

ABSTRACT. In this article, I demonstrate the facets of the interesting relationship between theory and practice. Namely, I show the practical knowledge that a therapist uses when doing therapy. Literally, it is this ability to think about one's work while working **and** the ability to keep alive, in the midst of action a multiplicity of view of the situation. I use a clinical situation to illustrate this topic. This article presents the deconstructive work of four therapy sessions. Along with the transcripts, I show how a therapist thinks about his work while doing it (or) as reconstructed afterward (reflexive posture). This article also outlines the nature and process of ethics in the therapeutic relationship. By using this clinical situation, concepts such as listening, caring, compassion, and respect are enacted in the therapy.

Key Words Practical Knowledge, Reflexivity, Systemic, Deconstruction, Post-structuralism, Constructivism, Ethics, and Therapeutic Relationships, working with borderline personality disorder.

“One only understands the things that one tames”
Inviting reflexivity in the therapy room.

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“One only understands the things that one tames,” said the fox. “Men have no more time to understand anything. They buy things already made at the shops. But there is no shop anywhere where one can buy friendship, and so men have no friends anymore”. (...) “What must I do to tame you?” Said the little prince. “You must be very patient” replied the fox. “First you will sit down at a little distance from me, like that, in the grass. I shall look at you out of the corner of my eye, and you will say nothing. Words are the source of misunderstandings. You will sit closer to me everyday...”

Saint Exupéry (1943, p.70)

INTRODUCTION.

In this article, I¹ demonstrate the *practical knowledge* of a therapist or what Schön (1987) names the "reflection-in action". Literally, I am talking about this ability to think about one's work while working. Reflexivity is one of the most advanced features of humans, what distinguishes them from animals. Reflexivity is what gives them the option to choose, rather than to be simply guided by drive, instinct or need. Reflexivity is the fascinating ability that human has to think about and reflect upon a situation, while (previously or after) being in it. In a therapy session, any therapist can use and train this fabulous skill: reflexivity. By practicing reflexivity, the therapist is stepping outside of the process, taking a meta-view. The reflexive process implies a perpetual ability to decide to shift or to maintain the direction the therapist is taking with a client. In the effort of the

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therapist to *co-construct* potentially helpful conversations with the client, a therapist can, moment by moment, use this reflexive ability to control, assess and check the value of the process he (or she) is engaged in. I show, here, how I make choices, how I choose to intervene, what I think, what I choose to share and not to share, in the therapy room. I also show how I make faux pas in the room and try to restore the therapeutic alliance.

This article outlines the nature and process of ethics in the therapeutic relationship. Concepts such as listening, caring, compassion, and respect are enacted in the therapy. Those concepts can also be manifested through words, gestures, postures or silence. Practical examples are provided to explain the *intention* behind the therapist's intervention. I expand and comment on a process-oriented therapy, by offering, along with the outer dialogues, what Vygotsky (1986) calls "inner speech". Vygotsky along with the Russian school (Chomsky, 1980, Bahktin, 1990, Luria 1976) writes about the complex connection between thoughts and words and how the first influence the other or *vice versa*. By "inner speech", I mean the words that are spoken within the person, before or without being shared out loud.

The way I approach therapy has been strongly influenced by the Post-structuralists (Gergen 1991, 1994, 1999, Geertz 1983, Giddens 1991, Kearney 1988, Harré 1979, 1983, Kvale 1991, 1996, Lyotard, 1984, Polkinghorne, 1983, 1988, 1991, Shotter 1993, Ricoeur 1988, Rorty, 1998). I have chosen the constructivism to inform the way I view the world and, therefore, my work (Piaget 1954, 1971, Kelly, 1955, Von Glaserfeld, 1984, 1987 & Von Foerster 1982, 1984). I have had an extensive training in Gestalt Therapy² and owe to Gestalt therapists much of my personal development³. Gestalt Therapy offers a clear, step-by-step, methodology of contact and dialogue in therapy (Polster & Polster, 1973, Resnick, 1995, Greenberg, Rice & Elliott, 1993). Being more extensive on my theoretical choice, could be, in itself, the object of an article. It is my purpose to focus on the application of these ideas in the room, rather than developing them further theoretically (Kuenzli-Monard & Kuenzli 1996a, 1999, 2000).

THE DELIVERY OF A MESSAGE.

A large part of reality is constructed through language and dialogue. This assumption makes me aware of the impact of my language on the co-created reality of the client, to which I contribute inevitably, even in a modest way. I am aware of the impact of my language as well as the danger, at times, of certain questions or comments. Since reality is co-constructed, my part as a therapist is vividly important. In the process of therapy, what I bring can also shift the *constructed reality*. Words are powerful tools. They can comfort, as they can hurt. Language is not to be taken in a constraining sense. I use language in its broadest sense, including any form of signs or attitudes that may convey language.

Power is of importance. I constantly remind myself that I do have power in the position of a therapist, even if I don't wish to. Therefore, I have to be extremely aware of *how* I act and *how I use language*. I see my responsibility, as a therapist, as engaging the client in a dialogue that is potentially helpful for him or her.

² Since 1993, the author has been trained with the Gestalt Institute of Los Angeles.

³ I would like to share here how grateful I am to the Gestalt Associates Training of Los Angeles (GATLA) for helping me becoming a therapist. Especially, I thank Drs. Todd Burley, Rita & Robert Resnick for allowing me to become a better clinician.

STORIES WITHIN STORIES, WITHIN STORIES...

"Stories are habitations. We live in and through stories. They conjure worlds. We do not know the world other than a story world. Stories inform life. They hold us together and keep us apart. We inhabit the great stories of our culture. We live through stories. We are lived by the stories of our race and place. It is the enveloping and constituting function of stories that is especially important to sense more full. We are, each of us, locations where stories of our place and time become partially tellable."

Mair (1989, p.127)

In this story there are two main characters: Laeticia⁴ (the patient or the client) and myself. This story is, most probably, different than the story that Laeticia would tell, because it is seen through my eyes. This article is not a "success story". My intention is more on the deconstruction of the process of therapy⁵. I chose these conversations to illustrate both my clinical and theoretical interests.

There is also within this story another story that I chose: The story of the little prince by Saint Exupéry (1943). It is a story for all ages, too often forgotten on the bookshelves, as if only for children. It is an unfinished story, as is the one I present to you, the reader. I have chosen three pieces of this story, as a parallel to the story I shared with Laeticia. The story of the fox and the little prince is a story of building trust within a relationship. It is a story about life, love, friendship and ending. It is a lovely metaphor for therapy. As in the story I tell, everyone is a winner just because they took the time to meet: "One only understands the things that one tames".

BIOGRAPHICAL ELEMENTS.

Laeticia is an eighteen year-old Mexican-American woman. She reports she wishes she were black. Laeticia came to therapy after a rape. She has been forced into therapy since she was five years old. Therapy has not been a positive experience for her. Although, her life would be impossible to summarize here, the following biographical elements might still be of interest to the reader. She was adopted at age three. Child Protective Services (CPS) took her under custody for a short period. CPS describes extreme violence toward Laeticia as an infant (both physical and sexual). The biological mother was addicted to heroin and was a prostitute. Laeticia has not met her mother, since she abandoned her. At one point, the adoptive parents felt so powerless over Laeticia's behavior. The adoptive parents had no idea they would get a child so difficult to handle. They sued Child Protective Services, saying one never warned them of the extent of the abuse done to this child. The adoptive parents lost the trial, and decided finally to keep Laeticia.

Laeticia's life has been mainly a life of misery and drama. She spent time in detention homes. She has done drugs, unwanted sex and countless suicidal attempts. Turmoil, sorrow and despair have invited Laeticia into wondering sometimes whether life was still worth living. Her wrists are marked with large scars from previous suicidal attempts. She says she's too afraid of death to give life up. She also says she believes that if she kills herself, she will burn in hell. These thoughts, she said, keep her alive. She

⁴ Throughout my writing I have been hesitating to call her a client *versus* a patient. I like the word patient for what it truly means "a person in a stage of pain" and I like the word client because of its less hierarchical meaning.

⁵ Although, the effect of therapy on clients is of the greatest importance to me.

mentions violence in her story: toward others, as well as herself. Laetitia seems to carry the story of her life as a heavy bag. The past is haunting her. It seems like, in the midst of turmoil, she has lost her voice.⁶.

Those elements of biography are difficult to look at with detachment. They tend to create a definition of Laetitia as a rather disturbed person. I would like to challenge with you, the reader this saturated definition. When I heard these biographical elements and more of the same, I chose to bracket⁷ them as much as possible. Otherwise, I figured I would never be able to meet Laetitia. Instead, I would meet a story that is somewhere already written.

PERSONAL COMMENTS.

The closer (emotionally) I move towards her, the more aggressive she usually becomes.⁸. That is one of the challenges of therapy. It is easy to be compassionate and caring with somebody, who likes you, somebody who looks up to you and agrees with you. It is definitely more “work” to be open with someone, who aggresses you verbally. It is hard to be available with a client who presents herself as oppositional. This “work” is worth it. People like Laetitia, are the ones that need therapists the most. They have a similar way of entering in contact with the world as they do contact a therapist. If they confront the world with aggression and rage, they must feel lonely as a result of their interaction (feedback of their interaction). People turn their back on them, reject them as they reject unwillingly others. This is what I don't want to do. Instead, I want to encourage Laetitia access a different experience of herself, in this relationship that I want therapeutic for her.

In my work, I often position myself in the room as a researcher. I am inspired by the anthropological method of approaching the other with eyes and ears that do not already know. I try to believe the other instead of second-guessing him or her. Through my work, I sincerely hope that my humanity takes over the technical aspect of my work⁹. I tend to look beyond the symptoms, the disease or the problems to meet the person. Trust is, in my opinion, profound if found *also* in disagreement. It means to learn to stay in contact with the other even if, the other disagrees or rejects your ideas. It ultimately means that one can be different and still be loved.

A LIFE OF TURMOIL (FIRST SESSION).

Laetitia has been in therapy for thirteen years with many different therapists. Most of the times, she was *forced* to therapy. Further in the conversation, she will say what she want from therapy is to “have a nice conversation, like she would have with a good friend”. This namely would mean¹⁰: *“No judgment, but rather comprehension. Listening, hearing my story and letting me know that you care. Helping me make meaning of my life”*.

⁶ I refer metaphorically to her ability to speak for herself. Also, her ability to see herself as somebody else than the abuse.

⁷ To “bracket” is a term that refers to Gestalt Therapy. It is a way to enhance the possibility for dialogue. It means to put into brackets strong ideas and to refuse to let those strong ideas lead the conversation. It is also an assumption that these ideas are not more valid or more important than others.

⁸ In diagnostic terms, she is labeled as a borderline personality disorder (DSM-IV).

⁹ They also exist these technical aspects of my work, but they do not look as obvious as they used to.

¹⁰ I quote Laetitia.

Laeticia (crying): I'm not normal. I wish to have a normal life. I'm stupid... and then...I'm scared... so scared to be on my own now I don't want to become like my real mother. She is a prostitute. Hooked on heroin, incarcerated for a long time.

Therapist: If therapy was less hurtful this time, if somebody could give you comprehension rather than judgement, what would you like out of it?

Laeticia: I first want to change my pattern around sex. Namely, I want to do sex with somebody I care about.

I believe it is still too hard for Laeticia to add: "and somebody who really cares about me". In Laeticia's discourse and especially when she refers to sex her "voice" is very much absent. She refers to the multiple partners and what "they" do and what "they" want, but rarely does she speaks about her needs, her fantasies, her envies. It seems to be difficult for Laeticia to own "to be cared about". Just for who she is and not for providing sex or pleasure as an object. It seems very hard for her to be loved as a whole person.

Laeticia (continuing): I want to change my attitude toward my mother. Now, I use her as my scapegoat. *(She is referring to her adoptive mother).*

Therapist: Did you ever notice some of those changes happening already, even just little with your mom?

Laeticia: *(Pause)*. Yes, I have a different attitude with people.

Therapist: Like what? What do you mean? Can you explain?

Laeticia: Less confrontational. I am more humble with other people. *(Pause)* I am never happy. I haven't been happy in years. *(She looks really sad.)*

At this point, I think that I went much too fast for Laeticia. She says this powerful statement: "I am never happy" right after I have invited her to a positive description of her story. Following the narrative therapy's ideas from White (1988b, 1990), I invite Laeticia into an alternative story, a story that is not saturated with problems. I believe that she feels unheard by my comment.

Therapist: Is there any time you have been experiencing happiness, even for a second?

I probably missed an occasion to think before talking! This time, Laeticia gives me more information. She simply ignores my question.¹¹. This comment obviously has a negative impact on her. She feels sad, and upset, when I play the cheerleader. Because I am pulling her out of a place she is in and forcing her into trying to experience something that she is not experiencing. This idea will be the basis for my next comment.

Therapist: You know Laeticia... I wonder.... Yes, I wonder ... if it were not too much when I asked you what you would like for the future? Maybe the voices of abuse don't even let you see that you *may* have a future. Maybe the only thing that abuse entitles you to see is black and no future. It seems like a "no win" situation? I wonder....

Laeticia looks at me intensely for seconds, but does not answer.

Therapist *(Toward the end of the session)*: I have noticed that I asked you a lot of questions. I was wondering if you would have questions for me? If further along the road, you have questions for me, you are more than welcome to ask. I'll do my best to answer.

I am inviting her in a more equal relationship.

HOW DO I MAKE SENSE? SECOND SESSION

¹¹. Willingly or unwillingly, I cannot know, because I did not ask.

Having lately been raped by three men, she even manages to wonder: “Was it a rape or did I provoke it?” Sometimes, I feel that the voices of abuse are so strong they almost override her voice.¹²

Laeticia: Do you think that this was a rape or do you think I encouraged it to happen?

I am highly interested in my work in using the reflective position rather than giving a simple opinion. I believe offering this reflexive space can be highly useful (Kuenzli-Monard & Kuenzli 1995, 1996, 1998, 2000). When somebody asks for an advice or an idea, I remember Emile Chartier’s words¹³:

“Nothing is more dangerous than an idea. Especially if one has just one”.

Therapist: This is a hard one. (Pause) I’m not sure there is an easy answer to this question. Well, from what I hear from Laeticia, the first thing I can share with you is that listening to this story, I really felt confused and shocked too. I guess shocked to imagine how I could have felt if I was in your shoes?

Here, I attempt to do several things with my comments. First, I validate the status of her question. If I were to answer this is “yes or no”, knowing that Laeticia has been struggling with this question for a long time, it will be dismissing. Dismissing, in the sense that a quick answer to a complex question will give her the message that she is losing her time wondering about it. Second, I am not assuming that a therapist or anybody¹⁴ should (or could) feel what the client is feeling. Of course, the same assumption is equally valid for the client.

Therapist (continuing): It seems like being drugged, high on alcohol, with those three guys around you taking off your clothes without even asking you. I would have been confused too. I guess if I experienced that I would have felt very scared. If I do recall correctly, you chose to go with this one guy to have sex, but you weren’t expecting the two others guys to come over. You were not planning to have sex all with these three guys all together.

Laeticia: Oh no. I just wanted to have sex with this one guy.

Therapist: That was my understanding as well. Then, if I remember correctly, you also said “no” when they started right?

I put an emphasis on that word “no” as I said it, to underline her own voice.

Laeticia: Yes. That is right.

Therapist: They obviously did not listen to you. So, this is what I understand now about the situation is that what happened was not *your* choice (*same emphasis on this word*). You were planning on having sex with this one guy. They forced you and the definition of rape is “forced sex”. What do you think Laeticia? Did I give you a fair answer?

Laeticia: (*She nods, looks relaxed*). It’s hard for me now to be able to say more, I need to think about it.

“Men” said the fox “They have guns and they hunt. It is very disturbing. They also raise chickens. These are their only interest. Are you looking for chickens?” “No”, said the little prince “I am looking for friends. What does that mean: tame?” “It is an act too often neglected,” said the fox. “It means to establish ties.

¹². Here I refer to what White (1993, 1995) calls “self-agency”. Speaking with your own voice means to be who you are, instead of what you think others expect of you.

¹³. I translated from French.

¹⁴. I really like to remind myself that therapist and clients are from the same world, even though this evidence might be forgotten at times!

Saint Exupéry (1943, p. 68)

Laetitia requests advice and at the same time she tells me clearly that she rejects any kind of advice. My next comment goes in that direction. I remember one of her first comments about therapists is: "They all give advice. They think they know it all". My next question is: "Do you follow these advice?" Her answer was "Of course not". I added: "Me neither. I don't like advice, and usually I don't follow them".

I referred to this previous conversation with Laetitia to let her know that I was not willing to offer advice. She said how painful it was when she felt lectured by therapists. I also said if she really wanted an advice, she could still ask and I would do my best to answer.

"ONLY I KNOW ME". THIRD SESSION

As she comes in, Laetitia looks exhausted. She says she feels like sleeping. I offer her the couch. This is for me a critical moment of therapy, I want to show to Laetitia that she is welcome as she is. Sometimes, "Actions speak louder than words". Not only saying that she is welcome, that she can be who she is, that she is accepted for who she is (here in this therapeutic relationship). Offering her the couch to sleep sounds very important at this moment, rather than pushing her, forcing her into doing "therapy". I feel happy and content with letting her rest. This was not a therapeutic trick. There was no strategic intention behind my comment.

"The creation of an integral self is a work of a lifetime and although that work can never be completed it is nonetheless an ethical responsibility. Dishonesty may result not from a motive, but quite often, from the failure to undertake the project of responsibility."

Bakhtin (1990, p.31.)

Laetitia is lying on the couch, making herself comfortable (She takes her shoes off). She closes her eyes, for exactly two minutes. After which, she decides to talk rather than sleep (!). Here is what comes next:

Laetitia: *(gets up suddenly totally awakened):* I'm moving out of the house next year. Full time work program next year. Last week, I wanted to run away stealing my stepmum's jewelry and leaving her a note saying: "You have no use of me anyhow". (Pause). And you know what I don't get along with my stepdad anyhow, there is just no way. Sometimes I am a bit afraid I'll hit him, I really hate him so much, he is such an ...

Therapist: What stopped you from doing that?

Laetitia: What?

Therapist: Yes. What stopped you from stealing jewelry and leaving? What stopped you from hitting dad? Was it the voice *within you* that wants to stay out of trouble? Did this voice speak louder? *I use a language that she previously used.*

Laetitia: Yeah, I guess. I try to have a normal life at school. The therapist that I have been seeing before they told me: "I need to confront my problems, face them. Nobody else can do it for me". Therapists keep telling you what to do. They said: "Only I can do it, nobody else will do it for me". So why then do I even come to this f... therapy. *(She seems now really outraged).*

Therapist: It feels so lonely.

Laetitia: I'm sick and tired of this psychobabble sh.... Always giving advice, always telling me what to do. These psychotherapists speak and psychobabble sh... And stuff, that's crap. (...).

Even God, He doesn't give me a hand. Where is He? Where in the f... is He? If He is so good and everything, why did He make me live this f... life, you know.... F...! F... F...! It is like building a house on a volcano. Why would He build it there?

Therapist: It sounds like a very lonely place to be, on your own. So scary too: a house built on a volcano ready to explode anytime.

Laetitia: Yeah ...and I'm sorry because you are not like that. You are listening, not judging. You are different. But I don't like *them* at all. But still like my friend says: **Those shrinks know nothing about the life we live, how can they understand. They know nothing about living on the street, nothing about how it is to live in fear everyday of my life. Therapists make average to good grades. They live in nice areas; they have nice cars, nice telephones, and nice houses. They can't understand.**

Listening, hearing, understanding and knowing. At this point, I might tempt to interpret: an easy interpretation might be to notice how when Laetitia feels closer emotionally to me, she attacks (verbally) to maintain distance. And since she feels closer she attacks more and more. Even if this interpretation were true, what would be the use of saying it at this moment? My guess is that it would create more aggression. Another tempting reaction is to be attacked or blamed or defensive and respond to it in a non-helpful way. Laetitia's comments and attitude are direct and raw. But then again, what is the therapeutic use to lecture, defend or explain? Laetitia says something important: she does not feel understood and she feels that *we* (the therapists as a whole) cannot understand. To develop an awareness of how we experience people from a different position is a crucial skill when working as a therapist. The reflexive position is a constant discourse with my own reactions and with the theories (I choose). The reflexive position is central in my work. This discourse (and this tension) allows me to look at theories only as theory and not to magnify them as dogma. This reflexive stance maintains a position of curiosity (Cecchin, 1987). The "as if" position is an invitation to try to put oneself in the client's shoes more often.

The therapist's story. An "as if" exercise in a therapy session. I forget too often to realize the intensity, the level of sacredness and the ultimate gift of a person opening up in my presence. I sometimes *think* I understand, and keep trying to shut down that voice within myself "Oh! I know, I know, I know what you mean". I often think I understand, but I never quite do. I remember: One day I felt sad, miserable, and hopeless. One day, I felt little, unheard, depressed. I felt alone, I felt forgotten. I felt unloved. Passing by, a friend, loaded with good intentions, wanted to help. She wanted to hold my hand. She first listened to my long complaints. Then, as if she could not bear the weight of silence, those moments that are filled up with pain and sorrow, with uniqueness and disempowerment. She told me in a sweet voice: "I understand what you are going through, I went through that". For whatever reason, those words hurt me (even though I knew her *intention* was good). I should feel understood. I did not. I felt hurt. I felt unheard. I started an inner conversation with my friend, too afraid to share it out loud and to hurt her (and maybe also too hurt): "Oh! No, you don't understand, you don't have any idea, you may think you do but you really don't". Her words: "I understand." made me feel almost angry, almost bitter, quite sour, to say the truth. It took away some of my experience, some of my uniqueness, some of me. As Shotter says: "Redescription often humiliates (1989, p.90)"

"Redescription that is, the act of re-casting the world in the terms of a new language game can often have cruel consequences as the one redescribing the world overwhelms and makes irrelevant the descriptions and language games upon which others had based their lives".

Nystrom & Puckett (1998, p. xii.)

This experience taught me lots of things which I would like to share with you, the reader. It taught me, that the more obvious it might look, the less simple it may really be. Humans are complex and magical too. It is not easy to hear and even less easy to give somebody the impression that we listen or at least that we try to. Sometimes, feeling heard may be as simple as holding a hand and as complicated as saying nothing. Sometimes listening may be to refuse the invitation to fix, to teach or to change the other. Sometimes listening may be to be here with the other. All these reflections led me to this next comment to Laetitia.

Therapist: *(slowly)*. You are damned right, I don't understand. As hard as I may try, I will never start to realize how tough life has been for you. How unfair it has been, but I can assure you I'll keep trying to. You are damned right we come from two very different backgrounds, almost two different planets. You are damned right.... I'll never know how scary it is to live in fear every single day of my life. You are damned right, Laetitia...

Using the clients' words. For some of you the repetition of the word damned may be shocking. This is my intention. I thought, if I use this word she would pay attention. She is not used to hearing me talk like that. Remember: "Therapists are well educated they live in nice areas". Laetitia probably thinks that therapists (of nice areas) don't ever curse. Using "strong words" and using them several times had the effect of catching her attention.

What are presented here are not techniques of therapy. Those are not transferable to other therapy sessions. They all belong to a particular context, a particular moment and a particular relationship. In this example of using the words of the clients, I have been noticing over and over again (Kuenzli-Monard & Kuenzli 1996a) how often clients report they feel heard or understood when a therapist re-uses the words of the clients. I have noticed that I often use the words of the client. It is hard to explain which words and when I choose to re-use them because from a general point of view because it is linked to each particular context.

Laetitia, as I understand it, feels encouraged by my comment. Indeed, she goes on telling me about her worst memory of the time she spent in Juvenile Hall. She never shared this memory with anybody before, she said. She feels validated, heard enough, by my previous comment to share the rest of this terrible story. She wants me to hear it.

Laetitia: Something, I'll never forget: I was so scared, I thought I would die. I wanted to see how they restrained, because I'm always playing with limits you know (!). I could barely breath, because you're fighting, you need more air than ever and they don't let you breath, I thought I would die. *(She alludes to the warders of the juvenile detention home, where she was incarcerated and restrained for several months)* I got so obsessed with water after that. The therapist I had at the time, said it was because I had no control over nothing so that is the only way I could have some. I finish up drinking 16 cups of water, within an hour. I had terrible stomach cramps, but I did not care. Then, since I was restraint on "one on one", because I was hurting myself *(She shows the scars on both of her arms)*. I could not go to the bathroom, when I wanted to. I started becoming dirty with

myself. I peed on myself without saying anything for months. I became so desperate for water. Water took over my entire mind¹⁵. I was that close to losing control, getting crazy... *(She shows an inch with her fingers). She pauses. (She is looking at me. I'm writing down what she says).*

Laetitia: Yes. You probably think I am screwed up and everything. I have a poor self-esteem and all of this s.... You'll think, you are so clever. You think you know everything about me, right? You know what: I may say a lot, but in fact I don't trust you. I don't trust you at all. *(She looks very angered. Pause.)*

As I am pausing before answering, I have many ideas. First, the idea that I "goofed", I was not careful enough with telling her how come I was writing down what she said and what was the use of it. Coming from her perspective, she might be experiencing a huge incongruency. This kind and caring therapist, as she perceives, is now labeling her behind her back (again as I imagine, she perceives). Second, is this awareness of a second "wave" of aggression that came (sooner than I expected) and questions about how to answer this "wave" in a helpful way. The delivery of the message seems of crucial importance at this very key point of our relationship. Not only the "what" I say, but also the "how" I say it. I am aware that at this point the therapeutic alliance could be ruined. Third, she probably feels betrayed by me. Because of my writing (that was not very smart of me), she perceives me like the rest of the therapists she met. In her words: "Just putting labels on your face".

Therapist: Laetitia... *(She turns her head away).* Laetitia, look at me please. Maybe you are too hurt right now. Are you interested in my answer to you? Or not right now?

Laetitia: Yeah. I guess...

Therapist: I can hear that is what you think, I think about you. You might think I am just obsessed with diagnosing you, putting labels on your face, treating you like a number. You might think I think you have a poor self-esteem and all of this psychobabble s... But, you know what, let me tell you what I think about you. *(Pause)*

I pause for five long seconds. Intentionally, I wait for Laetitia to pay attention to my words, to become curious and attentive to what I have to say. These seconds, like a contrast to the noise and the rage, will give more value to the words. Like a Gestalt that needs the ground to allow the figure to emerge, words become powerful when in contrast to silence.

Therapist (continuing): I think it is a miracle that you are still alive. I think you are a survivor. I think what happened to you is unfair, so unfair. You had so much pain, so much turmoil. *(My eyes become wet).* That is true. That is my truth. I feel sorry that it is so hard for you to like yourself, because you've been so abused. Over and over again, you have been abused. I wish that I, or somebody else, could help you discover how much you are worth and how special you are.

I pause again, to explore carefully the words I want to deliver.

Therapist (continuing): And what you said about trust. You know what I think about trust, what my theory is about trust? I think that you are really wise not to trust me at first glance. How can you know that you can trust me without knowing me? Trust is not a given. It has to be learned. You know it is like, when you go in a lake. Back in my country in Switzerland, oftentimes lakes are freezing cold. I would never advise anyone to jump

¹⁵ She is referring to a condition called: "Potomania". The urge to abuse beverage (non-alcoholic) can lead to severe physical injury. It can even be fatal.

in. They could have a heart attack. There are those who test the water with their toes first and those who jump in. I am one of those who first test as I see you are. So, I can always take my toes away, before I get in troubles. I do encourage you being careful about trust and one of my guesses is that you have been so betrayed in your life, it is really hard to trust.

Laeticia: *(Smiling. She looks straight at me).* You are really cool. You are really different. I think that Laeticia felt heard. I think what worked was that my language was congruent. Laeticia is extremely intuitive. My words were in synch with my body language. My wet eyes, which I attempted to hide, spoke as loud as my words. At the end, her reaction surprised me. I was not expecting that reaction from her. Non verbally, I think I must have made a move to let her know that I had enough compliments for now! Very sharply very quickly she let me know that:

Laeticia: No, listen to me. I said you are really different. You know why: because you really care. You really care.

THE BLUE SESSION. FOURTH SESSION

Laeticia is on time. She is wearing blue glasses. I ask her if she sees life in blue. She gives me her glasses to try them on, which I do. It is blue all around. She'll be wearing them for the rest of the "blue session".

Laeticia: I feel playful today. You know, I have a new boyfriend. He bought me new shoes. They were \$80. We spent last night just talking, as weird as it sounds. It seems like he is really listening to me.

Laeticia: I feel like reading some books, may I?

Therapist: Sure, go ahead.¹⁶.

Laeticia: Oh, by the way, Friday I have an interview, a job interview at 3 PM.

I am simply flabbergasted, given what I know of Laeticia and her fear of getting into what she refers as "the real life".

Therapist: *(Bright smile).*

She reads out loud from children's books. Oftentimes, we laugh. I compliment her on her reading ability. I remember that, for Laeticia, school was hard to follow, she was mocked and called stupid.

Therapist: I would like to share with you a feeling I have. I feel joyful to see a smile on your face, Laeticia. I feel content. I cannot help but thinking about this sad sentence that you said the first time we met. You said: "I haven't been happy in years". And quite frankly, even if I know it might not last forever and you might not call it happiness, it feels so good to see you smile.

Laeticia: *(With a bright smile).* Yes, for the moment I guess I'll call it happiness! ...And after I'll read you the poems, I have been writing. I'm sorry I feel kind of nosy today. Can I read it over again?

Therapist: If you want to know, it's not my preference that you read the same book again, but if you want to. Go ahead... Actually when you said you might want to share some of your poems, I was really excited. Is it something you still want to share with me, or would you prefer to read books?

¹⁶. I have a whole shelter of books for kids and fairy tales in my office.

Laetitia: What I like to do with those poems is put them into Rap music. Talking to a beat. You know...

She shares one of her poem toward the end of this session. She reads it out loud. Laetitia agrees to give me a copy of her poems and adds a bright smile, when I ask if I can share it with my colleagues.

To the therapists: Only I know me

Tell me how I feel
 Tell me what I dream
 Tell me I'm just acting
 Tell me how I seem
 Tell me whom I hate
 Tell me whom I like
 Tell me how I rate
 Tell me you are right
 Tell me how I am
 Tell me how I look
 Tell me all you can
 Read me like a book
 Then, I'll tell you something
 Although you won't agree:
 Only I know what I am thinking
 Because only I am me.

Laetitia

V. CONCLUSION

"Learn your theories as well as you can, then put them aside when you touch the living miracle of the human soul".

Carl Gustav Jung

The four sessions described here occurred in a period of two months. Within those this time, Laetitia had her first work experience. She moved out of her adoptive parents' apartment and found a place on her own. Laetitia reports that she now likes coming to therapy. She reports: "Here, I can be more vulnerable. I know, that I will not be judged".

The process of therapy is still going on (after five months). Cancellation or no-shows interrupt it sometimes. I have the feeling that working with this client might be a long and difficult journey but nevertheless a fascinating and powerful one. I do not know if she will be willing to hike "side by side"¹⁷ or if, further along the road, she might want to pick another hiking partner or stop for a picnic before starting again. My hope is that this part of the journey can make the long hike more bearable.

"The more I know, the less I know".

Socrates

This is for my hope. Somewhere along this path, I try to allow myself to become more human. I try to be and less and less constrained by my role, my map or the territory.

¹⁷ I am borrowing this beautiful metaphor from Tom Andersen (1995). He compared therapy with "walking side by side" with another person.

I try to allow my eyes and my ears to open and my hands to reach out, to discover the endless stories of men and women. I take time to understand how my clients decide to shape their life and what their dreams are. I try to allow more opportunities for them to be in the room, and hopefully in the world also. My experience, my knowledge and my expertise will be, rather than an imposition, one more lens to use. My experience will allow me to be in the moment, on the path with a client.

"So the little prince tamed the fox and when the hour of his departure drew near: "Ah!" said the fox: "I shall cry". "It is your fault", said the little prince "I never wished you any sort of harm, but you wanted me to tame you..." "Yes that is so", said the fox. "But now you are going to cry" said the little prince. "Yes that is so", said the fox. "Goodbye" he said. "Goodbye" said the fox. "And now here is my secret, a very simple secret: It is only with the heart, that one can see rightly. What is essential is invisible to the eye." "What is essential is invisible to the eye." The little prince repeated, so that he would be sure to remember."

Saint Exupéry (1943, p.73)

I would add something to Antoine de Saint-Exupéry, even though, I imagine, he meant it. To his sentence: "so the little prince tamed the fox", I would like to add: or maybe, the other way around. The very beauty of this story is that one may never know who tamed whom. Did the fox tame the little prince or the other way around? This is also the "magic" of therapy. One is constantly changed, transformed by the different encounters with our clients. Indeed, I address my final thanks to my best teachers: my clients. Here, especially to you, Laeticia, I want to share my gratitude for challenging me, for reminding me that... nothing stands still.

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