



**COMMON LANGUAGE for PSYCHOTHERAPY (clp) PROCEDURES**  
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**VALIDATION OF FEELINGS**

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Definition: Communication to a sufferer that what s/he feels is right (valid), worthy and important in her current situation.

Elements: Show understanding of what people say, empathy with what they feel, confirmation that it is valid, legitimate and important.

Related procedures: Showing empathy or compassion, paradoxical intention.

Application: Individually or in groups for distressed people, especially those with low self-esteem, at any age. Can be used as part of many therapies.

1st Use? Linehan (1993)

References:

1. Linehan M (1993) *Cognitive-Behavioral Treatment of Borderline Personality Disorder*. New York: Guilford Press.
2. Gilbert P (2005) *Compassion: Conceptualisations, Research and use in Psychotherapy*, p195-217. Hove, UK: Routledge.
3. Leahy RL (2005) A Social-Cognitive Model of Validation. In Gilbert P (Ed.) *Compassion: Conceptualisations, Research and use in Psychotherapy*, p195-217. Hove, UK: Routledge.
4. Mahoney MJ, Arnkoff DB (1978) Cognitive and self-control in therapies. In Garfield SL, Bergin AE (Eds.), *Handbook of Psychotherapy and Behaviour Change: An Empirical Analysis* (2nd ed., p689-722). New York: Wiley.

Case illustration: (Esposito, unpublished)

After his relationship had ended a year earlier, Pat, a very insecure man, became depressed, failed to improve with medication and cognitive restructuring from 3 therapists, and seriously overdosed on antidepressants. When Pat said “I’m bad, depressed, can’t sleep, cry, don’t enjoy eating or doing other things I liked before”, his new therapist replied “I understand what you’re saying. It’s important, normal and natural. Go home, stay in bed, and don’t eat if you don’t want to, just do as you feel” in order to empathise with and validate what Pat felt and referred to despite Pat’s sense of being worthless. Pat did not answer but looked surprised and calmer, and went home and did as the therapist suggested. Pat phoned two days later saying he felt better. In another session Pat said “I did everything wrong, am useless with people, she was right to leave me”. The therapist answered: “I understand why you say that, and agree with you”. Pat again stayed silent and seemed surprised, and at the next session said he felt better.

The therapist applied such validation repeatedly plus cognitive restructuring and skills training during 1-hour sessions given weekly for a year, then fortnightly for 6 months. Pat improved and continued so to 3-year follow-up. Antidepressants had continued to 6-month follow-up.