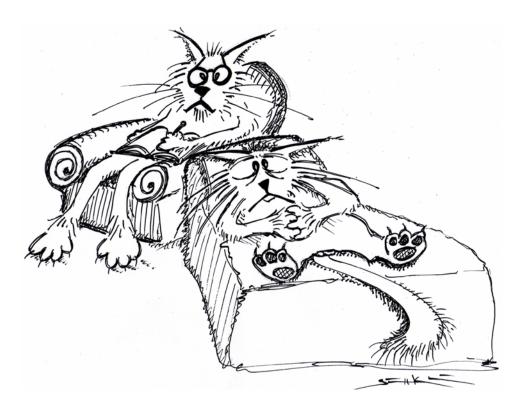
What's Up with That?

Katy Byrne, MFT, psychotherapist in Sonoma, CA, wants to know: What's Up with That? She's the author of *Hairball Diaries: The Courage to Speak Up*. (Getting out the "hairball" is what she learned from her cat, Einstein—that it's a relief to express what's bothering us!)



Conversations with Katy On Therapy How To Move Clients Forward

These times are challenging, and getting help must work as quickly as possible. So, I've condensed my thoughts about what heals us.

The most important element in working with clients is inquiring about what the client *wishes*. This encourages a view of life that is proactive and causes them to identify less with a victim stance and more with forward movement. The intention is to guide the client to more positive self-referencing and less dependency on the therapist. *Wishing* is so important because it helps move the limbic brain (fear-based, animal instincts) into a more optimistic view of the world, improves the immune system, and encourages vitality.

On the other hand, I often begin counseling sessions by playing Sherlock Holmes with my client, asking directly, "What is the problem?" Then, together, we uncover it from there. The issue could be, "I have no money and I'm scared." So I ask again, "What's the biggest problem? Is it lack of money? Is it fear?" Then the responses can deepen—"I worry about being a failure," etc. The presenting issues can vary from job loss, to loneliness, but often, there is a central issue underneath. Without identifying the core problem, there can be no solution. Think of it this way: If you know your faucet doesn't work, then you can begin to fix it or decide to leave it the way it is. But, if there is just a vague sense of something wrong in the kitchen, you could be wandering around in there for years! (Too frequently the case in psychotherapy.) Once you've agreed with your client on what the assessment is, then you can, in tandem (or en masse with couples, families or groups), dialogue about possible solutions. For instance, if the problem presents as a divorce—by asking again, "Is that the problem?" it may evolve that the real issue is having enough money within the relationship, wanting to save the marriage, or an early issue from childhood.

Always working as a team with my clients lessens resistance and empowers them. The old "top down" model—therapist on a throne and client lower—is counterproductive. Second, it's imperative to know the client's strong points and to work to enhance them by repeatedly reminding them of their strengths and of what they love, whether it's tennis, sales, dancing, or singing with their family. Last but not least, the cure is in honoring the client's deepest *desires*. Having studied with Insoo-Kim Berg, primary founder of The Solution Focused Brief Therapy Association, I know what it is to quite clearly see a physical change in a client—a new glow, a straightening in the chair, a smile—some kind of affect that signals we have arrived at *their most cherished life force*.

It's important to note that the *wish*, in and of itself, is not the cure. We all know that getting the perfect job, car, or partner will not heal us. Defining *wants* works by reinstating the solid self—and hope. It offers the client validation instead of ruminating on loss and the inadequacy complex. As Dr. Martin Seligman says about pessimists in *Learned Optimism*: " ... (they) become more passive when trouble strikes, and they take fewer steps to get and sustain social support ... Everyone has his own point of discouragement, his own wall. What you do when you hit this wall can spell the difference between helplessness and mastery, between failure and success."

So, identifying their presenting problem, naming their primary strengths, and their wishes—these three are first. We then collaborate on a "tool kit" they will have with them always, keeping in mind their interests and abilities and respecting their own "treatment plan." From this, miracles often emerge. (Every client determines a different tool kit, for example: Some read spiritual literature,

some find bicycling renewing, others attend meetings, etc. Many need to remember to speak up more often.) The tool kit gives them concrete actions they can take on their own, outside of therapy, and it alleviates a sense of dependency on the therapist because the tools go with them, long after therapy is over.

In the old way of viewing therapy, we were too quick to label the disease and to pathologize the client. But now, creating positive goals and practicing behavioral changes help to relieve depression and inertia. And, after exploring the deeper problem in closed chambers, their needs emerge as a light shining in the dark. Immediately, as the client's strengths and desires are revealed, internal shame falls off the facial features. When choosing resolutions comes from the client, it activates their own inner advocate and strong core, and it alleviates leaning on the therapist in the long run. They then begin to trust their internal *adult* who knows what is needed to move forward.

It amazes me how clear people are when they feel safe enough to connect to their own souls. Clients know what they need whether it's recovery, harm reduction, a mate, or a job. I've seen couples reconnect by finally *hearing* each other; and I've witnessed frightened adolescents have breakthroughs from their love of basketball, because it led them to the social connection they needed.

The pivotal reason that the "wish questions" are transformative is that the small inner voice, the little one that was never heard, can speak. Often, grief, self-loathing, or shame will emerge: our collective world discourages self-empowerment, so this process is both personal and political. But, the inner child knows what she needs, and with support, *can* speak up. When I was working on my own eating disorder and finally lost 100 pounds, I would often stand at the refrigerator and ask her, "What is it you want?" Most often, she'd demand, "Just open the fridge—I want pizza and everything else in there!" But, if I inquired again gently, though it took a while, she would sometimes sob and say, "I want to fit into my jeans and play with the other kids." This kind of dialogue went on many lonely nights. But, more and more, I'd choose to get in bed in my flannels, happy with my teddy bear, a good book, and warm milk and crackers.

It's imperative that the *client* chooses solutions with the therapist's inquiry: "What helps you?" Later, the counselor can "check in" on how the new tools and beliefs are working. Good psychotherapists keep their eye on the ball: the client's strengths and goals. Why is this so essential? So that the "inner advocate" can grow, and so that the infantile self does not run the client's life any longer, but rather, both the small child and the part that is concerned about self-care are integrated.

Interventions are infinite in number and can include: reframing, empathy, contextual change, transference, self-disclosure by the therapist in behalf of modeling, challenging belief systems, underlining and disputing the inner critic, encouraging twelve-step programs (upon agreement with the client), interpreting the defense mechanisms, sand play, role playing, gestalt work, group therapy, medications, and many more. For this article, I am focusing on several points that I think are pivotal.

Brilliant thinkers in the field of psychology are many, whether Whittaker, Jung, Bowen, Schnarch, or other great teachers. I firmly believe that listening deeply to desires and repeating strengths as they emerge is the most helpful approach. The positive *mirroring* they never got enough of, when offered repeatedly, reinvigorates clients, building mastery and supporting their essential natures. By mirroring abilities, passions, joys and successes, the therapist helps build their internal esteem.

When working with couples and singles, I follow Harville Hendrix PhD and his wife Helen LaKelly Hunt PhD. I believe that couples primarily have breakthroughs while learning to dialogue effectively. I agree with Hendrix that deep conversation is also the primary way for the human species to evolve.

Sounds easy? It isn't. Most people tend to bolt, shut down, blame, eat, drink, get busy, judge or give up in the face of conflict or ambivalence. However, mutually exploring feelings and discussing interpersonal problems in a loving and compassionate way makes it possible for people to experience incredible intimacy and joy. In my book *Hairball Diaries: The Courage to Speak Up* I discuss ways to communicate compassionately—using "I statements," identifying and stating deep needs, and making yourself vulnerable are the main ingredients.

How am I helpful to single people? Usually there is some way that singles do not connect well with others. By talking with them, it is pretty clear in a short time where the "disconnect" is. It can be as simple as that they need better teeth or a haircut (through a lack of self love, they fail to take care of themselves), or they talk too much, too fast, make no eye contact, or they don't know how to listen or show sincere interest in other people. In American society, we tend to withdraw when we're sad or need a space to express ourselves (I call this "getting out the hairball"), so I also recommend safe and supportive therapy *groups*.

In my own life, as a young girl, I developed an eating disorder—I could not *stop* eating and was physically ill from it. I had counseling, participated in groups, jogged and meditated, but it wasn't until my therapist asked me, "What is it you *want?*" that I was able to blurt out, "I want to be loved!" Within a few months of that session I'd dropped all my extra weight and had a boyfriend—and I've

never gained the weight back. I could hear my own yearnings, which empowered my resourcefulness. All of the other work I'd done helped me understand the contents of a calorie, the need for exercise, and insights about my habits, but *this* was the pivotal moment because the "wish question" took me outside my old box of believing I was a victim. I was redirected, from sublimation and frustration, towards the real desires of the child inside me, who had felt undeserving until she was supported sufficiently. Healing power lies in speaking from one's heart. **It is through our voices that we are found.**

In summary, when working with clients:

- Pay close attention to their strengths and mirror those back often
- Notice what works for them and repeatedly encourage those things
- Offer a safe, respectful and deep listening place for them to explore their fears, feelings and wants
- Help them to internalize, for life, tools and beliefs that are useful to them.

All of this opens the client and allows joy to pour in. It's not so imperative that goals and wishes are achieved, as that they are re-owned, allowing a new vitality and ending inertia. "Healing power lies in the hearing of our own voices," Dana Jack says, in *Silencing The Self*: "Through voice, we locate ourselves in the world and can be heard and found." This was why I originally wrote my book *Hairball Diaries: The Courage to Speak Up*. I found myself—through speech! Upon hearing my own truth, insights flooded through and shed light on my next steps toward a fuller life.

I don't mean to overly simplify, because there really are dozens of interventions that are helpful to know, and the better you understand them, the more insight you have to offer as you, the clinician, play Sherlock Holmes, but more of these are: modeling, transference, disclosure (only when helpful to the client), reframes, validation, contextual changes, behavioral modification, identifying the beliefs that undermine, finding local resources for more community support, twelve-step programs, attachment theory, object relations work, and an infinite array of others. Whether you prefer Whitaker, Kohut, Bowen, Snaarch, Van Der Kolk, Jung, or another approach, in the end, never forget that respectful listening and letting the client say what they wish for are key to finding a plan together that works.

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