



The
ESSENCE
of
HEALING



*A Quest for
a MetaModel
of the
Psychotherapy
of Trauma*

ARTHUR G. MONES, PH.D., ABPP

The Essence of Healing:

A Quest for a MetaModel
of the Psychotherapy of Trauma

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Published by Stoelting
620 Wheat Lane, Wood Dale, IL 60191

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Library of Congress Cataloging-in-Publication Data:

Name: Mones, Arthur.

Title: The Essence of Healing: A Quest for a MetaModel of the Psychotherapy of Trauma / Arthur Mones.

Description: Trade paperback edition. | Wood Dale : Stoelting, 2021.

Identifiers: Library of Congress Control Number: 2021947850 | ISBN: 9781734080841 (softcover)

Subjects: LCSH: Group psychotherapy--Family psychotherapy. | Psychotherapy--Child psychotherapy. | Psychotherapy--History.

Printed in the United States of America

Contents

PART ONE: In Quest of the Essence of Psychotherapy.	1
1. Introduction	2
2. Paradigm Shift	10
3. The (R)evolution of Family Therapy/The Functional Hypothesis	12
4. Family Therapy Roots of The MetaModel	17
5. Treating the Poor and Underprivileged	23
6. Out of The Box.	27
7. Finding Internal Family Systems Therapy	30
8. Systems Thinking	40
9. ConsultationGroups	44
PART TWO: The Experience of Psychotherapy	45
10. The TherapeuticRelationship	46
11. The Body in Psychotherapy	49
12. Working With Managers	55
13. Working with Firefighters.	57
14. Polarization Internally and Interpersonally	60
15. Unburdening The Residue of Trauma	64
16. Working with Couples	67
17. Narrative Therapy	73
18. Child-Focused Family Therapy	75
19. KidsWorld Treatment Planner	81
20. What is a Personality Disorder?	84
21. Resistance	87
22. Working with the Meta-Exile/Shame	89
23. Direct Access	94
24. The Neuroscience of Emotional Pain and Emotional Healing	97
25. Revolutionary or Same Old Stuff?: The Therapeutic Delivery System	102
26. Anger	107
27. Sibling Experience	109

PART THREE: Other Contexts and Considerations	113
28. The Life Cycle	114
29. The Psychology of Biology.	116
30. Medication	118
31. Autism Spectrum	120
32. Leaving Home	123
33. Influence of Culture: Power and Powerlessness	126
34. Treating Patients Who Have Done Bad Things	128
35. Forgiveness	130
36. Transference and Countertransference	132
37. Self in the World	134
38. The Internal System of an Outsider	136
39. Our Knowledge of Mortality	139
40. Meditation and Healing	140
41. Therapist Self-Disclosure	142
42. Homeostatic Forces Constrain Academia, Professional Psychology and our Cultural Institutions.	144
43. What is Intimacy?	147
44. Epigenetics, Artificial Intelligence, Algorithms and Legacy Burdens.	149
45. Responsibility	151
46. Kiss-The-Boo-Boo	154
47. Faith Healing.	156
48. The Model Makers.	160
49. The Problem Box Becomes the Box Problem	162
50. Summary.	164
References and Suggested Readings	166
Index by Chapter	178
About the Author	184

Acknowledgments

In my first book, *Transforming Troubled Children, Teens and their Families: An Internal Family Systems Model for Healing*, I included a long list of Acknowledgements of colleagues, family, and friends from different stages of my life. I will not repeat that here, other than to express my heartfelt “Thank You,” again.

My main source of gratitude for this book on the essence of the healing process of psychotherapy, a MetaModel, is for the students, supervisees, and clinicians seeking my consultation in groups and one-on-one over four decades. The common denominator in this experience is the quest for professional growth and excellence in practice and the inner commitment to lift clients out of their pain of emotional trauma.

Thank You for your flexibility and your courage to question and push the limits on clinical models and practice in the service to your profession. And, Thank You for challenging me to “get it right.”

I want to include my deep appreciation for the clients along the way who had the courage to face change internally and interpersonally. I have never stopped being deeply moved by your ability to rise above the grip of your trauma history and to bring your Goodness from Self to Others.

I do wish to single out Dick Schwartz, Ph.D., who articulated the safe and effective Internal Family Systems Model. You have showed the way to a nonpathologizing approach to healing that relies on the inner strength of adults, children, couples, and families. You have reached thousands of practitioners. Thank You for modeling courage and compassion. The Model has continued to evolve and now is being applied to polarizations in our larger society. As the reader will see, I view IFS as a MetaModel, as it contains all the elements for emotional healing based on human nature. After studying most models of healing, IFS is where I found a safe home base. I have tried to expand its utility by placing it in the 20th and 21st century contexts of effective psychotherapy.

This book is also dedicated to the memory of the model makers and healers upon whose teachings my words are built. There are so many. Among the most prominent are Charles Darwin, Sigmund Freud, Gregory Bateson, Murray Bowen, Jay Haley, Salvador Minuchin, Carl Rogers and Virginia Satir. Your memory and contributions are a blessing to us all.

I express my appreciation to the Stoelting Company, my publisher. Your open mindedness to my ideas and creative formulations have shaped this book into all it can be. Special thanks to Editor and Product Manager Brian Syzdek, Psy.D., for guiding the production of this book and believing in the importance of its theme.

I give thanks to early consultants on, and readers of, this manuscript, Marian Sandmaier and Jerry Kleiman, Ph.D., for your encouragement and suggestions. Several discussions with seasoned professionals from the publishing field were quite helpful in preparing for the launch of this book— Dan Paisner, Sybil Pincus and Martha Fay.

Special appreciation goes to Rabbi Lee Friedlander for modeling his gift for selecting prose and poetry quotes that allow the reader to grapple with ideas, old and new. Thank You for being a Master Teacher.

Key experiences in the formation of one's identity serve to bring out one's Self qualities. Finding Psychology as an undergrad, and pursuing further education and a career, did that for me. For this chance event, I hold enormous appreciation.

And then there is my family. My wife, Leslie, who never stops being my cheerleader, offering critiques on my ideas, and most of all, believing in me. My daughter, Lara, who, behind the scenes, offers her pure Goodness and Support that help to spur me on. Masa, my son-in-law, whose quest for excellence enveloped in unconditional respect for others, serves as a wonderful role model. And my brother Richard, who has known me and my vulnerabilities, the longest and who generously celebrates my strengths. Always, I give thanks to the memory of my parents, Kelly and David Mones, who knew instinctively to not impose the residue of their own life struggles upon me, allowing enough degrees of freedom for me to grow and be a part of the repair of the world.

My hope is that professionals, and a curious general readership, will find this book meaningful.

Dedicated to All Who Generously brought Love and Self Energy to me. This book is my hope for sending the same out to those in need and to their healers.

PART ONE

In Quest of the Essence of
Psychotherapy

Introduction

“If there’s a book that you want to read, but it hasn’t been written yet, then you must write it.”—Toni Morrison

Psychotherapy works. There is a strong base of research that supports the finding that durable change results from this unique relational practice in cognitive, emotional and somatic spheres that encompass human experience.

This is an exciting time for therapists and patients. The process of emotional healing has reached a comprehensive and effective point in its evolution. The essence of what can help a person recover from psychological trauma, from minor to severe, has been explained and can be applied by therapists and received by patients who are paying attention to this revolution in the field of psychotherapy.

Many continue to hold on to compartmentalized models. While these models are helpful, they are only partially so. The long parade of psychoanalytic approaches, later joined by behavioral and cognitive models, and then upended by family systems thinking, has passed us by and left those unafraid of change, unafraid of the politics of science, and undeterred by feelings of disloyalty to past generations of mentors to explore and work with very powerful and deep processes in human suffering to actually unburden the residue of trauma. The reluctance to break from past mental health models is understandable, as holding on to set models provides certainty and comforts the therapist. However, working within a model that promotes flexibility and is adjustable in accordance with each client can also generate certainty from a perspective that a truth about life is that uncertainty and vulnerability provide a constant backbeat to the experience of life.

Of important note, there are many writers who have promoted an “integrated model” of psychotherapy. This is an approach whereby the practitioner is encouraged to string together several models, e.g., psychodynamic—cognitive behavioral—family systems, in the service of maximizing the success of treatment.

**INTEGRATED MODEL –
practicing with the efficacious
aspects of multiple models of
psychotherapy.**

While this is commendable and a reflection of a wide range of training of the particular practitioner, it is different than the exposition in this book that puts forward the essence of what works

in all models, transcending the differing vocabularies of each model. Our MetaModel describes how healing works, conceptually and experientially.

The preponderance of research on therapeutic efficacy is conducted by researchers aligned with a specific modality of therapy. This facilitates treatment implementation in research, eliminates noise in data, and promotes a particular therapeutic brand. However, there does exist a small group of investigators who are more aligned with the approach in this book, that is, putting forth models of a unified nature of psychological suffering and psychotherapeutic healing (Mahoney, 2003; Duncan, Miller, Wampold, & Hubble, [Eds.], 2010; Castonguay & Hill, 2007; Castonguay & Hill, 2012; Henriques, 2011; Marquis, 2018). For a very stimulating and insightful unified view of Western philosophical thought, the reader is directed to Sprintzen (2009).

This is a story of the (R)evolution of Psychotherapy, based on my story of a 45-year journey to “get it right.” Throughout my career I have been obsessed with finding the essence of healing. What exactly is it about psychotherapy that moves clients from a problem-saturated position to an experiential state that lifts the painful residue of trauma?

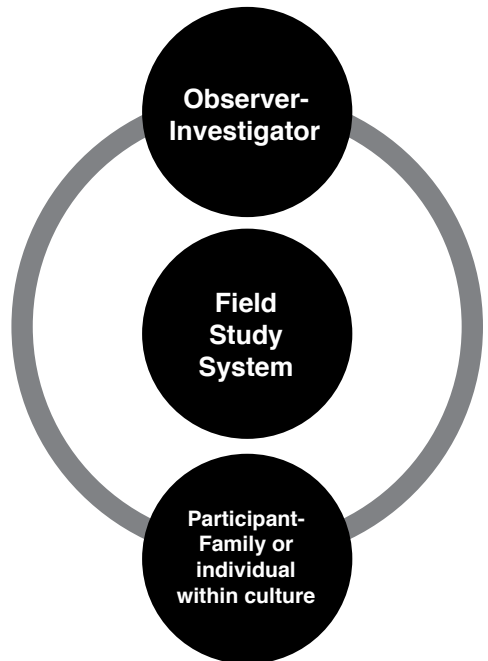
This process will be at the heart of the MetaModel put forward in this book. This is a nonpathologizing way of understanding psychological symptoms. From this viewpoint, psychological symptoms are attempts at adaptation and survival when placed in multiple contexts of family of origin, multigenerational family history, race, gender, societal and economic influences. It is the direct legacy of the family therapy revolution that occurred in mid-20th century. This is in contrast to the Medical Model that described emotional pain as equivalent to physiological disorders, a disease to be treated, symptoms to be eradicated. This reconceptualization serves as the historical roots for Internal Family Systems Therapy (IFS), around which our MetaModel is centered. The creator and developer of this MetaModel, Richard C. Schwartz, Ph.D., brought systems thinking from family relations to our intrapsychic experience. As Dick listened closely to his clients, many of whom were deeply traumatized, he noticed an inner choreography among Parts (protective aspects of the individual that defend against the experience of trauma) that try to protect us from the experience of emotional pain. He also noticed that clients have the capacity for healing internally, as he was able to make contact and utilize the strengths of each person emanating from their pure Self. These inner dynamics can also be extended to our relationships with parents, siblings, spouses, and friends.

IFS has been deemed to be an Evidence Based Treatment. This means that practitioners in empirical studies, using the language and techniques of IFS, when systematically applied to a sizable population, will achieve successful outcomes, in contrast to nontreatment and neutral treatment applications. Clients experience change, cognitive, emotional, and physiological, that is durable, when applied within a safe and compassionate treatment relationship.

In addition to the traditional scientific measures of empirical studies, there exists another scientific approach, namely, Field Studies. Field Studies originated in the study of anthropology with the exploration of indigenous cultures. In this approach, the investigator will immerse herself in the life of these people, watch carefully, and document the practices and rituals of living amongst them. It was determined that within Field Study methodology, the unit of study, the Participant (individual and family within the culture,) and Observer (the investigator or field scientist) interact during observation to create a systems unit (Mahoney, 2003).

While not often noted in the field of psychotherapy, therapists on the front line are constantly engaged in field studies. I would argue that this approach needs to be recognized and honored as it is the basis of how most healers operate in their day-to-day, client-centered work.

It combines nuance and artistry with the statistical algorithms of empirical science. It also represents the mentorship relationship where most of the learning occurs regarding psychotherapy, i.e., the supervisory relationship, in which therapists will courageously present their challenging cases to an experienced Self-led clinician and together they discuss strategies of treatment. The MetaModel, as presented in this book, is grounded in the traditional measures of empiricism and strongly informed by my field studies that span a half century of work with over a thousand adults, children, teens, and families.



As a student in graduate school, some faculty challenged the parameters of our thinking regarding the prevailing understanding and treatment of emotional disorders. Others were quite content to present the dominant models at that time, psychoanalysis and behavior therapy. As was the case for

METAMODEL – model for conceptualizing mental health and therapy that views symptoms as adaptive reactions and focuses on essential aspects of healing that are consistent across modalities

our professors, some students were comforted by immersing themselves in the given models, others pushed the limits. I discovered, and enjoyed, my proclivity for seeing the big picture and questioning authority. The latter has reference points in an open-minded view of life by my parents as well as in the social turbulence of coming of age in the 1960's. In addition, I was exposed to a lot of

family illness and loss during my childhood years, making it difficult to come to terms in any simplified way with why bad things happen to good people. Unquestioning faith did not explain. Nor did it comfort. There were more questions than answers.

My doctoral dissertation was on humor—how jokes make us laugh. Several professors thought that this topic was just fluff, not meaningful. What I found was that humans are able to keep two contradictory messages in their brain simultaneously, and when the second message is incongruent with the first, it actually reframes and upends (the deeper meaning of the chicken crossing the road being replaced by the very surface reason of getting to the other side) the first message and we have a rollicking response on an emotional level (laughing).

The capacity to recognize incongruence of newly received information with prior expectations seems to allow access and comforting to our basic vulnerability. The original idea or belief itself is upended. Jokes lift a curtain created by emotional learning to reveal and normalize our raw nature. We are all in the same boat, dealing with uncertainties about life. Jokes comfort us by bringing acceptance to the human condition. Humor captures the vulnerability that all humans struggle with.

I began to wonder whether this process might be representative of change experienced in psychotherapy. The client tells his or her story and the therapist, when holding a compassionate vantage point, re-frames this

narrative. The re-framing produces a shift, a changed perspective, new learning. Interestingly, when the American Psychological Association visited our graduate school Program for its Accreditation, they reviewed the dissertation topics of the students and mine was given a commendation! I found that very funny.

This set the stage for my career—thinking out of the box, seeing the big picture, and being viewed as an outsider, even though my ideas were appreciated. Sometimes. My thinking was shaped during my training and early career. I had the unique opportunity to participate in a summer program in scorching Porterville, California, outside of Bakersfield. Eight students, from all over the country, prior to launching into their grad school programs, were situated in a state hospital for children with severe intellectual and physical disabilities. We were exposed to young people who had major challenges to stay alive and make sense out of the world. Many were confined to hospital beds, many in wheelchairs, some were violent, some were autistic, some were severely learning disabled, some were savants. Many (most) had been abandoned with little or no contact with their families. Some carried Birthday or Christmas cards. Sadly, when they showed them to me, I saw that they were dated 5, or even 10, years prior. We were taught many things that summer. What I carry with me is their hunger for contact. That, we were able to provide. Our caring words and hugs meant the world to them.

The following summer I worked as a counselor in a camp for youngsters with severe learning disabilities. My campers were a group of highly motivated teens assigned to do work projects and lots of hiking and sports activities. They had a great sense of humor, and we laughed our way through those two months. Here, I learned about strength of character and resilience, despite formidable challenges. I learned about courageous parents who, despite the pain and challenge of raising kids with special needs, reached a point of compassion and acceptance for these youngsters. Camp provided the opportunity to bring forth and Celebrate Self! I loved being a part of that process.

I decided to specialize in work with children. By the time I completed grad school I had exposure to every age group with almost every condition. In addition, in my role as Graduate Teaching Assistant, I had the opportunity to do some teaching of Intro Psych courses and even a summer elective on The Psychology of Social Movements. Being (very) shy, I was quite panicked at first but made it through, and, despite my regimented style of presentation,

received good feedback. A bit later on, one student was very complimentary but added, “Dr. Mones, you presented the material very well, but I’d like to know more about your own ideas.” I knew that he was right. In response, I filed away my index cards and began to incorporate what I was learning in my own Field Studies. I never turned back. I discovered that teaching is vital to me.

I received my Ph.D. I grew a beard. I was a psychologist. My first job was in a multi-site clinic in the Mid-Hudson Valley, New York, the Astor Child Guidance Clinics. The staff were largely new graduates like me and we felt safe enough to learn from one another and admit that we did not know (a lot of) things. The population here was a mix of urban, rural, and off-the-radar clients. There was exposure to abject poverty, families living in mountain homes with no plumbing and tin roofs, with little trust for the outside world. Kids not attending school. I tried hard to engage and provide concrete case services. I made home visits. Some were responsive and ventured to drive their pickups to the clinic. They taught me a lot about basic survival. I’ll never forget them.

At the clinic, in the mid-1970’s, the new wave of child treatment was family therapy. We were all experimenting. It was a great challenge and very energizing. Family Therapy questioned the extant models and aligned with the fervor and turbulence of that decade.

We will discuss, in this book, the burgeoning models and their gurus in coming chapters. Our staff at the clinic saw what worked and what didn’t. I was asked to provide clinical supervision to our psychology interns. For a while, I had a wide berth of time with each student and spent a good deal of it discussing the nature of psychotherapy. So, the combination of doing therapy, teaching, and providing supervision, became the full course meal for my identity as a psychologist.

Four years later, I returned to Long Island and became Director of Psychological Services at Peninsula Counseling Center, the largest community mental health center there. It was my good fortune to have an Executive Director who, while having Parts intolerant of disagreement (a not infrequent trait of leaders protective of their vulnerability), had hired and supported an outstanding, creative staff of professionals, extremely dedicated to their work as healers. We continued to learn and work together. That was where I stayed for the next eleven years. During those years I also began my private practice and was extremely busy. Also, I married my wife,

Dr. Leslie Taynor, periodontist, which was the best decision I ever made. We had a daughter and a full life ensued. My family has taught me so very much about life.

A bit later on, I became a part-time faculty member in the Ph.D. program in Clinical Psychology at St. John's University in Queens, New York. I taught a didactic course in family therapy. This expanded to include case consultation groups. Every Wednesday morning, over bagels, we discussed challenging cases. These students were amazing—extremely bright, eager to learn. We evolved into a specialization within the program, in child, family, and couples' therapy. My teaching style was to celebrate the Self energy of the students who courageously worked with their first cases. I encouraged them to go deeper in their treatment explorations. I challenged them with Thought Questions (thinking out of the box about diagnoses and psychotherapy, as inspired by John Exner, Jr.) which evolved into the centerpiece concept of my teaching and treatment style, The Functional Hypothesis (see more later). I remained there for 18 years, until the undercurrents of department politics led to our Program being closed down, as the academic faculty felt threatened by the students' greater loyalty to the on-campus clinic program (later divulged to me by a faculty administrator). This was extremely sad for me. I mourned this professional loss for several years.

My other teaching has occurred at The Long Island Institute of Psychoanalysis and Psychotherapy, in their Family Therapy Program, under the directorship of a visionary leader Jerry Kleiman, Ph.D. In recent years, I've been on the postgraduate faculty of The Derner Institute for Advanced Psychological Studies at Adelphi University, in the Couples Program, developed by Michael Zentman, Ph.D. and and Child-Family Program. I also offer Consultation Groups based in my private practice. Much of this book is an outgrowth of these teaching experiences.

This is the story of my search for, and development of, a MetaModel of The Essence of Healing. This book is offered to cultivate greater certainty in an uncertain world. It is an approach to the vulnerability that we all share, that we all try to avoid and cover up. This model welcomes and befriends the vulnerability and invites it into our learnings and clinical applications. Whether you are a client, potential client, therapist, or a curious reader, it is hoped that you will learn valuable ideas to point you toward improved emotional health.

So go forth, read, and experiment. Absorb the ideas and applications that

flow from these ideas. My hope is that mental health professionals, as well as a general readership, will learn and grow to their fullest and bring their Self energy inside and out.

Each chapter is an invitation. Take in the ideas, reflect, answer the questions and form your own thinking. You may agree or disagree. The ideas may fit or may be misaligned with your current operative models. These ideas do not require a rejection of what you were taught. They are meant to enhance how you see life and the human condition. Above all else, BE CURIOUS. My hope is that this book will challenge you to bring your excellence to your work and to your emotional journey. My hope is that this book will bring forth your Self.