

## THE FELT SENSE IN PSYCHOTHERAPY SUPERVISION

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This paper focuses on how to integrate the felt-sense into psychotherapy supervision. I discuss some reasons for doing so and describe some specific ways to use the felt sense in supervision.

Two of the most important ways of using the felt-sense in supervision include first, how the supervisee learns to trust and use his or her own felt-sense to understand the client's experiencing and to guide the interactions between them. Secondly, to illustrate how graduate students who are learning to become psychotherapists can learn to differentiate their personal history and felt-senses from those of the clients — so that the client's story belongs only to the client.

I describe some aspects of my own practice in supervision and present some examples and vignettes to support my reflections and proposals about ways to work with the felt sense in psychotherapy supervision.

Key words: psychotherapy supervision, felt-sense, experiential supervision.

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The aim of this article is to share some personal experiences and thoughtful reflections about how to explicitly integrate attention to the felt sense or experiencing (Gendlin, 1962, 1964, 1984, 1996) with psychotherapy supervision sessions, especially with graduate students trained in an interdisciplinary approach to psychotherapy.

We find two important challenges in programs that have such interdisciplinary characteristics. The first regards how to simultaneously master various disciplines such as psychology, sociology and philosophy with experiential therapy. The second addresses how to apply the theories so they become useful tools in the students' psychotherapeutic practice and do not remain only academic references without major impact on their professional practice. In other words, how can we encourage students to integrate the theories as their own — while making sense of them in understanding their clients in psychotherapy — and helping them orient their interactions and attain the sought after changes?

Supervision can be one of those privileged spaces to work on four *points of interaction*: between the *personal and historical characteristics* of the student-psychotherapist, the concrete *relationship with clients*, the *theories* described by different disciplines, and the *explanations* of the process of constructive personal change.

This may be why supervision of clinical practice is valued as an important activity and learning experience of psychotherapists (Lopez, 1998; Madison, 2006). It is considered a means of developing certain skills that improve the professional development of the student-therapist in at least two ways: a) the level of comprehension of the clients in relation

to the problems they are confronting in their life situations; and b) the modes of interacting with them in order to advance the therapeutic objectives.

There are several types of supervision according to the focus of attention they emphasize. Thus, some types of supervision place attention on *the case* at hand; that is to say, they look for understanding of *the client's problem* from a theoretical frame of reference in order to, from this perspective, suggest adequate interventions which can promote certain sought after changes. Alternatively, other supervisions place greater emphasis on the *interventions of the therapist*, on what the client does and says during the sessions, searching for their theoretical basis and the effects generated in the interactions (Lopez, 1998).

### THE FELT SENSE AND SUPERVISION

I have developed a supervision methodology based on Gendlin's Focusing techniques that focuses attention on *how the psychotherapist takes into account his/her own felt sense in order to*:

1. capture and understand the experiencing — and the lived experience — of the client
2. orient the styles of interaction with the client in such a way that a process of constructive change is favorably encouraged
3. value what goes on in the client with these modes of interaction

Capturing and comprehending the client's experiencing seems like a way of referring to something that we might call *body empathy* (Moreno, 1998). That means the possibility of feeling in our own body a sensation that is similar to what the other is feeling in a given moment of the process, and from this place comprehend the lived experience of the other person. This can be verified through a description of what the psychotherapist feels in the moment and asking the client if this make sense. "How did you know?" many clients have asked on innumerable occasions. After that, they continue describing such a felt sense and expressing themselves from there — and from the new feelings and senses that later appear.

Allowing ourselves to feel — bodily and emotionally — whatever it is we are feeling as psychotherapists during the sessions is what I call *keeping experiential company* with the client. This is necessary in order to capture and comprehend the experiencing of the client in the modality of body empathy.

Once the psychotherapist captures the experiencing of the client and resonates with it, the therapist offers sounds, words, or gestures that express and may carry forward the client's felt sense. The therapist might follow this with a calm waiting that somehow says, "I am still here by your side, interested in you and wanting to understand you."

Sometimes, for student-psychotherapists, what comes from their own experiencing may appear unrelated to the client — or worse, feel completely *foreign*. Even for an experienced psychotherapist, there are moments where we don't always trust what seems to be

coming from our own experiencing in relation to the therapeutic process. I believe that it is important to first discern our own felt senses, then carefully see how our initial felt-instincts ‘fit’ in relationship to what the client is saying.

Even then, with all the experience that a therapist may have, I feel that it is necessary to verify how the client *receives* our expression, i.e. whether it makes sense and helps him/her in recognizing the experiencing to symbolize it with precision. Occasionally, we will have to be more precise or put something aside that we have said because, in that moment, it makes no sense to the client from their felt sense.

The student-therapist also needs to be aware of the ongoing relationship: Does the client feel sufficiently heard, respected and safe enough to open up to the therapist and reveal new aspects of him/her self? Further, the student-therapist needs to be constantly aware of two ongoing levels of interaction: *outer* (relationship of client to therapist), *inner* (relationship of client to his/her own experiencing). Learning how to evaluate the above requires objectivity in order to notice the forward constructive movement of the client’s process and progress.

Further, Gendlin’s process of listening, sensing, hearing, reflecting, and empathy help take into account the multiple levels of felt-sensing that occurs in the process of supervision: the supervisor’s felt-sense/experience of the trainee; the trainees felt-sense/experience of BOTH the supervisor AND client, then of course, the client’s multiple feelings of the therapy process — both relational and intrapsychic. Supervision is indeed a complex process.

Occasionally, therapists-in-training lack clarity and awareness regarding their own authentic feelings during the session with the client. For example, they may not be aware that there exists within them fear, anger, or non-verbal bodily expressions that they would prefer not to reveal to the client. I have frequently found this with Mexican graduate students who are in the process of becoming psychotherapists. When a supervisor listens with attention to a student’s case, two possibilities might occur regarding the bodily felt-sense: one is capturing *what the student is feeling* regarding the client (then I can say something that may help in recognizing these feelings or how s/he is positioning him/her self in the relationship); the other is that I can also point out something about *how the client might have felt* in the situation that the student/therapist is explaining to me. The Focusing principles and ‘attitude’ give the supervisor valuable tools in the process of supervision that better help us to understand the trainee (as well as the client) and support his/her process.

Gendlin elaborates in several writings (Gendlin 1964, 1984, 1996) the need to generate a process that emphasizes the importance of the interpersonal relationship, i.e. the interaction between the flow of experiencing of the client, within the framework of respect and understanding. One of the goals of supervision is to help the trainees learn how to find precise ways of symbolizing their experience.

## **SUPERVISION AND THE PROFESSIONAL DEVELOPMENT OF PSYCHOTHERAPISTS**

Within the context of supervision (which is part of a learning process to become a psychotherapist), we can include some learning tasks in addition to those already mentioned.

**STUDENTS NEED TO:**

1. increase certainty that they are paying attention to and recognizing their own felt-sense
2. recognize when interactions appear to arise from — and be guided by their felt sense
3. have enough confidence to modify or make any necessary changes if the client's response indicates that a reflection has been expressed incorrectly

**HELPFUL THINGS THE SUPERVISOR CAN ASK THE STUDENT-PSYCHOTHERAPIST TO DO:**

1. Narrate the session as s/he recalls it.
2. Read aloud the in-session notes from the client/therapist exchange.
3. Describe any aspects of the session that were difficult to deal with or understand.
4. Bring a tape recording of the session into supervision.
5. Imagine/sense the client during the supervision session.

These are some of the ways to initially bring the session into supervision (Moreno, 1998). However, the important thing is that we (as supervisors) *direct our attention to what the student is feeling* (as s/he describes the experience of the psychotherapy session). The supervisor needs to verify whether the supervisee is *recognizing, experiencing, and expressing* him/herself from the *felt-sense*.

The students frequently have two main important concerns. One is to identify rapidly which data best describes the client's problem; the other is knowing what to do to help the client solve the issue. An additional element that is sometimes present regards the student's hope that the client will notice that changes are due to the trainee's interventions, (wishing to appear competent in the eyes of the client). It is important to point out, however, that within the socio-cultural context of many of the students with whom I have worked, the hope is that the effective help comes through precise explanations of the problem, followed by corresponding guides to action or suggestions. It seems that the *value* of comprehensive listening is very low. 'Just listening' seems (to some new students) to be practically doing nothing. This belief may be one of the first obstacles encountered by students. They must be supported to fully understand the theory behind experiential listening considering that they put a lot of pressure on themselves to try to quickly 'solve the problem', believing that they are wasting time listening — not yet fully understanding the significance of the *meaning* a situation has for a client.

As the student-therapist presents a session (in any modality), the supervisor is attending to his or her own felt experience — trying to get a 'feel' for the trainee, as well as the case. The supervisor also observes and comments on how the trainee attends to his or her own felt-sense of the session. After a period of dialogue and listening, we may find ourselves in an interaction, such as the following:

(Note: S refers to the supervisor. ST refers to student-therapist)

- S: And all that you are saying... see how that feels inside?... how that resonates in you? [Invitation to pay attention to the felt sense]
- ST: Fine! No problem... [As the supervisor, I feel that his answer is not coming from a felt sense]
- S: It feels fine... [resonating with a tone that barely insinuates a question]
- ST: Well... maybe there is a bit of tension here [pointing to the stomach region]... I may have been a bit scared... because I did not understand... I was uneasy... I could not capture what she was feeling...
- S: A certain tension... scared... asking yourself what she really felt... [said slowly]
- ST: Yes, maybe there is something similar to what I lived with my family, and therefore I am not so sure if what I feel comes from her... or only has to do with me. [He is not sure whether the felt sense he identifies is related to him or to the client.]
- S: While listening, you relive, in a way, experiences within your own family. Feelings come which are familiar to you, and so you are not sure if she also feels something similar in her own experience. [Attempts to help the student recognize the confusion and insecurity he feels in not being able to differentiate with precision his own experiencing from that of the client.]
- ST: Well, I do believe she feels it, but it is very difficult for me to just stay with that... I start remembering... and I get confused... I feel... I feel sad and feel like crying...
- S: And then you cannot listen to her, because your own feelings grab your full attention? [Points towards recognizing whether the supervisee captures something of the client that is mixed with his experiences.]
- ST: Yes... maybe I have to talk about this in my own therapy... [The supervisee recognizes an action step that can help distinguish his own experiencing from that of the client.]

In some moment within the interaction, the supervisor thought that the student was not paying enough attention to his experiencing, and was therefore not aware of other feelings he was having during the interaction with his client. This is why the supervisor invites the student to pay attention to the 'direct referent' (Gendlin, 1962, 1964). Upon first answering, the supervisee responds at the same level from which he had been speaking. It is only after the second set of comments from the supervisor — which carried an insinuated question that invited him to verify whether everything was really fine — that the supervisee pays attention to his felt sense and begins to discover a number of feelings that were previously unrecognized.

I emphasize in this vignette a frequent issue of supervision: the confusion, the fear, and the uncertainty of the person being supervised. Commonly, s/he does not feel sure if those feelings and felt senses have to do with his/her own history, with the client's particular

circumstances, or perhaps with what is going on in the interaction. One of the expected outcomes of successful supervision is that the student learns to distinguish these differences.

Notice how different purposes, objectives, and aspects are woven together during the dialogues in the supervision sessions. Maintaining a clear sense of the direction regarding the specific aspects that need attending to, plus the new learnings that we wish to promote, I use what comes up in each session to advance the *recognition of the felt sense* — both as a means of understanding the client and the trainee — and to differentiate the process of making a place to experience the processes of interaction in psychotherapy.

### A CASE EXAMPLE

I now present a fragment of a supervision session in which several facets of our work are illustrated. For the student-therapist:

- learning to pay more attention to the felt sense of the client
- recognizing the importance of adding the experiential component (paying attention to the felt sense)
- recognizing that a therapist can learn a lot more about a client (by adding Focusing pieces) than by staying only with the data in a thinking way
- developing trust in one's own felt sense, in order to have meaningful interactions with clients
- learning how to differentiate between the therapist's personal experience and the experience of the client

In this supervision session, we are dealing with a client that the supervisee has been seeing for one year. The woman is a single, 38 year old professional. She seems to have low self-esteem, is dissatisfied with her life situation, carries excess weight (which makes her feel fat and ugly), has a strong desire to meet a partner who loves her — and — at the same time believes this is not possible. At times, she acts seductively in an attempt to find a sexual relationship with a man. If she feels that she has been treated well, she begins to imagine that she has found the love of her life — without recognizing that it was simply a casual relationship. If the man no longer wishes to see her, she feels depressed and abandoned. The relationship with her parents has been conflictual since she was a child, especially with her mother. In this context, the supervisee narrates the session of the previous week.

ST: Suddenly she started saying, “Well, yes, with my Mom, it is easy to know what she doesn't like. She hates fat women. For her, there are two types of people: fat ones, which she hates, and all the rest”.

And then she began to say... “but *something felt* came to me...”

This is when I struggle with myself, because I don't know if it is an interpretation, and I said... I felt like saying, “Ah, and haven't you gained weight to keep her far away? True?”

[Here the student-therapist is inspired to make an ‘interpretation’ that appears to come from his comprehension — both intellectual and felt — of the relationship between the client and her mother, then offer it to the client.]

Because it was a struggle, for two years she has weighed... I don’t know, 90 kilos, or 80... something, I don’t know... and she sat with that for awhile... getting a feel for it... then from that felt part came:

Client: “Well, I am not sure, maybe... but I do know why I don’t want children. When I was an adolescent, I once had a problem with my mother, an experience with her... when she told me that I shouldn’t even be here because she had wanted to abort me... she did not want to have me. And even though we have had interactions during which she cried...”

ST: She was saying this in such a calm manner...

[The student-therapist had hoped that there were other feelings; he feels disconcerted and decides to verify his own instincts with the following intervention; he invites the client to pay attention to her felt sense].

[From here arose the first instinct to ask] “And... maybe see what your body-sense is... of your mother saying something like this to you?”

Client: “Yes, she was telling me she did not want to have me, that she wanted to abort me, and as a consequence of her not wanting to have me, God punished her and took from her what she most had loved in her life, which was her father. God took her father as a consequence of that because her father died”...

ST: And then, I don’t know what we continued to talk about but again came the question, “And how does that make you feel... that your mother would tell you that she did not want to have you, and that as a consequence of not wanting to have you God punished her and took what she had most loved in her life, her father?”

And she said, “*No! No, it doesn’t do anything to me... I don’t feel anything*”, and I was surprised because my feelings seemed so true; sometimes... you can sense when sensations and emotions are forming for another person, and this time it was like that — so very clear, yet she is saying, “*Nothing is happening to me. It didn’t bother me then, and it doesn’t bother me now*”.

[The student-therapist continues to be surprised that the client is not expressing the many feelings he was hoping she would have regarding the incident with the mother. The supervisor believes that the supervisee is reacting from his felt sense — but that he is not clear about that.]

S: That is what she was saying?

ST: *Feeling!*

S: Now let’s see what is it that *you* experienced... during this entire narrative of hers... See if you can remember... did you have a felt sense? [The supervisor invites the supervisee to attend to his felt sense in order to clarify from here what he is capturing and feeling regarding the client and her story.]

ST: No! What surprised me most was that this time *I felt* that she really wasn't feeling anything. [It appeared to the student-therapist that the client really was not feeling anything; nevertheless, he felt that there was something odd that he could not quite name.]

S: Ah! Okay.

ST: And I thought for a while... Is this what Gendlin means by *repressed contents*, *blocks*, all that? [The trainee is trying to find an explanation for what he perceives that disturbs him.] Because *then* she went on to say...

Client: "Once I came home late from school, a bit after 2 p.m., and she... my mother... thought that I had gone to play with my friends, but I had actually stayed for an exam, and she grabbed me and belted me on the back, on my body, and she kept hitting me all around the house until the buckle fell off and then she stopped".

ST: But she did not tell me about how much this hurt or anything... hmmm... [The trainee seemed to be asking himself with some unease... "*And didn't this hurt you...?*"]

Client: "And from there I went away, very insulted, and then my sister told me that my mother had ripped up all my "rock & roll" posters".

ST: And I'm thinking, "This woman's mother is crazy"... not that my client is crazy... she's alright, and I began to ask myself, "How could she possibly want to marry, to have children, after this?" Nevertheless, my greatest surprise was that she was really looking directly into my eyes and saying very clearly: "*I do not feel anything about what my mother said to me about her wanting to abort me, and that her whole life was ruined because she got pregnant with my first sister, and she had to marry my father, and then she had us other five, and her life would have been happier if she had not had all of us, bla, bla, bla...*"

[The trainee emphasizes his surprise when he notices the discrepancy between the incident with the mother and what the client says she is feeling. How is it possible that she is feeling nothing? Nevertheless, the therapist clearly does not know what to do with the discrepancy he perceives.]

S: Let's see, if we pause... if you can recapture that piece where she is talking to you about all this. Try to imagine her, remember her, and all that she said... and now notice yourself... you... How are you feeling while you are there listening to her, watching her recreate this whole story?

[The supervisor has the impression that the supervisee is telling the story of what happened in the therapy session, but *he is not paying enough attention* to what he is *now feeling* in the supervision session, so he invites him to pause and imagine the client as a way to attend to what is now felt during supervision.]

ST: Yes, what was most noteworthy for me as a person, as a therapist, was the discovery of... *it is new for me this time...* feeling clearly that there really was no emotion behind something that was so strong... that happened... that a mother could have said that to an adolescent.



[He perceives with clarity that the client appears to not experience any emotion or feeling regarding what happened with her mother — but — what to do with this perception? It appears to me to be a common situation in the process of learning: the difficulty of staying with the uncertainty — without having to do anything quickly to resolve it.]

S: Is that what you remember feeling in the session? [The supervisor tries to clarify whether the supervisee is talking from his recollection of the therapy session, or whether he is expressing himself from what he now feeling in supervision.]

ST: Yes, in the session I really felt that she was not connected to the feelings of that event. I was so surprised and yet did not insist because I was... [Now he seems to be speaking about what he remembers of the therapy session]

S: Ah! Okay, your appreciation was: “It appears to me that she is not able to recognize what she really feels about what happened”. [The supervisor expresses his understanding of what the therapist perceived. At the same time, he hopes to clarify that they are referring to a *memory* of the therapy session.]

ST: Exactly!

S: It’s not that she doesn’t feel *anything* — it is rather that “I believe she is not *letting herself feel* what in fact she *does feel*...!” [This comment by the supervisor helps the supervisee recognize the uneasy discrepancy that he is feeling.]

ST: Yes, my sense is, “*Is she really telling me that she doesn’t feel anything about this event?*” [The tone seems to express disbelief.]

S: Now, if we bring this here to the present... in the moment... imagine, remember... as if you are there... in order to imagine it again... What is happening to *you*? How are *you feeling*? [The question could be, “How do you feel now in relationship to this client?” The invitation is to go further than the facts, in order to recapture what the trainee knows from his own felt sense.]

ST: (sighs) Let’s see... I felt... hmmm... suddenly like saying, “Alright, here could be the root or the origin of all of it... or a good part of it... the emotional problems.” And a bit like... here was the opportunity to try to feel some of her feelings, right? This was the important part... However, I also felt that I had to wait, because I was also seeing something new in her... which is... that some events were so strong for her that they don’t presently have any emotional impact... even a small inkling of something felt... and the other sense was of surprise that... something this strong in fact, did not awaken any emotion in her. This is how I now recall what I was feeling then. I am not sure if I have answered you.

S: Let’s say there is a mixture of unease and surprise...

ST: Surprise and discovery, right? What I mean by discovery is, “Ah. OK. This is what some authors refer to when they talk about blocked or repressed contents.”

S: It is like making the reference and trying to understand it from a theoretical perspective.

ST: Yes... because it *was* different from other times when you want to ask: “And how does that feel?” And you get a response, “Well, in the middle of all this I felt...” and the client might describe any number of feelings, but in this case — *nothing!* I was already used to the former, which is what had happened with other clients...

[The trainee appeared to be so disconcerted that he was trying to understand in some way what he was perceiving. One of his favorite options up until now was to search for theoretical references for difficulties in attending to his felt sense — which he is slowly overcoming. At the same time he is considering past experiences to appreciate the reaction of the client, and he is also considering what is different from what he expected which is causing his unease. One interesting aspect is that from the theoretical perspective he could present a hypothesis that perhaps *she does feel more* than she is recognizing, and that he can help her wait for the process to unfold, in order to see what happens.]

## REFLECTIONS AND LESSONS LEARNED BY THE SUPERVISEE

Upon completing the supervision session, we spoke about what new learning and insights came about in the session. What follows are comments from the student-therapist:

I believe this session taught me the following:

- A re-creation of the felt sense of what happened yesterday in the therapy session helped to increase my understanding of the issue. I became aware of more aspects regarding how the person *lives* that situation.
- I came to understand the importance of paying attention to what *I am experiencing* during the session.
- I am reminded of how crucial it is to pay attention to *my felt sense* in order to use it as a point of reference in reflecting back to the client.
- I believe I can now dare, during a session, to express myself more from the felt sense — which I am so much more aware of now — even if it has to do with something implicit in the expressions of the client.
- I have to give more credibility to the felt sense, validate it more; trust it in a very real way.
- I see the importance of using the exact words of the other person — not putting so much importance on my own words.
- I can pay attention and validate my own images — when they come from my felt sense.
- I can also learn to distinguish whether what comes in me is a genuine felt sense or an interpretation or rationalization. It takes time... a pause... to process a felt sense.
- I realize that when I can identify the changes in my own felt sense, I need to remember that if something changes for the client. It is indeed because of things that I properly reflected back — that helped it to change!

My one comment was to remind him that the felt sense can be symbolized precisely — in very diverse ways. Personally, I often get images that tend to describe the richness and complexity of situations lived by clients. I have found it quite useful to share these images with them because they recognize and resonate with such images, thereby carrying forward their own felt sense.

## CONCLUSIONS

Undertaking this writing has increased my awareness of the complexity of the supervision process. Reflecting upon various aspects of supervisory sessions, including reading case transcripts, has taught me much. In my experience as a professor involved in training psychotherapists with an interdisciplinary approach, I see the importance of taking into account the multidimensional aspects of this training: having a place for the bodily felt sense, the affective, the cognitive, and values that include socio-cultural aspects.

Understanding the fullness of Gendlin's work, especially in the process of supervision, requires dialogue and reflection in order to genuinely grasp both the psychotherapeutic process — and the theory behind it — especially for improving interaction and competency in psychotherapy.

I am very clear about how rich it is to explicitly integrate the felt sense, both experientially and conceptually into the supervision of psychotherapists in formation, further supporting their understanding from their own lived experience, of the concepts and theories proposed by Gendlin.

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