

welcome to the thanks therapy podcast before we start if you are in crisis or need urgent support please google the samaritans and the country in which you live help can be found online and via the phone we also put local and national helpline numbers and links in the show notes and on social media don't suffer alone things can and will get better enjoy the show

Hannah:- Hi I'm Hannah Loudon

Emma:- and I'm Emma Loudon and this is our therapy appreciation podcast thanks therapy where we hope to demystify destigmatise and encourage the appreciation of good and useful therapy and today we're talking all about the different types of therapy how do we know what to go for and what not to go for

Song- thanks

know if there should go you should give it a try it could be good for you so hannah before we start hi are you how are you doing you know i'm okay actually thank you for asking that's good i swim i had a swim in the sea today oh wow oh [__] that was really nice um i haven't done that in a while it is so good for you yeah a lot of people do see swimming as a therapeutic process i admire them because it was cold as balls and like i'm not used to it but i know that people do it as like a breathing resilience body reset type experience yeah sounds awesome but i was just you just like swimming in the same splashy splashy our family are big into swimming and sea swimming mm-hmm and um yeah um i always always the thing that happens in in our family is you go to the beach and then um dad hassles you to go in the water have you been in have you been in properly and properly means you've been up to so you know sometimes i just splash my shoulders to make it look like i've been properly able to tell i think you'd be able to tell how are you anyway i am good thank you for asking um i am actually particularly feeling very energized at the minute um i have had a lot of things going on um i've enjoyed developing this podcast with you that's been really exciting it's been a new endeavor um i've got a job interview so i've been preparing for that um all of those intellectual pursuits i really enjoy actually that we have had a bit of a disaster in the family and that my youngest child has broken his arm right at the start of the holidays so that was pretty stressful and very very unfortunate for him but he's been really brave about it um and we're getting on with it really you know sounds like it but um i always get really enthusiastic when there's nice good intellectual products happening that's funny actually you should mention that because i was chatting to a friend today and they were like oh you know how's your mood this is a friend who have like proper kind of quite frank conversations with about like our respective mental health and i was saying like you know i actually i'm doing pretty good and i think it's because i know i'm starting my master's in september yeah and have something to look forward to because i didn't really have that before um and i think i need intellectual stimulation yes it is also it reminds me of thinking about it's that's really self-actualization is what we're doing there isn't it's the top of master's hierarchy of needs which we should probably talk about sometime i can't believe we haven't talked about that

okay so let's get to it we're going to talk about different types of therapy yeah and we really want these first few episodes to be sort of like introductory get to know us and also get to know what we're you know trying to trying to get across here and that includes educating a little bit about different types of therapy so hannah tell me have you experienced many different types of therapy in your life um for someone who bangs on about therapy as much as i do i actually haven't tried a huge range nor do i think that that would actually be like you know that's not a good aim probably

no no i'm probably not gonna engage but my experience with therapy began when i was like a teenager um maybe 17 i can't really remember um and i did like straightforward talking therapy i don't think i i don't remember anyone being like you're gonna go to cbt or you're going to psychotherapy i think it was just like there's a therapist we find did they use the word counselor or therapist i can't really remember i think it was a mix of both okay i think it was like depend on who i was talking to i'd be like oh we go to counselling but i remember it as like okay and so i think i took it pretty seriously quite a serious 17 year old um and then in university i went to a few cbd courses like through the university and here and there and i always just remember completing them and being like uh i wish there was more is that just the end i want more i i you know it felt insufficient it did feel very insufficient um yeah and i did because at the time i didn't know what i was looking for and what would have better stated me which i know was trauma-informed therapy or psychotherapy um i'm with my current therapist who i've been seeing for about nearly four years we do psychodynamic therapy which for me has meant engage with like loads of different techniques start off with just talking and like you know sitting in a room and crying sort of thing and figuring out what's wrong and then you know branch tied into like santre art blah blah blah but we can talk more about that later yeah um so in terms of different types of therapy i think it's it's quite a complicated question and not one that we can actually really cover in this episode without feeling like for me feeling like we're being kind of reductionist but yeah the point of what we're trying to do here is to give people an idea of when they go to look for therapy and they see different terms what does that actually mean you know what what can they expect from that where do those terms come from um because you know be great if there was like three types of therapy or like 14 as i saw in one buzzfeed article um but there are so many different types of therapy yeah which can make it difficult to explain you know so um i want to talk about some of the common types of therapy that most people are likely to come across if they're going to engage in therapy so you've had psychodynamic psychotherapy yes yeah yeah that's my mean that's my main one i really love it um i don't have any plans to not go i think i'm just gonna go for as long as possible um my understanding of the term psychodynamic is that the therapist borrows quote unquote from various disciplines um like working with the client to see what they respond well to um what kind of techniques help them express themselves better um but that's just as a client then i'm understand so dr emma with me if i'm wrong um i think it has its roots in traditional psychoanalysis is that yes oh yes definitely uh-huh yeah it doesn't date i was thinking about this when i was kind of like preparing for the episode and i was like i i just actually don't really know what it is i go and do every week no i thought i mean i think you have a much better idea than most really you know well i like it because the idea of being able to go and not know what the session is going to look like um because sort of you know maybe 15 minutes into the kind of initial hello what do you want to do like this is your time as a phrase that you've got a lot so i can say you know i don't really feel like chatting i don't really you know i'm feeling dying and i want to um just kind of get out of it a little bit i can just suggest drawing or like we've done sand tray work which i have loved and find fascinating but also there's no pressure to engage with those techniques um you can just be silent for a session you can you know totally disengage which can be productive in and of itself so i i like it it feels like nurturing is the word that would come to mind um but i think i'm doing a lot of assuming that our listeners are familiar with a lot of those terms i've just used so should we clarify yes i want to make sure that we are explaining things for people who want more information um as well as given some good detail for people who already have an interest in the area you know so um so obviously psychotherapy originated with the work of um sigmund freud and a number of other analysis analysts sorry around that time um and we make a distinction between psychoanalysis which still exists today and is still practiced but that's super intense and you go like five times a week minimum you know often you go more times a week um and psychodynamic psychotherapy which is based on the same teachings but is less intense and focuses on dealing with

unhelpful patterns of behavior which often have their origin and childhood experiences yeah my i mean i i'm interested in the freud stuff is it am i right in thinking that a lot of that is that the the client doesn't look at the they don't look at each other the client lies or reclines yes so to be speaking just into the space and then the analyst i don't know catches your words behind you yeah so the traditional image yeah the traditional image of psychoanalysis is the therapist sitting on a chair behind the head of the um of the patient and that was all to do with projection and transference and and trying to remove all barriers to the the we say client now but they said patient back in the day um they're get them getting in touch with their unconscious essentially you know so that was the idea behind that yeah that's my understanding of the freud stuff i don't know like a huge deal about him i think and uni i read a few of his things but i mean i was ages ago um but at the moment and with my therapist we've been talking a bit about carl young i think is relevant here because he's like one of the big yeah heavy hitters um mentioned and seen breath as freud a lot of the time which probably i like another episode i think we should definitely do the freud young episode because it would be hilarious among other things but like battle of the bands yeah but i think he's relevant to mention here because you mentioned unhelpful patterns of behavior that originate often from like early life or childhood and i think my understanding anyway is that young talks about these but he refers to him as complexes or emotionally charged associations and unlike you know who among us does not have those and those two they did work together so like i think a lot of the ideas are shared even if the language is different well the language is different so they did know each other i think young was slightly younger than freud

but they both advocated analysis for the treatment of mental illness so this was the start of the development of analysis being used so rather than the biomedical model of essentially um psychiatric disorders originate in the in the physical area of the brain and they have to be treated with medication and even that was really uh primitive at that stage okay what time period are we talking here so like the so 1900 right around 19 both sides of that right they they worked and trained and that's so great like to think about that is so crazy because i that i think of when i think of medical treatment in that time i'm thinking of like cocaine leeches funny you should mention that freud loved a bit of cocaine really well yeah at that time was like yeah it was all like marty does this joke about oh you've got ghosts in your blood you should do cocaine about it well the army was using cocaine and it was like this is a wonder drug it means our soldiers can like fight for three days straight and freud got wind of this and started treating everybody including himself with cocaine and then one of his one of his associates who was addicted to opium at the time he was like you should use this cocaine to get off the opium but then the guy got addicted to cocaine and freud was like ah i probably shouldn't use cocaine too much so he just used it occasionally after that cool that's way chill oh no i don't mention that in the freud museum i know a lot of the stories are kind of a bit like that so anyway um they so initially when they first met they loved each other and they apparently talked for like 12 hours straight and they were like this is the only man i've ever met who can you know understand me at this level or whatever i can't remember who said that but they were like great but soon their ideas started to separate so freud was was primarily a materialist and um and young was more interested in the unconscious in terms of connections with mysticism a little bit like so young believe that the unconscious when we access the unconscious we're not just accessing our own unconscious but like a collective unconscious and an ancestral unconscious and freud did not follow him with that idea okay and um also freud very often um

uh associated the energy of the psyche being blocked for some sexual reason yeah he was obsessed with sex and he also had some interpretations about like the infant sexuality yeah you know and um young was like i'm not sure about that at all you know i don't know i think you're just obsessed with sex freud um another funny story is that um so freud's wife martha had a sister oh it was like minna or something she was called and her fiance fiance died and she came to live with the freud's and whether there was any truth in this or not but young spread the rumor that freud was having an affair with her

and i just love i just love the kind of you know daft behind the scenes drama that was going on in psychoanalysis at the time probably not that outrageous an assumption considering he was really into sex i know apparently some historians have sort of felt that they could verify that he did indeed have an affair with her based on his correspondence around a particular time and the trip that they took to italy or something like that and just him and his wife's sister yeah him and his wife's sister yeah i mean okay so you know who knows but anyway um so today some people can be really scared about freudian psychotherapy psychologists in particular feel that given the scientific advances in what we know about the mind that it is very outdated a lot of the ideas are very outdated um however i feel there's a lot to be said about early experience and the influence of early experience um patterns of behavior internalizes internalizations about what our value and worth is that come from those early days um and of course attachment which we are going to get into big time on another episode big time attachment time okay yes so i also think this is a good time to mention that in order to to come back to the point of this whole podcast yes thank you etc that in order to attend therapy and like benefit from it you do not have to give a [__] about freud or young no yeah that's stuff that we just talked about we are just super nerds about that and love it yeah scandal time and also those it's interesting to read but you do not need to know like theories about the mind subconscious all that stuff and what is more important than all that stuff is going into the experience of therapy with like an open mind open heart building like a trusting relationship with your therapist um and then if you want into that stuff there is space there for you to do so um like we love that kind of thing because we're like in literature and you know talking about psychology in a nerdy kind of way and yeah i like reading about dreams and subconscious stuff like spirituality like you mentioned is kind of stuff that you get into if you were reading about young but that's only developed i think it's worth saying for our listeners who might be being like right okay we get it you love books for me that's what he developed in like the past couple of years of therapy because in the beginning of me attending therapy it was like hi i need help today can you help me be less mental like also don't make it super complicated just fix me basically yeah um so if she hadn't been like have you heard of young's through of individuation i would have been like bye i'm gonna go to hospital yeah so the point of all that all of that is to say yeah it could be that kind of chat early on could be alienating but it is worth mentioning just to give kind of like an idea of the scale of depth that is available um with the many types of therapy that are right there you are the client and like a good therapist won't start making you read difficult theory or listening to that you talk listen to them talk about stuff like that unless you're unless you're kind of going hey you know is there some can i do reading or like what's a good thing to look up for this thing um so yeah just wanted to get in there with the disclaimers no thank you very much for doing that and i should also nerdiness i should make a disclaimer as well to say i'm absolutely by no means first of all i'm not a psychotherapist i don't have training in psychotherapy i have an interest in psychotherapy which goes alongside psychological knowledge counsel and knowledge and knowledge of the field in general you know yeah and we do have to be careful that we don't become a thanks psychotherapy podcast you know other types of therapy are available that's the disclaimer yes um and also just to reiterate you

definitely don't need to know what these old white dudes were all about um yeah it's a lot of there's a lot of old weather there's always a lot of old white dudes no um you don't you don't need to know that's not a prerequisite for um getting benefit out of the process at all um i suppose that we're just still discovering what this podcast is about um and it's it's an organic process for us as much as it is um and it's similar to the process of therapy and similar yeah it echoes it it does accurate um and i think we're making a podcast that we ourselves would be interested in presuming that there are other people out there who are like us please god let there be some other fingers crossed otherwise this will be a massive embarrassment

yeah um so just to go back to what kind of therapy you might encounter in the world thanks for drawing us back to the point there when you know i was getting it off into um drama between psychotherapists um so for example what i would see as kind of the polar opposite of psychotherapy is cbt you're calling that that's a big statement well i suppose because it's cognitive behavioral therapy so it's um where analysis is thinking about feelings and unconscious motivations thinking about cognitive behavioral therapy essentially what it's looking at is the unhelpful thinking patterns so yes whole theory base is that your thoughts control your behaviors and your feelings so if you can if you can correct the thoughts the unhelpful helpful thinking patterns um and the learn patterns of behavior then you can um impact the emotional aspect of things so it doesn't focus on the emotional part it doesn't focus on the feelings necessarily it focuses on the product of the feelings yeah um and so you know i i think we have like kind of locate slagged off cbt a little bit on this podcast so far only because you didn't have a brilliant experience with it and it wouldn't be our preferred go-to thing but it is super effective um particularly for anxiety and did you know that it's one of the only it's among the only evidence-based practices that has clinical has bunches of clinical evidence proving that it works and is recommended by nice so it's the it's the talking therapy that's recommended by nice um and that means that basically they tested people before having their therapy and after and there's a demonstrable effect and enough people to show a significant effect size is that like at the end of what 12 sessions or whatever yeah i mean usually i would say it's it's six or twelve sessions mostly it's twelve because six i mean anything i'm really gonna think and six but i mean i used to do six sessions with a core um questionnaire at the start and and the end yeah um and so you do a questionnaire at the start and it gives you a score and then you do your you do you do your sessions sometimes you do a core questionnaire in the middle i remember i remember doing those i think that was a lot of what i didn't like i was like this [__] questionnaire is not gonna help like i need help here so i think that was just my experience of it was quite negative i think the other thing is is that um i mean clinical psychologists use cbt it's one of the tools in their you know tool belt of things that they can bring out to help a person in the room you know um and they they do that because because it works you know and some criticisms of cbt are that it's a sticking plaster meaning that it's a temporary solution to a problem that it's not getting to the root of the problem it's it's covering it up however there is a benefit to getting someone back to functionality oh god i'm like never i would say if you if that's what's available to you and you're anxious 100 go for it particularly because it's it is proven to work for anxiety do go for it but also a lot of people who practice cbt do all the other bits of counseling as well they do do um you know depth work and they do um working with emotions and things like that so yes i mean it has been proven to work and but comparative studies with other types of therapy have shown that it's it is just as effective as other therapies and but it is easier to test and show those effect sizes yeah i was just thinking that as you were talking there i didn't i did not know that cbt was the own like one of the only clinically proven ones yeah i'm like shocked by that i mean this is i feel like you know this is very much your area to like school us on because my contributions to this section will just mostly be me giving opinions no i

mean um because i have not really had positive experiences with cbt i think i was very much in that sticking plaster category yeah you didn't feel it was working for you and i would say that if you ever engage in therapy and you feel it's not working for you seek out a different type of therapy or sometimes it's the therapist you know relationships don't always work and you don't always gel with each person don't see that as a reason why you can't try therapy again yeah to actually see it as a reason that you need to keep trying to find the right one i promise you you'll be surprised yes i definitely agree i've definitely can think of maybe three or four people i went to one session with and i was like i just don't like you i'm so sorry there's nothing wrong i remember one woman emailing me and being like sorry you're not coming back is there anything i could have done differently i think she was in training and i was just like i didn't reply i feel bad about it i still think about it because i'm like i just didn't like your whole thing i'm so sorry so i mean yeah don't feel bad i guess is my point there yeah don't feel bad and if you are a trainee therapist um or a practice practicing therapist currently um you might know like me that there are situations where you feel like god that person really didn't like me that was like they attended for i've had i've had a couple of people who have um who felt that i was not helpful to them and yeah were vocal about me being not helpful to them okay and the thing is is i wasn't doing anything differently with them than i was doing with other people so you balance it by feeling this is about their journey you know it's it's not but especially when you're in training or in a very small country like our own yes yeah yeah um actually two of those people i mean there's really not that many just before people worry that i'm a terrible therapist but um i'm actually not a therapist anyway i don't use that term because it's um you're a counselor right i'm a kind well yeah i am a counselor but um we have been i have been a counselor i'm you i'm gonna use the term practitioner i think at the minute because um so i'm a research psychologist primarily but i have counseling training and i'm in the process of registering with the british psychological society um and then i'll be a registered psychologist so essentially if i was to carry on doing some counseling work with people i would be a practitioner psychologist okay all the reason why you have to be careful with this is these terms are protected you can't just throw around a term you can't just say i'm a therapist if you're not i mean therapist generally we mean psychotherapists that's that's what we mean that's my understanding of it yeah so trained in some form of psychotherapy whether that be art therapy traditional psychotherapy psychoanalysis jungian therapy um whereas other people we wouldn't a counselor i wouldn't expect a counselor to call themselves a therapist and i would be a bit precious about that um okay i get that and i've lost i've lost where i was going with that now but so basically it turned out the two of those people who had felt that i was not super helpful i actually know them in a roundabout way okay i know someone who knows them okay and i have been in their presence at like gatherings um which is you know can be sort of awkward it's an ethical minefield it's a little bit difficult what was your training in initially so my training was in person-centered counseling yeah is this can i interrupt and be like yeah is this car is that carl rogers it is carl rogers yes so like when i know me you know loads i know some things um so that was originated by carl rogers and it was actually a reaction to psychoanalysis at the time um he took against for example the thing that we were talking about earlier about the therapist being a blank slate so sitting behind the person silently not responding to what they were saying and responding very little you know um and also that the therapist took an expert position and clients were called patients at that time and um rogers wanted to move more towards a humanistic way it's literally humanistic psychology and humanistic counseling is where it comes from and and that is puts the client as the expert in in the experience and the the the um counselor then becomes a mirror so reflects to the person what they are what they're bringing into the room okay and and that's to deepen people's understanding of of their experience um and he he believed that there were three core conditions that needed to be present for therapy to be effective and they are empathy unconditional positive regard and congruence oh i didn't realize that was him an

occupational positive regard i i like have that as my sort of personal mantra yeah to keep me not being a nice person in life i try to yeah i didn't realize it was him well but it was just a since i trained in person-centered therapy i have um integrated a number of other techniques into my practice okay um i don't think there's anybody really is purely person-centered practitioner anymore but those core conditions they you know continue because essentially what they describe is um the process of making a um quality therapeutic relationship you know that's what those are the conditions that allow for therapeutic relationship to happen so for example what is so congruence was the third one yeah so congruence is basically the literal definition of congruence is that you're the same inside as you are outside right so it's like honesty but but more than that yeah yeah so um so um essentially it's um being really yourself in the relationship right so the person can trust you because you are coming into the room and you're being like hello here we are you're talking about as a practice i'm meeting you as a practitioner yeah yeah and i am myself and what you're hearing from my mouth and seeing on my face is to do with what's going on inside me okay and um that is easy for me because i'm quite a congruent person anyway so um but i just admire that characteristic as well yeah you can tell the difference between a congruent person and an incongruent person because a congruent person you'll find it easy to get on with them and you'll feel like you know what they're about okay you'll be like i know what they're about and somebody who's not congruent you'll be like what's going on with them i feel confused and i feel like sometimes they're saying they don't say what they mean and stuff like that and then unconditional positive regard is um essentially going in without feeling that you're gonna judge the person that they are by being a person they're inherently valuable and worthy of attention and um that their feelings should be heard and their you know needs should be heard and all that kind of thing okay and then empathy is um

seeking to understand another person's experience yeah and um express it to them as well because i think empathy is an action it's not just a feeling really yeah but they should be an action that all sounds super chill it is great it is great but i have integrated other things into my practice like um i worked with brief solution focused therapy for a long time in those that kind of 6 12 session model which while it is quick it doesn't mean that you can't do something productive during that time um and it can be helpful for people to have to have goals and set goals and things like that um and some cbt tools can be useful just in terms of challenging um critical thinking errors and things like that yeah um and then uh you know some psychodynamic techniques as well that you could bring in i did a little bit of art therapy with the client who happened to be an artist just because it was suitable for her because she was an artist um and that was lovely you know so basically the important part about those core conditions because they have been adopted by many other modalities is that the therapy relationship is key so when i was mentioning about cbt being evidence-based and there been a large amount of data to to indicate its efficacy when there have been comparison studies that have looked at cbt versus psychodynamic versus counseling versus whatever okay yeah and what they find is something called the equivalency paradox and essentially what it means is that all of the types of therapy are beneficial okay really there's not a wild difference between different types of therapy um

i think the process itself is helpful rather than not the data is sort of suggesting that um different techniques are equally useful okay yeah is that the like you know i've i've read a little bit like when they're talking about the efficacy of different um you know practices or what's the word modalities i love that word the efficacy of different modalities and the question of better than nothing is it better than doing nothing um is it not harmful yeah and i find that interesting when i first saw it i was like

oh that sounds a bit [___] to be honest like better than nothing makes it sound not that impressive well i think what they're trying to do is compare it with nothing yeah doing nothing one of the other difficulties with um counseling efficacy studies is that the control group has to not have counseling if you're doing a okay is it better if they get counseling or don't get counselling okay and very often you have to use a waiting list in order to achieve that so you have a waiting list control group because otherwise you're basically stopping people have a counseling yeah and it's just not ethical you know it's a it's an ethical minefield i mean but the bottom line is is that the therapy relationship is key regardless of regardless and so sometimes a relationship won't work because your personalities don't gel or you just you know the person you're not vibing with the person right um

but a good therapy relationship is gonna bring benefits to you regardless of the modality yeah i re i mean this kind of goes back to what we said in the first episode vaguely remember talking about that's the fundamental rule is largely about the relationship isn't it yeah well the fundamental rule is that you have to be totally honest when you go into the room but yes i do think we did talk about this i hope we're not repeating ourselves too much because we can't really remember it you tell us yeah i like i love talking about the therapy relationship like i think that is fundamental because like you can search far and wide for like a really specific practitioner or therapist or group or whatever but none of that is really as significant as um feeling safe to like express yourself in the session or whatever the session might look like i actually just realized that i have done other therapies that i uh forgot to mention or like therapy adjacent stuff okay that i didn't kind of didn't spring to mind initially for example um group work i have engaged with group work and i would love to do it more um like it can be i think it's quite daunting and it's funny that we haven't brought it up yet yes we haven't mentioned group therapy at all but if my dad was here we would have been talking all about this would be a podcast all but great i i used to know someone who we were discussing it and and she had attended group therapy and she said they call it the hull of mirrors and i was like oh my god earth in a good way i was like [___] sign me up but i have attended alanon yeah which um for anyone who doesn't know alanon is like a wing of aa basically and it's for people who are not in active addiction but have had any kind of family relationship or romantic relationship or any relationship of any kind with an addict and they feel it has affected their lives um and it does follow that 12-step format that people know about from a a yeah um why did i bring that up oh yeah the the reason i mention this is because again those groups are largely about the dynamic between the attendees and it can be massive like as i say i've dipped in and i've never really properly done the steps which you're encouraged to do at some point or at least consider engaging with them um but they i guess they provide structure to the group sessions yeah um but it can be incredibly impactful just yeah as a as a sort of short-term engagement or whatever like there's no um nobody's there to like provide therapy to the rest of the group and there's no like leader necessarily yeah um like there's no one way support between people who are attending but i think the the thing that makes it um so impactful is there's like a mutual understanding between all the group members um that they're coming to like a space where everyone knows what the [___] the deal is like yeah what's going on and um there's shared experiences yeah like a lot of emotional relating goes on absolutely quite charged sort of a way it's very yeah one of the things that that that group groups of that kind supportive groups give you is they reduce isolation so they they oh they make you feel that you're not alone so it can be a very lonely experience i'm the only one suffering this way so they reduce your isolation for a start and then and they give you the mutual peer support of somebody that understands entirely what where you're coming from oh my god yeah that's huge i heard a lot of clients mention that sense of they know what you're they know what you're going through whether it be a bereavement support group a depression support group um or an aaa group in itself you

know um going to those things and being like you know it's just hard and having everybody else in the circle nod their head yeah you know i guess the like it's not it's not better or worse than therapy they're different things but the good thing about those group experiences that i've had anyway is you do not have to go in and explain your situation it's implied by you turning up yeah like i've typed this into google this very specific problem yeah and i found this weird community center that i'm not in drinking weird tea and eating steal biscuits and it's great yeah you kind of leave being like right that was you know it can be brutal but like it's very good so i guess it's like i bring it up because it's not therapy but it's therapeutic yeah sense and there are a lot of different therapeutic things that people can try when i what i was thinking about um before you started talking about that was that um anybody who's seeking therapy for the for the first time maybe go for something free like maybe go to oh yeah that's the other thing you're free yeah like a local um charity or voluntary organization you might be on the waiting list for a few weeks but usually they'll give you an assessment session quite quickly um and then they'll maybe give you six sessions after that or maybe more yeah and usually the counselors themselves will try to push for you to have more sessions if you feel you need it and it's free it allows you to try it out and but also don't be disappointed if you don't get on with the person you know just seek out another organization or you know go to your gp just keep trying keep plugging you know yeah man and so any other types of therapy that you're hiding that you're sitting on there hannah yes i have a big one um emdr i've done quite a bit of emdr within my current therapy because my current therapist also practices emdr yeah and here comes the section of the podcast where i read directly from wikipedia the other website no that's good because this is complicated i should cite them but yeah i wasn't gonna free form this so the acronym emdr stands for eye movement desensitization and reprocessing and it's usually referred to simply as emdr or emdr therapy yeah and it's a form of psychotherapy developed by an american psychologist called francine shapiro who posited that the treatment could be successful in the treatment of ptsd and depression and it typically involves the client recalling in as much or as little detail as they want a traumatic memory or an unwanted core belief about themselves or their lives and talking through the associations that they have with these while a therapist controls bilateral stimulation sometimes using buzzers to stimulate alternating hands or more commonly i guess because it doesn't require equipment yeah moving their hand rapidly in front of the client's eyes well they quote unquote process um so that's your little blurb about that so i have done this therapy and i've i mean it's quite hard like it's physically and emotionally draining but it's worked very well for me yeah um and i think i kind of view it i know that people do it as like a session by session you know maybe you do like six weeks i think for me that would be extremely intense yeah so i've kind of treated it as like a productive add-on to my overall psychotherapy process yeah um but it's interesting like definitely if you're interested google it yeah um it's one of those ones that i i know what it is really um one of my previous supervisors had had trained in it and talked to me about it to explain what it was but i don't have any training in it and i've not had any myself so you're absolutely the expert on this one well it's probably worth mentioning that historically it's been a bit controversial in psychology community yeah um do they think it's woo they think it's we ah there's a lot of accusations of way a lot of that goes on in this like psychological don't i know it like for example while i was putting this together this little bit of research that i did on emdr i was googling some terms and you know the way like google suggests questions underneath your initial search results one of them was is the mdr a hoax and the answer below from was simply yes no further elaboration oh okay so i did a bit of reading on that um and i think it was kind of clickbaity because they went on to say you know there's problems with like you know quality of control grips and all this kind of thing um but the basic uh sort of sense of the article was like give it a try if you want we don't believe it at this magazine oh right okay so that's you know that's a thing um make of that what you will yeah maybe there's not enough clinical evidence yeah yet to back it up and i understand hard facts wise yeah people are not convinced um

but anecdotally you know it's it's quite popular yeah my understanding of it was that you know trauma therapy in general involves a recall of the traumatic incident yeah with the aim being that you take the par out of the incident so you take the um the all affect out of it and it becomes a matter of fact so post-traumatic stress disorder for example when you have flashbacks and things like that it's you know your nervous system is going right back to that i'm in mortal danger you're activated yeah you're totally activated and so trauma therapy my understanding of it was again i'm not trained in trauma therapy but um is that the recall if the incident is supposed to take that out of it and then my understanding of emdr was essentially was using it was um hacking yeah the processing unit of your brain i think that's maybe part of the problem is the use of language like hacking okay i in another place that i read i don't think those are really representative sure of the act of what actually happens because there's definite processing i think the eye movement thing is meant to mimic the movement of the eyes and rams like yeah which is where your brain like you know gets little bits of information that it's picked up throughout the day and puts them in their like appropriate folders adorable image i love that it's amazing thanks brains for doing that because no thank you i mean thank god that's why we sleep i guess but um you know to do that consciously in waking life with another person there who you trust is a different kind of thing yeah so i mean i'm really not doing anything to discredit the woo thing but no i think that's mine yeah i think we have to keep an open mind really and that that tends to be my philosophy with things like you know we were talking about the jungian stuff earlier and i was quite surprised to hear about the divination type stuff that young therapists would use like using the tarot or as americans say the turo well i think we might have just got into saying the tarot and we could be wrong you know i don't know um and so and the ichi which i don't even know what it is you throw the ichi i think it's like ruins of a kind of oh yeah um i've seen that because and why i'm open-minded about that because i tend to be a materialist you know i'm a scientist and i you know i'm research scientist and that's what where my i've always been yeah you know very much down that line you don't really engage when i talk about zodiac stuff i've noticed that no i don't i don't noted we will keep that for the uh zodiac episode but i um i do keep an open mind about that kind of thing because i feel like firstly i think archetypes are useful because the tarot essentially is a lot of um archetypal images that we can use to find a greater understanding of ourselves and of humanity yeah and and that's cool those type of add-ons um spiritual type add-ons or or or you know stuff like sand tray or even play therapy so i had a workshop in play therapy one day workshop and play therapy and it was a very affecting experience and it was for more than just me in the room so we started out in group circle and the point of the play therapy was that we were going to do some of play some play therapy exercises ourselves as a way of experiencing what what you might do yeah and within about i would say 10 minutes of us being in the room and starting to talk there was at least one person in tears oh yeah right um we did an exercise where we visualized ourselves as a rose bush and then we drew the picture ourselves after the picture um we did clay work and we did you know work with little toys and i find it deeply deeply affecting and um it's one of those things you don't quite know what's happening or that anything is happening while you're doing it so i would always keep an open mind about those things you can tell even from the way we're talking about it you can see why it's hard to measure scientifically those kinds of yeah uh practices and the danger is is that if you don't provide the figures of your efficacy you don't get the funding because the people who control the funding just want cold hard facts and we we're in danger of losing things if we don't you know create a little bit more nuance in that particular argument um i mean one of the things that we are doing with talking about these few because we really have touched on a few types of counseling and psychotherapy and therapy in general today is um the type of things that would be available to you if you went looking for therapy and in normal just everyday kind of life yeah um and in this country there's probably not as wide a range of types of therapy as there are in some other countries and that's because we're a small

country and we don't have particular we don't have masses of training no there's not good rates we've talked about this in recent times actually regarding your want to train in psychotherapy and there's not um a wide range of training courses that you can't just be like oh i'm going to go to the psychotherapy training over here oh no i want to be a young and alan yeah i'm going to go to this one over here it just doesn't exist anywhere else yeah um and so sometimes you have to go um across the water as we say here to the mainland the mainland or sometimes you can go down south that's the other thing yeah um because it's a bigger country and you know they have a few more things um and one so one of the main routes that we have if you want to be a counselor you want to just help people and you just want to go and be a counselor is there's an undergraduate degree in counselling which is delivered by the colleges here the regional colleges so there's several regional colleges i think it's a two or three year degree account member um and the main so that is training people in integrative counseling oh okay very often when you look up the counseling directory certainly this is this is specific to the uk i would say more than more than maybe internationally but you will see integrative counselor on the their what they're trained in right and basically what that means is they will go for counseling training and um it will be there will be a basis and maybe humanistic counseling and then there will be cbt and there will be some psychodynamic therapy and there will be a lot of um different modalities okay integrated into their training so that they can draw on a lot of different tools and techniques um and so that's what a lot of people are are training in in this country now certainly so if you see that that's what that means basically it doesn't mean yeah they're going to integrate you although hopefully they will um it means that their practice has a lot of different modalities and tools that it can draw upon yeah that's actually good to know good that's good to know that you've explained that because for someone listening to this podcast being like well i'm not trying to be a counselor so don't tell me what the college is but that is kind of good to know because i would say that that's going to be needed oh yeah ireland oh definitely i mean the more people trained in any kind of therapeutic technique the better as far as i'm concerned the other thing that psychologists have done to open up um that area so without having to either get a clinical psychology doctorate or um do a phd or you know something like that if you have a psychology degree and you maybe have some um counseling and you can apply to become a psychological wellbeing practitioner or something like there's some specific title right they have which is again it should improve the access still to people having you know some kind of psychological assistance of some kind um and yet essentially at the point of all of that is that to give you an idea of um what those terms mean when you go looking for therapy don't be scared of the terms but be weirded out by it yeah generally you'll come across three things and that they will be integrative um just the word counseling i'm going to say four things now cbt or psychotherapy um and all of those are fine it really depends on what you yeah you want out of your session and also give them a try yeah just probably don't launch straight into um something that's quite out there and intense for your first experience of engaging good advice for anything really oh definitely yeah so does that feel like a good time to go to our agony ant corner let's solve some problems for someone okay um i have this problem this week's problem ready to reach you i'm sorry really this is from anonymous young meal mid-20s and he writes hi my question is about my relationship with my mother oh my siblings and i have all left home and are living relatively normal lives partners kids careers of our own etc but when i speak to my mother i find myself wondering if she wishes we were all more quote unquote traditional she herself is not necessarily conservative but i do find myself worrying that she misses out on the best moments of her children's successes and especially her grandchildren because she is lamenting the fact that we have in her eyes taken less traditional paths for example having children out of wedlock how do i approach this with her without widening the generational gap between us or possibly making things worse oh it's quite a biggie i think big it really is thank you for writing that question and for your calendar thank you so much for that um so this is

sort of my area um instantly makes me feel um you know worried about approaching this well it's it's much easier when you feel kind of unqualified and you can sort of play oh but um parental relationships and family relationships is is what i did my phd and so it's sort of my area yeah um and the first very very first thing that strikes me is you know wonder what is going on for the mom really yes she's trying to communicate something which he is very lovely picking up on that she's dissatisfied in some way yeah um and i wonder what it is she's trying to communicate so um he feels that she is not enjoying her children and her grandchildren because she's disappointed that what they didn't get married before having children is that what i think that's yeah i think that um that's what i pick up from it that she uh i don't know is is focusing on that more than just kind of being present right okay in the moment and you know enjoying dimensions that she's had her first grandchild okay so i think the relationship with the grandchild is really the first grandchild it's the first grandchild i edited down the letter because it was long um but yes the first grandchild that should have kept that significant detail okay and that child has been born out of wedlock which seems to be a sticking point for her well i do have some advice for this um writer writer in her is that is that the term writer yeah so um

whenever somebody has traditional values like this essentially what they're doing is they're so this this parent is literally in her critical parent so she is reflecting disapproval that she feels about this um and it can be hard whenever you're wanting to reflect that disapproval because you want to correct you want to correct the children the children have done something wrong you want to correct them so if you're in your critical parent you're saying no that's no good it's not good and you're um it's a very stuck place to be however usually when people no matter how traditional traditional they are when the little child comes along the little baby they soften your position based on the the baby being present and faultless and existing and because of their desire to enjoy now this is only the first grandchild and it has just arrived so um time can be given for that adjustment to take place and also that person that mum can be um cajoled and encouraged and maybe flattered slightly into shifting her position from one of critical you know wanting to disapprove to a softer position of wanting to nurture and enjoy his grandchild that absolutely can be can happen and can be done with um a caring careful and and quite pleasant way with people this has happened in our family you know hands oh yeah did you tell on mother one occasion it has happened none of my grandparents are are still alive and they all died when i was in my um teens and early 20s because i'm the youngest of my family so my grandparents were really quite elderly already when i was born but all my siblings were older and none of them really felt that marriage was the priority before having children not a one of them really cared about that but of course the older generation that was difficult for them so um granda sonnerton yeah for example he was unhappy with your with my mother with your conception yeah being a bastard

um so he was unhappy with that okay he softened as soon as he met you because i was very cute he had the most enormous eyes known to any other human that had ever been born but yeah no he softened when he when he met you and yeah that's interesting that yeah i mean who can it's hard to criticize a baby well you can't they're faultless they're not at fault yeah and it but he and because he was so fond of your mom you say so he was disappointed in her and um it's just those traditional values are are they're ingrained in that person you know it's not really their fault either that's been ingrained in them um so and i mean he's often very quickly it's like well she's here now you know so yeah so i wonder will that happen for our our writer-in-law i think it will but my advice would be that you can absolutely encourage that and i would say that flattery goes a long way yes to smoothing

over those rough edges there just gentle handling and flattering oh here's granny granny do you want the weiners yeah and i guess we're talking mostly about the i guess there's baby mother of that baby and then the grandmother who's the subject of this letter and it's her first time being a grandparent so that's a new experience yeah and i think maybe that experience gets not discussed as much because it's all about the new mother and you know a new niece or nephew and family yes um and you know just because you're older doesn't mean you know everything's going up no that's true it's my yeah and you know i mean i'm i because there's so little detail i'm i'm hoping for the best outcome i'm an eternal optimist and i'm hoping that there's not more complicated things but often there is more complicated things for example new mothers are like tiger mothers they're very possessive of their babies yeah and it's entirely natural that they should be yeah yeah and one of the things that's traditional in our culture to do is when a mother has a baby tons of family crash in on the house or even on the hospital and the baby is handed round everybody gets a hold of the baby yeah that sounds i mean i can imagine that for a new mother they're like stop it yeah get away yes they can be i mean i think initially there's a kind of a yes hold the baby hold the baby her eyes are following the baby around the room get the baby back to me thank you very much bye yeah i'll be getting on with my life now but after a while it come can feel um you know especially when the the hormones really start to kick in that bonding is getting really really strong it's contrary to your instincts to constantly be handing the baby over to somebody and the person that often wants the baby more than anybody else including daddy is granny wow and so that can bring a lot of tension so it could be that granny especially if she's if she's indicated some disapproval yes that will have put her in the bad books a little bit and so if she's feeling in the bad books and also disapprove and she's adopting an attitude that's not really conducive to good relations between all these people who are just going through one of the most major life changes that you can go through and you're you know oh yeah that's a really good point actually so you that you know mother-in-laws and you know grannies in general can can put their foot in it absolutely it's it is actually an and not a very talked about but a delicate relational situation there yeah i mean mother and daughter relationships in any way without the additional baby are shall we say intense so that's kind of a major area i would be interested to know what relationship this is so is this her daughter who has had a baby out of wedlock yes or the daughter so it's the the writer and her sibling i assume sister oh right okay and so they share a mother okay well then whatever disagreements happen will be resolved because ultimately the daughter will turn to her mother in this new motherhood regardless of previous tensions yeah i mean ultimately they'll turn back as a provider or behavior falls within normal boundaries you know within normal realms of behavior you know and if everybody tries to smooth things over and that's everybody's aim this writer wants to help the mother enjoy things it sounds very much like they want this to be resolved between the siblings and the mother yeah and they're worried they they actually say um i find myself worrying that she misses out yeah so he's worried about a loss for her he's kind of saying um you know you're so in the critical that you're not enjoying this thing that you should be enjoying yeah and that he doesn't want that for her so there's care in there which is nice well i was just like my mom's a [__] what can i do no carry on with the care and just lay it on really thick you know if it's it's a very emotional time for people it really is and so i think treading delicately and approach him with um kindness i think i might have said kindness to the last problem oh nice that's gonna be my buzz my buzz turn that's good i mean of all the buzzwords do you use like approach with kindness yeah that's lovely that was very good you were the right person to ask that question yeah unfortunately it's my area so i felt a reboot put on this part i like bring the questions in because you just i'm just like emma what do you think maybe we should always do it that way but but then so what we're hoping is and we will put this appeal out again is we're hoping that you will um send us your questions to our email address which is thanks therapy gmail.com yes or you can find us on twitter just at thanks therapy pod i think or is it thanks therapy podcast i can't

remember i think it's called you can you can search that up on twitter and i think you'll find us yeah um but we'll put links actually as well yeah the show notes and please do send us your um low stakes anonymous problems for us to muse about we will anonymize them yes as much as you want as well we will indeed so i think that's pretty much us hannah i think we've talked about all we have to talk about yeah i love talking i do like talking as i'm talking which is lucky that's why we have a podcast got a podcast now so we have to do all the talking okay thank you hannah thank you emma thanks therapy

for example clinical um psychologists practice cbt it's one of the main you know not one of the main but it's one of the tool kits and they're they're armory sort of thing yeah yeah i'm going to say that again because tool kits in their armor is nuts thing to say um uh clinical psychologists use cbt because you know it's one of it's one of the tools in their arsenal essentially are you happy with arsenal

it's one of the tools in their toolkit i say it's one of the tools in their belt