

# Giving Voice to Therapeutic Writing

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Attending to the voice as the medium of expression and containment of feelings and ideas is a neglected therapeutic resource.

CAT, like most therapy, offers a talking cure and is a conversational therapy. Its distinctive additional quality is the Vygotskian use of tools such as writing and mapping to bring into clear focus the client's patterns of relating and the echo of these patterns in the therapy relationship. The use of such tools invites therapeutic attention to both the process and content of discussion.

Giving voice to what has been written is another kind of therapeutic tool. The voice works as the gateway to sensory and communicative potentialities, with its sensitivity to context "Am I entitled to speak?" to interpersonal relationships "how am I speaking and how are we listening?" to the body and its sensory feelings and experience (can I hold it together to speak from my heart, with head, with my breath), with my identity (accent, social position, education and intelligence).

The voice shimmers in and out of different emotions and shakes, rises and falls in and out of dialogue with all that is within and around it. When we tell and re-tell life stories, we are giving voice, each time from a different position, and with a different potential to remember and reconnect with cherished, disavowed or unformulated experience. The voice vibrates with the feelings for and against this or that emotion or idea. My question just now is how we engage the voice in relation to the therapeutic use of writing. Writing that is written to be voiced is different to

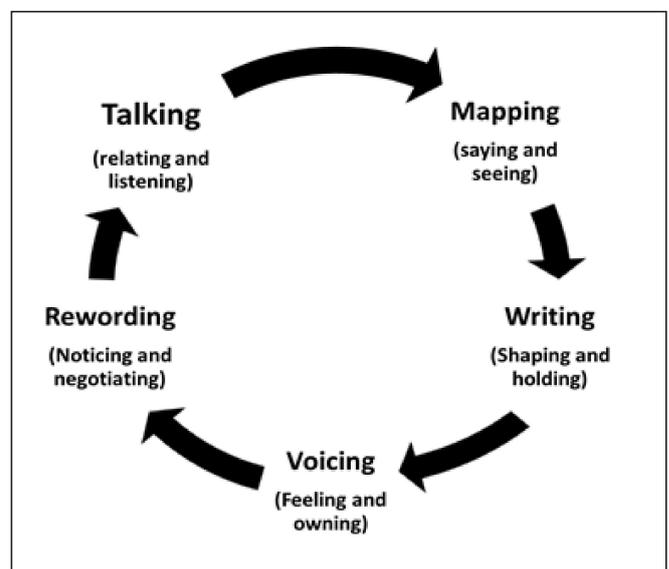
writing that is not written with this purpose consciously in mind.

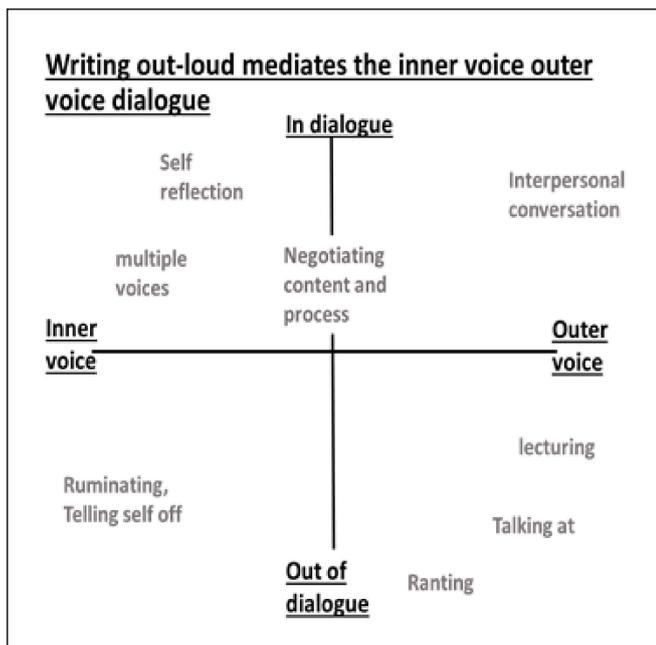
In staging and working through the reading of therapeutically focused writing, in traditional or innovative ways, there is an opportunity to be in contact with the interplay between *what is spoken* and *how it is spoken*. The voice may touch thoughts and feelings that lie beyond or beneath what is being read out. The voice may shimmer and hover over specific words which in the moments of their expression have added power and resonance and therapeutic possibilities.

When the reformulation letter (either in traditional form or with all the variations in choice described in this article) is read out, it takes on a different quality of talk from voicing associated with the earlier therapeutic conversation. In the figure to the side, mapping helps hold and shape the initial conversational flow. Recapping with the map helps create a shared framework for writing up the focus of the therapy (target problems and procedures and their origins and maintenance through life). The voicing is more deliberate, more staged, has more of an "addressing" quality. It is a We who are giving voice to each other of our understanding. It has a quality of *Me* self-consciously saying this to *You* now. All of which heightens the relational mix of tones and processes involved. It is

an invitation to the client to feel the emotions and ideas evoked by the writing in a different, more resonant and connected way. The letter and its voicing can be considered in relation to this goal. Often CAT therapists bypass the exposure and anxiety of giving voice to what they have written and read in a professional tone as if only the verbal aspects of the voicing matter and the vocal aspects can be ignored.

The voicing of the letter is an invitation to re-vocalise; to hear familiar life experience in a different voice and to take the opportunity to reword, revisit and further *reformulate* the reformulation. It is an act of bringing implicit knowing (Stern 2010) to a more explicit and conscious level of knowing. This may overlap with bits of dissociated memory and emotion finding a place in the narrative of the reformulation. It brings the mapping and the writing alive in the room emotionally in a co-embodied, multi-sensory space of voicing, hearing and seeing words come alive and then linger in the memory.





How I hear myself is different to how I feel I am heard which in turn is different again to how the listener hears me. The voice as depicted in the adjoining two-dimensional figure is in and out of dialogue with an inner hearing of the voice and an outer hearing. Giving voice in a therapeutic way would have movement around the four quadrants. These are: top right: being in dialogue and voicing ideas and feelings outwardly with an interpersonal focus. Top left: being in dialogue with an inner voice or voices and being reflective. Bottom left: being thrown into a ruminative space where there are inner voices, but they seem out of dialogue with each other and poorly orchestrated or attuned. Bottom right: a kind of outward going voice that is hectoring or lecturing and 'talking at' because it is out of dialogue in the interpersonal or social spaces from which talking arises.

Here are some examples

### Writing out-loud

Only in the moment of reading out-loud the two sentences of the focus of the therapy (the target problem procedure in CAT language) did the client hear their own critical tone to themselves in naming their father's

critical stance towards them in childhood.

### Verbal and vocal

Verbal communication concerns what is said. Vocal communication stresses more on how it is said. Words, when spoken carry verbal (meaning, language, syntax) and vocal (tone, volume, intensity) elements which

are woven together. Only when the therapist gently said of the client's harshly voiced embarrassment at her mother's domineering style of public parenting, but I hear no kindness in your voice) did the client hear the anger in her own voice and its part in squashing any tenderness towards herself.

### The truth test

Through reading out-loud, with the client, or in rehearsal in supervision, I can hear if what I have written feels sincere and is in the reach of the client's feelings and experience. The therapist noticed that when emphasising the heartfelt moments in the client's reflections on their problems, he was colluding with dismissing the more pretentious or superficial stories as false, and yet they served a vital function in regulating the client's exposure to feelings that were too intense.

### The shimmering point

The voice is physically at the cross roads of vital signs of shifts between states, historical or compelling voices and the healthy or harmful orchestration of these. The client's voice rose when-ever they spoke of their childhood relationship with their brother.

The contributions in this paper all depend implicitly on the contribution of the voice to bringing alive a therapeutic moment. The tradition in CAT has been to read out the reformulation and goodbye letters. The reading out as a therapeutic mechanism has been overlooked in preference for a focus on the content and structure of the CAT writing. In summary, in giving voice to therapeutic writing, the voice is the connector between words and feelings, inner and outer realities, self and others and many other dimensions of relating. We hear our voice inside and outside at the same time. Most of us are shy, uncertain or critical of our voices. We read too quickly to skate over the mix of feelings being aroused. Or we speak theatrically in a way which might equally bypass shared moments of feeling. If the therapist does not feel for their voice, their words will never leave the page and reach the client. If the client doesn't experience the therapeutic importance of giving voice, their words may connect cognitively, but not emotionally. If the therapy is not 'voice awareness friendly' the client and therapist will not know their voice enough to understand when it hesitates between noticing a feeling or idea and naming it. The emotional potential of the therapy may be limited.

### References

Stern, D (2010) Forms of Vitality

### Concluding discussion

The richness and diversity of ideas that we have experienced in writing our contributions together as a group tells us that there is so much more to discover. We hope that our colleagues will explore and experiment creatively with these ideas, and find others of their own, to further enrich the dialogue.