way: "Maybe it's that he can't find a feeling and he's afraid of being humiliated." If I can guess at the feeling implicit in the behavior instead of simply pointing to the behavior, I have a better chance of putting him in touch with the felt meaning so that we can articulate it. This is a goal beyound intellectual understanding of the interpretation.

3) He also tells me that he is feeling "defiant."

I am now holding on to these various felt senses, all areas of implicit meaning that could be explored. To help me hold on to them, I call them "places" or "things": the "sad"place, the "defiant"place, the"push and pull"thing. I could call them complexes and dynamics, but I find that these theoretical concepts carry their own weight of meaning. While they are useful for post hoc analysis, in the moment of doing therapy, these intellectual associations come in and cloud the sentiences that I am working with. I am much better off calling these preverbal sensings "things" or "places," marking them but not adding more definition than has emerged from them. It is this emergence of new meaning that I am after. Categorizing or classifying the felt senses can kill off the emergent quality, the implicit,that which is not yet known.

I can't do three things at once. So I go for one of them--whichever feels most likely to emerge first, or whichever I am able to verbalize or whichever the client's process insists on. I know that his process is resilient and self-directing:

it knows and will let me know what can come next. I know there is latitude for error. If I try the "wrong" one, the "right" one will come up insistently in his process. If we lose them all, there is the chance of refinding the felt senses through the symbols: the "sadness," the "defiance," the "push/pull." The felt senses are real and can be called forth again. They won't go away.

It is important to say that my feeling of "frustration" is not a shortcoming on my part as therapist. "Feeling frustrated" is my bodily experience of the interpersonal dynamic (symbols) he is creating between us. My bodily experience is often my first clue that something is going on between us. Such experiences on the part of the therapist are a problem only when the therapist is not aware of them and not able to focus upon them and to articulate them into a communication of the interpersonal dynamic. The therapist must also be able to distinguish between feelings aroused in interaction with the client's symbols and feelings that are imported into the situation from the therapist's own unresolved conflicts. It is the latter conflicts that therapists are responsible for bringing into consciousness through their own personal therapy.

2

(a few minutes later)

CL: I wrote the paper, and it was really poor. I mean, but I mean, the research is good research today. I mean, I still have the notes and everything, the references, and summaries of the articles, and I could probably go write the paper and have to go through twenty more years of research, of more research...

TH: So why was the paper poor? I mean, did you try? Can you remember really trying to write it, or...

Again I hear some feeling, some implicit meaning behind his words. I try to have him focus, guessing at what might have been going on experientially for a person in his situation.

CL: It was late .It was, I had gotten an incomplete by that
2 time. And I no longer cared. I don't know why I no longer cared. I don't know where my sense of pride was...

The intervention succeeds a little. He speaks more about inner experiencing, although in the past tense: "I no longer cared...I don't know where my sense of pride was..."

CL: Maybe my sense of pride had already been assuaged. I mean,
2 the reason I was interested in Oceanography is because I wanted to go to sea, and I did that.

TH: Before you handed the paper in?

CL: Oh yeah. Yeah, I went to work, but I was going around
2 spending hours in libraries. They let me use a desk all the time, and I could, I mean, in effect I was treated like a visiting scholar. But I never wrote the god damned paper.

Again I hear feeling in his voice. I also hear a contrast. As he speaks, he becomes animated about being treated like a visiting scholar, almost as though he thinks that he <u>was</u> a visiting scholar. Then he brings up the other side of the issue, which is that he never wrote the paper, and I hear real sorrow in his voice at this point.

TH: How come? Don't answer with a "maybe." Just try to sense, like down in your stomach somewhere, down deep...

Again I try to get him to focus, to go back to the felt sense. I feel very empathic toward him--in tune with his sadness. I'm trying to let us get a felt sense to work with so that we can articulate new symbols from it: "Why couldn't you write the paper? Can you go back there? Can you feel that in your body? What it feels like to be all excited and then not to write the paper?"

2 CL: I know it's there. I can know that it's there. It's that pattern...
TH: ...a big sadness?

He turns to more intellectual words ("that pattern"), but I reflect the feeling I am hearing, trying to keep us with the bodily feel.

2 CL: ...that pattern that happens over and over again.
TH: Just don't talk about it. Just try to feel it. Like I imagine the big sadness might be there as you try to think, it's just one example of the sadness in your life, as you try to think, "Why didn't I write that paper? What blocked it? What's in the way?"

I follow with more focusing instructions. I am feeling very warmly toward the client. I use the word "sadness" repeatedly, hoping it will call forth the feeling more clearly in him.

2 CL: I could have written it at sea if I had enough time. (pause) (long sigh) (pause)

My tenacious staying with the feeling is having some effect now. He is lowering into the sentience, the preverbal. There is a deep sigh and some pauses, signs that he's getting deeper into his bodily experiencing.

TH: Really try to feel it. Don't answer.
2 CL: I've got the answer, maybe. It ties into something I'm doing now...

Here again he's using thinking words: "I've got the answer," "Maybe." However, the present tense in his talking is an indication that he is beginning to create words freshly, from present experiencing. A felt sense of the issue is beginning to form and allows him to begin to experience ties between the past and the present.

CL: ...I was building a porch behind my father's house. I've already done it in my head, and this happens to me a lot. Once I've figured it out I don't want to go do it. It's
2 like, (pause) It may be like I can't practice an instrument very easily. But I mean, I can understand the music. I'll sit and listen to someone perform it, and I realize that I know exactly what I have to do to do it. But I won't, and it's (pause)

Several instances of the same problem arise, again indicating the presence of a felt sense in which the problem is implicit. The pauses, which we can infer are moments of direct reference to felt experiencing, continue. His words are fresher, present tense. He is making words for his experiencing as he feels it <u>now</u>, rather than producing symbols he has had before.

TH: And why is that? Don't answer from your head. You're looking for the block. It's just like you and your friend Mindy talked about. It's a block. It's like this (holds hands in front of stomach as if holding a rock), like a big blob down here.

Again, I give focusing instructions, emphasizing the need for looking for a bodily feel. I continue to feel very warmly toward him.

2 CL: Well maybe it's something as simple as discipline...
TH: You can't start out with "maybe..."

Here, I feel frustrated by his turn to guessing again.

2 CL: My mother always said it was discipline.
TH: ...anything that starts with "maybe" is more like thinking. I want you to see if you can feel the blocked place in your body.
2 CL: No. I can feel a tension in through here (points at upper chest) (pause) I can't paint a word picture of it.

As we finally almost reach feeling, powerful resistances (symbols) arise. I have fallen into the push/pull dynamic. This time when he said, 'No, I can't get the feeling,' he said it with quite a bit of strength quite quickly after I asked him to be quiet, and I thought, 'Oh, I'm pushing a little hard here. He's really having a hard time with my continuing to ask him to do this, so I need to be more gentle, or certainly take in what's happening between us.' I pay more attention to my own feeling of frustration, trying to get words or an image for it.

TH: Just sit quiet a little longer and see if you can, just ask yourself, just see if you can come in touch with the block. We all agree that there's some one small block in your life that, if you can get over it...now see if you can feel it as a block. The stuckness.

I am so intent on reaching this felt meaning that we are finally so close to that I walk right into his defiant behavior. I could have asked him to feel into the tension in his chest. The tension was a felt sense of whatever was getting in the way, and as a felt sense, could have been articulated. Instead I tried to get him to focus on the block again and ran smack into the resistance.

3 CL: I feel a kind of defiance.

Fortunately for the unaware therapist, the client's process can be trusted to have a direction, to insist on being heard. I ask him to focus on the block, but what comes up as more immediate is the defiant feeling.
Here he says, 'I feel a kind of defiance', in a defiant way with a defiant gesture toward me, and I say to myself, 'Oh, he's not just talking about the past. He's feeling some of that now, and we need to see what that is,' Although things are tense between us, I also feel relieved: 'A feeling at last!' We have created something at the implicit level that can be explored.

TH: What are the words for that?

I ask him to focus upon the felt meanings implicit in the defiance.

TH: (pause) Is that in relation to me?
2 CL: No. Well, maybe. It might come to that, 'cause you're making me do it.
TH: Right (laughs)

So here I'm thinking," Well, I can use this defiance in the present as the metaphor, as a way to call forth the felt meaning." If I can get him enough into the anger and annoyance in this present situation with me, the emotion as symbol may call forth the felt sense of all those past frustrating times where he was trying to do something and failing or when someone was trying to make him do things and he had to resist.

It doesn't matter to me whether he finds the bodily felt sense in relation to the present situation or whether he gets to it through a memory. The point is to help him get the felt sense so that something new can be articulated from the implicit. Various ways of symbolizing can be used to get there.

If my feeling of frustration persists, and, if I feel that it is a good metaphor for his way of being in the world, I can use it as the way to get back to the felt sense. I might be able to say, "Oh, I don't know if this happened with other people that tried to work with you on a project, but I find it very frustrating when every time I ask you to focus you immediately say that you won't do it ,"and then I would say, "Can you see what's under that or the feeling that goes with saying 'I'm not going to do what you tell me.'? Can you feel into that? In some way, that could be your block. Could you feel into that and see what comes?"

If I decide to interpret his resistance, I will want to wait for a moment when I feel that the felt sense symbolized in the resisting behavior is available to be experienced. I want to describe the resisting behavior and, at the same moment, to point him toward the felt experiencing symbolized in that behavior.

I want him to be able to separate himself from the symbol (the automatic way of acting/emoting) and to feel everything that is going on implicitly at the bodily level. If he can step out of the symbol (the frozen, "structure bound" behavior and emotion) and feel into the bodily implicit related to it, then we have the chance of articulating new, more adaptive symbolizations of that felt experiencing.

CL: And the other day, when M____ was teaching me to
2 play a scale on a piano, an organ actually. And there's a way you have to put your fingers on the keyboard, and you do it a certain way and you have to keep the rhythm, and I was rushing it, and it
3 was, like, I could feel all this annoyance and anger in me and yet I kept wanting to do it and... But it's kind of like not wanting to do it because somebody said to do it.

He connects the present feeling to other similar situations. The connection is implicit in the felt sense and can be articulated from it. He does a good job of labeling the conflict, although he turns to describing the feeling in a past situation instead of feeling it right now.

TH: I felt that a little, like I was trying to tell you to be quiet and I felt like you wouldn't be quiet for very long. Being quiet isn't that hard to do!

I try to communicate my experience of the interpersonal dynamic symbolized between us. I want to keep him in the present, where the defiant feeling is quite alive.

2 CL: Except if somebody wants you to and you don't want to. But I think that the question is, who was I saying "No" to? To my parents? Probably.

Here he backs away quite quickly from the possibility that this could be going on between us here and the concretely experienced feelings that would come with that awareness. When I first

brought it up he said, "Well maybe", or "It could come to that", which is certainly not the same as saying, "Yes, that's happening." Now, as I bring it up again as maybe happening between us here, he says, "But who was I saying 'No" to? My parents?" He goes back to the past to avoid the present feeling.

TH: But who are you saying "No" to right now? Like, in terms of, why would you want to say "No" in terms of being quiet and seeing if you can feel the block?

I want to keep the present feeling from being diffused. I bring him back to focus on the feeling of "defiance" as it is present <u>right now</u>.

CL: (Pause)
I don't know. (pause) Um...

The implicit is very close for a moment. There are no words, just pauses full of sentience. A felt sense is beginning to form.

CL: ...maybe, I mean, alot of it's myself. I mean,
2 with my father's porch. I didn't--he didn't ask me to build a porch. I said, I can help you fix that. And then I design this elaborate porch and overdesign it and talk to him about it, and get him all set up, and then I don't do it. And it's like my patient last night who's telling me, well, she's going to go out, and that's the way it is. What are you going to do about it? It's like having a tantrum. Maybe it's because my mother never let me have a tantrum when I was a little boy.

He has slipped away from a direct confrontation with the present situation. However, he is speaking more freshly and making connections between issues in a way which indicates the continual consolidation of a felt sense.

TH: But what's the feeling around not doing your dad's porch? Not finishing it?

Again, I try to turn him from "maybes" toward focusing on the implicit meaning symbolized in a specific situation.

CL: Well right now it's a fear that, why couldn't I make myself go do it? I really wanted to do it. It would be a wonderful thing for me to do it. It would be a wonderful thing for him for me to do it. And it will be a wonderful thing between he and I for me to do it. Plus it would be a nice thing to have it done, period. I mean, on so many levels it's good for me, because I've lost credibility with myself.

I notethe experential words "I've lost credibility with myself."

TH: But if someone tried to push you to do it, would you feel defiant?

CL: No. Yes. I've been offered a job putting up shelves at a shop on ____Street for ten dollars an hour, but I've made no move to do it.

I try to bring us back to the feeling of defiance and the conflict between us, but he seems far from being able to look at that directly. However, he's offering lots of good metaphors: his father's porch, the patient at the hospital who says, "Well, that's just the way that it is," not putting up shelves on _____ Street. These on top of the earlier ones: the oceanography paper that was never finished, the courses begun and failed. A felt sense is cohering.

It will not be enough to have an intellectual understanding of this repetitive pattern. He has that already. He can say, "I repeat this over and over in my life. I did it here, here, and here." He must come into contact with the felt experiencing symbolized in those repetitive situations and articulate new symbols from there.

TH: So can you try to feel it? What's the commonality in all those cases? Don't answer so quickly.

Again, I try to have him focus on the implicit meaning which is forming under all of these symbolizations.

1 CL: I'm not ready to answer.
TH: Okay, he's feeling defiant. "Don't tell me what to do." (laughs)

Unfortunately, I have engaged the resistance again , and I acknowledge that.

2 CL: I'm feeling terribly unable to get at the answer. I mean, I should be able to say, "Well, you're just being a spoiled brat, you're being petulant, you're being, you know, I don't know what the word is, um, (pause) regressive, withdrawing, something like that. Yeah. But so what, it still doesn't help me solve the problem.

Here the client acknowledges himself how useless an intellectual understanding of the problem is. I feel empathic toward him as he struggles with his inability to focus.

TH: One of my guesses about why you felt defiant was that, when I said be quiet and feel it, you really couldn't do it. You didn't find a feeling and so it set you up to fail or something. You had to keep trying to do it.
CL: Yeah.

I decide to make my interpretation of the resistant behavior now because he seems closer to experiencing the feelings symbolized in the situation. I try to point at the felt meanings implicit in the behavior.

CL: But that doesn't get back into the paper.(long pause) I mean I've made lists of things I have done. I mean
2 I wrote a paper on Thomas of Beckett, the other big thing in college, the other big paper I wrote that was really worth anything, and I did a tremendous amount of research. I actually got the paper together.
TH: And it was good?
CL: Yeah.
TH: A good paper? What did you...
CL: I got an A- in it. The reason I got an A-, and not a straight A, was because it was a week late. (pause)
2 And the professor if anything was a harder professor and plus he was a friend of mine, so he was bending over backwards to, like, grade me even harder.
TH: I want to ask you again to try to feel the feeling of not having done the paper, and know that you're going to feel defiant about me asking you to do it, so we'll have to work with that.

He has moved away from the intensity of feeling again. I attempt to move him back again, asking him to focus and hoping that we will be able to step around the defiance by acknowledging it. If that doesn't work, we can focus on the felt sense connected to the defiant behavior.

CL: Before we do it, did I make it clear just then that
2 I was trying to parallel why didn't I finish that paper and not the other one? I've done that a lot with things I've done.

TH: Yes, I hear that. Now, I would say, instead of getting freaked out if you don't immediately find the feeling and thinking that you're failing or you're looking stupid, to just trust that it takes a long time, quite a long time, for something to arise inside you.

2 CL: Don't forget that "long time" business.
TH: What do you mean? That makes a difference?
CL: Well, that's a real factor.
TH: If something takes a long time?
2 CL: I won't do it.
TH: It's hard for you to do it?
CL: It's like instant gratification.
TH: So even if you just have to sit here being quiet for a long time? That's not hard work.
CL: No, what I mean is, I'm going to go, I'm going to
2 sit here and be quiet, but I want to remember that issue about "takes a long time."

There is a feeling of anxious resistance all through this section before he is able to make another attempt at going quietly inside to focus.

TH: Okay. Okay. So take a couple of deep breaths first, just to get this part of you (gestures to torso) opened up.
(Pause, with sound of deep breathing)
And then ask again in just a real open-ended way, "What is the block that keeps me from doing what I want to do?"

2 CL: Should I ask that aloud?

TH: It doesn't matter. You don't have to say it out loud. See if you can get a sense of that whole stopped place inside, that place in your life that kept you from getting good grades in college.

CL: Sometimes, sometimes I get very angry and excited
4 and noisy and I mean crying about this. It's sort of like having all the tools to do something but being paralyzed.

There have been some pauses, some deep breaths, and the fresher, more immediate experiential process is arising He uses lots of emotion words and then comes up with a poignant metaphor for his situation: "It's like having all the tools to do something but being paralyzed."

TH: Yeah, okay, now, just stay quietly with that feeling. That's a good image for it.

CL: (long pause)

TH: That's part of the way it's blocked. Here you have all the tools, and Dr.____was saying, "Look, you're going to be wanting to go to graduate school. You'd better shape up. You've got all the tools." Just feel that: what stopped you even though he warned you then.

CL: (pause)

TH: Just really try to feel that.

2 CL: (pause) I always wondered if it was partly environmental.

TH: Can we just stop for a minute so you can feel the feelings as you talk. You were nice and close, and I'd like to keep you there.

2 CL: I can remember going home, my parents picking me up at W_____, and we'd drive home and get home, and we'd have supper, and then I'd go upstairs and try to study, only I wouldn't.

TH: What would you do instead?

2 CL: I don't know.(pause) Probably talk on the phone. Then I used to work a lot. I'd work in the evenings until 10 o'clock.

TH: To make money you mean?

2 CL: Yeah. And it's going to sound like, I just can't remember really regularly, on a regular basis, ever sitting and studying.

TH: Well, if you had to work in the evenings, it makes sense.

2 CL: Well, why didn't I study in the afternoons? 'Cause I sat and flirted with girls or talked to other people in the school cafeteria.

TH: Can you just try to go to that sadness. (pause) Like before, when I said, "why didn't you get good grades?" and you said, "Well, we'll never know now," something seemed sort of sad when you said that.

2 CL: (pause) I don't know.

TH: Is it sad to look back on it? To look back on that time?

"Sad" is the best word I have for the felt meaning or sentience in the room. I keep using this word, hoping it will resonate with the feeling and help him experience it. It would be fine with me if he could experience the feeling and say, "No, it's not sadness, it's..."

CL: Oh yeah.

TH: In what way is it sad?

CL: (pause) Well I wonder where my friends are (pause) I did go through several stages. I have friends from my first two years there, friends from my

2 middle years there, and friends from the last. I took two years off. I mean I was actually connected very closely with W_____ from 1959 to a year after I graduated in '67 and, um,...

TH: Can you just go back and keep that sad feeling and go back and try to ...

CL: It feels like a lot of...

TH: Feel what it felt like then.

2 CL: It feels, in some ways, it's funny. Like, even

(almost 3) then when I was out to impress people so people would like me.

TH: Um hmmm.

Starting from the point when I started referring to the "sadness", I have had a sense of the sadness as palpable in the room. The last long attempt at focusing succeed in allowing the felt meaning to be present. There's a sentience of sadness in the room. It's in his voice and in his way of sighing and speaking. He says it is sad to wonder where his friends are and to realize how much he wanted to impress people.

This successful battle through the resistant behavior and the long, deep focusing which followed it, represent the turning point in the session. From now on, words and images arise freshly from preverbal experiencing, instead of being static symbols he has though before. Steps of change occur as felt meaning is articulated and insights are deeply experienced.

2 CL: The other day I thought of calling up a friend I knew then who was a professor at S_____. He was about forty. I'd love to call him up now and see how he is, but I'm sort of feeling ashamed because he'd say, "Well, what are you up to now?"

3 When he was forty, he was a professor.
(Sadness very present as wavering, thick voice)

Again he refers to feeling: "I'm sort of ashamed."

TH: Ummm. Can you feel that ashamed feeling right now?

3 CL: Oh yeah.

TH: Not in the horribleness of it but seeing that it's part of the block that's blocking you now, that you've got to get into that sadness and let it move through in order to move.

4 CL: Oh, Yeah. Phil is nothing." That's sort of what it says.

Here we have powerful new words for some of the felt meaning implicit in the block: "Phil is nothing," The sadness is very present.

TH: Umhm . Can you stay with that in a way that lets you embrace that part of you? Instead of seeing that as a damning statement, to hug yourself when you say that? Be warm and loving to yourself ?

When the client finally gets near the felt experiencing it is symbolized in very negative words: "Phil is nothing." The felt experiencing is not negative. It is always healthy, forward moving life energy. The symbols are negative. I have to help the client to step out of this static symbolization and into the preverbal experiencing. The image of an adult self hugging his own child self is a metaphorical way of setting up the interaction between symbols and felt experiencing which is essential to new articulation and change.

4 CL: Well maybe I'm just different.
TH: Um hmm. Is that part of what you're saying?
CL: It's kind of like maybe it's the key--it's a perfectly good key to a perfectly good lock but
5 I'm trying to put it in the wrong lock.

Again, a rich, sentient metaphor for felt experiencing: "It's a perfectly good key to a perfectly good lock..."

TH: Umhm . Is that part of what you said back then when you failed too? Maybe I'm different.

Again I ask for "back then" because I'm thinking tht there might be a stronger felt sense connected to the memories. It's too easy for him to intellectualize about the present.

2 CL: (sigh) I may have said "Next time."
TH: No, but don't tell me maybe. Please check.
2 CL: I think I said next time.
TH: Next time I'll do it?

CL: I used to go into, start terms with all these resolutions, I'm going to do really well, I mean, I did get a B in Cultural Anthropology in my senior year, and I think that was mostly, well, I was interested in the subject but I think it was also maybe mostly to impress the girl sitting next to me.

TH: And that was the best grade you got? That B? Mostly you got C's?

CL: Yeah, I never got an A in college. I graduated with a 2.0.

TH: So how do you put that together, with this Phil that Dr._____ was telling that he had all the tools.
Dr._____ could see beyond that.

I am losing him to thinking again. I use the powerful symbols that allowed the felt sense to become present before: "having all the tools and being paralyzed," the professor saying, "You have what it takes."

CL: I used to hang around with my professors and they'd have these incredible, I mean, my Russian professor said, "Phil , I can't possibly pass you, you know, he said, "you're my friend, but I'm going to give you an F in Russian."

TH: And how come you failed Russian?

CL: Well it was a five, an hour a day, and he was a very fast professor and I just didn't keep up...
The same in French. I just fell behind. I've done that as recently as--
--four or five years ago. In the courses--I took a course in family therapy. The last thing I remember, the professor said, "I don't know what happened to you. The first four or five weeks of class I thought you were the best thing to come down the pike for years and then all of a sudden you just petered out." And I even did a paper and he wanted me to revise it. To make it better and better, bigger. I never did it. So I got Incomplete in that.

Again, powerful symbols for the felt sense: "I don't know what happened to you...the best thing to come down the pike for years and then all of a sudden you just petered out."

TH: Can you feel the feeling that goes with it when you say, when you repeat his words...
CL: Yeah.
TH: "I thought you were the best thing to come down the pike for a long time and you just petered out. What happened? "

I continue to use the most powerful symbols that I have in the attempt to call forth the felt sense as strongly as possible and to keep it present so that his words will be a new articulation out of the implicit.

CL: I don't know what it is. In some ways, like I remember that very month I was in a play and I
2 started having rehearsals all the time, and I guess I was working out in _____, and I was just getting very tired.

Another small shift as he articulates experiencing: "I was just getting very tired."

TH: Doing too many things at once?
CL: Yeah.
TH: Was that always true when you were in school? That you always had to work as well? To pay your way?
CL: Except out in U_____.
Actually even out there I did get a job. I forgot which summer it was. Stacking books in the library.
2 One afternoon a week or something. I don't even know why I did it 'cause I did have--I didn't need to make any money. But I did. I guess maybe I wanted to buy something.
TH: Do you think it would be realistic to say that when you were in college you really had too much work to do? Do you think it's that you wasted time or diffused or wasted it?

Here I'm trying out an interpretation: "Well, maybe the problem back then was that you didn't have the time to study, you were working too hard." I ask him to check and see if this interpretation makes sense in terms of his own experiencing.

I am thinking that, at the time, he was working too hard, was too tired to carry through on his potential. He symbolized this

experiencing as "being lazy." We need to step out of that symbolization and reexperience the felt experiencing which is implicit in it. Fortunately, the felt experiencing is carried in the symbolization. Now, we can refer to the experiencing directly and articulate symbols for it which fit it more exactly. Such articulation will be a step of personality change.

CL: Too much work to do--
--including my job. Including going home to my family. Now I don't immediately sit down and
2 think about my family and say, "Well they fought all the time," but ever since my brother said to me, "Well, you know what it was like growing up there, " yeah. There was always a great deal of yak-yak whether it was conversation, or whether it was rows. Or my mother getting upset because my father did such and such and they would get into terribly viscious dialogue which went nowhere.
I mean, you knew the next morning they would get ready to go to work and--

He gives a very fresh description of back then.

TH: Does that seem--in your feeling sense, does that seem like something that got in the way of your--
CL: Oh yeah.
TH: ...wanting to write your papers or to get things done?

Again I'm asking him to check his words against the felt sense. Change and carrying forward comes from this back and forth between symbols and the felt experiencing.

CL: What immediately I do is compare myself to other people who have worse conditions to do it under,
2 and think, well, that couldn't be the reason. But it could be the reason.

He is able to articulate one of the defenses (another static symbolization) that gets in the way of experiencing the feeling.

TH: When you said that you would work until ten o'clock, I'm confused about going home and being with your parents fighting....

CL: Okay.

TH: --versus working.

CL: Sometimes I worked for the Buildings and Grounds Department. I worked a couple of nights a week until ten o'clock. And then I would take the

2 subway....and Daddy would come get me. Or else I would take a bus and I would hitchhike so I would not get home sometimes until eleven, eleven thirty and this would be working --well, yeah, for the whole year of 1961 to '62 I worked at _____ as the librarian, I think three nights a week. I don't remember. I don't remember anyone else working the evening job on the desk except me, and that was from six till ten during which time I theoretically could study but it worked out to being able to study about an hour, because there were books to stack and students to boss and questions to answer and stuff like that.

TH: Does it seem right, like, if I say, in response to your professor's question about why you can't get things done, and the answer you gave before was that you were too tired? Can you really just try to sense back and see if that was true? In college that somehow you tried to keep up with all theses other rich kids-- That was always your pattern since you were little...

Again, I want him to check onepossible interpretation against the bodily feel. Only when the words resonate with the preverbal will we know we are "right" and not just intellectualizing.

CL: No one--looking back now, knowing what I know about the human body, I guess getting good grades may not have been a real priority. Or if it was I didn't know how to reach that--how to reach there. I think I was

3 struggling to be liked, to be popular, plus I was working all those hours. I worked as a projectionist, I worked in the mail room, in the library, I worked for buildings and grounds. And I worked--when I couldn't get a job at W_____, I worked in the cafeteria as a short order cook, and I really did an awful lot of running around and socializing. I really have a hard time, even today, being alone. Unless something catches my attention, and then I can go to it. But it's very easy to distract me because I won't take off the phone, take the phone off the hook. I'll be in the middle of a project I am desperate to do, and

I'll start it when I only have forty-five minutes to work on it. I don't know what it is. The other night I was going crazy in my apartment. I was thinking,
4 why can't I be alone? Why can't I sit here in the armchair and read a book? Why can't I sit here and practice an instrument? Why can't I just sit here? You know, it would have been okay if I went to sleep. This morning I wake up at noontime, and I felt I was depressed. I hadn't done anything and it was already noon. This is having gotten off work at 7:30 A.M. And Mindy she just thought I was crazy. "You've just put a day's work in, what do you mean?" But, even now I can't pat myself on the head and say "You did a lot of stuff today." And I did do a bunch of things today. And I'm really tired right now. I mean I'm awake, but I'm really tired. And it's legitimate that I'm tired. And it was probably legitimate that I was tired back then.

Now there is lots of fresh symbolization. His words are more closely connected to present experiencing. They are articulations of experiencing, not static symbols from the past as early in the session. This new symbolization equals the emergence of <u>insight</u>. The client is more sure of his explanations because he can feel the fit with his experiencing.

The above work has demonstrated the use of focusing to bring a client away from static intellectualization and into the fresh articulation of felt experiencing which marks personality change. I will draw from the remaining 15 mins. of the transcript only some portions which show the continuing articulation and application of the insights arising from felt experiencing. I want to show the freshness of the client's symbolizations as compared with the stale intellectualizations which filled the session prior to the successful focusing:

TH: Well do you think that's maybe why you're not doing your dad's porch? What we want to find out here is--
CL: That's certainly a good excuse. At this point, probably every time I have a good reason for that. Like just
2 describing what I was doing in college just now makes me feel that maybe I wasn't overly lazy. Maybe I was just tired...

CL: ...I mean I know that I can do it. It's just, you know, it's not having the dishes to wash or, you know, having to go and show a film to this class. Or just riding home with my parents probably a hassle that I wasn't aware of, because I didn't know what else to do...

CL: ...Because their parents had sent them to college. Mine didn't. I don't think--
TH: They didn't save up anything?
CL: I don't think my parents paid one cent fo send me to college. They bought my clothes. They gave me money for clothes. They gave me money for, you know, well, a lot of times I didn't have money for books. You know how I got my books? I borrowed them from professors...

Here, is evidence of a felt shift. A new feeling arises: bitterness toward his parents for not helping him through school.

TH: ...But does this make any sense in terms of the lump or the--
CL: Well--
TH: ...paralysis that you--
CL: Yeah, it says..."You weren't stupid, you weren't being lazy. Maybe part of me was being defiant because I bitterly resented being so tired all the time...

I continously ask him to check the new insights against the feeling of stuckness to see if they resonate.

CL: ...Well before that even, I think it has something to do with when I was a little kid. I wanted to do things, and my parents would say, "You can't." You can't. And it occurs to me that when I graduated high school my parents, none of the effort of me going to college was generated by my parents...

CL: ...And I can remember, I--
I vaguely remember this--I may have even told you this one. (short pause) My mother, a few years--we were talking about my father before--she died. They had been talking about me, and my father said something about, "Well, you know, he never paid us back the $17.00 we loaned him." And my mother said, "What $17.00? What are you talking about?" And he said, "Back when he was at W____." I mean this was like, in '75 or '76, which is twelve years later.
TH: That's a sad story.
CL: You know, my mother couldn't believe it...

Here we have the emergence of a whole new area of unexplored bitterness, resentment,and sadness in relation to his father.

CL: ...That it's so terrible, that that's not the way it
3 is. I mean do I have a right to be sad about it? Do I have a right to cry about it?
TH: Because "That's the way it is, why cry about it?"
CL: Yeah, --I mean,--
TH: Or because other people have gone through worse?
CL: Yeah. Other people have gone through worse and
2 still done well...

Here he indicates the kinds of static symbolization that get in the way of experiencing feelings. As soon as the possibility of feeling for himself arises, an intellectual message comes through that says, "Oh, come on, don't have pity for yourself. It wasn't any harder for you than for anyone else, and it's still your fault that you failed."

CL: Yeh. Yeh, I went to college wanting to go in the
2 Foreign Service. Isn't that a joke?
TH: You wanted to go in the Foreign Service?
2 CL: Umm. That's why I majored in Political Science.
TH: Okay, now feel with that person--
2 CL: I wanted to be the Ambassador to such and such...

Another sad, poignant sharing. I try to reflect the felt meaning so that he can experience it.

TH: So don't make fun of it. Feel it. Feel that--try to be loving toward Phil who was going against all the odds, and trying as hard as he could to get somewhere.
2 CL: What I don't believe is that I tried as hard as I could. (pause) I wish I could...

CL: ...My father to this day does not understand, and even if he didn't have any money, you know, when I told him
2 about the Master's Degree last summer, he said, "Well, I'm not against it. What do you want from me?" He said, "I can't give any money." I said, "I don't want

your money." And he said, "Well, what difference does it make what I think?" And he does not understand. He says, "Well, go to graduate school. Get a Master's Degree. If that's what you need, do it." With no-- but he doesn't have the vaguest idea what that even means. I overheard him once talking to somebody about, the other guy said, "It must have been a struggle, putting both those boys through college." And Daddy allowed as how, yes, it was. And he elaborated a little bit. And I really don't think he was lying. I think he thinks he did. I mean, he did feed us. He and my mother fed us. Put a roof over our heads. Stuff like that. As long as we stayed in the house.

The client continues to articulate the new discovery of the lack of wished-for support from his father.

Three sessions later Phillip became even more closely in touch with the felt meanings connected with his "stuckness."

TH: Can you just stay with feeling the enormity of the bad side of your problem, like we know there are other parts of you that don't believe this, but let's just stay with the...

CL: Well, yeah.

TH: Wait, let me just finish.

CL: It just felt there was an enormous thing (voice cracks) out there that didn't want me.

TH: Okay, just really try to feel into that, that you're convinced on some level that, even if you got your resume together, that for some reason you're doomed and they don't want you. There wouldn't be any job for you.

CL: Well, it seems like there's a giant conspiracy or something (voice cracks), I mean every time I turn around something comes crashing down on top of me. I'm convinced that if I get out of debt that somebody somewhere is going to call me up and say--like the City of New York will call me up, and under a new law be able to hit me for $500 worth of parking tickets run up in 1973 that have been collecting 20% interest since and that sort of thing. I'm sure that's going to happen, (laughs) I hope they've all happened, but I'm not sure.

TH: Can you just stay with the feeling that you're doomed, that you're not going to...

CL: Not very easily. (pause) Partly because I'm always mouthing off that you're not doomed.

TH: Yeah, that's only one part of your many feelings, but it's the one that keeps you from moving forward. So we need to explore it and make friends with it so it doesn't hit you from behind.

CL: (long pause) The other thing, the way I approach it is, one of my friends said that I should go for a job that pays $50,000 a year or something, but I don't believe that I could get that. So I don't even think about that. Instead what I do is figure out how to rob Peter to pay Paul, and you know, maybe if I move home to _____, I could save $250 a month and it's a trade off. And do I want to move in with _____ or do I and then why do I want to. I mean all of these nickel and dime approaches to life (voice cracking), and that's why I'm in a nickel and dime situation. And sometimes I think maybe I'm only a nickel and dime person (tears in eyes, voice cracking, face vulnerable) and then I have to just face that. Well maybe (voice quivering, tears in eyes) I am going to be a mental health worker at _____ for 20 years. There are people that have done that, that are doing that. And there's nothing bad about that except (pause) that I don't like it cause it cramps my general good time.

TH: And it hurts, the place that says, "Maybe I'm just a nickel and dime person.

CL: (tears)

TH: Like what it means or something, being that kind of a mediocre person or something.

CL: No, I don't mean a mediocre person (voice cracking), I mean a nickel and dime sort of job. Guys who were jerks in high school have great jobs. Other guys...and nobody ever offered us jobs.

# CHAPTER SIX

# RESEARCHING THE EXPERIENTIAL DIMENSION

The experiential dimension in therapy is difficult to describe. It seems a matter of subtle sensings and shifts in something as intangible as "energy." Yet the experiential dimension has been captured in two research scales. The Experiencing Scale (Klein, Mathieu, Kiesler, and Gendlin, 1969) and The Vocal Quality Scale (Rice, Koke, Greenberg and Wagstaff, 1979).

Each scale identifies objective, observable indicators of changes in the experiential process within psychotherapy sessions. Each has passed criteria for reliability and validity demanded of scientific measures. Using the scales, researchers can subject the theoretical tenets of experiential theory to rigorous experimental testing. They can conduct experiments. For instance, they can test to see which therapeutic interventions have the greatest efficacy in facilitating direct reference to felt experiencing and the ensuing felt shifts which are seen as basis to personality change. They can see whether the occurrence of felt shifts is in fact associated with personality change.

These measures of in-session psychotherapy provide a bridge between clinical work and research. While clinicians are not likely to have the funding for large-scale studies of the long-term outcome of psychotherapy, any clinician can acquire the training necessary to test his own hypotheses about the effect of his/her interventions upon in-session process. While a clinician may not do formal research, a study of process measures like the EXP Scale and Vocal Quality Scale sharpens clinical work and the theoretical thinking behind it. Rice and Greenberg (1984) offer a procedure called "task analysis", for defining and testing "change events" within psycho-

therapy sessions which can be a highly satisfying way for clinicians to clarify and to test in a small way the assumptions behind their work. A clinician pinpoints a particular kind of client behavior which spurs a particular therapist intervention. The clinician than looks at transcripts to locate instances where the intervention led to successful resolution vs. times when it failed. The clinician then identifies the client behaviors which lead to success vs. failure. The effectiveness of this neatly defined change event can be assessed by looking at EXP Scale and/or Vocal Quality scores pre- and post- the intervention. Such clearly defined change events can be shared with other clinicians and eventually used as building blocks in psychotherapy research. The author's work with the "focusing" event within psychotherapy sessions is one example of such a process "eye" toward clinical work.

The Experiencing (EXP) Scale had its beginning in the "process conception" central to Rogers' client-centered therapy (Klein, Mathieu, Gendlin, and Kiesler, 1969). Rogers hypothesized seven closely related aspects of process which he felt described the client's way of being during therapy sessions: (1) communication of self; (2) the personal construct; (3) relationship to problems; (4) manner of relating; (5) incongruence; (6) relationship to feelings and personal meanings; and (7) manner of experiencing. (Klein, et al, 1969, p. 2-3) The process conception described the person as an on-going, ever-changing flow of experiential events, rather than the collection of contents basic to other personality theories.

Rogers became influenced by Gendlin's work on "experiencing," a concept which captures this process aspect

of the self. Drawing on Gendlin (1962), Klein et al (1969) defined experiencing as follows:

> Basically, it involves our preverbal, pre-conceptual bodily sense of being in interaction with the environment, a guts-level sense or felt meaning of things. This includes the feeling of having experience and the continuous stream of sensations, impressions, somatic events, feelings, reflexive awareness, and cognitive meanings that make up one's phenomenological field. Experiencing is <u>not</u> a reenactment of events, but includes their personally felt significance. It is not a set of concepts or logical operations; rather it is the inner referent used to anchor concepts. Also, experiencing is not simply the experience of affect, self-consciousness or self-management. The term includes the broader band of implicit meanings that structure sensations and feelings and articulate one's sense of continuity by supplying the personal coloring of events and the personal significance of one's reaction to them. (p.4-5)

Both Rogers and Gendlin saw personality change through psychotherapy as a process of freeing clients from static, rigid thought and behavior patterns and helping them to be more in touch with the ongoing flow of their moment-to-moment experiencing.

Gendlin and Tomlinson developed an early version of the EXP Scale (Gendlin & Tomlinson, 1967) as a first step in measuring this hypothesis about personality change. Klein et al (1969) summarize the stages of this scale as follows:

> The lower levels of the Experiencing (EXP) Scale deal with the degree of direct inner reference apparent in the patient's communication -- the degree to which he focuses on and expresses the subjective, personal meanings and experiences of events and his reactions to them. At the higher levels the continuum considers more advanced kinds of focusing, where the experiential perspective is transformed and used for exploration and problem

solving. Let us look at Gendlin's and Tomlinson's scale more specifically:

At stage one the patient seems distant or remote from his feelings. His reported experiences have an impersonal quality. Feelings are avoided and personal involvement is absent from communication.

At stage two feelings are not referred to directly, but the personal perspective emerges somewhat. Although feelings and personal reactions are characterized as remote external events or are referred to only indirectly or abstractly, there are self-references that indicate an intellectual interest or general but superficial involvement.

At stage three feelings come into clear but limited perspective. The patient refers to feelings and owns them, but bypasses personal aspects or deeper ramifications. Feelings are expressed as though rooted in external circumstances or are described only in very limited terms, often with reluctance.

At stage four the quality of involvement or "set" shifts. The patient is no longer concerned exclusively with external or remotely experienced feelings and personal reactions. It is here that Gendlin's process of "experiential focusing" begins -- the patient tries to attend to and hold onto the direct inner referent of his experiencing and make it the basic datum of his communications (Gendlin, 1969; Gendlin, Beebe, Cassens, Klein, and Oberlander, 1968). One shifts from looking at outside events or from stewing about things, to quietly holding still and letting the bodily sense of things come through, and developing the felt meaning, that is the words that come from this feeling.

At stage five the inner referent is the subject of elaboration and exploration. The patient now can focus on the vague, implicitly meaningful aspects of his experiencing and struggle to see his experiencing more clearly or work to elaborate it. As this exploration takes place, the referent unfolds and becomes, at least potentially, more rich and complex. There is often a sense of more being there than can be captured at once, with even more feelings underneath that could bubble to the surface at any moment.

Stage six provides for the resolution of this exploration. At this point the feelings themselves change or shift (see Gendlin, 1962, 1964, for a detailed discussion of referent movement; Gendlin, 1969, for the experiential effect of experiential shift). Previously unclear or fragmented sets of experiences are now reconstituted or restructured so that their experiential effect or impact becomes clear and their meaning is made explicit. Often the nature of the experiential referent itself can change, that is, undergo an experiential shift. In either case, feelings and personal meanings are immediately available as clear and useful referents for action or self-awareness.

Stage seven is an extension of the growth in self-awareness and the experiential resolution begun at six. The experiential perspective is now a trusted and reliable source of self-awareness, and is steadily carried forward and employed as the primary referent for thought and action. There is constant feedback from new experiencing and adjustment. Complexities, problems, and ambiguities may still arise, but are easily resolved and integrated. Thus, self-experiencing is comprehensive, integrated, and cohesive; yet it is flexible and open to change. (Klein et al, 1969, p5-6)

Klein et al (1969) modified the scale in order to make it more objective and less dependent upon clinical inferences. The scale definitions are tied to client verbalizations as a manifestation of inner processes. The present scale has high inter-rater reliabilities. This means that two raters using the scale will come up with the same stage rating for a given segment of transcript. Such reliability is the cornerstone of scientific objectivity and credibility. Here is a highly condensed short form of the seven stages:

| Stage | Content | Treatment |
|---|---|---|
| 1 | External events; refusal to participate | Impersonal, detached. |

| Stage | Content | Treatment |
|---|---|---|
| 2 | External events; behavioral or intellectual self-description. | Interested, personal, self-participation |
| 3 | Personal reactions to external events; limited self-descriptions; behavioral descriptions of feelings. | Reactive, emotionally involved. |
| 4 | Descriptions of feelings and personal experiences. | Self-descriptive; associative. |
| 5 | Problems or propositions about feelings and personal experiences. | Exploratory, elaborative, hypothetical. |
| 6 | Synthesis of readily accessible feelings and experiences to resolve personally significant issues. | Feelings vividly expressed, integrative, conclusive or affirmative. |
| 7 | Full, easy presentation of experiencing; all elements confidently integrated. | Expansive, illuminating, confident, buoyant. |

(Klein et al, 1969, p. 64)

The remainder of this chapter looks at segments of the Sally and Phillip transcripts which intuitively strike the reader as qualitatively different. Experiencing Scale ratings are then given to show that the objective measure can register the intuitive feelings, that the "experiential dimension", subtle though it may be, is real enough to be included in the hypotheses testing and measuring of scientific psychology and that the theory of experiencing in psychotherapy can be subjected to rigorous experimental testing.

Experiencing Scale ratings can be looked at in relation to three different questions in our small

research sample: (1) Do the stages objectively measure a clinically meaningful dimension of psychotherapy process? (2) Can the stages be used to measure the difference between Sally and Phillip's in-therapy behavior in a way that is clinically meaningful (in terms of diagnosis and prognosis)? (3) Can the stages be used to measure the effectiveness of the focusing intervention as a concrete technique growing out of experiential theory?

## One: Clinically meaningful dimension of therapy process

Here are some examples of client verbalizations which were scored at the various stages of experiencing. The definitions given for each stage are brief definitions taken from the Experiencing Scale manual (Klein, et al, 1969). Left out have been many additional criteria which allow raters to decide upon the Experiencing Scale stage for a given segment of transcript. Rater training also includes 16 hours listening to training audio tapes. The brief definitions should not be seen as sufficient for rating segments. They are given here, with rated samples, in order to give the reader a flavor for the distinctions made by the Scale. For full information on rater training, and a detailed presentation of research that has been done on the experiencing variable, see the training manual (Klein et al, 1969).

The ratings for the samples below were made by Marjorie Klein and Philippa Mathieu-Coughlan, the originators of the Scale.

### Stage One

> The chief characteristic of this stage is that the content or manner of expression is impersonal, being a very abstract, general, superficial, or

> journalistic account of events or ideas with no personal referent established. In other cases, despite the personal nature of the content, the speaker's involvement is impersonal, so that he reveals nothing important about himself and his remarks could as well be about a stranger or an object. (Klein et al, 1969, p. 56)

Example: Phillip giving factual information about his brother:

> CL: Yeah, but he was pretty young. I mean, when I was, when I was eighteen, graduating from high school, he was twelve. No, he was ten.

This is almost the only excerpt in either transcript that was rated as low as Stage One.

Stage Two

> The association between the speaker and the content is explicit. Either the speaker is the central character in the narrative or his interest is clear. The speaker's involvement, however, does not go beyond the specific situation or content. All comments, associations, reactions and remarks serve to get the story or idea across but do not refer to or define the speaker's feelings. (Klein et al, 1969, p. 56-57)

Examples: Sally narrating an event between herself and her partner. She tells the story, but she does not reflect upon why she was feeling how she was:

> CL: That was another chunk of it. Then he said -- I said, "Alright then where is this work going to get done?," and he said, in the world, that what he had with Terry he's going to try, which is the goal anyway, to reproduce it and to take the risks that are necessary, to have nourishing and trusting relationships in the world. And then there's the group Sunday. I said, "Okay, (pounds table), now I see." I said, "Okay. Men don't usually look for trusting nurturing

relationships with other men so I assume this looking for nurturing and affection is going to be women that --" and I was really tempted to say, "who understand you" but that was just so glib, I said, "that don't give you a hard time but are more this, less that, that whatever it is, I just see you going out and looking for it."

Phillip narrating a conversation between himself and a patient at the hospital. Again, he does not reflect upon his inner experiencing at the time:

CL: One of my patients was saying that she didn't want to go to another hospital. She didn't want to go to a halfway house. She was going to go home. And I said, "You know what's going to happen if you go home." What's going to happen is, and I heard myself saying, "Yah, well, you don't have to do that. That's a lot of bullshit."

Stage Three

The content is a narrative or a description of the speaker in external or behavior terms with added comments on his feelings or private experiences. These remarks are limited to the events or situation described, giving the narrative a personal touch without describing the speaker more generally. Self-descriptions restricted to a specific situation or role are also at Stage Three. (Klein et al, 1969, p. 58)

Examples: Sally narrates an event with her partner, but she adds comments on the way she was feeling inside during the interchange:

CL: So when Frank came home, we just sort of cruised around each other a little while...and I told him what had happened. I said that it had been a hard day and he made some gesture like, "So?", and I said, "Well, okay, I'm going to go see to Will." He really didn't like my tone of voice so he just went into the other room and was watching television. I was getting more and more upset. I didn't know totally why, and I went in

there and I said that it was really a bad thing for me that the television was that important always and so quickly...

and later in the same narration:

CL: The next day we talked about how it was for both of us, and he said that he was really glad, finally that he could be there for me. And I said that I felt okay about it, and I kept reminding myself that I made him very angry and that's where he was for a part of the time.

The underlined statements were not said at the time, are not part of the external events, but are Sally's report of her inner private experiences.

Phillip narrates a conversation with a nurse, but he adds his inner feelings:

I was talking to one of the nurses I work with the other night about fear. I mean, fear of sticking my neck out. Fear of becoming, you know, quitting my job. And she's somebody I've work with and talked to a lot about stuff, and we have a lot of similar anxieties. And she said, "I think you should leave here. I don't think you should stay at this hospital. I don't think you should stay working here at all." And I agree with her. I couldn't agree more, but I'm afraid.

Again, in describing the past, he adds his feeling about the events:

I mean, I've enjoyed the last two months, even though, you know, I've not been achieving things I want to achieve. Um, it's not terrible. I mean, the last two years working nights haven't been , that's been bad, but I haven't exactly been wretched the whole time.

And, in narrating an event with his partner, he adds a report of his inner experiencing:

CL: And the other day, when M____ was teaching me to play a scale on a piano, an organ actually. And there's a way you have to put your fingers on the keyboard, and you do it a certain way and you have to keep the rhythm, and I was rushing it, and it was, like, I could feel all this annoyance and anger in me and yet I kept wanting to do it and...But it's kind of like not wanting to do it because somebody said to do it.

Stage Four

The content is a clear presentation of the speaker's feelings, giving his personal, internal perspective or feelings about himself. Feelings or the experience of events, rather than the events themselves, are the subject of the discourse. By attending to and presenting this experiencing, the speaker communicates what it is like to be him. These interior views are presented, listed, or described, but are not interrelated or used as the basis for systematic self-examination or formulation. (Klein et al, 1969, p. 59)

Examples: Sally continues the description of the event with her partner, but here she tells the story almost entirely from the perspective of the inner feelings and experiences she was having, how it felt to be her in that situation:

CL: I didn't know where it had gone for me until I totally collasped, and I'm usually more in touch, but I didn't know until I was so far gone that I couldn't speak and couldn't breath and there was just this writhing of agony of what I was so afraid of, but just coped, you know, that's what you do when there's an emergency or there are things to be done. ...And I just wasn't wise enough to back track and pick it up.

And again:

CL: Yeah. And Frank tried to reach another friend, and I said, "Well, why did you decide to do something different than what he said," and he

said that he was really too scared, that if I had enough time by myself that I really would never do it again, and that's probably true. Once I found safety in another place, it was less likely that I would be exposed all over to him. It was interesting to find that out. (voice getting softer -- sighing) (pause)

Phillip, in describing his feelings around finishing his dad's porch. The inner perspective is paramount:

CL: Well right now it's a fear that, why couldn't I make myself go do it? I really wanted to do it. It would be a wonderful thing for me to do it. It would be a wonderful thing for him for me to do it. And it will be a wonderful thing between he and I for me to do it. Plus, it would be a nice thing to have it done, period. I mean, on so many levels it's good for me, because I've lost credibility with myself.

Again, Phillip, after being asked to focus on "that place in your life that kept you from getting good grades in college," speaks almost totally from an inner perspective, about the kind of person he is, the way he experiences things:

CL: Sometimes, sometimes I get very angry and excited and noisy and I mean crying about this. It's sort of like having all the tools to do something but being paralyzed.

Stage Five

The content is a purposeful exploration of the speaker's feelings and experiencing. There are two necessary components. First, the speaker must pose or define a problem or proposition about himself explicitly in terms of feelings. The problem or proposition may involve the origin, sequence, or implications of feelings or relate feelings to other private processes. Second, he must explore or work with the problem in a personal way. The exploration or elaboration must be clearly related to the initial

proposition and must contain inner references so that it functions to expand the speaker's awareness of his experiencing. Both components, the problem and the elaboration, must be present.

The proposition or problem must be given clearly or strongly and should include references to feelings or to the personal experience at issue. If the internal basis of the problem is weak, as in references to undesired behaviors or styles, propositions about the external precipitants of behaviour or feelings, or presentation of the temporal sequence of feelings, then the exploration or elaboration must have extensive inward references. It must be clear that the speaker is focusing on his inner experience rather than simply justifying his behavior...

At stage 5 the speaker is exploring or testing a hypothesis about his experiencing. While he must define the subject of this process clearly with inner references, his manner may be conditional, tentative, hesitating, or searching. (Klein et al, 1969, p. 60-61)

Examples: Sally reports some pondering and hypothesizing which she did about the problem of how her feelings and memories about her dead friend Steve are going to fit into her life:

CL: And I went to sleep and I got this picture of Steve (client's older male friend who died in car accident two months before) this way that he might cheer me up or just flutter around me in this whimsical funny way, and it hurt so bad that I couldn't breathe, and I couldn't push him away either, and I figured maybe that's where Steve will fit for me. I'm going to have him in his comforting wonderful way.

Maybe eventually that's how I'm going to be able to use him and always have him because there was this sense of just being very soothed by remembering a light, wonderful way that he had (tears, voice cracking).

TH: It's sort of like when I try to tell you to turn around and hug the little girl, it's like you use him in the same way.

CL: Well, I started to do that, and that's how it all happened. I got this vision of him, and at first it was so painful, I just wanted it to go away, and I couldn't make it go away.

TH: Then you let yourself feel nurtured by this image?

CL: Yeah, yeah, I said, Oh, maybe that's what's going to happen with this." It was my first glimmer that he could do anything like that. You told me once you had wonderful comforting dreams, (about my sister who had died) and I said, "Oh, how nice." (laugh)

TH: For me!

CL: Anybody that could do it. But I've never been able to do it.

Again, the therapist asks her to focus: "Can you find any words for that that are from a little child's place? You just look like a child in pain?" Sally ponders and comes up with a proposition about herself, a hypothesis:

CL: It has to do with losing people and it has to do with being lost myself.

TH: Being lost yourself?

CL: It seems to be two sides of it -- one of losing people that I love and the other side of it is what it feels like to be lost and not wanted by people.

The therapist attempts to get Phillip to focus, and he comes up with a proposition about himself:

TH: Ummm. Can you feel that ashamed feeling right now?...

CL: Oh, Yeah. "Phil is nothing." That's sort of what it says.

TH: Umhm. Can you stay with that in a way that lets you embrace that part of you? Instead of seeing that as a damning statement, to hug yourself when you say that? Be warm and loving to yourself?

CL: Well, maybe I'm just different.

TH: Um hmm. Is that part of what you're saying?

CL: It's kind of like maybe it's the key -- it's a perfectly good key to a perfectly good lock but I'm trying to put it in the wrong lock.

Stage Six

> The content is a synthesis of readily accessible, newly recognized, or more fully realized feelings and experiences to produce personally meaningful structures or to resolve issues. The speaker's immediate feelings are integral to his conclusions about his inner workings. He communicates a new or enriched self-experiencing and the experiential impact of the changes in his attitudes or feelings about himself. The subject matter concerns the speaker's present and emergent experience. His manner may reflect changes or insights at the moment of their occurrence. These are verbally elaborated in detail. Apart from the specific content, the speaker conveys a sense of active, immediate involvement in an experientially anchored issue with evidence of its resolution or acceptance. (Klein et al, 1969, p. 61)

Examples: After a time of exploring her feelings around the events of the week, Sally comes up with a deeply experienced understanding of how the various events relate to a basic problematic issue in her life:

CL: Well (tears in eyes, voice cracking), I know the hard places for me are being left out because I am one step away from being not wanted... (voice fading)

And I said that it was the same thing about Linda (the other woman), the same thing about things happening... ...Losing somebody that you love and not being able to protect (tearful, voice

cracking) them or yourself from it (crying) (long pause) whether it's some accident or somebody deciding (crying) you know, saying they're not going to do this (relationship) anymore. (crying)

Again, Sally synthesizes an understanding of the relationship between her feeling about her son and her own childhood deprivations:

CL: That's why I've tried to do it so differently with Will. A couple of nights ago I was cleaning up after supper or something and he said, "You know, I think I just need to be a little closer. I feel like we're too separate" (laughing), and you know we had been doing separate things, and for weeks it won't matter. I said, "Okay, what do you need?" He said, "I just need a hug and just to be a little closer."

TH: Just that he can feel free to say that and can even verbalize it in that way shows that you've indicated to him that closeness is something that's okay and that one can expect it.

CL: And what a wonderful thing, you know, (voice cracking) to be able to walk up to somebody and say, "I need to be closer," -- Can you imagine? (Laughs, sighs)

TH: Can you imagine what that would have been like in your situation?

CL: (laughs) I'd feel like it was a miracle (crying, pause)

TH: But in your case, you felt that way -- "I need to be closer" and there wasn't anything you could do except wait for them to change.

CL: It was so hostile and so cold and so punitive -- that's what I remember. (crying) It comes from such terrible places. (crying -- pause) I just see this mouth just shouting and judging and judging and shouting.

TH: That was your mother?

CL: (nods) (crying -- pause)

TH: And there wasn't anywhere to go for warmth?

CL: My uncle _____. He was very erratic. Sometimes we saw him once or twice a year.

TH: That's not much warmth!

CL: But I don't know any other place. (sighs, long pause) I'm really glad I came out (laughs) being able to do what I can do. You know, having it and being able to give it away. (pause) And seeing how different it can be for somebody else when they get it (voice cracking). I was really determined that I would never do that to anybody, and that it would be different for Will. (pause.

Phillip does not reach Stage Six anywhere in the present session.

Stage Seven

> The content reveals the speaker's expanding awareness of his immediately present feelings and internal processes. He demonstrates clearly that he can move from one inner reference to another, altering and modifying his conceptions of himself, his feelings, his private reactions to his thoughts or actions in terms of their immediately felt nuances as they occur in the present experiential moment, so that each new level of self-awareness functions as a springboard for further exploration...
>
> Experiencing at stage seven is expansive, unfolding. The speaker readily uses a fresh way of knowing himself to expand his experiencing further. Manner at this stage is often euphoric, buoyant, or confident; the speaker conveys a sense of things falling quickly and meaningfully into place. (Klein et al, 1969, p. 62-63)

The last part of the above segment has also been given a tentative rating of Stage Seven as Sally moves between insight about her childhood and her attitude about

mothering. It is the only place in either transcript where Stage Seven is achieved.

> I'm really glad I came out (laughs) being able to give it away. (pause) And seeing how different it can be for somebody else when they get it (voice cracking). I was really determined that I would never do that to anybody, and that it would be different for Will. (pause)

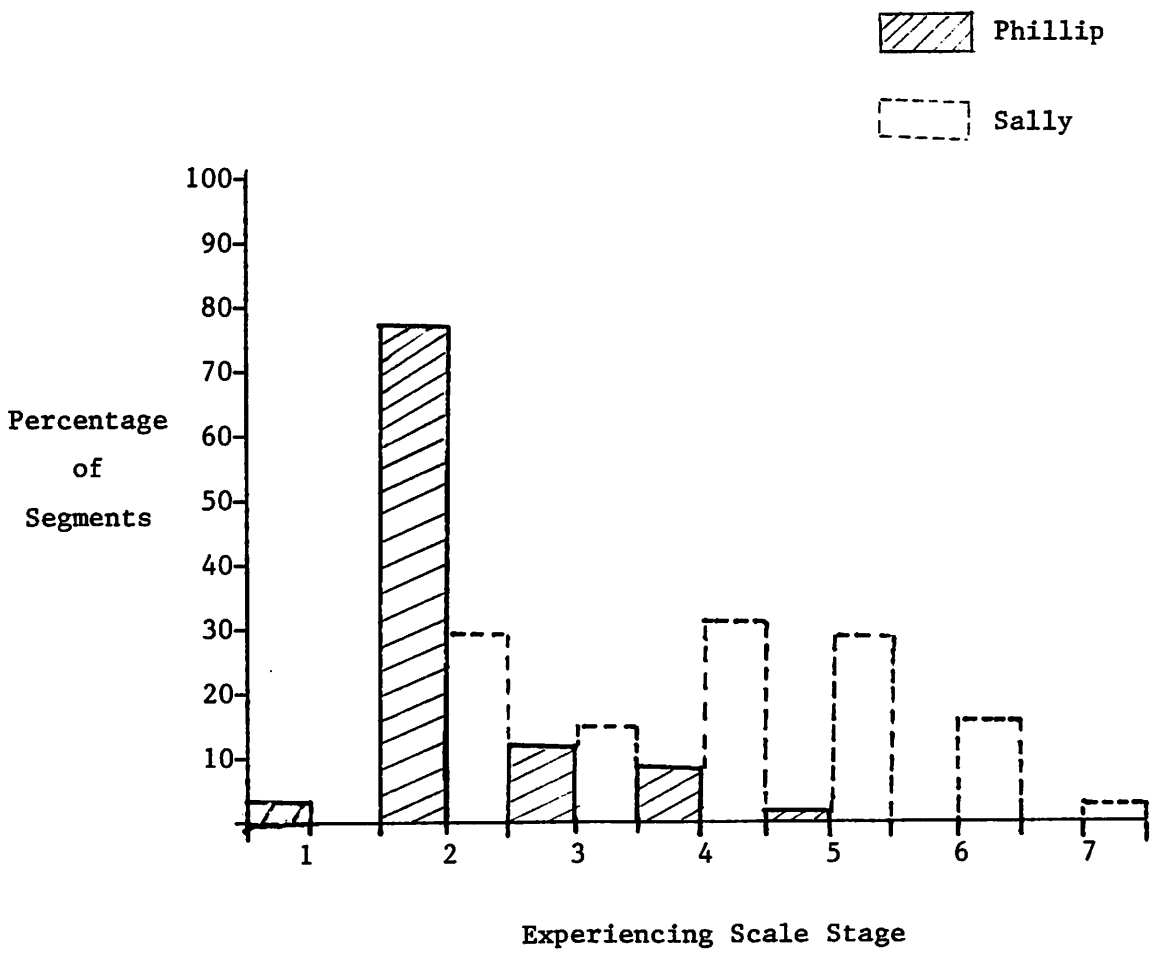
Two: Capturing the difference between Sally and Phillip's process

Throughout the commentary, the therapist compared the relative ease with which Sally was able to focus upon and articulate felt meanings with Phillip's difficulty in finding a felt sense. In terms of experiential theory, the direct reference to and explication of felt meaning which leads to personality change becomes possible at Stage Four, where the client's description of events includes reference to feelings and private inner experiences. Stage Five captures the inner struggle with a preverbally sensed, murky feeling or problem area which indicates "focusing." Stage Six and Seven measure the "felt shifts" in inner experiencing which are the actual steps of personality change.

Klein and Matthieu, as outside raters, gave an EXP Scale rating (sometimes more than one within very long segments) to each segment of client speech (a segment = all verbalizations by the client in between two therapist verbalizations). The following bar graph (Figure 1) indicates the percentage of total segments which fell into each EXP stage for each of the two clients. Phillip's Stage Two number is inflated because frequent therapist interventions chopped his verbalizations into many short

Figure 1

Percentage of Transcript Segments Rated At
Each Experiencing Scale Stage for Phillip and Sally



segments. Also, the transcript for Sally starts 20 minutes into the hour. Nevertheless, it is clear from the ratings that Sally spend a much greater proportion of her time at Stages Four, Five and Six than did Phillip. Phillip barely reached Stage Five and had no Stage Six. Sally spent 22% of her segments at Stage Five and 13.9% at Stage Six.

An eyeballing tally of the types of responses made by the therapist in each transcript (Table 1) indicates that the lesser degree of focusing (Stage Five) and felt shifts (Stage Six) in the session with Phillip was not due to a lesser emphasis upon focusing by the therapist. In fact, with Phillip, the therapist made fifty focusing interventions (35% of total responses), while with Sally she made only seven (10.8% of total responses). The proportion of reflections of felt meaning in each case was almost reversed (24 reflections or 16.8% with Phillip; 27 reflections or 41.5% with Sally), indicating that, in the session with Sally, focusing was relatively easy and a great proportion of the time was spent in the articulation of felt meaning (Stages Five and Six), facilitated by reflection. In the session with Phillip, most effort was expended in trying to use focusing to locate a felt sense (Stage Four) which might then be articulated.

In terms of prognosis, one could say that Sally is already in the flow of the kind of experiential processing which leads to deep structural change in personality, while the immediate goal with Phillip must be teaching the focusing process which could make felt experiencing (Stage Four-Five-Six) available for reprocessing.

TABLE 1

Comparison of Types
of Therapist Intervention

| | Sally | | Phillip | |
|---|---|---|---|---|
| Type of Intervention | Total # | % | Total # | % |
| Focusing Instruction | 7 | 10.8 | 50 | 35.0 |
| Reflection | 27 | 41.5 | 24 | 16.7 |
| Question | 12 | 18.5 | 31 | 21.7 |
| Interpretation | 10 | 15.4 | 23 | 16.1 |
| Other | 9 | 13.8 | 15 | 10.5 |

Three: Testing the effectiveness of interventions

Experiential theory predicts that focusing interventions, when used successfully by the therapist, will result in a deepening in felt experiencing, or, more specifically, an increase in EXP Scale stage ratings. Sophisticated time series and other sequential approaches to event analysis would have to be used to give a rigorous answer to such a research hypothesis. But, again, to give a taste for the potential of such research, we will take an eye-balling approach to our data, starting with the session with Sally. EXP ratings appear in the margin throughout the text, and you will be asked to refer back to them as we proceed.

As mentioned in the commentary (p. 45), twenty minutes of the session had passed before our transcript begins. During that time, Sally had narrated events of the week, probably going between Stages Two-Three-Four on the EXP Scale. The therapist was uncomfortable with the lack of deeper work, an indication that Stages Five-Six-Seven were lacking. If you look at the text, you will see that, from pages 45-61, Sally cycles between Stages Two-Three-Four EXP, narrating events (Stage Two), including her feeling reactions (Stage Three), and sometimes describing her inner perspective more generally (Stage Four). On page 52, she dips into some Stage Five as she struggles to articulate her attempt to come to terms with her feelings about her dead friend Steve, but her hypothesis remains tentative.

5 "Oh, maybe that's what's going to happen with this."

She doesn't move into the deeper Stage Six reexperiencing

and synthesis ("felt shifts") that would give a clear resolution of the issue. Instead, the session cycles back to Stage Two-Three-Four, partly in response to the therapist's request for more narration to fill her in on the other "horrible" events of the week (p. 52). On page 59 Sally indicates an issue that she wants to "focus" on:

> "And what I wanted to work on more was the
> 4 little girl and being wanted and feeling on
> the outside of somebody who's that important."

Again, she moves into some Stage Five EXP as she struggles to understand her feelings about her partner's independent decision to leave therapy. On page 61, she moves back up to Stage Two EXP (narrative). At this point the therapist makes a focusing intervention for the first time. She is frustrated with the way that Sally moves towards feelings (Stage Four-Five) but then cycles away from them without really experiencing "felt shifts" (Stages Six-Seven), or changes, in the feelings. She says:

> "Could you just right now try to feel what all your feeling is about? It seems like almost this whole hour there have been tears right behind your talking, and I've been trying to figure out what they are and I haven't come up with it. It's like you're strained still with something."

Immediately Sally returns to Stage Five EXP as she states the inner problem:

> CL: Well, (tears in eyes, voice cracking) I know
> the hard places for me are being left out
> 5 because I am one step away from being not
> wanted...(voice fading)

and very soon thereafter she moves into her first Stage Six EXP:

CL: And I said that it was the same thing about Linda (the other woman), the same thing about things happening... ...Losing somebody that you love and not being able to protect (tearful, voice cracking) them or yourself from it (crying) (long pause) whether it's some accident or somebody deciding (crying) you know, saying they're not going to do this (relationship) anymore. (crying)

As the therapist alternates between reflection of felt meaning and focusing instructions, Sally continues in Stages Five and Six EXP as she articulates new meanings. On page 66, when Sally moves back into narrative (Stage 2 EXP), the therapist again intervenes with a focusing instruction, and Sally immediately returns to focusing upon the issue (Stage Five EXP):

CL: It's that he'll decide not seeing the whole picture (voice cracking) because he has all these filters. Although he did say that this is more important to him now than it was before. The implication was that he's not as likely to make stupid blunders. His values are getting clearer. (voice cracking, tearful)

(5 in context)

TH: Can you go back to that really sore spot, now we're getting farther away. Just go to that rawness if you can. You don't even have to have words if you can just feel that fear of being left out or losing people, just being cut out of their lives or cut off from them and not having any control over that, not being able to protect them or yourself.

CL: (long pause -- crying) (very long pause for crying)

TH: Can you find any words for that that are from a little child's place? You just look like a child in pain.

CL: Uh, (slight chuckle).

5 It has to do with losing people and it has to do with being lost myself.

TH: Being lost yourself?

CL: It seems to be two sides of it -- one of losing people that I love and the other side of it is
5 what it feels like to be lost and not wanted by people.

The therapist continues alternating between reflection and focusing interventions, and Sally continues at Stages Five and Six. On page 70, when Sally returns to Stage Four EXP, again the therapist uses a focusing intervention to bring her deeper, and Sally immediately goes into Stage Six EXP:

CL: That's why I've tried to do it so differently with Will. A couple of nights ago, I was cleaning up after supper or something, and he said, "You know, I think I just need to be a little closer. I feel like we're too separate"
4 (laughing), and you know we had been doing separate things, and for weeks it won't matter. I said, "Okay, what do you need?" He said, "I just need a hug and just to be a little closer."

TH: Just that he can feel free to say that and can even verbalize it in that way shows that you've indicated to him that closeness is something that's okay and that one can expect it.

CL: And what a wonderful thing, you know, (voice cracking) to be able to walk up to somebody and
4 say, "I need to be closer," and they say, "Oh terrific. I'll be closer then," -- Can you imagine? (laughs, sighs)

TH: Can you imagine what that would have been like in your situation?

CL: (laughs) I'd feel like it was a miracle (crying,
6 pause)

TH: But in your case, you felt that way -- "I need to be closer" and there wasn't anything you could do except wait for them to change.

CL: It was so hostile and so cold and so punitive -- that's what I remember. (crying) It comes from such terrible places. (crying, pause) I just see this mouth just shouting and judging and judging and shouting.

TH: That was your mother?

CL: (nods) (crying--pause)

These few examples indicate the effectiveness of the focusing intervention in increasing EXP level, and the sensitivity of the EXP Scale in measuring the decreases in experiential level which parallel the therapist's intuitive decision to intervene with focusing, and the immediately following increase in depth of experiencing.

Although the work with Phillip was less dramatic in terms of speed and depth of experiential unfolding, there is also evidence of the effectiveness of focusing interventions in increasing EXP level and of the ability of the EXP Scale to measure such fluctuations in depth of experiencing.

Phillip starts at Stage Two EXP, with some peaks into Stage Three, and continues with Stage Two intellectual and behavioral self-description. On page 84, the therapist makes her first attempt at focusing, but Phillip responds immediately with more Stage Two intellectualization:

TH: I'm thinking, I'd like you to try something if you would.

CL: Uh huh.

TH: Partly I'm thinking, well...the special problem is that you're forty and having to figure out what to do.

CL: Uh hmmm.

TH: And it came to me to have you try to, that the question is, what was in the way in the earlier years? Like, if you could focus on that. Like, don't try to answer from your head, but, instead of our staying focused on "Now that you're forty, how are you going to get your life together?", it seems that we need to get in touch with Mindy and you agreeing that there's a block. That if we put it in the context of...

CL: I've thought a lot about this.
2

TH: ...when you would have been first making your decision to get into a career.

CL: I've thought a lot about this, where these
2 things come from.

The therapist continues with many focusing interventions, but Phillip stays at Stage Two, responding quickly each time with ideas he has thought before instead of fresh descriptions of inner experiencing. Finally (p. 99), because of the therapist's repeated requests for descriptions of inner feelings, Phillip gives a Stage Four description of his inner experiencing. However, instead of going deeper, he quickly returns to Stage Two:

TH: But what's the feeling around not doing your dad's porch? Not finishing it?

CL: Well, right now it's a fear that why couldn't I make myself go do it? I really wanted to do it. It would be a wonderful thing for me to do it. It would be a wonderful thing for him
4 for me to do it. And it will be a wonderful thing between he and I for me to do it. Plus it would be a nice thing to have it done, period. I mean, on so many levels it's good for me, because I've lost credibility with myself.

TH: But if someone tried to push you to do it, would you feel defiant?

CL: 2 No. Yes. I've been offered a job putting up shelves at a shop on _____ Street for ten dollars an hour, but I've made no move to do it.

However, on page 102, the therapist again pushes for focusing and there is a brief return to Stage Four:

TH: Okay. Okay. So take a couple of deep breaths first, just to get this part of you (gestures to torso) opened up. (pause, with sound of deep breathing) And then ask again in just a real open-ended way, "What is the block that keeps me from doing what I want to do?"

CL: 2 Should I ask that aloud?

TH: It doesn't matter. You don't have to say it out loud. See if you can get a sense of that whole stopped place inside, that place in your life that kept you from getting good grades in college.

CL: 4 Sometimes, sometimes I get very angry and excited and noisy and I mean crying about this. It's sort of like having all the tools to do something but being paralyzed.

However, again Phillip returns to Stage Two intellectualizing and narrative:

CL: 2 I always wondered if it was partly environmental.

The therapist continues to ask focusing questions ("Can you just try to go to that sadness?" "Can you just go back and keep that sad feeling...?" "Feel what it felt like then." Finally (p. 104), Phillip goes back into Stage Four and even into a Stage Five proposition about himself. But again, instead of going into Stage Six experiencing, he returns to Stage Two intellectualizing:

CL: The other day I thought of calling up a friend I knew then who was a professor at S_____.
2 He was about forty. I'd love to call him up now and see how he is, but I'm sort of feeling ashamed because he'd say, "Well, what are you up to now?" When he was forty, he was a
3 professor. (Sadness very present as wavering, and thick voice)

TH: Ummm. Can you feel that ashamed feeling right now?

CL: Oh yeah.

TH: Not in the horribleness of it but seeing that it's part of the block that's blocking you now, that you've got to get into that sadness and let it move through in order to move.

CL: Oh, yeah. Phil is nothing." That's sort of
4 what it says.

TH: Umhm. Can you stay with that in a way that lets you embrace that part of you? Instead of seeing that as a damning statement to hug yourself when you say that? Be warm and loving to yourself?

CL: Well, maybe I'm just different.
4
TH: Um hmm. Is that part of what you're saying?

CL: It's kind of like maybe it's the key -- it's a
5 perfectly good key to a perfectly good lock but I'm trying to put it in the wrong lock.

TH: Umhm. Is that part of what you said back then when you failed too? Maybe I'm different.

CL: (sigh) I may have said, "Next time."
2
TH: No, but don't tell me maybe. Please check.

CL: I think I said next time.
2
TH: Next time I'll do it?

There are some small moments of Stage Four thereafter, but the session ends without the deep unfolding and synthesis (Stages Six-Seven) that might have come had Phillip

been able to stay with his "felt sense" of "having a perfectly good key to a perfectly good lock but I'm trying to put it in the wrong lock." (page 105)

The poignancy of the final excerpt from the later (p. 113) session with Phillip shows up in the consistent rating of Stage Four EXP, again a product of repeated requests for direct reference, or focusing, on the part of the therapist.:

TH: Can you just stay with feeling the enormity of the bad side of your problem, like we know there are other parts of you that don't believe this, but let's just stay with the...

CL: Well, yeah.

TH: Wait, let me just finish.

CL: 4 It just felt there was an enormous thing (voice cracks) out there that didn't want me.

TH: Okay, just really try to feel into that, that you're convinced on some level that, even if you got your resume together, that for some reason you're doomed and they don't want you. There wouldn't be any job for you.

CL: 4 Well, it seems like there's a giant conspiracy or something (voice cracks), I mean every time I turn around something comes crashing down on top of me. I'm convinced that if I get out of debt that somebody somewhere is going to call me up and say -- like the City of New York will call me up, and under a new law be able to hit me for $500 worth of parking tickets run up in 1973 that have been collecting 20% interest since and that sort of thing. I'm sure that's going to happen (laughs). I hope they've all happened, but I'm not sure.

TH: Can you just stay with the feeling that you're doomed, that you're not going to...

CL: 4 Not very easily. (pause) Partly because I'm

always mouthing off that you're not doomed.

TH: Yeah, that's only one part of your many feelings, but it's the one that keeps you from moving forward. So we need to explore it and make friends with it so it doesn't hit you from behind.

CL: (long pause) The other thing, the way I approach it is, one of my friends said that I should go for a job that pays $50,000 a year or something, but I don't believe that I could get that. So
2 I don't even think about that. Instead, what I do is figure out how to rob Peter to pay Paul, and you know, maybe if I move home to _____, I could save $250 a month and it's a trade off. And do I want to move in with _____ or do I, and then why do I want to. I mean all of these nickel and dime approaches to life (voice cracking), and that's why I'm in a nickel and dime situation. And sometimes I think maybe I'm only a nickel and dime person (tears in eyes,
4 voice cracking, face vulnerable) and then I have to just face that. Well, maybe (voice quivering, tears in eyes) I am going to be a mental health worker at _____ for 20 years. There are people that have done that, that are doing that. And there's nothing bad about that except (pause) that I don't like it cause it cramps my general good time.

TH: And it hurts, the place that says, "Maybe I'm just a nickel and dime person.

CL: (tears)

TH: Like what it means or something, being that kind of a mediocre person or something.

CL: No, I don't mean a mediocre person (voice cracking), I mean a nickel and dime sort of job.
2 Guys who were jerks in high school have great jobs. Other guys...and nobody ever offered us jobs.

Again, at the end, Phillip returns to Stage Two narrative instead of staying with the felt meaning and entering Stage Five-Six-Seven EXP. One can hypothesize that, had

the therapist not made fifty focusing interventions, Phillip's entire session would have stayed at Stage Two-Three EXP Scale. Within experiential theory, no deep structural personality change could be predicted to occur.

# EPILOGUE: TEN YEARS LATER

## FOCUSING INNER CHILD WORK WITH ABUSED CLIENTS

Ten years ago, when I started this manuscript, I disagreed with those who conducted eyes-closed Focusing therapy sessions. I argued that clients needed to be healed by the interpersonal interaction with the therapist. The manuscript describes interjecting short Focusing invitations into traditional verbal psychotherapy. Therapist and client use Focusing to explore the felt sense of the "transference" of parent/child dynamics into the present relationship.

This approach is still valid for therapists choosing to work interpersonally and for clients who are not able to work with eyes closed. However, in my own clinical practice, I presently find myself moving away from an emphasis upon "the transference" and toward an eyes-closed Focusing therapy. It is my version of Focusing Inner Child Work. Rather than placing priority upon the relationship between myself and clients, I emphasize the healing relationship between their own Inner Nurturing Adult (or Inner Listener) and their wounded Inner Child.

Traditionally, people using Focusing refer to themselves as non-directive, client-centered, "not ever making the Focuser do anything," "not having any agenda for a Focusing session." While such an approach is sacred

to Focusing Training and Listening/Focusing peer counseling, it does not fully describe my work as a Focusing Therapist. Especially with people who have been severely abused in childhood, I work quite directively, taking us back again and again to the felt sense of painful childhood memories. In writing this chapter, I also want to begin discussion about directiveness in Focusing work.

One factor motivating my change to an eyes-closed Focusing Therapy was burnout from working with sexually and physically abused people. I was doing too much work trying to get them to find a felt sense. I was battered from walking headlong into resistances. I needed a method to overcome the dissociation from the bodily felt sense symptomatic of severe trauma in childhood. I wanted a method that was easier on me, placing more responsibility with clients. Focusing Inner Child Work accomplishes both of these goals.

I have also discovered some difference between myself and Gendlin on the role of catharsis and the reworking of childhood pain in the Focusing process (McGuire, 1991; Gendlin, 1991). Theoretical work on emotion in psychotherapy (Safran and Greenberg,1991) has sharpened my understanding of my approach. The Inner Child work of Bradshaw (1990) and others in the adult children of dysfunctional family movement (ACOA, etc.) has also

provided concepts for aspects of my work. Others within the Focusing tradition have described aspects of Inner Child Work (McGuire, M., 1991; Gendlin, ; Armstrong,M., 1988; Coffeng, T., 1992).

Focusing Inner Child Work is also my personal way of attracting those I want to work with at the present time. Individuals are screened out who do not have sufficient ego strength to work with their own Inner Listener and Inner Child. These people need to be worked with in a more interpersonally supportive style.

**DISSOCIATION AND CHILDHOOD ABUSE**

Focusing grows out of the client-centered tradition (Hart & Tomlinson, 1970). Given facilitative conditions, the body will unfold its own unique next steps. Rogers' client-centered therapy (1951) is "non-directive." The therapist reflects, or mirrors, clients' words, emphasizing the feeling tone. Clients go deeper by hearing nuances in their own words. Gendlin's client-centered/experiential therapy (1974) allows more direction. The therapist can suggest Focusing: "Would you like to stop and sense into the meaning of those words?"

Focusing Inner Child Work goes further in terms of directiveness. I encourage clients to keep their eyes closed through most of the session (there are, of course, exceptions). I also feel free to direct them to Focus upon specific issues. For instance, I may tell them that

I see signs which usually indicate sexual or physical abuse in childhood. I encourage them to accompany me in looking carefully at childhood memories and body senses to see what emerges.

Much of the time, I work with people who cannot get a body sense. They are "dissociated" from their feelings, from the felt senses that would normally come along with their words or images. Dissociation is a protective response to situations that are so physically or psychologically painful that the person must not feel them in order to survive. To preserve the Self, the person leaves the felt sense and goes into a fantasy world, or symbolizes the pain in bodily tensions, or intellectualizes what's happening as if an observer.

Many symptoms attributed to depression or anxiety neuroses are caused by forgotten sexual, physical, or emotional abuse in childhood. When a therapist sees signs of dissociation, the question becomes, "What could have happened to this person that was serious enough to cause dissociation?" Particularly in cases of severe physical, sexual, and emotional abuse in childhood, the body process may <u>not</u> get to dissociated memories on its own. The therapist must intervene to connect the person with bodily experiencing.

Focusing is an ideal method for overcoming dissociation. Focusing emphasizes staying with and

trusting vague, preverbal bodily senses. A relationship with the felt sense is seen as necessary for lasting change. Many techniques deal with the problems that get in the way of experiencing the felt sense (the Critic, being Too Close or Too Distant, etc.).

All of us dissociate to some degree and use Focusing to bring us back to the felt senses. However, the more severe the physical or emotional pain, the more severe the dissociation. In extreme cases, the Self splits into multiple personalities who are not even aware of each other.

The dynamics of incest set up ideal conditions for dissociation:

(1) Often, the abuse happens to an infant or toddler who does not have words or concepts for what is happening. The person is left only with vague feelings that something happened.

(2) The abuser, especially if the parent, is loved by the child. The abuse may be mixed with affection. It's impossible to keep loving the parent and remember the abuse. The abuse is forgotten.

(3) The abuse may be physically painful enough to cause bodily dissociation for survival.

(4) The child has no choice but to stay in the situation so must construct a cognitive framework that makes this tolerable: "It couldn't be happening. I made it up." This becomes more likely as the child tries to tell other family members and is met with denial. The abuser may also say: "This did not happen."

(5) The abuser may tell the child, "You made this happen. You are bad. If anyone finds out, you'll be in trouble." Or the child senses that what is happening is "bad" and blames him- or herself for participating. The child forgets the abuse, remembering only "I am bad."

(6) The child may have experienced some pleasant sexual sensations during the abuse. S/he then thinks s/he has chosen to participate and is the guilty party. The conflict with simultaneous feelings of violation causes forgetting of the irresolvable confusion.

Sexual abuse is not a minor exception in the work of Focusing therapists. Since I have become attuned to the signs of incest, I find it or suspect it in at least seventy-five percent of the clients, male and female, coming to me for generic psychotherapy. The frequency is so great that a find myself tending to agree with Freud. He initially stated that, in every case of neurosis, the cause was to be found in disturbances related to childhood sexuality. Using abreactive and hypnotic techniques, he found that recovering memories of sexual abuse was the turning point in cases of hysteria and conversion reactions. Only later, after harsh criticisms, did he develop an alternative theory that these were <u>imaginary</u> instances, dreamed up by children under the intrapsychic sexual pressures of the Oedipal situation.

Analyst Alice Miller (1983;1981) shows how the latter version of Freudian theory and authoritarian systems of child rearing have conspired to draw a veil over the tremendous actuality of severe physical and sexual abuse during childhood. Given what I know now, I can look back over many past clients and see symptoms of sexual abuse. Yet we did not uncover incest as the root of problems because I was not aware enough of the signs and did not

point us explicitly toward the issue.

The degree to which memories of physical and sexual abuse can be forgotten is startling. Here are some of the red flags that raise suspicions of incest. The therapist operates as a detective, piecing together clues that lead to a hypothesis which can be offered to the client:

*** The client is the child of an alcoholic family

*** S/he can't remember portions of childhood

*** There were stepfathers or mother's boyfriends in and out of the home, plus alcohol.

*** The mother was severely mentally ill or abused as a child herself

*** The client shows excessive guilt, shame, self-punishment: "It's all my fault. I'm bad, lazy. I've disappointed my family. I'm nothing."

*** S/he has an extreme need to control the therapy session, is distrustful of the therapist, and is especially sensitive to any questioning of his/her perceptions

*** S/he is in an abusive relationship and unable to get out. There may have been a series of abusive relationships

*** S/he shows signs of dissociation: Low Experiencing on the Experiencing Scale (Klein, Matthieu et al., 1970) s/he does not seem present behind the eyes; s/he seems to be covered by a "glass shell," a fragile rigidity; s/he is afraid to close his or her eyes; s/he talks about traumatic events with no emotion, saying, "It's as if it's happening to someone else," "It's as if I'm watching a movie," "I'm on the ceiling looking down at myself;" s/he keeps the therapist's comments out with a wall of words, protecting

*** The client's jaw is tight, angry-looking

*** S/he has an eating disorder (overweight, bulemic, anorexic)

*** S/he is abusive to others, including the therapist

*** S/he has panic attacks, agorophobia, other phobias

*** S/he is obsessed with death or wanted to die as a child

*** S/he was happiest in a fantasy world in childhood

*** S/he is self-destructive, self-mutilating

DSM-III symptoms of Post-Traumatic Stress Disorder, Borderline Personality Disorder, and Multiple Personality Disorder all can apply to incest survivors.

It is my responsibility as the therapist to keep taking clients back to painful material: "I know you're afraid of this, you're maybe even afraid that you'll die if you let yourself be here, but this is your Magical Inner Child, this is the place from which creativity and new energy will arise."

When I suspect a client is an incest surviver, I may make an even stronger intervention. The material is so dissociated that it may never come up in Focusing, yet the person will continue to suffer symptoms caused by the forgotten events. I must make judgments about timing: how much individuals can handle, how likely it is that they will discover the abuse themselves, whether they are working successfully on other material at the time, whether work on the incest is essential to our work together and within the therapeutic contract, etc. But in many cases, although the client has not brought up the

issue, I will say, "I think that you were sexually abused as a child, and here is why..."

Sometimes, the person will immediately see incest as a possibility and start working on pieces of information that have suddenly fallen together. Sometimes clients need to think, read, talk to other survivors. Often they need time for the incest possibility to sink in cognitively before it can be worked on emotionally. They need to rethink and reorient their whole lives in terms of this new framework. Sometimes a client says, "No way. Not possible." However, if I keep seeing the signs and progress blocked by the lack of the information, I will keep bringing up the possibility, with more reports of what I am seeing.

Sometimes there are "screen memories." A client remembers an incident of abuse by a neighbor or a stranger and keeps attention upon this event. The therapist thinks, "It's unlikely that event would cause the degree of dissociation and other signs of the incest pattern I am seeing. Why the intense guilt and shame? Why couldn't the child tell her parents? Is there also incest here"?

**FOCUSING UPON CHILDHOOD MEMORIES**

Many theorists now believe the deepest level of personality change cannot occur unless clients access and change core organizing schemata that are cognitive and emotional. These schemata can only be changed by returning

to the emotional state of their creation (Safran and Greenberg, 1991, p.11). Harvey Jackins (1962), in his reevaluation cocounseling, knew that emotional work was necessary to change thinking. John Bradshaw (1990) describes "original pain" work:

> What I didn't know was that I needed to embrace my heartbroken little boy's loneliness and unresolved grief about his lost father, his lost family, and his lost childhood. I had to embrace my original pain. p. 76

Ron Kurtz (1990) in his Hakomi therapy, refers to "the core material":

> Such information has been called by many names. Karl Popper calls it intuitive belief. Joseph Campbell's mythic images" is another phrase...'Intuitive beliefs' suggests the non-verbal, non-objectified state of this information. it is intuitive, non-verbal; it is felt or sensed, rather than thought. Yet, at the same time, it is acted on; it guides actions. p. 116

Note the similarity in his description to a "felt sense," in Gendlin's terminology. Gendlin also uses the term "frozen wholes" to refer to these cut off aspects of experiencing.

I make the assumption that troublesome situations are those in which a person is operating out of preverbal "rules" which were formed in childhood and have remained unchanged by further experiences. If the client is in an abusive relationship, I find myself asking: "Where did she learn to take abuse without leaving? When was it necessary

for survival to do so?" A grown woman, unentangled by the past, would not allow herself to be beaten repeatedly. A belief system keeps the abused woman there: "I'm doing something to deserve this." Shame, guilt, and self-blame are predominant emotional features: "I want him back...If I'd only done things differently...I can see why he's angry, and I'm willing to change...I do make him angry. I nag him...What's wrong with me? My last husband said I was crazy..."

Bradshaw (1990) describes "toxic shame":

> ...the internalized feeling of being flawed and defective as a human being. In the internalization process, shame, which should be a healthy signal of limits, becomes an overwhelming state of being, an identity if you will. Once toxically shamed, a person loses contact with his authentic self. What follows is a chronic mourning for the lost self. The clinical description of this state of affairs is dysthymia or low-grade chronic depression. p. 66

Often, when Focusing upon a problematic reaction in the present, clients will go back to childhood connections: "Oh, and this reminds me of..." But, if they don't, I will ask, "Is this feeling familiar from your childhood? Did someone there treat you like this?...Can you sense into the feeling and see if there's something similar?"

Notice that I am asking clients to Focus, but I am directing what they will Focus upon. Sometimes the client

will connect: "Yes...my father treated me this way," and the Focusing process can be used to unravel the felt sense of that interaction. But sometimes s/he will say tearfully, "No, my parents were very kind to me. They sacrificed everything for me."

Alice Miller talks about this tendency for the abused child to idealize the abuser, so that the child can stay in the situation and survive. The giveaway here: "They sacrificed everything for me..." Again, the keynote: the parents are the good and worthy ones, the client the undeserving one: "They sacrificed...I didn't deserve it...I disappointed them." Parents who were truly caring would leave behind self-esteem: "My parents gave us everything they could, I'm grateful." In the abusive family, the child got the message: "We are sacrificing for you. Make sure you deserve it." The Focusing question: "How did they sacrifice for you? Can you go back to the specific memories?"

Often, the person will say, "I don't remember my childhood very well." Again, a give-away: "Why not?" If we do not get to specific childhood memories from the client's felt sense of present situations, then I may take us back into childhood directly: "Let's just look for any memories. We can slowly reconstruct your childhood by telling over and over, with as much detail as possible, whatever incidents you do remember...You can start with

birthdays or holidays, with good times, close times you remember...How was it at the dinner table?...Tell that story about your parents' fighting again, but with every specific detail you can remember." We continue in this way until the client hits upon an emotional reaction or a felt sense about something, or until I hear a pattern, in which case I will name it and ask the client to Focus into it: "That sounds the same as what's happening with your boyfriend now...that you asked for your father's attention and he ignored you. Can you try to sense into the feel of that?"

Here the work often moves naturally into the Inner Child metaphor. I may say, "Can you imagine that you're a little girl and your father is talking to you in that way?" or "Can you get a picture of how old you were, how you looked at that age?

**THE INNER ADULT/INNER CHILD AND SELF-COMPASSION**

Moments of "self-compassion" or "self-empathy" are the essence of change in psychotherapy. In metaphorical language, people are able to turn around and to embrace the parts of themselves which have been disowned. In theoretical terms, they are able to touch with their attention the preverbal experiencing underlying a frozen, static symbolization. This moment of direct reference to felt experiencing allows new symbolizations to arise. Static symbolizations change into something new and more

inclusive of present as well as past experiencing. Gendlin's term is "content mutation".

It is exactly these cut-off "frozen wholes" which must be related to in an empathic way if people are to heal--and it is exactly these wounds which they avoid with every tactic at their disposal. They don't like these parts of themselves. In fact, they survived childhood only because they were able to make this part go away. Clients, unless they are experienced at and self-responsible for Focusing, are not going to return to this wound again and again and patiently make words and images for it, feeling the emotions which arise. Yet it is exactly the reintegration of these parts of experiencing which will allow them to be whole.

The Inner Child metaphor is one of the most powerful ways of allowing people to connect with the feel of cut-off aspects of chidhood experiencing. The Inner Adult/Inner Child metaphor concretizes the dialogue between the empathic Inner Listener and the felt sense necessary for successful Focusing (Gendlin, The Client's Client, ; Cornell,1991;McGuire,M., 1991; Armstrong, 1988, Coffeng, 1992). The embracing of the wounded Inner Child by the Inner Nurturing Adult brings about the moment of self-compassion necessary to reintegrate rejected aspects of the Self into the total personality.

In Healing Your Aloneness, Chopich and Paul coin the

term Inner Child Bonding for their approach to healing:

> *Becoming aware of the unloving way in which we are parenting ourselves and what it means to be a loving Adult to our Inner Child is the most important thing we can each do for ourselves.* The way we each treat our Inner Child causes everything else in our lives. Treating our Inner Child unlovingly results in substance and process addictions, and creates fear, anxiety, depression, pain, emptiness, neediness, low self-esteem, and an unbearable sense of aloneness, as well as physical and mental illness. The severity of mental illness from which a person suffers is directly related to the degree of internal disconnection between the Inner Adult and the Inner Child. Craziness results when we avoid facing and feeling the deep aloneness and pain of the Inner Child.
>
> Treating our Inner Child lovingly creates the inner connection that fills the emptiness from within rather than needing to fill it externally with addictions. The more we learn to treat our Inner Child lovingly, the more solid and full the internal connection becomes, leading to peace, joy, power, and wholeness, erasing the need to give ourselves up to be loved by others. pp. 25-27

Chopich and Paul (1990) also distinguish the Inner Loving Adult from the Inner Unloving Adult (the many faces of the Critic); the Inner Loved Child from the Inner Unloved Abandoned Child.

Stone and Winkelman, in Embracing Ourselves: The Voice Dialogue Manual (1989) provide a wealth of metaphorical language for noticing and creating dialogue

between parts of ourselves: The Protector/ Controller, The Heavyweights (The Pusher, The Critic, The Perfectionist, The Power Broker, and The Pleaser), Disowned Instinctual Energies (The Demonic), The Inner Child (The Vulnerable Child, The Playful Child, The Magical Child), The Parental Selves ( The Good Mother, The Good Father, The Negative Father, The Negative Mother, The Rational Parent), The Spiritual Dimension.

The Inner Child is only one of many metaphors which arise as people attempt to express aspects of experiencing. A therapist caught in the Inner Child metaphor can miss more individually powerful metaphors which arise from a client's own unique process: "It's like the gollum from 'Lord of the Rings'...it's been underground for so long that it's colorless and it cannot see;" "I'm like a butterfly with one bent wing...I can't allow that wing to unfurl;" "It's like a wounded animal...It just wants to go and be alone;" "It's like a gangrenous leg...I just want to cut it off!"

Working toward Inner Adult/Inner Child bonding is not simple. The Inner Child is not necessarily going to be friendly or pretty. Cut off and ignored for thirty years or so, s/he's likely to be dirty or disfigured or ugly. S/he's likely to be in a rage, too hurt to talk, untrusting. And the client may not be aware of her own Nurturing Adult.

I may say: "Imagine that part of you (that felt sense) as a little, hurt child...you want to find some way to approach her." All sorts of things may happen. The client may say:" I have no adult; I don't know how to take care of her; I'm afraid of her--she's so angry." In Ann Weiser Cornell's terminology (1991), the client is Too Close, overwhelmed, and needs help finding an appropriate distance from the felt sense/Inner Child: "Is there a nurturing adult you know who you could take with you?"; "Can you remember how you are a nurturing adult for your own real children?" The client may say: "I hate that little girl; she's so ugly and dirty." Therapist: "Can you imagine that it's not you but another little child that you know who looks like that. How would you feel about that child?" Often, people who cannot cry for themselves can feel sympathy/empathy for "some other little child."

Or the therapist may need to side with the resisting part: "It was really important to your survival that you turn away from that little child's feelings. Let's take some time to validate and to hear from the 'coper' who's been doing such a good job keeping you away. Then maybe we can show her that you're bigger now, things have changed, and you can afford to have a relationship with that part."

It's just as likely that the Inner Child will refuse to talk: "You've been ignoring me all these years. Why should I talk to you now? Why should I trust you? Why

should I want to help you? I hate you!" In this case, the Inner Listener needs to sit down at a comfortable distance, try to find out from the Child what might be okay, and be willing to stay for a long time, demonstrating gentleness, acceptance, and trust.

Using the Inner Child metaphor in a rote way, or walking large audiences through fixed guided fantasies about finding and reuniting with their Inner Child, can stay at the surface level if attention is not directed to the felt senses which arise. The therapist must help the client to "sit with" the felt senses which arise. Gendlin tells the Focuser to set up a tent and tell the felt sense, or the Inner Child, that you will stay as long as it needs, that you'll be as near or as far as it can tolerate, that you won't give up on it or force it, that you will just be there. Two seconds of being with, contacting this "frozen whole" can be the most curative moment of an hour of therapy. By being contacted, it can begin to melt and to change.

I often use imagery like "Can you just put your hands around the felt sense, as if you were going to warm it?", "Can you just warm the felt sense with your attention, just touch it gently with your attention?" The touching is all that is needed; the newly wakened experiencing will then take care of its own unfolding.

**INTRODUCING EYES-CLOSED FOCUSING THERAPY**

Beginning with the first telephone contact with potential clients, I say that

(a) I use a technique called "Focusing;"

(b) there's a book they can read (Gendlin, Focusing, 1981);

(c) Focusing involves being willing to spend most of the session with their eyes closed, going quietly inside;

(d) I will teach them how to do this and help them with being scared, if they are;

(e) Focusing is a way of contacting and healing the Inner Child.

When they come for a first session, I say that we can spend some time talking, but that I want to be sure to save time at the end to demonstrate Focusing, so that they can see if they are comfortable with it. We spend up to twenty minutes talking about their reasons for coming to therapy, their family of origin, their symptoms. I answer any questions about my training, my approach.

If they hit upon a Focusing place (tears, or a vague sense) while talking, I will either label this ("If we were doing Focusing now, I would stop and ask you to go inside quietly to see what that's about") or, if timing and readiness are right, I say, "This would be a good time to try Focusing. Are you willing?" If not right then, I introduce Focusing in the last half hour of the session.

I say that Focusing involves going quietly inside, setting aside intellectual assumptions, and trying to get

the feel of "the whole thing" in the center of the body: "Letting the body tell you what it knows"; "consulting the body's wisdom"; "giving the feeling a chance to speak"; "finding your Inner Child." I say that we will start with simple relaxation instructions to help them turn toward the body, that, after that, sometimes it helps to make a list of all the things jumbled up inside, sometimes it works just to sit quietly and see if a sense of one particular thing that wants attention will come inside.

I say "I'll ask at that point and let you say whether you need to make a list or whether there's already a strong feeling wanting attention." I say "Let me know if you are having trouble anywhere along the way; if you're quiet, I'll assume that you're okay unless you tell me otherwise. Of course, if you need to, you can open your eyes, but I find that the best work gets done with eyes closed, that talking can be a distraction away from feeling." I say that, while this way of therapy may seem strange at first, most clients find a great sense of ownership in finding solutions themselves. I answer questions if there are any.

Then, clients close their eyes and I give initial Relaxation/Focusing Instructions:

"Just notice your breathing, as a way of turning gently toward your body...Don't try to change it; just notice the breath going in...and out...Loosen your clothing if it's too tight, or, if you notice a tense part of your body, feel free to

move it around or massage it...Do whatever you can to make your body feel welcome...Now, imagine that there is a ladder going from the top of your head down through the center of your body all the way to your stomach . You're at the top of the ladder, where you do all your thinking and analyzing. You're going to gently say 'Goodbye' to this part of yourself and slowly let yourself down the rungs of the ladder...going down behind your eyes...you might breath into the energy there...in and out...now down, down to your throat...again, you can stop and breath into the energy there...in and out...now down, down into your chest...again, breath into the energy there...in and out...now, down into your stomach...and breath...in and out...Notice that there is that channel of energy down the center of your body, and that it's a place where you can look for information during Focusing ...Okay, now check and see if you need help making a list, or if you just want to sit and see what comes in the center of your body (or, if we've already chosen an issue to Focus upon before starting, I'll say, "Now, turn your attention toward that feeling about....just sit with it and see if you can get the feel of the whole thing in the center of your body." (adapted from Bala Jaison's Focusing Training tape)

From there we go on with all the normal steps of Focusing: finding words or an image that are just right, checking them against the felt sense, looking for more words or images as they arise, noticing and setting aside the Critic if it arises. In later sessions, I ask them to let me know if they want relaxation instructions, or help making a list,or if they just want to sit quietly and get in touch with what comes in the center of their body.

At the end of the time, I ask potential clients how that was for them, say that they can decide to set up another appointment now or call me after they think about it and that, if they decide to continue, I will give them a copy of my manual, Building Supportive Community, with Chapter Four on Focusing alone, and my two Focusing training tapes for practice at home.

In future sessions, clients can spend about ten minutes catching me up on events from the week if they wish (this often serves the same function as "Clearing a Space"), and then I have them close their eyes and go inside.

**DIRECTIVE INTERVENTIONS**

So, what's different from regular Focusing sessions? The degree to which I am willing to direct clients toward the material to Focus upon, sometimes arguing quite strongly that they try out my suggestion even if they are afraid to do so or don't think it is valid.

As a licensed psychologist, I operate under particular constraints. Where I live, most people have health insurance which allows approximately thirty one-hour sessions of psychotherapy. I would feel irresponsible if I did not them to the possibility of forgotten sexual or physical abuse in childhood as an underlying problem causing symptoms of distress, even if they came to me for some other reason. I don't always

have time to wait for the body process to get to problematic material on its own.

Here are some situations where I am directive:

(1) A client says, "I don't need to close my eyes. I just want to talk to you." We may explore this as an issue, but I might also say, "Sometimes people are afraid of what will happen if they close their eyes. I want you to know that you can open them if it's really too hard. I also want you to know that noone has ever fallen apart and been unable to leave my office. I'd like you to try closing your eyes and Focusing. I'll help you." I do this with clients thought not to be psychologically sophisticated enough for Focusing. Often, it works perfectly well. Sometimes they choose not to work with me, since this is what I do. But this can be true for "sophisticated" people as well. It doesn't happen often and is a good indication that a Focusing approach will be difficult for someone, eyes open or closed.

(2) A client has been referred to me by a physician because of depression related to chemotherapy for cancer. She clears a space, making a list of issues she is carrying in her body. The cancer/depression issue is not on her list. I say, "And I know you are also carrying the issue about cancer. I wonder if you can feel how you are carrying that in your body...it might just be that you can't handle looking at it, and we can work with that feeling."

(3) A client comes in every week and spends almost the entire session clearing a space. We never have time to go on to work on anything. I will point this out and say, "Can we take one of the issues from last week and go into it?"

(4) A client consistently only wants to Focus upon positive feelings. I work with this as an issue, but point out that therapy is about working on things that hurt, that are unresolved, as well as developing happy feelings.

(5) Often, when a client goes inside, there is nothing. I will gather information before Focusing: "Any important incidences during the week? Any thoughts about what we talked about last week? Any dreams?" Often, dream images clue me in to what s/he may not consciously be able to address. This conversation functions like clearing a space for some people, and the information gathered helps me guide them toward potentially important material, if they don't find anything when they go inside.

(6) The week before the person touched into incest material. This week, that is not on her list, and the things on her list seem superficial, without much feeling. I may say, "Last week we touched into some really scary stuff around incest. Unless something else on your list is really pressing, I think that we should try to find our way back to those feelings and keep working through it. It's the only way to get free." In fact, this is the intervention that I make most often, carrying a theme from one session to the next.

(7) A client is Focusing and comes upon some tears or anger about an issue. S/he goes on to another issue, which doesn't seem to bring up much that is "implicit." I may say, "There seemed to be a lot of unresolved feeling around _____. Can we go back there?" I will do that over and over at appropriate times in the therapy until the issue has been resolved.

(8) A client Focuses, eyes closed, for a while, then comes out to talk. I will talk for a while, then I will say, "But I'd like you to close your eyes and try to touch the feeling about this." I do this again and again in the session, backing off with sensitivity to the dignity and self-empowerment of the person's own process but coming back again in recognition of my responsibility as therapist to facilitate healing.

## REACTIONS TO CLOSING EYES

Many clients feel more at peace and less embarassed when they can work with their eyes closed. However, simply closing the eyes can have an overwhelming effect upon some people.

One time a client was talking in a conversational style, removed from feeling. When she closed her eyes for the first time, she immediately flushed all over with tearful emotion. She could find no words or images for the feeling. In future sessions, she would close her eyes and the room would immediately start spinning. Another

person closed her eyes for the first time, felt a rush of tearfulness, and said she was afraid she had been sexually abuse. This had not come up as an issue for her before. Another client closed his eyes, focused upon a childhood incident, and the room began spinning. The spinning continued for several minutes after he opened his eyes. In all of these instances, severe physical or sexual abuse in childhood eventually came out of continued Focusing.

When people have such a strong reaction, I let them say whether they can tolerate sitting with it and asking, "What's this about?" or whether they need to open their eyes. I may suggest they open their eyes if they seem to be "sinking into," rather than relating to, a feeling. I will say that such a strong reaction is the body's way of protecting them from information which they could not handle as a child, that they are bigger now, that I am there to help, and that we will slowly work on feeling safe enough to explore the memories under these reactions. All the techniques for "finding the right distance" come into play here.

Strong bodily reactions may come up during any point in Focusing upon childhood situations. Clients may begin to hyperventilate, to cough, gag as if throwing up, become nauseous, start to shake. All of these are indications that the body is unblocking painful material.

It has been my experience that the body can be

trusted to pace itself through scary material. I usually ask people to continue Focusing upon the reaction as long as they can. However, if they back away, my job is to create safety in the moment but to store the information. Later, I will say, "I want to go back to the place where you started coughing. It was about..." If they cannot go deeper then, I will store the information and bring us back there sometime. I see this as part of my job as a therapist--to see what clients cannot see, and to help them to see it.

**INTERPERSONAL ISSUES (TRANSFERENCE)**

Interpersonal issues with me are greatly reduced using the eyes-closed Focusing method. The eyes-closed format selects clients with a higher level of self-awareness. They also often come upon the issue while Focusing and describe it in terms of their own inner process: "I'm sitting here wondering what you think of me...That reminds me of spending my whole life doing that;" "I got scared when you said that...it sounds just like the critical voice inside of me."

If transference issues are brought up in a more interactional way ("I'm not sure Focusing is good for me;" "I'm not sure I can trust you enough to go inside;" "You're trying to control me," etc.), I work with them interpersonally and interpret transference material, if necessary. However, if at all possible, I ask people to

close their eyes, go inside, and look for the feel of the interaction in their body and work with it in a Focusing way.

I say that I am also willing to Focus on my side of the interaction, that, of course, there are two sides, each of us is contributing something, but therapy for them right now would be to look at their feelings in a Focusing way. I say I'll look at my own side in my own Focusing turns, or, if they insist, right in their session if they want to spend some of the time listening to me.

I used to enter into the transference in a more interpersonal way, living the feel of the interaction in my own body and then trying to tell the client about it: "I feel like we're having this push/pull, that maybe you had that with your mother. Does that seem familiar to you?" (McGuire,1983). However, this hasn't felt good for my body anymore. I'm doing too much of the work. I want to get the interaction back inside the client for them to Focus upon instead of acting it out with me.

I am open to and skilled in working with the transference, and I think that a therapist must be able to handle such interactions. However, I no longer believe that is the only way to resolve internalized parent/child dynamics from childhood. The distinctions between the Inner Child, the Inner Critic, and the Inner Nurturing Adult or Listener, facilitated by eyes-closed focusing,

provide another format for healing these dynamics.

While I try to avoid open-eyed, conversation-style interaction, my clients experience me as very present during their closed-eyed sessions. They know that I cry for their Inner Child. I will touch them if I think touch is appropriate. My reflections are warm, embracing, and welcoming of their pain. Closed-eyed sessions actually seem to allow more intimacy between us. I have conversations directly with the Inner Child. No wall of words distances us from each other.

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