

This handout is based on information in Finlay, L. (2015). *Relational Integrative Psychotherapy: Process and Theory in Practice*, Chichester, Sussex: Wiley.

## Enabling clients' integrating journey

The nature of our integrative work in therapy concerns the way we aim to facilitate sense of wholeness in our client's being and functioning. Specifically we are concerned to integrate processes at intrapsychic, mind-body, relational, societal and/or transpersonal levels.

It is hard (if not impossible) to explain *how* exactly we effect this integration. The mystery and the magic of our work relies on artful, intuitive dimensions of practice which emerge beyond theory, technique and method. Integration also relies on our clients' capacity to want to do the work. However, some elements of the path towards integration can be specified:

One way that a therapist might nurture integration is to act as a **witness**, a mirror, a sounding board. For example, I might say, "I am noting I feel sad when you say that..." or "I'm curious about the way you are missing out xxx here." Or "Your eyes are tearing up as you speak of ...." The therapist can affirm the client's experience, help them name the feelings and own toxic memories. Ideally, together therapist and client can face the shame that comes with secrets and hiding. Slowly the fragments are stitched together and pattern and meaning is found.

Working with a client at the 'contact boundary' we often encounter 'resistances' or defences. These signal an entirely understandable process where the client is (quite reasonably) protecting themselves. It also signals a potentially massive battle between the part of the client that wants to remain hidden/entrenched as they are in a safe, familiar place, and the part that is struggling to emerge in a new more whole way. Part of our role as therapists, is to bring this ambivalent battle into the **client's awareness**. For example, if a client says, "Part of me wants that, the other is scared", it might be helpful to engage an enactment or empty chair work to bring out these two sides of the 'internal' dialogue. Work like this gives clients an opportunity to make sense of their experience and to **make connections**. Eventually, they may begin to feel more comfortable about holding the polarities and the different parts of themselves.

Another path towards integration is to invite **explicit comparisons** between what happens in therapy versus what happens outside. Is the client's habitual way of being demonstrated in the here-and-now therapy encounter? If so, this should help both therapist and client to better understand the client's process. Might the client be saying/doing things in therapy that they would feel too scared to say/do outside? What would help make it okay to transfer the saying/doing outside?

Thereafter, clients need to take any learning out into the **wider world of relationships**. The therapy work needs to continue and be re-worked in life. Our aim in therapy is not simply to dwell with a person's intrapsychic confusion; the focus of therapy needs to attend to the person's being in their world. We know a level of integration has occurred when we see a client applying learnings from the therapy room to their life outside. The client's broader social-life context should be an ever-present horizon for our work.