The House of Self States [HOSS]: Using a creative integrative and containing mapping technique across the therapies

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Introduction

In this article I will describe 'The House of Self States' (HOSS), which is a creative representational therapeutic tool that can function usefully in therapy and supervision as a reflective mapping structure. I developed the HOSS in order to explore and promote a creative relational bridge between our patients' often unconnected ways of being with themselves and others. I have used it as a projective tool to represent and accommodate various Self States during:

- I. Assessments with people with complex psychological conditions.
- 2. The reformulation process as an aid towards identifying the various partially dissociated/ fragmented ways of being.
- 3. The revision process by creating visualisations/ stories to explore possibilities of dialogue and movement between the different states

4. In supervision as a helpful guide to monitor how different Self States have an impact on the therapeutic relationship

Development

In my therapeutic work as a dual trained Cognitive Analytic Psychotherapist and Creative Arts Therapist (Dramatherapy) I found that there was often a need to find a simple way to help my patients engage with, yet also contain, their complex contradictory states of being and so I started experimenting with metaphors that might serve this therapeutic purpose.

Metaphors are often useful in helping to capture our patients' interest and then helping them to sustain a reflective perspective (Petratou 2007). The concept of a house became a metaphor that I often returned to, because it seemed particularly suited to accommodating a person's various Self States at the same time, holding them within a single containing

> 'environment' -our patients' Self States co-existing alongside one another, as if they were housemates sharing a single living space. I should clarify at this point that, for the purpose of this paper, I use the concept of 'self-state' not as it is classically defined in CAT theory (as a partially dissociated state of being, Ryle and Kerr, 2002) but as

a "state of mind and being" which has the potential for various degrees of dissociation or integration depending on its particular relational context (Nehmad, 2017; Sands, 2009). Conceptualising one's different states of being as animated 'characters' or modes in this way proves useful in that they can be framed by a meaningful structure that contains the various parts (inside 'the house') and yet allows them to continue to be part of a 'whole' at the same time. ('the housemates' all sharing the same residency and therefore remaining connected to each other).

The Structure

The House of Self States, then, as a therapeutic concept is a house

with four separate floors. Each floor represents four different qualities of selfhood:

the perfect/desired (attic, or top floor),

the private/intrapersonal (first floor),

the public/interpersonal (ground floor)

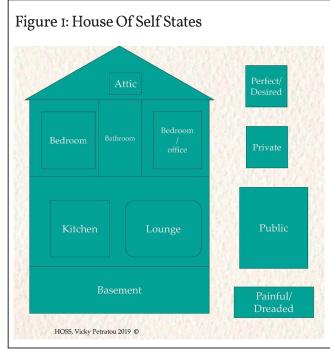
and the painful/ dreaded (basement).

The perfect (Top Floor, attic) Self States/States of Mind refer to:

What I wish to be/feel/do; my dream/ideal states of being; what I should be/feel/do.

The private (first floor) Self States/States of Mind refer to:

How one relates to one's self in terms of feelings/ways of thinking/behaving/relating (in



our own company). In this part of the house we depict our 'self to self' intra-personal experiences. These can be both parts of both problematic patterns (e.g. ruminating, isolating) as well as useful ones (e.g. self-supporting intra-personal strategies such as meditation practice).

The public (ground floor) Self States/States of Mind refer to:

Our interpersonal Self States/ states of being; determining how we relate with others; our interpersonal/interactive qualities and how we think that others perceive these.

The painful (basement) Self States/States of Mind refer to:

The often-disconnected, painful/ emotionally overwhelming experiences of ourselves; the parts that we feel bad about or are ashamed of. It's those parts that we feel shouldn't exist and nobody should see, including ourselves, remaining hidden in the *basement* of our house.

There have been many examples of this narrative, throughout history and up to the present day, where the basement is seen to be where danger lies - dangerous 'monsters / creatures' (in CAT terms, unwanted and undesired, painful states of being) residing there and often remaining trapped. A vivid example of this is represented in Greek mythology by the Minotaur, a half man half bull creature which was put in a labyrinth in the basement of a Cretan palace. Like the Minotaur, on many occasions the 'monster'like qualities of our hidden Self States develop because their value is crushed and their pain has been buried and unacknowledged for a long time. Acknowledging the basement Self States and their suffering has been valuable in my work.

HOSS's application in CAT Therapy and supervision

In the initial parts of therapy, as part of noticing difficult problematic patterns (as identified in the Psychotherapy File) I suggest using the HOSS as an additional creative activity which might help us to familiarise with core states of mind/being that we don't often have an opportunity to reflect on at the same time. I encourage my patients to imagine that these various parts of themselves are living in a house and we call this The House of Self States. It can be drawn using words and/or images to describe the Self States or by using chosen objects. Below, in Figure 2 we can see an example of a House of Self States as if it was written by the Ugly Duckling fairytale character. Additionally, in Figure 3 we see a House of Self States created from a constellation of objects.

[See Figure 2: HOSS of Ugly Duckling and Figure 3: HOSS using Objects, overleaf.]

I provide some direction on how to draw/construct the house (it needs to have four levels for instance) and then explain how each level represents the different Self States of the patients' own internal 'house'. It is important to take time to support and contain the patient during this stage and to go with what feels right for each individual, and not to push too much. I then ask them to look at it and reflect upon it. This depiction gives the patient an opportunity to see these separate parts together. Throughout the course of therapy the task then becomes about how these parts can begin to integrate in order to facilitate a deeper connection/dialogue between them so that the person does not continue to experience them as

disconnected from each other – this integration forms an essential part of the therapeutic journey during the course of treatment.

Therapy

As a mapping constellation the HOSS technique can be used at all stages of therapy: during the assessment and the recognition phase as an initial way of mapping the patient's Self States and at the revision stage as a base for higher perspective reflection and communication between different states which promotes more integration. I have also used it at this stage when reflecting on interpersonal conflicts. This can be done by the patient drawing a house of self states for the person she/he is in conflict with. This exercise helps the patient to consider that other people are not 'all good' or 'all bad' but complex, and with a variety of ways of being.

The HOSS can be used as a base to build a CAT map as well as a pre-mapping exercise as it helps in depicting parts of reciprocal roles and reciprocal role procedures. In some ways it parallels the broken/ split egg structure (Ryle & Kerr, 2002) as at the top it shows the desired ways of being and at the basement it shows the dreaded ways of being. Becoming aware of the variety of experiences within the different levels of the 'house' can encourage greater perspective over the patient's sense of selfhood in action. It can also help patients to develop compassion for their vulnerability and acceptance of their complexity instead of them remaining trapped in polarised ways of being and relating with themselves and others.

Often the goal of CAT therapy is to help our patients to integrate parts of the Self. As A. Nehmad (1997) argued, when a person partially dissociates she/he identifies very strongly with one particular





Figure 3: HOSS using Objects

Self State, almost as if there is a spotlight on that specific state, leaving the other states in the dark. She suggests that if a Self State can become more 'in touch' with the rest of the personality, the intensity, frequency and "inevitability" of a Target Problem Procedure (TPP) will be lessened as different parts of the self will be able to talk to each other, moderate and soften each other, mobilising a more useful internal dialogue between the healthier self and the more problematic Self States. In this respect the HOSS can provide an inclusive antidote/alternative image to the usual spot-lit/disconnected states. The different Self States depicted in The House can be viewed as housemates and the therapeutic progress happens when we begin to develop a non-judgmental recognition of the variety of Self States and compassionate curiosity for, and dialogue between, these various states of being. Working

with the idea that any rigidity and lack of movement maintains the stability of RRPs we can start to consider how, rather than being separated out on the different floors of the house, they can begin to move and communicate with one another. Developing a fresh, non-shaming and caring approach to the *unwanted* parts of our *basement selves* can also be a useful way of generating *exits*.

Supervision

I have used the HOSS in clinical supervision to explore countertransference issues and my supervisees have found it beneficial to working with unnoticeable problematic dynamics as well as reigniting their compassion towards patients they were having difficulties with. As a supervisor I have used the HOSS as a transitional creative activity that can aid in dealing with ruptures or parallel process dynamics. For

example, in supervision I might ask the supervisee to draw a HOSS in relation to their various experiences as a CAT therapist with a particular patient. Some helpful questions might be: What kind of therapist do I want/desire to be with this patient? What do I hope this patient will achieve in this therapy? (responses are drawn/put in the attic/perfect place). What would I dread happening to this therapy (in the basement)? What kind of roles do I take in my interaction with him/her during the sessions (in the public space, ground floor)? And, finally, how do I relate to the therapy task with this patient outside the sessions (in the private space). The supervision experience could be added in between the first floor private space and the 'public' space. On the ground floor, we put the interactive experience/ roles we take during the therapy sessions. If there is an indication for a parallel process dynamic, we can

add another house that represents the experiences of the supervisor too. Looking at the various houses and their interrelations can be helpful in recognising and working with both helpful and problematic relational dynamics.

Case Example

Recently, I worked with a young person who had severe social anxiety, poor personal care and historical psychotic symptoms. We used the HOSS at all stages of his CAT therapy. In his attic lived his dream of being confident and sociable; on the first floor lived his isolation, his on-going selfblame, and his self-neglect (poor hygiene and poor nutrition); on the ground floor lived his public states of being nervous, shy and hardworking and in the basement lived his deep shame for being seen as 'mentally ill'. During the later stages of therapy he added some additional useful elements/states of mind and being in his HOSS. For instance, in the attic he added more intentional desires/wishes such as 'to not hold it all in' and 'to deal with my anxiety'. In the private domains of the house he added his practice of being more patient, less blaming and doing meditation. Introducing fluidity in this way enabled his different Self States to connect and influence each other in a helpful way. For instance, in the basement, the shameful/painful states were still there but he could now look at them in a less-judgemental way, with less self-blame and more self-acceptance and compassion. These developments made a significant contribution to the progress he had made by the end of his therapy. Figure 4, right, is the final drawing he made representing his House of Self States.

Conclusions and Considerations

One strength of this creative metaphoric tool is its versatility. Although I initially used it as a creative mapping technique only for people with complex psychological difficulties I later realised that it can be easily adapted to meet the needs of all kinds of psychological presentations, offering a containing projective structure that can accommodate the needs of young people as well as adults, and people with learning or developmental disabilities because of its accessibility and simplicity. People can use words, images from postcards or objects to represent their Self States.

Like all creative techniques, the HOSS's usefulness depends of how it is adapted to the individual needs of our patients. One needs to consider the zone of proximal development of the patient and the timing has to be right for it to be useful (Petratou, 2007). One should also hold in mind that not all houses have this structure of 4 levels, and some people might feel alienated by this particular depiction as it may not reflect everyone's experience of their home, or where they live. Of course, this can be remedied

by changing the structure of the space that accommodates the often un-relatable emotional states, but it would still need to include the four domains of public and private selves and desired (perfect) and dreaded (painful) selves in a meaningful way that feels containing.

The House of Self States attempts to identify and illuminate some of the paradoxes that we all experience and can creatively mobilise people's capacity for self-reflection and integration. This is perhaps best articulated by the patient featured in the case example above who told me at the end of his therapy:

'I find the house a very useful tool as it uses imagery which helps me to see my emotions further than just to bury them...the use of colours and the different floors really helps me to understand what is going on and that all emotions are guests but I am the house'.

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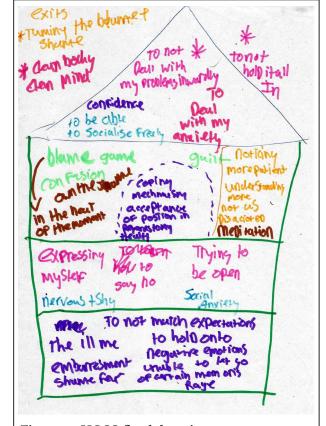


Figure 4: HOSS final drawing