

# When you died

**Karin Sieger** reflects on the death of her therapist

**W**hen I received the email it had your name in the subject heading and had been sent by a person I did not know. I instinctively knew. About four months before then we had (what later turned out to be) our last session. I had not seen you for three weeks and your appearance had changed. You looked much younger, and I told you so. But there was something in your face. And for the first time in all these years I breached the therapeutic boundary and asked about you: 'Are you OK?' And for the first time you self-disclosed: 'No, I am not.' To me, this felt like a very special moment of trust,



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but also an indication of a change occurring somewhere. We both left it at that.

We were due to meet again after your pre-booked break. I said I felt that that might not be so. You said you had no reason to think you would not be there. Two weeks later I received an email from you telling me that due to health reasons you had to stop your clinical work for the time being. You would provide updates when they became available, and would I like to wait or would I like you to recommend another therapist for the interim or long-term? The idea of not seeing you, when I was facing the most challenging phase of my own life to date, not knowing what was happening to you and not knowing what would happen in the future, was very shocking and painful. My inner child was protesting: ‘No, I do not want another therapist – I want you.’ How could I possibly start all over again? It would take years for someone else to ‘get me’ the way you did. And anyway, no one would understand me and be with me the way you did. But the adult in me knew I needed a back-up plan. The weeks and months with no news from you eventually re-triggered echoes of old wounds of abandonment in me. The child (and sometimes the adult too) phantasised that you had started work again but did not want to see me, that I was too much. In my phantasy, I was considering finding my own new therapist. I did not need your recommendation!

I had finally summoned the courage to send you an email, breaching my self-imposed boundary of no contact outside sessions. I wanted you to know I was holding you in my thoughts and sending you positive energy. I wanted you to know you mattered and that I was doing well. And to be truthful, the angry part in me also wanted you to know that I was doing well without you. But I know you would have seen through that –



countertransference from a distance. As it turned out, by the time I sent the email you had already been dead for three days.

I am glad that throughout I managed to hold on to the trust in you and in our relationship. Three months after our last meeting I got in touch with the therapist you recommended. Unknown to me, this was a few weeks before your death. The person was exactly who I needed then. Initially a transitional object for you, I managed to forge a new alliance. So I had support in place when I opened the email telling me of your death.

### Solid container

When I first started training as a psychotherapist a course tutor remarked that our first therapist might become the most influential person in our lives. And you turned out to be that for me. You became parent, teacher, sibling and so much more. We had just started to make a breakthrough regarding my anger. I even started to be angry with you, and I would tell you so. You encouraged all that, even the swearing. You became a solid container, trusted friend, spiritual guide and mentor. I respected you for the respect you showed me. I admired your integrity and authenticity, your ability to empathise and believe in me. With time I started to believe in myself.

Knowing the cause of your death has helped me deal a lot better with the enormity of losing you. At least one unknown had been removed and I could focus on the loss. Even though, still now, from time to time, I experience moments of utter disbelief and deep pain that you are gone. I am grateful a process was in place for your clients to be told of your death and to be given an offer of

support should we need it. But you and I did not have an ending together. Your colleagues had an event in your memory, which excluded clients. Part of me thinks this was probably appropriate. The child, however, felt angry and excluded – therapists versus clients.

I do not know what could or should have been offered for clients, indeed, whether it would have been anyone’s responsibility to do so. Or whether other clients would have even wanted such an arrangement. But I had an ending of sorts by returning to the room we had worked in last. I took a photograph of your chair (which came out distorted), of both our chairs, the clock, the tissue box, the view from the window and the view from the waiting room to the steps you would lead me up to our room. You would always, without fail, turn around at the bottom of the stairs to check I was there and smile at me. That’s when our 50 minutes started, not in the room, but at the bottom of the stairs. When I re-entered the room to take the photographs, it felt empty. I felt empty, you had gone. To start with I had the photos on my wall. Over time, I no longer needed to look at them; then came the day when I was ready to take them down.

You introduced me to the concept of life experiences being a gift. You had been a gift. The therapist you recommended had been a gift. Even your death, dare I say, holds in it gifts of guiding insights. That is the best way I can make sense of your death, for now. Your death has made me re-evaluate my own life and mortality.

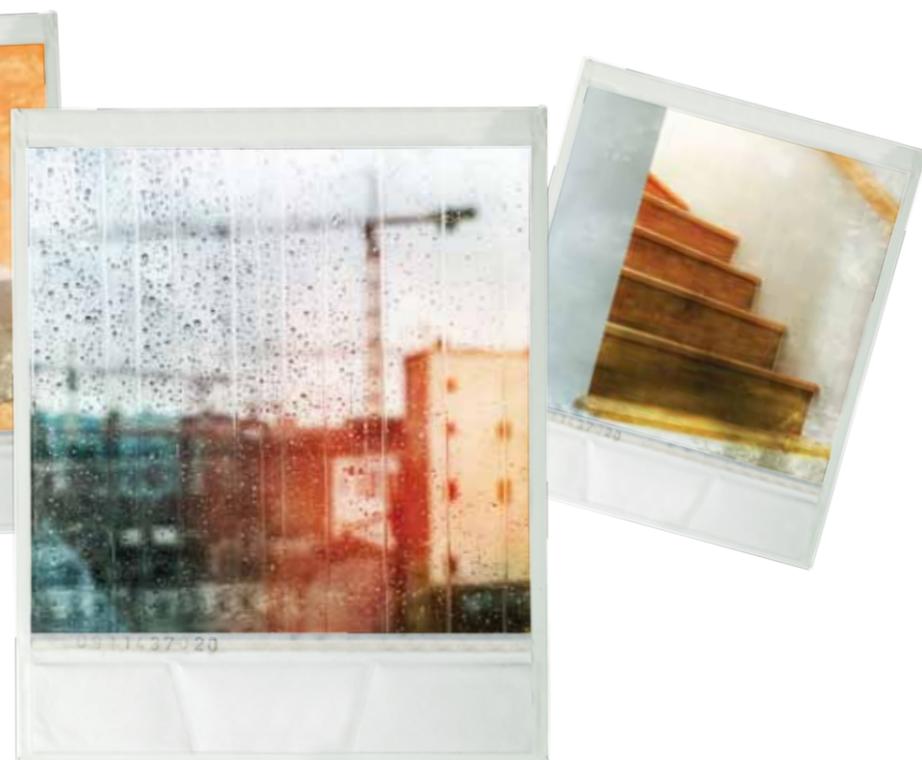
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I realised just how little prepared I am for my own death, and how that is standing in my way of living whatever time I have left to the fullest. Your death has also made me re-evaluate my clinical work, especially therapeutic boundaries and self-disclosure when faced with ill health and death.

### Loss and grieving

I am reminded of when I was working in a time-limited setting and clients had to make other arrangements if they wanted to continue therapy. My empathy for their dilemma has deepened. Yes, if you have established a therapeutic relationship once, you will be able to do it again. But we must not underestimate the period of loss and grieving in between. I have also learnt more about the therapist’s (potential) importance to clients, and of the importance for therapists to have a clinical will, an executor, and a clear and transparent system for record keeping in place.



I dealt with your death the best I could, the way I had learnt from being with you. My internal therapist reminded me throughout: ‘Observe, feel, name, accept – trust the process.’ Key to your practice was the therapeutic relationship and I feel privileged to have experienced this with you. It sustained and nourished me while you were alive. When you died, the relationship remained. It continues to contain my grief and makes me feel safe. The experience of losing you and grieving for you is intense and to start with was very painful. Some people who have not had therapy or who have a different relational experience with their own therapist, have found it difficult to understand the intensity of my emotional response to your death. Indeed, some have questioned whether this is a sign of an unhealthy dependence on you, and whether the therapeutic boundaries should not have prevented this level of involvement. Others know exactly where I am coming from. The therapeutic relationship is unique. You knew (almost) everything about me. I knew very little indeed about you. It is the quality of how we are met in the room (or at the bottom of the stairs) that matters.

In the very early days, you once remarked that you are comfortable with your truth. I came back to that over the years in my own personal development, learning to understand what it meant, and starting to feel it myself. I thank you for that – for offering me a unique relationship, which allowed me to explore, make friends with and embrace my own truth. What is that I hear

you say? ‘Now, that’s interesting. Why did you feel the need to share this all with others? I think this may be fertile ground for exploration, if you would like to – whenever you are ready.’ ■

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### Do you have a story to tell?

If you have a story you’d like to share with readers, we’d love to hear from you. It could be the story of what led you into the therapy profession, an account of an event or experience which has been a turning point in your life, or your reflections on the way you work. Email your story to [privatepractice.editorial@bacp.co.uk](mailto:privatepractice.editorial@bacp.co.uk)