Therapist as host:  
Making my guests feel welcome

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This paper provides an account of how the metaphor of ‘therapist as host’ can shape therapeutic practice. It describes a range of ways in which those seeking counselling can be welcomed to the experience of therapy. Particular attention is paid to welcoming children. Considerations relating to the physical aesthetics of consulting rooms, marketing, documentation and the use of websites are discussed.

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GREAT GRANDMA FRANCES

About a month ago, I videotaped my grandmother talk about her family when she was young. Grandma Lily is the last of her siblings and we wanted these stories to be ever available to us by documenting them in this way. My grandmother loves to talk about her rich history of growing up first generation Italian in New York City during the great depression. Despite this, I had never before heard stories about my grandmother's mother. The stories I heard a month ago moved me tremendously! So much so, that I will briefly mention them here.

My great-grandmother Frances loved to cook and bake. She raised eight children on her husband's small income as a barber and, it seems, fed most of New York. Grandma Lily spoke of constant company being fed at my great-grandmother's table. Working women, her children's friends, the down-and-out, meter readers, and the delivery persons, were all treated as her cherished guests. She cared for them, talked and laughed with them, shared their stories and comforted many of them. Bags of chocolate chips as big as chairs we re ordered regularly and, for Easter one year, she ordered a crate of eggs as big as an oven! Everything was consumed in the warmth of a kitchen filled with love. I can almost smell the cakes and pizza!

When the kids were older and married, most of them and their growing families still lived together in the same house. They built a store off the front of their home and opened a small grocery and sandwich shop. Lily described to me that, in addition to the whole family, many other people helped out in the store. People who had trouble in their lives, we re grieving or otherwise struggling, would be 'taken in' by Frances and her family by coming to work in the store. After several months these helpers would be feeling much better about their lives and would then move on. This left me wondering about Frances. How did being in her company affect these people so drastically? What does hospitality like this provide a person? Did feeling cared for and loved make the difference in these people's lives or was this due to the conversations that we re shared while they ate together?

THERAPIST AS HOST

Webster's Dictionary defines 'hospitality' as the quality of receiving and treating guests or strangers in a warm, friendly and generous way. For some time now, I have been exploring how practices of hospitality can influence my work as a therapist. The metaphor of a therapist being a host was introduced to me in a workshop taught by David Epston (2003). This fit wholeheartedly with how I wanted to be both personally and professionally. So, I stepped into the role more purposefully.

Treating someone as a cherished guest addresses the power differential undisputable in a therapeutic relationship by elevating the status of the person who comes to consult the therapist. This has been so tangible in my work that people have noticed. Regarding my office, a sixteen-year-old girl mentioned: 'It feels like this is a house and I am a guest'. I asked how this might have contributed to our conversations together and she said: 'It's not like other experiences in which the counsellor is 'the expert' and I don't know anything and they're telling me what to do ... I am not degraded like that'. I then asked how this might affect how she feels about herself. She replied: 'I feel like we're equal'.

In the context of my work as an independent practitioner, I am interested in treating those that come to consult me in warm, friendly and generous ways from their first introduction to me (i.e., my pamphlet, my website or the announcement on my voice mail). But this is not all, I continue to work to make people feel welcome throughout our work and even beyond. This commitment to help people feel welcome and comfortable guides all of my actions in my work.

In obvious ways, it has influenced my demeanor during phone calls and therapeutic conversations. For example, I return phone calls and emails promptly. As well, I use a lot of tentative questioning, checking in and asking permission during therapeutic conversations. In the rest of this paper I will further discuss less obvious ways, how this commitment has shaped my marketing materials, the organisation and design of my office, and my paperwork.
MARKETING MATERIALS

The target audience guides how marketing materials are written. In my case, I have multiple audiences. I wanted my brochure, business cards and website to invite interest from families and individuals who might consult me, as well as from referral sources. It is important to me that these materials are aesthetically pleasing – I use artwork that has been generated by children within therapy consultations. It’s also important that these materials are easy to understand, and that they provide answers to commonly asked questions. It is also important to me that I am transparent about the narrative approach that I employ in therapeutic conversations and explain why I am interested in it. I have found that this opens the door to other questions that people wonder about in relation to our work. Being transparent is another way of making people feel more on a level playing field with me.

At times, children are less than enthusiastic about coming to see a therapist, especially when it is not their idea. To address this, I invite parents to peruse my website with their children. In the past, I have consulted other children about what might have been helpful to see or know about me to help them feel less apprehensive about coming to therapy for the first time. They have told me ‘seeing a picture of you’ and ‘seeing you smile’ would help them to know that, ‘you are nice’. Since putting my picture on my website I have received positive feedback from similar kids who were apprehensive about coming: seeing a photograph of me helped them to feel more comfortable.

In a teaching context with Carolyn Markey (2006), I learned that she sends a letter to all the children she meets with prior to the first visit. While this is the loveliest idea, I presently cannot manage to put aside the extra time this would take. However, I cannot ignore the merits of putting children at ease before they visit. So, with Carolyn’s permission, I have put a children’s welcome letter ‘Markey-style’ on my website for kids to read.

Hello!

My name is Jodi and I am a counsellor. If you are reading this letter, you, your parents or someone else that cares about you suggested that you come and meet with me. I really get excited about meeting people once I hear about them over the phone. I love being a counsellor because I am introduced to new people all the time!

I’d like to tell you a bit about what I do. I meet with young people, parents, sometimes grandparents and friends and talk with them about the things going on in their lives. For example, I meet with kids who may be worried about their parents’ separation or divorce, kids who may feel scared about going to sleep at night, leaving mum or going to school, kids who get teased by other kids, or feel sad sometimes or get angry sometimes and much more.

Kids and parents usually feel much better about things after we get together. This is the best part for me!

If you have any questions, I would love to answer them. I can’t wait to see you in a few days!

Warmly,

Jodi
DOCUMENTS FROM CHILDREN

It has also been significant to include on my website (www.centerfornarrativepractice.com) pictures and documents that have been created from therapeutic consultations with children. This enables children who are thinking of coming to therapy to get a sense of the things we may be talking about. I've included some examples of these documents and pictures here:

Ways to Get Used to Your Parents Getting Divorced
by Eleanor, Tobi & Amy

1. Knowing that time passing helps.
2. Talking about it + cuddling.
3. Knowing we'll always be together in each others hearts, even when we don't see each other.
4. Knowing that your mother can support you and take care of you.
5. Believing + knowing we'll be fine.
6. Knowing we have each other for comfort.
7. Have some fun! Be with friends!
8. Knowing that Dad still loves you!
9. Thinking about friends who's parents are divorce, knowing they're fine and happy.
10. Knowing I'll see Dad soon. Dad will be so happy that you came.

With Bravery around now, I was able to cross off everything on my 'Grows nervousness' list. I always was nervous on Monday's for school, so one Monday we had a Bravery day with a big party for Bravery.

We sent Bravery an invitation, decorated, had turkey and cupcakes to get Bravery to want to come on Monday. After that Bravery came every Monday without fail. I never get sick or have headaches on Monday anymore.
Recently worries started to bother Matthew when he was trying to go to bed. He needed his parents reassurance a lot. Matthew’s imaginary friend Jim befriended him right around this time. Jim gave Matthew a magic imaginary computer. Matthew thought about seeing the words of his worry (for example: “FIREDRILL”) on the screen and “dragging” it to the Trash Bin, and then using the DELETE KEY. This works every time and Matthew goes right to sleep.
OFFICE

Over time, my belief grows stronger that a safe and cozy space does wonders in making a person comfortable. The responses people have made regarding my office have strengthened this belief. I have heard: ‘I feel so peaceful here’, ‘This room makes me feel relaxed’. I wonder, does physical comfort and a feeling of serenity affect the therapeutic process? I have read about sacred geometry, and how the sheer architecture of certain ancient buildings can calm the mind (Attress 1995). Perhaps a calm space supports a person in getting distance from the immediacy of their experience, therefore enhancing the effectiveness of the conversations.

Regardless of whether or not it is therapeutically enhancing, my visitors seem to enjoy the decisions I have made about my office. It is in a central location that is easy to find. It is accessible to those with disabilities, in front of a bus stop, with parking just outside a direct first floor entrance. The décor is simple but cheery and interesting without being distracting. It is all second-hand, which supports my environmental values. The seats are comfortable and there are extra pillows and blankets so people who need comfort or suffer from pain can make adjustments that suit them. My many oxygen giving plants make up for my one regret – very few windows, none of which open.

I have almost no knickknacks on the table and floor surfaces to avoid parents’ worries that their child might be touching something that they are not supposed to. I learned this from other spaces where I worked when I had to use rooms that were someone else’s and their things were everywhere. Now I have a coffee table with only a box of tissues, a tray of magnet toys and two mugs of colourful markers. Under the magnet tray I hide drawing paper. Kids get to feel special that they are in on a secret when I disclose my very ‘secret stash’!

I chose to have a couch in my office after some experimenting. Kids often choose to sit close to their parents, half on their lap, cuddling between them and/or holding their hands. Some of this is not physically possible in individual chairs. Significantly, when children demonstrate skills and knowledge about ‘cuddling for comfort’, we can build upon this in our therapeutic conversations (see for example the document on p.6: ‘Ways to Get Used to Your Parents Getting Divorced’).

When people come for their appointments I greet them at the door and offer water, tea or coffee. Also, in my waiting room, I am particular about the reading material I display. There are no publications that in any way support normative families or negative forms of judgement. Vegetarian Times, Daughters, and Zoobooks make the cut at present.

PAPERWORK

Before I discuss my paperwork, I want to acknowledge the privilege of my being in independent practice. I know this is a privilege because I have previously worked at agencies where a certain approach to counselling was required as well as certain paperwork, including a full assessment and diagnosis. Being on my own affords me much freedom to practice in accord with my post-structuralist philosophy. However, I still have some requirements as I take third-party payment (medical insurance). Though certain required tasks conflict with my values, I am going to discuss my journey in how I have come to satisfy these without sacrificing my integrity.

When making the decision to accept insurance, I weighed the unwanted requirements with the opportunity to be available to people who could not pay for my consultation out of pocket. Accepting insurance allows many people to consult me at little or no cost. This inspired me to develop a way to comply with insurance companies while minimising the effect on a person’s identity conclusions. This is a work in progress however, as I am always changing my paperwork in response to people’s feedback, requests and questions as well as my own new ideas.

The welcome letter is my most significant work in progress. The intention is to give people information on the first day we meet. Included in the letter is the standard privacy (confidentiality), emergency contact and payment information. However, I have recently added paragraphs that I hope will serve to decrease the power difference between myself and the people who consult me.

One of these new paragraphs includes a description of the purposes I have for recording my work. I hope this transparency helps people know
I love and care about what I do and how I am helping; and therefore consider them and their lives very important:

I am currently participating in a year long Narrative Therapy Diploma program (until March 2007). As a means of developing our skills, the faculty requires that we record and review our therapeutic conversations regularly. This means I may record (audio or video) some of our sessions and listen/watch them myself to critique my own work. Recorded sessions are not a requisite to us working together. You may decline consent. Tapes are stored in a locked cabinet to which only I have access. They are recorded over once reviewed.

The next new paragraph is about replicating people’s stories outside the context of the therapy room. Though this does not break any privacy laws, and consulting a supervisor is deemed professional, I often wonder if the general public knows this. I even supply names of the therapists I meet with for ‘peer supervision’ in case anyone knows them and this may affect their decision in granting permission:

Though I am bound by the ethics of confidentiality, it may be helpful for the following professional reasons to share stories of people that I work with: in peer supervision (with Eileen Hurley, Michael Boucher, Ted Aman and Gene McCabe, John Karl), in teaching contexts (myself training other counsellors), and in the writing assignments of the Narrative Diploma Program noted earlier. I never use names or other identifying information, so this does not conflict with privacy laws. However, ethics of collaboration guide me to still request consent. For example, your story is yours and not mine to represent unless I have your permission.

I committed to a further addition to the welcome letter after reading and reflecting on Sue Mann’s (2000) article Collaborative Representation: Narrative ideas in practice. I realised that the only bit of paperwork I had not previously been transparent about was the insurance claim form that I am obligated to fill out and send to the insurance agency. Within these forms is a section for ‘diagnosis’ and I realised that filling this out on my own did not sit right. When I made a commitment to be transparent about how I fill out this section of the insurance claim form, I decided to add a further paragraph to my welcome letter. This is what I added:

If I am billing your medical insurance for our meetings, please note that I am required to bill under a diagnosis code. The most common codes I use are adjustment disorder with depressed mood or with anxiety. I understand that circumstances in our lives are always changing and we are always adjusting. Yet, ‘disorder’ would not be a word that I would use if not required. Other than this mention, I usually complete this billing form outside of our therapeutic meetings. Please feel free to ask me any questions about this or let me know if you want to participate more fully in completing the billing form.

All other paperwork is written in collaboration. Notes (that I have asked permission to write) and documents that are created during meetings are often copied and taken home by the families consulting me. Letters to other agencies or documents needed for other services are written together during our meeting. Letters to doctors are written as therapeutic letters to the person consulting me with doctors copied in.

There is one final piece of paperwork that I will mention here. I have recently created a questionnaire to assist me to take care with how to relate to those who have consulted me in counselling if I meet up with them in public settings. It is completely optional whether people fill out this questionnaire and return it to me:

The idea for the following questionnaire came out of an assignment within my training program. I began to worry about how I ought to relate to you when we bump into each other out and about. My concerns involve making sure people feel my caring and thoughtfulness, while at the same time protecting their privacy. I want to be considerate, but am worried that I haven’t
thought of all possible considerations. I am interested to learn what you think and will appreciate any ideas you have. The information I gather will guide me in my work with families and individuals for years to come.

1. What would you like me to be mindful of when I meet you outside my office?

2. Do you want me to acknowledge you? If yes, in what ways would you prefer that I acknowledge you?

3. Would you like to be introduced to friends and family if they are with me? How shall I introduce you?

4. Try to imagine that we meet in a grocery store or park after we haven’t met in session in my office for a long time, what – if anything – different would you want me to be thinking about?

SUMMARY

In this article, I have attempted to share my historic and current hopes of being a hospitable therapist. I have talked about how my guests’ comfort guides my marketing materials, my office and my paperwork. I am constantly learning and acting according to these learnings to increase people’s comfort. This process is an enjoyable one for me, as I realise that, while I am not making pizza in the Bronx, I am not so far removed from my Great Grandma Frances. In fact, she is more present to me than ever!

NOTES

1. Of course, even with significant practices of hospitality, there will always remain a power differential in therapeutic relationships. I have found Michael White’s chapter on ‘Therapeutic relationship’ in Narratives of Therapists’ Lives very helpful in relation to this. In this chapter, White discusses a ‘two way account of therapy’ that intends to ‘undermine the rigidity of the power relation of the therapeutic context’ (White 1997).

REFERENCES