

## Teaching Focusing to Clients: A Way of Pre-Therapy\*

By Ton Coffeng

### Introduction

Some time ago I heard about the concepts of experiencing and focusing of E.T. Gendlin (1). It was only when I listened to Gendlin himself (Amsterdam 1979), that I realized their meaning and implications. He showed clearly how the interaction happens between client and therapist, how one can monitor this as a therapist, and how one finds the right wave-length of the client.

Then his book appeared (3), in which he explained the technique of focusing. After reading this, I decided to attend his workshops in Holland and Chicago. I wanted to learn it myself, but also I needed the skill to teach it to others.

Concerning myself, after focusing, many things that had been said before, or had happened during supervision, or during therapies became more clear and understandable. It was as if they had fallen into place. For example, theoretical items about psychotherapy fitted better to the practice. Concerning the teaching of focusing to others, I have done this for more than a year, and I would like to tell something about it. I hope to hear from others about their experiences.

### Applications

The essence of focusing can be integrated in various forms of psychotherapy. I will not elaborate on this here. The technique of focusing can be taught as a pre-therapy to every client. This can be done before as well as during the therapy.

Gary Prouty wrote about focusing with psychotic and oligophrenic patients (4). Elfie Hinterkopf modified the technique for chronic psychiatric patients (5), and Bart Santen showed recently his application with a 'borderline' patient (6).

Outside the therapeutic setting focusing is used to engender creative processes.

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\*The first version of this article was written in 1983; since then, nine more courses have been given. Findings tend to confirm the impressions of this article.

### Description of the way I used it

First I practiced focusing with individual clients. The advantage was that I could keep pace with each individual's own speed. A disadvantage was that I had to interrupt the process of therapy in order to teach it. So I decided to teach focusing to a small group of clients through a course, at a different place and time, while continuing their individual contacts.

### The first group

It consisted of 3 clients of the social psychiatry O.P.D. There was one client with chronic depression and suicidal utterances, who had had several admissions, who was unhappy with her present social situation and who had severe feelings of insufficiency. Another was chronically depressive as well, resistant to anti-depressant drugs, and agoraphobic; another was anxious and uncertain, because of several broken relationships. One of them was not used to talking about himself; another too much controlled by ambivalent feelings, so she was either vague or silent; the third had a strong urge to talk which made her easily driven out of the course. All had a despairing feeling: "How could things have turned out so badly with me?" There was a tendency to attribute their complaints to external events. One person came to find out if, why, and where she should be admitted for clinical therapy, the others came for supportive treatment. Yet I had the impression, that there might be abundant psychotherapeutic possibilities after a good preparation; all reacted positively to the fact that there was time for them and that they were taken seriously. They seemed to digest the first contacts and to want more than support or advice.

### Procedure

There were 6 weekly sessions of 2 hours, and two follow-up sessions after 1 and 4 months. The Dutch translation of the book Focusing (3) was used. They were advised to use a cassette-tape to practice at home. At each session only one step was explained, demonstrated, and practiced. At the next meeting I inquired about how successful the previous step was at home. Substantial

attention was paid to this. When all could master it, then the following step was explained.

At the start it was made clear, that nobody should feel obliged to explain her/his problems. That it was not necessary in order to learn focusing. This was done to alleviate their fear of self-disclosure.

I encouraged them from the second session to instruct each other. In this way I could see their own pace and detect early misunderstandings. It was also a method to practice how to instruct oneself at home.

#### How it went

It was at first uneasy; everyone was tense. Everybody was silent; there were few reactions. I was unsure myself, whether they heard what I said. When we recognized the tension there was a freeing.

One person experienced this remarkably. She apologized for being too tense to focus. She could not put down a problem, which was fixed to her stomach as a cramp. When we accepted this (instead of trying to change it) she ran from step 1 to 4: "'Resistance' that was it!" That word and that feeling were not about this situation only, but applied to an important part of her life, against which she had rebelled; she recognized that felt part as having been there for a long time. She was very surprised at this finding.

At the next meeting it appeared that they had been active at home and had read the book. I could notice it from their reactions. When they instructed each other they found their own words and ways, as if they transformed the format to something from themselves. They came with spontaneous reactions and examples from home. "Felt sense" was a discovery for them: when you focus on something and it turns out to be something different; as was being able to face a problem without carrying the burden.

One of them wrote, that he woke up at night, felt tense, went downstairs and installed himself on a bench. He was irritated by the tick of the clock and stopped it. After clearing a space he discovered that the tense feeling had to do with the visit of his father that evening. After some waiting he got a key-word "pity", but that did not fit completely. After resonating came "...self-pity." That was it! That was what his father had showed. He was very proud to have discovered this by himself.

During the focusing, we agreed upon which signs should be given by the person who focuses, so the other who instructs can know when to carry on. In this way they learned how to observe each others' physical reactions (such as sighing, etc.) They learned to take seriously their own body sensations. One of them visited the dentist, but knew already that it had no organic cause.

They became less dependent on their rational thoughts or my reactions. I saw this during their individual contacts in between. One lady ignored me after saying something, and asked herself, "Does this come from my head or from myself?"

#### Last meeting

They had been uncertain and afraid the previous meeting, afraid about not being able to focus by themselves, afraid to be left alone, afraid to part. At the last meeting they were more confident. With all three, focusing seemed to have been integrated in their daily life. This implied consequences for their attitude towards their family and about certain decisions. One felt that she was no longer a victim of her depression and could accept her life with its limitations. Another went to meetings and got his driving-license at once (this was avoided for years). The third became more assured and relaxed, and less influenced by other people.

#### Result

1. All three could focus themselves at home.
2. The way of talking with me was changed; they didn't expect solutions from me, but only a space to find out things themselves.
3. All became more independent, and value their own experience and feelings as more important than those of others.
4. They took their body sensations seriously, without labeling it as "sickness".
5. There was a move from "complaint" to "problem", and from "problem" to "starting to live" with now and then a glance at their problems.

6. The goal, preparing for psychotherapy, was reached.

The course was terminated December, 1982. The first version of this article was written in March, 1983. Looking back now (August, 1984), I would like to add a little.

One client needed only a few contacts with me. He changed dramatically. He lost his fear of meeting and facing people, and took more responsibility for himself. He used his sick leave to look for another job and became an equal partner to his wife. One client is still fighting to be taken seriously by her family and some colleagues who consider her still as a patient or "manic" or "hysterical". The other one came for therapy every 3rd week. We continued to focus, and she made important changes. The most important shift was from "expecting respect from others" to "gaining self-respect." She closed the book of the past and is trying to find her new way. Her therapy is terminated these days.

#### The second group

There were 5 clients from The Centre for the Person and The Family (Counseling dept). Two of them were at the start of their individual psychotherapy; the other three had just had their intake, and needed to wait about 6 months for their treatment. One person suffered from inner unrest and imbalance of mood. She wanted to learn to handle it, as well as her tense relationship towards her daughter and her mother. She wanted to learn to express herself. Another one wished to find her way after unsuccessful couple's therapy. She also had a tense attitude to her daughter and parents. She had been depressed and was inclined to either ignore her problems or to plunge into them. A third client wanted to find her way back after a crisis. A fourth came because of marital problems. She had had a long-lasting depressive time. She seemed to intellectualize her feelings; in her appearance her head seemed to be not attached to her body. The fifth suffered from phobic and physical complaints; she came for couple's therapy.

### Procedure:

The same procedure was used as with the first group. The differences were that they were referred for focusing, that I did not know them before, and that I did not see them separately during the course. With the first two, I intended to start psychotherapy after the course. Two partners could not attend the course because of practical circumstances. For these people I made short summaries on paper, as soon as I noticed that they were writing instead of listening only.

### The sessions

The start was tense and silent; there were non-verbal signs of recognition and understanding. There were individual differences; some dared to do some exercises soon, while others were waiting. One stressed the fact that she was not capable of trying, but was later persuaded to try. Nobody was pressed. This point was stressed by me often. It was striking how everyone tried to integrate the idea of focusing into her own life. They began to recognize each others' problems and feelings. After some incidents, I spent some time on misunderstandings such as: high expectations, impatience to rush to a problem without clearing a space, losing the distance from a problem while focusing on it, etc.

### Reactions

After the last session they answered two questions by letter:

1. Can you focus at home?
2. Did something change?

Here are some excerpts from one client's response:

During the course I experienced that I am able to do it; without help I can't, but I shall master it over some time  
Before: being stuck with bottled up feelings; I had the idea: 'it has to come out immediately.' I had often the feeling of not being understood.....now: more self-confidence; I shall find my way...I no longer feel myself as affected.

Another wrote:

Before I was chaotic and running around. I was hardly aware of my feelings which I covered up... Now: more quiet, still a bit nervous because all sorts of feelings come to the surface...

A third wrote:

I have now the feeling of being able to have space in myself...Before: locked up in myself; attached to norms and was afraid to hurt others. I suppressed my own opinion, so that I came nowhere...because of this often depressed.. Now: spontaneous, sense of humor...I know what I want.. I am in command of myself...

#### Follow-up second group

Three could focus more or less independently; two of them practiced it with me about six times. One of them came after half a year to show me how she had changed and had become independent; the other one continued to have couple's therapy, something which she had feared. The third one showed the integration of feeling and understanding; her head had become a part of her body. Two could not focus by themselves. One became ill during the course; she attended another one. The other person was still too nervous to practice it. Nevertheless, she was more at ease at the last meetings and shared some experiences of hers with the others with a lot of humor. My impression was that she became more equal to her husband, although her phobic complaints remained.

#### Discussion

It is possible to bring somebody closer to her/himself by focusing. The technique is simple. The essence can be learned in 6 sessions. More assisted practicing is needed to focus independently at home. The teacher has to be aware of individual differences and possible misunderstandings. The learning of focusing obviously implies changes, with possible consequences for somebody's life. This is not bad in itself, but it may frighten some to take this risk. Or one can be surprised when the change comes so quickly. One needs to assist in this process. But at the same time, group-members support each other, especially, when they see that one of them survives such a change.

The teaching of focusing in a small group as a course seems to be an effective and quick method. It stimulates self-activity and independence. Members do not only learn focusing but also how to teach it and to help somebody else. The increasing

contact between members is striking; one does not need to explain one's problems extensively ("self-disclosure") in order to be accepted. Someone who focuses becomes more natural, more recognizable and visible, after this, her/his fear of telling something about it, is removed. And, because of this, more interaction with others happens. The other members become more open to this person, because they made a space themselves. In other words, the first start of a group-process with interpersonal learning was visible. Therefore, it is my opinion that focusing can be integrated in group-psychotherapy, and can be a powerful resource.

The learning of focusing brought these clients a bit further. The step to psychotherapy is not so high any more; they got some idea about what therapy is. It is a question whether they need further help or psychotherapy. Some of them preferred some assistance to continue their process with focusing; others preferred to find it out by themselves.

In my opinion one should let clients be free to choose, but should offer help, in case they may need it in the future.



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