

Lies: Working Person-Centeredly with Clients Who Lie

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Many people relish the chance to try to be free of visiting their dangerous and shameful places. After years of suffering the agonies of their lives, they have had enough. In the context of a counselling relationship, they can have the chance to step outside of the critical and negative judgements with which they are familiar. They can begin to value and appreciate themselves. On occasion, being too keen to move on from their past, they can get into difficulties creating a new life within the context of their current world. I have sometimes seen that clients have wanted to block out a part of their world they have not wanted and hoped that they would then be OK. I was intrigued to find that Marcel Proust (1996) had written: "But the absence of one part from a whole is not only that, it is not simply a partial lack, it is a derangement of all the other parts, a new state which it was impossible to foresee in the old" (p. 368). I often see that it is that derangement, or a new state, that can be troublesome.

Lies

One of my clients, D, a young man in his twenties, told me his mother suffered from schizophrenia and was regularly in and out of hospital. D feared being as disturbed as she was. He felt terribly guilty about this, because he couldn't cope with it and kept away from her. His parents had separated when he was quite young, and he felt he had been left with his mother in order to help look after her. He also told me that his male baby-sitter, selected and trusted by his mother, sexually abused him. We met many times over a period of a year as he tried to find himself amongst all that had happened to him.

When he told me the news that his mother had died, he was especially confused, disturbed, and unsure of himself. It seemed unclear whether she had killed herself or taken an accidental overdose. She had taken a number of tablets, but there was no suicide note. Perhaps she had been confused or drunk, rather than intending to die.

We worked through his bereavement for some time. He was drained by sleeplessness, as when he did sleep he had the most awful dreams of seeing his mother in her coffin getting up, moving around, and speaking to him. It really seemed hard for him to cope

Author Note: A shortened version of this article appeared in *Skills in Person-centred Counselling and Psychotherapy*, by Janet Tolan (Ed.), Sage Publications, London 2003. It is reprinted by permission of Sage Publications Ltd, Copyright (c Alan Brice, 2003). When I wrote this I knew that I wanted to offer the person it was about the chance to be able to read it, respond to it, comment on it, keep it the same or change it, and agree or disagree with it. It was a crucial part of the paper that I asked him for his response. His comments are at the end. I also asked one of my supervisees (at that time Geoff Osmond was completing his counselling training; he is now a counsellor at the University of Northumbria at Newcastle) to read it, and his comments are also included. For me, the principles involved in having their contributions appear with this piece are too powerful to ignore. I believe they add much to the words I wrote.

with the complexity of his relationship with her, with the tragic ending to her sad life, and the amount of material he had not resolved.

At this point, I felt confident of our working relationship. My mother had mental health difficulties, and my parents had separated. Supervision was helpful to me in making sure my material was separate from his. Yet, I felt connected to him. I had real warmth, Rogers' "non-possessive love" for him. I felt we both believed that the process of counselling would work and that his bereavement could be worked through. My belief in this work was so strong that I thought might use it for a case study for my professional accreditation, which I was completing at that time.

Indeed, over a period of time, D did seem to resolve some of his grief and move on. He was noticeably less affected by his mother's death and more concerned about current events in his life, such as trying to re-establish contact with his father.

After a while, he became troubled by suicidal thoughts and began cutting himself and drinking excessively. He talked more and more about his own suicide. I was very worried about this and told him that it seemed he was becoming more fixated on his feelings of worthlessness and pointlessness and that the idea of dying seemed increasingly attractive to him. He acknowledged this, and we spent several sessions facing the bleakness of this awareness.

He arrived at my office on a Sunday while I was sorting some paperwork. I saw him because I was concerned for him and his "out of hours" visit was sufficiently unusual for me to suspect an emergency.

He told me he had just taken a large dose of a variety of medicines. We sat together reviewing how he was and what had brought him to his current state. I really did not want him to die, and I told him this. He didn't want me to call the ambulance, and I feared that if I did, he would leave the office, disappear into the city, and be found dead in an alley or park. I decided I would call an ambulance when he started to lose consciousness sufficiently that I could prevent him from leaving. I hoped this would not be too late. I was hugely relieved when he decided to go with me to the casualty department of the local hospital, a few hundred yards away.

He telephoned his flatmates to let them know where he was. He had left a suicide note for them and now did not want to frighten them. They arrived at the hospital while the medical staff examined him, and they told me his mother had telephoned, wondering where he was. They knew he was lying, continuously. They liked him, but couldn't put up with all his lies.

I was almost thrown into a state of shock, really not sure what to believe. The world seemed to swim around my head. Perhaps his mates were lying? He couldn't be lying. Could he? I was doing my absolute best to keep a calm professional demeanour as I listened to them. Congruence was not in my mind. How could I stop from slumping down and crying about how awful it all was? Had my pathetic, foolish, complacent counselling almost led to this young man killing himself? How could I ever counsel again?

When I went into his room, D realised they had told me about his lies. I realised from his reaction that they were right and he had been lying. I remember smiling at him, with a rueful laugh. When they had gone, he told me he had lied to me about many, many things, but he felt worst lying about his mother's "death." He feared that I would not be able to trust him at all and that I would no longer believe he had been abused.

I was quite shaken and confused—how had I been so foolish to not realize the truth? How had he sustained the charade for so long? What did I believe about him? I felt angry at being deceived. I felt stupid, a fraud, and I really questioned about my worth as a counsellor.

I also realized that this did not stop my love and care for him. Even at that moment, I was thinking about how helpful it must have been to him to live as if his mother was dead. What he hadn't expected was the derangement that Proust wrote of, the new state, where rather than life being easier, it actually was worse.

He recovered from the overdose and came and saw me a couple of days later. He explained how he had lived in a fantasy world, which was part real and part false. He couldn't sustain it when he saw how much I believed him, trusted him, cared for him, and had tried so hard to understand his experience. That had challenged his sense of himself. He could not face himself as someone lying that much. It seemed that his only option was to die, and yet he came to see me because, at the same time as needing to die, he did not want to die. When I started to write this, I cried. The world had been so close to losing a very lovely young man who had suffered terribly.

By mere chance, his friends had broken the web of deceit. I wondered whether this was by chance or his design. I realized that he wanted to live, and to live well, and that he had a small flame of hope flickering within him. In the end, I concluded that he hadn't consciously tried to stage-manage his friends to tell me the truth. Immediately after the overdose and for sometime, I was quite unsure whether what he or anyone told me was true. My vanity was certainly damaged, and I was very glad I didn't write his case study for my professional accreditation!

I felt terribly unsettled by what had happened, and yet, perhaps, oddly reassured of the importance of trusting the client's process. If I had questioned his mother's death, what sort of relationship would we have had? Would we have had a factually true series of social worker interviews or would we have had a relationship based on respect? I see it as something close to the difference between taking a patient's history, which would include getting the facts, and trying to generate a process of therapeutic movement.

I explored not needing any "truth." Indeed, having studied philosophy at University, I started to reconsider issues such as truth, certainty, and knowledge. I became fearful of naivety and foolishness. I read about the psychology of lying, thinking that I needed to inform myself so that I could tell when someone was deceiving me.

I learned from the experience to trust in the quality of our relationship. No matter that he had lied to me, he came to me when he could have died. He trusted me. He believed I would be there for him. It might seem unlikely, but from then on we had an amazingly close, deep, powerful connection. We both see that time as a complete turning point in our lives.

I recall laughing with him as he told me about a new relationship he had started and joking with him that he had made it all up. I realized that all the books and philosophy were nothing compared to what we had between us. It confirmed my belief in working person-centeredly and gave me what I can only call a faith in my way of being with my clients. That I could stay with him after finding that out and that I stayed with the "real" him with all the damage and disturbance we had been through was deeply healing for him and certainly surprising to me. For D, well, he has now been in a stable and very loving

relationship with his partner for nearly three years and has a settled job. He keeps in contact with a postcard, e-mail or a note every few months.

My Learning

My reading of literature on sub-personalities, including Mearns' (1999) work on configurations of self and Warner's (1997) work on fragile and dissociated process, helped me to get a sense of what had been going on with D.

It isn't so odd to present ourselves as more than we are or to emphasise certain aspects of ourselves. I certainly couldn't be judgmental about that. I see that he was further out on the “completely solidly real \leftrightarrow invented and exaggerated” continuum than many people.

He talked about a part of himself wanting to be free of all the shame and guilt about his mother. He wanted to be a different person in many ways, and he lived those ways. He put aside his abused past. He “killed” his mother off. He read literature and studied art. He talked about travelling around Europe.

I recognized that some of this was similar to how I can present myself and saw that in some ways he was modelling from someone important to him whom he respected, me. Yet it was too hard to tell me that, and I didn't know about it.

Other parts of him knew he was lying, and he couldn't quiet them even by cutting or drinking. The dreams of his mother in the coffin were real and make a different sense now. The internal turmoil nearly killed him.

I have wanted to come to understand what encouraged him to lie or prevented him from telling me the truth. Who am I in the relationship that contributed to the possibility for him to go beyond who he was into something quite fantastic? Did he feel some sense of falseness in me that encouraged him? My room has art prints by Hockney, Rothko, Moore, an Italian espresso machine, and photos of countryside from Scotland, Ireland, and recent holidays to Italy. Do I present myself as the fullness of me or suitable aspects of me for the role I live out in the context in which I work? My family background is neither artistic nor of the sub-culture that I choose to live in. Did he see me stepping beyond my own troubled past to a brighter, newer world that I have created?

How true it is that I learn from my clients! It made me even more determined not to give a toss if someone turned out to be lying. Actually that isn't true. I am happy, so life-affirmingly happy, to accept them and their lying, without rancour, without regret for me and with as much positive regard for them as I can find.

Comments from D

I asked D to read this to make sure that it would be all right for him if I published it and to give him an opportunity to comment on it. He sent me this:

“I've now had a chance to read the stuff you gave me. It's quite an odd experience seeing all that time and emotion written down in a few pages.

It's a pretty accurate portrayal of how the situation was though and has caused me some pain confronting it again like that. I feel sad that the way I made you question your abilities to counsel effectively—it certainly did not seem that way to me at the time. I have said to a couple of close friends and my partner, of course, that I believe I would not be

here now if it wasn't for the Love and Patience you showed me during that period of my life.

I don't know much about Rogers' 'Non-possessive Love,' but I think that is how I've come to think of us—I have very strong feelings for you and I realise that much of this is connected to you helping me through that period. However, I think that since our relationship developed a more 'honest' approach (from me) that this “love” has developed into a more natural state. A sort of feeling of equals rather than how I saw you for quite a long time, a sort of Father figure (but more) to turn to when I felt I needed protecting from all the things I couldn't deal with in my life.

I have no qualms about letting you use this material for whatever purpose you see fit, I trust and respect your judgement about what would be appropriate.”

Comments from a Counsellor in Training

Hi Alan,

I've read your “Lies” article and trust you weren't lying when you said you'd be interested in my reaction to it! (P.S. This is a long and rambling reply, written as much for me to help solidify my learning from the article as to give you my reaction. All the questions are rhetorical.)

I found your article moving, stimulating, and educational. Overall, I was struck by the style and tenor. I like the very person-centered flavour, the emphasis being on you as counsellor and the therapeutic relationship. I can imagine how the same topic would be covered in other approaches—the emphasis on the client, diagnosis, and interpretation. Sorry if this seems obvious, but as a trainee the way articles are written is important to my learning and acceptance.

I made notes on my copy, and I'll just put them down here without any order or structure.

I have not read Proust, but the quotation conjured up a strong image/metaphor for me: I saw a pile of crystals forming an irregular shape, touching each other in random and different, but stable ways. A crystal was pulled out, and all the others moved and settled into a different shape: All the relationships between crystals were changed.

You wrote: “Making sure my material was separate from his.” Could you have worked at the same relational depth without shared experience? Does conscious identification help or hinder empathic understanding? I like the article by Ridge, S, Martin, D & Campbell, W. (1999) on conscious identification, although their conclusion seems to be, “it depends” My own thinking is that conscious identification can help empathy if the 'as if' is maintained and the originating source of feelings is clearly understood by the counsellor. But that then makes me feel inadequate. I have such a sheltered life that I will have little shared experience with clients. What can I use instead; imagination, intuition?

You wrote: “He didn't want me to call the ambulance. . . .He decided to go with me to the casualty department.” Did you suggest calling an ambulance or did he specifically ask you not to? I wondered whether it might have benefited the article to describe the process or dynamic that occurred to move from “no ambulance” to “go to casualty.” Did your congruence with your not wanting him to die work within the relationship to “persuade” him to go? Did you overtly influence or try to direct him? (From what I know of you, I think this very unlikely.)

Your “state of shock” seemed to me to reflect the depth of your acceptance and prizing, and the warmth you had in the relationship. I thought your shock was proportionate to your input. Is fully trusting in one's clients naive? It seems to me impossible to accept while being suspicious.

I was moved to tears by your description of your self-doubt, partly out of concern for you and the pain you felt, and partly for me as I often feel my counselling to be foolish, complacent, and inadequate. (I was consciously identifying!)

You wrote: “He couldn't sustain it when he saw how much I believed him, trusted him, cared for him. . .” This appears to be a paradox. Your trust seemed to be a causal factor in his incongruence, but had you not trusted and believed him, he might have broken off the relationship. Indeed, wouldn't the very existence of disbelief mean unconditional positive regard was not present in the relationship? You accepted his reality, even though that reality was a deliberately inaccurate symbolisation of his experience.

If you had questioned his mother's death, would the relationship have survived?

It seems to me that feeling foolish is a risk. If one truly accepts a client's phenomenological world, it leaves one open to being lied to and manipulated. I want that faith in my way of being with clients, but without such a test!

You wrote: “Who am I in the relationship that contributed to. . .” It seems important to be aware of the two-way dynamic in the relationship. I focus on what the client gives to the relationship, and I assume that what I give is accurately received. I see now that this is naïve. All communications have an interpretative element. If you had realised what process may have been occurring in your client with regard to his perception of you, what would you have done differently? Would trying to analyse what was going on for him have hindered your person-centered approach?

I think the acceptance of the clients lying is symptomatic of the essence of the person-centered approach. It seems inherent in offering the therapeutic climate.

Thank you,
Geoff

I sent a reply letter, which is included below as the final piece of the article.

Dear Geoff,

Thank you so much for taking the time to read and reflect carefully on “Lies.” It sort of makes writing it worthwhile when someone approaches it as you did. I wanted to let you know that I had received and read your message—and was both appreciative of and moved by it.

Thanks again.
Cheers,
Alan

References

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