Modified Hakomi: Coaching Clients with IFS and Hakomi Skills

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Editor’s note: A number of Hakomi Therapists have been cross trained in Internal Family Systems Therapy (IFS), as well as other modalities. In this article Dave Cole outlines how he integrates the IFS “in-sight” method of engaging the client’s Self (IFS term that combines the mindful and compassionate aspects of the Hakomi understanding of the Witness) in relation to their parts in way that compliments and expands Hakomi Therapy’s employment of the “Adult” in relation to “Child Consciousness.”

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ABSTRACT: Discusses how therapists trained in Hakomi use skills like contact statements, acknowledgments and “working with the child” to create trust, attunement and to access unconscious material in ways that address clients’ experience directly. Outlines an adaptation of method that adds “parts language” and the indirect therapist/client role from Internal Family Systems Therapy to Hakomi that allows therapists to move freely between direct and indirect roles with their clients. Notes that the direct role is primarily used for attunement, accessing and nourishing, while the indirect role enables clients to use Hakomi skills with their own internal parts. Benefits of the indirect role are described in terms of helping clients distance and un-blend from parts with extreme feelings, reduce reliance on therapists for attunement, self-comforting and sustaining mindfulness, and address cognitive distortions (generalizations, exaggerations, black and white thinking) by identifying them as the thought-habits of young parts.

Introduction

This article describes a way of working that combines elements of Internal Family Systems Therapy with Hakomi Body-Centered Psychotherapy. What began as a simple technique, a few new moves, evolved into a different way to stand in relation to a client’s emerging experience when using Hakomi. Whereas in conventional Hakomi therapists work directly with clients’ experience -- acknowledging emotions, interacting with the child, comforting overwhelming feelings -- in this new adaptation the therapist acts indirectly. In this new role the therapist acts as a Hakomi coach. The coaching relationship allows a therapist to teach and encourage clients to apply Hakomi skills as they nourish, comfort and relate to their own internal experience.

In developing this method I have treated internal experience as “parts.” In the therapeutic method known as Internal Family Systems (IFS), “parts” are internal experience construed as autonomous sub-personalities (Schwartz, 1997). Since I have trained with Richard Schwartz, the founder of Internal Family Systems, I often use the language of parts (also sometimes called “parts language”) with my Hakomi clients. However, it is not necessary to use parts language with this new adaptation. In most of the client/therapist dialogues offered below therapists can substitute phrases like, “. . . go inside and say to that sadness . . .” or “. . . go inside and say to that sad part . . .” In the former we are addressing a feeling as if it were a part, in the latter we are addressing a part to which we are attributing a feeling and possibly other properties like body sensations, thought and motivations. I favor the use of parts language because I think the use of parts adds an increased capacity for separation between the client’s adult consciousness and his or her present moment experience. It is also more accurate with regard to how feelings and other internal experiences actually behave.

It is not necessary to think of this adaptation as a new role -- from direct to indirect, or therapist to coach, since one can shift effortlessly from one to the other as called for. Alternatively, one can think of it as a different way to use language. In a recently published article, Ann Weiser
Cornell (2005) describes a “presencing language” that has evolved out of her work with the therapeutic method known as Focusing, another mindfulness based experiential therapy developed by Eugene Gendlin (1975). This “presencing language” accomplishes much of what I am describing here and does not depend on the introduction of the notion of parts or “parts language”. However, in her examples and her discussion she also uses the language of parts. I take this to illustrate that while it is not necessary to use the concept and language of parts, it is natural and almost unavoidable to do so when using experiential therapies that employ mindful elements.

The Internal Family Systems Model

Like Hakomi, Internal Family Systems is a depth psychotherapeutic method. It includes a set of skills that enable therapists to help clients observe, understand, soothe and transform their inner experience in order to relieve unnecessary suffering, increase mindfulness or Self-leadership, provide more response flexibility, and therefore more freedom. It is also a way of thinking about who we are that posits a model of the human being. This model represents the human personality -- the ego, or the ‘self’ with a small ‘s’ -- as an inner family or multiplicity of semi-autonomous sub-personalities. These sub-personalities are called “parts”. Like individuals these parts possess feelings, motivations, memories, and creative abilities. Also like individuals, much and sometimes all of their properties and activities exist outside of consciousness.

In addition to parts the IFS model posits another essential aspect of the individual called the “Self” (Schwartz, 1990). According to the model the Self is not a part and, unlike parts, it does not possess feelings or an agenda. This Self is recognizable in experience as that aspect of experience that seems to witness or observe experience. While it is not possible to directly experience the Self, it can be said that we are “in Self” or “identified with Self” or, “Self-led” when we are being mindful. In other words, the Self is the observer or witness aspect of conscious awareness. It is the perennial subject that makes an object of everything it observes.

Some IFS practitioners compare the Self to the Atman, some call it the little Buddha that resides in each of us, others think of it in more secular terms, as conscious awareness, or the pure executive oversight of the orbital-frontal cortex. It is not hard for Hakomi practitioners to understand this “Self” since it can be equated to the state we call mindfulness. In Hakomi we talk about mindfulness as a “state of consciousness” (Kurtz, p. 27). We address something very much like this “Self” when we ask, for example, “what does that feeling remember?” or “what does that child need right now?” One can think of this “Self” as being the adult self or adult consciousness that these questions address. In Hakomi we recognize this self in practice and do not explicitly define it whereas in IFS it is explicitly defined and named with the word “Self”.

Regardless of how we name it, the experience of being “in Self” or being “mindful” has certain properties. To the degree that one is “in Self” one is calm, curious, compassionate, creative, courageous, and confident. Keeping these qualities (“c”-words) in mind, the IFS therapist can learn to evaluate when a client is identified with Self just as a Hakomi therapist learns from observing non-verbal indicators to know when a client is being mindful. An IFS therapist can help a client to attain and sustain a Self-led state just as a Hakomi therapist can help a client to achieve and sustain mindfulness.

Hakomi Therapy

Within the method, for purposes of training and discussion we often distinguish a set of steps or phases in an ideal Hakomi Session. I have taken some liberties in naming and summarizing the phases described by Ron Kurtz (1990) so that the reader may see precisely where in the Hakomi process we switch from the conventional Hakomi approach to the indirect approach I am introducing here.

Tracking

We begin a Hakomi session with a process called tracking in which the therapist listens to and observes the non-verbal expression of a client while maintaining a state of Loving Presence and making occasional contact statements. During this period the therapist is noticing indicators of how the client is organized, and looking for ideas that will be tested in the next phase of the process. I like to think of this in terms of locating the neighborhood, the unconscious issue or concern that the current session is about. Perhaps it is about safety, being loved, feeling connected, being seen, being enough or not being enough. We usually think about this as the tracking and relationship phase, but it is also the idea or intuition phase.

Testing/ Accessing

At some point in the session the tracking phase yields to the hypothesis testing or accessing phase. At this point the Hakomi therapist moves from following to leading, gently intervening in the client’s verbal and non-verbal monologue in order to test a therapeutic intuition that has arisen in regard to the client’s current state. While this phase has the intention of testing it also can be said that it has the intention of accessing unconscious experience. I therefore like to think of it as a testing/ accessing, or experimenting/accessing phase.

Depending on the skill of the therapist and the situation, the testing/accessing phase of a session usually evokes unconscious material. It could be a sensation like tightness in the chest; an affect, like a feeling of panic or panic mixed with
sadness; or it might be a memory image or a felt-sense (somatic) memory. Often it is a combination of these kinds of experience that was not in consciousness prior to the testing/accessing move. At this point the testing/accessing phase ends and a new phase begins. I think of this next phase as the Affect Deepening and Nourishing Phase.

Affect Deepening and Nourishing
In this phase the therapist’s job is to help the client be with, or mindfully observe the emerging unconscious material that arises from testing and accessing. In the course of this process the client will be supported in naming, learning about, regulating the affect of, bringing mindfulness to, and accepting nourishment for the emerging unconscious experience. In doing this, the conventional Hakomi method is to address the material directly, allowing the person to embody the part, as well as study it from the witness.

For example, if the evoked experience is one of sadness the therapist may use an acknowledgement which provides recognition, connection, compassion, naming and nourishment in a single speech act. This might take the form of the therapist setting up an experiment in awareness where he or she says in a compassionate voice, “I see how sad you are.” With permission, this could also be done in a non-verbal way as well by making the experiment the gently taking the client’s hand. There are many kinds of direct moves that the therapist can make to support and deepen the unfolding of the experience in its richness and fullness while providing the safety and nourishment that allows the client to stay present and mindful as the experience unfolds.

At this point in the Hakomi session, the client will often begin to convey through appearance or voice that he or she has become identified with a “child part” that is operating out of deep formative memories. Hakomi therapists are well trained to work with the emergence of these parts (Kurtz, 1990). In Hakomi we handle them by altering our voice to the kind of voice that would be both appropriate and comforting to a child of the age and gender that the child part appears to be, and showing up as a “magical stranger” who provides the healing interaction that the child needed but was missing during the original scene.

Here again, the Hakomi method is to work with the part directly. The therapist is trained to speak as if speaking directly to the child, using acknowledgement, contact statements, nourishing phrases, giving permission to the needs and feelings that the child part conveys through words, affects and actions. Throughout this part of the session the client is encouraged to maintain mindfulness as an “adult” observer of the interaction between the therapist and the child part who is sometimes actively called on, as in asking “what does this child need right here?”

If the unconscious material is simply a feeling and does not manifest itself in a personified younger form, the interaction is much the same: the therapist offers comfort directly while the client mindfully observes the interaction. If the client is overwhelmed with affect the therapist provides nourishment and supports spontaneous behavior. This allows the client to return to a calmer state and restores the client to observant mindfulness.

Introducing the Complimentary Technique
I have elaborated the Affect Deepening/Nourishing Phase of the session more than the previous phases because this is the phase in which I usually introduce the complimentary technique. I will therefore replay this portion of a session first by explaining how this is ideally handled with the optional method and then I will provide an idealized annotated transcript to illustrate the general explanation. For purposes of this demonstration I will assume that the client has been introduced to the idea of parts and Self in a previous session. He or she not only knows what the therapist means by the word “part” but the client has also had some experience working with a part in the past.

The main departure from conventional Hakomi is as follows: as the unconscious material emerges, instead of moving to work with it directly by the therapist acknowledging the experience, the therapist encourages the client’s adult consciousness or Self to connect with the experience. The intention is to set up a relationship between the client’s Self and their part, through which the therapist can support or coach the client in providing the presence, acknowledgement, comfort, unburdening, and nourishment to the part themselves.

If at any time this arrangement breaks down the therapist can step back in and use the conventional direct method. Even in this event the therapist will step out again and turn the direct work over to the client as soon as possible. The objective is to put the client in the driver’s seat, and to have the client engage with the experience as-part as soon as possible. In order to do this the therapist calls upon that powerful effect of language that allows us to connect ourselves to an event or experience while distancing ourselves at the same time. This is illustrated further in the following example.

Setting Up the Indirect Relationship: An Ideal Annotated Transcript
The following idealized scenario illustrates how a therapist sets up this indirect relationship between therapist, client and client’s part. We start working directly with the client. The steps in the example lead to a new relationship in which the therapist is acting as a coach or trainer as the client assumes the role of a Hakomi therapist to an internal part.

We enter this hypothetical session with a testing/accessing move that arouses a feeling: in this case, a feeling of
anxiety or fear accompanied by a tight feeling in the client’s chest.

Therapist: (making a trial offering of nourishment to the client in mindfulness) It’s safe here.
Pause. (Therapist is attentive to non-verbal indications as he/she waits and sees the client’s chest compress.)

Therapist: Something seems to change when you hear those words. (Therapist tracks and contacts the client’s response)

Client: My chest got tight and I felt afraid. (This is where we shift away from Hakomi as usual and introduce the complimentary move)

Therapist: I wonder if you can think of the tightness in your chest and the feeling of fear as a part, a part of yourself that feels afraid and feels its chest getting tight. (This distances and un-blends the client from the part while affirming the connection between the Client and the part)

Client: Yes, a part. OK. (The client knows what we mean, because of previous work).

Therapist: Now see if you can go inside, see if you can just be with that part, with its tight chest and its fear. Can you do that?
Pause. (Hakomi and IFS always allow spaciousness for slowing down and learning more from present moment experiences)

Therapist: It looks like you’re being with that part now.
Client: Yes. (Therapist uses non-verbal indications, empathy, intuition, client’s tone of voice, and clients timing, checking to see if the connection is really there and what kind of a connection it is. We especially want to be sure that it is mindful and non-judgmental -- in other words, compassionate)

Therapist: Good! Now, see if you can say to that part, silently, from your heart, in a sincere way, just say to it “I see how scared you are.” (This is a Hakomi acknowledgement and the therapist models the compassionate, empathetic connection through tone of voice and through facial expression even if the client’s eyes are closed. Similar acknowledgements are used in many other methods including IFS and Focusing. Sometimes I completely avoid reference to words by saying “send a silent message from your heart . . .”)

Pause.

Therapist: What happens for that part when it feels your presence and it hears you say that. (Here the therapist is coaching the client on observing reporting results, and encouraging the relationship).

Discussion: Transcript One

This example embodies the essence of the complementary intervention. It illustrates what a therapist does to reposition the client with regard to emerging experience. The therapist no longer relates directly to the (formerly) unconscious material or “part,” but supports the client in making a “Hakomi-like” direct connection. While the move itself is a simple one, there are important things happening that merit attention.

First, when the therapist offers the acknowledgement, in this case, “I see how scared you are”, there is the possibility of its having a powerful direct effect. To accomplish this possibility the therapist must direct the nourishing phrase toward the subject’s part where the intonation of the phrase is very important. As we speak we are providing a model for the client. The client will imitate what we say, how we say it when we offer it the first time. We are demonstrating what being state the client should be when they attempt the acknowledgment. In other words, to imitate what we do, the client must move into a mindful, compassionate Self-led state since it is only from such a state that this kind of calm and attentive presence can be mustered.

Secondly, it is important that the therapist pay attention to non-verbal signals during this process. With practice a therapist can tell whether a client is in a mindful state or not. We are trained to do this in Hakomi. If the part emerges with overwhelming emotions the therapist must first calm the emerging part down before proceeding. This can be done in the usual direct manner. Or, switching to IFS mode, the therapist can ask the client if he or she would like help in having the part pull its feelings back. I usually do this by saying, “Would you like some help in having that part pull its feelings back?” If they say yes, I say, “Just ask that part to pull its feelings back so that you can be with it and not be overwhelmed. Tell it that you can’t be with it in a helpful way when it’s feelings are too strong.” If the feelings are too strong for this type of move, you may have to shift to direct Hakomi mode and support the client’s spontaneous behavior and provide comforting emotional nourishment until the feeling calms down, especially if they are riding the Hakomi rapids (Kurtz, 1990).

Third, it is good to fully appreciate the power of language when using the complimentary option. Any sentence used in direct address that contains a subject, verb and object, has the rhetorical power to objectify a feeling, thought, sensation or part. For example, if fear arises in the experience of a client, when the client names it as fear, that naming makes separation possible. Furthermore, when a client attributes the status of ‘part’ to that fear, this act of attribution increases the sense of distance. It also reduces identification and promotes un-blending.

When we teach the client to say to a part, “I see how scared you are . . .”, this sentence automatically and powerfully creates the following with regard to the frightened part: (1) “I am not you”; (2) “I am witnessing (experiencing) you and your fear” (3) I am connected (in relationship) with you. In addition, by using a compassionate voice the client also says “through my empathy and compassion, I want to accept and support you.” Seen from this perspective, a simple acknowledging sentence carries a very powerful rhetorical effect and the more we appreciate this, and experience it, the better
we can use it. When we teach this to a client we are giving our client more than a fish, we are truly teaching them how to fish for themselves. We will do this by modeling it repeatedly in sessions with them. Furthermore, when they are ready we can tell them what we are doing and teach them refinements so that they eventually can do this for themselves, without our presence.

Finally, the last question or request in this little sequence is deceptively important. In this move the therapist asks the client, “What happens (what does this part do, what do you notice) when this part hears you say that?” Without this move the re-positioning is likely to fail. Anyone who has done supervision sessions with Ron Kurtz in the past few years will be familiar with the phrase “get the data”. In Hakomi, when we work directly with a client we are trained to find out what happened after we have performed an experiment in awareness (Kurtz, 1990).

In working indirectly, it is equally important that we train the client to do the same thing. “Getting the data” has a number of important benefits. It returns the client’s attention back to the part after nourishment has been offered. If it is done with good timing the client will return to the part in time to see the effect of contact and compassion. They will actually feel the part calming down, or they may feel the emotion shift to something else, for example, from anger to sadness, or from sadness to grief, or from bitter to sweet sadness when it has recognition and comfort. In any case, the relationship between client Self and part is encouraged.

Furthermore, when they report their observations, they are including the therapist in the process without breaking contact with their experience. This move on affirms the full set of roles in play in this situation and provides an opening for the therapist to continue coaching possible moves. Last, but not least, it gives the therapist feedback from which he or she can confirm or revise interpretations of non-verbal signals and intuitions. If nothing has happened, then usually something has been left out: the connection is not solid, the therapist has been hijacked by an unfriendly or critical part, or the part that has been addressed does not trust the client’s Self yet. This last possibility is fairly common. And will be discussed later in more detail.

If the client reports a shift in the part, even if that shift is simply from fear to mistrust, a great deal has been accomplished. If the part takes in the nourishment, then the emotion will usually calm down. In this case I usually encourage the client to “just stay with the part.” I might say something like, “Just see if you can stay with that part and experience what happens next.” If mistrust is shown, I help the client work with the part’s mistrust. For example, I might suggest, “why don’t you go back to that part, and reassure it. Just say ‘I can see that you don’t trust me yet.’ Notice what happens when the part knows that its OK to not fully trust you”. If the mistrust does not move, I might suggest the client re-assure the part with: “Its Ok, I know it takes time to trust.” This is a very potent intention and often shifts a part’s reluctance to trust within a few seconds.

Training the Client to Work with a Part: The New Skill Set.
Once the indirect relationship has been established and can be sustained, a large repertoire of moves becomes both possible and profitable. One way to catalog the moves is by intention.

Being with Experience, Non-Judgmental Witnessing, Self Study. This intention involves having the client witness a part’s experience or its memories of a specific incident or event. This includes feeling the feelings that come up during the process. Instead of telling the client about its feelings, a part will have the client feel them. As each feeling comes up, we help the client to acknowledge it, see and report what happens. Occasionally I remind the client: “Oh, so now (he/she/name of part) is letting you know how it is feeling. It can’t actually tell you how it feels with words but it lets know by letting you feel its feeling. See if you can just stay with its feelings. If they get too intense you can let me know. I’ll help you”.

Typical Coaching Moves: There is a balance here between therapists interjecting their own wisdom and compassion, and encouraging clients to call on and rely on their own.
“Does it need contact? like just saying, ‘I see how scared you are’.”
“Could you acknowledge it by saying, ‘I feel your sadness’.”
“Tell it to pull its feelings back a little, so you can be with it.”
“Maybe it would be good to thank (him/her, the part) for showing you that.”
“Find out if (he/she/the part) has any thing more to show you.”
“Would it be good to ask the part, ‘what else do you want me to feel or know right now?’”

Nourishment or Affect Regulation: This intervention pertains to soothing the part’s unregulated or painful feelings. Sometimes this means taking the part out of a very traumatic situation, having the client hold the part on their lap, speaking to it, and so forth. Sometimes a pillow helps to give the client the felt-sense of holding the part. Tiny baby parts can be held against the chest until they calm down. Parts with vacuous or empty feelings can be given a sip of warm milk. Children who experienced colic often need lots of this kind of quiet comforting.

Typical Coaching Moves:
Have the client nourish the part physically as described above.
Have the client acknowledge the feeling in a compassionate voice and from a compassionate
Discovering core beliefs and decisions, insight, cognitive therapy. In Hakomi we often focus on discovering what decisions were made as a part of surviving a formative crisis. Often the child decides “I’ll never trust like that again” or “No one loves me” or “there is something wrong with me.” The client can work with this by (1) acknowledging the decision and validating it for the strategic value in the time it was made (2) providing nourishment “There’s nothing wrong with you” or “your ok just the way you are” (3) helping the part to understand what happened (4) updating the part.

We do all of these things in Hakomi. We do them here in a complimentary way as well, but instead of doing them directly we model them, and have the client do them with their part just as if the part is their Hakomi client. For example we can have the client:

Typical Coaching Moves:
“Ask the part what it learned from all of that”.
“Find out what decisions this part made”.
“Maybe this part can tell you what it decided”
“Let’s just stay in this calmness now and see if some insight shows up.”

Letting Pain Go (Un-burdening). Unburdening is a technical term form IFS Therapy. Once the witnessing is accomplished we can have the client ask the part if it is ready to let go of its pain. Often this will stimulate a whole new phase of working with the part at some earlier or later age, or working with some other emotion, or aspect of the situation of memory. Eventually the part will have nothing more to reveal and it is time to help it to let go of the pain.

Typical Coaching Moves:
“Ask (her/him/the part) ‘is there anything else to know before we move on’”
“Ask (her/him/the part) if its ready to let go of that now”
“Find out how (she/he/the part) would like to release that pain”

Working with the future: One of the nice IFS moves after the pain is released is to find out what qualities the part would like to have to replace the pain. It might be playfulness, or creativity, or more love or nourishment (more touch, more comfort, more sleep). Once the desired replacement is named, the therapist can help the client while still in the indirect relationship to create a little guided imagery ritual to reify the idea of that quality flowing into the part, into the space that is left when they give up the pain.

Typical Coaching Moves:
“Now that its pain is gone, what would (he/she/the part) wish to have instead.”
“See if this part would like to have something to carry in place of the pain”

Trying new behaviors: (Response flexibility). Sometimes interaction with the part is around some new skill, like asking for what one wants, or saying no. I usually leave this to the end and do some work on this directly with the client during the integration phase that brings the new internal insight into present time and space behaviors. This is a Hakomi move and it is one that Ron Kurtz demonstrates in many of his video-taped sessions.

Embodying the part. A good way to finish is to have the client find in their experience of themselves or in their body a place for this part to stay and invite the part to stay there. It is also good to suggest that we will check in with that part in the next session or the client will check in with it during the week to be sure that it is still ok. We can also instruct them on staying in touch with this part during the week by, say, finding a picture of themselves at this age and placing it on a dresser top, or something they made at school, or journaling to or about this part. This is especially important when abandonment is part of the part’s issue.

Example 2: Transcript of a sequence from an actual session.
Here is a second transcript to further illustrate the application of this technique. It is rendered from memory, but I believe it to be sufficiently accurate to serve as an example of an actual session. In this scenario the therapist and client have worked previously for three sessions. The client is acquainted with parts language so that it is not necessary for the therapist to explain what a part is when the word is introduced. The client has just become aware of some sadness and has mentioned it to the therapist as the dialogue begins:

Client: Yes, I’m feeling some sadness.
Therapist: Ok. Good (sympathetically). I see your feeling sad. Are you ok with that?
Client: Yeah, Pause, (tears) I’m ok.
Therapist: OK. So just see if you can stay in connection with that sad part. Let’s think of it as a part. A part of yourself. One that’s feeling sad. Is that OK?
Client: Pause. Yeah, OK.
Therapist: Fine. So . . . how are you feeling right now toward that sad part. What is your feeling or your attitude toward it? (evocatively).
Client: Well, I’d kind of like it to go away. I don’t like to feel sad.
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Therapist: Fine. I see. We could say that there’s a part around that doesn’t like the sad part... doesn’t like to feel its sadness. Your noticing that part right now, is that so?
Client: Yeah. Doesn’t want to feel sad all day.
Therapist: I wonder if you could let this part know... just quietly, inside... that you’re ok now and you would like it to stand back so you can just be with the sad part and offer it some comfort. Tell it we just want to make the sad part feel better. Is it willing to step back and just watch for a while as we do that? (This is an IFS move, usually unnecessary in conventional Hakomi, but it is handy and important in this technique. We must be sure that the client is in Self and is not in some other part when working with the subject part)
Client: Yes. It can do that.
Therapist: Good. Why don’t you thank it for doing that and let’s return to the sad part now. Can you reconnect with the sad part now? Is it still there?
Client: Yes. Its here. Eyes tear up a bit. (Nonverbally the client seems accepting of the sad part.)
Therapist: Good. Now with that other part standing back, and as you connect with this sad part in a compassionate way, from your heart maybe, just go inside... to this sad part... and say to it: “I see how sad you are.” (In saying this acknowledgement the therapist models a very warm gentle and compassionate voice).
[Therapist maintains a little pause of a few seconds while that happens. Then adds)
Therapist: What happens to the sad part when it senses your presence and hears you saying those words? (Ask this question in an curious caring manner.)
Client: Its calmer now. Feels better.
Therapist: Fine. You could just say to that part... You could just say: “I see that you are calming down now.” (The tone of voice models talking sympathetically to a child part. Then we ask for a report.) “What happens when you say that? Quietly. Inside... to that part?”
Client: It calms down more and there is a warm feeling... feels better.
Therapist: Good. It seems like just being present with this part is comforting. Pause. Fine. Just see if you can stay with the part. It might want to tell us something about its sadness. Or maybe it has other feelings or a story, maybe even a memory that it would like you to know about.
Client: Father left and my mother was crying.
Therapist: I think the part is showing you a memory. How old is the part now?

At this point we are moving into the witnessing phase. The therapist will simply sustain the indirect relationship while the client witnesses the multi-sensory memory that has been evoked, offering nourishment as needed and keeping any interfering critical, judgmental or worried manager parts at bay by assuring them that we are not going to empower or provoke the feeling parts, but that we are going to take care of them so that they will feel better.

Discussion of Example 2.

This sequence demonstrates the technique more fully than the first example. It contains the necessary steps. It also illustrates some points taken from IFS that are important to the method. For example, in Hakomi we track mindfulness very closely since we realize that bringing mindfulness to unregulated feelings has a soothing and healing effect. We use our heightened awareness of non-verbal signals to do that. Tracking and contact statements also help us to keep the client in present time with present experience. This is in keeping with the implicit nature of Hakomi work.

When we work with clients in the indirect relationship, however, we must be more explicit. We can still use our non-verbal skills to check out what the client says, but it is sometimes a good idea to explicitly ask the client how he or she feels about a subject part to make sure another part has not blended, fused, or overlaid the essential Self.

In IFS and in this alternative Hakomi method the initial checking out is done with a direct question: “How do you feel toward that sad part right now” or we can elaborate by asking “what is your attitude toward this part right now.” I avoid saying what “do you think...” since this will invite problem solving, figuring-out parts to get involved. If there is a critical, judgmental, or hostile part around, this question will usually bring it to the fore. We can then have the client give it assurance and ask it to step back. Useful moves are (1) being with the intervening part (2) acknowledging its feelings, giving assurance (3) telling it that it can stand by and watch (4) assuring it that it can interrupt if it doesn’t like what we are doing. If a part won’t step back then it is a good idea to work with it until it communicates more about what concerns it. Just shift the client’s attention to the new part while asking the original subject part to wait.

If nothing has happened to a part after the client has acknowledged its feelings, if the feelings don’t calm down or shift, or if they intensify, it is a good idea to check to see if there is a critical, worried or hostile part that has intervened. Exile parts that carry the bulk of our unresolved feelings are often very sensitive to internal managers, and will not trust the therapist or the client until one or the other or both demonstrate their commitment to defend and protect the young, often sensitive part.

We should also be aware of highly sympathetic parts. There is a big difference between compassion and smothering sympathy or self-pity. If a client is sorry for a part and I suspect that there is a smothering manager around, I usually ask the part that feels sorry to step back. This can be a very effective way to deal with dysfunctional self-pity that keeps clients stuck in feelings and systems of victim-hood. The
therapist, however, must be careful not to be insulting or disrespectful to the sympathetic part as we work to tone it down and show it that it can take care of the part better by facilitating the connection between the part and the clients Self.

While I have used some IFS language to explain this, the Hakomi therapist does not need to look far to find a good language for discussion. Self can be equated with the client’s state of mindfulness or Loving Presence. A critical part is just a critical voice. Being self-sympathetic is not being mindful and usually leads to the postures of victimhood (victim, persecutor, rescuer). Victim-hood is a system and in Hakomi training we learn how to help a client jump out of it by naming it. IFS therapists usually think of this system as the behavior of a certain kind of manager-caretaker-therapist-healer part.

**Returning to the Direct or Conventional Hakomi Mode**

It is possible to return from the indirect mode to the direct mode at anytime without confusing the client. The important thing is to honor the shift by carefully stepping the client through it each time it happens. If the therapist is not careful and explicit in marking the shift the client becomes confused and this interferes with the session and future use of this method.

To make the shift from the indirect mode to the conventional Hakomi direct mode, the therapist asks the client if it would be ok to talk to the client’s part directly. If the client gives consent (I have never had a client say no to this request) the therapist instructs the client to stand by and observe what happens. It is important that the client observe from a mindful, non-judgmental space and the therapist can give whatever coaching is necessary to attain and sustain mindfulness.

Once a client gives the therapist permission to go ahead and talk to a part, he or she is placing the therapist in the direct mode. The therapist proceeds to do what conventional Hakomi therapists do when they set up mindfulness. When the client is observing mindfully, the therapist says to the client, “Notice what happens when I say (or when I ask this part) . . . pause . . . “what do you remember?” or (using an acknowledgement) “I see how frightened and scared you are”, or “I see how disappointed you are”.

Once in the direct mode the therapist can re-enter the indirect mode with the same moves above. Just have the client connect with the part, be with the parts feelings, acknowledge the parts feelings, and be sure to have them notice what the response is.

**Conclusion**

After almost three years of working with this complimentary method in my private practice I can recommend it as an addition to conventional Hakomi or as a way to combine Hakomi and IFS into a single set of skills that can be joined seamlessly into an integrated approach. I also intend to write a similar article addressed to IFS therapists that recommends cross-training in Hakomi. What I have presented here are the essential moves, and I should think that therapists who use them will discover many additional elaborations. The essential elements are very simple and are set forth below in review:

1. Make the parts language available to a client and teach the client to label an emergent experience as a part. This should be done before introducing this process. I usually do this in the first session or two.

2. When you are ready to introduce this technique, begin by introducing parts language in order to distance the client from an emergent part sufficiently so that the client can remain in mindfulness or in a Self-led state with regard to the part and its emotions while remaining connected with it.

3. Model acknowledgement for the client and have the client acknowledge the parts feeling, attitude or situation.

4. Support the client in observing the part after the acknowledgement, and getting a report on what happens.

5. Set the client up as a compassionate observer and support him or her in self-study. Help them to witness the part, its feelings and its story.

6. Direct the client in effective ways of working with estranged parts to provide attuned presence, connection, emotional nourishment and affect regulation, along with an opportunity for cognitive re-thinking and reframing of the parts interpretations, decisions and conclusions.

The use of the indirect method in Hakomi multiplies the repertoire of moves available. It is especially helpful in distancing the Self from parts that the client perceives to be dangerous, terrifying or otherwise extreme, and hard to be with or hard to separate or “un-blend” from. The IFS concept of Self combines the passive mindful quality of the Hakomi Witness with its active compassion or Loving Presence.

Many of the Hakomi methods are adapted to a group situation where helpers are available to take over the work of parts, voices or physical behaviors. Ron Kurtz has recommended this, but I find that it is often not practical in
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private practice since many clients cannot afford to pay for more than one therapist, and unpaid assistants and trainees are not always available. One can ask clients to bring in friends, but this comes with complications, for example, issues of trust, confidentiality and ethical/legal complications.

Given these considerations I have resorted to this indirect method frequently, and it is my preferred method of working. Overtime the indirect method teaches client’s how to work with their own parts. This does not happen right away, but after anywhere from six to twelve sessions clients will often spontaneously recount an experience in which they employed it to handle an upsetting situation without my help. It is an extremely gratifying moment and one that tells me that I am getting my job done.

While I have taught this method to colleagues and find that Hakomi therapists can learn it without difficulty, I have not taught it in trainings. It may be better to offer trainings in these skills to therapists who are certified in Hakomi and want to explore using Hakomi with other methods. I have found that Hakomi can be combined not only with IFS and Focusing, but even with cognitive therapy. It is not a large leap to realize that the distortions of thinking and speaking that cognitive therapists correct and revise (Burns, 1990) are the thoughts and utterances of young parts.

In Hakomi and IFS we hear pronouncements like “nobody loves me,” “I’m not enough,” “its my fault,” and “don’t trust.” We recognize that these voices reflect the conclusions and decisions of young inner parts. It may be that many clients who suffer from serious mood disorders can enter the doorway to self-study through the cognitive method and, as they become capable of increased separation and un-blending from overwhelming parts, they will be empowered to make a seamless transition into working with Hakomi and IFS methods.

References


