

## *Part two*

### *feelings, emotions and relationships*

#### *with ourselves, others and symptoms*

We belong in a bundle of life. We say 'a person is a person through other people'. It is not 'I think therefore I am'. It (ubuntu) says rather 'I am human because I belong'.

Desmond Tutu *No Future Without Forgiveness* (1999: 34–5)



# 2

## Reciprocal role relationship procedures

From the beginning of our conscious life we learn to recognise, name and express or contain feelings and emotions through our daily life with caretakers. Like the seed in relation to the soil we are planted in, we grow within the garden of our early environment of family, our social and cultural structure and in response to its demands and prejudices. Feelings and emotions get defined for us from our early reciprocal relationships. What is considered 'emotional' may be responded to in a variety of ways. Many people with eating disorders, for example, have often had their emotional needs responded to with food and not recognised as having individual and separate meaning. Body sensations in response to threat may be identified as the emotion of fear and responded to in a variety of ways. Useful sympathy and support leads us to learn self-care and be able to befriend our fears. Belittling and dismissing leads us to reject expressing fear in words and it remains a body sensation.

Feeling angry, hateful or resentful and responding to anger and rage from others is one of the most charged areas within families. Dr Anthony Ryle, the founder of CAT, says:

A very large percentage of depressed and somatic symptoms are located in the inability to express anger in a useful way. (in conversation with the author)

So we are seeing that for many of us feeling and emotion get blurred together and develop in the course of relationships that provide definitions. Being seen as 'emotional', or having our emotions interpreted as 'just drama', is often a cultural judgement on any emotion that is seen as excessive. What constitutes reasonable emotional expression in one culture is unacceptable in others. One example is in expressing the emotion of grief after bereavement. In Eastern countries, wailing, rocking, being dressed in black and supported for a year are a widow's rights and offer a rite of passage; in Western countries we are encouraged to 'get over it and move on', as if feeling and emotion had no value or purpose.

When we have been able to identify how our emotions have been interpreted within our growing environment and are starting to understand the learned reciprocal roles around emotion, it is useful to look at a possible difference between feeling and emotion.

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**Feelings** remind us we are alive as human beings and are responding to the outside world! They are in essence quite simple things that communicate through our bodies experiences such as happiness, joy, wellbeing or anger, sadness, fear or jealousy. When not entangled in thoughts, feelings can rise and fall like waves in the ocean throughout our daily life. By practising awareness we can watch this process and allow its natural rhythm without any interpretation from our thinking mind.

Every one of us has a feeling nature. Feeling is an important function in terms of our sensing, valuing and sensitively judging situations. What can be more difficult, though, is experiencing feeling without being 'emotional'.

**Emotions** are more complex and denser in quality. They are a combination of our feelings, our thoughts and body sensations that have been, in early life, defined for us by our environment. They are the result of feelings getting attached to ideas from our past experiences recorded in inner dialogue about what is possible and allowed and what is not. When feelings are identified as emotions they create distortions in thinking and acting.

Examples of how this might be active in inner dialogue are:

I'd better not show I'm angry because I will get hit.

If I show I'm scared they will leave me.

If I expose my need they will laugh.

### **Out of our emotions come our actions.**

So emotions tend to be dominated by what we tell ourselves inside about what we can tolerate and what not. As we well know, once we have become dominated by our emotional response it is much more difficult to remain centred or express ourselves clearly to others. *Either:* We may just shut down and go silent with everything swirling around inside. *Or:* We may swing from one emotional state to another, feeling out of control.

We may have a particular way of controlling responses that seems to conceal our forbidden feelings but may elicit them in others, such as in passive aggression. We feel angry but anger is forbidden so we sulk, withdraw, eat to excess, and others are furious.

**Learning about our internalised dialogue with all the parts of us is an important step to self-awareness and to choosing how to change.**

## **Reciprocal roles and core emotional pain**

As we saw in Part One, everything we experience about being a person happens within the context of our relationship with an 'other'. The British child psychologist D.W. Winnicott (1979) said 'there's no such thing as a baby', meaning that the baby does not grow alone, but with 'others' who care for the baby in various ways. We come to know ourselves, and slowly become conscious, through the signs, images and communications toward us and in response to us, from others, and the meaning these communications inspire.



holding, sound, smell and atmosphere. Each one of these experiences is accompanied by expressions of feeling and a 'language' of gestures, rhythms and sounds. We have an inbuilt ability to identify with the 'other'. For example, newborn infants stick their tongues out in response to someone sticking out theirs. We have mirror neurons that have been discovered to be the biological basis for empathy, for being with and feeling with another human being. For most of us mirror neurons continue to help us become attuned with ourselves and others throughout our lives.

Our early experience in reciprocation with our all-powerful carers invites a number of what are called in Cognitive Analytic Therapy, **reciprocal role procedures**. The word 'role' is a way of describing our interaction with others, and theirs with us. 'Role' describes how we see, respond and interpret, how we feel and attribute meaning to and how we act with others and in internal dialogue with ourselves.

As we saw earlier, the experience of being held safely creates an internalised capacity to both *hold* and *be held* with the resulting healthy island feelings of secure, happy, loved. An experience of being left or neglected leads to an internalised *abandoning* part of the self in relation to an *abandoned* self with feelings of being 'dropped' or feeling unwanted and bad. And these early experiences are anticipated in relation to both ourselves, and others.

Feeling held when helpless and fed when hungry and crying offers a reciprocal dance between *caring* and being *cared for* and the resulting feeling is contentment and safety. In our growing brains the growth of the frontal lobes that govern thinking and reflecting, is assured, and we are free from the chemicals of fear.

Conversely, feeling hungry and being deprived of food creates a reciprocal experience of *needy and helpless* in relation to *controlling and withholding*, and the feelings, not yet understood, but held in the tissues of the body, are of anxiety and rage. The sense of potential healthy island is restricted.

Most of us experience a mixture of early life care. All of us carry a repertoire of reciprocal patterns learned from early care relating to care and dependency; control and submission; demand and striving. These patterns are internalised automatically and serve to maintain the self in the social world. They become our automatic pilot. Once named and reflected upon they can be made sense of, adjustments may be made to the more problematic roles, and new, healthier, reciprocal roles can be created.

Most psychological problems stem from deficiencies of early care such as excesses of control and demand or a critical, judging and conditional acceptance. Major inconsistencies or unpredictable responses such as violent acting out or traumatic separations and abandonments which are not explained or understood create reciprocal roles that reflect patterns such as *abandoned/neglected/angry victim* in relation to *violent/aggressive bullying*.

### Parent and child reciprocal roles

The analogy of the seed in relation to the soil gives us a context for the evolution of our reciprocal role relationships. As well as environmental influences we must also consider the individual nature that is uniquely ours. **It isn't just what happens to us, it's what we make of what happens to us.** We are not looking to blame an early life seen as fixed and irredeemable. We are looking

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at that rich mixture of what happened, how we met our experiences, and at what now needs to be revised and changed.

So, in the earth of the early environment we learn a three-way pattern of relating to the world, others and ourselves:

- One pattern is connected to the way we feel towards others and our reaction to them.
- The second pattern anticipates the way we have learned that the other person is going to react towards us.
- The third pattern is the way we relate to ourselves inside.

For example, if my early experience has been with a mother who was perhaps absent for a lot of the time – either because of illness or depression or because of having to go to work, or simply because I didn't feel close to her – my core pain may be around abandonment or rejection and part of me will feel like an abandoned or rejected child. I will also carry an abandoning or rejecting other and act in a rejecting or abandoning way toward others, or toward myself, unable to accept my own or others' efforts as good. My internal dialogue will be reflecting themes of feeling rejected by a rejecting other. I may talk in a rejecting way to myself; telling myself off or not caring for my needs. The inner dialogue may be mild and occasional, and it can become repetitive and ruminative, giving rise to anxiety or feeling obsessed with anticipating rejection.

Sometimes our early reaction to quite small problems with parents, or small instances of absence or neglect, can be quite extreme, and until those reactions are modified and looked at afresh they live on to inform the way we relate to others in quite a profound way.

Sometimes our more problematic reciprocal roles are compensated for or accompanied by reciprocal role procedures derived from good experiences such as kindness or positive examples of care, however small, from others. We may also benefit from a rich imaginative life that supports us through fantasy and dreams that are meaningfully different from the environment we endure, and we are able to make these work for us. There are some people who survive the most neglectful and abusive of backgrounds who have a healthy island beaming openness and grace in spite of it. There is no clear reason for this except for the hypothesis that within their natural being is the means to transform suffering and create meaning and inner strength. Or, this potential for a healthy island, which is in all of us, has been nourished by one good experience of a loving attitude.

## Re-enactment of early life parent/child roles

What we learn from early experiences becomes a sort of hidden 'rule book' laying down patterns of relating. We can play *either* role, inviting others to play the reciprocal role. It is important to grasp that we learn *both* roles (the *judged* and the *judging* role, for example). As well as the '*coping child*' role, we learn to force others to play the reciprocal role as well as treating ourselves in the same terms. Thus our *core wound* is maintained by both the damaged and the damaging aspects we learned early on.

Look through the table set out in Figure 2.1 and notice how you respond to each section. There may be thoughts, feelings, body sensations. Follow your

the words or images that come to you, write down your own connection with patterns of reciprocal roles. Remember that we manage ourselves emotionally as we were managed and cared for. We get used to it, and what we have known becomes part of us. This means that the same sorts of things keep on happening to us in relationships.

These old patterns give us a clue about the structures of relationship patterns that lie underneath. These are the learned patterns we can revise. As you record the relationship patterns you have got used to, you will be finding descriptions of the ways in which you look after yourself, how you expect to be responded to by others and how you relate to others.

First, using your developing new voice, the voice you are internalising in this book, of me as author and therapist also in you, write down the areas in your life that work well and where you can assess the following patterns. For example:

### Care we experienced

GOOD ENOUGH

Not 'too good'

Not 'too bad'

Loving

Caring

### We felt

lovable

sense of self

secure

cared for

### Some good experiences

responsive↔held

trusting↔trusted

loving↔loved

healthy

Put the words you choose to describe into your 'healthy island'.

There may be many variations in the actual words used to describe your experiences, and it is important for each of us to find our own. We are not looking to find 'literal' answers. For example, it is quite possible for us to recognise feeling punished when we've been criticised as if we have been beaten physically. If the word 'punished' best describes our core pain then it's important to understand the three-way process that lives on in our relating. Our *internalised punished child self* expects others to behave in a *punishing* way towards us. We may unconsciously choose others who behave in a punishing way, thus maintaining the core pain *punishing/punished* and coping devices such as being cowed or pleasing. Our *internalised punishing adult self* may continue to behave in a punishing way, creating demanding timetables or being overcritical, beating up on the *internalised child self* and maintaining a feeling of punishment. Or, we may behave in a punishing way towards others, particularly those who appear 'punishable', and remind us of our own cowed or wounded self. Quite often our coping mode only works partially for us and is accompanied by depression or other symptoms. Sometimes we evoke a punishing response which seems to confirm the original pattern and deepens our depression or other psychological or physical symptoms.

Another example is of the childhood experience of abandonment. This might invite an *internalised abandoned child*, whose experience was either of actual abandonment or of a parent or caregiver who felt remote, depressed or preoccupied. And then there would be the *internalised abandoning adult*, who continually

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<b>The way we experienced care</b>	<b>What we felt</b>	<b>Attempted solution (survival pattern)</b>	<b>Reciprocal role (with self and others)</b>
<b>ABSENT</b> Rejecting Abandoning	rejected abandoned	placating parental child	rejecting↔rejected abandoning↔abandoned
<b>CONDITIONAL</b> Judging Belittling split Demanding Blaming	judged humiliated crushed blamed	striving striving hypervigilance hypervigilance	judging↔judged admiring↔rubbished exacting↔crushed blaming↔blamed
<b>TOO TIGHT</b> Overcontrolling Fused dependency Flattening	restricted merged flattened	rebellion flight into fantasy giving in	controlling↔controlled merging↔merged flattening↔flattened
<b>TOO LOOSE</b> Anxious Not there Abandoning	anxious fragile abandoned	avoidance anxious striving 'nowhere world'	abandoning↔abandoned distancing↔distanced
<b>TOO BUSY</b> Overlooking Depriving Silencing	overlooked deprived silenced	excessive striving searching 'not there'	overlooking↔overlooked depriving↔deprived silencing↔silenced
<b>ENVOIOUS</b> Envious Hated Picking	envied hated picked on	magical guilt self-sabotage self-harm	harming↔harmed hating↔hated picking↔picked on
<b>NEGLECTING</b> Neglecting Physical neglect Emotional neglect Mental neglect Attacking	neglected hurt hurt/angry fragmented attacked	can't take care mood swings feel in bits unstable states develop 'false' self	neglecting↔neglected switching states unstable states unstable states attacking↔attacked
<b>ABUSIVE</b> Abusing	abused	bully/victim	abusing↔abused Fantasy of perfect care
<b>VIOLENT</b> Abusing states	hurt/abused	split into fragments unexpressed rage	fragmented hitting out↔hitting self

Figure 2.1 Patterns of care that can dominate our relationships until we revise them

abandons their 'child self' by not attending to needs, or who chooses an *abandoning* 'other' in relationships, which keeps the core wound in search of healing.

As we grasp how these patterns of relating continue, in our present everyday life, we may expect all three 'roles' to be enacted at different times, or within the same relationship. The child 'role' still feels fresh and sore, but it is maintained, within us, by the adult 'role'. Thus the two 'roles' are reciprocal, they go together and need to be understood in this way. It is important when embracing change to look at both ends and not just strive to heal the wounded child. We also need to modify the adult reciprocal role; to recognise when we are picking on, punishing or rejecting toward ourselves or others and find other ways of being.

**When we are able to see that the way we feel is maintained by the tension between both roles we can learn to choose healthier ways to relate.**

When early experiences offer no relief from painful or unbearable anxiety and fear, and we have no way of processing this, the different feelings may get split off into different parts inside us. Sometimes there is no connection between the parts and we find ourselves in emotional states with no idea how we got there. In Chapter 8, we will be describing the more unstable states of mind and how to create a continuing observer within oneself.

### *exercise*

#### **Self to self**

Rest your attention on the general flavour of your close relationships, starting with the relationship you have via inner dialogue with yourself. Take your time. Notice how you think about and speak to yourself inside. You may find you have imaginary conversations, with real-life or fictional others, and that there are themes to these. Themes might include trying to be heroic, or happy, or pleasing someone; conversations may be being critical, judging, or encouraging, hopeful or longing toward an imaginary other.

#### **Self to other**

Notice how you anticipate how others will behave toward you, especially in close relationships. Notice how this anticipation manifests in the tension in your body, in your thoughts. You may anticipate and hope for special words only to be met with words that do not meet your hopes and expectations and you end up feeling disappointed or dashed. You may anticipate harshness, criticism and hold yourself back or even make yourself vulnerable to what is expected. Notice all your reactions when with others.

As you explore your own reciprocal roles and notice the core pain of the child-derived role such as punished, criticised, bullied, forgotten, think about what you would feel if you saw a child being treated as you were.

# 3

## Emotional states, depression and eating disorders

This chapter outlines three general experiences around feeling and emotion from which you may discover more about your own reciprocal role repertoire. First we look at 'feeling bad', 'not having feelings' and 'unmanageable feeling'. Then we look at two specific problem areas which are predominant in our Western culture: depression and eating disorders.

As you read through, start to write a description of what you feel and what you relate to in the examples.

### **'Always feeling bad inside'**

Reciprocal role procedures incorporate implicit values about oneself and others. When we get into a *critical/rejecting* in relation to *sad/bad* reciprocal role, the way out may be to reverse the roles so that the weight and hurt of it lessens. Often we are not aware of how bad we feel inside until we start reflecting. It might be that we experience others and life as bad, as against us, and things go wrong for us.

Feeling bad inside might influence the relationships we make. We might feel we can only make relationships with people who might be worse than us. We don't like ourselves enough or feel free enough to know what we like, or to have relationships or friendships with people who are attractive or successful. The result of all this is that we feel depressed. It might be a general thin veil of depression and worthlessness, or, in more severe cases, deeper depression from which we feel we are never going to be freed. We somehow manage to carry on, automatically doing things we feel we must do, but never really experiencing pleasure or happiness in any form.

We may try to become 'bad' because, why not? People already think we are so why not live up to it?

You may want to add to this list, naming for yourself what you recognise are your attempts to cope with feeling bad inside.

Sometimes in our early lives we are actually told we are bad and that 'nobody loves a bad girl or a bad boy'. We may pick up messages we interpret to be about our badness. Perhaps we don't come up to the standard required of us. Perhaps

our parents' view is that we don't give enough, therefore we're selfish. We might enjoy doing things that the rest of the family doesn't, so we're labelled odd or difficult, and therefore 'bad'. We may find ourselves in the grip of difficult feelings in our early life – fury, a desire to hit out, a sense of entrapment and persecution. We might be the subject of actual cruelty on a mental or a physical level. We are made to feel even worse if we do start to express our feelings of frustration and hit out. When there is nowhere for bad feelings to go, we bury them.

These feelings tend to stay inside festering, like a boil, for years. It isn't until something happens or we start thinking about ourselves that we realise we have believed inside that we are bad. Although logically we may know we are not bad, we may feel that something in our core isn't quite right, there is something wrong with us, something unpleasant and difficult.

But when we don't understand why we feel as we do, those bad feelings are often projected onto other people and situations.

### *exercise: 'always feeling bad inside'*

If you recognise that you feel like this, just spend a few moments quietly reflecting. See if you can get some sort of graphic image for the way you feel. Start with the phrase 'It is like ...' and let your imagination offer you a picture, colour, shape or image. It doesn't matter what comes to you, just stay with whatever emerges. Examples could be 'heavy black mud'; 'squirmy tummy'; 'rotten apple'. When you feel you have got a sense of it, make a graphic picture (drawing, note, collage) of what it feels like to be you inside most of the time.

Notice if feeling OK is conditional. See how often you say to yourself 'I will only feel OK if ...'.

Can you recognise any of these other ways of feeling bad:

- ☐ Heavy weight in the body
- ☐ Feeling sick
- ☐ Depressed mood
- ☐ Always think the worst about myself
- ☐ Sometimes I believe I am evil
- ☐ I tend to move with a 'bad' crowd
- ☐ I feel that people always end up hating me
- ☐ I always return to the feeling I was never wanted in this world
- ☐ If something good comes my way I can only spoil it
- ☐ Because I never do anything good, I must be bad

When you recognise any of the above, note it in your own way in your monitoring notebook. Try to notice when and where these attitudes or thoughts come in your everyday life. Monitor this process for a week to give you a pattern of what situations trigger feeling bad.

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However many ways of feeling bad you identify in yourself, allow yourself to feel sad at this burden of badness. For it's sad when an innocent child – usually where this mistaken idea began – believes they are bad.

Next, start experimenting with a new idea, that actually, fundamentally *you are not bad*. Challenge the critical nagging voice from the past, whatever bad behaviour you may have indulged in. Always thinking that you are bad might be spoiling your chances of proving to yourself it's not true. *It's a very old message and belongs to the past*. Try to find someone to talk to about it. Sharing the 'I am bad' idea is helpful, because the hurt and pain of the old belief are maintained by the internalised reciprocal role of *critical harsh judge* in relation to *bad and guilty*. Get some help to start a new reciprocal role of *listening* to one of being *listened to* and use it to start listening to yourself differently. Look at the things about yourself that are not 'bad', however small. You have read this page. That indicates that part of you is searching – that's not bad but positive. Believe in that, that you have it in you to embrace something different from the old message 'I am bad'.

## Not having feelings

When I ask you 'How does it feel?' what happens? Is it a struggle, or do you find yourself saying: 'I think ...'? This may be because you have not been able to develop a language for feeling.

Sometimes we need to ask someone to write a list of 'feeling' words for us to experiment with. Another way is to start noticing what happens in your body when you are asked how you feel. If your answer is 'I feel nothing', see if you can trace what happens in your body when you say those words.

The use of images is also helpful, and descriptive words such as 'tight' or 'tingly' or 'cramped' or 'stuck' can be a good start to exploring more about what you are feeling. Some people presume that they do not have feelings, when in fact their feelings are bottled up and unseen. When feelings have been as firmly shut away as this, we can appear cold. We appear unaffected by the most devastating news as if a reciprocal role of *cut off/controlling* in relation to *controlled/unfeeling* is in operation.

What happens when we shut down feelings? Can you recognise feeling *distanting* in relation to *distanced*?

Feelings may be triggered off when something touches us deeply and gets under our skin and we cannot avoid or freeze them out. Feelings may start to emerge when we are more confident about handling them and are less under pressure from our contemptuous or dismissing reciprocal role to ourselves. I know a man whose bottled-up feelings came pouring out when he was forty-five and fell in love. He surprised everyone who thought he was a cold, unfeeling schemer until that point. Our fear of feelings, defended by denial or avoidance, may wait for a 'safe' environment such as a long-term relationship, or a satisfactory job of work.

If feelings have been so damaged and battered, or if no satisfactory release for them is found, they may get split off into different parts and so our sense of ourselves is fragmented.



- Some people refer to their inner 'rageful bastard' who operates as *angry/abusing* in relation to *terrified/hurt*, or their 'shapeless blob' who always cries, who expresses *belittling* in relation to *put down/worthless*, or a 'rescuing magician/angel' who is always *idealising or being idealised* in relation to being *special*.
- We may have physical symptoms instead of feelings, as if our constrictions, our inflammations, were expressing our unbearable pain.
- We may try to contain our feelings by choosing a profession that will force us to operate only in our heads, using rationale and logic.
- We may act out instead of expressing feeling, by driving fast, drinking too much, taking drugs, taking up dangerous sports and activities, gambling, fighting, stealing.
- When feelings are unbearable and unmanageable we may go numb and our rage, anger, jealousy or happiness is experienced outside of us, in other people, objects or as fantasy. This means that we cannot own them as our own and we cannot integrate them into ourselves as a whole.

If you recognise this splitting off mechanism operating in your life, start by just noticing anything that could be a displacement activity away from expressing feelings you presumed you did not have.

### *exercise*

If you recognise that you are suffering from not having feelings, ask yourself when was the last time that you 'felt' something inside? Where did you feel it in your body? What was that feeling? When did it occur? What was happening at that time?

If your answer to the last question was a long time ago (more than two years), what was the result of your recognition of feeling at the time? Did you express it, and if so how? How did others respond? Did something happen to make you decide you would not express feeling again?

If you have been unable to answer the first two questions because you cannot recognise the expression 'felt', cast your mind's eye over the last week. What is the most unpredictable thing that happened? Describe it, and what was happening.

Talk to someone about not having feelings. Begin to explore what feelings are and how other people express them. Become a 'student' of feelings.

Look through the section 'Gathering Information' in Part Four and see if you can identify how your current sense of not having feelings came about.

Feeling WILL arise in its own time. TAKE TIME. Choose music and poetry or descriptive writing to express feelings. Music and poetry bypass the left side of the brain, which is our more rational, thinking

*(Continued)*

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brain, and moves to touch directly into the right brain, which is the more feeling, intuitive, imaginative side. So allow yourself to be touched; and to move with, dance to, hold tenderly a tiny bud of feeling; to fire up in a blaze of anger or passion; to hear the sound of your own protesting voice and your own lost poetic soul. In *Finding What You Didn't Lose*, John Fox (1995) writes: 'when your poems become the "container" of your truest feelings, you will begin to experience and integrate those feelings more consciously'.

### The void

Sometimes people say they feel that they have a 'black hole' or void inside them. They fear it, because they believe it will swallow them up and they will cease to exist. The reciprocal role is *emptying* in relation to *emptied*. Perhaps we feel as if we are only defined or identified by our work, or our looks. Because we fear the nothingness of the void we may try to fill it with people, food, drugs, work or social activity – anything external. We do not trust ourselves inside, and so we avoid anything reflective, contemplative, or still.

ALISTAIR, once he was brave enough to explore his experience of the 'void', had an image of a 'can of worms' containing everything he feared and loathed about his past and about some of his current feelings. (In Chapter 9 on writing our life story and working on our diagram, we will see how Alistair is currently working to cope with his particular void.) In exploring his 'can of worms' we met snakes who would come up and bite him in the form of an *accusing/judging* in relation to *judged/worthless* reciprocal role and statements such as 'You'll never stay in the fast lane.' The feeling 'I'm unhappy' was strong and was suppressed as quickly as possible. Alistair first realised his particular 'void' when one day he caught himself thinking, as he rushed from one appointment to another, 'I wonder if taking drugs would help?' He believed that if he allowed himself to stop, he would fall victim to the vacuum and emptiness which he associated with the void. All his life he had coped with this feeling by being incredibly busy. We met when his body had begun throwing up symptoms – duodenal ulcer, anal fistula, chest pain – and he had become phobic about illness and death. One of his first tasks was to allow himself half an hour each day for reflection. He found this very hard indeed!

Sometimes the void can be explored through visualisation, through drawing. Often life itself plunges us into the void, and we have to face it the hard way – through a serious illness, accident, breakdown, or being left alone and isolated.

### Questionnaire: How do you recognise a void?

- ☐ I feel as if everything happens to me as if it's behind glass.
- ☐ I see other people doing things, but I don't belong.
- ☐ It's like another planet.
- ☐ I keep very busy with friends, relationships, work, eating, drinking, chaos, 'things', duties, etc., because I know that if I stopped, I would fall in the void.
- ☐ Inside I feel very lonely. Few people, if any, know this.

A first step in recognition is to accept you feel a void somewhere inside. You could try to monitor when you sense you are either nearing or fearing the void. You could see what happened if you tried to find an image for it, drawing or painting it; using images – 'it is like ...'; telling someone you trust about it. If the void has been created because when you were little you had to spend a lot of time on your own without adult company, it may be that it is very hard for you to get close to anyone, to trust them near to you. You may need help with this realisation and consider psychotherapy. This would give you a relationship with another human being with whom you can take safe steps in getting close and in trusting others. Allow yourself to consider this possibility.

### Unmanageable feeling: Too sad, or too angry, or too frightened

If you recognise that cutting off feeling and 'not having feelings' is the way you coped with unmanageable feelings such as too sad, too angry or too frightened, respect that this was the best way you could manage at the time. If your early life included experiences that were traumatic through which you were traumatised – not all experiences of trauma lead to traumatisation – return to the diagram on page 17 and start monitoring your stress levels of hyper- and hypoarousal responses when you are with other people. Find someone with whom you can start naming and exploring safely the feelings you carry in your body.

If you have not already done so, create an image of a safe place (see page 25). This will offer containment for the previously unmanageable buried feelings, which might feel overwhelming at first, to be expressed. As you take steps to make these feelings conscious and you recognise signs of starting to become overwhelmed, or physically disregulated, allow the contained space to hold the feelings for you. **Remember that I am invisibly by your side.**

Sometimes these unmanageable inner feelings can manifest themselves in physical form – nausea, heaviness in the legs, headaches, tension in the neck

and shoulders – and in symptoms, both physical and psychological. It's as if feeling is trying to express itself through the language of the body. Unmanageable anxiety, anger, fear and sadness may also be at the root of many eating disorders, in bingeing and starving; in self-harm; and many presenting physical problems that are not organic in cause.

Some provocative risk-taking behaviours, such as driving, drinking, smoking, dope-taking, flying, too fast, too much, too high, may also be a way of trying to manage unmanageable or unbearable feelings. There may be times when we spend too much money, or money we don't have, and buy things we don't need under the illusion that this will make us feel better.

All experiences of depression and suicidality share unbearable and unmanageable feeling: hopelessness, helplessness and trapped and inexpressible rage. As we saw earlier, the creator of Cognitive Analytic Therapy, Dr Anthony Ryle, tells us that a very high percentage of depressed and somatic symptoms are connected to the inability to express anger in a useful way. Understanding this, and finding ways to make conscious, name, express, contain or simply be with, previously unmanageable anger makes a difference. Some shadow of these feelings may always be with us, but we can learn to know and understand the shadows better and be able to use feeling more usefully. In her poem 'Anger's Freeing Power' Stevie Smith (1983) writes that it is the useful and enabling expression of anger rather than love, that frees her raven from beating himself inside the walls of his self-built cage. Also on this theme, the original Brothers Grimm fairy story about the Frog Princess had the princess throwing the frog she despised against the wall in a fit of rage, upon which he was transformed into a prince. It is only later that anger is replaced by the kiss, as if somehow the expression of love needs to exclude anger.

Many years ago I worked with heart patients as a counsellor in the cardiac department at Charing Cross Hospital with cardiologist Dr Peter Nixon, whose work was to understand the link between unmanageable feeling and its somatisation in coronary heart disease. He was challenging to the patients he was trying to help, as in 'Did you not love your wife enough to be angry with her?' Giving permission for anger to be part of love and the expression of it as useful, was part of recovery from chest pain and its associated disease process.

**Unresolved and buried anger is very often under depression, it is the underlying cause of most panic attacks, it is now a recognised risk factor in the psychosocial causes of heart disease and can also initiate many physical responses represented in stress-related disorders.**

## Depression

Depression is an umbrella term for a whole range of difficult and unmanageable feelings which have been turned inwards. In Part One we saw the depressed feeling 'trap' created by depressed thinking and that recognition of the circular nature of the trap and the creation of exits brings about change. When depressed thinking and feeling start to merge into the more blanket term 'depression' it is

harder to get to the root of the internal patterns underneath. **But it is vital to do so and not to waste time.** Antidepressant treatment is needed for some cases of severe and disabling depression that has biological components, alongside learning about the underlying psychological patterns. It is very sad that depression and drug treatment for depression are so widespread in Western nations.

In *Mindfulness Based Cognitive Therapy for Depression*, authors Zindel Segal, Mark Williams and John Teasdale (2002) write:

Depression is rarely observed on its own, it includes anxiety, and panic attacks are 19 times greater than someone without depression. Simple phobia and obsessive compulsive disorders have increased odds. Depressed patients spend statistically more time in bed than patients with lung disease. Work loss is five percent greater than non depressed patients. Suicide risk increases with each new episode. Major depression tends to be recurrent and the biological characteristics are: sleep disturbance often with early morning waking, gloomy desperate ruminative thinking in the mornings and a constant overactive neuroendocrine system creating the arousal associated with cortisol. These experiences are not varied with life circumstances such as taking a holiday or getting married. (p. 10)

Let's start by trying to look at what our 'depression' is about. Depression is not just about not coping. It helps to try to unravel the knot of unmanageable feelings, assumptions and old beliefs that depression is made up of and find small manageable exits. Understanding the context for depressed feelings is important for we need to have some idea of what our depressed response is intended to resolve:

1. Depression may be a natural response to a life event – the needed twilight of effort following bereavement, illness or loss. The wasteland experience of rites of passage during adolescence, mid-life, retirement where change in identity is taking place.
2. Depression may be directly connected to a life situation – poor housing, chronic poor health, family disruption, no money, racial discrimination, violence.
3. Depression may be a form of unconscious self-sabotage – a safer internal choice to whatever is feared from success or happiness or from the consequences of expressing anger and rage.
4. Depression may result from a long period of exhaustion – too much, or too little work or contact with others and no way out or to say no.
5. For many people depression is a form of breakdown – the breakdown of the way they have been before and seen as 'normal'.

Maintaining our depressed response may be restricting, and self-limiting reciprocal roles such as *punishing* in relation to *punished*; *critical judging* in relation to *crushed restricted*. There is often the dance of the bully and victim, both within and with others. The core feeling held in the internalised child reciprocal role is often feeling a *punished, flattened, crushed* and *restricted self*, and repressed rage. This is maintained by the tight hold of the *punishing*,

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*belittling, or judging internalised 'other'.* Other people will also be invited to join this dance until revision and new reciprocal roles are learned.

### Questionnaire

Answering 'yes' to more than three of the following may help you to recognise that you are depressed.

I feel and believe that:

- ☐ I don't have a right to exist
- ☐ My needs will never be met
- ☐ Whatever I do I feel bad
- ☐ There is something wrong with me
- ☐ Everything is all my own fault
- ☐ I'm worthless, useless
- ☐ I can't get over this, ever

Metaphors can help us clarify our experiences. The following metaphors are often used in relation to the experience of depression. Do you experience yourself as:

- ☐ in a cage?
- ☐ in a prison?
- ☐ stranded on a high cliff?
- ☐ stuck in the desert?
- ☐ doomed and drowning?

When depressed, our feelings often include confusion, heavy-heartedness, sinking sick feeling, feelings of exclusion, a fear of our own and others' anger and rage, fear of going mad, the feeling of being trapped with something alien, inscrutable and intransigent that does not want to budge. And often deep, deep sadness and loneliness.

The following account is from AMANDA, who has kindly written a piece especially for this book to illustrate her experience of depression. Amanda has had a long history of depression, which has included hospital treatment as an in- and out-patient and also Cognitive Analytic Therapy and learning the practice of mindfulness. Her diagram is included in her account.

'Depression arrived suddenly and without warning. I was assured by the doctors that once the right dose of the right antidepressant was reached I would soon be fine again. Unfortunately it didn't work like that and I was referred for psychotherapy.

'At first I was unable to focus on what the therapist was saying or asking. I had continued to work full-time and I was exhausted. Over many months we looked at the snags, dilemmas and traps that I was falling into. I wasn't quick to grasp the significance of what was developing. The diagrams and cycles of thinking centred largely on my anxiety about most things but in particular about my work and with my inability to deal appropriately with my own and anyone else's anger. It also took me a long time to realise that in fact the diagrams were frighteningly similar in many ways and I needed to understand the processes involved. I could understand it in theory but much harder in practice, finding it difficult to "exit" at an early stage in the process. We also explored visualisation and for me, the concept of a lifebelt, that I could recall to my mind in times of need, was enormously effective.

'Much later, after a third stay in hospital and a long course of ECT, which improved my energy levels but not enough else, I returned to therapy. The lifebelt was still there for me but all too often I still felt desperately low. Suicide was frequently considered and I had started to try to self-harm even though I knew that the exit points of the main diagram were to talk to someone, to be kinder to myself, being "good enough" and not constantly striving to do well and to "get it alright" but at times they felt all too elusive. Now, in addition to this was the introduction to a more "mindful" way of life.

'On the very first session with Liz, she pointed out that I was holding my breath before I spoke. I had been going to yoga classes with different instructors and all would say, as we attempted a posture, to "keep breathing". Breathing appeared to be more difficult than I had thought!

'Practice of mindful breathing became a daily part of my life. It was difficult at first to let go of thoughts that constantly entered my head, something that in yoga I had yet to fathom. To my surprise, just by saying to myself "there's thinking" or acknowledging whatever was happening in the background, letting go of it was much easier. Even if my mind wandered for a while it was okay and returning to the breath was even a matter of congratulations.

'Sobbing uncontrollably has been part of the practice too. Each experience of practice is different but that is all part of it. Sometimes the mind wanders a lot or it is particularly difficult to settle but it really doesn't matter. That is where its beauty lies, especially for me, whose mind tends to be on full alert to what is going on all around. I can use the breathing to give me mental space and to break the negative process from the diagram that I now know so well and recognise my difficulties for what they are.

'Last week I walked into the town centre and started to feel very heavy in my body and mind. I decided to sit in the Abbey gardens and take in the calm of the beautiful park. There were only a few people about so it was easy to find somewhere to sit and breathe. At some point I realised there was a broken beer bottle lying on the ground. William Styron writes in *Darkness Visible* about being accompanied by a "second self" who watches "with dispassionate curiosity" as one "struggles against oncoming disaster, or decides to embrace it".

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'Sitting on the park bench I could look at the broken bottle with this observer, taking in with curiosity what I intended to do. Like taking pills, cutting my wrists was a considered idea. But I found myself thinking about what I had learned in therapy, that I had a **choice. It was entirely up to me as to what to do next. That choice in fact gave me strength to resist doing anything except slowly force my legs to move out of the park and back to the hostel.** [emphasis added]

'My depression hasn't gone yet. It comes and goes as it always did. I hope that one day it will go away completely as innocuously as it came, but for now I can manage it much better. I can still feel desperate. I am lucky to have many loving friends and family. Talking to someone can do much to calm me, but then I have the thought that is so welcome; that I can give myself a few minutes of the space and peace that mindful breathing can invoke, however I feel and wherever I am.'

If you have had to bury feeling because it has felt unmanageable, once you begin to touch it again it hurts a lot, and we can feel just as we did when we were two or three years old, just as frightened and helpless. Take it slowly, knowing that now you are older you have help, you have breathing and other exercises to help you accept and process what you feel. You have notebooks in which we are going to find words for what you feel. Accept that the pain you feel is the pain of a little one and feels huge. And during this process we are not so much concerned with the story, as with the pain you feel and the ways you have learned to manage it. See the pain as evidence that your flesh and blood feeling nature is still alive and needs your help at containment and nourishment. Let it thaw out and flow and flourish. Trust it to show you what it most needs.

## Unexpressed anger and rage

It can be hard to acknowledge that we have buried angry feelings. Fresh anger is usually a very physical experience, and like all feeling and emotion, involves our bodies. If you recognise after reading this section that you are carrying layers of unresolved anger and rage, just start noticing possible signs of anger, however small. It may be in clenching your jaw or a tightening in the small of the back; your anger may be in forced laughter, in speeded up speech, in cold ruthless prose. You may hold your breath like Amanda or literally swallow your anger with food or alcohol. In Part Three we will be looking at the nature of traps, dilemmas and snags. In each of these you will also find out more about your own anger.

When it first becomes conscious, previously unexpressed anger can feel out of proportion and we will have the same fears we had when we buried it – that others close to us will hate or reject us; that we will be like the angry person in



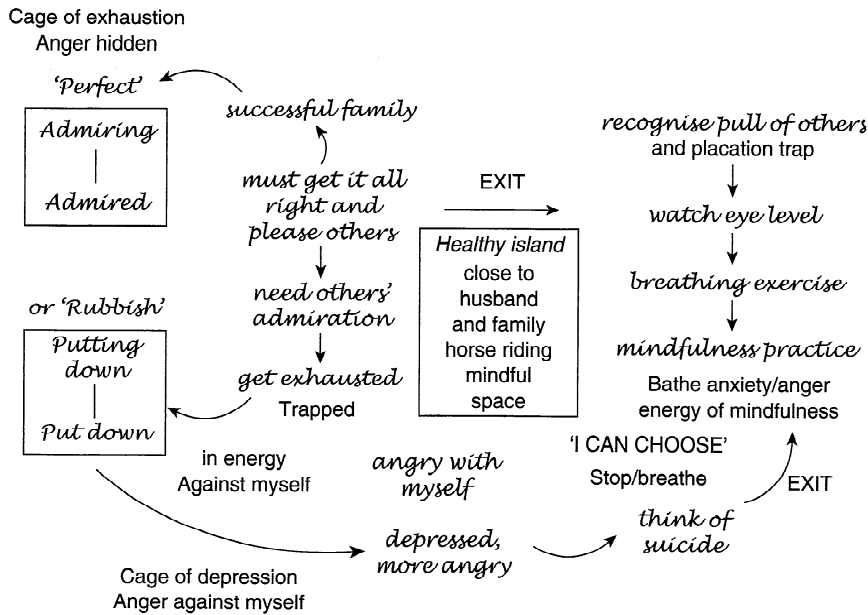


Figure 3.1 Amanda's diagram

our life we feared; that our anger might take us over. This is quite usual. After becoming conscious of anger and how it has been buried under symptoms we need to find a way of containing or expressing what we feel. One way is to write it out in our journal. Another way is to find a safe space to shout and jump up and down. The return from anger is to find ways to express it that are useful, freeing and creative, not destructive or harmful. And, most importantly, what is our anger about? What are the reciprocal roles that lead us to feel angry? What we really need – to feel protected, understood, accepted unconditionally – is often hidden under anger. Learning to find a voice to ask for these things is essential, once we have discovered what our anger is about.

We need to know our own anger and be able to express it and to contain it appropriately. We will probably need to learn to become assertive, to 'sing on the boundary', to speak out, not necessarily our angry feelings, but just what we feel and need, clearly and simply, not in aggression or acting out. We need to acknowledge and learn the language of our own feeling and emotional need and start expressing it in inner dialogue with ourselves, and then with others. Owning anger and learning to walk the talk of anger means that we have tempered the fiery dragons that once threatened to destroy us. Learning the limits of expressing anger and how to contain our anger and its more unreasonable or destructive side is essential.

Lying beneath anger is often hurt. And grief. We may have made an unconscious decision to feel angry or resentful toward those who have hurt us, because

acknowledging hurt would have been impossible and also makes us feel so vulnerable. When we are able to reach beneath the smoldering or hardened anger we carry and touch the hurt, we have the chance to befriend and heal our hurt and vulnerability, using compassion and mindfulness. Pema Chodron, an American Buddhist nun, says, 'If someone shoots an arrow into your heart it's no good just railing at them. You need to attend to the fact that you have an arrow in your heart as well' (on retreat at Shambhala Mountain Centre, August 2002). Being able to grieve and mourn what has been lost or damaged, and forgive both others and oneself when appropriate is an essential part of the process of change.

## Eating disorders

Eating disorders represent an abnormal preoccupation with food and weight, where food is no longer a simple substance for sustenance and pleasure. Underneath the symptoms of eating disorders are usually preoccupations with issues of control, submission, placation and perfectionism. This preoccupation becomes a means of communicating unmanageable feelings and emotions. It can be seen, as Tony Ryle and Ian Kerr report in *Introducing Cognitive Analytic Therapy* (2002), as a covert way of communicating or coping with feelings of not being heard or being pressurised to 'perform'.

In eating disorders we split food into 'good' and 'bad' food, with which we have a love/hate relationship. 'Bad' food we binge on may accentuate the badness and ugliness we feel inside and we have to get rid of it in order to feel clean; the control of food to the point of starvation gives the anorexic a 'high' and can become addictive.

Too often groups or websites for eating disorders concentrate upon the management of food without attending to the underlying reciprocal roles such as *controlling* (neediness and mess as in unmanageable feeling) in relation to *controlled/withholding*, and *conditionally excessive and rigid controlling* in relation to *empty controlled/worthless and angry*.

FREDA (see life story on p. 171) came into therapy because of her depression. Her eating problem only emerged later, as she had been ashamed of it. Also she had failed to see it as a 'problem', even though she had never eaten with her family or her friends. She was eating only a limited diet and taking laxatives that were seriously affecting her digestion. We made the following chart of the presenting problem, its underlying procedure and the aim for the therapeutic work. You will see that the aim is always directed at the procedure, not the problem. This approach gets us away from only recognising symptoms and being caught on the symptom hook.

*Problem 1:* Depression.

*Procedure:* I feel I've never been me or been able to let myself go. I don't think much of myself and get into the 'I'll do this badly' and 'worthless' trap. There doesn't seem much in life for me so far, because others' needs have always been more pressing.

*Aim:* To monitor everyday negative and depressed thoughts such as those outlined above. To challenge this and to develop more time for the things and occasions that put me in touch with the 'healthy island' – music, certain friends, being in the country.

*Problem 2:* Placation trap, 'doing what others want'. Needing to be needed.

*Procedure:* Recognition of *feeding off* in relation to *fed off*. I have always felt worthless and that others' ways are better, so I give in, and feel cross with myself and anxious. People can easily tyrannise me, and I tyrannise myself by judging myself harshly.

*Aim:* To be aware of the times when I placate or create tyrants. To bring my awareness into the moment and risk saying 'no' or having a different view when that is what I feel. To trust what it is I feel I want to do much more thoroughly, even if sometimes I am wrong about my decision.

*Problem 3:* Eating compulsively, then starving and bingeing.

*Procedure:* Recognition of *tyrannising* in relation to *tyrannised*. I long to be 'full' but feel bad if I have anything, so I have to get rid of it.

*Aim:* To monitor feelings prior to, during and after eating compulsions and binges. To recognise 'longing to be full', where I feel it in my body. To risk letting it be just so and letting it speak in words or images.

*Problem 4:* Self-sabotage due to irrational guilt about dead brother and mother's depressed life.

*Aim:* To be aware when I 'sell myself short' or put myself down. To be aware when I let others 'win', or take a back seat when I know inside I could take part equally. To take the risk of expressing myself more assertively, and let go of the family's disappointment and misery. To say, 'I AM ALLOWED' without feeling guilty.

Freda took up her journal-keeping enthusiastically. She said it was like having 'permission to live, even if only inside a notebook'. After a few weeks her depression began to lift. As she challenged her placating, her eating problems got worse. She noticed a craving for food and an intensity of feelings of 'high' followed quickly by heaviness and despair where she sought food for comfort. She found that she could express herself in images. A colourful language emerged, linking early life memories with her current need to starve herself in order to experience control. She found visualisation and drawing particularly helpful. During one particularly moving session she got in touch with the hidden feelings around the time her mother came home after the death of Freda's brother at the age of six days. There was an image of her mother's flat stomach, and a wave of profound despair, the intensity of her weeping (which she showed only to Freda, not to friends). Most of all was Freda's fear and over-responsibility for the insatiability of her mother's need and hunger, for the look in her eyes that Freda believed she had to make better. She saw that she had taken responsibility for trying to fill the space left by the dead baby.

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Freda described how she felt 'eaten up' by her mother's needs and demands, which returned later when her sister developed anorexia and Freda was once again expected to fill an empty space. One of her drawings showed a huge open mouth into which tiny fish were being shovelled by a thin witch with a child's broken-handled spade. In one of her dreams her right hand was being bitten by a wolf. She drew a picture of the wolf, and came to associate this animal with her own emotional hunger and need, her 'wolfishness' that tyrannised her. The wolf would nip her, reminding her of her own hunger (for something which she needed to name) and of the devouring and tyrannising quality of her mother's neediness, from which she was struggling to free herself. This needing to be needed, or *feeding off* in relation to *fed off* was also recognised in several other relationships – husband, sister, children, family.

Freda was encouraged by her friends' new respect for her holding on to her own ground. Two key phrases – 'selling myself short' and 'I am allowed' – helped her to have the courage to express herself fully with other people, especially difficult people like her mother, to whom she felt duty-bound and very unfree.

[Freda's dream is recounted in Part Six.]