You’re sitting with a client, fighting your own feelings of frustration and boredom. She’s telling you the same sad story that you heard last week and the week before. She’s explaining to you, again, what’s wrong with her and why she can’t change. You long to be able to help her, but nothing that you say seems to get through. You start wondering if someone else could do a better job. You even wonder if you should refer her to a physician for some medication, which shows you’re really starting to get desperate!

You know that not every session needs to bring dramatic change. Some clients just need to sit with difficult feelings without much seeming to change from week to week, and yet their sessions still feel productive to us. We appreciate their willingness to remain engaged in their own inner exploration, however difficult it may be, and we can tell they appreciate our willingness to hang in there with them. Even if we cannot foresee the outcome, we trust that eventually they’ll work through their trauma or gain confidence or slowly learn whatever it is they need to learn—through the safety and empowerment of their alliance with us.

But then there are sessions that feel like we’re slogging along with lead weights around our feet, getting absolutely nowhere, even slowly. It’s as if the client keeps hovering around a doorway but never goes through. She can talk about her problems and struggles all day long—and frequently does—but there’s something in this “talking about” that never really drops down to a deeper level or shifts into another gear.

How great when a client’s eyes light up, her shoulders lift, her breath deepens, as she “gets it” — she makes important connections, sees her life in a new way, feels fresh hope. These are the
moments we live for as clinicians. But what about the clients who appear mired in the same old emotional habits session after session? They keep telling the same stories, using the same labels and categories for what happened and what it all means—over and over. These stories are like journeys on a well-worn road, filled with ruts, on a path that doesn’t lead anywhere except back on itself.

Clients need to tell their stories, of course. It’s not stories themselves that are the problem. It’s when the stories manifest habitual categories, ways of labeling and ‘explaining’ one’s experience, that the client’s process can get stuck. This is because the labels and categories with which the client is talking about the problem are actually part of the problem.

Eugene Gendlin, the pioneering philosopher and psychotherapist who is best known for his book *Focusing*, illuminated this key point in his 1978 article, “The Body's Releasing Steps in Experiential Process.” “We think in the terms and pieces of the problem as we have it cut up,” he wrote. “And it is just these terms and pieces that would change if the problem moved toward resolution. Therefore, there is often no way to think about a problem except in a way that simply reinstates it in the very act of thinking it, and draws it, in heavy lines, all the harder.”

Clients who are getting nowhere have sliced up their world into categories that “explain” their problem: “He betrayed me . . . I’m not the kind of person who can . . . It was a rejection . . . It’s probably that I . . .” Even as they’re doing their best to think their way through their issues, they keep going down familiar pathways of thought and behavior that circle back to the same place over and over. So a person tries to solve her problem with loneliness by getting people to like her, when her very efforts to be likable are what put people off. Or a person works hard to arrange and organize himself out of his difficulties, when it turns out that those same difficulties
essentially arise from a tendency to arrange and organize instead of allowing his own genuine motivation to emerge.

No wonder so many clients feel frustrated, helpless, and angry—as if they’re going in endless circles or digging deeper in a hole they can’t get out of. This stuckness isn’t caused by some personality defect or innate inability. It’s simply a consequence of being “inside” the problem, imprisoned within their automatic habits of thinking, feeling and verbalizing.

Thinking is not the answer because, as Gendlin points out, if we only have our familiar categories and labels, thinking will just reiterate the problem. Gendlin also proposed the solution: a fresh, immediate experience that takes us outside the box of our narrow, frozen ways of experiencing life. He called it a ‘felt sense.’

Felt Senses Are Breakthrough Moments

As a young man in the 1950s, Eugene Gendlin headed a research project that has had a profound impact on nearly all the somatically oriented, mindfulness-based work being done today. The research showed that clients who freshly referred to ongoing felt experiencing during therapy sessions tended to have significantly more positive therapy outcomes than clients who merely talked about their problems or their emotions. At the core of Gendlin’s research was the discovery of a new type of experience that he named a felt sense. A felt sense is a freshly forming, bodily sense of some life situation—not the same as a simple emotion or thought. Gendlin developed a method for facilitating felt senses: the Focusing process.

When a felt sense forms, it is a breakthrough moment that takes a person outside his usual concepts and habitual categories. Felt senses are paradoxical, surprising; they take us somewhere unexpected. They are not what we think. We speed up to think; to get felt senses, we slow down.
A transformational felt sense has three crucial characteristics that distinguish it:

**Felt senses form freshly.** A felt sense can’t be the chronic ache in your shoulder or gut that’s been there all week. For a felt sense to emerge, there needs to be an intention, a pause, an invitation, such as “Let me see. . . . How am I feeling about what happened?” As Gendlin reminds us, feelings aren’t always “discovered,” as if they were buried or stored; they can also form freshly.

**Felt senses are “of a whole situation.”** Like the proverbial picture that’s worth a thousand words, a felt sense is an intricate whole that sums up, captures, includes, contains, all the aspects of a situation at once. Those aspects can then be unfolded or unpacked in a way that’s quite different from just having emotions or talking about a problem.

**Felt senses have a “more than words can say” quality.** A felt sense contains so much that is subtly uncategorizable that it takes time to find an apt description for it. Often a single word is inadequate and a pair of words is needed instead, like “jumpy queasy” or “tight constricted.” Metaphors and similes may be useful as well, such as “like a knotted rope” or “like a heavy boulder.” Even after a description is found, there’s typically a sense that there’s more that remains unspoken.

What does this mean for a clinician? Two things: We need to recognize the felt senses that arise naturally, helping clients stay with them despite an understandable resistance to dwelling with an experience that is usually murky and hard to describe. And we can help the client invite felt senses to form—instead of, or in addition to, the habitual stories and “It must be…” explanations that clients can get stuck in. Inviting a felt sense is like a 90 degree turn: Instead of following your familiar, habitual superhighway of concepts, let’s take this turn into a quiet pathway in the forest where we may encounter something surprising that takes us to a new place.
Felt Senses and Emotion

Although felt senses arise in the body, they don’t work the way emotions do. We’ve all learned to lean forward when clients cry, and sit up in silent applause when clients allow anger to break through. But sadness, anger, and fear can be part of a repetitive cycle, and sometimes emotional expression is just another way to be stuck. And while emotions serve the vital function of weaving us together in our humanness, felt senses do something else—they take us to the place where we’re unique, where our response to a situation, like a fingerprint, is our own and unlike anyone else’s. So with an emotion, a client can say, “Of course I was angry, wouldn’t you be?” Or a therapist can say, “If something like that happened to me, I’d be sad. Are you?” But it’s through the uniqueness of the felt sense that a client can break through to a new way of experiencing a familiar situation, and the new behavior that emerges. “It’s a gripping in my stomach like a tight fist… I thought it was anger but it’s more than that…”

Emotions naturally narrow our awareness: when I’m sad, my attention zooms in on the situation I’m sad about; when I’m angry, my attention focuses on what makes me angry. If I have to mobilize resources to fight or escape, this narrowing is extremely helpful—it lets me shut out what’s irrelevant to the charged situation. But felt senses do the opposite. Instead of a response to immediate danger, felt senses widen our awareness to enable us take in the complex whole of a situation and its many interconnections. To get a felt sense, we need to feel fairly safe, not under threat. But when we do get a felt sense, we are in touch with a very wide field of knowing, more than we had realized we knew, and this wide field of knowing is part of what takes us to a new place.
Felt Senses and Change

Perhaps one of the most surprising things to learn about the felt sense is this: by the time the felt sense emerges, the change has already happened. We’re not just on our way to a new place; we’re already there. The change just hasn’t manifested outwardly yet. Imagine an artist staring at a painting with the feeling that something more is needed.

At first the artist just feels stuck, frustrated. Thoughts like “this is crap” and “just give up” may pop up. If she forces herself to paint anyway, she feels it’ll come out wrong. She stares at the canvas. . . Then, if she can slow down and become attuned enough to her own experience, she may get it: the immediate felt sense of what the painting needs. It’s not a rational thought, not something she can explain, but a sensing of a place inside that she can paint from. She hasn’t yet lifted the brush, but her inner state and her body have completely changed so that when she begins to paint again, she inhabits a new world of fresh colors, shapes and possibilities. Getting felt senses in psychotherapy taps into the same ability that creative artists use to go beyond what’s ordinary and conventional. Felt senses involve dropping down below language to the creative soup that lies beneath—like a source of fresh life. Something comes that both surprises us and feels completely right.

Daniela and the Giant Squid

Daniela comes in for a session after several months away from therapy. She has been spending long days caring for her mother, who has a terminal illness. Her face looks drawn and weary, and she sits down with a deep sigh.

“It’s this overall feeling of exhaustion, just too much exhaustion. I can’t deal with it. It’s all through me, everywhere. I’ve got these dark thoughts, heavy emotions, my body is exhausted.”
Imagine two paths this therapy session can take. In one, the client talks more about her days with her mother, her need to put her own life aside, her ambivalence about giving so much to her mother, how hard it is to drag herself out of bed in the morning, and so on. The therapist will sympathize, say it is all very understandable, and perhaps help Daniela find some self-care techniques.

In the other path, the therapist, after offering empathy, invites the client to get a fresh, immediate felt sense of what she is experiencing. “See if it would be okay to get a fresh sense of all that, how it feels right now.”

Will the client take the invitation? This is a key moment: the client’s willingness to pause and sense inwardly, to allow a felt sense to emerge. In this case, the client did so: staying silent for a while, eyes closed, inwardly sensing.

“It’s like a giant squid,” she said at last. “It has its arms wrapped around every part of me.”

Whoa! Where did a giant squid come from? The reader may be surprised, but the therapist, experienced with Focusing, has learned to expect this kind of non-logical shift. No one could have predicted a giant squid—but when felt senses are invited, one learns to expect the unexpected.

As for where it came from… the giant squid is Daniela’s description for what she is feeling in her body. She started with a sense of exhaustion, she paused and invited the felt sense of it, and waited until she got the most accurate and fitting description for what she was physically feeling—which turned out to be: “It’s like a giant squid with its arms wrapped around every part of me.”

This is not the logic of thinking and analyzing. It’s the inner logic of her process. This “giant squid with its arms wrapped around every part of me” is what the whole situation feels like. Not
just what “exhaustion” feels like, abstracted and separated from her life, but how this exhaustion feels, this whole taking-care-of-my-mother-day-after-day exhaustion. Rather than getting more abstract, the felt sense takes her down into more specifics, precisely feeling how this whole thing feels, right now.

Again, there is a choice. The client and therapist could start talking about this image, thinking about it, discussing what it means. (Maybe the reader is tempted to do this as well!) Why a giant squid? What does that mean? How is it relevant? That is one very familiar road. But staying with the felt sense means not taking that road of thinking and analyzing. It means continuing to sense the immediate felt experience—which is likely to change.

“It’s loosening,” says Daniela, eyes still closed. “As soon as I acknowledged it, it started to loosen. It’s still there but not so tight.” When a felt sense comes, along with a fresh metaphorical description that fits it exactly, there is often a relief of some kind. Forward movement is happening. The arms of the giant squid are already loosening; getting a fresh felt sense and finding a fresh metaphor to describe it has already brought change.

What kind of change is this? What does it mean about Daniela, her life, her mother, and so on? We don’t know yet. Quite often we can know that a change has happened in microprocess, long before it shows up in a client’s life. We see moments of relief and release, with physiological indicators such as deeper breathing (even a sigh of relief), shoulders dropping, pinkness in the cheeks. There are shifts in the felt sense: loosening, opening, lightening. To ask at this point, “What does this mean exactly?” would be to go down the road of logical analysis, and might even stop the change. Instead, we will simply accept and stay with what is happening… because there is more to come.
The therapist has a suggestion. “If it feels right, maybe you could sense what the squid is feeling or doing, from its own point of view.”

Daniela still has her eyes closed, her head tilted to the side, as if she is listening to very quiet sounds that only she can hear. She is sensing, in her body. She says, “It’s protecting... something precious.”

To the reader, this might sound frustratingly vague. Protecting what? What does this mean? But this is how new process emerges in Focusing: not in clear explainable sequences, but bit by bit. Imagine the outlines of buildings emerging from a foggy city skyline. We see at first just that something is there… then that they are buildings… then that one of them is a famous landmark. In Focusing we learn to be patient with what first comes, because it is the first inkling of what will later become more clear. If you can’t allow vagueness, you won’t get the treasure. What’s already clear, known, and easy to explain… is dead. Life and change comes forward through the not-yet-clear.

The therapist does not say to Daniela, “What is it protecting?” Questions are pushy; they are likely to shut down the process. Instead the therapist waits. And in a minute another step emerges. Daniela says, “It’s protecting something precious in me—something precious—ah!—my own life!”

Tears come to Daniela’s eyes. She’s not sad, she’s deeply touched by this wellspring she is feeling in herself. As she senses what the “giant squid” has been protecting—her own life energy and purpose—she can feel that energy freshly in her body now. All her own life momentum, set aside indefinitely while she cares for her mother, is still here, protected and guarded. It isn’t gone, or shriveled or depleted, as she might have feared it would be. Her own life is still here, being guarded for the day when it can be fully lived again.
Daniela opens her eyes and smiles at her therapist, who smiles back in a shared moment of deep satisfaction and awe. Who could have known at the start of the session that inside the exhaustion itself would be discovered this source of renewed life energy? Certainly we could not have gotten there through logic and analysis.

“I feel so much lighter in my body now,” Daniela says. Indeed, she looks like a totally different person than the one who walked into the room. She will take this feeling of lightness and energy back to her caring for her mother. It’s obvious how much this will change how her experience with her mother will feel—for both of them. The change is surprising, paradoxical, unexpected—but palpably real.

The shift into a felt sense begins in a pause. The client could keep talking, thinking, telling stories, but instead—perhaps at the invitation of the therapist—he pauses to sense how “all this” feels right now. He may get quiet, grope for words, look down or away, gesture toward the middle of the body, and use words like “kind of” or “something” or “here.” As therapists, we can’t afford to miss those moments or rush past them. In fact, we need to become guardians of these moments of ambiguous searching and still-to-emerge possibility, like a gardener might protect a new green shoot just emerging from the soil. And we need to encourage them, invite the client to slow down and pause, saying things like, “Let’s stay a while with this, just getting the feel of it.”

Felt senses are not limited to one modality of therapy. Whether you work psychodynamically, somatically, cognitively, or eclectically, there is always room for moments of pausing and fresh sensing. To bring the power of felt senses into your own work, the most important thing of all is your own comfort with the unclear, murky, hard to describe dimension of experience. You need
to check your first impulse, which might be impatience or irritation with what’s vague and unclear, and learn to seek out and celebrate it instead. You need to have an imaginative empathy that follows where the client is going without having to understand it at first. You need to not only tolerate the unknown unclear, you need to fall in love with it, find it unbelievably exciting and thrilling, because you have learned that the murkiness is exactly where we find the opposite of the same old same old all over again. This is where the veils pull back, this is where the magic happens, this is where the client’s life comes unstuck and something really new can happen—not just someday, but right here and now.

Ann Weiser Cornell is the author of *Focusing in Clinical Practice: The Essence of Change* (W.W. Norton, 2013) and *The Power of Focusing*. Through her organization, Focusing Resources, she offers more than 85 Focusing seminars each year. [www.focusingresources.com](http://www.focusingresources.com).