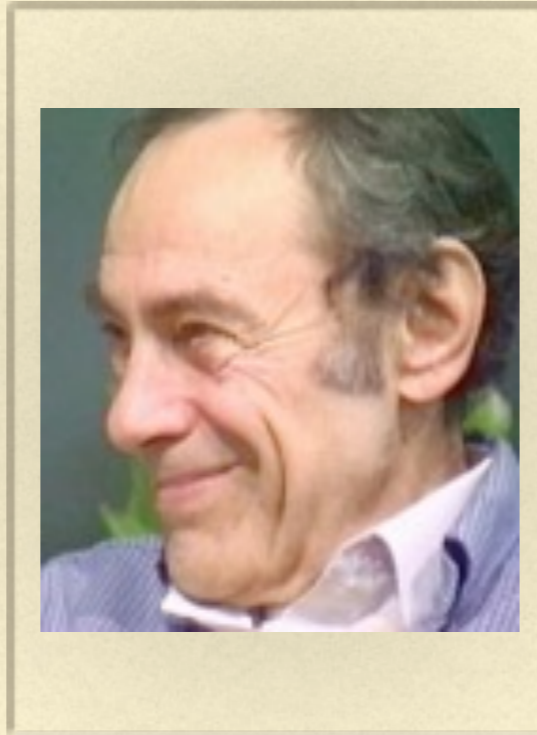

INVITING FELT SENSES WITH ANY CLIENT

Ann Weiser Cornell

THE TRANSFORMATIVE CONCEPT OF THE FELT SENSE

- A felt sense is a freshly forming, wholistic sense of a situation that has a “more than words can say” quality to it.
 - A felt sense is not just any body feeling. It is inherently meaningful.
 - when a felt sense is contacted with awareness, fresh steps can emerge. “Focusing” is the process of this contact and these fresh steps.
-



“A felt sense is the wholistic, implicit bodily sense of a complex situation.”

– Gene Gendlin, *Focusing-oriented Psychotherapy*, p. 58

FELT SENSES ARE IMPORTANT BECAUSE:

- A felt sense is a moment in process where the next step of life is forming
 - Felt senses go beyond frozen structures and habitual concepts
 - When a felt sense forms, something new and fresh is happening in the direction of the client's own further life
-

FROZEN STRUCTURES



- Are stereotypical ways of responding...
 - To partial aspects of a situation...
 - When we've lost our ability to respond to the richness of fresh detail in the current situation as it actually is.
-

-
- ◆ “It is not only that I react poorly to authority. Rather, I react this way to EVERY person whom I perceive as an authority. And, more important, I react ONLY to his being an authority, not to him as a person, and to the very many present facets of him and our situation which are different from any other situation.”
-Gendlin 1964
-

When you are inside the frozen structure, all the things you do - including all attempts to solve the problem - are just examples of the problem all over again.





Yet human beings also have the capacity to shift levels, stepping outside the box of our narrow, frozen ways of thinking and feeling, living in new ways that are responsive to the current situation, which emerge naturally from the present living.

This can happen because living process has the ability to form its next step. The next needed step can form as a felt sense before it can be planned or thought.

FELT SENSES ARE IMPORTANT BECAUSE:

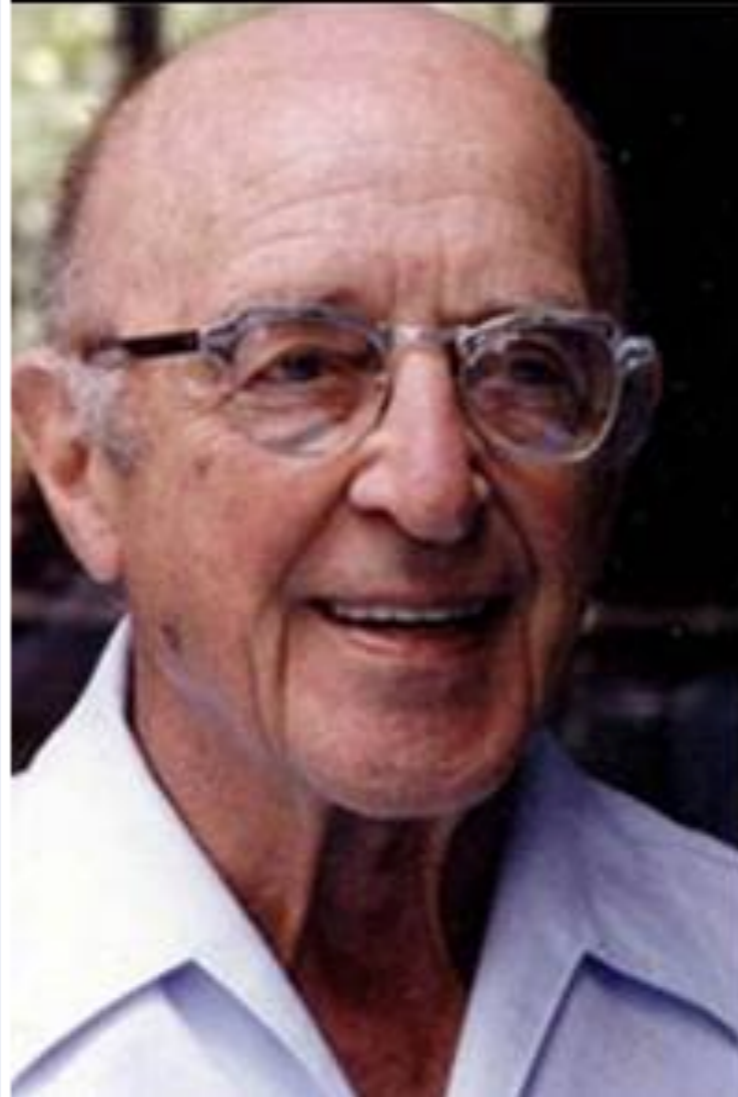
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-

FELT SENSES BECOME POSSIBLE WHEN:

- The therapist is present in his/her/their own body
 - And anything the client says is received by the therapist:
 - warmly
 - with interest
 - with a sense that it has some kind of positive direction in it somehow
-

THE POWER OF EMPATHY

"Being listened to by someone who understands makes it possible for persons to listen more accurately to



themselves, with greater empathy toward their own visceral experiencing, their own vaguely felt meanings.
Carl Rogers

CultureOfEmpathy.com

“[Empathic] reflecting ... includes saying back exactly what the person is trying to convey. The therapist attempts to grasp exactly how each moment of her experiencing feels to her. He wants to be in contact with every turn she takes and with every one of the meanings she finds. ... What the client was trying to say need not be said any more, because it has been said and heard. Now there is room inside the client for something further to come. But nothing more is ready to be said. There is a little silence. ... When the next thing to say does come, it often comes from a deeper level.”



– Gene Gendlin, *Focusing-oriented Psychotherapy*, p. 45

TRUSTING OUR CLIENTS' PROCESS

- The change steps are in the client — not in our “brilliant” interventions!
 - When we say back what the client says, we know there is more
 - The next steps are emerging
 - In what the person says and feels is their life trying to find its way forward
-

TO FACILITATE FOCUSING

- Be in your own body
 - Respond empathically to what the client wants to convey
 - Notice and encourage the felt senses that are there
 - Use empathic prompts to nurture the moments when clients nearly have felt senses
 - Help clients slow down and sense in the body
 - Help clients go from repetitive states to felt senses
-

FELT SENSES ARE:

- Experienced in the present, here and now
 - Hard to describe (usually)
 - Often needing fresh, metaphorical language ("kind of like a wall inside," "like a kid saying no")
 - About life situations, but containing more (implicitly) than has been previously known
 - In the body
-

HOW CLIENTS MAY APPEAR WHEN THEY HAVE FELT SENSES

- groping for words, being suddenly inarticulate, saying “this is hard to put into words”
 - slowing speech, going quiet, looking down
 - gesturing toward the middle of the body
 - using words like “kind of” or “something” or “here”
 - For example: “It’s here...” (waving toward chest) “... but I don’t know how to say it. It’s like... I don’t know...”
-

“I don’t know what’s wrong with me. I think I’m just lazy. I’m feeling... it’s funny, I don’t know what this is... there’s this little hard place in my chest, like a kid saying no... Hm. ... Well anyway, I’m probably just resistant.”



-
- C: “I don’t know what’s wrong with me. I think I’m just lazy. I’m feeling... it’s funny, I don’t know what this is... there’s this little hard place in my chest, like a kid saying no. ... Hm. ... Well anyway, I’m probably just resistant.”
 - T: “You think you’re lazy.”
-

-
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 - T: “There’s something in your chest, a little hard place, like a kid saying no.”
-

THE EMPATHIC PROMPT

- Use the client's own words, the emotional or bodily sensed or metaphorical words (and sometimes gestures or tone of voice)
 - Add the word "something" to point to the place where that experience is directly sensed
 - Put the client's descriptive words last
-

EMPATHIC PROMPT: EXAMPLE

- Client: “There’s this funny kind of squeezing in my chest as I talk about her... I guess I miss her.”
 - Counselor: “You miss her... and there’s **something** right there in your chest... a funny kind of squeezing....”
-

EMPATHIC PROMPT: EXAMPLE

- Client: “It’s vague but I’m sensing it right here in my throat, it’s a constricted, scared feeling.”
 - Counselor: “You’re sensing **something** there in your throat... constricted... scared...”
-

EMPATHIC PROMPT: EXAMPLE

- Client: “In my belly, it’s like it’s... like it’s empty, there.”
 - Counselor: “There’s **something** there in the belly, something you’re feeling, like ‘empty’.”
-

CLIENT: “I DON’T KNOW WHY I CAN’T DO IT, I THINK IT’S MY FEAR OF FAILURE. ACTUALLY... IT’S FUNNY, BUT WHEN I SAY THAT I GET A BIT CHOKED UP, LIKE THERE’S SOMETHING TIGHTENING UP IN MY THROAT... IT’S HARD TO DESCRIBE... UM...”

THERAPIST: “SO YOU THINK IT’S YOUR FEAR OF FAILURE.”

CLIENT: "I DON'T KNOW WHY I CAN'T DO IT, I THINK IT'S MY FEAR OF FAILURE. ACTUALLY... IT'S FUNNY, BUT WHEN I SAY THAT I GET A BIT CHOKED UP, LIKE THERE'S SOMETHING TIGHTENING UP IN MY THROAT... IT'S HARD TO DESCRIBE... UM..."

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THERAPIST: [SOFTLY] “**SOMETHING** THERE IN YOUR THROAT... FEELS LIKE TIGHTENING...” [PAUSE] “MAYBE STAY A BIT LONGER, JUST FEELING THAT...”

CLIENT: “YES... IT’S LIKE THERE’S A HAND THERE, CUTTING OFF MY BREATHING... NO, NOT COMPLETELY CUTTING IT OFF, JUST CONSTRICTING IT... FUNNY, IT’S ALMOST LIKE THERE’S A LEASH AROUND MY NECK!”

THERAPIST: “THAT BRINGS A NOTE OF SURPRISE, WHEN YOU FEEL IT’S LIKE A LEASH AROUND YOUR NECK.”

CLIENT: “LIKE THERE’S A PART OF ME SAYING, ‘KEEP IT IN BOUNDS. DON’T GO TOO FAR.’ WOW, I DIDN’T KNOW THAT WAS THERE!”

THE EMPATHIC PROMPT FUNCTIONS TO:

- Stay close to the client's process; offer contact without intrusion
 - Point to the felt sense as something worth staying with
 - Encourage the client to stay with the felt sense
 - Offer the client the felt sense description so s/he can check inside if it fits
 - Invite a felt sense to form
-

THE MOST FACILITATIVE
WORD...

何か

qualcosa

iets

algo

SOMETHING

某物

quelque chose

etwas

THE POWER OF “SOMETHING”

- I. Disidentification
 - II. Holding a space for what is not yet in words
 - III. Pointing to felt experience
-

THE INNER RELATIONSHIP

- The Inner Relationship is the client's relationship with her/himself.
 - And not just with her/himself in general, but specifically with "something" in there, that s/he experiences.
 - "This," "all this," "this here," "something," are all ways that people refer to this inner felt experience.
-

I: DISIDENTIFICATION

- F: I'm afraid I'm never going to get over him.
 - C: Something in you is afraid you're never going to get over him.
 - (C: You're sensing something in you is afraid you're never going to get over him.)

 - F: I'm so sick of feeling this way.
 - C: Something in you is so sick of feeling this way.
 - (C: You're sensing something in you that is so sick of feeling this way.)

 - F: I'm so angry at her I could spit!
 - C: You're so angry with her! [why not use "something" here?]
-

II: HOLDING A SPACE FOR WHAT IS NOT YET IN WORDS

- F: I don't know what this achy feeling wants to tell me.
 - C: The achy feeling wants to tell you something.

 - F: I'm not sure how to describe this feeling in my throat.
 - C: You're sensing something there in your throat.

 - F: I have no idea what this part of me is afraid of.
 - C: You're sensing it's afraid of something.
-

III: POINTING TO FELT EXPERIENCE

- F: I keep going back to that incident with Joe.
 - C: There's something about that incident with Joe...
 - F: "...so by the end of the day, she still hadn't called me, and I was calling everybody else, all her friends... I didn't get any of my work done. A wasted day, totally wasted."
 - C: "Yeah, a whole day, wasted for you, calling everybody and waiting for her to call you. There was something about her not calling you, that brought all that for you."
-

POINTING TO FELT EXPERIENCE IN A STORY

- “There’s SOMETHING ABOUT _____[event]_____ that brings a feeling of _____[emotion]_____.”
-

DESCRIPTIONS

- When a client is in touch with a felt sense, descriptions naturally come. (“There’s this little hard place in my chest, like a kid saying no.”)
 - The first descriptions are only the doorway. There is more.
 - It is the nature of a felt sense that the person can feel there is more to it than the first descriptions. You can tell this from how often people use phrases like “kind of,” “sort of,” “funny,” “odd” ... and of course our favorite word, “something.”
 - There is often a quality of groping for words, with hesitations in the voice as the client reaches for a description that is elusive.
-

DESCRIPTIONS, CONTINUED

- ~~“Can you describe it more?”~~
- The empathic prompt, which is neither a question nor a suggestion, offers support and acceptance for the description that came, while holding open a door for the likelihood that there is more to come.
- Saying the client’s descriptive words last is also helpful.

Client: “There’s this funny kind of squeezing in my chest as I talk about her...”

Therapist: “There’s **something** there in your chest as you talk about her... a funny kind of squeezing...”

(1) THE CLIENT HAS A FELT SENSE.

(2) WE SUPPORT THE CLIENT IN TURNING TOWARD THAT FELT SENSE, USING AN EMPATHIC PROMPT.

(3) NEXT WE WANT THE CLIENT TO CHECK HIS OR HER WORDS INWARDLY, TO OFFER THE DESCRIPTIVE WORDS TO THE FELT EXPERIENCE AND SENSE IF THEY FIT. THE SECOND FUNCTION OF THE EMPATHIC PROMPT IS TO ENCOURAGE THAT CHECKING.

WE KNOW WE'RE DOING WELL WHEN THE CLIENT TELLS US THAT HIS/HER OWN WORDS DON'T ACTUALLY FIT.

CLIENT: "AS I TALK ABOUT HER, I'M STARTING TO GET THIS CONSTRICTED FEELING IN MY THROAT."

THERAPIST: "YOU'RE SENSING SOMETHING THERE IN YOUR THROAT AS YOU TALK ABOUT HER, SOMETHING LIKE CONSTRICTED."

CLIENT: "NO, IT'S NOT EXACTLY CONSTRICTED... UM... IT FEELS LIKE THE WORD 'TIGHT' FITS BETTER."

THERAPIST: "YOU'RE TRYING OUT THE WORD 'TIGHT' ... THE WORD 'TIGHT' FITS BETTER..."

“WE CANNOT USUALLY
GET PEOPLE TO SHIFT
THEIR ATTENTION IF WE
IGNORE WHAT THEIR
ATTENTION IS FOCUSED
ON.”

– GENE GENDLIN, FOCUSING-
ORIENTED PSYCHOTHERAPY, P. 51



INVITATIONS TO CHECK AND STAY LONGER

- C: Maybe just stay with that a while...
 - C: You might sense if those words fit well.
 - C: See if it's OK to just give that some company.
-

PAUSING, SLOWING DOWN

- Felt senses form in a pause.
 - “I need a moment to take in what you are saying.”
 - “What you are saying sounds important, I need to pause and digest it for a bit.”
 - “Let’s take some time with this.”
-

INVITING A FELT SENSE

- “Notice how that all feels now in your body.”
 - “Maybe sense how you have that whole thing.”
 - “You might take some time to sense the whole way that sits in you now.”
-

NOT GOING PAST A FELT SENSE

- Client: “There’s a kind of dark, heavy sadness in my chest... I can’t describe it very well... My boyfriend keeps telling me what I need is to just get my life together, just think in a different way, I don’t know, I guess I should, but it's something I’ve tried before, and he keeps telling me to try again...”
 - Therapist: “I’m kind of still with that dark heavy sadness you were feeling... that sounded important somehow. I’m wondering if that’s still there, in your chest...”
-

NOT USING THE WORD “BODY”

- Clients may not be helped by the word “body.” Instead we can say:
 - “Maybe there’s a whole feel of that now.”
 - “Maybe sense how you have that whole thing.”
 - “Let’s pause and just let the whole thing be here a while.”
 - “Maybe there’s a way that all that feels for you now.”
-

QUESTIONING QUESTIONS

- Problem #1 Questions are conversationally “strong.”
 - Problem #2 Questions tend to draw attention to the questioner, and to highlight the interpersonal interaction.
 - Problem #3 Questions put a burden on the client by asking for a result but not saying how to get it.
-

-
- T: “And what do you feel in your body as you think of that issue?”
 - C: “Nothing.”
 - T: “Take a little more time, if that’s OK... let the issue be here... notice what comes in your body...”
 - C: “I’m starting to feel a tightness in my chest...”
-

INSTEAD OF QUESTIONS: “CUSHIONED SUGGESTIONS”

- Maybe you could...
 - See if it's OK to...
 - Notice if it would be right to...
 - You might...
 - Take some time to...
 - Maybe...
-

HELPING FELT SENSES EMERGE FROM STORIES

- Client: "...so by the end of the day, she still hadn't called me, and I was calling everybody else, all her friends... I didn't get any of my work done. A wasted day, totally wasted."
 - Therapist: "Yeah, a whole day, wasted for you, calling everybody and waiting for her to call you. There was something about her not calling you, that brought all that for you. Maybe wait a bit right there, feeling that..."
 - Client: (pauses) "I felt so helpless. Like I was the baby instead of the mom."
 - Therapist: "And maybe some of that is there right now..."
 - Client: (hand moves to chest, voice chokes up) "It's here. I am so tired of feeling this way!"
-

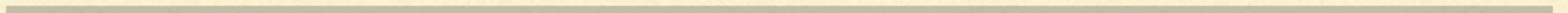
WHEN FEELING THE BODY IS A CHALLENGE

- T: Let's start with having you sense how you feel right now.
 - C: I don't know. That's always the problem. I don't think I feel anything.
 - T: Okay. That's a starting place. Now, how about your body? Maybe you could take a little time to feel your body in the chair, just getting the sensation of touching, resting on the chair. Maybe rolling your shoulders. . . . That's it. You can feel the chair?
 - C: I can feel the chair.
 - T: Great! Let's move now to having you sense the inner area of your body. Like your throat. Feeling your throat is no harder than waking up on the morning after you had a sore throat, and you're just checking if you still have one. You know?
 - C: Okay, I guess I feel my throat.
-

-
-
- T: And now, your chest . . . and now your stomach. . . .
 - C: I can feel them, but I don't feel anything in there. It just feels like usual.
 - T: I'm just wondering if "usual" feels the same way in your throat compared to your chest . . . or in your chest compared to your stomach. . . .
 - C: [in a surprised tone] My stomach is tight!
-

ANOTHER INTERVENTION WHEN PEOPLE SAY THEY FEEL NOTHING

- T: Perhaps it feels peaceful or relaxed in your body right now...
- C: No...



THE “RESISTANT” CLIENT

- • The client doesn't go into an emotionally connected process when invited.
 - • The client pops out of an emotionally connected process into chatting, storytelling, or intellectualizing.
 - • The client says “I don't want to go there” about the body, about emotional content, or about a particular issue.
 - • The client experiences sleepiness or blankness when the process starts to “go deep.”
-

-
- C: I did not want to come today. I do not have anything more to talk about (laughs). Really, there is a level I do not want to touch. I got there once before and I got into crying and I could not get out of it; I could not stop crying. . . .
-
- T: You do not want to fall in there again that way.
 - C: Right. Usually, I believe in feelings and I think: If you feel it, it gets better. But on this, I don't know.
 - T: So we won't say: Just feel it. You did that and it was not better. Whatever we'll do here, you would like it to be in a different way . . .
 - C: Right. (And then there is a long silence.) I can feel it right there, just below where I am.
 - T: Let's stay here a long while, just relating to it down there, without going there.
 - C: (long silence) The way the whole thing feels is that I am no good, and I am helpless to do anything about it. And I cannot hardly touch that. (Gendlin, *The Small Steps*, 1990, p. 217)
-

THE SELF-CRITICIZING CLIENT

- C: Now I'm getting that familiar voice saying I'm going to fail at this too, so why bother?
 - T: Sounds like that part of you is worried about something.
 - C: Yes ... it's worried I'm going to fail. ... It doesn't want me to fail.
 - T: Maybe you could let it know you really hear that it doesn't want you to fail.
 - C: That's funny! I thought it wanted me to fail! It's actually on my side. ...
-

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