

- **IS CONTROL THERAPY FOR EVERYONE?**

On 2023-01-25 05:39, Farkas, Joshua wrote:

Thank you for the quick and comprehensive response. I am grateful for the expert and patient guidance, inspired by your generous character and kind disposition. THAT'S VERY SWEET. THANK YOU! You are not only blessed with the qualities and wisdom of a fantastic therapist, but those of a great teacher as well. VERY GENEROUS OF YOU

When clients come before a therapist, for whom would you recommend use of control therapy? REALLY, YOU'RE ASKING ME?!?!?! JOKE,...VERY FAIR QUESTION.... Now I understand you may be a little biased, YA THINK!?!? but that could just be myself projecting how I would feel were the roles reversed, ACTUALLY, A FAIR RESPONSE IS IT'S HARD TO NOTICE THE GLASSES THROUGH WHICH YOU SEE THE WORLD, BUT I REALLY DO TRY TO HONESTLY REFLECT ON MY OWN BIASES...AND I CAN SAY AS HONESTLY AS I CAN THAT MY GOAL IS WHAT IS BEST FOR THE CLIENT. AND I'VE DONE A LOT OF SELF-EXPLORATION ABOUT WHY THE TOPIC OF CONTROL IS SO IMPORTANT TO ME (IN MY LIFE) AND TO WHAT EXTENT IT MAY ALSO BE IMPORTANT IN OTHER PEOPLE'S LIVES. THAT IS WHAT THE DECADES OF RESEARCH WE HAVE DONE WAS TO EXPLORE! but when a client comes in, how do you know when CT is the best modality for the client? AGAIN , GREAT QUESTION, AND YOU STARTED TO ANSWER IT YOURSELF IN THE NEXT SENTENCE. During the initial intake/assessment, would you be listening for references to things being out of control, YES, EXACTLY, AND I'M INCLUDING RESEARCH THAT WE DID WITH PSYCHOTHERAPY PATIENTS (OF ALL DIAGNOSES) WHERE WE TAPED THE SESSION (WITH THEIR PERMISSION) AND THEN DID A CONTENT ANALYSIS OF THEIR SPEECH (NOTING WHEN AND WHERE AND IF THEY SAID THINGS WERE NOT IN CONTROL, THEY WERE FEELING OUT OF CONTROL, SOMEONE HAD TOO MUCH CONTROL OVER THEM, THEY WEREN'T EXERCISING ENOUGH CONTROL, ETC. I'M INCLUDING SOME ATTACHMENTS HERE THAT SHOW SOME OF THAT DATA. SO YES, LISTEN FOR "CONTROL ISSUES" LISTEN TO THEIR CONTROL STORIES: HOW DO THEY SEE THEIR EFFECTIVENESS IN INFLUENCING THE WORLD, OTHERS, EVEN THEIR OWN BODIES AND MINDS.

In short, when would you recommend it? Are there specific conditions, or is it more broadly applicable?

RESPONSE. AGAIN GREAT QUESTION. We've looked at control issues in a large diverse group of dsm diagnoses, On p. 259 of the Control Therapy Training Manual, it says

***Relevant treatment populations.*** As noted, each therapeutic/ theoretical orientation has a view of the client, even before the client arrives. What does your theory state about what causes clinical pathology? How much is under the person's voluntary control? Do you have different views of the relative percentage that is genetic/biological, cultural, psychological, depending

upon the clinical diagnosis: e.g., depression, generalized anxiety, panic attack, borderline personality.

You may also refer to pp 259 ff where these three FAQ are discussed:

FAQ 11: Does Control Therapy require that every client's presenting problem must be fit into a box in which control is the most salient issue? "

FAQ 12: Even if control issues exist, is it always necessary to discuss the issue in control terms with the client?

FAQ 13. You say that Control Therapy believes in "IN AND THROUGH." Is this necessarily the best approach for everyone?

or perhaps generically you would just recommend Control Therapy because it is effective treating many conditions. NO, THAT'S TOO SIMPLE. IT HAS TO BE TAILORED TO THE PERSON. AFTER ASSESSMENT (THE SCI, THE LISTENING TO THEIR SPEECH, UNDERSTANDING THEIR CONTROL STORY, (ALL WITHIN A COMPASSIONATE LISTENING STANCE) YOU WANT TO SET A GOAL WITH THEM; AND THEN UTILIZE AS APPROPRIATE CONTROL ENHANCING INTERVENTIONS THAT MATCH THE PERSON'S CONTROL PROFILE, THEIR GOAL,