



Therapeutic Listening

Aprile Flickinger

University of Alberta

How does a therapist listen to people in need? Is there a unique way of therapeutic listening different from the way people usually listen to each other? At first glance this may seem an odd question. Listening is a sensory act and so how could a therapist hear things that are different from what anyone else might hear? For example, someone tells an incident about an experience from childhood. As a boy he lost his parents and several other family members. We both hear the same story. We both hear the same words, the same details, the same account.

But, of course, hearing and listening are never purely sensory acts. We may hear the same sounds, but we listen for the meaning that the sounds evoke. And so what is heard depends on who is listening. And the way we listen depends on the way we stand in the world. How we listen depends on the relationship we have with the one to whom we are listening. As a therapist, I have a pedagogical relation to certain people that differs from the social relations I may have with friends or acquaintances.

A dear friend of mine, named Bella, has come to visit with her new husband. When they met, she was a widow and he a widower. They are visiting Canada on their honeymoon. I had never met Bella's new husband, affectionately known as Tibie. I soon get to know Tibie as a lovely person, gentle and full of fun. He speaks some English and I speak some Hebrew. We manage to communicate fairly well.

After a few days, I chat with Tibie about his past. I share some things from my own childhood and then I ask him about his life before he emigrated to Israel. I already know that he is Hungarian, Jewish, and over 60. So as I start an innocent talk, I am somewhat aware that he is probably a holocaust survivor. I ask Tibie if he remembers much of the war. He tells me in broken and simple English, "Yes, I was already 18 when the Nazis' came to Hungary. They arrested me and my family because we were Jewish. I was sent to a work camp and my parents and two young sisters were sent to Auschwitz. They died there." His voice is dispassionate as he recounts these events in the same tone that might be used to describe the weather or perhaps someone else's history.

I feel somewhat uncomfortable. I react as I believe many people would. I express my sympathy and talk about losing close family members myself. It is painful to lose one's parents through death in one's youth. But the horror is even more horrific in the context of the holocaust. Tibie nods, but he shows little emotion. For him the story is an old one and the distance makes this merely into an old wound. The scar is still there but the pain is a memory. We change topic and talk a bit more about the difference of living in various geographical locations. We chat about Europe, Hungary, and Israel. Then we turn our interest to Canada. This was indeed merely a chat. I heard what anyone might have heard.

Later, Tibie's childhood story is stirred up again. I ask him how he managed to get out of Hungary and emigrate to Israel. Again, Tibie's account is matter of fact. "I stayed in the work camp not a long time. I escaped and hid. Each two weeks, I moved to a new place to hide till the war was over." Again I sense the horror of his story. It assaults my sense of justice and security, calls into question my optimistic theories about human nature, and challenges my view of the world and of even myself. I am inclined to pass over it all with questions that evoke less vulnerable memories. However, Tibie's calm quiet tone of voice has effected a strange dissonance with the content of his story. His dispassionate presentation serves to heighten my discomfort and confusion. The story begins to take on a surrealistic quality. My mind is struggling to comprehend how words like *mother* and *Auschwitz* can be spoken in the same sentence. I know I must respond to his disclosure in some way, but I have no idea what is appropriate. How does one react to such human devastation, to the inhumanity of the holocaust? An appropriate response to Auschwitz pain requires that I connect with my friend in some way, but *how* I do not know. Instead, I am rapidly moving to create distance, at least emotionally. After all, what do I say to a man who tells me his family was brutally murdered? I find myself mumbling something about this being "such a terrible thing." But I feel totally inadequate and inept. Luckily, Tibie doesn't seem to notice how pathetic my response is in light of the content of his story.

I have been listening as a friend. And what did I hear? I listened to Tibie speak, but even more acutely I heard my own voice. I heard my discomfort, my awkward response to an experience that could have been mine. How would I have suffered? As I listened to Tibie, I listened more to my own self than to this other human being who spoke to me across this great abyss of nonunderstanding. I have heard other people do this to me. After a traumatic hospital operation, an acquaintance asked how I had been. I talked about some of my feelings and anxieties, but the response would almost always be the same. The listener would promptly tell me a hospital story of his or her own. I was not really heard or listened to.

What is it about hearing another's pain, fear, or anxiety that makes me so uncomfortable? How is it that I readily listen to other facts about a person's life and yet want to distance myself, to stop listening when the speaker attempts to communicate something of his or her woundedness? I often find that having access to a person's private suffering is like being ushered into a sacred place, a kind of inner sanctum where the most valuable human secrets are kept. The sacred has an ambivalent effect in that it both repels and attracts. I am repelled because the sacred exposes my inadequacy, finiteness, vulnerability, and fragility. I can't right a wrong that has been done to Tibie. I cannot fix what has been damaged. I don't have the answers and struggle to even understand the questions. There is the possibility that in my ignorance of the mystery of human suffering I will offend, cause more pain by behaving insensitively or transgress in some other manner. At the same time, the mystery attracts me like a giant magnet drawing a small piece of metal filing. There is something deep and great to be known. As I reflect on Tibie's experiences, I am amazed that humans can sustain such deep psychological and emotional damage. The fact that we can be so horribly violated and carry on says something remarkably profound about the meaning of being human. It is even more incredible that humans can survive such dehumanizing treatment and in some instances transform and transcend its devastation. To have a psychological interest in people's inner life gives us a knowledge about how humans deal with their experiences and memories that are sometimes dramatic.

As I sit behind the one-way mirror with my colleagues, I am listening to two different conversations. The two people talking on the other side of the mirror are a therapist and a client, Nancy. The people on my side of the mirror are fellow students and our instructor. We are observing a counseling session for the purpose of improving our therapeutic skills. Nancy is crying when she says, "I know he beats me up pretty bad sometimes. But it doesn't happen very often and I deserve it. I'm not a very good wife. I've never been very good at anything really. Besides, he says he'll kill himself if I ever leave him. I just can't leave!" Nancy begins to sob uncontrollably at this point. One of my colleagues responds to what Nancy has said by acknowledging that Nancy "is in a lot of pain." The group responds by discussing the relevance of the battered wife syndrome. We begin to explore the dynamics of this theory with regard to Nancy and her pattern of interaction with her husband Steve. We move on to talk about the effectiveness of various types of intervention strategies. We listen to Nancy and understand the psychological dynamics involved in her situation. We have been trained to view hurting people in this manner, but have we really heard Nancy?

There is yet another dimension to this listening to the other person's inner life. But this requires transcending subjective personal vul-

nerability as well as psychological objective interests. This kind of listening happened to me when Tibie had parted company and I had gone to bed. I am alone, in the dark, and thinking of Tibie. There is enough space and sufficient distance between myself and others that I can allow myself to reflect on the reality of my friend's story and to respond emotionally. As I listen again to the echo of his words, I am captivated by one thought: he was alone! I picture the horror of the Nazi death camps as a tidal wave of evil crashing down on the face of my friend and drowning him in its inhumanity. The fact that the holocaust was not like a natural disaster, but rather a willed horror on the innocent continues to haunt me. I sense his youthful despair and vulnerability. He had to live with cold, hunger, uncertainty, and fear; never knowing whether in the next hour it would be his turn to die; wondering if his struggle to survive is worth it after having lost everyone else that he cared about. All of this Tibie had faced and endured alone. No one was there to grieve with him for his loss. He was surrounded by other victims, but they were filled with and focused on their own pain, not his.

As I lie in bed contemplating these things, there is no longer a focus on myself, no longer a distance between me and his pain. There are no social expectations to keep me from responding to the great sense of sadness that I am feeling. As I listen to Tibie again, but now in his absence, I am confronted by an overwhelming feeling of responsiveness to him, this other person. As my sadness presses for expression, I turn my face into the pillow, lest the sounds of my weeping disturb a slumbering household. I weep for him. And as I am dwelling in these feelings of grief, I find a strange thing happening. I begin to feel another urge; a compelling desire to give expression to the caring behind my sadness. I want somehow to acknowledge the depth of Tibie's pain and express my sorrow over it to him. I want to put an end to his aloneness. The opportunity for such expression arrives about a week later.

Tibie and I, along with another friend from Jerusalem (he speaks Hebrew and English and is able to act as interpreter) are talking about theological issues. Tibie brings up the ancient question concerning the existence of evil. He asks me, "How is it that the good people were killed in the Nazi camps and after the war it was the criminals that went free and lived to be old?" It is evident by the way he asks the question and other nonverbal cues that he is convinced that I have no answer, at least not one that will satisfy him. I'm aware that the real issue is not a theological or philosophical one, but rather the pain behind the question he is asking. This becomes more apparent as he moves on to describe various aspects of Eichmann's trial. He concludes in a voice that is filled with bitterness, wonder, and passion, "No one who committed these crimes said that they were wrong to do these things. Not

one even said they were sorry!" Tibie again insists that I try and answer his original question: why did the good people die and the criminals live?

It is important to note the process at this point in the conversation because it complicates the activity of listening. The content of what is being expressed verbally is quite different from what is being communicated nonverbally. With words, Tibie is expressing facts, opinions, and "asking questions." His nonverbal behaviors are communicating the emotional pain behind the "facts, opinions, and questions." This is to be contrasted with our first conversation about the holocaust in which his affect remained flat while he spoke directly about his experiences during the war. In this second exchange, Tibie's tone of voice and facial expressions are full of emotion, but in a technical sense Tibie is not talking about himself or his pain, at least not directly. The pain is being expressed, but on an intellectual level in the form of "questions" that are actually abstract statements about the speaker's view of reality.

Expressing pain in this indirect manner helps to maintain the distance between the pain and the speaker, as well as the listener. Most of us have experienced that "I want to talk about it, but I don't want to talk about it!" attitude when we are hurting. It could also be expressed as a feeling of "come close, but not too close!" a conflict between the fear of being alone and the fear of experiencing further pain or of having to deal with the pain that is already there. This internal conflict is often experienced by people in the context of the therapeutic relationship. It is a basic element in determining the type of interaction that occurs between the person and the therapist.

This attitude can assume many forms, but "questions" are one of the most common ways in which it is expressed. Sometimes people come to the counseling session with lists of questions for which they want answers. These questions rarely address the pain directly, even though they are direct products of the pain. The same happened in the discussion between Tibie and myself. For example, Tibie asks "why did the good people die and the criminals go free?" not "why was my family murdered and their killers not punished?" The latter question is much closer to real issue, namely, his pain. These sincere questions usually serve to create distance, in that attention is focused on the questions instead of the injury behind them. This type of behavior reflects an internal distancing from the hurt. The part of the self that has been injured is in a way cut off, and attention is focused elsewhere because facing the pain is too frightening or because all resources must be focused on survival. This ability to distance oneself emotionally from the hurt is an important survival mechanism. It is equally true that the ability to feel pain, to be close or present to it, is a fundamental quality

of human experience, a necessary part of maturation, and essential to inner wholeness. All of this creates a dilemma for the therapist in that the person to whom the therapist is listening is saying different things at several different levels. Often the messages contradict one another. Where does the therapist need to focus his or her attention to be helpful? How can one listen to another person in a way that is healing?

I choose to listen to the pain behind Tibie's words; I make no attempt to create distance. In fact I focus my attention on the hurt as it is expressed through his voice tone, body posture, facial expression, and most especially, his eyes. This is in contrast to our previous discussion where I attended to my own discomfort. This time I truly listen to him. The reality of his pain assaults me. It soon becomes overwhelming as I look at my friend and say: "You ask very good questions; good questions that deserve good answers. I don't know that I have a good answer for you. I do have something that I want to say, but it will be hard for me to say it because I will probably cry." As soon as these words are spoken, the tears are there and I am crying. The appearance of my tears bring about an immediate change in the atmosphere of the room. We are no longer discussing abstract notions about the origins of evil. In fact we are not talking at all, yet something is said in the silence.

After a few moments, I regain my composure enough to be able to speak. While looking down at the table, I say to Tibie, "I am crying because I feel very badly about what happened to you and your family during the war. When you first told me about these events, I did not know how to respond and what to respond to. I want you to know how very sorry I am that these terrible things happened to you and your family. Please know that your pain is in my heart. I thank you for this precious gift, because only true friends share both their joys and sorrows. I thank you for honoring me in this way." I finally lift my gaze to look at Tibie who is also staring at the table. Only moments ago, he was animated and engaged in the conversation. Now, it is as if a deep weariness has settled over his whole body. His eyes are filled with emotion and tears. After what seems like a long time, he looks up and our eyes meet. In a soft and gentle voice he says, "Thank you. Thank you for your very kind words."

Marcel's notion of availability describes a significant part of my listening to Tibie (McCrown, 1978). All of us have had the experience of being with others in that we are present physically. We may hear what others are saying, but in another way, we aren't really present to them. Perhaps we are worried about a loved one or are self-conscious about how we are being perceived by others. For whatever reason, we are not fully focused on or available to the person conversing with us.

When I spoke to Tibie about his past on the first occasion, I was present physically and intellectually. I heard what he said and was aware of its

meaning. I recognized intellectually that tremendous anguish must surround his memories, but I was also focused on my own emotional discomfort. So although I recognized that his pain existed, I made myself unavailable to it emotionally because my attention was on my feelings about his pain. We were in a public place surrounded by strangers. I was focused on my own reactions and on how I must be perceived socially. This distracted me from being able to hear what was behind the words being spoken.

Alone in my room and in our last encounter, I was able to more fully attend to Tibie and his sorrow. This doesn't mean that I didn't react to what I heard. In fact, I responded quite strongly. The difference was that my response was not the object of my attention, which occurs when one is self-conscious. This isn't to say that I wasn't aware of my feelings, but rather that I didn't objectify them. I simply felt them. I experienced them from the "inside" rather than analyzing them from the "outside." The emotions I experience in response to what I hear are a part of my availability to the person with whom I am conversing. When talking with Tibie, I wasn't only present physically and intellectually, I was available emotionally also. My emotional response is part of the listening experience.

There are numerous ways of listening to other people. There is the kind of listening that I described in my first conversation with Tibie. We are physically present and understand the content of what is being said. But we are preoccupied with our own concerns and reactions. We are not really hearing the other person. This way of responding to others appears to occur quite naturally simply as a consequence of the maturation process.

The second kind of listening is academic in nature. There is a recognition of the existence of the other person's pain, but this type of hearing is rooted in intellectual curiosity. People and their pain are the objects of the listener's fascination.

Psychological listening is yet another way of hearing. The listener seeks to be helpful through the application of expert knowledge concerning the dynamics of human relationships. A therapist is a professional who attends to the person via the lens of psychological theory. Familial interactional patterns may be considered, individual behavior observed and recorded, and psychological labels may be assigned. All of this is born of the professional's desire to be helpful to the person seeking assistance. The second and third kind of listening are more cognitive in nature. Learning and therefore training play a central role in the degree to which the individual masters these listening responses.

The fourth way of listening is therapeutic in a way that is different from psychological listening. It is different because the therapist who attends in this latter manner is listening to what animates the speaker. The person's pain is heard. The therapist who truly hears the hurt behind the words can respond to the person in a caring way. There is something unique about listening to another in this manner when compared with the other ways we listen. Although this fourth way of listening may be enhanced by effective attending skills, it is not simply a product of training. It is a direct consequence of being available both intellectually and affectively, the whole self, to the other person. It is being present as a person and not the mere application of psychological theory. This ability is essentially not dependent on what we have learned, but on who we are on the person of the listener.

How we are able to listen and focus attention determines in part whether our encounter with another person will be helpful. When people are hurting emotionally, their fundamental need is for someone to "hear" them, to listen to the pain behind their words. This means to care for them. How we express our caring will vary with the situation, the person we are listening to, and our personalities. The important thing is that we hear what is being expressed at the deepest level and respond to it in a caring way.

Reference

McCrown, J. (1978). *Availability: Gabriel Marcel and the phenomenology of human openness*. Missoula, MT: Scholars Press.