

# How to Work with Clients Who Blame

## Bonus 1:

Working with Blame in Clients Who Have Obsessive Compulsive Disorder

with Christine Padesky, PhD; Lynn Lyons, LICSW;  
and Ruth Buczynski, PhD

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## Working with Blame in Clients Who Have Obsessive Compulsive Disorder

**Dr. Buczynski:** Throughout the program, we've looked at how to approach some of the very unique challenges to working with blame.

So now, let's look at one more complexity that can often come into play.

You see, according to Dr. Christine Padesky, some of the most challenging clients to work with in terms of blame and wanting other people to change have been clients with certain personality disorders . . .

**Dr. Padesky:** In particular you get this with clients with narcissistic personality, and clients with obsessive-compulsive personality, where they believe everything would be okay if everyone else would just change.

In the case of the narcissistic personality, "If everyone would just recognize how wonderful I am, all would be good"; in the case of the person with obsessive-compulsive personality, it's like, "If everyone just did things right, if everyone just went by the book, life would be good."

**"It's really important to come across as an ally."**

Now, these clients can be tough to work with in therapy because they do deflect constantly onto other people.

With clients who get so angry at other people and want other people to change, they often evoke antagonism in people, including the therapists – that even though we may try to hide it, we do feel a bit antagonistic toward them and they pick up on this. So it's really important to come across as an ally.

**Dr. Buczynski:** So Christine developed an interview format for working with clients who angrily blame others. She found this to be particularly effective with clients who struggle with narcissism or obsessive compulsive disorder.

In her intervention, Christine uses a lot of empathy and reality messaging. The goal here is to help the client find more effective ways to get what they want.

But the tricky part can be doing this while also being seen as the client's ally.

**Dr. Padesky:** The frame I would use is when they would say, "You know, if people would just do things by the book, if they'd just do things right, I wouldn't be having all these problems that I'm having," and I would start responding to that by saying, "Oh, yes, I see what you're saying. I would agree. You know, it is aggravating when people don't do things right, isn't it?" "Yes, it's very aggravating."

And I'd say, "And if people – if we could change everyone and get everyone in the world to do things just right, by the book, how would that be for you?" So then I'd do an inquiry into "What would that be like for them if what they want was achieved?"

And invariably, what people talk about is, "Oh, then I could relax. Then I'd be so much happier. Then things would go smoothly. My *life* would go smoothly. I wouldn't have to be so tense all the time."

**Dr. Buczynski:** What Christine is doing is helping the client focus on the kind of outcome they actually want. But she's doing it in a way that's helping to build the therapeutic alliance.

See, when we start to empathize with the outcome that the client wants, we can help them start to focus more on outcome.

And then, through the building of the therapeutic connection, we'll be seen more as an ally to the client, more of a person they can trust to help them to get what they actually want.

**Dr. Padesky:** So I say, "Oh, that would be so good for you. I can see how that would be really good for you to be able to relax, be calm and to just kind of live your life not worrying about everybody all the time. Wow. That would be really good."

**Dr. Buczynski:** Now, once we've built this empathic connection to the client's desires, we can open up a little space in their thinking. And it's then when we can begin to introduce some reality.

**Dr. Padesky:** Then people will usually say something like, "Well, that'd be great – but that's impossible."

I'll say, "Yes, I can see how that seems kind of impossible, but to me, if we can't count on everybody else changing, and we want you to have a happy, relaxed, contented life, seems like we'd have better odds moving in that direction."

**Dr. Buczynski:** By keeping a focus on the desired outcome, Christine can establish herself as an ally to the client's healing. An ally for them finding happiness in life.

And this is key. You see, when a client feels like you're both in this together, they can focus better on strategies to help them heal and focus less on blaming others.

**Dr. Padesky:** I find that at that point they can hear the messages about other things, and then when they complain about other people, I'll say, "Okay, this is one of those things. Look at how tight you're getting – you're getting wound-up here. So, what could we do to help you get to that point you want to get, *even* when they're doing that?"

**Dr. Buczynski:** Let's just quickly review **Christine's four-part strategy to help shift the way a client holds onto blame:**

1. Try to join with the client where they are. Validate their experience that leads them to blame.
2. Look for a desired outcome. How would the client's life be better if other people did, in fact, change?
3. Empathize with this desired outcome. Try to connect with what the client's world would feel like if everyone *did* change in the way they wanted.
4. Introduce the reality of the situation: for the most part, other people really *aren't* going to change.

And of course, the key to this approach is that the practitioner is functioning as an ally—aligning themselves with the client.

Now before we go on, let's look at another angle on how we might work with blame within the context of a client's personality disorder.

According to Lynn Lyons, the most consistent blamers are often people who struggle with Obsessive Compulsive Disorder. You know how this goes: “If everyone would just do what I said, then life would be a lot easier. If everyone would just cooperate. . .”

Now anxiety can sometimes also play a role for these clients. So with all of that in mind, let’s turn now to Lynn as she walks us through her approach.

**Ms. Lyons:** The way I conceptualize anxiety/OCD is that there is a “cult leader” living in the family. The cult leader makes the rules and, “If everybody would just follow the rules, then things would be fine.”

“The way I conceptualize anxiety/OCD is that there is a *cult leader* living in the family.”

There are two categories when I’m dealing with this.

One is, a parent who comes in with a child who’s struggling. It doesn’t take long for me to start talking about the tree and the apple. I do it in a joking way and the lights go on. They as a family begin to recognize there’s been a lot of focus on what other people need to do. It’s really been this anxiety or OCD that is trying to be in control of the family because it makes everybody feel better – or it makes the parent feel better.

A family comes in, for example, and the child has OCD or they believe the child has OCD. Somebody has said, “Your kid has OCD. Go see Lynn Lyons.” The family comes in and it becomes apparent, particularly with younger kids, that one of the parents has OCD as well.

I do that psychoeducational piece. I start talking about OCD in the third person and how it operates.

[I talk about] the fact that Dad has been an ogre about keeping the house perfect or that Mom loses it when things don’t go like they need to go. [I talk about how] there’s a lot of rules about where things are put or strange rituals that have to be abided by and that everybody feels like they’re living under the tyranny of this parent.

“I want the family to join together against the cult leader rather than have them join together against the parent.”

We pull it out and start talking about the OCD, the anxiety, the rigidity, and the cult leader. I want the family to join together against the cult leader rather than have them join together against the *parent*. Once I start talking about that and we can put it out here, then an enormous amount of progress can be made and the blaming stops.

**Dr. Buczynski:** So you might think of Lynn’s strategy as a two-prong approach. First, she shifts the focus away from the *person* who’s doing the blaming, by shining a spotlight on the disorder that might be driving it instead. So in this case, OCD.

Second, Lynn starts to join her clients together against the disorder, rather than against the parent or family member.

So now let’s take a look at how this might take shape in practice.

Here’s how Lynn will sometimes language it . . .

**Ms. Lyons:** The dad says, “What’s wrong with a neat and tidy house?” Or, as a dad said to me recently - an overprotective, really demanding father who’s very anxious and terrified his kids were going to get hurt – “So, you’re telling me I should just give my kids power tools - just give them a chainsaw?” The kids were like

seven and nine.

I say, “No, no, no, no. Here’s what I’m saying: there is a part of you and I think there’s a part of your son too - because that’s why you came in - that is making rules you feel like you have to follow, and it’s *very* demanding. Everybody in the family is trying to follow these rules. When somebody breaks the rules you see them as the problem because there’s a part of you that cannot tolerate when things don’t go the way they need to go.”

“So, understandably, say you have a rule that the sheets have to be perfect or there can’t be any glasses on the sink, or nobody can be a minute late for *anything*. I can definitely understand how you would think ‘If everyone would just cooperate, then we wouldn’t have these problems.’ But what I’m saying to you is this is a pattern, and I bet one of your parents had it too if you think back.”

I might say to the kids, “Grandma or Grandpa – sounds familiar, right?” Everyone nods, “Uh-huh.” “You’ve been living with this pattern for a really long time. You’ve been taught and you’ve been shown, and this pattern has been modeled to you. “What I want to do now is let’s take that part and put it out here so we can all have a look at it. You can begin to understand it, your kids can begin to understand it, and your son - who has the same part- can begin to understand that for himself too.”

“Let’s work on figuring out how we can be united in understanding and reacting differently to that part. I want to free you from the tyranny of that part too. Your kids would come in and say ‘We need to be free from the tyranny of Dad’s perfectionism’ – and I think really *you* need to be freed from the tyranny of it too. Let’s just put it over there and let’s all work together to have a different reaction to that.”

It doesn’t take too long, actually. You put it that way and now maybe the spouse feels a bit more empathic. We’re talking about this thing that’s been ruling the family, and everybody agrees with that. I say, “Does anybody have a story about another relative?” you know, “Oh, gosh – Grandpa, the family picnic.” Suddenly they’re united against this *thing* that’s been ruling their family and the blaming stops.

**Dr. Buczynski:** So by helping her clients look at blame more objectively, they were able to make a gradual shift away from fault-finding and begin to find empathy and unity instead.

Now in the next bonus video, we’ll look at an interactive technique that’s designed to help *couples* shift out of fault-finding. But really, this exercise could help individual clients as well.

I’ll see you in the next bonus.