

Understanding Insight



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Before being introduced to insight thinking, I was what gets called in the trade an ‘eclectic’ therapist. Among a variety of other tools, I often used an assortment of relaxation and stress reduction exercises with my clients. These exercises were used as precursors, to help the person to clear their mind to make room for something else, generally my instruction, suggestion, or question. Fairly often, though, I would experience a bit of professional embarrassment, because after experiencing a moment of true relaxation, my client would feel better without any other tangible intervention from me. They simply needed a moment to put aside their troubling thoughts. Looking at these results again after learning more about how insight works, I saw something differently. I realized, first of all, that letting go of our stream of worries is healthy and natural. I also saw that oftentimes this by itself is all we need. This was a freeing moment for me. The more I thought about it, the more I understood how much sense this makes, how consistent it is with how people work.

Along with relaxation exercises, I sometimes used hypnotherapy. Much of the old style approach to hypnosis is to get the patient into a deep, relaxed, inwardly focused state and to then give them a suggestion or instruction. One of Milton Erickson's common suggestions would be to say something to the effect of, ‘You have a conscious mind and you have an unconscious mind and your unconscious mind is very wise. So while you're pleasantly sitting in this trance, your unconscious mind can solve the problem.’ The idea is to give a general instruction to put aside conscious thinking and let another part of the mind handle the issue. The therapist does not necessarily know what is going on inside of the client’s head, but this does not matter. My understanding of insight gave me a way of better understanding this phenomenon. It is clear to me now that this, too, is how human beings operate. When they release the obsessive swirl of thought, they have this ability to be very wise and sensible. This ability is innate and always present. As a therapist I don't have to create it and I don't have to hack through a jungle looking for it.



Innate Mental Health

I remember a time that really struck me, a few years ago, when I was in training for an insight-based approach to therapy. I, and several of my training-mates, were getting over colds, and of course we were all comparing the states of our relative illness and recovery. At the same time, one of the things we were talking about that weekend was our natural mental health. In the midst of this odd juxtaposition, I had a moment where an old idea shifted from being interesting to being something I saw as true for myself. What I saw is this: oftentimes when we discuss our health and our natural state, we view it as a continuum, with 'Health' on one side, and 'Illness' on the other. My own habits of thought were to see my natural state as somewhere in the middle all the time, trying to achieve a state of health.

What struck me on this occasion is that, even if you have a bad cold, even if your cold lasts for a long time, even if you have a cold that lasts for a year, you would never say that your natural state is to have a cold. Our natural state, our default state, is a state of effortless health, which returns naturally, on its own. Following on from that insight, I saw that the same can be said for mental health. Our natural state of mind is clear, healthy, and free. There may be some thoughts kicking around in your head, some things that are bringing you down that you have dwelled on for too long, or have made you depressed. This might continue for three months, six months, or a year, but make no mistake: it is not natural. This was a huge insight for me. It's not as though I'm sitting at 70% and have to claw my way back up to a miserable 87%. In order to reach my full potential, in order to attain my best state of mind, all I have to do is get out of my own way.

A quiet place for insight

In my profession there is the expectation that every time I meet with someone I document an intervention. When people review my clinical notes, they expect the client will present a problem and somewhere during the session I will say something that can be considered an intervention. Because this is the world in which I live, when I take notes I invariably get something that fills these expectations. I've



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noticed that one thing that helps when patients come to my office, is the casual, even cozy atmosphere where they can feel comfortable presenting their problems whatever they may be. I'll sometimes serve tea or a cup of hot cocoa, or in summer a really good root beer or iced tea. I liken it to making a space where the person can operate in their best and wisest self. Again, perhaps there is a bit of professional embarrassment in that sometimes they do their best when I do the least. In these cases my patients often return for their next appointment saying, 'You know I kept thinking about that thing you said last week...' and I often don't recall having said anything like what they remember.

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