

The Therapeutic Relationship Introduction to Working with Transference in Process Work

By Irene Tobler and Michael Mervosh for PSEN EU 2019-20

A therapeutic relationship is complex. It provides the client with opportunities to examine old material in new and potentially transformative ways. In that regard, it is important to be aware of the levels of transference and counter-transference that happen between the practitioner and the client.

Exploring the internal dynamics that the client replays with us are a vital part of therapy. They can reveal a lot about the client's inner orientation, and what is not working in his/her life. Over time, and through their transferences, clients can find new and more adaptive ways to orient towards others and life itself.

The discovery of *transference* is probably one of the most important contributions from Freud. He saw that the ways we see and respond to each other, and the reactions we provoke in each other, are influenced by several tendencies:

- We will see the relationship in light of our earliest relationships and react accordingly
- We will also try to replay difficult or traumatic situations in our therapeutic relationships.
- We will project on the therapist or a significant other the qualities we were lacking as a child (the good parent)
- We will project hostility onto the therapist or other people and unknowingly will behave in a hostile way.

We constantly replay some aspect of our early life in everyday life with figures of authority, with our love relationships, with our friendships, and in our business dealings. When we meet another for the first time, we will have certain perceptions and expectations of the other based on our early experience.

The same dynamic happens when we enter therapy. We will project onto the therapist the good mother we did not have, or the abandoning parent, or the absent parent - depending on what we experienced (or did not experience) in our very young years.



Transference is the sum total of the *client's* perceptions, reactions, ideas, feelings and sensations from the past that he brings into the present. It does not need any exciting factors from outside. All major relationships can be transferred on the practitioner, independent of the gender.

Transference does not always show up as a simple repetition of how we experienced the original relationship; it can also represent a replay of how we had *wished* the original relationship to be.

A common transference is the idealization of the practitioner. It is easy to fall into the trap of identifying with the client's idealization, especially when we feel insecure.

Gradually, as the relationship grows in authenticity and intimacy, the client will start to experience more anxiety, and will start to project other aspects of the psyche onto the practitioner.



Working with Transference

We need to learn to accept the inevitability of client's transference, and understand it for what it is. We can give our clients a good deal of encouragement to reveal their feelings about us and the process work. *The transference is where the action is.*

Gill says therapeutic movement results when clients:

- 1. Re-experience ancient thoughts, feelings, and impulses that were originally connected to the situation that bred their current troubles.
- 2. Experience those thoughts, feelings and impulses in the presence of the person toward whom they are now directed.
- 3. Express them to that person.
- 4. Have that expression be met with interest, objectivity, and acceptance.

When the client has the opportunity to notice how they feel with us, and it can be spoken and exist between us, it can open a whole chapter of repressed feelings, sensations, emotions, thoughts, impulses, that might be related to their current trouble.

If a client is feeling anxious each time he or she sits down with you, this feeling can be brought more directly into the room and explored together. The feeling can eventually tracked back to the original life circumstance or situation – for example, maybe it reflects the anxiety a client felt at the dinner table as a child.

Healing happens when these feelings from the past can be experienced and expressed in the present moment, and in the presence of a person toward whom they are not originally directed.

This allows an opportunity for a client to have their feelings met with interest and acceptance. Eventually, they can be placed where they belong - which is in the past - and the client can gain more freedom of choice in the present.

As practitioners, we must strengthen our capacity to invite and accept every aspect of the client's transference, and to see it as a doorway into the client's depth, and as an important element of transformation.

We also need to be willing to explore our own transferences with others on an ongoing basis. This is best done in our personal therapy, or in our consultation work with a supervisor.