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The importance of contact  
Helen Keller

“For nearly 6 years I had no concepts whatever of nature or mind or death or God . . . I was like an unconscious clod of earth. Then suddenly, my brain felt the impact of another mind, and I awoke to language, to knowledge of love . . . I was actually lifted from nothingness to human life . . . I knew only darkness and stillness . . . my life was without past or future . . . but a little word from the fingers of another fell into my hand that clutched at emptiness, and my heart leaped to the rapture of living . . . that word ‘water’ dropped into my mind like the sun in a frozen winter world . . . The world to which I awoke was still mysterious; but there were hope and love and God in it, and nothing else mattered”.

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What enables us to make contact?

To offer someone acceptance, compassion, and understanding

What is the single most important thing we need?

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Self-Compassion

Francois Beausoleil, MBA  
Nonviolent Communication (NVC)

*The Blame-Free State:  
Find Joy and Empowerment Through  
Dissolving the Enemies of Your Heart*

[empathiccoachingrevolution.com/  
the-blame-free-state](http://empathiccoachingrevolution.com/the-blame-free-state)



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## Empathy deficit

Most of us have a severe shortage of empathy - from others and self

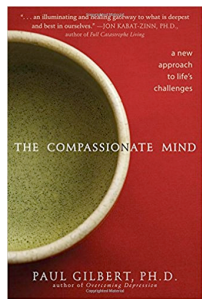
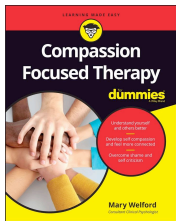
Accepting empathy builds trust - in others and ourselves

Giving ourselves and others the benefit of the doubt, support, and compassion leads to psychological safety

Compassion for self and our multiple inner voices parallels Compassion for Voices (fears, guilt)

## Compassion for Voices

Charlie Heriot-Maitland, PhD  
Eleanor Longden, PhD  
based on the Compassion-Focused  
Therapy of Paul Gilbert, PhD



## Compassion for Voices: A Tale of Courage and Hope

by Charlie Heriot-Maitland and Kate Anderson

[http://hearingvoicescymru.org/compassion-for-voices-a-tale-of-courage-and-hope\\_5674.html](http://hearingvoicescymru.org/compassion-for-voices-a-tale-of-courage-and-hope_5674.html)

### Threat system

concerned with safety/protection  
default, frontline system

Behaviors: Fight - Flight - Freeze - Submit

Emotions: fear - anger - disgust - depression

Cognitive:

- "Better safe than sorry"
- Jumping to conclusions
- Dissociation

Biological basis: amygdala, HPA axis

Mental health problems usually  
involve over- or under-activity

## The threat system and the mental health system

- Threat system evolved for survival, not well-being. It switches off good feelings.
- Medical approaches try to get rid of 'psychotic' Threat system.
- Many health care services operate in Threat mind - policies and procedures were based on sentinel events - failures, anger, shame, fear
- Anxiety  $\Rightarrow$  'paranoid' service culture - fearful and coercive
- We often have a dominance - submission relationship with paperwork, policies, bean counters
- Self-compassion is a high need among caregivers

### Drive system

Resource-seeking: food, sex, turf, status, success, control, mastery

Behaviors: creativity, exploration, competition, entrepreneurial, perfectionism, workaholism

Behavioral activation, Motivational Interview stimulate or access Drive system

Emotions: energized, excited, motivated, 'psyched', confident, superior

Cognitive focus: problem-solving

Biological basis:

stimulants, left brain

### Soothing system

attachment, social safeness, contentment regulates Threat and Drive systems

Behaviors: affection, kindness, care, interdependence, acceptance

Emotions: contentment, well-being, connection, safety, peacefulness, empathy

Cognitive: reassurance, dialogue, trust

Biological basis: endorphins,

oxytocin, opiates

+ right brain, - amygdala

meditation knitting

safe place imagery yoga

Japanese flute sleep hair brushing

tea ceremony Gregorian chant massage

4-6 breaths/min. sex prayer gardening

ideals or favorite things collage purring cats

Radical Acceptance power pose (Amy Cuddy)

knife sharpening nature sounds art gamelan

time with animals warm bath exercise ASMR

spiritual gongs children's stories hammock

religious observance birdwatching clay

trance music walking meditation

Safe Coping Skills (Najavits)

## Rebalancing the 3 systems

If early life holds excess Threat and too little Soothing  
⇒ anxious or avoidant attachment results

High shame, self-criticism, self-threat block access to the Soothing system.  
Threat or Drive systems are activated, blocking access to relief or calming  
Hard to feel content or safe within the self or with others.

Even generating believable alternative thoughts (CBT) or altruism doesn't help access the Soothing system if sense of Threat is too constant

## Working with the anger axis of the Threat system

Developing Compassion for "Enemy Images" or voices  
*(Francois Beausoleil)*

Worksheet: think of a recent event that you feel annoyed and/or self-critical about

Intensity level: 3-4 on 1-10 scale

What is the source of this pain - what do you blame it on?

## Blame - common reaction to Threat

- Attribution of wrongness - to others, self, or situation
- Threat triggers the alarm to search for what's wrong
- And who to punish
- Very difficult side effects
- Robs us of Soothing: trust, love, collaboration, health, confidence, hope, connection, accomplishment, energy
- Blame almost always involves self-blame
- Core belief - it's always my fault?
- I can take responsibility without having to decide who's at fault

## Compassion for Enemy Images

- Being Heard

Our blame is a powerful source of information about self, needs, values - a helpful ally if we can decode it. Huge arrow pointing to what we really want and crave

- Assuming Positive Intention

- Rehumanization - Feelings and Needs

⇒ compassion ⇒ collaboration

## Connecting at the Level of Feelings and Needs very helpful with “impassé”

My feelings:

My needs:

The other’s possible feelings:

The other’s possible needs:

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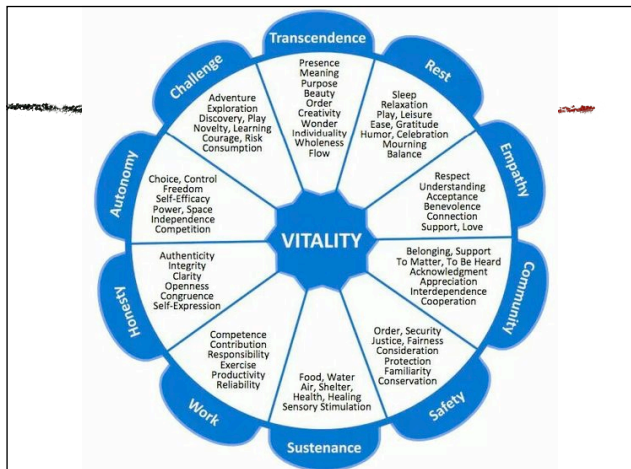
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## Compassion for Enemy Images, continued

- Meaning - interpretation  
“The story I’m telling myself is . . . “
- Rewriting the story - new narrative  
Best case scenario? - no blame at all
- Finding the underlying self-blame\*  
Motivates much blaming of externals  
Hard to face - it feels unsafe  
Go toward your inner blaming voice, not away

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## Full Circle: Compassionate inner voice

- Listen and offer empathy to inner blaming voice
- Don’t argue any more
- Hear difficult messages as “tragic expressions of unmet needs”
- Talk with your Inner Critic with kindness and compassion
- What did Eleanor’s voice mean, “You are digging your own grave”? Someone died, but new self was born
- What are unmet needs my Critic is going on about?

[http://self-compassion.org/wp-content/uploads/2015/12/self-compassion.break .mp3](http://self-compassion.org/wp-content/uploads/2015/12/self-compassion.break.mp3)

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## Can You Love the One Who . . .

Leah Pearlman, 2013

Can you love your tears?  
Can you love your worry?  
Can you love your darkest fears?  
Can you love your fury?



Can you love your addict?  
Can you love your thief?  
Can you love your vanity?  
Can you love your grief?

Can you love your crazy?  
Can you love your sane?  
Can you love your foolish heart?  
Love your scattered brain?

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### Developing compassionate inner voice

- Caring for well-being (vs. rejecting or unfeeling)
- Sensitive to distress and needs (vs. ungiving)
- Empathic, emotionally engaged (vs. disconnected or passive)
- Tolerates distress (vs. dissociating, disconnecting)  
Contain, stay with, tolerate high levels of emotion rather than avoid, divert from, close down, contradict, invalidate, or deny intense feelings
- Takes the trouble to understand (vs. not getting it)
- Non-judgmental (vs. blaming)
- Supporting and encouraging (vs. forcing or bullying)

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### Compassionate attention

- In a calm place, people can begin to heal themselves
- Focus on what helps and supports
- Remember times when I or others were kind
- Refocus on what we like about self and others
- Help person identify their strengths - courage, trustworthiness, care for others . . .
- Positive memories
- Savor experiences, relief, appreciation, gratitude - free yourself from dominance of Threat
- Safe place imagery

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### Imagine compassionate self or ally

- Explore image of compassionate person (expression, gaze, voice) or entity
- If animal, tree, mountain - it must be aware and have qualities of wisdom, strength, warmth, acceptance
- "I've been there" POMC
- half smile, open hands
- practice compassionate feeling
- focus on how emotions are embodied
- lovingkindness, self-compassion meditations
- Practice using warm, gentle, encouraging inner voice to help with fears, giving up, avoidance
- Focus on effort, no matter how small, rather than result

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## Logic is not enough

- Feeling helped and supported is primary
- Psychological safety - acceptance, listening, warmth
- Acknowledgement - validation of feelings, meanings, needs
  - \* \* \* \* \*
- But also explore reasons and fears about giving up protectors, even harsh Inner Critic
- Fear of self compassion, of Soothing
- Person may need "exposure" to closeness, compassion, feeling good
- Fear it's undeserved, self-indulgent - or will be taken away
- Kindness from you may trigger grief, dissociation - shame and fear related to closeness client X
- Self compassion (Soothing) vs. self esteem (Drive)

## Full Circle: Compassion for Enemy Images of Self

- Being Heard - by others or self
- Assuming Positive Intention - negative, neutral, positive
- Rehumanization - my feelings and needs self-compassion, self-acceptance, self-appreciation
- Meaning - true or not so much?
- Rewriting the Story - compassionate response
  - Misunderstanding?
  - Blame-free scenario

## Key Stages of CFT for Voices

1. Establish safe relationship
2. Offer empathy, warmth, care
3. Teach about Threat, Drive, Soothing systems
  - humanize and normalize adaptations
  - de-shame 'symptoms' (= adaptations)
4. Cultivate a compassionate inner voice - inner safe base
5. Direct the compassionate self toward others, toward multiple inner selves, and toward voices
6. Soothe the Threat system so ACEs can be explored
  - psychiatry often opposes the Threat system, invalidating memories and experiences

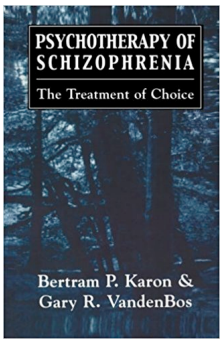
## Neocortex

Human beings often worry, feel embarrassed or inferior. Have compassion for the parts who have been crushed, messed with, enraged, shamed. It's not your fault. You didn't choose your family, genes, schools, rejections, trauma.

'Symptoms' and 'mental illness' can all be seen as strategies to manage Threat or find Soothing. Internal Threat - shame, self-dislike, self-harshing - developed to placate caregivers and try to re-attach. Are there many memories of feeling safe, reassured, cared for, soothed? Provide that now.

## Dealing with risk psychodynamically

Bertram Karon, PhD, ABPP



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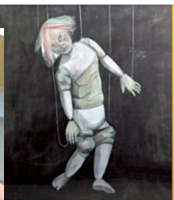
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## Responding to suicidality

David Webb, MA

“ . . . honour and respect your thinking about suicide as real, legitimate and important. I denied my own suicidality for so long, but suppressing these feelings ultimately did not work. So please, honour this agonising struggle and then, with the respect for yourself that this struggle deserves, talk about it . . . ”



Thinking About Suicide  
Contemplating and comprehending the urge to die  
David Webb

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## Bertram Karon, PhD, ABPP

Professor Emeritus, MSU; PI, Michigan State  
Psychotherapy Research Project, 1966-1981

When people start to make sense of their lives:  
anxiety, symptoms, and “schizophrenia” itself begin  
to fade away

Symptoms and difficulties aren't roadblocks,  
they are building blocks

Feelings are central:  
anger, despair, terror, loneliness, shame  
. . . and tolerating *positive* feelings

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## What is “psychosis”?

- Psychosis is chronic fear
- Symptoms protect from this terror
- Schizophrenia is a social problem
- A long history of subtle and unsubtle rejections

A lot of psychosis is about seeing your own difficult  
life story reflected in the world around you

The past pushes into the present

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## Emotions

Emotion is perception. Feelings provide essential information. hunger pangs leprosy

Feelings come from somewhere

- Displaced?
- Exaggerated because no one's listening?
- Veiled?

But they are about something real.

The person may wish their feeling was wrong.

They may try to get you to agree it's wrong

And help them get rid of it, but . . .

## Violent Thoughts and Voices

Rachel Waddingham

Voice Collective

London Hearing Voices in Prisons Project

"Throughout all of this I kept silent. It was this silence that stopped me from finding my voice and finding a way of dealing with what had happened to me. It was this silence that needed to be broken."

<https://www.youtube.com/watch?v=cUFIn5AZzX0>

## Compassion for anger

Bertram Karon

Anger is a healthy feeling

Anger protects and defends. It wants to take action to defend you or prevent more injury

"You can't feel angry unless you're being hurt.

So we need to find out what's hurting you."

"Anger tells you who or what is hurting you."

"As long as we keep talking and thinking about your feelings, they can't hurt anyone" physically.

## Compassion for anger

Help person describe their impulses in detail failing arm

"I wonder if \_\_\_\_\_ didn't like you to keep talking about things that were problems."

Constant contradiction, no-saying:

"Was there something you wish you could have said no to?"

*It's all right to think anything, to feel anything . . . only actions are "good" or "bad" . . . Let people know you can talk about any thoughts, no matter how awful they believe their thoughts are.*

## Compassion for anger

Rage often comes from strong fear

If person can talk about her anger, it will diminish

“Anyone would be angry who went through what you did.”

“If you kill someone, you’ll go to jail and then I couldn’t work with you any more. That would be terrible”.

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## Responding to anger toward *you*

Take your own fear seriously.

Have someone there with you if needed. restraints; Frieda

Show how you take care of yourself when people are threatening to *you*

“I wonder if you are irritated at me. We often talk about things you’d rather not talk about and it would be reasonable to be irritated at me.”

Just be you.

You’re different from the people who hurt them.

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## Responding to anger toward *you*

“I wonder if you’re angry at me and feel you’re not supposed to say so.”

If you are worried about being assaulted:

“Sooner or later you’ll probably feel angry at me and feel like hitting me. It’s very important that you tell me about it. You will learn a lot from it, but do not hit me. Here we talk, not fight.”

*Psychotherapy of Schizophrenia*, p. 191-192

“I can’t think when I’m scared and I can’t help you then.”

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## Compassion for anger

*“Let us embrace [fear and anger] tenderly like a mother embracing her baby . . . I have to deal with my anger with care, with love, with tenderness, with nonviolence.”*

Thich Nhat Hanh

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## Responding to self-harm

Self injury - may mirror earlier experiences.

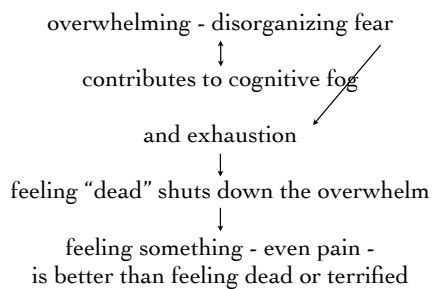
This can:

- Preserve connection
- Pay for "wrongdoing"
- Or prove abuser was right

"Did you hurt yourself instead of hurting \_\_\_\_\_?"

If there was physical abuse - hurting others (assault, BDSM) might reassure the person "no one will get killed here".

overwhelm  $\Rightarrow$  numbness  $\Rightarrow$  self injury



## Responding to suicidality

Bert Karon

"Depressed people are very good at convincing you that they are terrible or the world is terrible. Don't be convinced."

Suicidal people desperately need to connect.

"It's worth trying to understand what hurt you in the past and what's still hurting you."

"It would be a waste of your life if you killed yourself. You're much too valuable for that." Mark/TA

"You don't deserve to die for that."

## Threat - Drive - Soothing systems out of balance

Common for a troubled caregiver to deny his or her impact on the child

A child's strong feelings (other than guilt) may be punished because the caregiver has their own pain

Mistreated children often guilt-tripped - ignored - told their feelings are wrong or crazy

*If you're taught that your feelings are irrational, they will go underground and become a mystery*

## Needs wheel is upside down

A family in difficulty is also in pain.  
They want to push pain away.  
They may see outsiders as dangerous and hurtful.

Children need to believe their caregivers are good and right - inner security

Survivors may try to prove to you their family was ok.  
The rest of the world - including you - is worse.

Even if that means they are "bad" or the world is terrible

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*"Every psychopathology is a gift of love."*

Lorna Smith-Benjamin, PhD (1993)

.Jesus or Messiah

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## When every day is Opposite Day

"Symptoms" may distort a harsh reality to protect against overwhelming feelings

People in psychosis are experts at being out of contact - trying to stay safe

"Double binds"

"Single bind": you wonder if you should even exist

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## When every day is Opposite Day

Attempts to reach out may have been ignored, so even wishing or wanting gets shut down

Don't expect much positive feedback - person may fear that if they like something, it will be taken away.

Were independence and separation painful for the caregiver?

Fear of being submerged vs. fear of abandonment

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## When every day is Opposite Day

Problems can't be solved in symbolic form

Recovering awareness of the difficult reality may clarify things greatly, but this can *feel* life-threatening

"Your grandma felt needy. Maybe you are afraid other people will just take from you. I wouldn't do that to you".

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## When every day is Opposite Day Problems with sense of self

"Grandiose" ideas try to repair crushed self-esteem

Feeling powerful or supremely self-sufficient: may be repairing sense of *powerlessness*

"Self-referential thoughts"

Look into ideas that seem egocentric.  
Caregivers may have had great difficulty with closeness.

entitled person - showing you

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## "disorganized thinking"

"Illogical ideas":

- Intense anxiety scatters thoughts
- Family may have had unusual beliefs or definitions
- Look into the meaning

Being overly abstract or intellectualized . . . keeps feelings away

Being overly concrete . . . can keep professionals at bay

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## "disorganized thinking"

Disorientation: when you're fighting for emotional survival, it doesn't matter what day it is

Confusion - misunderstanding - uncertainty - are ok. You can tolerate and accept it.

As trust grows, it will be easier for person to say things clearly.

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## Trust

Even if the person can't cooperate with you yet, keep coming back.

"80% of life is showing up." *Woody Allen*

"Do not accept failure." *Bert Karon*

You are a source of strength, protection, and warmth (Soothing), which enables people to look into difficult things.

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## Psychodynamic prime directives

*"It doesn't have to make sense and there are no bad thoughts. What comes to mind?"*

*Psychotherapy of Schizophrenia, p. 178*

"There's no such thing as a mistake here because we learn from everything."

Nothing is wrong, trivial, or irrelevant  
You will get to where you need to go

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## Just respond

No agenda, except your desire and ability to understand and to be helpful

CYA, agency getting paid, paperwork, reducing supervisor's anxiety, saving inpatient dollars, getting person to accept their diagnosis  
- won't help people in existential crisis

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## Connecting the dots

"What comes to mind when you think about \_\_\_\_\_?"

my arm is moving

Seemingly random associations may be meaningful

Topics in a conversation may be related

Recurring, difficult interactions may be a re-enactment

Authority figures or "everybody" - the government, ACT, all men - often stand for early caregivers

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## Unusual beliefs

“There’s no way I could know whether this is true or not, but tell me more about it.”

*Psychotherapy of Schizophrenia*, p. 185

Explore things that don’t fit or make sense at first - where does it come from? What purpose might it serve?

“Symptoms” may represent their opposite

## Responding

- Be able to revise any story or “construct”
- Be willing to be wrong and make mistakes
- Talk honestly about your mistakes
- Don’t be overwhelmed by intensity or crisis
- Let people know it takes time and hard work to recover
- Expect improvement

## Responding

People with experience of psychosis may see **you** as hostile, destructive, overcontrolling, inept, needy, unreliable Harold Searles

You will have anxiety, self-doubt, impatience

By being rational and patient, you make the world feel safer

## Positive feelings

The person no-shows or won’t answer the door: they think no one really wants to be with them

If there was pain, even a good relationship now can be threatening bowing - balancing

Sense of closeness, needs being met, and tender feelings toward you can be most difficult closeness --> anger

## Independence

"It's ok to ignore my advice. Do what makes sense to you."

"When I make a mistake, I want you to tell me about it."

"I'm glad you can get angry at me."

Empowerment, autonomy, and agency are key

You are a model for how to care for oneself

Be happy when your ideas are rejected - this is independence

## Getting back into life

One way to avoid the stress and strain of modern life is to appear bizarre or disabled

If psychosis has been default coping skill for a long time, it will be the go-to response during the stress of recovery

The family may have had great trouble supporting people in building outside relationships

Caregiver may have had trouble thinking about the child growing up. When the child grows up and thinks of being independent, she expects to be punished.

## Responding

*If you do what you can,  
"surprisingly often it will be enough."*

Bertram Karon, PhD