

Charged Moments – recognising and engaging with embodied parallel process

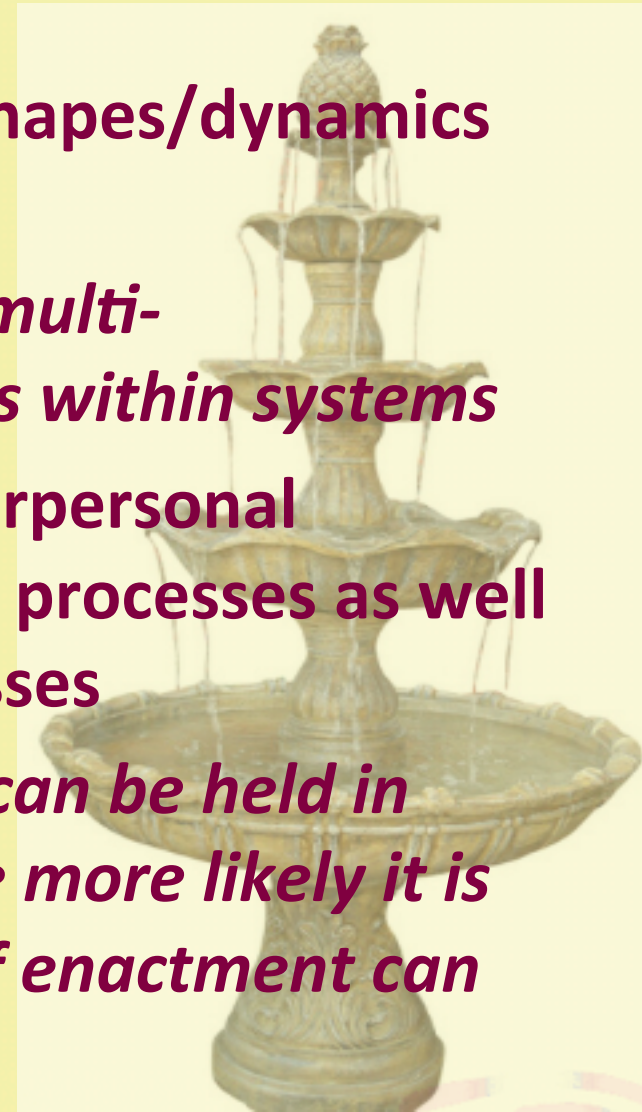
York, Oct. 3rd 2015

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Parallel process = 'fractal self'

- parallel process = fractal – similar shapes/dynamics on different levels of a system
- *Maria Gilbert's image of fountain: multi-dimensional / many levels / systems within systems*
- extend parallel process to both interpersonal (transference-countertransference) processes as well as intra-psychic (body-mind) processes
- *The more levels of parallel process can be held in awareness in the here and now, the more likely it is that transformative containment of enactment can occur.*



Hawkins/Shohet – 7-eye model of parallel process

- 7. systemic – whole system
- 6. supervisor countertransference
- 5. parallel process
- 4. therapist's countertransference
- 3. client-therapist dynamics
- 2. therapist interventions
- 1. client story – content of session



Fractal Zoom: self-similarity =
same shape at all levels – zoom in ...



Fractals – Fractal Self

fractal = graphical equivalent of parallel process

‘self-similarity’ at different levels:

- **fractal image:**
 - same non-linear shape and pattern at different levels of magnification
 - focus in – zoom
- **parallel process in SV**
 - same relational dynamic (pattern/shape) in therapy matrix reflected in SV matrix
 - at different levels of experience interpersonal & intrapsychic (body-emotion-image-mind-intuition)

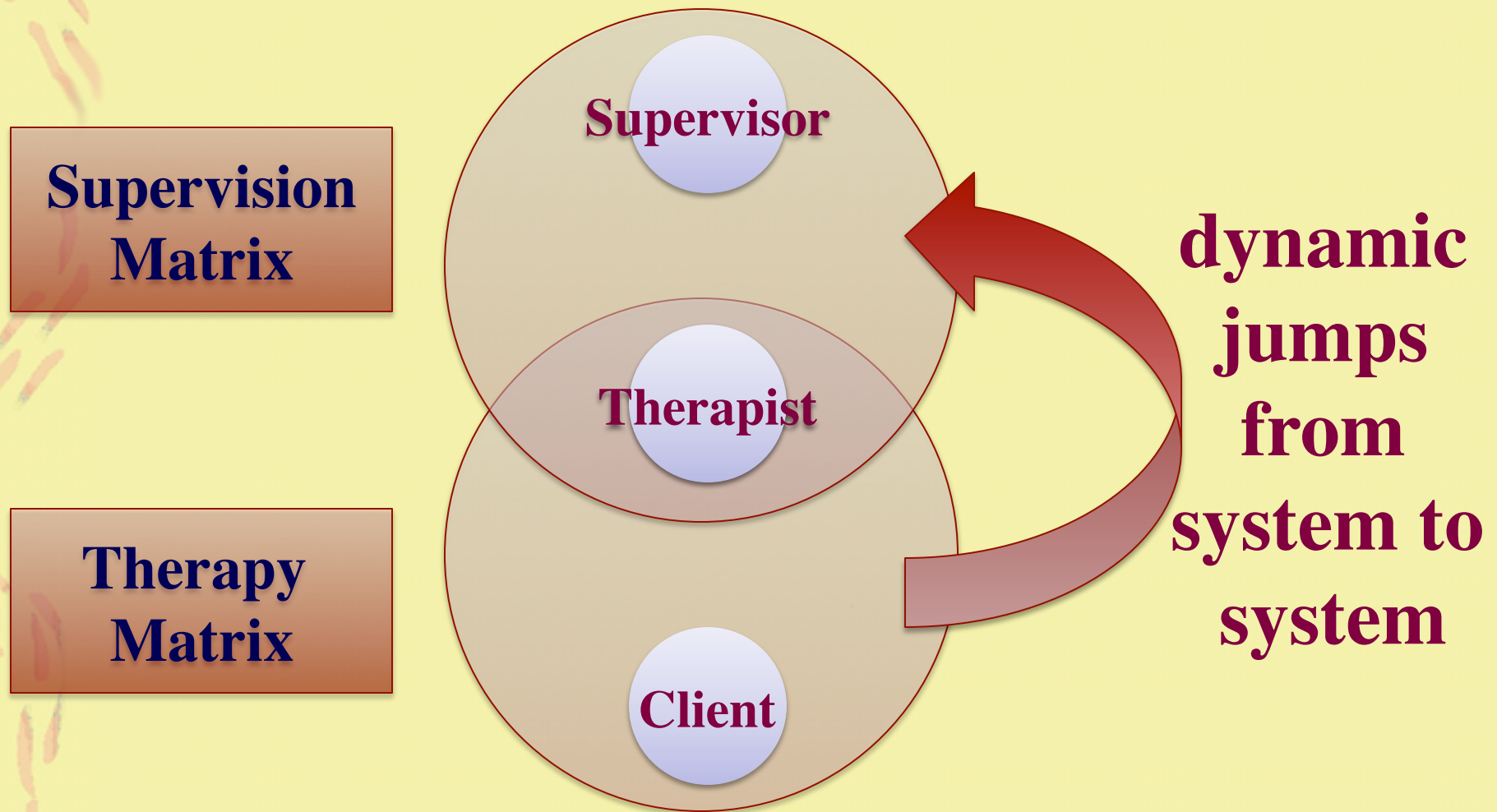
Points we might address

- **Fractal: self-similarity = at all levels (in a system)**
- **Parallel process in supervision (established definition)**
- **Parallel process as a relational organising principle for 21st century psychotherapy (& SV)**
- **The ‘wounding’ enters the therapeutic space**
- **Michael's extended model of parallel process:**
 - **multiple levels of parallel process: primary scenario, bodymind, internal object relations, interpersonal (incl. transference), therapist's countertransference, supervision, supervision context**
- **In practice: how to perceive, understand and engage enactments as systemic bodymind (parallel) processes**
- **The transformative principle of parallel process**

Overview

- **Where is the spirit of *your* enquiry taking you today?**
 - mention your working context
- **What therapeutic languages represented in the group?**
 - parallel process – Hawkins/Shohet 7-eye model
 - paradigms of SV: humanistic vs psychoanalytic; collaborative vs client advocacy
 - what is your idea of ‘unconscious process’?
- **In pairs:**
 - questions? spirit of *your* enquiry
 - example for demonstration

Parallel Process in Supervision



- **Supervision in the Helping Professions**
Peter Hawkins & Robin Shoet (1984)



What *is* the dynamic that jumps?

- parallel process = unconscious processes
- transference – countertransference dynamic
- what is unbearable/dissociated/disowned, and can't be thought and talked about (mentalisation), will get enacted as parallel process
- Bollas: the 'unthought known'



- **Standing in the Spaces: Essays on Clinical Process Trauma and Dissociation** - Philip M. Bromberg
- **Psychoanalytic Theories: Perspectives from Developmental Psychopathology** - Peter Fonagy and Mary Target
- **The Shadow of the Object: Psychoanalysis of the Unthought Known** – Christopher Bollas (1987)

What is: 'parallel process' ?

- **dynamics (esp. unconscious processes) in one system get paralleled in another related system**
- **different levels/sub-systems of a larger system**
- **nested systems – domino effect**
- **parallel process continues until the enactment of its dynamic finds containment ... somewhere ...**
- ***the* relational question: how to transform that enactment?**

parallel process as a relational organising principle for 21st century psychotherapy (& SV)

- **unconscious processes as parallel process**
(i.e. transference and countertransference)
- **enactment as parallel process**
- **character & object relations as parallel process**
- **body and mind as parallel process**
(Reich's functionalism, Wilber integral, systems theory holism,
complexity theory, neuroscience e.g. Damasio)

**integral-systemic-fractal relational model
(bio-neuro-psycho-social-relational)**

The 'wounding' enters the therapeutic space (here-and-now)

 **Three parallel relationships:**

- **past dynamic (primary scenario)**
- **internalised dynamic (object relations)**
- **external dynamic here & now (current relationships incl. transference)**

How the Wound Enters the Therapeutic Relationship (& de-constructs the dualistic 'medical model' therapeutic frame)

The client's wounding comes into the consulting room and enters the ...

- | | |
|---|--|
| 1 | ... client's 'here & now' experience as non-verbal process |
| 2 | ... client's <i>perception</i> of the therapist (= transference) |
| 3 | ... client's bodymind <i>experience</i> of the therapist (= embodied transference) |
| 4 | ... therapist's awareness (= situational countertransference) |
| 5 | ... therapist's bodymind experience (= embodied countertransference) |
| 6 | ... supervisor's experience (= 'parallel process') |

- 
- How 'the wound' enters the consulting room and the relationship, *Therapy Today*, December 2006 - Michael Soth

How does the 'wounding' dynamic jump (or get carried) from system to system?

- **psychological: via identification, either ...**
 - via empathy reaching in ... or ...
 - via therapist being 'taken over' by projective identification / evacuation
- **psychosomatically: via bodymind messages**
 - subliminal cues / mirror neurons
 - content AND process of communication

Multiple levels of parallel process

- client's developmental history
- client's bodymind
- client's internal world
- client's external relationship - therapy
- supervision
- group supervision/audience

Extended Model of parallel process

Supervision Matrix

Therapy Matrix

Internal Relations

BodyMindMatrix

Primary Scenario

Supervisor

Therapist

**Client
(outer)**

**Client
(inner)**

**embodied
character**

**developmentally
wounding r`ships**

**supervisor - therapist
dynamic**

parallels

**therapist's
countertransference**

parallels

**client's interpersonal
(transference)**

parallels

**client's internal
dynamic**

parallels

**client's body-mind
dynamic**

parallels

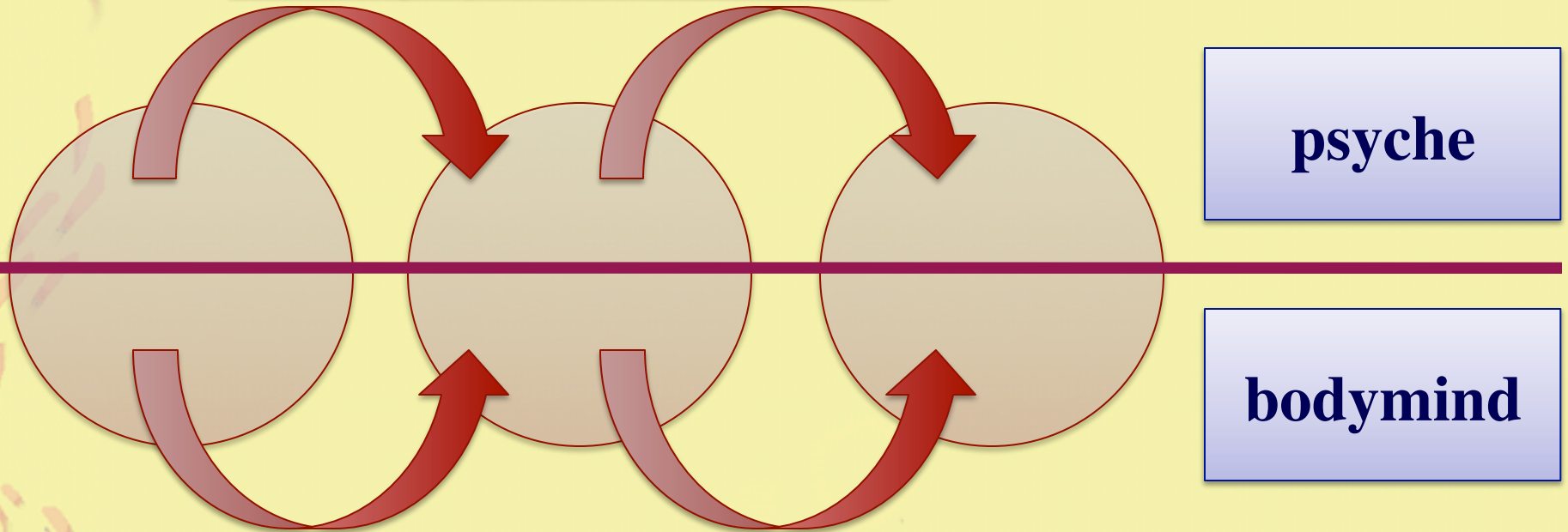
**client's formative
family dynamic**

Over-simplified Summary:

What does not get consciously
owned and communicated via
the minds,
gets enacted unconsciously
subliminally via the bodies.

Parallel process on bodymind and psyche levels

**identification – via empathy
and/or projective identification**



psyche

bodymind

**'subliminal' cues; mirror
neurons/ evacuation**

**Therapy
Matrix**

**Supervision
Matrix**

**Group
Matrix**

Unconscious dynamics *enacted* via parallel process

- **disowned / dissociated wounding gets communicated ...**
 - via enactment
 - implicitly ('implicit relational knowing')
 - subliminally (right-brain attunement)
 - through non-verbal cues
 - through bodymind self-states
- dissociated and evacuated because it *feels* unbearable (Bion: projective identification = bite-size chunks)
- it cannot be held in embodied awareness and contained
- when auto-regulation is impossible, interactive regulation is needed

In Practice – Perceptions:

Perceiving enactments / parallel processes

- **verbal (ego-ego) alliance versus non-verbal working alliance**
 - right-brain-to-right-brain perception (*not* only attunement)
- **watch oscillations in alliance – charged moments**
 - notice charged bodymind fragments in the whole system
- **notice conflicts in countertransference**
 - = loss of therapeutic position
 - the client's conflict becomes the therapist's conflict
- **gathering the fragments – notice bodymind ‘charge’**
 - spontaneous versus reflective processes across bodymind system
 - sensations – emotions – feelings – images – thoughts - intuitions
 - parallel processes throughout system of therapeutic relationship
 - (past – internal – external) – 5 parallel relationships

In Practice – Understanding:

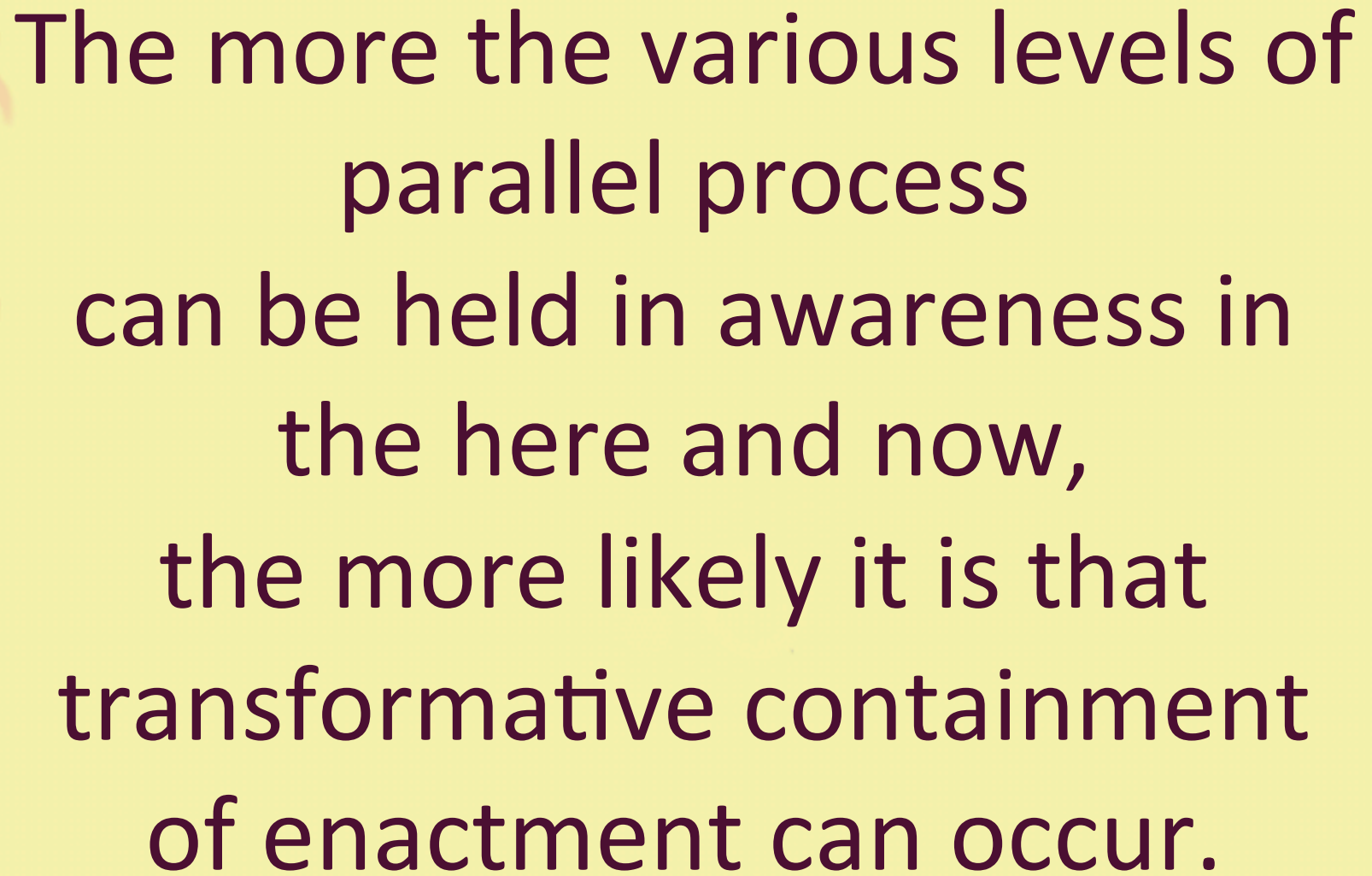
Understanding enactments / parallel processes

- **fantasies about originally wounding relationships**
 - identifying with bodymind subjectivity of all people involved
- **ideas about internalisation and internal object relations**
 - 5 steps of character formation occurring simultaneously here & now
 - internal objects as flesh-and-blood persons (anchored in bodymind)
- **fantasies about transference**
 - multiple enactments simultaneously – transference as bi-directional
 - transference to therapist – transference to therapy (unconscious construction)
- **fantasies about countertransference**
 - tension between projective identification and dialogical modality
 - tension between one-person and two-person psychology
 - tensions between therapeutic modalities
- **enactments as paradoxical**
 - construction of therapist as an object implies also de-construction

In Practice – Intervention:

Engaging/intervening in enactments

- **there is no way *out* of enactment, only a way *in***
 - notice how therapeutic responses feed into enactment
 - notice how client's construction of therapeutic space mis-translates therapeutic responses ('internal therapist')
- **types of intervention – some examples:**
 - reflection of feeling? (unconscious, denied and defended against)
 - interpretation? (evacuation – Bion; interpretation deepens enactment?)
 - disclosure of countertransference dilemma
 - directive / breaking of trauma escalation
 - switching attention
 - focus on spontaneous processes
 - experiential exploration (Gestalt)
 - many types of paradoxical interventions
 - surrendering to ('acting into') enactment



The more the various levels of
parallel process
can be held in awareness in
the here and now,
the more likely it is that
transformative containment
of enactment can occur.

email for
PowerPoint summary,
references and hand-outs:

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Weaving together a diversity of strands by integrating:

- *all the different therapeutic approaches*

- *body - emotion - imagination - mind - intuition*

- *multiple relational modalities*

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Ground-breaking whole-person learning:

experiential

integrative

relational

embodied

integral

'wounded healer'

enhancing your therapeutic competence and authority

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Appendix – additional material

- Three relational revolutions
- Working alliance oscillating through 3 kinds of contact
- 3 parallel relationships
- **Further material on request:**
 - 5 parallel relationships
 - Diamond Model of therapeutic modalities

Three relational revolutions

- **transference** (Freud 1905)
- **countertransference revolution** (1950's)
- **enactment** (in degrees, since 1995)

To what extent is enactment avoidable?

To what extent is enactment a mistake?

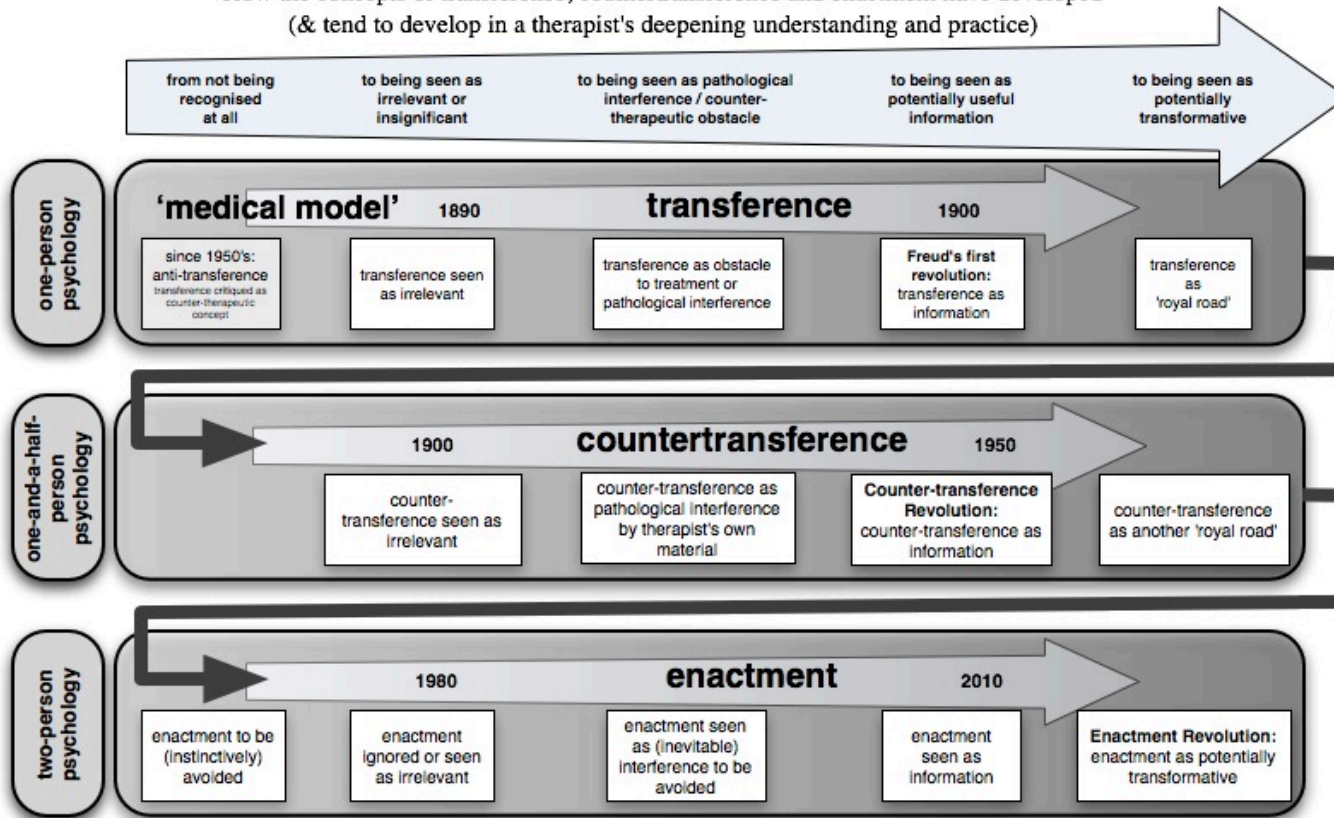
Why is enactment inevitable?

Why is it necessary (for therapeutic action)?

The three revolutionary moves (re-framing the supposedly counter-therapeutic)

The Three Relational Revolutions

How the concepts of transference, countertransference and enactment have developed
(& tend to develop in a therapist's deepening understanding and practice)



How ...

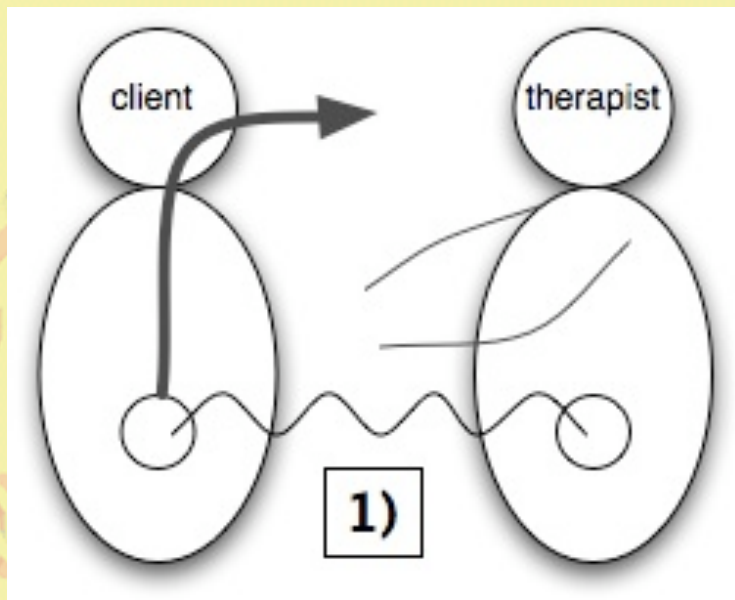
1. transference, then
2. countertransference and maybe now
3. enactment

can increasingly be embraced as valid and necessary,

as 'royal roads' into the depth of the work.

Three kinds of contact in the therapeutic relationship:

1. resonance

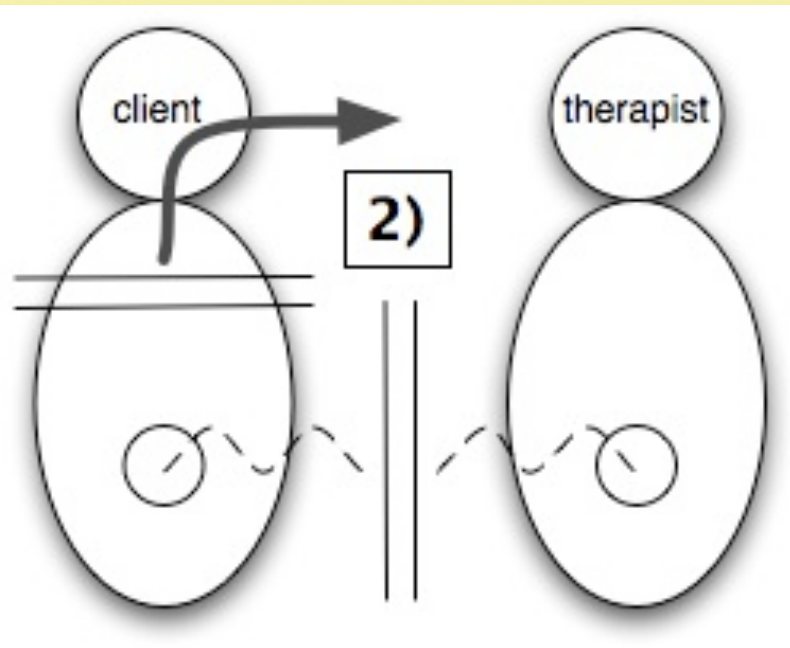


Therapist experiences:
RESONANCE
(explicit empathic flow and attunement, no doubts about working alliance)

- a) spontaneously, without effort or intention
- b) through therapeutic persona (good will, intention)

Three kinds of contact in the therapeutic relationship:

2. ambivalence

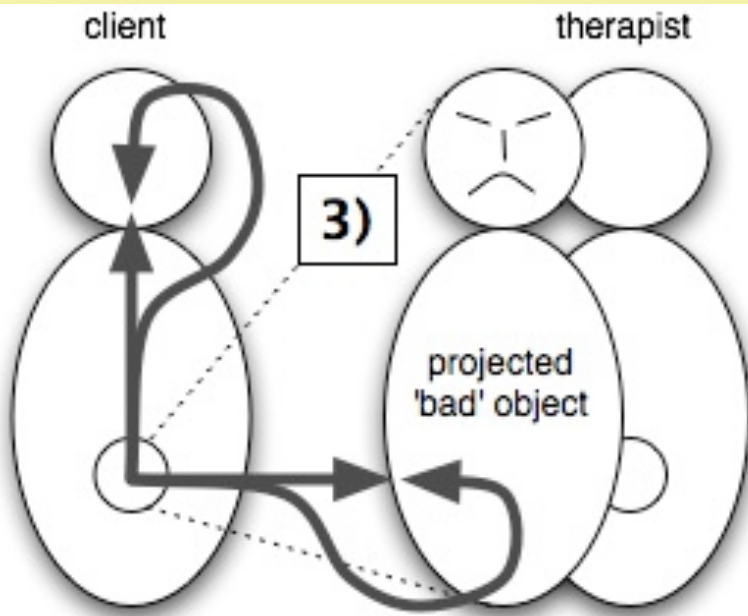


Therapist experiences:
DISSONANCE as well as **RESONANCE**
(explicit empathic flow disturbed or conflicted,
doubts about working alliance)

therapist feels in doubts, unsure, worried,
uncomfortable, ambivalent or in conflict about
a) understanding: "what's going on ?", or ...
b) intervention: "what should I do ?"
(often torn between conflicting impulses)

Three kinds of contact in the therapeutic relationship:

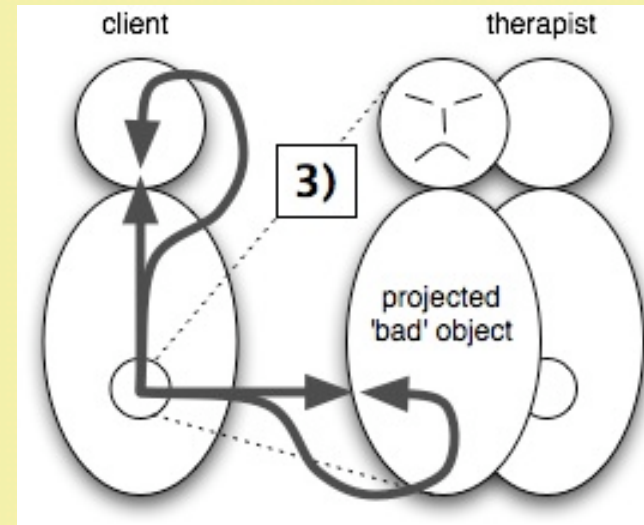
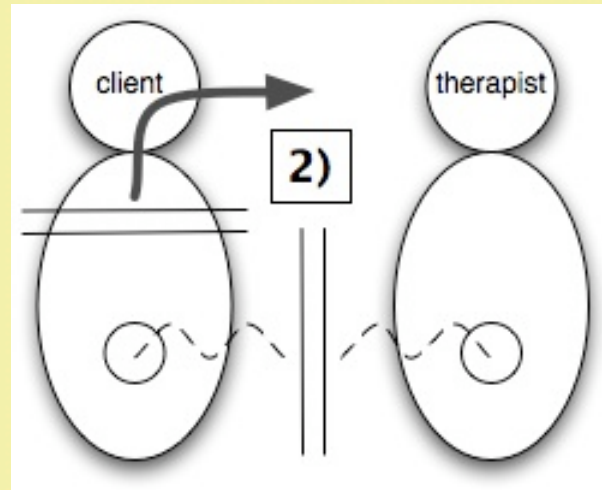
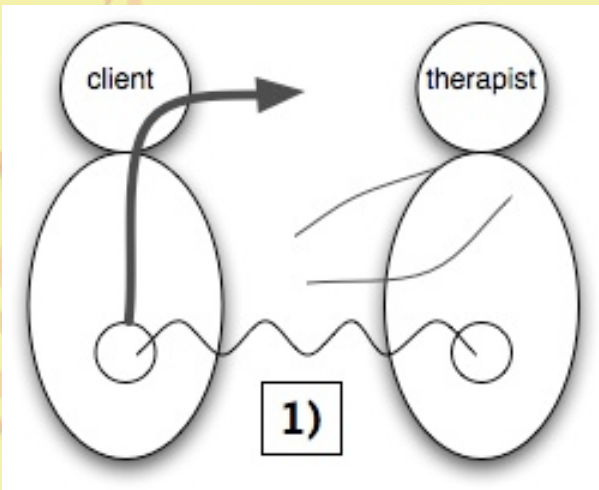
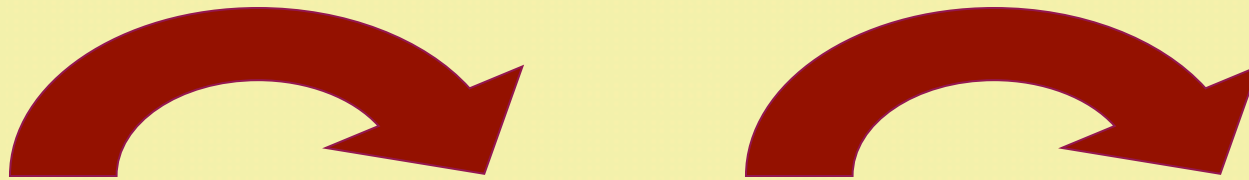
3. enactment



Therapist experiences:
INTENSE CONFLICT / PRESSURE
(charged and conflicted moment - working alliance acutely/intensely threatened = loss of therapeutic position seems imminent or already happened)

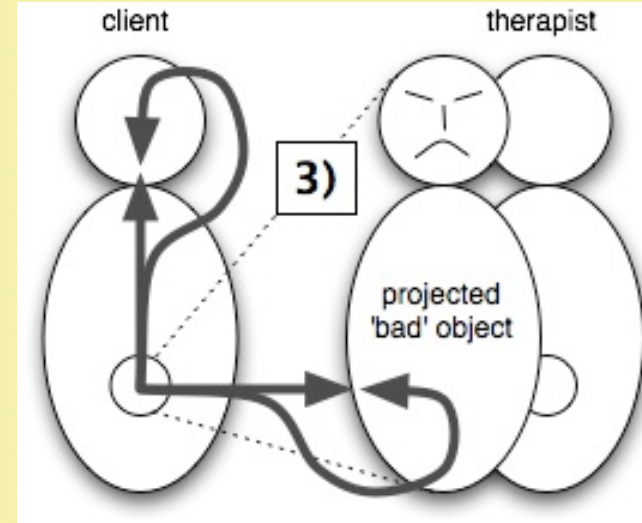
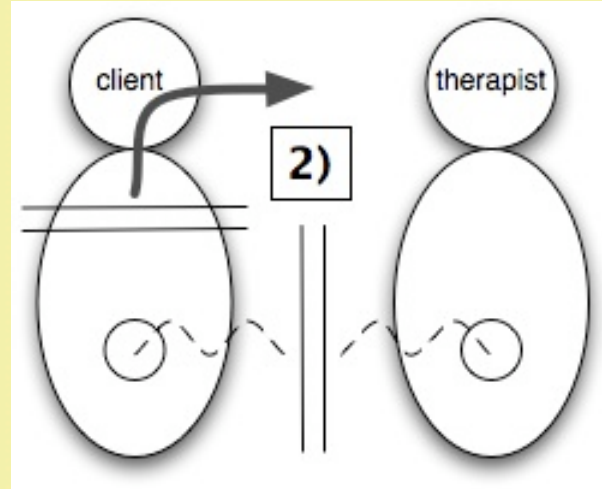
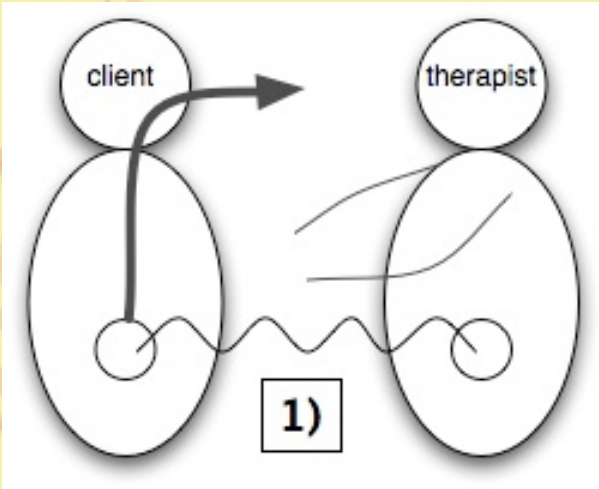
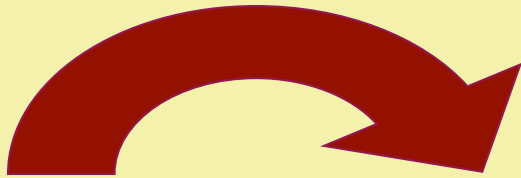
therapist intuits that possibility for re-enactment of client's wounding and negative patterns is strong = tendency to go unconscious

Three kinds of contact in the therapeutic relationship: the spiralling process



How to facilitate and/or contain the transition from 1) to 2) ?

How to facilitate and/or contain the transition from 2) to 3) ?



the transition from 3) back to 1) happens spontaneously

three parallel relationships

PAST
relationship(s)

1)

Primary Scenario (Jack Rosenberg)
originally wounding relationship

becomes internalised as ...



INTERNAL
& internalised
relationship(s)

2)

Character Structure (Wilhelm Reich)
frozen life history = energetic bodymind matrix

is manifested / externalised and
enacted in ...



PRESENT
here & now
relationship(s)

3)

Therapeutic Relationship
transference & countertransference

References/Hand-outs

- **Soth, M. (2005) Embodied Countertransference.**
in: **Totton, N. (2005) New Dimensions in Body Psychotherapy.** Maidenhead: OUP
- **Soth, M. (2006) How ‘the wound’ enters the room and the relationship, Therapy Today, December 2006**
- **Soth, M. (2008) Enactment as the central concept of relational therapy -**
Soth2008_BACP_Enactment_72.pdf

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<http://www.integra-cpd.co.uk/resources/>