Beyond Just Words:
When words are simply not enough, go for Impact!

By Danie Beaulieu
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I hear and I forget. I see and I remember. I do and I understand. - Confucius

A client sits hunched in his therapist’s office, his eyes fixed on the floor, unable to meet the therapist’s gaze, murmuring one-syllable replies to direct questions. Elsewhere, another client circles around and around the crux of her problem with an endless flow of talk, resisting all her therapist’s attempts to nudge her back toward the main issue. Most therapists spend the majority of every day talking and listening, often to clients such as these, trying to find the right words to make therapeutic progress. We’re trained to use words to explore the client’s problems, and trained to use words to find the solutions. No matter which therapeutic approach we favor, the challenge often comes down to communication: arousing the client’s interest enough to engage the client in a more focused problem-solving discussion by channeling the flow of words.

When the right words do come together in a breakthrough flash--an “aha!” moment of clarity for the client--we think, “Finally, I was able to help my client really see where the problem lies! Now we can make some real progress!” In that thought--“I was able to help him see”--lies the key to breaking through client inertia and capturing their attention and energy in the therapeutic process. That key is getting beyond words; getting beyond words to enlist more of the client’s senses--seeing, touching, smelling and even tasting--in the process of resolving difficulties. When we talk with our clients, we’re engaging only a fraction of the multisensory resources of the mind, involving the auditory sense, yes, but neglecting the other senses that guide human interactions with the world and their emotional responses to it. But there are simple ways to recruit those neglected sensory modalities in every therapy session, increasing our effectiveness every day.

The developmental pattern of the brain gives us some clues as to why it’s so important to engage more of the senses in therapy. A baby’s sense of comfort and security is cued sensorially, not verbally. The verbal centers of the brain are among the last to develop, long after myriad sensory impressions have been linked to emotional states, making words the last layer of information added during development. Baby knows that feeling of vulnerability and isolation whenever he’s separated from Mom for a long time before he’s able to name it ‘sadness’!
In recent years, this intrinsic power of our multisensory relationship with the world has been extensively applied in education. We now recognize that children explore and learn about their world more efficiently if they use more than one sense, even in the schoolroom setting. A math problem involving fractions suddenly becomes clear when a child is offered a real apple to cut into pieces, or even a symbolic round piece of red construction paper. Seeing, touching, and manipulating objects helps ground the abstractions of arithmetic. These same principles of multisensory involvement can be effectively applied to psychotherapy. When words fail, recruitment of other senses can help break through to another level of involvement, so that the therapist can have real impact on the client.

Convinced of the potential such an approach would offer, Ed Jacobs of West Virginia University developed Impact Therapy, designing a set of techniques that recruit all the senses to the therapeutic process. These techniques add needed impetus when the interaction gets bogged down in words, allowing the therapist to rapidly translate the issue into concrete terms. The following case demonstrates how simple concrete visual and tactile metaphors quickly helped a severely depressed young woman not only to see and touch her problems, but to see and touch the solutions.

Learning the Hard Way
Louise, a 28-year-old veterinarian, was referred to me after a psychiatrist diagnosed her with severe depression with suicidal ideation, recommending medication or hospitalization. Louise categorically refused both, but was willing to try psychotherapy. When I first met her, I was struck by Louise’s quiet voice, her simple style of dress, and her straightforward, self-effacing manner of talking about--and taking responsibility for--her current situation.
She’d reached what seemed to her the end of her career. After graduating from veterinary school in Quebec, she’d moved, with her boyfriend, to the United States for two years while he pursued a Ph.D. Since the licensing procedures prohibited her from working as a vet in the U.S., Louise took a job as a veterinary technician. Dissatisfied, she returned to Quebec before her boyfriend graduated to work as a veterinarian. She found work in a large successful clinic with a staff of almost 15 people.
Louise was impressed with her new boss, who was an extremely competent and ambitious as a veterinarian, but was also sharply critical and demanding of all the employees. Louise, who had always succeeded in her endeavors and rarely faced criticism, found it especially hard to face coming from someone she admired. As the negative comments mounted, she began to doubt her abilities. When she made an error in a surgery that could have led to serious consequences for an animal in her care, she held herself responsible--not only for what happened, but also for what could have happened. With her boss’s ongoing criticisms providing reinforcement, Louise began to question her skills and her judgment incessantly. She referred all but the simplest cases and feared meeting new clients. Her confidence plummeted, she became indecisive, couldn’t function at work, and stopped sleeping. After less than two years of work as a veterinarian, she quit her job and moved in with an aunt, falling into a pattern of passivity in which she spent most of her time thinking about
her problems and crying.
We devoted our first session to investigating Louise’s history and current problems. Her father had died when she was three, leaving her mother with three young children, including Louise’s older sister who suffered from epilepsy. By the time Louise was 8, her mother was going out several times of week, leaving Louise responsible for her younger brother and for dealing with her sister’s seizures. Over time, Louise became entirely responsible for the family and her younger brother became progressively delinquent. Louise’s mother spent most of her time and money on dressing up and going out, delegating adult responsibilities—cooking, cleaning, managing finances—to her daughter. Louise managed to fulfill those responsibilities, to be an excellent student, and to run the household on the little money that was left. In fact, it was only now, at 28, that she felt for the first time that she was incapable of handling a difficult situation.
Clearly, Louise’s history of always being the good child and the good student in the face of adversity had left her ill-equipped to face the recent wave of criticism. Having never previously needed the skills for responding to negative comments, she was vulnerable to a situation that assaulted her view of herself in fundamental ways. Her susceptibility to criticism had led her to the erroneous conclusion that she wasn’t competent to practice.
Louise left me no doubt about her suicidal thoughts, so my first priority was to give her hope and the motivation to go on for at least another week. I wanted to offer her a few tangible experiences, to leave her with more than just words to hold on to after the session. As Guillemette Isnard, French neurophysiologist has said, “Information is integrated when all the senses have had their say.”
Aware of Louise’s scientific training, I guessed that an orderly, almost mathematical analysis of the situation might connect with her personal logic. I wanted to give her a visual representation of how others perceived her, to counterbalance the negative inner vision that she’d developed. Presenting her with a blank piece of paper, I asked her to write down the names of 10 people who could evaluate her professional abilities. She listed her ex-boss, her boyfriend, two colleagues from the clinic, and six professors from her veterinary school. Next I asked her to tell me what rating, on a scale of 0 to 10, each person on the list would give her. With the exception of her ex-boss, she thought every person would rate her as a 7, 8 or 9. Her boss, she decided, would give her a 3 or a 4.
I then asked Louise to rate each of her “evaluators” in terms of their social/emotional health. Did the person function well in their personal and professional relationships? Were they happy, healthy individuals? Once again, most of the names on the list got 8s and 9s, with an occasional 7. Her ex-boss received a 3.
“So, how do we evaluate what you’re worth as a veterinarian, Louise?” Louise looked at the list and was confronted by data that undeniably indicated that she was actually well above average in the view of others. Her training as a medical scientist and her reliance on statistics forced her to set aside her belief that she was a bad vet and accept the possibility of a different view. This realization had a major impact on her. There was suddenly room for hope again.
I gave her the page to take with her, as her first anchoring prop for the week. Anchors are reminders of new ideas and new learning acquired during a session.
Learning takes place most effectively (1) by repetition, (2) by association of something new with previous knowledge, or (3) by the effects of strong emotion on memory (as is the case in PTSD). By giving her the sheet of paper, I provided Louise an anchor to assure repetition of the learning process during the following week. Every time she looked at the chart depicting her evaluation, the idea that she was a competent vet would sink in a little more. Words alone--which she may or may not remember to think about--couldn’t have accomplished what that take-home form was able to do.

Louise needed to learn about healthy management of her thoughts, and about accepting or rejecting the judgments of others. So I went on to the second method of strengthening new learning-- attaching a new idea to a concept Louise already understood quite well: the life-sustaining nature of clean water. Most clients respond well to this intervention, because it touches on such a common concept of what’s healthy and what isn’t.

I picked up a glass and explained to Louise that it represented her mind. The mind is a reservoir for all sorts of experiences, good and bad, that influence the way we perceive the world and our place in it, I explained. When Louise nodded her understanding, I poured fresh water in the glass, and said that good experiences—healthy interactions with good-willed, healthy people, for example—were like clean water: beneficial and necessary to our normal functioning. I then emptied a plastic baggy full of ashes and cigarette butts (reserved for this purpose) into the glass, along with a used tissue and other disgusting little things that I keep handy for this intervention. Swirling the revolting cocktail, I extended the glass toward Louise, offering her a sip. She recoiled in distaste; “I couldn’t possibly drink that!”

I asked, “But isn’t that precisely what you’ve been doing? Do you think that your boss has been adding clean water or garbage to your glass?”

Now I picked up another glass and a coffee filter. I poured the contents of the first glass through the filter into the second, letting the filter trap all the nasty stuff.

“What you need, Louise, is a way of filtering out some of the garbage. Garbage is all the stuff thrown at you by people who have problems of their own--maybe they’re just tired or angry, or they might even have some emotional problem. In any case, it makes their interactions with others unhealthy and damaging.” I showed her the filter, saying, “When you’re living or working in a polluted environment, you need a filter that will keep some of the bad stuff from lodging in your mind.”

Next I handed her a clean filter, saying, “Keep this with you, this week, to remind you to filter out some of the bad influences or bad thoughts that might come up before our next session. Your own thoughts have become pretty polluted by what you’ve experienced, so some of the garbage thoughts are coming from the inside. You don’t have to accept them though--the filter works just as well on them.”

Once again, just talking to her about garbage would have been addressing the temporal lobe, where the verbal centers are, but with the concrete representation of the filtering process I was connecting with the occipital visual centers, as well as eliciting limbic responses that dictated her physical recoil from the noxious mixture. She was much more likely to remember to try to filter out negative comments and self-talk when so much more of her brain was involved in the learning process.

My office is well stocked with a wide variety of simple props. I frequent the dollar
store and seek inspiration in the knickknacks that I find there. Very often, the simplest objects have the greatest power as concrete metaphors, simply because they’re so recognizable and readily accepted. Your office is already full of useful props, if you look around with an inventive eye. Adding to your collection will become an addiction when you see how well these simple techniques work with your clients.

Mental gymnastics
When Louise came to the second session, she told me that she didn’t think that she’d ever needed a filter before. “I can’t get used to filtering comments; I’m not good at it. All my life I’ve mostly heard people say good things about me. I was the good girl in my family, who got good grades and behaved well, and I did well at the university, too.”

Resorting to one of my favorite exercises, I asked her to fold her hands together, interlacing her fingers. “Look at your hands and notice which thumb is on top. Now unfold and refold your hands, so the other thumb is on top. How does that feel?” When Louise said it felt awkward and uncomfortable, I explained that she’d probably been folding her hands together in the same way all her life, just like she’d been a sponge soaking up all comments about her. Now she needed to learn to use a filter, and it was bound to feel awkward and uncomfortable for a while, as she broke one habit and established a new one. Each time she folded her hands, now, she should remember that she was learning some new life skills. By translating the discomfort caused by the new mental effort into a physical metaphor, the resistance to learning a new life skill was diminished to something quite easy to understand, and to overcome.

It seemed probable to me that Louise’s childhood experience had made self-criticism and self-blame routine, as she tried to be a perfect child under stressful conditions. She’d told me that she felt responsible for every seizure her sister had, for every delinquent act her brother committed, for every mistake she made in her efforts to be a dependable daughter. As an adult, it was hard for her to recognize that part of her was still trying to play the role of the perfect little girl and that another part of her was carping and criticizing her for it. I wanted her to see that more concretely, so I pulled out a plastic child’s chair from the corner of the office.

“This chair is like you as a little girl. When you were a child, who was there to help the little Louise learn how to build a healthy life?” To introduce the concept of an adult figure, I placed a normal, adult-size chair next to the child’s chair. “Was there anyone in the adult seat to guide that little girl?” I asked, referring first to the adult chair and then to the small chair.

This simple tableau of her childhood situation struck. Instantly, Louise saw that no one had occupied the position of guiding adult in her life; the adult chair had always been empty. As I explained to Louise, with no one there to guide her, part of her had become her own “critical parent.”

At this point in her life, Louise was in need of an alternative inner voice, one that would be more mature and supportive. I took out a third chair. “If that little girl had had a guiding adult or a nurturing parent, what would that person have told her? Would he or she have said that little Louise was responsible for everything that
happened to her sister and brother?” Louise shook her head.

With the help of the chairs, it became clear to Louise that she was regarding her boss from the perspective of the child’s chair—helpless, hopeless, and powerless. She needed to work on a presence to fill the third chair, developing within herself the heretofore absent nurturing parent. By “trying on” the two positions—the vulnerability of the child’s chair, and the protective authority of the third chair—Louise began to understand the conflict stirring inside her. Her lifelong “good girl” strategy was failing to meet her own needs, and gave her insufficient resources to meet the challenges of adult life, in which pleasing others wasn’t always possible. With no counterbalancing nurturing voice, her tendencies for self-criticism had been given free rein.

Power struggle

Our third session began with a declaration of frustration. “I keep finding myself sitting in the little chair,” Louise said. “I can’t seem to get onto the big one.” “It’s not easy, is it?” I said. “Imagine training just one arm, conscientiously, year after year, never working on the other arm. You’ve been training to sit in that little chair all your life. It’s like a really strong muscle, and it’s going to win hands down when you try to use the big chair instead. But every time you try, the big chair’s getting stronger and gaining importance, and eventually it will win.” That simple metaphor provided considerable relief from the frustration that had been accumulating.

Louise was still depressed, and complained that the fog of depression wasn’t lifting fast enough. Recognizing that I needed to help her adjust her expectations to a more realistic level, I decided to use the metaphor of the “Internal Accountant”—a mathematical analogy that suited Louise’s inner logic. I handed her a page of figures—a long list of additions and subtractions covering many rows—with a large equal sign at the bottom. “What’s the total?” I asked. Louise was amused at the impossibility of the task. I explained. “Each of us has an accountant in our head that can add up all of our impressions from all of our experiences with anything in a split second. Do you like dogs?”

“Yes, I love dogs. I have two,” she answered instantly. “You see? Your internal accountant just did an instant calculation, adding up all the good times you’ve had with dogs, all the wonderful animals you’ve known, subtracting out the one or two times when something unpleasant might have happened to you with a dog, and came up with a grand total of 10,000 or so, in the dog section of your ‘mental bank account’!”

When Louise smiled her agreement, I went on. “Your ex-boss gave you an experience worth a minus 500 every day for two years in the veterinary category of your mental bank account. You’re going to need some good experiences to get that total back up into the positive zone. And you’re on the right path to do just that.” This metaphor became the basis for a secret code between us. In subsequent sessions she would mention that she’d made a lot of additions, or at least fewer subtractions, in the last weeks. During therapy, when her comments or her body language showed that she’d just reacted negatively to a thought, I’d say, “Uh-oh, we just made a subtraction, didn’t we?” Gradually, Louise began to recognize her own reflex to
strong self-criticism and negative perceptions, permitting her to interrupt her damaging thought patterns. Now she had concrete tasks to accomplish: getting used to sitting in the “big chair” and looking for ways to “make deposits in her mental bank account.”

Mama’s little girl grows up
Two weeks later, Louise came in with an air of renewed energy. For the first time, she expressed appropriate anger toward her ex-boss. As the nurturing parent role became more familiar to her, she was leaving behind the timid, approval-seeking child.

All wasn’t entirely well, however. Louise was anticipating an extended visit from her mother. These visits always left Louise feeling smothered by unwelcome affection and attention. When her mother hugged and kissed her repeatedly, Louise submitted passively, waiting for the uncomfortable moment to pass. While she was gaining proficiency in assuming the adult role in the rest of her life, when it came to her family situation, the old pattern was harder to break. If Louise were to continue along her remarkable journey of rapid personal growth, the old script of behaviors and exchanges with her mother wasn’t going to work anymore. I wanted to show her that she had a choice, that she wasn’t restricted to following the same script for the rest of her life.

Picking up a blank piece of paper I folded it in two. “We all have scripts for our lives. This is yours.” I wrote Louise’s Script: 1974-2002 on the cover. “On a scale of 0 to 10, what was the result of the script of your life when you first came to see me?” Louise said she’d been suicidal at that time, so it could only be a 1. I marked this prominently on the cover.

Opening the script, I began to read an imaginary text: “I must always please others, especially my mother. Even if I don’t want to, I must always do what others expect of me.” Louise winced, recognizing herself immediately. “Are you going to continue with this script, or do you want to write a new one? Are you going to pick your mother up at the airport with this script?”

“No,” Louise responded, recoiling slightly, “I don’t want to do that anymore. That script’s the little chair. I don’t want to be in that chair anymore!”

This instinctive combining of metaphors illustrates the power of physical and visible representations to connect at the emotional level.

The third way that we learn new things is when they’re linked to strong emotions. Louise had clearly indicated that she didn’t want the script, offering me the opportunity to create surprise--even a shock--to help give the next message greater impact.

Holding the script high between us, I tore the paper to pieces. Louise gasped and laughed nervously. She said she felt stripped of her protective covering, naked before the world. I’d succeeded in provoking the elemental emotional connection that’s needed for instantaneous learning. Now was the time to offer new, healthy information.

I took out a new paper, folding it like the other, and wrote on the cover: Louise’s Script: 2002--. “How about if we put a 9 on the cover, instead of a 1?” and wrote a 9. “What would you like the theme of the new script to be?” I asked, writing her name
with a flourish.
“I want it to be about respecting myself and what I feel and what I want.”
“Now, what might you do differently at the airport with this script?” I handed her the paper.
“I can stand up for myself, and tell my mother I don’t want to be kissed and hugged like a little girl,” Louise proposed, uncertainty etched on her face.
“That would be pretty tough, wouldn’t it? Like the hand-folding exercise, that would be really difficult and uncomfortable the first time.” I proposed to her that we do some role-playing, with myself in the role of her mother, to allow her to try out the new script for that relationship before meeting her mother. And with that exercise we ended the session. [As one said : knowledge is only rumor until it is in your muscles.

Walking tall

Our last session together took place three weeks later. While she was away, Louise had made remarkable progress. She and her boyfriend had made plans to buy a house in Quebec as soon as he finished his studies. Louise realized that she was going to have to find a job. She’d decided to approach potential employers by simply stating the truth about her last job, concluding with how much she’d grown from the experience. She’d obtained a glowing letter of recommendation from a veterinary school professor. These decisions and concrete plans were clear evidence that Louise was well on her way to building a healthier life.

Her mother’s visit had also taken place in the interim between our sessions. Although the relationship with her mother remained tense, Louise didn’t feel that it warranted a large investment of energy. This was a reasonable decision, and we let the question rest. Louise also felt that she would need to continue to work on filtering bad influences from her life, as well as her tendency to do too much for others, ultimately despising them for exploiting her.

With this progress, and the clear signs of restored energy and hope, I suggested that she give me a call for a follow-up chat in about a month. During that follow-up call, Louise reported that she’d found a new job. Although her negative soliloquy had a tendency to raise its voice occasionally, she assured me that she was still very careful to avoid minus signs on her mental account. She was thrilled with the idea of moving in with her boyfriend in a few months and the young couple had obtained a loan from her boyfriend’s parents to buy their first house. Equipped with powerful new guiding metaphors and with tangible anchors to serve as reminders, Louise was clearly on her way to building a better, stronger life for herself.

Making it happen

Learning how best to choose and apply concrete metaphors is a gradual but simple process. Start by mastering a few that are nearly universal in their utility: the hand-folding task for learning new skills, the use of chairs to represent inner voices and authority figures, the balance sheet or arithmetic problem for the emotional “bank account.” Build a collection of props in your office, as I’ve done, by visiting the dollar store and browsing for inspiration. Listen carefully to your clients for clues in their word choices for metaphors or language systems that are central to their way of thinking. A client who tells her therapist, “All my efforts amount to (or add up to)
nothing,” is clearly indicating that the Accountant metaphor would make sense to her. When clients say that they can’t seem to “get past” (or “see around”) a particular event or problem in their lives, they’re likely to respond well to a concrete representation of something—as simple as a piece of paper or a wall, perhaps—blocking their view when close up, then being less obstructive when one steps away from it, or simply looks in a different direction.

The rewards of these techniques—the fast and lasting results for your clients—come quickly. Almost every time you try a new visual or tangible metaphor with a client, you’ll get that “Aha!” breakthrough moment that you may have spent hours seeking with words. It still thrills me to see clients respond to these most natural and intuitive representations of their difficulties and the solutions to them. Adding creativity, metaphors and props to your practice is sure to add more efficacy, more fun and more impact!

Danie Beaulieu is a psychologist in Quebec, Canada, author of twelve books and an International Trainer in Impact Therapy and Eye Movement Integration.