

SAMPLE EMPOWERMENT THERAPY INTERVENTION

Awareness of Life-Alienating Systems (ALAS!)

ET proposes that, when relevant, therapists unveil and shed light on life-alienating systems that have a detrimental impact on clients' emotional well-being and physical health.

Life-alienating systems, also known as domination systems, are patterns that exist in the world and are internalized by people, preventing them from meeting their needs. When people are treated as if they don't matter, they start to believe they don't matter. For instance, I have worked with many Latina women who believed that their partners' and children's needs took precedence over their own needs. They longed for rest, space, and leisure, but they thought of themselves as selfish for wanting these things. Need deprivation and a chronic feeling of being overwhelmed often contributed to depression and anxiety in these women.

Putting clients' experience into a larger cultural and societal frame can help them understand that their struggles are not simply personal and that their distress is understandable given the circumstances. There are systemic issues at work, and their suffering is not a matter of personal deficiency.

An ALAS intervention flows out of clients' material during the session. We introduce it when clients finish talking about the topic, as evidenced by a halt of words, a sigh, relaxation of body posture, or another indicator. We begin by asking if we might share input about a societal issue. If they consent, we reference their words. We then describe the issue calmly, simply, and succinctly to prevent overwhelming them with intensity or complexity and to keep the focus on unmet needs. That is, we describe the phenomenon rather than naming it, since the name might stimulate shame, anger, or fear. For example, instead of saying "violence against women," we would call it "the lack of safety, respect, and care that many women experience in society and relationships." For extensive alternative descriptions for sexism and racism, see the end of this section. We then verbalize the benefit of being aware of the issue, ask how the client feels hearing our input, and develop strategies to help meet their unmet needs.

Here are two examples of ALAS interventions.

ALAS 1: The client is an African American nurse who works at a hospital:

CLIENT: I hate interdisciplinary meetings. The doctors don't acknowledge my contributions. I can't finish my thoughts when I talk. They talk right over me. They don't do that with the two white nurses in the team. . . I dread Wednesdays. I get an upset stomach on Tuesday nights. . . I wish it didn't affect me so much. I need to toughen up.

THERAPIST: <listens empathically until the client's words come to a halt and her body language suggests that she has experienced an organic shift>

I would like to point to a social issue. Do you mind?

CLIENT: No, please.

THERAPIST: You said you need to toughen up. Yet, I interpret your experience at those meetings as a societal issue. As you know, in many settings, women of color are not treated with respect and recognition. Ongoing lack of respect often impacts not only our emotional well-being but our physical health. Having physical symptoms does not mean that you're not tough. I think it helps to acknowledge the potential impact of this issue in order to defend against it. How do you feel hearing this?

CLIENT: Yes, I know it's a social issue. It's overwhelming. Where do I begin . . .? But yes, it's good to name it and to understand how it affects people.

THERAPIST: Yes, that's the first step. Now, we can develop strategies to address it.

ALAS 2: The client is a 17-year-old Mexican American male. His parents are Mexican, and he was born in the United States. In previous sessions, he has talked about being mocked about being Mexican by some white teenagers at school—"They call me beaner." He vehemently rejects his Mexican heritage. In this session, he talked about his struggle relating to his peers. When his words came to a halt, the therapist said the following:

THERAPIST: I'd like to say something about an issue that teenagers of Mexican parents go through sometimes. May I?

CLIENT: Yeah.

THERAPIST: You said that you're ashamed that your parents are Mexican and that you don't want anything to do with the Mexican kids at school.

CLIENT: Right.

THERAPIST: And you said that white kids don't trust you, so you feel like you are in 'no man's land.'

CLIENT: Yeah.

THERAPIST: I want you to know that you're not alone. Sometimes, Mexican American teenagers feel ashamed of their roots because of the lack of respect they experience from some white kids. This affects their self-acceptance and their sense of belonging. It helps to talk about it to be able to overcome its impact. How do you feel hearing this?

CLIENT: Bad. I don't want to talk about this. I don't think it will help.

THERAPIST: Mm . . . "What's the point?" There's nothing you can do about it. It's kind of a powerless feeling. Is that what you mean?

CLIENT: Yes.

THERAPIST: I have an idea. Do you want to hear it?

CLIENT: I guess.

THERAPIST: When you have situations like that with kids at school, we can talk about how this affected you. How it affects how you feel about yourself. That would be a first step toward feeling better. How does that sound? Would you be willing to try it?

CLIENT: OK.

Once therapist and client uncover systemic impact, they endeavor to develop strategies to address it. Take the two examples from the assessment section above. Aisha developed a “new relationship with work” that included, among other things, limiting the number of meetings she set up each day and establishing priorities every morning versus constantly trying to clear the to-do list. In my case, when I noticed fatigue and shallow breath at work, I stopped and took a break. During the break, I connected with the expressions of regard and recognition I did receive at work and reminded myself that I didn’t need to prove my competence.

In addition to awareness and strategies, liberation from internalized notions that affect one’s well-being requires mourning; this can be done individually but is more easily accomplished in therapy groups.

A word of caution! When making an ALAS intervention, it’s important to tread lightly and to make sure that our words flow from the client’s material directly. We are not indoctrinating clients by introducing a structure of thought separate from their reported experience. And we are not defining clients to themselves. Our social justice efforts are to be done outside the therapy room.

As with any and all interventions, we use our judgment in terms of pertinence and timeliness.

NEEDS-BASED DESCRIPTIONS OF PREJUDICE AGAINST WOMEN

- ◇ Relating to women without respect, care, and consideration.
- ◇ Relating to women without respect for their autonomy, freedom, and self-determination.
- ◇ In partner relationships, relating to women without respect or care for their physical and/or emotional safety.
- ◇ Lack of trust in women’s faithfulness to their partners.
- ◇ Lack of consideration for, and equal valuing of women’s needs independent of those of men.
- ◇ Lack of respect for, and judgments about women’s sexuality and sovereignty.

- ◇ Lack of appreciation of women; assessing them by standards that don't accept and value their way of being in the world.
- ◇ Lack of appreciation of women's contributions; not valuing them or deeming them important.
- ◇ Lack of equality; viewing and treating women as less intelligent and capable than men.

NEEDS-BASED DESCRIPTIONS OF PREJUDICE AGAINST BLACK, INDIGENOUS, BROWN, AND ASIAN PEOPLE

- ◇ Relating to people of color without respect for their dignity.
- ◇ Lack of equality and appreciation; relating to people of color as less intelligent or capable than white people.
- ◇ Lack of equality and appreciation; not acknowledging or valuing the contributions of people of color.
- ◇ Lack of trust and empathy; not believing or validating the reality of how often people of color are treated differently than white people.
- ◇ Lack of trust; assuming that black men are violent and dangerous.
- ◇ Lack of trust and equality; not trusting people of color and seeing their common humanity.
- ◇ Lack of empathy; attributing all responsibility for the suffering of people of color to them, without acknowledging the context and circumstances that lead to suffering.
- ◇ Lack of trust; viewing people of color as morally deficient.
- ◇ Lack of appreciation; viewing people of color as lacking in refinement, grace, or beauty.