

ABOUT THE TENDENCY OF PEOPLE ENGAGED IN AN EFFECTIVE COUNSELING OR PSYCHOTHERAPY TO DISAPPEAR

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INTRODUCTION

It is well known that there is a relatively high drop out rate from therapy and counseling. The following is my effort at drop-out prevention. As importantly, it is my effort to ensure that whenever you might chose to discontinue your therapy work, it is done in a face to face communication. Concluding any relationship can be awkward. Yet, how we conclude a relationship is important. Being able to express oneself at an awkward time is a worthwhile skill to develop. Therapy is an excellent place to learn to do that better.

I have repeatedly said, it takes patience to be a patient in therapy or counseling. It requires a faith in a process that is vague, ambiguous and ill-defined. It demands that one be able to accept that something, somehow will change someday in a powerful fashion YET in all likelihood we will never know why that change took place or what exactly made the difference. As a young student, I myself was extremely skeptical. I detoured quickly into organizational psychology which seemed more grounded in scientific method and data gathering. Yet, as we know, life works mysteriously. I found myself on a post graduate clinical track that took me from the hallowed halls of IBM to the perplexing and confusing terrain of Sigmund and his friends. In the process I became a true believer, witnessing personally and professionally the miracles that can unfold from this process and the health and healing that occurs in effective psychotherapy. This is the case, when the therapy has been allowed continuity, candor and commitment. When therapy fails it is most likely because of premature termination or a serious lack of openness on the part of the participant. Many times therapy is ineffective because it is more faux than reality and more a going through the motions, than a working through of the emotions.

Despite these potentials some of the "best" therapies go bust. By best I mean those that are actively engaged in a process of insight, consciousness raising and behavioral and emotional modification. Therapies bust despite the participants being articulate, intelligent and able to fully engage. Almost always, therapies bust even though the relationship is positive and rapport has been established naturally and almost instantly. Those therapies that go bust are typically the ones most likely to succeed and make a difference in a person's life.

Why, you might wonder, would some of the most effective and most connected therapies terminate prematurely? Why would the person chose not to come back? Why would that

happen without discussion? Why would the person leave in anger, anxiety or both? The answers can be simple and straightforward or subtle and complex. Let us look at these more closely so we can be alert to their potential to sabotage your therapy in our efforts to prevent it from happening.

SIMPLE FORCES

Let's briefly overview the simple and straightforward issues that can cause a person to disengage from therapy:

Unrealistic Expectations

If I or any caring therapist could wave my magic pen and help you to achieve peace of mind I would not hesitate to do that. Unfortunately, there is no magic when it comes to the human mind.

It often takes longer than any of us would like to effect significant changes and modification. That is because the conflicts and wrinkles in your mind took many years to build up. They will take a while to sort out and resolve.

It also takes hard work on your part and a willingness to face yourself clearly and openly in the emotional mirror of the therapy experience. Your commitment to this process and to yourself needs to be complete.

Denial

It is not easy to face our emotional self squarely. For most, it is more important to present a positive, acceptable image to the therapist, than to be open. The quality and speed of therapy is directly tied to the straightforwardness of the information presented.

Time and Money

Sometimes these become excuses to avoid a complete commitment. Other times they are realities with which to be reckoned. People are busier than ever. People in therapy have a tendency to put themselves last. This doesn't lend itself to visiting a therapist once a week. This is why we are doing many of our sessions over the phone.

Cost too is a major factor. However, payment plans exist. So do therapists whose fees are lower who work at our center under my supervision or at other centers. In some instances, it makes more sense to see someone who is on your plan and accepts your insurance to minimize your cost. All of this needs to be discussed in therapy so it can be resolved helpfully and healthfully.

Lack of Motivation

Not everyone wants to make changes. Many do, but don't want to do the work required. Dropping out of therapy is like not going back to the gym. No pain. No gain!

Lack of Rapport

Sometimes therapist and person don't click. The chemistry just isn't there. Don't give up on the process. Find someone with whom you can work with when you feel comfortable and trusting.

COMPLEX FORCES

Therapy is a complex process. Let's look at subtle forces that can bust up a therapy.

Self Sabotaging Forces Within

Not all of you want to get better. The parts of you that initiated your symptoms and distress have a vested interest in sustaining them. Your healthy adult wants to feel well, while your child/teen parts feel safer feeling stuck. In some ways, the better you do and the more you are committed, the more your inner saboteurs work to get you to stop the therapy. It is paradoxical and perplexing, but true none-the-less.

Therapy Is A Complex Relationship

Traditionally, transference (an idea by Freud) refers to the fact that people project onto people in significant positions (i.e. teacher, therapist, boss, friend), feelings that they developed in the course of dealing with their family of origin. The therapist can quickly be seen as parent; sometimes idealized, sometimes feared and sometimes frustrating.

Expectations that the therapist will always be sensitive and caring, clash with fears that once again the person will be disillusioned by yet another "authority/parent" figure who falls from idealistic grace. The therapist sits in an authoritative position in the person's mind, no matter how hard the therapist tries not to be there. It is built into the equation of the relationship as well as into the fabric of our nature as people. We project onto others perceived to be in authoritative positions all kinds of magical powers, just as we did our parents. Most people sit in their therapist's office enjoying the positive, supportive interaction, while simultaneously fearing that the rug will be pulled out as it has been in the past. This limits the person's candor and openness which limits the therapist's helpfulness. It also creates pressure for the therapist who can easily trip over a multitude of issues. Even if the therapist never trips, the person can see him/her as having done so.

The feelings that the therapist has toward the person coming to visit are called counter-transference. An effective and experienced therapist is aware of those feelings, processes them internally or with a supervisor and ensures that they don't interfere with the therapy. The healthier and more effective the therapist, the better able to maintain awareness and control over those feelings and avoid being critical, judgmental, parent-like, flirtatious, rejecting, pompous, etc. The healthier the therapist the better control s/he has of maintaining appropriate and helpful professional boundaries.

In the complex interplay between transference and counter-transference forces, it becomes easy to understand the fragile thread that connects therapist to person in the ongoing dialogue of their therapy. It also becomes easier to understand how an excellent therapeutic relationship can be destroyed in a brief moment of miscue, misunderstanding or misconnection. Within many people who come for therapy there is little room for

forgiveness. They expect to be hurt, are tired of being hurt, and can't tolerate anything that feels like hurt from someone whom they've trusted with their mind. The therapist sits perched on a slippery slope from which s/he can easily fall.

This is why it is so important that the person coming to therapy be able to discuss those uncomfortable and upset feelings and be able to allow the therapeutic process to be used effectively. Namely, to be able to accomplish what could not be when one was a child? Back then one's opportunities to talk openly were limited and fraught with potential punishments that inhibited the process. Those same punishments do not exist in therapy. Therapy offers a person the opportunity to say, "You hurt my feelings last week"; "I am feeling very angry towards you", "You betrayed my trust", "What did you mean when you said...", "I can't believe that you would be so insensitive" etc. These and similar statements become the bedrock of effective therapy, allowing for the resolution of conflict and allowing for the humanness of therapy to be addressed. No one can live up to idealized expectations that are projected onto the therapist. Sooner or later something will occur that will upend the process, unless there is a communication channel that allows for clarification, apology and conflict resolution. No ethical therapist would ever knowingly hurt the person coming to them for assistance. But misunderstanding happens! This is especially true when parts of us want an excuse to exit ASAP.

SO MANY WAYS TO FAIL YOU

There are many ways that this can occur that it is hard to catalog them all. Here, though, are some examples that will help you to understand the problem:

- The therapist, unaware of sensitive issues, unwittingly makes a comment that lands heavily within the person's mind.
- The therapist tries to lighten a particular moment via humor. S/he says something that the person feels is directed at them in a negative or derogatory.
- The therapist hands the person an article related to some point of discussion or some interest of the person. This causes the person to feel like they did when they were young when one of their parents tried to constantly give them information to teach them. The person reacts with the same anger they felt when they were young.
- The therapist totally misunderstands a comment made by a person which causes the person to feel like h/she wasn't listening, doesn't understand, doesn't care, etc. This hits sensitive nerve endings connected to not being taken seriously as a child or teen.
- The therapy reaches a point where the person feels compelled to talk about an embarrassing subject which s/he feels will cause the therapist not to like them anymore, view them in a different light or be a critical parent. The fear of this happening pushes them away.

- The person develops strong attachment feelings to the therapist, becomes frightened and runs away rather than discussing them openly.
- Something as simple as a misunderstanding with regards to the time of an appointment can create problems. Or if the person shows up and the therapist doesn't or the therapist inadvertently schedules two people at the same time. Sometimes just the fact that the person knows that therapist sees other people before and after that person can cause upset feelings. The therapist taking a vacation can be interpreted as his/her not caring enough. Or this can play out as "How can s/he go away and have a good time when I am suffering so?" See the movie "What About Bob" for a humorous view of these issues.
- Chance meetings in public places can create feelings that can disrupt the therapy process, especially if the therapist is with a family member such as a spouse or child. The person can feel "betrayed" by such an encounter, while simultaneously acknowledging the inappropriateness of the feelings.
- A comment from the therapist that sounds critical or judgmental, even if it is not intended to be can leave the person feeling hurt, angry, misunderstood, and disapproved of, etc.
- A comment made outside of the therapy setting by a comedian on television or a scene in a film about therapy, or another persons comment such as "all they care about is the money" or "your shrink probably talks about you to other people", can be sufficient to plant seeds of doubt and distrust.
- The feeling that "if my therapist really cared s/he wouldn't charge me or would charge less" can undermine the trust. It can be difficult for some people to see that the fees and caring coexist.
- Someone allegedly quoting a therapist such as a parent or partner, using it in a manipulative way, causes distrust. "Dr X said you are _____" can cause people to leave without ever asking Dr X if s/he ever said that or what s/he meant by it.
- A disparaging comment made by an associate of your therapist or the secretary, or telephone answering service in the form of "s/he is always in a hurry...late...abrupt...moody..." can generate disillusionment and/or disrespect.

These are only a sampling of the kinds of issues that can harm the therapeutic relationship and upend what was otherwise a healthy therapeutic interaction. Obviously all of these situations can be talked through, clarified and resolved. For the person whose tolerance for hurt and trust in others is low, it is often a one time error than cannot be repaired.

IN DEFENSE OF PEOPLE IN THERAPY

All of the above simple or subtle forces reflect how fragile a therapy/counseling relationship can be. Like a parched forest, one spark can create a massive fire.

People who are dealing with emotional conflicts are typically carrying a fair amount of anger within them. They have been hurt repeatedly in a variety of ways by a variety of people. These inequitable scenes form the bedrock of lava-like-rage that is contained within. It is this rage which is triggered by one of these unfortunate miscues and experienced as the ultimate betrayal. Even a small miscue on the part of the therapist is turbo charged by past hurts from significant people. The more significant the miscue, the stronger the hurt and rage.

It is that rage that propels the person away from confronting the issue and resolving it. The hurt cuts deep and the anger runs hot. The person is afraid of literally exploding all over the office and embarrassing themselves in front of the therapist. Or they are so fearful of the therapist's anger that they avoid an interaction. In some, self-consciousness prevents openly discussing these issues.

Instead they walk off, retaliating without erupting. Ignoring the therapist's calls or follow-up letters and sometimes even a bill gives the person a sense of evening the score. This becomes a type of "running away from home" scene that, unfortunately, undoes and reverses many of the positives of the therapy process. Instead of it being an enhancement, it is just another busted relationship. It adds more fuel to the fires of distrust, hopelessness and pessimism with regard to other people. Typically it is a mountain of churning emotion built upon a mole hill like moment of misunderstanding, awkwardness or guilt. Ironically people in therapy "disappear" for the very reasons they came to therapy in the first place.

IN DEFENSE OF THERAPISTS

Therapists are only human. We can't make it all better as quickly as we would like. I work to work myself "out of business" with each person as quickly as I can. I understand it's not quick enough!

Those therapists who are well trained, experienced, and sincere strive to say the right thing at the right time in the right way. Yet, there are no scripts for the therapist and everything must be ad-libbed in the spontaneous moment. The effective therapist does that well and does that reliably, but even at the 99% level there is still a chance for miscue. All human relationships will break down at some point unless there is a way to talk about feelings and resolve points of conflict. The therapy interaction in its ideal is a model for that kind of interaction. It is important that the person push themselves to communicate, confront, and hopefully continue the process. It is important that the therapist be encouraging and accepting of that feedback, so that it is not a punishing replay of old scenes.

IN DEFENSE OF THERAPY

Therapy is about seeing things in perspective, being honest with oneself and those close and trying not to overreact. The person who abandons an otherwise solid ship that has been sailing along toward safe and healthy harbors over a particular miscue or other problem is sinking it needlessly without trying to clarify or resolve the issue. No doubt it has happened before to that person in a variety of interpersonal situations that run the gamut from work colleagues to family members to friends or lovers. To repeat that scene in therapy is to ensure that it will continue to be repeated over and over and over again. The therapist, although disheartened and sometimes perplexed by the sudden disappearance of a person with whom s/he has been working diligently, will go on helping other people and perhaps learn from one situation so it can be applied to another. It is the person who leaves who suffers the brunt of the problem of not resolving these issues. It is for that reason it is so critically important for him or her to do it differently in therapy, than it has been done in life.

IN CONCLUSION ABOUT CONCLUDING

Sometimes people get frustrated in the middle of therapy, especially when they are not seeing any progress or change in themselves despite their investment of time, energy, and money. They get tired of hearing themselves say the same things over and over and of seeing the same repetitious scenes in themselves add nauseum. They become frustrated that the therapist's "magical" powers are not working for them and fantasize that everyone else is getting better, while they are still stuck. They begin to get angry at the therapist for not making it all come together, angry at the process and at themselves. It is at these times especially when an off handed remark or some other miscue can topple the therapy cards and send them flying.

Therapy is a complex process that requires perseverance. Progress is painfully slow and frustrating. It is easy to become disillusioned as time and money go by without measurable progress. It is easy to see it as solely benefiting the therapist. It is easy to become angry and disappear. It is also easy to become frightened as it cuts deeper into the emotional onion, peeling layers of pretense and defense.

Therapy is slow because the mind does not yield easily. Inner saboteurs block progress. Inner saboteurs win when the person disappears. Consider the following letter from someone who disappeared about five months prior to writing me. It was received while I was working on this article.

Dear Dr. Penzer,

First, I apologize for not paying the balance of my account with you. Your services to me were very valuable and there is no reason for my waiting so long to pay you.

My apology as well for the way in which services were terminated. I felt as if I needed a break from what we were discussing. Weeks became months, before I realized just how long it had been since I had spoken with you.

I continue to struggle with many things, but believe that I have made positive progress with my outlook on myself and some changing of my old ways.

I truly hope you can forgive the way I ended our therapy. I am ashamed and find it difficult to call your office.

It is these hurtful feelings I am trying to prevent. The shame of it is in the shameful feelings. Therapy is not about shame. It is about learning not to repeat old, hurtful ways. Face to face would be the ideal way to talk through these issues. A telephone conversation would be better than nothing as would be an exchange of letters or e-mail. Any mode of communication that provides for clarification is better than the sudden interruption of an otherwise effective therapy and the disappearance of the person from the process forevermore.

Draw upon all of your healthy energies to resist the temptation to run away and leave the scene in a flight of anger and/or anxiety. In any misunderstanding in your therapy communicate, clarify and then make your decision about continuing. All therapy ends at some point, but it needs to conclude comfortably. The decision needs to be based on having reached one's goals or feelings that this type of therapy is not the path within which to achieve them. To abandon therapy without seeking resolution is truly to abandon oneself and to repeat again destructive and unhealthy scenes of self-defeat. Therapy is not about the therapist. Therapy is about the person and you, that person, deserve more than just disappearing from the scene.

Therapy takes many forms and fashions. Individual meetings are only one brand. Groups, workshops, books, spirituality, hypnosis, relaxation training, yoga, etc. represent other therapeutic avenues. If individual therapy is not for you or not sufficient, seek out alternatives. Or try a different therapist. Just don't disappear. Share your feelings. Resolve conflicts and miscues. Consider continuing or leave bridges in place for the future. Conclude therapy in a healthy, shake hands, adult position of communication. Do it differently this time. Do it from strength. Do it for you!