Projection

We don’t see things as they are; we see things as we are.

(Anais Nin, 1990)

Picture yourself at the cinema. The image you are watching on the screen before you did not originate on that screen, it was thrown onto it from the film in the projector behind you. In essence, this describes the psychological process of projection whereby an attitude, trait or quality is assigned to another (individual, group or object) and in the process is disowned by the projector(s). In the previous point, I described a particular manifestation of a process where the client splits himself. In projection, splitting also occurs but this time the aspect is thrown out onto ‘the screen’ of the environment. Simply stated, projection is seeing in others what is present in myself.

Experiential exercise

It would be more effective to complete this exercise with someone else, but the exercise can be completed alone.

Take a piece of paper and write at the top the name of a character, fictional or real, whose qualities you really admire. Now list those qualities you admire. Turning to your partner (or maybe a mirror), maintaining as much eye contact as you can and attending to your breathing, I now invite you to share your list of qualities out loud but in sharing them own them for yourself with direct ‘I am...’ statements. Note any temptations to rush as you try the qualities on for size. Your partner may be able to offer feedback regarding whether they see any of these qualities in you.

Projection tends to occur when an aspect of the person does not fit with their self-concept. Examples could be seen in a client seeing their therapist as brilliant and disowning their own brilliance. Alternatively, one may attribute disowned shadow qualities such as a capacity for disowning that leads to projection. Sometimes there is projection. One reason is also used to de

- The ability to imagine future, to be a canvas; a poet projects
- The process when therapist, for example, onto the therapist as transference

In the give and take, their need or desire can project. For example, through a process of projection, she projects her need. Before we go any further, the image projects exist on the film in the form that you see it. It can be seen on the screen to be smooth and wholistic; the clarity of the image is interest and identifies. I am saying is that onto the therapist, in the situation in an adjustment we need to recognize that from other moderately related.

Projection is manifest to our own bodies: our body is considered subject (Kepner, 19) and describe their body
as we are.
(Nin, 1990)

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such as a capacity for hate, terror or evil onto a group, a style of
disowning that leads to all forms of prejudice and racism.

Sometimes there is confusion when discussing the concept of
projection. One reason this confusion arises is because ‘projection’ is also used to describe:

- The ability to imagine what is not there – to anticipate a possi-
bule future, to be creative. An artist projects his vision onto the
canvas; a poet projects hers in prose.
- The process where a historical figure is projected onto the
therapist, for example a mother or father being projected onto the therapist. This form of projection is usually referred
to as transference.

In the give and take of a therapy session a client could project
their need or desire onto the therapist and then respond to their
projection. For example, a client has a need for love and care but
through a process of introjection does not see herself as deserving.
She projects her need onto the therapist and takes care of her.

Before we go any further I would like to return to our cinema
and the image projected onto the screen. Although the image may
exist on the film in the projector behind you (though not in the
form that you see it), it requires a whole set of field conditions to
be seen on the screen. The screen itself is needed and that needs
to be smooth and white to reflect the light. The cinema needs to be
dark; the clarity of the image will also depend upon your level of
interest and identification with the subject. I could go on. What
I am saying is that the client does not simply throw something
onto the therapist, but that there are a multitude of factors at play
in the situation in any one moment. Just as with any other creative
adjustment we need to view projection as a co-created phenomenon
and recognize that this moderation does not occur in isolation
from other moderations but that all moderations are functionally
related.

Projection is marked by distancing. This can occur in relation
to our own bodies and is evident in the language used where the
body is considered an object of experience and not part of the
subject (Kepner, 1987). For example, when someone is asked to
describe their body experience they respond with, ‘The shoulder is
tense’ or ‘the muscle aches’. Here the split and projection is clear. However, the response may be a more subtle projection that suggests ownership, e.g. ‘My shoulder is tense’, ‘My muscle aches’. The use of ‘my’ seems to imply an identification between body experience and self, but this is not necessarily so. It implies possession in the sense of property (my handbag, my car) and the distinction between the owner and the object owned remains. This can go unnoticed because it is such a cultural norm – and many therapists do it too! We may ask, ‘Whose shoulder is tense and who is tensing it?’ or simply, ‘Who is tense?’ Therapeutic work with projection of body experiences is a matter of moving from ‘It is tense’ to ‘I am tensing’ or from ‘My muscle aches’ to ‘I am aching’. Beyond this the full figure will require not only connection between self and body process but also with environment, e.g. ‘I am tensing . . . because I feel worry of you’ or ‘I am aching . . . because I feel isolated’.

PHG touch on projection in the form of prejudice Perls recounts a story when a new candidate was being selected at a club at a committee meeting. At this club whenever a particular name came up and someone wanted to give them the thumbs down, the committee member had to state his reasons. The list of the members disliking the candidate and not wanting him to join the club amounted to a listing of the member’s own worst faults!

If you were brought up in Britain you will have internalized some racist attitudes (Joyce and Sills, 2001). It’s not possible to grow up in a culture such as ours with its colonial history and aspirations as a world power without having internalized some sense of white British superiority. If you are white a sense of white-rightness maybe deeply imbedded. If black, you may have internalized a sense of oppression or powerlessness or that other is more entitled. If you are black and a non-British resident this sense is likely to be increased.

Confluence

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