

**Crafting Impactful Therapeutic
Dialogue Through a
Conscientious Utilization of
Priming & Dominant Thought
Theory**

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ABRIDGED HANDOUT

Things Not Shown to Have Significant Impact

Time in previous treatment
Tx approach – theory you use
Evidenced based approach or not
Degree type or field (Coun., Soc. W., Psych, MFT, D&A)
Degree level (B.A., M.A., Ph.D.)
Years of experience (most therapist plateau early)
Whether you did an intake interview formal or informal
Program CACREP, NASW, APA approved
48 vs 60 hour program
Going to trainings like this one
Use of Treatment Plan UNLESS!....

Things Shown to Have Significant Impact

- Therapeutic Relationship
 - Mutually agreed upon goal
 - Task agreement
 - Rogerian core conditions.
- Client willingness to try new things. (David Burns new scale)
- Hurting & paying/invested.
(Personally invested literally—collect those co-pays)
- Therapists' belief in efficacy of approach

Examples of Embedded Suggestions

"As you sit there and assess your situation, it is hard to...*imagine yourself doing something different.*"

"Right now, you are struggling to...*consider if a conversation could possibly impact the situation.*"

"As you...consider possibilities of how to handle this situation, it is difficult to... *hear yourself saying an assertive statement.*"

Well-stated empathic statements recognize and include:

- 1. The content or facts of the situation.**
- 2. The underlying emotion present or thought to be present**
AND/OR
The deeper personal meaning behind the client's statement.

"You have tried to have a child for quite some time and are experiencing much grief over the possibility that it may not occur."

"You are at your wits end with your children and are experiencing much anger at your husband for reinforcing their misbehavior."

"You are very distraught over the divorce from your wife. The marriage in which you have invested nine years of your life appears to be coming to an end."

Empathic statement + deficit

- ...and what you're looking for...
- ...and what you need...
- ...and what you're searching for...
- ...and what you want is...
- ...and what you require is...
- ...and what you desire is...
- ...and what you wish is...
- ...and what you crave is...

"You have tried to have a child for quite some time and are experiencing much grief over the possibility that it may not occur. As you talk about it now, it appears you are looking for...

...a way to begin resolving the enormous dissonance in you."

...other ways to fulfill your desire for a child."

...a way to move through your grief and begin readjusting to this reality."

"You are at your wits end with your children and are experiencing much anger at your husband for reinforcing their misbehavior. You strongly desire...

...a way to obtain support from you husband and to develop more effective methods of discipline for your children."

...to learn new approaches for managing your children."

...to release the emotional buildup that you carry." (Gives permission to let loose.)

Benefits of the added deficit statements:

- 1) Displays deeper understanding of the client's situation—improved empathy.
- 2) Provides direction to the dialogue. Breaks up empathic loops.
- 3) If not correct, does not matter. Client will correct & clarify.
- 4) Begins goal creation. Depending on how stated & situation, the prime is the goal.
- 5) Begins priming the client toward new things. Seeds future action.

How to Talk Positive to Negative Person without Them Knowing

Make an empathic statement and then follow it with a statement of how difficult it is to do..., or imagine..., or comprehend..., or consider... the very behavior the client is having difficulty doing or facing.

"I can tell you're deeply hurt by the loss of your boyfriend, and it's at times like these that it's so hard *to...imagine all of the other men available to date.*"

"You've wanted to divorce for a long time, but it's hard *to...comprehend reestablishing yourself with another partner.*"

"You're so angry with your ____ that you could really give him/her a piece of your mind. It's at times like these that you just can't...*imagine sitting down and having a mature conversation about this situation.*"

"At this time it appears that you get very nervous before a test, it's hard for you to...*see yourself sitting there calmly taking a test.*"

Pacing is the art of making a statement that tracks and joins the client's actions, thoughts, and/or emotions in the current moment.

Leading adds to the pacing statement an idea, suggestion, inquiry, etc. that encourages the client to consider new perspectives and actions.

General Formula For Creating Pacing & Leading Types of Responses

Physical Pace	Current State Pace	Emotional Pace	Lead>>Suggestion Prime
As you're sitting here	aware of your	disgust	thinking about... perhaps you might>Prime
As you are sitting here	getting in touch with your	frustration	& pondering the options... wonder what would happen if...>Prime

All priming statements should always be stated in the positive:

"Your situation is quite irritating to you and you are lacking the guts to speak out."

A much better statement would be:

"Your situation is quite irritating and you're searching for the best words to say in order to have a significant impact."

Negative: "You are hanging on to your grief."

Positive: "You are trying to...discover the best way for you to...move through your grief toward an acceptance."

Negative: "It hard for you to not let your anger take control of you."

Positive: "You are seeking to find a means by which you can...remain composed in these situations."

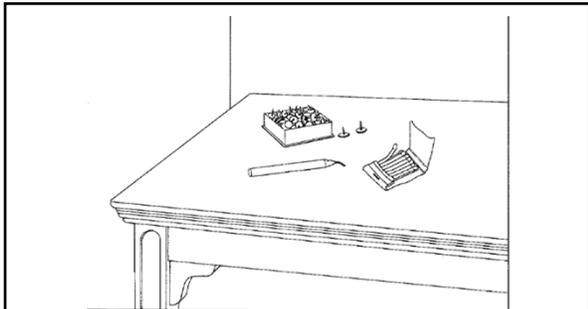
What's in a Word— A Lot

**The Underlying Meaning and Implications
of a Few Commonly Spoken Words**

Those asked with “bumped” said 10-15 MPH.

Those asked with “smashed” said between 30 and 50 MPH.

80% neutral observers guessed 20 miles an hour on average which was actual speed.



Duncker’s Candle Problem: Use the materials on the table to mount the candle to the wall and illuminate the room (1945).

Two groups of subjects were first told they were participating in an experiment about long-term memory. During this “study” they were primed in two different ways. (Higgins & Chaires, 1980)

Group 1
“...a carton of eggs...”
“...a tray of tomatoes...”

Group 2
“...a carton and eggs...”
“...a tray and tomatoes...”

objects
undifferentiated
linguistically

objects
differentiated
linguistically

Only 20% of the subjects in the “of” (undifferentiated) group solved the problem within 10 minutes.

However, 80% of the subjects in the “and” (differentiated) group solved the problem within 10 minutes.

**Language shapes perception.
Language shapes memory.
Words create “reality.”**

**You cannot, not manipulate.
You cannot, not prime.**

**The *only* question is:
In what direction am I priming my clients with my dominant thoughts?**

“When you had the urge to drink...”

vs.

“When you decided to drink...”

“When you decided to give into the urge to drink.”

vs.

“When you decided not to fight the desire to drink.”

When you say “WE” you

- 1. turn the session into a group project.**
- 2. take personal responsibility away from the client.**
- 3. misrepresent the therapeutic process and relationship.**

(A treacherous word with highly resistant clients!)

“How does that make you feel?”

Ideally Goals Should:

- 1) be in the positive. No stop-doing or not-do goals.**
- 2) include dominant thought words that trigger desired behaviors.**
- 3) be in present tense. Not “will,” “going to,” “should,” “try,” etc. (Explain to client.)**
- 4) be realistic & doable relative to client.**

Cartoon

Setting Goals vs. Solving Problems

Goal setters typically like to create new things; problem solvers like to improve on status quo.

Goal setters prefer to write a book, problem solvers would prefer to edit a book.

Goal setters prefer to score points (offense); problem solvers prefer to keep the opposing team from scoring (defense).

Goal setters are concerned with the direction things are going; problem solvers are concerned with what's currently broken and how to fix it.

Boss declares next year's goals, the goals setters are excited while the problem solvers ask when last year's goals are going to be met.

Goal setters tend to not see the problems at hand, get bored easily, and fail to tend to details.

Problem solvers fail to see the big picture, are leery of the untried, and distrust their instincts in new situations.

Goal setters are energized by goals and drained by problems; problem solvers are energized by problems and drained by goals.

Biehl estimates that between 60 and 90 percent of people prefer problem solving to goal setting.

Implementation Intentions

It is one thing to say you want to accomplish a certain task—the goal.

It is another thing to specify the exact moment where a shift in behaviors should be done in order to begin accomplishing that task.

With implementation intentions
“...mental representations of the anticipated situation...become highly activated and thus easily accessible.”

Gollwitzer

(research)

One group S prepared by writing the number “3” repeatedly on paper.

Other group prepared by repeating the mental programming statement, “*When the number 3 appears, I will respond particularly fast.*”

Results:

- Both groups responded faster to number “3.”
- S who repeated the mental programming statement responded fastest.

Why?

While repeating the number “3” raises awareness, it has no call to action—no planned response.

Stating, “*When the number 3 appears, I (will) respond particularly fast,*” has a built-in implementation intention—there is a definitive call to action at a specific time. The brain is directed to prepare *in advance* for desired action. Thus, behavior is primed.

The Direct Application of Priming and Dominant Theory as a Therapeutic Self-Change Technique

(Creating Implementation Intentions)

As a direct approach/technique works well for:

- Motivated clients who enjoy the counseling process and the world of psychology.
- Clients seeking practical, down-to-earth approaches. (Not enamored by intuitive, psychodynamic discussions in which therapists prone to engage.)

- 1. Explain the approach & theory**
- 2. Inquire as to client's current language**
- 3. Explain problems with current language**
- 4. Jointly develop a dominant thought statement**
- 5. Explain they must repeat**
- 6. Explain the backlash demons they will have to face & positive reactions to expect**

Demons to Face and Conquer

- 1. The negative voice**
- 2. Monkey mind**
- 3. No Instant Gratification**

Positive Reactions That Will Emerge

- 1. Delivering of better dominant thoughts.**
- 2. Subtle urges & intuitive nudges**

Conscious mind thoughts are more than mere mental ramblings; they are also programming, literally, the subconscious as to how to approach and solve problems. The conscious mind thought is the control panel we are given to control subconscious mental programming that controls most of our behavior. Words solve problems in more ways than you might think.

The subconscious is constantly seeking guidance from conscious mind thoughts. Once cued, it immediately begins necessary processes to accomplish what the conscious mind wants.

However, you must cue it!

Thus, one of the therapist's jobs is to cue the subconscious through the meticulous, precise use of words.

Therapy is, to a large degree, priming with dominant thoughts.
