

Counselling: Love and Loss April 2016

Presentation to the NWRPA

My original idea title was *Retirement*. This will be my topic but I changed the title because we can be faced with the loss of our counselling work in many ways. We may find other work which appeals to us more. We can retire, we can be too physically or mentally ill to continue. We can fall out of love with counselling or have to work in ways we cannot live with. I could have lost counselling in these other ways in the past but fortunately, seven months ago, arrived at the position where I could make an unforced choice to retire.

The other expansion of this title is that our love of counselling means we are constantly working with loss. It is a constant theme for our clients. We work with the impact of deaths, divorces, illnesses, rejection and suicide in their lives. As counsellors we are not exempt from the trials of life. We have to deal with our own personal actual, prospective and feared losses. In the year of my retirement my mother died, my daughter was ill and I was planning to move house. I worked in an NHS psychoanalytic psychotherapy service which had been settled for many years but was beginning to feel the effects of NHS cuts and reorganisation.

I was a psychodynamic counsellor in the NHS for over twenty years. In the period leading up to my retirement last year I had a number of grumpy thoughts. These are not entirely rational thoughts.

- That my colleagues will treat my retirement as loss and grief and will be looking out for the signs.
- That my colleagues, like most counsellors and psychotherapists, often wrongly treat grief and loss as dynamically the same thing.
- That the healthy function of grieving tends to get overlooked compared to the pain of grieving.

Writing about loss allowed me to re-read Sigmund Freud's *Mourning and Melancholia* (1917 collected papers Vol IV pages 152-170). This has a continuing influence on thinking about grieving and loss. Freud has really helped me think about the complexities of loss; both about retirement and more generally. I am impressed by the influence this brief paper has had over the years.

Mourning and melancholia have many similarities. However there are profound differences. Mourning is a more normal state of grief from which it is possible to emerge whereas melancholia was the more pathological and depressed state where emergence is much more difficult. I am sure you have often encountered melancholia in your work. For my purposes today I shall select what Freud said about both mourning and melancholia.

Mourning is regularly the reaction to the loss of a loved person, or to the loss of some abstraction which has taken the place of one, such as fatherland, liberty, an ideal and so on. As an effect of the same influences, melancholia instead of a state of grief develops in some people, whom we consequently suspect of a morbid pathological disposition. It is well worth notice that, although grief involves grave departures from the normal attitude of life, it never occurs to us to regard it as a morbid condition and hand the mourner over to medical treatment. We rest assured that after a lapse of time it will be overcome, and we look upon any interference with it as inadvisable or even harmful.

The distinguishing mental features of melancholia are a profoundly painful dejection, abrogation of interest in the outside world, loss of the capacity to love, inhibition of all activity, and a lowering of the of the self regarding feelings to a degree that finds utterance in self-reproaches and self reviling, and culminates in a delusional expectation of punishment. This picture becomes a little more intelligible when we consider that, with one exception, the same traits are met in grief. The fall in self-esteem is absent in grief; but otherwise the features are the same. Profound mourning, the reaction to the loss of a loved person, contains the same feeling of pain, loss of interest in the outside world – in so far as it does not recall the dead one – loss of capacity to adopt any new object of

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love, which would mean a replacing of the one mourned, the same turning from every active effort that is not connected with thoughts of the dead. (Ibid p.153)

Let me come back to my grumps. The first one was one was *that my colleagues will treat my retirement as loss and grief and will be looking out for the signs.* These quotes from Freud on mourning and melancholia are about the loss of interest in the world, about the inhibition of activity, about preoccupation with loss and inability to find new loves.

As counsellors we need to be fully engaged with our clients, to be fully present. However I became increasingly preoccupied with retirement, the anticipation of my life changing, thinking about what I would lose, planning, daydreaming, and worrying to the point where my colleagues asked me to stop talking about retirement.

I am sure that this grumpy thought is paranoid although there is a constructive reframing to this. Ending our working lives is one the greatest changes in our lives. Mourning is inevitable and as Freud points out mourning and melancholia have a lot in common. There must be a risk of one turning into the other and retiring counsellors must be susceptible to depression. Therefore we should be looking for signs of depression in ourselves or others. We could also be aware of a lack of signs of mourning as denial would lead to acting out.

It is a well founded cliché that the ending of counselling is one of the most difficult times; for client and counsellor. In my last six months all of my clients would end before or at retirement. A significant number of these clients were people I had seen for counselling before. I had known some for up to twenty years. As you know ending counselling evokes other losses and so mourning and melancholia were present even more intensively than at other times in my working life. Working with this complex of personal and client loss was very demanding at a time when one of my deeper wishes was to slow down and disengage. Paradoxically I needed to let go of work in a healthy way at a time when my client work was at its most intense.

However part of this preoccupied mourning was not about the loss of old loves but also in finding new loves; the very direction for which successful mourning will take us. Working through mourning gives us back the capacity to be open to other loves. I spent hours on Rightmove, hours doing post retirement financial plans, hours imagining what new loves I might take up; being involved in politics, reading, guitar lessons and so on.

I did feel only partly present at work for much of the months leading to retirement. Indeed I experienced myself as being in a different world to my colleagues. They were being busy. I was intentionally and unintentionally was slowing down. This was partly due to a planned decreasing workload, partly to not wanting to have the sudden shock of a slower life after retirement.

This slowing down was also involuntary. Retiring is not just as social or psychological event. It is there as an acknowledgement that our physical and mental powers are waning. I was viscerally aware that I did not have the energy I had ten years ago; that I had to take more than a lunch break each day, that I sometimes could not carry on working, perhaps for a few minutes sometimes longer. Somewhere lurking there were intimations of mortality.

Other preoccupations lessened. I felt both relieved and guilty to be leaving at a time of cuts and reorganisation. My colleagues were worried about short staffing and future redundancies. I worked in a service that had been basically unchanged for twenty years with many long serving staff. There was a proposed reorganisation that could merge our psychoanalytic psychotherapy service with the local clinical psychology service.

Having less of the worries of working life was an unanticipated benefit. This gave me quite a sense of freedom. I worried for my colleagues but not with them. I did not have to worry about the impact of cuts, or redundancy or reorganisation. I would not have to adjust to the increasing demands of work with waning physical powers. To no longer have that background fear of losing job and income because of illness. While counsellors

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will have a good perspective on the probability of being sued or disciplined it is a continuing worry. One of my colleagues summed this up by saying *they can't touch you for anything now*.

Perhaps I should have been watching my colleagues for signs of mourning.

In this way the prospective lost object lead to a lightening of preoccupation rather than the deepening you might expect. There is another lightening burden which I found hard to write down because it goes against many of my professional instincts.

Freud will tell us that there is an aggressive component to the libidinal drive. Or in more Kleinian terms there is love and hate. The psychoanalyst D.W. Winnicott wrote a famous paper in 1949 titled *Hate in the counter-transference*. The abstract begins: *An analyst has to display all the patience and tolerance and reliability of a mother devoted to her infant, has to recognize the patient's wishes as needs, has to put aside other interests in order to be available and to be punctual, and objective, and has to seem to want to give what is really only given because of the patient's needs*.

To be able to treat patient's wishes as needs in counselling has been one the loves of my working life. It is also been very demanding. This is a burden we willingly and sometimes unwillingly bear; or in bad moments fail to bear. We get worried, frustrated and despairing. We take on what our clients need us to.

When I first thought about anticipated retirement it was about the preoccupied pain of loss; not the welcomed loss of a variety of fears and frustrations. While my career was drawing to a close a constant companion was the liberating, pleasurable and happy thought; a thought about the client work that was at the core of my love of counselling; that *after September I will not have to do this anymore*.

And of course there were a lot of other things that I did not have to do anymore. Writing case notes, meeting targets, attending meetings that do not make decisions.

My second grump was that *my colleagues, like most counsellors and psychotherapists, often wrongly treat grief and loss as dynamically the same thing*. Like most of my grievances the view I castigate is a view I share. However I would like to use this reservation to look again at Freud. My personal approach has been to use grief to refer to the impact of the death of a person we love and loss to refer to other losses.

Freud says (ibid p. 153) *Mourning is regularly the reaction to the loss of a loved person, or to the loss of some abstraction which has taken the place of one, such as fatherland, liberty, an ideal and so on.*

Hence mourning can be about other losses. I assume that for Freud the loss of love of these abstractions is rooted in a developmental process where later forms of loss built on actual or feared losses of parental figures in the oedipal period. The abstractions he writes about, *such as fatherland, liberty, an ideal and so on*, may be more than illustrative. Freud wrote *Mourning and Melancholia* in 1917 and he was profoundly affected by the First World War.

Hence a Freudian would have said in retirement I have lost people, the people I worked closely with for years, those I have worked with in the past, the clients I have known, the guy who delivers the internal post and so on. There are other losses too, Freud's abstractions. Retiring felt good. However a few weeks after I was gripped by a sudden and physical sadness while standing in the salad section in Tesco. My gloomy and sad thought was that shopping was now one of the most important activities in my life. I had lost the complex pleasures of counselling, lost the social status of being a health professional, lost the sense of making a valued contribution to the world. If people asked *what do you do*, the answer is I do the shopping. I was a pensioner, a person who used to be independent and look after others but was now an old person dependent on the State.

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Also loss is not just about people who die or other objects that are actually lost. Freud writes about another type of loss *the object has not actually died, but has become lost as an object of love.*

Retirement is an odd kind of loss. It is a loss of something that is still there. I still love counselling and the service I loved and worked in is still there. With retirement and other events in our life there are lost objects of love that are lost because we chose to leave them. Growing up and leaving home, having children and leaving the childless life, moving job, moving house and retirement.

The peculiarity is this. We have the first stage of mourning after the second. With most mourning we have grief after the death of a loved one. The process of mourning allows us to find the capacity to find new objects of our love. With retirement, and these other losses of choice we mourn in a back to front way. Seeking a new object of our love means creating a loss which we then need to mourn.

Which brings me to my final grump. *That the healthy function of grieving tends to get overlooked compared to the pain of grieving.* I do not mean that we do not attend to this but that as counsellors and psychotherapists we attend to our clients' distress more than we do to their happiness.

I would like to illustrate this with one personal example. For years I was frustrated that clients came for bereavement counselling too late, allowing their grief to get stuck and harder to change. After my wife died ten years ago my counsellors kept saying I could find bereavement counselling helpful. However I had no felt sense of wanting to do this. This came suddenly eighteen months after her death and off I went for counselling.

In hindsight I realised that I had gone to counselling both to mourn and to live life again. During the three months of counselling I went on my first holiday as a single person, damaged my car through over exuberant driving, had a renewed interest in my work, played my guitar again and saw more of my family and friends. Although I did not date for some time after counselling I began to imagine this. This felt like a fresh start to life, a feeling I have retained to this day.

This fresh start has helped my work until later in life. Some of the people I know have retired have done so after a long period in which their life has changed little; the same job, family and home. Hence the losses of retirement were balanced by new loves; my wife, her four children, two grandchildren and three pets.

My wife also shows the difference between choosing to lose a love and having a love taken away. She retired after being made redundant from a job she loved. I have adjusted well to retirement and she has found it more difficult.

After my own grieving it struck me that some clients may delay counselling because they become stuck with their grief. However others come at a time when they could use help in making this transition between living in the world of death and dying and returning to the world of the living. Incidentally this phrase of *living in the world of death and dying* I owe to a counsellor I worked with for a long time who also lost her partner.

Clients come for bereavement counselling consumed and preoccupied with the pain of loss; as Freud put it *the same turning from every active effort that is not connected with thoughts of the dead.* Through this preoccupation I would look for signs that they may have some wish to seek for new loves. Suddenly very bereaved people would talk about their love for their family, for friends, for charitable causes, of wanting to go on courses and surprisingly often, and an interest I share, their lifelong support of Manchester United.

I also had more pleasure in ending my work with clients than I expected. It is a well founded cliché that the ending of counselling is one of the most difficult times for client and counsellor. The therapeutic culture I have worked emphasises the difficulties of ending counselling and this was true in the period leading to retirement.

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The work I did with clients I saw for the first time was not significantly different from the work I had always done. However there was one exception. As psychodynamic counsellors we stick to our boundaries. For example offering twenty weekly sessions of counselling is something I have done for years and is part of the agreement I had with managers. However there is always the possibility that we may extend counselling or see people again. The end of a course of counselling is an *as if* reality. However with retirement there is no as if. The last session was the last session. This did sharpen the painful sense of ending with my clients.

As with many truths in counselling the opposite is also true. The ending of my client work with clients I had seen before was often pleasurable. There was the pain of loss. There was also a lot of mutual affection and sadness and it was a very moving time.

One unusual aspect of ending was what I thought of as my clients also retiring. When thinking of the end the clients who I had known before wanted a plan of what to do next. They wanted to see a psychotherapist, counsellor or psychologist or mental health workers. This changed over the last few sessions. These clients were veterans of mental health services and many had been long term psychiatric outpatients. They knew mental health services well and worked out that the available services would not meet their needs. They decided they could use their own resources and their and family and friends support to maintain the helpful changes they had made over the years. They did not want any further therapy or help from mental health professionals. Several actually said that they too were retiring from the NHS.

In my last few years of work these longer term clients increasingly asked me how I coped with the stress of my working life. I had worried that they were anxious about my coping with the work as I was older and had less energy and sometimes less tolerance of stress. I also worried that that answering these questions crossed a boundary of self disclosure. I had been trained and encouraged not to say much about myself.

However I think it comes from clients thoughts about counselling. This begins with appreciated being understood. They then think I understand them because I have the accumulated experience of listening to other clients who have been depressed and stressed and had similar experiences. Because they fear that their depression and stress is too much for them they fear it is too much for a counsellor and I have these other people doing it too.

This process is hopeful because clients feel they feel less alone with their distress and if I can bear the distress of this community of clients then they can do so too. They often ask directly what I do to cope. My answers have included talking to colleagues, supervision, changing out of my counsellors 'uniform' when I get home and, ultimately accepting that I will sometimes feel bad and cannot do anything about it. They rarely used this sage advice but did go on to work out what was helpful for them.

In the earlier quote Winnicott said the analyst *has to seem to want to give what is really only given because of the patient's needs*. Perhaps what happened later in my career, more so at the end and more so with clients I had met several times over the years, was an increasing mutuality. Some psychoanalysts have the view that the transference dissolves at the end of analysis and analyst and patient can see each other as the person they are.

In my last year of work I had an increasing sense of there being both client and counsellor and two people in the room. I am not a person centred counsellor but this may be what Dave Mearns and Mick Cooper mean by working at relational depth.

In writing this essay I have realised that this narrative parallels the process of mourning; being preoccupied with the pain of loss and finding it hard to enjoy my new life of retirement. In the first days of writing my wife pointed out how distant I was. In the later days of writing she welcomed that I was absorbed in something interesting. At first I wrote mainly of the pain of loss of retirement.

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I have been thinking of retirement for a long time. I first spoke about my plans with my wife and manager six years before leaving work last September. Since then I have found pleasure in anticipating the future. I have found the pressures of the present, particularly the burden of counselling work and the strains of being in the NHS, easier to bear. I have felt less guilt in adapting to the physical slowing down of aging; e.g. going for a walk to buy crisps early every afternoon of my working day.

I have felt an unexpected lightness of heart, and before I could control myself, once skipped through the office at work. Since retiring I have been reminded of my teenage and early twenties, the time when I would read a lot and listen to music. I have a lifelong love of melancholic music but find it harder now to listen to Bob Dylan. As I wrote this sentence was listening to *I'm Free* by the Soup Dragons from my *cheerful* playlist (one of my shortest.)

At retirement I was peopled out and wanted to move to a smaller house in a quieter area. We changed our minds and have moved to a house on a busy street which has space for us to pursue our interests and welcome guests.

This sudden change of mind fits in with an idea that had been growing for some time. Many of my thoughts about retiring were a reaction to working. While working I wanted to live in a small house in a quiet area, possibly in Anglesey. In hindsight this is an escapist fantasy, a reaction to the long held responsibilities of adult life; of work, family and home and caring for parents. It is an escapist wish to rest and to be free of all these adult responsibilities; the burdens of a working life, running a family home and having the responsibility of caring for others. I still have this fantasy of retirement but when faced with realistic decisions chose to move not far away, in a house with room for family and friends and activity.

I think this is a common fantasy. When my colleagues were preoccupied with the pains of work I think I carried this fantasy for them. I was fairly quickly shut up when I said that retirement may be less than ideal and sometimes cheered on as the rat that is allowed to jump off the sinking ship.

One of the last thoughts I had while redrafting this essay was this; in retiring we are saying to the people we work with that I do not want to do to do this thing that we have loved and needed to do. It struck me that this is actually quite unintentionally rejecting.

I used to work as a counsellor and chose to stop. A question my colleagues often asked was what I was going to do after retiring. This was the question of what kind of counselling work I would do. There seems to be some unspoken idea that you should not actually stop counselling. One exception was John Casson, a friend of the NWRPA, who said retire, go and do something different. But then he is recently retired himself.

I still feel like a counsellor. Since retiring last September I remained an accredited and registered counsellor with the BACP. At the end of March 2016 I was faced with filling my annual renewal form with BACP. I decided not to. It must be symbolic of something that I had to phone the BACP because nothing in their renewal form or on their website allowed me to stop being a counsellor. Perhaps you really are not allowed to.

The one place I still definitely feel like a counsellor is when I come to the NWRPA Friday seminars. For that evening I am a counsellor again. In mourning and melancholia we are in denial; we are obliged to cling to hallucinatory wish fulfilment and struggle against the reality of loss. The most constructive way to do this pleasurable and melancholic task is to carry on meeting you and being a counsellor again.