

Labyrinths in Counseling Settings

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An Introduction:

Looking back on over a decade of using labyrinths in counseling, all indications point to the powerful role they can play in facilitating the therapy process.

I use a finger labyrinth in counseling at the same time as my clients do in order to promote relaxation and the resulting increase in awareness on both our parts. The finger labyrinth helps me be a better listener and helps take a newer client's attention away from the typical reluctance around talking about their issues. Moving a finger through an inlaid wood path (with eyes open or closed) allows both of us to relax and focus. When this happens, clients become much more aware of their own issues and the blind spots that tend to keep troubling patterns locked in both mind and body. The therapist, in turn becomes more capable of being "tuned in" intuitively to the client's process and able to facilitate change more readily.

The use of finger labyrinths also helps break down the "professional barrier" that we as therapists are taught (in graduate schools throughout the country) to put solidly in place and keep sacred. By keeping that barrier in place, clients are kept from feeling on an equal footing with their therapists and therapists therefore can maintain the mental illusion that they don't have any of the problems their clients are having difficulty with. This separation or hierarchy between client and therapist, in my experience, puts the therapist on a pedestal in the client's eyes, which down the road has great potential for dependence on the therapist, which can lead at best to long-term therapy and at worst to an abuse of power (consciously or unconsciously) on the therapist's part.

In my practice, I opt to create a healthy footing between myself and my clients by letting my clients know up front that he or she has strengths and weaknesses and I do as well. I model this when I work with a finger labyrinth right alongside them. In this more equal environment, the barriers to effective communication tend to break down, which leads to mutual trust. It has been my experience that rather than hope that trust builds over time (sometimes months or years) finger labyrinth usage tends to speed up this process significantly as the barrier to trust and effective communication (through establishing this hierarchy) is not raised and fortified in the first place.

With the emergence of managed care insurance guidelines in the counseling field, clients are allotted a certain number of sessions to "get better" (usually somewhere between 8-12) and those counseling sessions are paid for by insurance. If clients need more than 8-12 sessions, they must pay for their own therapy or have the therapist petition the insurance company for more sessions. This, in my opinion, makes the use of finger labyrinths that much more valuable, especially to those counselors who are directly tied to managed care for their financial survival. In my experience, finger labyrinths in conjunction with conventional talking therapies tend to foster issue resolution in a speedier timeframe.

I believe (on a more mysterious level) it is also incredibly important to acknowledge the unseen forces that are present in the therapy room (to assist with the unfolding of issues and the therapeutic process). The use of finger labyrinths helps both client and therapist tune into these forces (via the relaxation the pathways afford) to receive the "aha" answers to problems both are carrying with them into the therapeutic relationship.

Case 1:

The following is an example of using a 2-person, mirror-image, wood finger labyrinth design in therapy. Clara, a very shy, forty year old, woman from Scotland, came to the first session saying in a very meek-sounding voice, "I don't know what I expect from this, I have nothing to say."

I proceeded to ask her basic questions about her life and family and found that I was getting one or two-word answers. I decided to try using an IntuiPath® with her (a mirror-image, 2-person, 2-handed, double wooden finger labyrinth design).

I took a few moments to explain that it was a relaxation device that might help her to communicate with me. She agreed, and we both took a few deep breaths and began to fingerwalk our own labyrinth design (connected by the same piece of wood), each at our own pace. Clara began to talk about how her schoolteacher colleagues were very social with each other, and how she felt like an outsider with them. She found it hard to make friends. She smiled after several, descriptive, paragraph-like responses ushered forth from her lips, and she added, "I guess I do have something to say."

After a few sessions, we addressed her low self-esteem and the way her alcoholic father contributed to its formation by discounting everything she said as a child, even in public. This subjugation to her father's will (and to a degree, her mother's as well) continued into adulthood on her yearly visits to Scotland. Using the double labyrinth (around the fourth session), she spontaneously verbalized the negative affirmation "I am a weak and uninteresting person." We fingerwalked a bit more after that, and I asked her to "allow" a positive affirmation to make itself present to her conscious mind. What presented itself was "I am competent in all social situations." I asked her to say this out loud and see how it sounded. She said it quietly, with a slight crack in her voice. I suspected (because of the difficulty she had in saying this statement with decisiveness and gusto) that we had hit upon some early, negative self-statement that was replaying itself in all of her social interactions, causing her to feel weak, uninteresting, and therefore socially inept. I asked her to take several deep breaths and after each, say the positive version again loudly like she meant it. She did so, and her voice became stronger after each utterance of it. Between sessions, as she was instructed to do, she used this positive affirmation throughout each day, and when she returned to session (after a several-week hiatus which allowed her to return to Scotland for her yearly visit), she reported great changes had taken place in her courage and competence in social situations. She even reported that her relationship with her father shifted to a more satisfying and equal emotional footing. In total, I saw Clara for 12 sessions, and her improvement in self-esteem was maintained as reported by her in a six-month, one-year and two-year follow up.