MAKING PEACE FROM THE INSIDE

Rob Parker, Ph.D.

1. INTRODUCTION

It's 2:45, and school has just ended. A stream of teenage boys pours from the classroom; some running, others walking quietly in small groups, a few walking alone. Most are in their mid teens, but a 12-year-old is walking quietly by himself down the hallway. Suddenly, a muscular 15-year-old appears out of nowhere and slams the younger boy against the wall. Almost as quickly, three large men appear, separate the two boys, and lead them off in different directions. The younger boy is crying; the older boy loudly protesting his innocence, saying that the younger boy "was messing with me" and "I'll kill him if he tries it again."

It happens that the older boy, John (names and other details have been changed to protect confidentiality), frequently needs to "defend" himself from smaller and weaker children. But this is not his most serious problem. John is in an Alternative to Detention Program: like all of the boys in this school, John has committed an offense serious enough to merit approximately 2 years in juvenile detention, but instead he has been placed in a residential treatment program as an alternative to detention. Basically, the judge decided that his crime might have been related to emotional problems, and he should be given a chance to receive treatment instead of going to jail. The treatment program is intensive: milieu therapy 24/7, group therapy three times a week, individual therapy one to five times a week as needed. The staff are extremely talented and dedicated, and the boys are given ample opportunity to look at themselves in a supportive and caring environment. But they are also constantly held accountable for their choices. After trying this out for awhile, some boys decide that they don't want to work so hard, and would rather be in jail. And of course, those boys are given their wish. Anyone who is not benefiting from treatment, and especially anyone who is not at least trying, must be sent to juvenile detention. There are too many others who could benefit from treatment, but are going to jail instead.

For all of these reasons, the attack is even more serious than it might appear at first. Violence in this program is almost unheard of; and almost all of the incidents in the last 2½ years have involved John. Further, John refuses to be accountable for his behavior. In a program based on honesty, he makes up stories whenever he is confronted about his behavior, even if there are witnesses. When pressed, he creates ridiculous stories, for example that the younger boy was "messing" with him. In fact, he makes up stories even when it isn't necessary. He brags about exploits and accomplishments (which are clearly made up) to such an extent that his peers think he is strange, and avoid him. In group therapy, when his peers try to warn him that his behavior could send him back to jail, John says adamantly that he is not afraid of jail. In fact, he insists he is not afraid of anybody or anything, including death. He lies to himself, and lies to everyone around him.

The normal length of treatment is 18 months, but John has been in treatment for over two years, and he does not appear to be taking treatment seriously, nor does he appear to be

benefiting. And, he has been warned that he will be taken out of treatment and sent to jail if he continues getting in fights. Therefore, his attack on the younger boy is quite serious. It could be a turning point in John's life.

2. THERAPY

In therapy, it is the same thing. John insists that he is OK, and everybody else is messed up. John has no reason to change his behavior, and he is comfortable with any consequences, including death. There is nothing for him to talk about in therapy, because nothing bothers him. John has gone through several therapists, and no one has been able to reach him. His latest therapist reports that John is almost impossible to talk to, because he lies about everything. The thrapist doesn't know what to do, and has asked me to see John.

As the clinical director of program, I must decide whether John can benefit from still more therapy. John has been in our program longer than anyone else and he has benefited less than anyone else. The staff have tried their best to help John, but they are frustrated, and annoyed with me for allowing him to stay and to continue disrupting our program. At times, even I am not sure why we are giving him so many chances. But I also know that in spite of his outward show of toughness, John could not survive in jail; and I sense, somewhere under the veneer of lies, a real person who desperately needs our help.

In addition to traumatizing others, John has been traumatized himself. As the saying goes, "hurt people hurt people." John grew up with domestic violence and long periods of emotional neglect. He lived in a dangerous, inner-city neighborhood, but as a child he played outside on the sidewalk to escape the violence and neglect at home. We suspect that he was frequently attacked by older boys, although it is difficult to be sure, because nothing John says can be trusted, and none of the adults in his life were paying attention. But John's body language speaks eloquently, that he is lonely and frightened, and has been all of his life.

John's life is like a stuck record. He keeps playing the same tune over and over again. However, as he gets older, this tune becomes increasingly dangerous for others and also for John. It is clear to everyone but him that his aggression and his lying, are going to stop very soon. The only question is whether it will stop because of therapeutic intervention in this program or lethal intervention in prison or on the street. John appears to be frozen, living in a way that is untenable, and yet unable to change. He has given us every reason to give up.

And yet something doesn't fit. Occasionally in group John shows considerable sensitivity, for example by helping another boy see how he is using anger to avoid dealing with a difficult issues. And when John describes how tough he is and how he isn't afraid of anything, there is a trace sadness in his voice, as if he doesn't really like what he was saying. In spite of all the problems, it feels like there is a person inside who wants to stop the violence and the lying; someone who wants help.

3. OLD ASSUMPTIONS

I began seeing John in early November. His previous therapist was at the end of her rope, and John was either getting therapy from me or going to jail. But John had already been

through several different kinds of therapy, with different clinicians. It was clearly time to stand back and rethink what we were doing. My own interest in psychotherapy has always overlapped with an interest in philosophy, but Gendlin's Philosophy of the Implicit has helped me understand my own assumptions in a new way.

All forms of psychotherapy involve assumptions, but usually these go unexamined. In order to do psychotherapy we must decide on some level what kind of therapy we are doing, and why. This involves more basic questions such as, What is therapy? And, because therapy is about people, we must also ask, What is a person? It can be useful to ask such questions, especially when therapy isn't going well.

Surprisingly, many apparently different schools of Western psychology share similar assumptions. These assumptions are quite basic; I didn't have to learn them in graduate school, because I had already absorbed them by growing up in a Western culture. Three key assumptions are, 1) that human personality or behavior is the result of *determinate entities* such as egos or schemas, 2) organized by *external relationships* such as scientific laws or theories, and 3) the entities and the relationships can be *described objectively*.

3.a) Determinate entities

Many psychological theories concern structures or processes such as drives, introjects, schemas, neuroanatomical structures, etc. Usually, these entities are assumed to be *determinate,* meaning that they have fixed identities. This assumption is essential in most theories, because without it we wouldn't be able to reliably identify what we are talking about, and the theory would be useless. However, necessary and sensible as this assumption is, it does not fit human experience very well. In fact, we think about experience in many, and contradictory, ways. Science is a good example of this; our understanding of gravity has gone through significant changes in the last 400 years, and it is questionable whether Copernicus, Newton, Einstein, and quantum physicists, were referring to a single determinate entity when they used the word "gravity". Similarly, various schools of psychology use very different entities to explain human behavior; there is continuing disagreement on what we mean by "personality" for example. Furthermore, we find that the meaning of specific terms such as "ego" often changes over time.

The assumption that human beings can be understood in terms of determinate entities is dubious at best. And yet, somehow the world has an order. Although our concepts (the determinate entities) change constantly, things continue to fall when we drop them, and people behave in ways that are ordered enough that we are able to live together. It is clear that there is an order to the universe, and that this order does not depend on our concepts about it.

3.b) External relations

Western science tends to look for causes; when someone gets sick, for example, we ask why, and we answer the question in terms of germs or some other cause. Psychology, modeled after the natural sciences, follows this pattern and assumes that behavior must have

causes. In fact, it is difficult to imagine a science that did not discuss causes. So it is almost second nature to ask what "makes" John lie so much.

But so far, causal explanations have not had the kind of success that would be necessary to place psychotherapy within the natural sciences, and the reasons may be fundamental. Cause and effect are examples of what Gendlin calls *external* relations. The cue ball hits the eight ball, causing it to roll into a pocket; but there is nothing intrinsic to the cue ball or the eight ball that made this happen. The relation of cause and effect came from outside.

By contrast, consider why you go to see a particular movie. The subject of the movie might interest you, but where did that interest come from? It might relate to books you've read, people you've known, issues in your life, experiences you had as a child. Many such factors might influence your decision to see the movie, but notice that their relations are internal: each one is meaningful in relation to all the others. Meaning is not made up of individual, determinate entities. Meaning is holistic. Everything is an aspect of everything else. And the relations are internal. The meanings of past experiences resonate with each other and with present experience and choices, in a way that is internal.

This is basic to human experiencing. Instead of external causes impinging from the outside, we experience ourselves as carrying-forward situations that are related internally, by their meaning to us. The reasons why I decide to write a paper, for example, could be multiplied endlessly, and stated in various ways (in other words, they are not objectively definable, determinate entities). But more than that, these reasons are internally related to each other, forming an intricate mesh or matrix of meaning, which is my reason for writing. For example, something my grandfather said to me when I was a child might interact with something I read in the newspaper last week, but the interaction is not causal in the sense of two chemicals interacting according to determinate scientific laws. Instead, my grandfather's words and the newspaper article are internally meaningful in a way which I can feel, but can not completely specify with words. They don't cause anything, but they resonate with each other in a way that changes each of them, and also influences my writing of the article.

3.c) Objective description

The assumptions of determinate entities and external causes both come from a more basic assumption, that knowledge is objective. This too, is a pervasive assumption in our culture. Scientific knowledge is supposed to be equally valid in all times and places, and verifiable by anyone who has proper training. Such objective knowledge cannot depend on any particular individual, with particular motivations and history. Instead, we create a kind of fictional "idealized observer" who is not influenced by culture, history, or personal motivations. Such an observer could then look at a universe that is objective, i.e., that does not include the observer (Webster defines the word "objective" as "independent of the mind"). The observer looks from the outside, making sense of everything, but the observer's sense-making is itself not subject to causal explanation.

This creates a problem, because there is no idealized observer. All observers are real people and part of nature. When I was in grad school, one of my professors, a behaviorist,

asserted that all human behavior is a function of reinforcement. So I asked him, "what makes you say that?", in other words, "are you saying that because it's true, or because of your behavioral conditioning?" The fundamental problem was that his deterministic system couldn't include him, because he had to be the "idealized observer" who stayed outside and made sense of everything. His solution to the problem was to ask me to leave his office. Gendlin's solution is to develop better concepts, concepts which include us.

4. NEW THINKING

John, the living human being, is trapped inside our assumptions. We ask, "what is wrong with him?" assuming there must be a determinate answer. We ask, "why is he acting this way?" as if there were an external causal answer. And we want to provide some treatment to change him, as if he were something that we (idealized observers) could objectively understand and change. Meanwhile, John is not getting the help he needs. He stands to ruin his life, and the lives of many other people. We need to think about this in a new way.

Gendlin (1964, 1997) offers some useful ways to think about John. He does this by creating a model of living and of the human body, such that "one of them could be ours". We leave behind the world where we are the observers of objective entities (egos, schemas, etc.) that are subject to outside forces (theories of development, of reinforcement, of psychopathology, etc.). We move into a world of experiencing, a world that includes us!

4.a) Life is ongoing process

Any summary of Gendlin's model must necessarily be misleading because it must be couched in the old language which carries with it the old concepts and assumptions. For a fuller treatment, see Gendlin (1997).

Briefly, Gendlin understands life as process: living is an ongoing interaction between body and environment. The environment participates in this interaction as much as the body does. For example, lungs and air are both aspects of the single process of breathing. Gendlin means this in a very basic and literal way; for example, our breathing depends as much on a certain kind of atmosphere as it does on a certain bodily structure. Similarly, our eyes, our skeletons, our digestive systems, developed and now function as ongoing interaction with a particular kind of environment. If creatures from some distant solar system were able to study a single human body, they would be able to infer a great deal about planet Earth: its size, the composition of its atmosphere, the approximate temperature, its distance from the sun, the kinds of plants and animals that growth here, and so on. In this sense, we can say that the body IS the environment.

This means that human beings, including you and me, *are* ongoing interaction. We don't exist separately from our environment and then start interacting with it. We *are* interaction between body and environment, so we (like all living things) are both body and environment. And for humans, the environment includes other people, language, and culture (although I am just making a bald assertion here, Gendlin, 1997, shows this in considerable detail). Thus, my language, culture, friends, family, and job, are as much a part of me as food or air.

4.b) Furthermore, living is more than just explicit structures; life is implying.

Living is more than determinate structures. Living process has a particular nature: it always implies a next step. At each moment, we are always in the middle of something that implies a next step, for example, breathing, finding food, eating, digesting food, interacting with others in various ways, or trying to understand Gendlin's philosophy.

But what is implied is not some determinate goal that could be specified by an observer. For example, hunger does not imply some determinate goal, such as a hamburger. Hunger implies something that will change hunger, so that we are not hungry anymore.

This is the meaning of *carrying forward*: the next step, the change implied by the living process, is whatever carries the process forward. But this implying (hunger) can be carried forward in many ways. We could eat in a nice restaurant or eat at home, we could eat snails or seaweed, we could receive intravenous feeding. It is not that hunger is vague or imprecise. In fact, the implying is extremely precise: some things will satisfy hunger, others won't, and our bodies are very clear about which is which. The implying is actually more precise than language and concepts. And if this is true for eating, it is even more true for social interactions.

This is one reason that traditional "objective" concepts fail when we apply them to living. Human experiencing has an extremely intricate internal order which is different from the external order imposed by the "idealized observer' and his/her "objective" concepts. Experiencing is an ongoing, meaningful process: the concrete world we live in implies all of the next steps we might take. Various objects (refrigerators, cars, trees) imply what we might do with them. Various people imply the relationships that we have our might have with them. And so on. Thus, just as our bodies imply a certain kind of environment, so also our language and behavior implies a certain kind of environment. All these implyings function together (they *evev* and *focal*) in a single implying which is the ongoing "feel" we have for what comes next in this specific ongoing situation.

5. THE IMPLICIT INTRICACY

The process of living is a continuous carrying forward. At each moment, there are innumerable processes, each one "knowing" in some way how things are going, and each one implying a next step. All of the processes inform each other (*interaffect*), so that a single next step is implied (*focaling*). If there is a loud noise, or if the lights go out, that changes the situation such that carrying-forward means finding out what is wrong, then maybe getting some water and then maybe finishing my thought. In other words, a situation has many implyings, which interaffect each other and focal into a next step. So, for example, as I write this, I might be thirsty, but I might also want to finish writing a thought before I get something to drink; so in this situation, carrying-forward might mean finishing this thought and then getting a drink of water.

Implying is rich and intricate in a way that defies linear logic. Consider the rich mesh of implying that focals into my wanting to drink water rather than something else: childhood experiences, many associations with water and other drinks, current availability of

different drinks, and much else. My body implies something that will quench thirst. My environment includes water, soft drinks, wine, milk, coffee, tea, etc. All of these will quench thirst, but there are other implyings being carried forward also. Water, for me, might imply purity, clarity, simplicity; memories of camping trips where we drank pure glacier water; times when the city flushes out the water mains and our water is rusty; and much else. Each of these implyings carries me forward in some ways and not in others; and each of these implyings also brings other implyings. For example, camping trips might imply freedom, self-reliance, independence. Each implying that we name, brings new ones, so that we could go on forever.

Furthermore, the total mesh of implying (the feel of what "all this" is like) is far more intricate than just a choice of water over something else. Consider just a few of the other implyings: wanting to finish a particular thought, or having that particular thought in the first place, or wanting to write an article, or being interested in philosophy and psychotherapy... Each of these implyings would lead in other directions, to more implyings. This intricate mesh of implying exists as a whole, with everything already in a meaningful relationship with everything else. Everything functions together, implicitly present in one explicit choice to drink water right now.

6. EVEVING

All of this can help us think about John in a new way. John's living is an ongoing implying that carries forward in the best way possible in the situations he is experiencing. So, if we look closely at John's language and behavior, we might be able to understand something about his world. But this understanding wouldn't help us or him, because our concepts cannot capture the intricacy of this implying which "wants" to carry forward. Of course, John's concepts cannot capture this intricacy, either; if they could, he would be carrying forward instead of being stuck. Gendlin's philosophy also gives us new ways to think about this stuckness.

Have you ever noticed how memories come flooding back when you visit your old neighborhood? The very walls and streets seem to carry memories of that earlier time. It is the same with our internal neighborhoods. If we want to remember someone's name, we think of the context in which we know that person: the job, shared acquaintances, things we have done together, etc. All of the meanings are implicit in each other, so the more we think of things that the imply that person's name, the more the name is implied, until finally the implying carries forward when we remember the name.

The converse is also true. If we don't think of things that imply the person's name, we are likely to forget the name.

7. FROZEN WHOLES

Consider then, what happens if I had nearly drowned during a childhood camping trip. Camping might then imply something like extreme helplessness, fear, and need for safety.

Thinking about camping might make me feel very anxious; and thinking of things that imply camping might also make me feel anxious. I might avoid thinking about camping, and perhaps also avoid thinking of things that imply camping, such as camping equipment, wilderness, swimming, and so on. As I went down any of the myriad pathways toward meanings that imply camping, there would be a growing sense of danger and helplessness. Increasingly, I would feel a need for safety and control. Such an implying would be carried forward by thoughts and actions that create safety and control.

Camping and related meanings would tend to drop off of my map, not because I avoided them, but because I carried forward in different directions. So for a drink, I might choose coffee instead of water, especially if coffee implies something like hard work and competence. And I would do this without knowing why, precisely because I wouldn't be thinking about it.

I would then have what Gendlin calls a "*frozen whole*". In situations where something implies something which implies something which implies camping, I feel uncomfortable; and the feeling of discomfort increases the further I go down that path. Very quickly, I will feel danger and move toward safety. I won't experience much that relates to camping, because I am carrying forward in different directions.

As a result, my experiencing of those situations is very limited. I feel an implied need for safety, and I move toward safety. The usual rich intricacy of implying is not available to me in these situations, because I don't feel "into" them; I feel "away" from them. Other people would say that I have a stereotypical reaction to a range of similar situations. But my own experience would be that each situation implied danger, so I carried forward by doing something to make myself feel safer.

All of this is felt in the body. Living IS body-interacting-with-environment, and living process— including us—*feels* the ongoing interaction with the world in the process of carrying forward. Our bodies "know" what is implied, and whether what was implied actually occurred, whether or not we have the concepts to think about it.

Using the word "feel" in this particular way, we can think of carrying forward as an interaction between feeling and occurring which changes feeling. For example, if I stayed with the *feel* of camping, perhaps by focusing ("what is it like?"), or by actually going camping and noticing what it is like, I might experience the *feel* in its full intricacy, and that full intricacy might then change (would carry forward). But in this case, the feeling is frozen, because it never interacts with words or with actions. Nothing gets near it. It functions implicitly in the situation, but it, itself, never changes because it doesn't interact with anything.

This is somewhat similar to the traditional concept of "the unconscious" but it has some important differences. For example, we are not concerned with determinate contents that are repressed and stored somewhere. Just as hunger implies food (more exactly: whatever carries hunger forward), danger implies safety. So I want safety and I move toward safety. I am not repressing anything, and there is no censor keeping anything out of my conscious awareness. As Jerome Bruner observed in a different context, I don't need a filter to keep oranges out of my basket when I'm picking apples.

Experiencing is the issue. No interpretation or explanation will help, because I will hang onto the words and avoid the experiencing. Similarly, it might not help to actually go camping and relive the fear, because I might experience just the fear and not the camping.

A number of therapeutic approaches might be helpful here. For many years, it has been a puzzle that apparently different forms of therapy seem to be similar in their effectiveness. Now, a growing body of research suggests that therapeutic improvement correlates with experiencing level in many (perhaps all) effective therapies (Hendricks, 2002; Watson and Bedard, 2006). Instead of being swallowed up in re-living something, we can hold it in front of us ("oh, it's that feeling again") and very gradually interact with it ("what is this like?"). Although it appears that many therapies do this in some way, the therapist who is trained specifically in Focusing has some distinct advantages: when one understands the principle involved, one can do more of what is helpful, less of what is unhelpful, and one needn't be limited to any specific technique.

8. RETURN TO JOHN

By the time we began individual therapy, I had been seeing John in group therapy for close to three years, so we knew each other well. Throughout group and individual sessions, he lied constantly, could admit no weaknesses, denied all feelings, and confabulated shamelessly when confronted. He did this with me, with other therapists, and with peers. He was desperately trying to live a lie, hopelessly out of touch with his own life. And he was dangerous, both himself and to others.

Danger implies steps toward safety, for therapists as well as for their clients. So, just as it was difficult for John to be open to the full intricacy of his situation, it was also difficult for me. I find it hard to trust the life-forward process of someone who has already hurt others, and who shows every indication of of doing it again. Part of me wants to find safety in concepts and control. But if I had decided what was wrong with John, what needed to be fixed, I would have become an "idealized observer" who stood safely apart from him. By providing the "treatment" I thought he "needed," I would have gained the illusion of control, I would have but lost the living human being.

And yet, therapy is very much about trust. Whatever implying lead John to carry forward in such a way, that implying was part of life. Ultimately, then, my decision was about whether to trust life; and the only possible answer was "yes!" This is what I love about therapy: There is always a moment when you have to put aside understanding, and trust life. Sometimes everything seems like it is about to fall apart and needs to be rescued; then trust is like bungee jumping. Other times, trust is a decision to go straight into the center of something scary, without trying to fix it, knowing that it will be okay. For me, this is the meaning of unconditional positive regard. Ultimately it's a belief that life is bigger than we are, and has its own way forward.

I needed to be open to whatever John was experiencing, without prejudgment, concepts or treatment plans. Especially because the standard approaches weren't helping, I needed to learn from him.

When we started individual therapy, John already trusted me on some level. This was apparent in many small ways; for example, he listened to what I said in group and would sometimes say it back to someone else in a different context, in his own words. But his ongoing behavior problems made it clear that we were not connecting, so my initial goal was to listen more deeply, to learn as well as I could how he was experiencing the world.

For the first few sessions, I listened to many tall tales and unlikely excuses for problematic behavior. I listened seriously to John, the person, while sharing honestly but without challenge any difficulty I had believing specific things he was saying. In the atmosphere of trust we had already built, John was occasionally able to acknowledge some exaggerations. This was not totally new; over the previous two years, he had sometimes admitted lying when confronted with irrefutable evidence. But for us, right now, this felt important because we had traction: he was acknowledging something real.

We both needed to learn more about this "something real." Somewhere there seemed to be an implying which wasn't carrying forward because it wasn't being experienced or acknowledged. We needed to learn more about what it was like to be John, and lying seemed like a good place to start. By this time, I was really curious to learn what sort of implying was carried forward by lies, especially when they were so spectacularly unsuccessful. To explore this, I gave him a homework assignment to write down a list of reasons why someone would lie (not why John would lie; that would be too threatening and would keep him from the actual experiencing).

In our next session, John produced a list of several reasons someone might lie: to feel strong, invulnerable, liked, etc. John seemed to be continuing to be honest and we were learning something about lying. But what was lying carrying him away from; could there be something he wasn't experiencing, something frozen? John's next homework assignment was to write down the opposite of each feeling he had listed.

He came back with a list that included feelings such as weak, vulnerable, disliked, etc. After we discussed these feelings, his next homework assignment was to write down what it would be like for another boy (not him) to experience all of those qualities (weak, vulnerable, disliked, etc.) But John didn't need to do the homework. His answer was immediate: "That was my life earlier; it was horrible."

This was remarkable. John had never before admitted anything like weakness or vulnerability. He went even further in our next session, and acknowledged that these feelings did not belong just to his earlier life, but were also an ongoing part of his current life.

An "objective observer," perhaps a cognitive behaviorist, might have wanted to challenge either John's basic belief that he was weak and vulnerable, or the apparent assumption that lying was a good way to deal with the problem. Or, a psychoanalytic "objective observer" might have explored past experiences that made him feel weak and vulnerable. But such approaches would have preempted John's experiencing; they would have prevented him from experiencing and living the full intricacy that implied lying and that lying somehow carried forward. Somewhere there was a frozen implying which needed to be experienced and carried forward, not interpreted, corrected, or "understood."

John was extremely unpopular among the other boys in our program; so I asked him gently, “What’s it like to be an unpopular kid who lies?”

John answered “It feels strange — you’re always second guessing, pretending to be someone else.” As we stayed with this, it became “scary, you don’t know who you are.”

This sounded like the beginning of a direct referent, so I asked, “Where do you feel that inside?”

John replied, “in my heart.”

“What name could you give to that place?”

“Pride, it’s defending me.”

“Can you go inside and ask your body what it wants?”

“It wants the truth!”

As we explored this, it became clear that his body wanted the truth even at the cost of public humiliation, “... because feelings come out.”

John described a war going on inside between “pride” and “feelings.” Pride was in his heart, and was concerned with what shows, with what is popular. Pride was hurt by public humiliation and wanted to protect him from that. The place he called “feelings” was in his stomach; he described it as “scarefull (sic), truth, unpopular, being you.”

So “pride” seemed to be a frozen structure, not a felt sense. “Pride” and “feelings” spoke clearly and articulately; there was no struggling to find words, no “murky zone.” Whenever a situation implied threat to “pride,” John responded in a stereotypical fashion without experiencing the full intricacy of the situation, such as how it feels to be lying all the time. “Feelings” seemed to be a handle for some of this intricacy, but it was not a direct referent, a sense of the whole situation.

The problem, then, was to bring aspects of the frozen structure into interaction each other, and with other non-frozen aspects of his experiencing.

So I asked John to role-play a conversation between “feelings” and “pride”. Basically, pride (in the heart) said, “I protect you from abuse.” Feelings (in the stomach) said “It isn’t worth it to be pretending all the time, and not knowing who I am.”

John stopped the role-play and became very still for a moment. His next words seemed to come from deep within his body: “I have to make a decision: to live a lie or to live the truth.”

John’s expression and posture both shifted, exuding a calm groundedness that we had never seen before. As we ended the session, he commented that everything seemed unreal. I reassured him that this can happen when there are major shifts in experiencing, and promised to have staff keep an eye on him and also to be available if he needed me.

After this session, John’s behavior improved so suddenly and dramatically that a number of people remarked on it and wondered what had happened. But after about a week, we

came in one morning to find a message that John had attacked a peer the previous evening. The attack was brief, there were mitigating circumstances, and no one was hurt; but this looked like a relapse to the old behavior, and the end of John's tenure in our program. The clinical team met alone first, and then we asked John to come in and explain himself. We braced ourselves for the endless string of lies and confabulations: "I didn't do it, it was the other kid's fault, nothing happened, the staff was lying," and on, and on.

John knew that he might be going to jail, but he walked into the room calmly. Without any prompting beyond an initial question, he described clearly what he had done, took full responsibility without making excuses, and said that he would accept whatever consequence we thought was appropriate. You could almost hear people's jaws hitting the floor; this behavior had never been seen before in almost 3 years. John explained that it was a relief to be honest; no punishment was as bad as living a lie. He accepted a significant loss of privileges without comment, and expressed a resolve to continue being honest in the future.

After this incident, there were no more violent outbursts in our program, and John continued being honest and accountable for his behavior. After about 2½ months of near-perfect behavior, he was discharged to a lower level of care. He became an active member of a church youth group, and was eventually discharged home.

Of course, this was not the end of the story. When change happens quickly in this way, the new growth requires ongoing nurturing and support. John's problems were not over, but he had experienced a new way of living, and was no longer trapped in the old frozen patterns.

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