Life Experiences That Have Shaped Me as an Integrative Psychotherapist

John Hallett

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Abstract

This is an expanded version of the keynote speech John Hallett gave at the International Integrative Psychotherapy Association's 2025 conference in Ljubljana, Slovenia. In this keynote, Hallett shares the experiences and learnings that have shaped him as a psychotherapist. He starts with the influence of his parents and follows with significant occurrences in his life that were pivotal for his development as a person and an integrative psychotherapist.

Keywords

Integrative psychotherapy, Buddhism, awareness, self-esteem, permissions, contact, EMDR, memory reconsolidation

When I was asked by Gregor Žvelc on behalf of the conference committee to give a keynote speech, I was both honored and excited. The committee had liked the topic of my workshop "What 50 Years of Practicing Psychotherapy Have Taught Me" and thought I could do a variation in a keynote. So here we are. I've decided to talk about the experiences, lessons, and teachings from life I've internalized that I bring to practicing integrative psychotherapy. I invite you as you listen to reflect on your own life and what life experiences you bring to being an integrative psychotherapist.

It is quite a valuable and wonderful exercise to reflect on one's life. I have realized how much positive I got from my parents, who were far from perfect. By the time I was in my late teens, I thought my parents knew nothing, but as I've matured, I have realized how many of their values were already inside me. My mother's and father's behavior taught me their values, and my mother further instilled her values in me with her words.

My first psychotherapy training after graduating in the 1970s was in transactional analysis, which introduced me to the concepts of ego states. I liked what a clear model this was and could certainly start to use in terms of understanding myself and my clients. I became aware that I had introjected parts of both my parents: the positive teaching and modelling as well as their less positive character traits.

My mother was an avid reader, so a lot of what I read was from the books she had bought. One that greatly influenced me was Viktor Frankl's (1946/1992) *Man's Search for Meaning*. He was an existential psychotherapist who survived a Nazi concentration camp. In the book, Frankl shared his realization that no matter how little control he had over his life, he still had the ultimate control because he could kill himself. This had a profound impact on me, for I understood that no matter what was happening in my life, I would always have options. This speaks to the universal

importance of having a sense of control in our lives and guides me with clients who often feel they have little or no control. For example, when a client confronts a difficult parent, I frame success as the client speaking their truth, regardless of how the parent responds. The client is in control of speaking their truth—not in control of whether the parent accepts it.

Another of my mother's books that greatly influenced me was one on Buddhism, and I still am grateful that my mother had such a wide interest in learning. What stood out for me was the profoundness of the idea that nothing is permanent, that everything is in the process of change, and that non-permanence is the state of the universe. I remember thinking when I first met Lindsay, who is now my husband, that one day one of us would no longer be around for the other. The thought filled me with sadness, but I also accepted that this is a law of the universe. Nothing is permanent, whether we think about the material world or all forms of life. As we age, the truth of non-permanence becomes very apparent. In therapy, the most obvious examples of non-permanence are feelings. Clients often fear that feelings will last forever; not only is that not true, but feelings change rapidly. I routinely bring to a client's awareness—an important awareness—of how quickly their feelings change.

The importance of awareness as a cognitive framework came together in my early training with Richard Erskine, who had been greatly influenced by gestalt therapy. In gestalt therapy, awareness, both internal and external, is the central mechanism of change. Richard demonstrated over and over again in training groups how this comes about by attuned inquiry. To this day, this is the principle of integrative psychotherapy that is most fundamental to my practice (Erskine et al., 2023).

Another formative experience from my teens years was watching TV and seeing the cruelty and suffering that white people were inflicting on Black people in the southern United States. This was in the '60s at the height of the civil rights movement. I was outraged at how Black people were treated, even though I had never met, nor even seen in person, someone who was Black. Perhaps the foundation was my mother's admonition that my sister and I must be kind to the Indigenous people who came to our school. I also read a number of my mother's novels about the Holocaust. All of these experiences developed my awareness of the universal presence of suffering.

In her final years in a nursing home, my mother indirectly taught me one more thing: the secret of self-esteem. Not much happened in her daily life, but there was one day that clearly stood out for her, and, subsequently, me. One resident got lost within the building, and my mother happened across her. My mother knew where the woman's room was, and she took her back to it. It was clear she took great pleasure in helping the lost woman, and it made her feel good to tell me about it. From this simple interaction, I developed my simple rule for self-esteem: you do something that makes you feel good, and your self-esteem goes up. On the contrary, for many of our clients, if they do something that makes them feel bad, their self-esteem goes down. It's a simplification, but a good starting place when a client says they want to increase their self-esteem. Thank you, Mother.

Another seminal experience occurred when I was about 16. My father had given me a .22 caliber rifle (we lived in the country and they were very common). I loved to set up a target in the nearby gravel pit and practice shooting with my friends and sister. One day I was walking down a lane with a friend, my rifle in hand, when I spied a squirrel in a tree. Without thinking, I took aim and fired. To my shock, the squirrel fell dead from the tree. My senseless act had taken an innocent life, and I felt horrified and guilty. I vowed that I would never knowingly kill another living being. I have continued to believe in the sanctity of life.

We didn't always live in the country, though. We were city dwellers when my father was the Superintendent of Customs at the Vancouver Airport. However, at the age of 40, my father decided he wanted the life of a farmer and took courses to prepare himself. When I was 10, he bought a farm and we moved to the country. My sister and I quickly learned that life required work—we each had our own daily chores. I resented having to do them at times, especially in the

summer when my friends were playing and I had to work, although I could sometimes entice them to help me. My father was a determined man, and he built a large business out of the farm. His example taught me the importance of hard work for success and the beauty of following your dreams. I was proud of him.

Like my father, I had a dream that would change my life. I wished to have my own private practice. After 15 years of working in public mental health clinics, I achieved that dream and opened my own practice. I felt the same kind of pride that I believe my father felt about his lifestyle change. I have no doubt I was unconsciously motivated by my father's example. Consequently, helping clients articulate and pursue their dreams has become a cornerstone of my practice.

My father, being a very hard worker, always found more to do on the farm. I would often feel guilty in the summer if I took off time to swim or go out on the lake in our boat, knowing that my father would still be doing some chore. I was about 14 when my mother expressed concern that I was working too hard and encouraged me to take more time off to have fun. She told me how her two brothers had worked "like dogs" on their family farm, following the example of their father. She didn't want the same thing to happen to me. What she said to me was an unbelievable gift, a permission that freed me from my guilt about not working harder. Subsequently, I have kept a balance between work and leisure with few exceptions. But her permission stayed with me in more ways than one. Permission—when a person you respect and cares about you gives you permission to make some important change—has an important role in my therapy practice. I was introduced to the concept of permission in therapy in Eric Berne's (1972) *What Do You Say After You Say Hello*, in which he discusses permission, protection, and potency. My mother had checked all three boxes, so that's why it was such a powerful permission.

One of my first important emotional learnings as an adult was in 1967, when Expo 67, the World's Fair, was in Montreal to celebrate the centenary of Canada. Two friends and I decided we wanted to see the Expo and live in Montreal to experience the French culture in Canada. I fairly quickly found a job, while one friend decided he wasn't going to stay. The other friend stayed for only a month. I then found myself living alone in a city where I had no friends. I have never experienced such loneliness. This was decades before the internet and when long distance phone calls were expensive, so aside from letters, I had no way to keep in touch with loved ones. The only social contact I had was in the office where I worked, but I had not developed any friendships. I distinctly remember the moment of revelation, when I realized the importance of my family and friends, and how I had taken them for granted. I vowed never to do that again.

Thus, I was deeply aware of our social nature and our cravings for contact when I first started studying transactional analysis and integrative psychotherapy. I have never lost sight of the fact that no matter what presentation a client has, including pushing away behavior, they want real contact. This has been championed by Richard Erskine, who has written extensively about the biological drive for social connection from the moment of birth. His ideas were expanded by the gestalt concept of contact, which refers to both intrapersonal and interpersonal contact (Erskine & Moursund, 2022). This is a fundamental building block of the parent-child relationship and essential in the developmental process of becoming a fully functioning adult. Erskine has further broken down the drive for social connection into 8 distinct types of needs, which have been empirically validated in a study (Iraugi et al., 2024).

Another powerful experience in my 20s shaped my life and influenced how I do therapy. I started to lose my hair, and I was bald on the top before I had turned 30. I was very self-conscious about this and felt decidedly unattractive; I longed to have hair again. Over several years, I had built a friendship with my barber. When I finally got the nerve to ask him about getting a toupee, his immediate response was, "Why would you want to do something like that? You look fine the way you are!" This was such an unexpected response—a complete disconfirmation of my own belief—that it caused a major rewiring in my brain. I have come to understand that experience as memory reconsolidation, which I will discuss more later. I learned that what we think about our appearance is irrelevant. We can never see ourselves as others do because others see us as a

gestalt. In a mirror or photo, we only see parts of ourselves, mainly through our critical eyes. This can be a very powerful truth for a client to hear, although hearing this once is not going to be sufficient to change a client's body image.

The next lesson came to me on my own, well into adulthood. It occurred in the middle of the night when I had awoken with some worry on my mind. It became profoundly obvious that if I was anxious about something, such as an illness or medical problem, it was an indication I need more information. I either needed to do some research or make an appointment with my doctor, and I could stop thinking about it until I got more information. Knowing there was something I could do about the anxiety was relieving. As I reflected more on this, I realized this applies to almost any anxiety. It is always somewhat of a surprise when clients are talking about some fear or anxiety and they have not thought of the obvious: getting more information. Fear and anxiety disconnect us from our Adult ego state. For example, a client received a phone call from his boss which had left him anxious about being laid off, although nothing he reported about the conversation indicated that. It was a novel idea for him to call his boss and ask directly about her plans for him. Another client who wanted to leave his marriage was paralyzed by the thought this would be damaging and traumatic for his children. The obvious solution was to get more information. He could read a book on the topic or talk to a friend who had gone through the same dilemma. The takeaway: feeling anxious? Get information. Sometimes the simplest things are the most profound.

My clients have helped me to formulate another way of framing this lesson. The content of our anxious thoughts, an imagined future scenario that is bad, is only one possibility. I don't try to reassure a client that it won't happen, but I suggest we consider other possibilities together. This is a demonstration of the relational need for security provided by another person who is older and wiser.

At this point, you are probably thinking that I had a relatively easy life with no traumas. While this is essentially true, I was carrying a secret that stopped me from completely connecting and being open with my friends. I could be open in superficial ways, which served to hide my secret inner self. I knew I was gay.

Thankfully culture has changed a lot in 50 years, but in the '70s, being gay was to feel less than others and to be an object of scorn or bullying. I was terrified to reveal this secret, and I worried I would lose my friends and family. I finally decided I had to talk to someone, so I got a referral to a psychiatrist. Fortunately, I saw one who felt safe to me, and I built up the nerve to tell him my shameful secret. I revealed what I most loathed about myself. After I got the words out, I experienced a huge physical jolt in my body. If my psychiatrist had been an integrative psychotherapist, he would have inquired about what I had experienced. I would have said "relief" at revealing my secret. That was my introduction to the experience of emotions repressed in the body, although I did not know it was a psychological concept until I began my psychotherapy training. What I experienced was the relational need for acceptance, in this case from a therapist, which then allowed me to open slowly with friends and family and thankfully experience acceptance.

Being gay and having the experience of accepting it in spite of the fears has been an invaluable tool as a psychotherapist who facilitates healing. I never lose sight of the importance of acceptance. When I notice judgmental thoughts about a client, I reflect on it and make sure it does not creep into skewing the therapy. For me, the remedy is inquiry, which helps the client and myself understand why their thoughts, feelings, and behavior make sense to them. This empathy frees me from my judgmental thoughts.

Behind all the uncomfortable topics and secrets is shame, which I knew intimately. In therapy, I sometimes have an intuition that a client is hiding something, keeping a secret. I will ask if there is something they feel they can't talk to me about. When the answer is "Yes," I proceed with "Let's not talk about it now, but let's explore the shame around it." I name the shame and normalize the fact when we feel we can't reveal something, there is shame that is holding us back.

As the client reveals the fears behind the shame—for example, they may fear they will lose my respect—there is a shift. Invariably, the client is then ready to reveal the secret without me prompting. When other psychotherapists consult with me, it is not unusual for them to be afraid to go deeper with the client and to fear making them uncomfortable by inquiring in what is probably a sensitive area. If it's done in a thoughtful and caring way, for example, by addressing the shame surrounding the topic, the client may answer; but they may also deflect, which informs us that we haven't inquired in an attuned way. I have learned that to be a potent therapist, no inquiry should be off limits—depending on the timing.

A month after I turned 50, I had another life-altering experience. I was diagnosed with prostate cancer, which I had always thought only older men get and rarely die from. My doctor informed me that the younger you are diagnosed, the more aggressive the cancer. He said without surgery I would probably be dead within 10 years. I then recalled my paternal grandfather had died in his 60s from prostate cancer. With this information, I felt full-blown terror for the first time in my life. I agreed to surgery, but even that did not guarantee that I would be cured. Fortunately, I came across a book called *Full Catastrophe Living* by Jon Kabet-Zinn. It was about his experience at Boston General Hospital establishing a mindful meditation practice for patients with severe pain. The book taught me a profound lesson: by being in the moment, I could realize I was okay. I had no pain. My body felt exactly the same as it had the day before my doctor gave me the diagnosis. When I let my mind go to the future, where I might die, the panic returned. To alleviate this reaction, I held onto the awareness that I was fine in the moment, and I imagined carrying that forward into the future—all the way to a hospital deathbed. I imagined being aware in every moment I was still alive and still okay, right to the moment of my death. Recently, a good friend died, and he has inspired me since I believe he was calm to the moment of his death.

As you might imagine, this has had a big impact on my approach to psychotherapy. I never lose sight that in any moment with me, a client is basically okay. Their pain is in an imagined future or the past. Sometimes, in the right circumstances, I have the client sit in awareness that in the moment, in my office with me, they are okay once they put away their thoughts. This can be especially helpful for anxious clients, who are worrying or catastrophizing about some future scenario. The profundity of this can be difficult for them to feel and grasp, but it certainly is a powerful reminder for my own self.

Aside from psychotherapy theory and concepts, EMDR (Eye Movement Desensitization and Reprocessing) has greatly influenced my practice of psychotherapy. EMDR allows me to see exactly how the human brain processes past experiences without much intervention from me. After more than 25 years of using it in my relational way, informed by my integrative psychotherapy experience, I still never tire of being the witness to someone's rapid emotional process. EMDR has taught me that intense feelings can arise and abate rapidly. But more importantly, I witness the natural ability of the brain to process and heal emotional traumas in a relatively short period of time when the right conditions are met in the presence of a caring, attuned other. In just 4 sessions of EMDR, I have seen a client heal from coercive, sadistic sexual abuse which occurred over 3 years when the client was a teenager. This client feels it is miraculous, and I have to agree—the human brain is miraculous. And you don't need to practice EMDR to know this.

Over the years, I was especially curious about why EMDR could be so effective in such a short period of time. When I heard about the concept of memory reconsolidation and read Bruce Ecker, Robin Ticic, and Laurel Hulley's book on it (2012), I understood the underlying mechanism of EMDR and why it produced permanent change. This rounded out my understanding of change as an integrative psychotherapist. Being fully in contact with an emotional trauma—cognitively, emotionally, and somatically—opens the neural pathway encoding the trauma and allows it be deleted and replaced with new learning. As we know, it is not just the experience of EMDR that deletes old learning and replaces it with a new one. There are many therapeutic approaches that facilitate this if the underlying principles are met.

It has been an interesting and fruitful experience for me to write this speech and be able to reflect on my entire life and how I have come to be who I am as a psychotherapist. Due to the infinite variations in life experiences, positive and negative, we are each unique individuals and therapists. We cannot be exactly like any other therapist, nor should we try to be. Richard Erskine has been my mentor for years, and when I first trained with him, I wanted to be like him. Slowly I came to accept that I was different from him and practiced psychotherapy in my own way within an integrative psychotherapy framework. It was a slow process to realize this is inevitable and necessary in order to bring my full integrated self to practicing psychotherapy. My hope is that you can bring your uniqueness to your psychotherapy.

John Hallett is a psychologist in private practice in Vancouver, British Columbia, Canada and defines himself as a developmentally focused, relationally based integrative psychotherapist. He is a Certified International Integrative Psychotherapy Trainer and Supervisor (CIIPTS) and a founding member of the International Integrative Psychotherapy Association (IIPA). He has 50 years of experience and has presented workshops at most IIPA conferences.

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