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RELATIONAL PATTERNS OF BEING IN COMMUNICATIVE PSYCHOTHERAPY

A Thesis by Published Works submitted to Middlesex University in partial fulfilment of the requirements for the Doctor of Philosophy

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February 2001
Abstract

Communicative Psychotherapy is characterised by its distinctive focus on the immediate therapeutic interaction. The approach identifies the client’s unconscious curative abilities to guide the treatment process, while also acknowledging the practitioner’s potential to also disturb the therapeutic procedure. The major thrust of Communicative Psychotherapy is related to the significance of death anxiety. This notion is consistently addressed around the boundary issues (as they arise) of the therapeutic environment. The approach emphasizes the interpersonal influence that this ongoing existential concern has on the quality of the therapeutic relationship.

The school of Existential Phenomenology is generally viewed as antagonistic to theories of human behaviour that stress the role of the unconscious. The research has examined the connections between some major existential themes, taken from a specific tradition of European existentialism and the communicative approach to psychotherapy. The discourse has explored and juxtaposed some key existential concepts of being in the world in order to clarify the interpersonal communicative focus on being - between client and therapist in the consulting room. The work has sought to display a common philosophical thread that unites existentialism to the communicative model. The research has also systematically applied and revealed a link between fractal patterns that signify disorder in Dynamical Systems Theory and communicative practice, which is principally focused on the client’s recurring narrative themes that relate to the boundary disturbances in the therapeutic system.

The context statement has extended, amplified and grounded the main topic of the thesis by integrating three further features. (1) By augmenting the triple link between Existential Philosophy, Chaos Theory and Communicative Psychotherapy. (2) By displaying the relational principles that are implied in the three manifestly divergent disciplines. (3) By illustrating the phenomenological aspects of the communicative method.
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Published Works Submitted for the Thesis


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Background

As far as the author is aware her interest and interpretation of the Communicative approach to Psychoanalytic Psychotherapy was fueled and sustained by its strong interpersonal focus and its commitment to a more egalitarian philosophy of human engagement and communication. The concept of unconscious perception is central to the model and replaces the notion of transference as the principle therapeutic tool. The approach considers the significance of boundaries and limits as one of the most prominent human concerns. From a Communicative perspective the patient is able to discern, and will communicate their interpersonal perceptions of the therapist’s ability to manage the framework of the relationship. Communicative technique is focused almost exclusively on the here and now of the therapeutic interaction and consistently addresses the need for regularity and order on the one hand as well as the anxiety that ensues when either member of the dyad is confronted by the inevitable restrictions that are imposed upon the relationship. The focus on the paradox of the boundaries of therapy may also be seen as a microcosm of human existence. The ultimate limit situation is death. The notion of death anxiety is well documented by researchers in the field of philosophy and psychotherapy and is considered to be a fundamental human concern. Klein (1946), Searles (1961), Heidegger (1962), Jaspers (1969), Yalom (1980), Langs (1979) and a major contributory factor in emotional disturbance.

The concept has been explored from a neo Freudian tradition in Klein’s developmental model, which stresses death anxiety and vulnerability as a major and ongoing source of human distress. Harold Searle’s work is also underscored by the influence that the inevitability of death has on human suffering. He asserts that the
recognition of death requires an awareness of the individual's vulnerable position in the world. Searles considers that this is both the cornerstone and the source of schizophrenic symptoms, the unconscious attempt to defend against the realisation of one's mortality. The theme of death is also a prominent feature in existential philosophy. According to Heidegger an acceptance of the certainty of death frees the existent to live more realistically in the world. The work of Karl Jaspers the German philosopher centres around the link between the limits of existence and the importance of human transcendence. The existential writers May and Yalom also endorse Jaspers dictum. Langs states that; 'It is the specific contributions of the Communicative approach to identify death anxiety as a central source of emotional danger and, in particular as a major factor in the unconscious meaning of madness' (1988.p182).

The communicative approach to Psychoanalytic Psychotherapy was developed in the early 1970's by Robert Langs partly as a response to some of the major criticisms and methodological inconsistencies leveled against classical and mainstream psychoanalytic principles and practice. Langs (1973,1976,1978). Two of the major concepts employed in the practice of psychoanalysis tend to be open to interpretation. These ambiguities in definition may therefore be utilised by the therapist as a means of self protection. In this sense the therapist is afforded an inordinate and unrealistic degree of power and control, while the patient remains in the most disadvantaged, vulnerable and least insightful position. The original definition of transference and its subsequent reformulation, which generally uphold the distorting influence of the patient’s relationship to the therapist, can be considered to encourage an attitude on the part of the practitioner as “the one who knows”. Furthermore, the deconstruction of the patients defensive strategies as a standard technical psychoanalytic procedure, which includes the defence of transference, also reinforces this unilateral inclination. This discussion is explored in the author's text There Is No Such Thing As A Therapist (1998. pp125-7). The discrepancy is examined with reference to a clinical vignette taken from Arlow (1984), in which he presented a case study example of a
psychoanalytic session for trainee psychotherapists. However, some other distinguished analysts while remaining committed to psychoanalytic principles and practice have also warned of the dangers of not taking a self critical stance towards their clinical work, Klauber (1972) Rosenfeld (1987). Both of these practitioners have even handedly explored clinical interpretations in terms of both their therapeutic and anti therapeutic effects. Nevertheless one of the prominent critiques is related to the lack of clarity in two of the definitions that underpin psychoanalysis. The theory of transference offers an explanation of how the patient's past enters into the current psychoanalytic relationship. Transference refers to the unconscious inclination to represent present relationships as repetitions from early childhood experiences and relationships. Freud initially considered this distortion to be an impediment to the treatment. From 1909 onwards he began to view transference as a vital element in the theory and practice of psychoanalysis. A major modification in the original definition of transference occurred alongside the developments in object relation ideas (Klein 1932). This reformulation extended the notion to include everything that occurs in the analysis as transference (Joseph 1985). Freud first introduced the concept of countertransference in 1910 when he stated; 'We have become aware of the"counter-transference", which arises in him as a result of the patient's influence on his unconscious feelings, and we are almost inclined to insist that he shall recognise this counter-transference in himself and over-come it' (pp144-5). Further on Freud recommends that the trainee analyst is required to subject themselves to regular periods of self analysis in order to "over-come" their countertransference reactions. It has been proposed that the accurate definition of countertransference is 'The analyst's transference on his patient. In this the correct, sense, countertransference is a disturbing, distorting element in the treatment' (Rycroft1972,p25). Freud viewed the concept of countertransference in a similar light to his early ideas on transference. That it was an affect that needed to be excluded as quickly as possible from the analysis. However unlike his subsequent views of transference which became an essential therapeutic tool, Freud did not redefine his
ideas on the use of countertransference in the analytic treatment. Nevertheless over
time the concept of countertransference has undergone various adulterations and
expansions since it's original distinct Freudian conception. A new phase in the history
of counter-transference occurred in the 1950's. Klein and the object relations theorists
were at the forefront of this new interest and extended it’s meaning to also include the
analyst’s feelings as an indication of the patient’s inner experience and emotional state
(Heimann 1950). Paula Heimann a Kleinian analyst pioneered the new trend which
saw the efficacious value of countertransference. She asserted that the experience of
countertransference reaction in the analyst were reflections of the patient’s
unconscious and therefore contained important information about the patient’s true
emotional state. In her seminal paper Heimann recommended that the analyst needed
to, not only be aware of her own affects, but should also utilise them constructively in
their interpretations to the patient. Heimann viewed countertransference as a normal
response and an important therapeutic tool for comprehending the patient.

The concept of Projective Identification developed by Klein (1946) also
describes a specific type of interpersonal process that would be subsumed under the
umbrella of countertransference. Projective Identification involves at least two people
one of whom unconsciously projects a denied element of themselves into the other
person, who then absorbs the projection as their own. The notion is now a central
component of Kleinian analysis. Kleinians place great stress on their own emotional
experience as evidence for the patient’s projective identification. Heimann’s split with
Klein, was a result of Klein’s disagreement with Heimann’s countertransference
reformulation in relation to Projective Identification. However other Kleinian analysts
such as Racker (1953) and Bion (1959) were to later make the link between Heimann’s
original work on Countertransference and the concept of Projective Identification.
Countertransference is now defined in at least two contradictory ways. For example when the analyst’s feelings are utilised as a form of evidence, by assuming that her countertransference reactions are actually based on the analyst’s valid perceptions of the patient’s true feelings and intentions. Or countertransference as an impediment, distorting factor and resistant element in the analyst’s ability to remain relatively neutral towards the patient, which Freud referred to as the analyst’s ‘blind spots’.

Communicative Psychoanalytic Psychotherapy has taken a radical leap and dispensed with two of the defining psychoanalytic concepts. The notion of transference is replaced by the idea of unconscious perception as its guiding principle. Langs has also introduced the unambiguous and unequivocal term “Therapist Madness” as a substitute for countertransference. The communicative approach in contrast to other forms of psychotherapy see patient and therapist madness as intimately linked and entwined. The approach also acknowledges that on some occasions the mainspring for the patient’s mad behaviour may even be instigated by the therapist’s inability to contain their own madness. These reformulations are considered to place both members of the therapeutic dyad on a more equal and realistic footing as both patient and therapist are viewed as being subject to the same existential difficulties and anxieties. The notion of unconscious perception also endorses the idea of the patient’s natural curative capacity as an integral aspect of the therapeutic process. It therefore falls to the therapist to acknowledge their disturbances as they arise in relation to the patient’s unconscious interpersonal messages, unlike psychoanalysis with its emphasis on the disparity between the analyst’ perceptions as generally rational, compared to the patient’s perceptions as often distorted. The communicative relationship and the individual roles within it are seen as less clearly defined often interchangeable and more complementary. Communicative Psychotherapy is therefore essentially interested in addressing and reinforcing the patient’s curative abilities that accrue from the therapist’s acknowledgment and adaptations of the patient’s narrative perceptions.
of the relationship.

Langs development of the communicative approach eventually led to the replacement of the notion of transference with the concept of unconscious perception. In contrast to the Freudian formulation of transference which refers to the unconscious predilections of the patient to make a false interpersonal connection to the therapist, that has its roots in early childhood relationships. Unconscious perception on the other hand refers to the trustworthy attribute and spontaneous ability to authentically and accurately perceive interpersonal reality. The past is considered to enter the present situation as the patient is selectively reminded of the true similarities between early childhood relationships that are being repeated in the immediate therapeutic interaction. Langs states; ‘Communicative Psychotherapy is therefore primarily concerned with the non-transference interpersonal meanings of the patient’s unconscious perceptions’ (1982.p210). Unconscious perception is expressed primarily through the mechanisms of displacement and disguise and can be recognised as stories or narratives that relate to the behaviour of people and situations that are manifestly unrelated to the clinical situation but which are considered to represent valid unconscious insights of the patient’s perception of the therapist’s behaviour. The need to process reflections of others outside of awareness through the defensive mechanisms of displacement and disguise as a means of reducing anxiety has its origins in Freud’s major work the ‘The Interpretation of Dreams’ 1900. However Langs’ thesis concentrates on the automatic unconscious need to conceal our accurate (albeit disturbing) perceptions of others through the mechanisms of encoded narratives as a means of reducing interpersonal anxiety. The recipient also remains protected unless they are able, or prepared to decode these insightful interpersonal messages. Communicative Psychotherapy attests to the significance of this medium of expression which at both one and the same time both conceal and reveal important interpersonal emotional truths in our everyday lives; especially to concerns that relate to interpersonal boundaries.
Langs’ Communicative Psychotherapy has also substituted the term “Therapist Madness” to replace the concept of Countertransference. As stated previously, countertransference is now defined in at least two contradictory ways. Karen Maroda in her text The Power of Countertransference reiterates the problem; she states ‘However in practice there are enormous difficulties in making distinctions between the “real” and the “imagined”, projected, displaced or distorted. Traditionally making such distinctions have been a major part of the therapist’s role. It is the therapist who decides what is transference and what is not. it is the therapist who decides what is countertransference and what is not. The therapist assumes this power based on the belief that the patient is not in position to make these distinctions himself.’ (1994, p98).

Maroda’s text argues for some changes in standard psychoanalytic technique. She asserts that a neutral analytic attitude is not always appropriate or helpful for the patient. She also considers that countertransference disclosure can be a powerful and effective therapeutic strategy. Unlike Communicative Psychotherapy, Maroda’s message is a request for psychoanalysis to relinquish its rigid stance and instead to adopt a more flexible analytic attitude. Communicative Psychotherapy on the other hand is a radical, an alternative paradigm to psychoanalysis and to human interaction. The preferred term therapist madness is itself crystal clear. Langs’s introduction of the term therapist madness highlights the patient’s unconscious supervisory and curative capacities to pin point the disturbed and disturbing aspects of the therapist’s management of the environment that are contributing to the patient’s sense of instability and mistrust within the relationship. The communicative approach acknowledges that elements of therapist madness will inevitably enter into the therapeutic proceedings. The approach also accepts that on some occasions the mainspring for the patient’s so called mad behaviour may even be instigated by the therapist’s psychopathology.

The technique of Communicative Psychotherapy is determined by its reciprocal and systemic focus with both parties viewed as giving and receiving interpersonal
insights and communications. The communicative practitioner is committed to feeding back the patient’s narrative messages that tend to relate to boundary disturbances in the therapeutic system. Unconscious perception which is represented through encoded or derivative messages and the patient’s curative abilities to guide the treatment process are the guiding principles of Communicative Psychotherapy. These narrative messages are the patient’s unconscious perceptions of the therapist’s ability to manage the appropriate boundaries of intimacy and separateness of the therapeutic interaction. The patient’s encoded messages are the primary source of supervisory information and advice for the therapist; and contain the essential themes and material for the therapist’s subsequent interventions.

Development of the Research

The author’s teaching and supervisory experience of Psychoanalytic Communicative Psychotherapy at MA Degree level and advanced professional level training, as well as in discussion with faculty colleagues, who teach Existential components of these programmes; had led the candidate to believe that there was no possible convergence or points of negotiation between communicative theory and practice, and existential philosophy. However the author contends that in order to practice an approach that is predicated on interpersonal, and here and now premises would by necessity entail forging links with some of the principles that are subsumed under the heading of existentialism.

The term metapsychology devised by Freud refers to abstract hypothetical structures and processes (such as the unconscious) which are not generally amenable to empirical validation. These working clinical hypothesis by definition also proffer a particular philosophy of human nature. Existentialism on the other hand is primarily concerned with ontology or the experience of being in the world. Existentialism is grounded in the tradition of phenomenology, which eschews and refrains from constructing hypothesis about human nature. Sartre’s thesis asserts that human beings
do not have a fixed nature, or essence, they are essentially nothing, they have an existence and in the process they create themselves. The human existent for Sartre is essentially part of the world and therefore always in relation.

A major feature of Existentialism and especially Sartre’s work is related to the notion of consciousness or self reflection. In the text *Understanding Phenomenology*, this concept is explained from a Sartrean stance as ‘consciousness is nothing more than self awareness’ Hammond, Howarth, Keat (1991.p108). Sartre argues that human beings are predisposed to focus on a specific activity that they are involved in at any given time and tend to remain unaware of, or omit to give attention to the many other possibilities that they could reflect on from a variety of other perspectives. Sartre’s example of the girl in the cafe who ignores the fact that her companion has taken her hand is cited as an everyday occurrence of how human being’s limit their consciousness. If the girl in the cafe had chosen to respond, it would have subsequently altered her relationship with him in some way.

Communicative Psychotherapy tenders a model of human nature which attests to the significance of unconscious perception which can be discerned through encoded communication. Both of these features seem to be antagonistic to a philosophy of existence. While the author acknowledges the difficulty of bridging this divide, it is also contended that the notion of unconscious perception and unconscious communication nevertheless retains an important element that links communicative practice to existential phenomenology, as the approach is exclusively focused on the relational, contextual or being-with aspects of the encounter. Communicative theory and practice also emphasizes the ontological givens and addresses them in relation to the therapeutic context. Nevertheless the communicative model also stresses how the anxieties that are generated from an awareness of the limits of existence will tend to relegate them to become and remain obscured and concealed from consciousness.
The communicative approach emphasises the immediacy of the therapeutic encounter and the therapist's responsibility for establishing and maintaining an appropriate therapeutic frame. The model, nevertheless, also acknowledges the difficulty of adhering to this remit due to the anxiety that is generated in the presence of a limit situation. The approach also endorses the fluid and paradoxical qualities of both members in the interaction. Furthermore, there is the implicit recognition of an ongoing struggle to listen and be in relation with the other, and the concomitant awareness of the impossibility and reluctance to be able to consistently comply with this task. The author's interest in the interface between these two apparently diverse philosophies led to the development of a second year MA teaching option entitled *Existential Issues in Communicative Practice* combined with writing and research on the subject spanning the last ten years and is ongoing.

**Summary of Selected Works**

Karnac Books, *There Is No Such Thing As A Therapist*, the title was selected to stress the systemic and reciprocal aspects of the relationship, and is taken from Winnicott's enigmatic and provocative statement 'There Is No Such Thing As An Infant'. The title was also intended to underscore and shatter the illusory (albeit satisfying and comfortable) and dangerous idea of the competent, healthy and powerful therapist. One of the main objectives of the work was to offer the student/practitioner a rationale for centering their clinical work at the level of the interpersonal interaction. The communicative therapist is primarily interested in addressing the patient's verbal and nonverbal material as commentaries on their, (the patient's) perceptions of the therapist's management of the ongoing relationship. As the communicative approach is primarily concerned with exploring the vicissitudes of the immediate encounter it seemed eminently appropriate to devote a proportion of the work to the link between some fundamental existential notions drawn from certain traditions of 19th and 20th century existentialism.
Existence refers to being-in-the-world, and a being-in-the-world exists in relation to others, without others there would be no existence. Therefore being-with-others is a primary feature of existence, as such the manner of our being with others is a compelling source of interest in existential thought. The work has sought to examine some specific existential principles which have been cogently explored by writers in this field in order to clarify and explain some of the interpersonal principles that are implied in Communicative Psychotherapy. This theme will be pursued and discussed in some depth further on in the dissertation.

Chapter One describes the basic ground rules of psychotherapy and rationales for offering these clear demarcations. The rules of Psychoanalysis and Psychotherapy have tended to be implicit. Freud used the rather vague term "recommendations" regarding the therapeutic contract. Emphasis is placed on the therapist’s management of the boundaries and how they influence the quality of the relationship. The clinical examples included here are intended to display how the patient is predisposed to supervise the practitioner when the latter diverges in her management of the frame.

Chapter Two considers the many overt and oblique ways in which patient’s attempt to heal their therapists. This section also stresses the interpersonal nature of the encounter. The manner in which the therapist may reveal and communicate her concerns to the patient is also explored. The creation and maintenance of a holding environment is central to the practice of the approach and entails an awareness and understanding of the significance of limits and boundaries.

Chapter Three is entitled The Limits of Therapy and Existential Conflicts, and describes some of the fundamental tenets of existential philosophy as a means of enhancing and underscoring the focus on the therapeutic process. The connection between the therapist’s willingness to confront the major dilemmas of existence is also discussed and regarded as vital aspects to sound Communicative practice.

Chapter Four focuses on the significance of anxiety and its relation to emotional disturbance, from and existential, psychoanalytic and communicative perspective. The
chapter also highlights the way in which the therapist’s capacity to contain her own anxieties is reflected in her ability to secure and manage the limits of the therapeutic frame. The notion of power versus vulnerability is addressed as an ever present and relational theme. The contributions of some important existential thinkers such as J-P. Sartre, R.D.Laings and Victor Frankl are included in this debate. For example J-P. Sartre’s inquiry into the contradictory character of the human condition, and the ingrained capacity for self deception. R.D. Laing’s thesis on the importance of the relationship. Laing was primarily interested in exploring and understanding the psychotic person’s apparently mad communications and responses, as essentially sane reactions to their environmental conditions. The development of his work led him to emphasize the significance of the interpersonal realm and the person in their immediate context. Victor Frankl’s paradoxical techniques for reframing and confronting anxiety are included in this debate.

Chapter Five explores the paradoxical nature of the therapeutic relationship and the inherent contradictions that are considered to exist within all individuals from a Communicative and Existential perspective. The therapeutic relevance for acknowledging these duel elements are also discussed and how they impinge on the therapeutic encounter. The Greek Mythological figure of the Wounded Healer is described in order to illuminate the interdependency of both parties in the dyad. The legend of the wounded healer demonstrates the need for the acceptance and negotiation of these intrinsic contradictory tendencies as a powerful healing force.

Chapter Six examines the inevitable boundary issues that tend to arise for those practitioners who work in public health sector agencies such as primary health care, colleges and institutional settings; as well as those who work with bereavement and the terminally ill. The chapter highlights how some environments maybe chosen by practitioners as a form of defense and escape from addressing their own issues that relate to loss, separation and death. For example standard guidelines for the practice of working with the bereaved tend towards flexibility, sessions are
readily conducted in client’s homes, and in many other unconventional therapeutic settings Worden 1991. The methods and procedures that are utilized in counselling the bereaved are also noticeably similar to the way in which therapy is practiced with HIV & AID’s sufferers and other terminally ill patients. Irving Weisberg a Communicative Psychotherapist has explored this apparent need to digress from a secure limited frame position in his paper “Breaking the Frame in Working with a Dying Patient.” He explains that; ‘working with the dying patient tends to raise the unconscious drive towards frame breaks to even higher levels. Through empathic connection, the sense of one’s own end is brought closer to awareness’ (1991.p33). It is therefore quite understandable why therapists who work with the bereaved and dying may feel compelled to work in environments which establish a mode of working that can obscure and decentralise these deeply pervasive human anxieties.

Confessions of a Communicative Psychotherapist

The link between confession and psychotherapy has been recognized and explored by a number of writers in the field, Freud (1926), Ellenberger (1970), Storr (1979), Friedman (1987). The work discusses the notion of confession in relation to psychotherapy in general and its distinct and unique application to Communicative Psychotherapy.

The sine qua non of communicative practice is founded in the therapist’s acknowledgment of the patient’s curative capacities; in this way it may be said that the power between both members of the dyad is consistently addressed. Paradoxically researchers investigating the motivation for choosing psychotherapy as a profession have found a correlation between inadequate feelings of authority and the need to gain prestige and power; Rycroft (1970), Guggenbuhl-Craig (1971), Goldberg (1993). A research project which investigated the relationship between early childhood experiences and choice of professions, (Merodoulaki 1994) also indicate that therapists as children were afforded a substantial amount of power in their interactions with parents compared to the control group. In her conclusion Merodoulaki suggested an
area for future research based on her findings, an examination of the relationship between a therapist's specific choice of therapeutic approach with early childhood factors.

The text examined how some of these inevitable risks may be specifically employed by the communicative practitioner. An element of the work on Confession explored how the communicative therapist may focus on holding the boundaries firm in a technical and rigid way in order to assuage their own anxieties and unresolved difficulties around power and control. The study also examined the various definitions of confession in relation to the communicative requirement to acknowledge (as in admit or own up) to their framework disturbances, as a possible means for the therapist to unburden themselves in an inappropriate way. The paper concluded by noting how the communicative paradigm could enable practitioners to become more aware and open to the way in which the potential for cure could also be offset by the capacity for its misuse.

**Bad Faith In Psychotherapy**

The research defined and described some basic existential and interpersonal issues that are integral to Sartre's concept of 'Bad Faith' in order to highlight how these ideas may be linked to the central concerns of the communicative method and to the essential philosophy that is implied in the approach. The communicative model does not refer directly to the notion of 'Bad Faith' it does however recognise that the therapist in relation to the patient is just as likely to respond to the basic anxieties of the human condition by a denial of these gives.

Sartre coined the term “Bad Faith” to describe a variety of self-deceptive mechanisms that human beings consistently employ as a means of denying their essential freedom. To a large extent bad faith is seen as both an inevitable human trait and also as a significant and primary factor in how we relate and respond to other
people. From a Sartrean perspective human nature is constituted by nothingness and
defined by its lack of completeness. Human beings need bad faith to continually
disguise and deny this appalling and disturbing state, we need to fill the void and are
often compelled to believe that we are more object like, in order to reduce the anxiety
that accompanies this realisation. Anxiety is considered to arise on those rare occasions
when we realise that we can value anything when we realise that we are not solidly
constituted in ways that objects are, not essentially anything specific, as just say “a
Therapist” or “Bank Manager” etc. Bad faith is the device that the human existent
needs to employ as a means of denying their basic fluidity, finiteness and ambiguity
of being in the world.

Individuals also need to escape into bad faith from the conflicts that arise in our
interaction with others. Through other people we are made aware of ourselves, this
knowing, that other people can describe and label us, also enables us to specify
ourselves and to attempt to label or pin down the other before they do the same to
us. Sartre’s thumb nail sketch of the “Man at the Keyhole” who becomes aware of
being observed, realises that he can be objectively described and labeled as a snoop
or eavesdropper; he is literally trapped by the “Look” of the other. Other people
therefore constitute a threat. Sartre pursues his argument by postulating that human
interaction is compellingly predisposed by a need to control other people because
they are a threat. He concludes that this conflict and struggle for control is the major
and most prominent feature in all human interactions.

The communicative practitioner is obliged to discern and acknowledge the
patient’s interpersonal observations of the therapist’s inability to manage the
boundaries of the interaction. Langs attests to the restrictive and perverse nature of
communicative work when he states; ‘Such work often leads to temporary regressive
and defensive reactions in the psychotherapist a flight from painful interactional truths’
(1984.p9). The intrinsic connection between freedom and responsibility which is
underlined in Sartre’s thesis is also highlighted in communicative practice on those occasions when the therapist is able and prepared to discern and acknowledge their own shortcomings within the interaction and which are disclosed in the patient’s interpersonal narratives. In this way the therapist shoulders her responsibilities by conceding that the patient’s communications are insightful comments and reactions to the immediate therapeutic encounter. The approach also endorses the substantial fluidity and incompleteness of human nature. The model focus’s on the patient’s therapeutic abilities to guide the therapist and the treatment process, paralleled with the therapist’s shifting and fluctuating disposition and need to also receive guidance from the patient. Langs’ model is explicit about the unconscious ability to understand and admit to the ontic and ontological boundaries of human existence. His model tenders a more pessimistic view of the conscious capacity to attend to and accept these human limitations, which contrasts with Sartre’s thesis. The clinical application of Langs’ model does however consistently address and endorse the flexible quality of the therapeutic relationship, which is in keeping with Sartre’s discourse and advice that psychoanalysis needs to attend to the interpersonal subject/object vicissitudes. Cannon explains ‘Sartre believes that the mechanistic, authoritarian approach to psychoanalysis, in which the analyst is only subject and the analysand perpetual object, is mistaken’ (1991.p8). Sartre’s thesis illuminates and stresses the ongoing struggle to engage candidly with others because of the threat that other people pose. His work also underscores the paradoxical elements of human existence. Human beings are both free and limited in their choices. Human beings inevitably exert their freedom by the attitude they take towards their essential limitations. Human beings tend towards Bad Faith as a means of denying their uncertain and vulnerable position in the world. That is, they attempt to control other people in the same way as they control objects in the world. Anxiety and nausea arise on those rare occasions when the person becomes aware that both the environment and other people are not amenable to their control.
The communicative therapist is expected to be committed to regularly exposing themselves to the ‘Look’ of the patient. Similarly a communicative practitioner cannot maintain a position of the proud, detached, observer as she is uniformly under the perceptive gaze of the patient. For example the therapist who arrived late for a clinical session is expected to explicitly acknowledge the patient’s negative perceptions of lateness that are likely to arise in their (The patient’s) ensuing narratives.

Sartre’s central thesis of the incessant struggle for power and control that he considers to be part and parcel of all human interactions is lucidly examined in terms of the need to objectify the other. A communicative therapist undertakes to attempt to adopt an interpersonal and interdependent stance. Communicative principles and practice may be viewed as a regular attempt to address this interpersonal struggle within the consulting room. The inexorable feature of bad faith that is embodied in Sartre’s discourse is also illustrated and supported by Langs’ model, which testifies to a natural tendency to also oppose and hinder this procedure. Langs notes this dilemma for the communicative practitioner when he states; ‘As such this type of interpretation places an extraordinary demand upon the therapist and is likely to constitute an anxiety provoking danger situation that may disturb the therapist in areas where he is still vulnerable to countertransference (therapist madness). Indeed, to this day therapist’s attempt to avoid this type of interpretation and prefer virtually any other activity to its utilisation’ (1984,p9). Bad faith from a communicative perspective relates to the therapist’s inability or refusal to consider their own contribution (the therapist’s late arrival in the previous clinical vignette) to the themes of lateness disguised in the patient’s subsequent derivative messages.

On Snowflakes and Psychotherapy

The work outlines the basic ideas of chaos, complexity and dynamical systems theory taken from the physical sciences in order to explain and highlight their relevance to the therapeutic system. In the early 60’s a meteorologist Edward Lorenz made a
startling discovery (now well documented) when he revealed the acute sensitivity of
the weather system. He showed how an apparently insignificant event, such as steam
rising from the bonnet of a car, or the wind from the wings of a butterfly maybe
sufficient to radically alter the activity of the weather. Lorenz’s seminal work showed
that dynamical systems exhibited intense sensitivity to their initial conditions.
Dynamical systems are referred to as non-linear precisely because any small change in a
part of the system can subsequently influence the entire system.

More recently research in systems theory have become more interested in the
chaotic aspects of non-linear systems and the paradoxes that emerge when a system is
disturbed. Findings indicate that even when a system appears to be erratic, unstable or
chaotic, there is nevertheless a hidden order that underlies the chaos; that is
inextricably linked to both the onset and decline of the disturbance. Research has
revealed the emergence of distinctive patterns that denote a change in the system.
These patterns represent the activity of the system and a time of potential and
opportunity for the system to transform into a more complex order. The intimate
connection between chaos and order can also be recognised in themes that are
prominent to a philosophy of existence. From a systemic perspective chaos and order
are compellingly attached and one can imply the other, in the midst of chaos some
order prevails. Similarly an ordered system has the potential to abruptly become
chaotic. The term dynamical refers to the movement that occurs between these
apparently opposite poles. As Briggs points out in his text Patterns in Chaos,
‘Paradoxically the study of chaos is also the study of wholeness’ (1992,p21). The
notion of paradox is central to chaos theory, dynamical systems help to explain
conceptually the lack of division between the chaotic and ordered parts of any system,
or between one part of a system and another. More then anything chaos theory
illuminates and emphasises the notion of change in all living systems.

The relevance of paradox is also a central feature in existential thought. One of
the major plights that dogs human existence and elicits anxiety is the contradiction
between the individuals freedom contrasted with their inescapable human limitations. Life and death are inextricably combined, paradoxically a focus on one pole limits the person’s capacity to make choices and exacerbates anxiety. Existentialists encourage the confrontation with this paradox, the awareness and appreciation of this dynamical principle, of the tension between these opposites, can paradoxically; reduce the individuals anxiety. Victor Frankl’s therapeutic technique of “paradoxical intention”.is based on this existential premise.

The procedure of paradoxical intention is outlined in the candidate’s publications. There Is No Such Thing As A Therapist (1998. pp97-8). Systems Theory places considerable stress on the inevitability of the tension between chaos and order. Existential Philosophy speaks of freedom accompanied by indispensable limitations. Systems Theory emphasizes the impossibility of separating physical matter from the system that it inhabits. Existential Philosophy anchors being firmly in the world. Both disciplines prioritise and attest to the principle of holism which is governed by accentuating and maintaining the elasticity between inseparable opposites.

Fractals

Patterns that signify the systems movement from order to chaos are known as fractals. The term Fractal is derived from the latin fractus meaning irregular or fragmented. Mandelbrot’s (1977) discovery of the fractal nature of chaos theory led to the understanding that objects and organisms in the natural world develop in a self similar way. Fractal self similarity can be found in trees, coastlines, the vascular system in the human body and throughout the natural world. Fractals and self similarity reveal how the world has evolved through interaction with everything else, enfolded worlds within self similar worlds. Briggs and Peat (1999) explain how these repetitive patterns in nature can be discerned by magnifying a small portion that shows its self similarity to infinity. They state; ‘A coastline is produced by the chaotic action of waves and other geological forces. These act at every scale to generate shapes that repeat on smaller
scales, a pattern roughly similar to the one at the large scale. In other words, chaos generates forms and leaves behind tracks that possess what chaos scientist's refer to as “self-similarity at many different scales” (p102). Fractal patterns reveal repeated self-similarity over time and indicate the unique aspects of a system or organism. Patterns of self-similarity are characteristic of the irregular movement or turbulence as the system is poised between chaos and possible new order. These chaotic moments present the system with an opportunity to restructure or self-organise into a higher or more complex order. Self-organisation refers to the new order or transformation that can emerge out of chaos through the mechanism of feedback loops (see p169 Snowflakes paper, 1999). When positive and negative feedback loops work in co-operation they are able to create a new dynamic balance, known as bifurcation points; these are the moments when chaos may spontaneously branch off into new order.

More recently the application of chaos theory has evoked interest in psychology, in the field of medicine and in the art world. The author has specifically applied the notion of fractals and self-similarity taken from chaos theory to help explain the focus on the patient’s recurring narrative that are central to Communicative Psychotherapy. The work concludes with a tentative hypothesis of how communicative practice may contribute to therapeutic change and self-organisation. Fractal patterns describe the incessant composition of interwoven patterns on different scales. For example every segment of a cauliflower is self similar to the whole cauliflower, in the same way as a branch of a tree is self-similar and a clear representation of the whole tree. See clinical example On Snowflakes and Psychotherapy (1999, p168)

Snowflakes

An ice molecule has the capacity to develop into a recognisable six sided snowflake figure. The ice molecule’s potential is however intimately related to and influenced by the atmospheric conditions of heat and moisture in the air that it encounters in the environment on its unstable journey through space and time. As
Briggs (1992) states; 'Snowflakes are fractal records of the changing circumstance the ice encountered during its descent' (p.94). Fractal patterns and self-similarity are therefore natures elegant alarm signal that reveal that the system is in crisis. A moment in time which may also enable the elements in the system to self organise.

Feedback

Feedback is a distinguishing feature of dynamical systems: Briggs (1992), Briggs & Peat (1999), Butz (1997), research has shown that positive feedback can suddenly produce turbulent activity in an ordered system, while negative feedback in a chaotic system can enable the system to adjust and just as suddenly revert to a stable state.

Communicative Psychotherapy and System Theory

Langs’ asserts that models of the mind and model making in psychotherapy research is an important area that has tended to be neglected in this discipline. Model making is considered to encourage creativity and new ideas and enable researchers to empirically test out the hypothesis that are generated from the model, which then leads to the development of new models. The communicative model of the mind has been likened to Freud’s topographical model as it is made up of two basic systems, the conscious system and the deep unconscious system. The conscious system processes information in a logical sequential and linear manner. Unlike the deep unconscious system which processes its perceptions in a totally different way. In contrast to conscious system functioning which recognises difference and communicates directly. The unconscious system is focused on similarity and synthesises its perceptions of others, it is also unable to express its ideas in any direct way. From a communicative perspective one of the major attributes of the deep unconscious system is its ability to comprehend interpersonal reality. According to the communicative model the deep unconscious is able to make rapid and perceptive judgements about other people. In Freud’s major work ‘The Interpretation of Dreams’ 1900, he postulated how the unconscious could only express its ideas by connecting on to a preconscious idea thus
rendering it less harmful. According to the communicative model the expression of unconscious ideas are displayed in a similar way in encoded or derivative form. From a communicative perspective the expression of a derivative, narrative or unconscious communication is always connected thematically to an unconscious idea. A dream is symbolically represented and disguised in order to protect the dreamer from unconscious anxiety provoking concerns. From a communicative perspective we also experience deep unconscious perceptions of others in our everyday lives and communicate these threatening and disturbing interpersonal ideas in oblique and indirect ways.

The communicative psychotherapist is obliged to consistently focus on the patterns and themes that underlie the patient’s communications and that are considered to reflect their (the patient’s) perceptions of the therapist’s management of the boundaries of the therapeutic system. The therapist is then required to feedback and address these themes in order to rebalance and stabilise the system. Although the communicative method depends on a commitment to a holistic interpersonal paradigm, the communicative model also identifies the practitioner’s inherent dilemma that may also impede their capacity to respond systemically. This is related to the conscious minds denial of the significance of interpersonal boundaries. This paradox is related to the opposing forces, of the unconscious acceptance and need for boundaries and limits contrasted with the conscious denial and significance that is also implied in the existential limitations of the human condition. The communicative therapist is obliged to attend to and affirm the patient’s selective impressions of the therapist’s difficulties in managing and securing the therapeutic frame. However, the communicative model recognises the disagreeable nature of the work and the reluctance to deal with framework issues. This obstacle is based on Langs two tiered contradictory model of the mind. The conscious system is considered to be generally insensitive to concerns that relate to interpersonal boundaries, more focused on personal survival, self protective and built for defence. Where as the unconscious is viewed as primarily
concerned with deeper meanings, that are denied consciously, exceedingly alert to inappropriate forms of relating and able to endure painful traumatic truths. Langs’ explains the persistent dilemma of communicative work; ‘Secured-frame death anxieties strongly linked to the recognition of the inevitability of personal demise, render these frames difficult to endure - despite their very positive effects. Basically, secured frames are linked unconsciously to the realization that we are all trapped in a living space from which we depart or escape only through death’ (1998,p75)

The application of chaos theory and a systemic approach to the investigation of the therapeutic process has yielded some interesting and useful contributions to the field in general Butz (1997) states ‘One of the clear distinctions in chaos, complexity and the new physics is on the nature of time, is that self organisation only occurs in the present’ (p,140). Slife and Lanyon (1991) also reinforce the significance of addressing the immediate issues as they arise within the therapeutic encounter. They propose ‘that the process of being in the here and now also alters the individuals temporal relationship with the outside world, conceptualising the present as an open door through which both past, present and future may be affected’ (p.179).

Illya Prigogene was awarded the Nobel Prize in 1977 for developing the theory of dissipative structures which helped to explain how change occurs in both physics and the natural world. His work illustrates how non linear systems are not only able to sustain themselves through chaotic periods without collapsing, but are also able to develop new forms of stability. This process of emerging order out of chaos is referred to as self organisation. Prigogene’s work further suggests that chaotic periods are a requirement for the emergence of new levels of stability. The theory of dissipative structures may also throw some light on how change occurs for the patient in Communicative Psychotherapy, as the therapist consistently addresses the patient’s experience of disorder in the immediate context of the therapeutic system. The
communicative practitioner undertakes to feedback the patient’s derivative material that relate to the here and now of the conditions of the therapeutic system. Chaos in the therapeutic system can be inferred from the self-similar derivative communications, or underlying fractals from the patient that coalesce around a theme that links the manifest stories outside of the therapy to the therapeutic arena, and also connect to repetitive patterns from the patient’s past. These derivatives may be described as underlying fractal patterns which alert the therapist to the disorder in the system and the need to respond to the unconscious systemic advice from the patient. The potential for new order and the possibility for new patterns to emerge, may be considered to occur as a result of the therapist’s ability to stabilise the environment in response to the feedback from the patient. This rebalancing through the mechanism of the system’s feedback may then influence the patient’s capacity to develop new patterns of relating outside of the therapy.

**Strengths and Weaknesses**

The thesis has sought to integrate a philosophy of existence with communicative principles and practice as a means of penetrating and supporting the rationale for the specific focus of communicative work. The main intention of this alliance is to offer an intelligible explanation for the idiosyncratic concentration on framework issues that are central to Communicative Psychotherapy. The explicit and systematic linking of Communicative Psychotherapy to Sartre’s in depth examination of human relations offers a new contribution to the field and to the philosophy underlining Communicative Psychotherapy.

The paradoxical features of human existence that are highlighted in existential philosophy can also be seen in action in communicative practice. Both parties give and receive therapeutic insights, both members of the therapeutic interaction are considered to be consistently concerned with the vicissitudes of the freedom and limitations of
existence as it is played out, addressed and confronted within and around the framework of the therapeutic environment. The introduction of dynamical systems theory as a third link has been included in order to reinforce, augment and clarify the intimate connection between the essential contradictions of human existence that are exemplified in Communicative Psychotherapy. This theme is further expounded and vividly symbolised in a systems approach which embodies the inseparable link between order and chaos and the importance for the acceptance of these two apparently opposing forces. The work has examined ideas drawn from three particular areas of seemingly disparate schools of thought. (1) A philosophy of being in the world; (2) A distinctive version of interpersonal psychotherapy; (3) A model of systems theory taken from the physical sciences. The thesis can be summarised as an amalgam of these ideas that centralise around the notion of holism. The view in which individual elements are determined by the relation that they have to other elements in the system.

The difficulty of granting equal statues to others and the inherent dangers of engaging openly has been addressed in existential literature as a trenchant issue and ongoing human struggle Sartre (1943, Buber (1958). Both authors attest to the view that a fundamental source of interpersonal difficulty is related to the natural tendency to regularly resort to defensive and fragmented modes of interaction. The systematic method of communicative work requires the clinician to monitor the patient’s perceptions of the interaction, especially those moments when the therapist degenerates into responding in a more defensive and less engaged way. A dovetailing of the two approaches serves to illustrate more emphatically the disconcerting and frustrating nature of communicative work and the therapeutic importance of attending to the existential dynamics that are built into but only implied in Communicative Psychotherapy. Paradoxically it has been posited (Holmes 1999) that a therapeutic approach which attends to boundary issues may attract therapists who are reacting against concerns about personal chaos and interpersonal anxieties associated with intimacy and the need to remain separate. A further rationale for interlinking the two
schools relates to communicative technique, which is clearly demarcated and defined. The inclusion of a focus that emphasizes the cardinal pressures and dilemmas of existence may reduce the likelihood of applying the method in a customised, prescriptive and defensive way.

One of the main features of the first part of the thesis is the refinement and elucidation of the communicative approach through the application of some fundamental existential tenets. The descriptive value of conjoining an existential stance with a model of psychotherapy that is based on unconscious perception may enable the student/practitioner to continually deliberate on their role within the consulting room in a more subjective way. The strength of the work may also point to its weakness which is only briefly referred to in the work as stated in Bad Faith in Psychotherapy (1998,p52) ; ‘Existential Psychotherapy emphasizes the person’s conscious experience and attends to aiding the patient to discriminate between her assumptions and values. It is essentially a therapeutic approach that enables the person to philosophise about her unique position in the world and to make choices based on these reflections’.

Ludwig Binswanger (1963) has been described as one of the first existential therapists. He considered being with and relating as the principle characteristic of human existence. He therefore emphasized the importance of engagement between therapist and patient. Binswanger developed four categories of relating to the world. The fourth mode which he identified as “dual” was concerned with intimacy and has been likened to Buber’s I-thou relation. Binswanger was interested in his patient’s symptoms, not as an aspect of psychopathology, but in terms of the meaning they had for the patient. Symptoms for Binswanger represented the patient’s convoluted bungled attempts to address an important interpersonal problem.

The communicative therapist emphasizes the patient’s immediate experience primarily in interpersonal terms at the level of the patient therapist interaction. Precedence is given to the patient’s unconscious meaning of the encounter, as the patient is felt to be consistently monitoring the therapist’s ability to provide a relatively
stable environment in which to experience their deepest dreads. When the therapist falters in this capacity, the patient is considered to experience these moments of environmental disturbance as a reflection of the therapist’s internal chaos. The patient is expected to convey their experience of the interaction in narrative form. It is the therapist’s task to acknowledge the patient’s valid perceptions and link them to the therapist. In this way the therapist indicates her ability to engage openly with the patient. The therapist is also expected to adapt to the patient’s unconscious requirements. The focal point of Communicative Psychotherapy centres around the vicissitudes of the process of the therapeutic relationship.

Communicative Psychotherapy attests to the ontological and paradoxical significance of the therapeutic frame. Human beings are considered to require a level of safety and security and are also viewed as unconsciously alert to interpersonal boundary issues. On the other hand the secure frame brings to the fore, anxieties that relate to limits, separateness and mortality. Secure frame psychotherapy is felt to offer the patient the possibility to negotiate and endure this most potent existential dread. Van Deurzen - Smith discusses this notable feature from an existential perspective and the importance of learning to live in time, she states; ‘Our mortality is the ultimate truth of our being. The key to becoming authentic is to face our own death and with it our own limitations’ (1997.p39)

The communicative approach is primarily concerned with unconscious meaning and in this way is in opposition to the existential tradition which emphasizes meaning and intentionality as consciousness. Consciousness and self awareness are therefore the bedrock on which Existential Philosophy rests. Self awareness from a communicative position is not explicitly clarified, as such it appears to be somewhat esoteric, emerging through the process of the therapist’s acknowledgement of the patient’s tacit communications that relate to their (the patient’s) frustrations and interpersonal concerns of the therapist’s behaviour. Resulting in the subliminal and sometimes
conscious realisation of the possibility for occasional shared understanding and mutual acceptence, in contrast to the inevitable estrangement that is a common feature of human interaction. The philosophy of the approach which gives precedence to the patient and therapist’s struggle to be there and recognise the experience of the encounter, is posited as very much in keeping with a philosophy of being there in the world with others. This difficulty is only briefly mentioned in the conclusion of the author’s main text (1998, p155-6).

The essay, *Confessions of a Communicative Psychotherapist* centers around the theme of the contrast between the notion of confession from a communicative and psychoanalytic perspective. The work is clearly structured and the definitions of the major concepts and ideas of the work are explicitly and comprehensively defined and described. Overall the text followed a logical format and the links forged between confession, guilt, power, vulnerability and reparation were lucidly and creatively reasoned. Nevertheless the decision to include and integrate a number of other prominent concepts to the topic under discussion may have detracted from the central focus, and given the paper a somewhat piecemeal quality. Furthermore the Klienian notion of guilt and its relation to reparation and communicative practice may have warranted a separate and more in depth examination of its own, in a separate and individual paper.

The correspondence between the notion of bad faith and Communicative Psychotherapy are also comprehensively identified in *Bad Faith in Psychotherapy* and linked to Sartre’s vignettes. For example the author explains; ‘The urge to seek some refuge from the meaningless, uncertainty and absurdity of life by immersing ourselves in a role, is also addressed and so called into question by the approach’ (1998,p30). However the central argument of the work would have gained further credence had the author explored and teased out in more depth the similarities and differences between communicative work and Sartre’s thesis. The Sartrean themes of nausea and disgust
were briefly introduced in relation to the significance of the therapeutic frame. 'We would prefer to believe that the physical world and our relationship to it is available to our control. However we are consistently required to confront and acknowledge with the patient that there are occasions when we are unable to either manage or harness the therapeutic environment.' (Holmes 1998.pp30-31). An expansion of this brief discussion would have contributed to the basic proposition of the thesis.

The work *On Snowflakes and Psychotherapy* has described and elucidated complex ideas taken from dynamical systems theory in a relatively straightforward, unambiguous and coherent way. The application to communicative psychotherapy were argued and represented in a graphic, intelligible and incisive manner. The ideas were distinctly referenced and thoroughly illuminated with clinical examples. The antagonism encountered in maintaining a systemic and holistic attitude is also creatively developed, with reference to everyday, practical, systemic illustrations.

The fundamental qualities of dynamical systems theory typify the inextricable connection that exists between chaos and order. This principle is also rudimentary to Communicative Psychotherapy. The approach recognises the struggle to consistently accept this holistic paradigm. Patient and therapist are mutually connected and influence each other. The communicative therapist needs to maintain this holistic awareness in order to hear and respond to the patient's interpersonal messages that relate to disturbances in the therapeutic environment. However as framework disturbances are often reflections of the therapist's personal and interpersonal chaos, this is likely to inhibit their ability to sustain a systemic perspective. The author cites some practical examples of crisis situations to illustrate this dilemma.; 'The instructions tell us that in order to rectify the chaotic position of a car which is skidding out of control we must drive into the skid. Nevertheless our natural tendency and anxiety under these disturbed conditions tend to compel us to infringe this holistic axiom, yet by trying to avoid the skid we are led further into the chaos.' (Holmes 1999.p167)

Existential Philosophy also stresses the holistic nature of human experience. As
Cooper states; 'We appreciate that it is impossible disengage our existence from that of the world' (1990.p81). Martin Buber also views being with others as primary to existence. He reinforces this contention with reference to I which he asserts, at the same time always implies another. Bad faith is a specific way of being with others that involves denial and is often prompted by interpersonal anxiety. These existential, systemic propositions are the main thrust of communicative theory and practice.

The introduction of a subsection on creativity and holism, although relevant to the topic may have detracted from the uniformity and organisation of the examination of the relationship between fractals and narrative communication. However further on in the work the author explains the correspondence between fractals and the significance of the patient’s encoded messages which warn the therapist of the disorder within the therapeutic system. (See pp169-70)
(2) A clear argument of and how the works relate to each other

Historical Relationships

The four works included in the thesis were generated from conference presentations, lectures, training workshops and forum seminars spanning a period of ten years and are ongoing. The initial publication scrutinised the relationship between interpersonal themes, boundaries, contradictions and power issues. The early focus of the research was devoted to the link between the Greek myth of the ‘Wounded Healer’ and the practice of psychotherapy developed in 1991 (see Chapter 4., 1998 pp111-5). The essay challenged the idea of the unilateral disturbed and distressed patient, by drawing an analogy between the myth of Chiron and the communicative paradigm, as a means of accentuating the co-operative and mutual motivation of both members of the therapeutic dyad. The work also highlighted a salient area that from the candidate’s own teaching experience is often left in abeyance in psychotherapy training. “The myth of Chiron illuminates how his own wound played a part in his ability to help others. In essence a patient by virtue of being a patient has acknowledged his own woundedness. However the therapist by acknowledging the patient’s curative capacity in terms of his derivative communications at the same time acknowledges her limitations and disability” (p.113). Further on “The Chironian myth culminates in the renunciation of his immortality and may serve as a reminder that the ability to heal may therefore depend upon the sacrifice of the healers spurious omnipotence” (p.114). This idea is extended and augmented in Chapter 5. Contradictions and Paradoxes’. The theme of the chapter is an elaboration of two seminal studies developed from a lecture and paper entitled ‘A Sense of the Absurd’ (1993), and a workshop presentation delivered at the 1993 annual Existential Conference. The work sought to assemble and integrate some primary existential ideas with communicative principles in relation to the notion of paradox. Areas of discussion included Kierkegaard’s thesis on the nature of knowledge and the dilemma of subjectivity. Reference was also made to Heidegger’s notion of the
participating subject. Heidegger coined the term Dasein which translates into being there. Being there refers to being there in the world with objects and people. Heidegger explains the uniqueness of human beings who have the ability to think about themselves and their existence in the world. A being, unlike an object comes to have a sense of themselves as a particular being though their mode of living or participating in the world. In this sense being cannot detach itself from the world, it is essentially part of the world as its being emerges through its actions in and on the world. Sartre’s famous adage states that; ‘existence precedes essence’ and existence is being-in-the-world. The way in which the existent actively participates and engages with the world of objects and people will then contribute to what the person becomes. Furthermore, the human existent knows through the act of participation. Knowing, not by abstraction but through engagement in a mutual way. Sartre's dictum of the paradox of freedom was also described and discussed with reference to his evocative example of the girl in the cafe. (p123)

The proceedings of a workshop project ‘There Is No Such Thing As A Client’ introduced in 1994 at the British Psychological Societies Annual Conference, paved the way for the author’s subsequent thesis, culminating in the text There Is No Such Thing As A Therapist published (1998). The aforementioned work laid the groundwork for the author’s research and interest into some of the underlying motivations and contributing factors that may predispose the trainee/therapist to opt for a method which relies on the voluntary acknowledgment of their boundary inconsistencies. These ideas are laid out in the publication Confessions of a Communicative Psychotherapist (1999). The approach is unique in terms of its theoretical and practical focus. The communicative practitioner is expected to devote themselves to scanning the patient’s material for disguised references that allude to the therapist’s inability to maintain a secure therapeutic frame. Communicative interventions are therefore specifically organised around the therapist’s continuous recognition and acknowledgment of their framework disturbance. This idiosyncratic
focus of communicative work suggested a fertile area of research, and examination of
the features that contribute to choosing this singular way of working. The work
resulted in the publication of *Confessions of a Communicative Psychotherapist* (1999).

The research was cultivated from a lecture of the same title delivered at an
European Society of Communicative Psychotherapy forum in 1995. In the following
year at the invitation of the International Society of Communicative Psychotherapy the
candidate presented a keynote address in New York, on the subject of anxiety, guilt
and reparation. The work examined the previously mentioned Kleinian developmental
concepts in relation to communicative practice. The inquiry also compared the
conditions required for a communicative intervention with the theme of reparation.
This relationship was further considered from both a defensive and therapeutic
perspective. The emergence of this topic and its influence on the therapeutic process
can be traced back to the previous years research work on ‘Confessions’. Reference
can also be found on the significance of reparation in terms of the client’s (rather then
therapist’s) activities in the Karnac publication. These later elaborated features of
reparation surfaced as a result of the preceding Kleinian paper. The Kleinian
developmental model of anxiety was also included in *There Is No Such Thing As A
Therapist*, see chapter 4. ‘Anxiety and the Therapeutic Process’. This chapter also
compared and contrasted the affect of anxiety from an existential, psychoanalytic and
communicative stance.

The prototype of the work on Bad Faith (1998) can be discerned from the
earlier research outlined in this section and is a central motif that is interwoven through
the entire thesis. The work is however a more thorough and detailed examination of
the Sartean notion and its relevance to communicative practice. The discourse set out
to argue how the defensive use of power can be viewed as a common cover against the
terror of facing the relentless vulnerabilities and limitations of the human condition
within the consulting room. The author asserts that the effective use of communicative
practice necessitates a thorough appreciation of these inevitable pitfalls that are lucidly
underlined in Sartre's thesis. The contradictory character of the human condition was methodically explored under the subheading of the 'Wounded Healer'. The Karnac publication also included a brief outline of Sartre's ideas on the paradox of freedom (p123-5). This same theme can also be discerned in the previous work on 'Confession' The myth of the Wounded Healer as its name implies conjoins two apparently contradictory terms and encapsulates the communicative tenet of the importance for both parties in therapy to recognise, access and verify both characteristics. The author contends that an element of cure results from the capacity to accept and embrace these opposite but related traits. Sartre's discourse on Bad Faith highlights the human reluctance to grapple with this lack of specificity and lack of classification. As Sartre points out a human being prefers to be a being-in-itself; to view themselves and others as solidly constituted. His thesis also supports and reinforces the laborious and perverse nature of Communicative Psychotherapy.

The paper; Snowflakes and Psychotherapy (1999) is the most current work included in the dissertation. In this work the candidate sought to pursue and elaborate on the interpersonal and holistic focus of the project, by incorporating and integrating systemic principles. The fundamental rules that link order to chaos, in Chaos and Complexity theory was explored in relation to the therapeutic system. Similar reflections on the theme of the interconnectedness of all the elements that comprise the system can also be traced back to the Karnac text, see chapter 2.; 'Themes and Metaphors in Communication and the Therapeutic Process’ pp29-36, and chapter 5.; 'Contradictions and Paradoxes’ p115. The reference in chapter 2. outlines the defining characteristics of the systems model in order to illustrate the significance of boundary issues. The Chapter Five reference is linked to Kierkegaard's thesis on the illusory nature of objective inquiry.

The scope of the work spans the years between 1991 to 2001. The work is not only located in the current state of research but has also systematically linked and threaded ideas together in a cohesive way that were previously separated. These three
elements of the authors research correspond to the content and extent of work required for a PhD by the conventional (thesis) route.

**Relationship Between Themes**

All four works have examined a sequence of pivotal research areas that are pertinent to both existential philosophy and communicative psychotherapy, including (1) Death Anxiety; (2) Bad Faith (self deception); (3) Paradox; (4) Power and Interpersonal Conflicts. The main objective of the discourse was to examine the interface between the central issues that arise in the communicative interaction and their connection to the cardinal questions that influence the process of human interchange underscored in existential philosophy. The research suggests that the key concepts mentioned above are of central concern to both schools of thought.

The communicative model of the mind and its practice, pay particular attention to the therapeutic boundaries and its vicissitudes. The communicative concept of Death Anxiety is viewed as a potent source of concern that is symbolised, revealed and addressed around the limits of the therapeutic encounter. The philosophy of existentialism also places considerable stress on the ongoing existential struggle to negotiate human limitations and the acceptance of finiteness. Negotiation from an existential position is also allied to, negotiation from a communicative perspective, as both subscribe to the importance of recognising the limits of human existence. The influence and certainty of death to human life is of key interest in the writings on existentialism. Heidegger contended that the fact that life must end establishes it as the most crucial fact of life. Human existence is therefore characterised by its demise and there is no getting out of it. Existentialism draws our attention to this given and to the tendency and need to also deny this unpalatable truth. Importance is therefore placed on the individuals anticipation and acceptance of the fact of death as integral to life to enable the person to live a more authentic existence.
The notion of Bad Faith developed by Sartre attests to human beings inevitable predilection to resort to deception and especially self deception when confronted with personal and interpersonal dilemmas and anxieties. Communicative theory and practice reinforces and underscores Sartre’s thesis of self deception. The communicative concept of an unconscious wisdom system is considered to be able to recognise inappropriate and unacceptable infringements between people that are contributing to a basic sense of mistrust. This is the component of the mind that is viewed as being responsible for interpersonal narratives. These stories are considered to reveal hidden truths and interpersonal concerns. The human ability to use language in a sophisticated way in part, enables the existent to lie to others as well as themselves. The communicative therapist is therefore primarily interested in the patient’s derivative communications which are seen as authentic comments on the here and now of the encounter. The communicative practitioner needs therefore to accept the inevitability of self deception as an integral aspect of themselves in order to listen to and acknowledge the client’s hidden perceptions (often negatively toned) which allude to the therapist’s blind spots and difficulties.

Langs’ ideas on the significance of unconscious communication are also supported by research in cognitive psychology (Haskell 1999), and in experimented psychology (Dixon 1971). It is suggested that the communicative practitioner is in a somewhat similar position to Sartre’s man at the keyhole, as the therapist is obliged to consistently respond to the patient’s shaming and exposing perceptions of them (the therapist). It is therefore not surprising that there will be numerous occasions when the patient’s interpersonal communications are likely to fall on deaf ears.

Both Langs and Sartre’s ideas seem to converge around the defensive qualities that are inherent features in all human interactions. We tend to experience intense
anxiety under the gaze of other people and are likely to be drawn irresistibly into a mode of interaction which will offer some protection from being seen by the other.

The communicative paradigm stresses both the helpful curative capacities of the patient contrasted with the harmful, damaging and damaged aspects of the therapist. These principles endorse and underscore the contradictory elements of both members of the dyad. Communicative ideas and technique also highlight the importance of emphasising and acknowledging these paradoxical elements as a significant aspect of the curative process. One of the basic propositions of existential philosophy is the assumption that human existence is inescapably characterised by paradox. The intrinsic contradiction of the human condition is not only considered to form the basis of anxiety, due to the need to deny life's negative counterparts, but also reinforces the absurdity of life itself.

One of the basic tenets of the communicative approach to psychotherapy is the need for the therapist to scrutinise the patient's narrative reflections that tend to relate to disturbances and discrepancies prompted by the therapist's management of the environment. Narrative or encoded communications refers to the stories that patients tell of events and scenarios that are overtly unrelated to therapy. These stories are considered to be valid, disguised reflections that emerge spontaneously, as a result of concerns that the patient also has, but is unaware of in relation to the immediate therapeutic encounter. The communicative practitioner is required to be consistently committed to listen and respond to issues that link to their misuse of power. The approach therefore acknowledges the significance of the therapist's potential to abuse their privileged position within the encounter; and how this denial will detrimentally influence the ongoing process and the patient's well being.
Evidence and exemplification of claims made that the research constitutes a significant and original contribution to knowledge

Traditionally existential themes have been excluded from the theory of the unconscious. Nevertheless although some psychoanalysts have incorporated aspects of Existential Philosophy to theories of the unconscious, none have considered existential themes and linked them to the immediate therapeutic relationship. The work has therefore loosened this separation by outlining and linking a range of existential themes that are implied in working with the unconscious in Communicative Psychotherapy. The incorporation of a dynamical systems perspective have been included to re-enforce and augment the rallying point of the discourse and has constructed and demonstrated a triple connection between existential themes, systemic principles and Communicative Psychotherapy.

The research has explored the relationship between some key concepts drawn from existential philosophy and the communicative approach to psychotherapy. The work has sought to link the ideas that inform the communicative model to the trenchant issues that concern being in the world with others. The discourse has centred around several recurring existential themes. (1) Death Anxiety; (2) Bad Faith; (3) Paradox; (4) Power and Interpersonal Conflicts. The thesis has attempted to provide a rationale and clear understanding of the relational focus of communicative practice. The work has also intended to provide an exposition and rationale for curricula in psychotherapy training to include similar relational component's which in the main have been neglected in the teaching of a subject, which by definition involves at least two people working together at an intimate level. The thesis has identified and synthesised knowledge drawn from diverse sources in order to illustrate and clarify the correspondence between patient and therapist that is under lined in the communicative model. The cross referencing between existential thought, communicative ideas and therapeutic practice may also be considered to have furnished some new knowledge to the overall area of psychotherapy in terms of the
influence that self deception has in our relations with other people. The research has identified areas of concern that often interfere with the capacity to engage openly with others. For example, (a) the inability to regularly recognise and endorse the paradoxical qualities that exist between and within patient and therapist, (b) The reluctance to accept the inevitability of the therapist’s own self deceptive ploys and its detrimental influence on the patient’s ability to do the same, as highlighted in the Sartrean concept of Bad Faith. (c) The influence of the power dynamic on the therapeutic interaction. An awareness of the relationship between power and vulnerability and the therapist’s potential to exploit their position.

Areas Not Addressed Before

The investigation has brought together two apparently diverse views of human nature. The existential tradition has provided new insights into a radical form of psychotherapy that places the relationship, paradox, death anxiety and self deception at its helm. The thesis has explored the interfusion of ideas from disparate schools of thought that were previously unavailable. The research was intended to facilitate access and untangle some of the properties of communicative practice, particularly the area and questions that are highlighted by its focus on the here and now of the therapeutic relationship. The work has systematically examined and opened up the debate between philosophy, theory and practice, and extended the discussion and development of factors that link being in the world to the therapeutic arena. The inquiry has compiled and paralleled knowledge from different fields. This alliance has sought to offer a more in depth understanding of the principles that govern communicative practice and to provide new links to the underlying philosophy of the communicative approach. The ontological and ontic issues addressed in the work may also generate interest for future research in the wider field of psychotherapy technique. The ideas presented in the dissertation may also challenge and influence subsequent research and training policy in the realm of professional training and supervision in psychotherapy.
Langs' work takes into account the significance of the acceptance of boundaries and limits for the individual's psychological and emotional well-being. The communicative approach also attests to the difficult and arduous nature of this task. The thesis has developed and reinforced this supposition by systematically assembling and anchoring these communicative principles and practice to ideas that are central to Existential Philosophy.

The vicissitudes of the immediate therapeutic interaction is the principle focus of communicative practice. A fundamental tenet of a philosophy of existence is the irrevocable link between being, and being with others. The thesis has examined this idea and the difficulties associated with it that are proposed in Existentialism, in order to substantiate and enforce the rationale for the interpersonal communicative concentration.

Existentialists have explored in great depth the struggle to engage openly with others. The Sartrean concept of bad faith has been methodically investigated and has sought to countenance and unfold the difficulties associated and acknowledged within communicative practice. Some specific descriptions of bad faith were outlined and also examined from a communicative perspective in order to advance the communicative imperative which undertakes to attend to the ongoing therapeutic process as a relevant and significant existential and therapeutic activity.

This contribution is preserved when moving into dynamical systems theory. The work has examined and applied the constituents that define a systems model in order to magnify, corroborate and extend the interactional rallying point of Communicative Psychotherapy. A further aspect of the investigation demonstrated how the holistic, relational paradigm that is implied in a systems perspective is also embodied in the principles of existentialism and communicative ideas and practice.

Ludwig von Bertalanffy's *General Systems Theory* (1968) was one of the first authors to examine the scientific principles of Dynamical Systems Theory in relation to psychology and psychiatry. Minuchin (1974) was at the forefront of the
coalition between Systems Theory and Family Therapy. Crowe and Ridley (1990) combined a systems approach with Couples Therapy. More recently Butz (1997) and Robertson and Combs (1995) have examined the relationship between chaos theory, psychology and various approaches to psychotherapy. All of these workers and others in this area have applied systemic principles either in terms of the individual and their inner world and, or in terms of the family or couple as a system. Little, if any consideration has been given to the therapist as a consummate and influential element of the system. The author finds this glaring omission perplexing, as the guiding principle of a systems approach attests to the pivotal contributions of all the elements that constitute the system. The candidate’s thesis has gone beyond the current research and publications available in this area and has added to the body of knowledge which relates Dynamical Systems Theory to psychotherapy. Robert Langs has published some groundbreaking research on the relationship between Communicative Psychotherapy and Dynamical Systems Theory. The author has taken Langs’ ideas a step further by displaying the symbolic significance of fractals to communicative theory and practice and by illustrating further links to Existential Phenomenology.

The author’s thesis has gone beyond any past or current research that is available from Communicative Psychotherapy, Existential Psychotherapy or in the application of Dynamical Systems Theory to psychotherapy. The philosophy of existentialism outlined in the work has explored the ontological vicissitudes and struggle that accompanies human existence as a microcosm of the therapeutic encounter. In the main existential psychotherapy tends to explore these dilemmas only in terms of the client’s individual world outside of the therapy. Communicative psychotherapy on the other hand does not refer directly to the ontic and ontological issues of human existence but implicitly addresses issues that relate to freedom and its limitations through the here and now of the therapeutic interaction. Paradoxically Existential Psychotherapy excludes from its discourse the very thing that Existential Philosophy informs us cannot be eliminated from being in the world, which is
participation and being with others. Ernesto Spinelli one of the leading British exponents of Existential Psychotherapy asserts in his text *Demystifying Therapy* (1994) that the relational realm is of particular importance in Existential Psychotherapy. He does however define relational as the therapist’s attempt to place themselves in the client’s shoes. Hans Cohn a writer and practitioner of Existential Phenomenological Psychotherapy states in his book *Existential Thought and Therapeutic Practice* (1997) that relatedness is viewed as primary. However both Cohn and Spinelli’s clinical examples are specifically and uniformly focused on clarifying and understanding the client’s experience of relationships outside of the therapy and do not refer, at any time, to the client’s relational experience with the therapist as a part of the exploration. This author finds this noticeable exclusion extremely puzzling, given that the approach is grounded in a philosophy which has consistently examined the incessant difficulties and dilemmas of being in the world with others, described in the candidates thesis. The work has highlighted this discrepancy and by extrapolation the need for both approaches to consider the significance of the philosophy that underlies them both. The work also suggests the need for these alternative approaches to engage together in an ongoing dialogue to further explore and clarify the relational definitions that underlie each school of thought.

Existential Psychotherapy encourages the client to reflect on the ontic and ontological aspects of their existence. Communicative Psychotherapy is focused on being in the world as it reveals itself between the patient and therapist. The approach emphasises the ontological within the here and now as it emerges between patient and therapist in the consulting room. The author’s research postulates that Communicative Psychotherapy is essentially grounded in the philosophy of existentialism as the general thrust of the work in the consulting room mirrors the ontology of human existence in the wider context of being in the world at large. This link has not been considered before by either school of thought. Although the link to themes of existence is embodied in communicative principles and practice it has not been explicitly stated or
examined with reference to philosophy and has until now appeared to be somewhat esoteric. In this way the work has gone beyond any current work in the field. Furthermore the link to systems theory and its application to psychotherapy has drawn attention to the links between science, human existence and psychotherapy. The incorporation of systems ideas offer further cumulative support for the need for a closer dialogue and cross fertilization between philosophy, psychotherapy and science.

The development of Communicative Psychotherapy is primarily the work of one man. In the early 1970's Robert Langs a classically trained, American psychoanalyst became increasingly interested in the lack of scientific rigour that was a general feature in the majority of psychoanalytic research. Langs early research centered around the association between fantasy and reality. In 1976 he published his first major work of his theory in the Bipersonal Field. To date Langs has published more than forty books on Communicative Psychotherapy.

Langs' quantitative research interests led him to collaborate with the mathematician Anthony Badalamenti, together they studied and published their investigation of the underlying patterns of interpersonal communication during psychotherapy sessions. Langs publication, *Science, Systems, and Psychoanalysis* (1992) also reflected his ongoing interest and endeavour to place Communicative Psychotherapy on a formal scientific footing.

David Livingston Smith as been the main proponent of Communicative Psychotherapy in the UK, has also written extensively on the subject of Communicative Psychotherapy. His main area of interest and research is on the interface between evolutionary psychology and communicative theory. He has also written on the philosophy of science.

The author’s work presents a shift in the historical focus of Communicative Psychotherapy research by introducing explanatory material taken from Existential Philosophy and Systems Theory to construct and exemplify the communicative axiom which places the fluctuations of the immediate relational encounter at its helm.
Research Methodologies used in the Research.

The phenomenological method is concerned with the process of immediate experience and aims to access and reveal the essential nature of experience. The phenomenological method utilises the rule of *epoche*, a term derived from the Greek meaning "suspension of belief". The rule of *epoche* is the attempt to bracket one's usual prejudices and assumptions and to follow the rule of description rather than explanation. Communicative Psychotherapy can be seen to fulfill many of the criteria required by phenomenology, communicative technique is primarily concerned with the unfolding of the immediate interpersonal nuances as they appear between patient and therapist in the encounter. The communicative practitioner is expected to bracket their assumptions that relate to the patient's history, to refrain from making diagnoses and to treat the patient's messages as real and authentic interpersonal communications. The existential therapist Emmy van Deurzen-Smith (1988) explains from her perspective that therapy is devoted to clarifying the client's world view. Existential therapists do however apply the phenomenological method in a rather different way, and the phenomena they wish to throw light on is of a different order to those that interest the communicative practitioner.

The existential phenomenological therapist aims to assist the client to philosophise on, to explore and re-examine their assumptions, prejudices and partial views that are limiting their capacity to make choices. Spinelli states; 'If there is an ultimate aim to phenomenological therapy it is to offer the means for individuals to examine, confront, clarify and reassess their understanding of life, the problems encountered throughout their life, and the limits imposed upon the possibilities inherent in being-in-the-world.' (1989.p127).

Communicative Psychotherapy is founded on the premise that narrative communication is essentially interpersonal. Communicative technique requires the practitioner to initially describe the patient's stories and to subsequently link the themes to a here and now stimulus that relates to the patient's experience of the
therapist's behaviour. The method is therefore in the first instance primarily phenomenological. The ensuing relational connection is however based on a theoretical assumption and would be considered in opposition to the phenomenological method. Nevertheless the exclusive focus on the relational quality of the patient's experience of the therapeutic encounter is in keeping with one of the fundamental tenets of Existential Philosophy, especially those espoused in the works of Sartre and Buber.

Existential Psychotherapy on the other hand remains at the level of description and exploration of the client's world view. The therapist acts as a guide, or a mentor who assists in the clarification of the client's experiences and relationships, but generally omits to address the here and now relationship. Paradoxically, Existential Psychotherapy clearly reveals its commitment to the phenomenological method of observation but fails to include the immediate relational dilemmas and difficulties that characterise human existence which is underscored in Existential Philosophy.

The author's work has employed methods drawn from manifestly diverse and competing disciplines, ranging from a specific tradition within Existential Philosophy, to current ideas from science and the field of psychotherapy.

The thesis has revealed a common core between the methodological assumptions taken from Dynamical Systems Theory and Communicative Psychotherapy. The dissertation has shown how the chaotic systems approach and the communicative method lend support to each other. Both models stress the primacy of process; the chaos approach has pinpointed the patterns of self similarity that indicate the system's movement between chaos and order. This procedure is supported by the communicative focus on repeated patterns in narrative communication (self similarity) which reveals the patient's underlying experience of the stability of the therapeutic system. The significance of the sensitive dependence on initial conditions observed in the chaos approach in natural systems, is also emphasised and affirmed in the therapeutic system from this communicative position.
Original Contributions to Training

To date the ideas presented in the thesis have stimulated the interest of training organisations in both the UK and Europe. The work has informed psychotherapy training and supervision and provided a new basis for professional training for care workers. The candidate’s continuing work on the relationship between existential ideas and communicative practice has led to an ongoing interchange between the two learned societies. In 1996 at the authors instigation in her capacity as Chair of the European Society for Communicative Psychotherapy, with the Society for Existential Analysis, the first joint forum programme was instated. The presentation offered supervision from the two perspective, followed by an open discussion that centered around the similarities and differences between the models. The debate is ongoing and the author is sleighted to tender a forum address at a forthcoming meeting for the Existential Society entitled ‘The Limits of Engagement from Buber to Communicative Psychotherapy’. Work is also in progress on a paper entitled Freedom and Frameworks to be presented at a Forum for the European Society of Communicative Psychotherapy in May 2001.

The candidate’s work has also been incorporated into a number of training courses at the School of Psychotherapy at Regent’s College. The first programme was specifically created and designed for the second year of the MA Degree in Psychotherapy ratified by City University, entitled Existential Issues in Communicative Practice. The seminars offer an overview and adaptation of elements of the research work presented in the thesis. The expected learning outcomes of the students by the end of the course are as follows, (1) Understand a Systemic Interpersonal Paradigm of Emotional Disturbance. (2) Recognise the Link Between a Philosophy of Interpersonal Dynamics and the Therapeutic Interaction. (3) Understand the Relationship Between Existential concepts and the Therapeutic Process. (4) Recognise the Significance of the Therapeutic Frame in Relation to Existential Anxiety. (5) Recognise the Philosophical Similarities and Essential Differences Between a Communicative and Existential Model
of Therapeutic Practice.

As the Head of Post MA Training the author was responsible for setting up a two year professional Advanced Diploma in Integrative Psychotherapy, leading to UKCP registration which is now an established training. The first term of the programme was devoted to issues related to the therapeutic relationship. The author designed and taught a major element of the course and was one of the first people to introduce, examine and apply some specific notions taken from Systems Theory to the therapeutic process. Some of the issues covered in the course are as follows, (1) a systemic approach to the therapeutic interaction. (2) Fractals, patterns in nature, science and the consulting room. (3) The paradox of chaos. (4) Feedback in systems theory and the consulting room. (5) Space, time, here and now.:

Contributions in Europe

During the past four years the candidate has been actively involved in the European Association for Psychotherapy and is a member of the Scientific Training Standards Committee. The author was instrumental in obtaining European Wide Accrediting Status for the Communicative Society to offer their professional members the European Certificate of Psychotherapy. The author has presented lectures on her research topic at two annual European Association Conferences, Rome 1997 and Paris 1998. As a result the work led to further invitations. In May 2000 at the request of (STIPO), Foundation for Integrative Psychotherapy Training in Amsterdam. The author delivered a two day workshop on the theme of the research to professional psychotherapists for a continuing professional development programme. Many of the participants expressed considerable interest in the topic and requested publication sources and reading material. Due in part to the success of the workshops and the author’s ongoing interest and work in Europe, the Chair of STIPO has invited the candidate to present similar programmes on their forth coming training modules; The lectures are in the process of being included as a formal training element of the STIPO
training programme. Furthermore as a result of the candidates collaboration in Holland the author has accepted an invitation to become a board member of STIPO.

The involvement with the European Association of Psychotherapy has led to further offers from Moscow University and Stavropol Medical Academy in Russia to assist their psychotherapy trainees to set up, design and administer an Integrative Psychotherapy Programme under the auspices of Professor Igor Boyev. A section of the programme will include the integration of the work developed in the candidates thesis.

**Contributions to New Training in the UK and Europe.**

Kids Company is a registered charity in Southwark SE London, offering support to vulnerable and deprived inner city children and young people. The author is currently employed at Kids Company as the Clinical Director of a new training project to be entitled *Care and Interpersonal Communication*. The programme will incorporate some of the philosophical, theoretical and technical components of the candidate’s thesis.

**International Training**

The main objective of the author’s recently completed sabbatical term was a lecture tour in Europe and Australia to promote her publications and research ideas underscored in the thesis. Dr Henry Andrews the Head of Counselling and Psychology at Curtin University in Perth, Western Australia with other members of the faculty have expressed a keen interest in the author’s work. Negotiations are in the pipe line for a possible secondment for the candidate to provide a terms of lectures to the Department at Curtin as well as associated Universities in Perth, W.A. on the research topic.

**Future Publications**

The candidate has accepted a request from Macmillan Press to author an 80k text on countertransference for a new psychotherapy series, Edited by Ann Scott. The series brief is innovative from two perspectives as it allows authors the freedom to
retain their own personal perspective while considering research in traditions other than their own.

One of the overall aims of the book is to provide students and professional psychotherapists with a historical account, leading to the most up to date information on the psychoanalytic concept of countertransference, and the subsequent changes that have occurred in its clinical application. The text will examine and compare the major concepts that underpin the following schools of psychotherapy: Psychoanalytic; Existential/Phenomenological; Humanistic; Integrative; Systemic; and Communicative. with the aim of teasing out and disclosing their resemblance to, or divergence, in relation to the notion of countertransference. The project therefore provides the author with an ongoing vehicle in which to research and re-examine some of the topics developed in this current discourse.

The author's thesis has laid the groundwork for a future research project which will empirically examine the phenomenological aspects of communicative technique.
Bibliography


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**Further Selected Bibliography from Published Works Submitted**


Appendix
BAD FAITH IN PSYCHOTHERAPY

Introduction

The Communicative approach to psychoanalytic psychotherapy is primarily concerned with the here and now of the therapeutic encounter. However, Communicative practice (unlike its Freudian counterpart) is focused almost exclusively on the patient's valid perceptive interpersonal communications, that tend to relate to the therapist's management of the therapeutic environment. The communicative practitioner is therefore expected to consistently monitor, acknowledge and address their difficulties and vulnerabilities as they arise in the patient's narrative messages within the interaction. This paper will firstly outline some of the basic existential and intersubjective issues that are integral to the Sartrean concept of 'Bad Faith'. In order to show how these ideas may be linked to some of the central concerns of the communicative method and to the essential philosophy that is implied in the approach.

'Bad Faith'

Sartre's fundamental thesis and philosophy of human existence is based on the premise that human beings unlike objects are primarily constituted by their freedom. Human beings are free in so far as they are at liberty to alter, reflect upon or update their attitude towards any given situation that they may be confronted with. He gives the example of a prisoner who's physical choices may be exceedingly restricted, but who nevertheless by taking up a particular attitude towards her captors exerts her freedom and therefore the capacity to choose. Nevertheless as Sartre is at pains to point out in his major existential text 'Being and Nothingness' human beings are especially prone and more often than not almost compelled to deny their inherent
Sartre coined the term ‘Bad Faith’ to describe a variety of self-deceptive mechanisms that human beings consistently employ as a means for denying their essential freedom. He utilizes graphic illustrative examples to highlight the concept of bad faith and the way in which it is played out between people in their interactions with each other. To a large extent bad faith is seen as both an inevitable human characteristic and also as a significant and primary factor in how we relate and respond to other people. Firstly I will summarise and attempt to clarify some of Sartre’s ideas about the fundamental disposition of the human condition and the way in which these characteristics unavoidably power and influence how we interact with other people. I will focus specifically on the subjective and intersubjective aspects of Sartre’s philosophy of human existence that seem to be especially relevant to Communicative Psychotherapy and its practice. For those of you who may be Sartrean scholars I hope you will forgive me for omitting some of his other vital concepts that link to ‘being in the world’.

Sartre’s philosophy is an intellectual, creative and ethical tour-de-force, a piecemeal examination of what it is like to be human in the world. His famous adage that ‘existence precedes essence’ concisely encapsulates his fundamental thesis of the dilemmas of human existence. Human beings therefore exist in Sartrean terms as being-for-themselves and are defined by him in terms of their lack of any essence. A being-for-itself then is empty and void of any essence, nothing rather than something that can be specifically determined by its structure in any static way and that can only be filled by each individual’s own freely chosen actions. Being-for-themselves are also separate and exceptional in so far as they are able to distinguish, consider and reflect upon themselves, unlike objects which have no freedom and can only be defined by their essence; such as a chair or an orange which Sartre refers to as
being-in-themselves. Human beings then are unique as they are able to perceive and be aware of themselves, however minimally, that is, they have the capacity to be aware that they are both the same and different from other people and different from objects in the world. Therefore this incessant Nothingness that Sartre refers to in his text 'Being and Nothingness' is this human capacity to perceive the gap within themselves and between themselves and others. If you take away this inherent ability to negate, to be able to see ourselves as separate from other people and objects in the world, to make choices and to say no; then we would as Sartre asserts be as mere objects. Human existence is for Sartre determined by its nothingness and it is in this sense that people are free to do and become whatever they so choose. Sartre proposes that it is in those rare moments when a person glimpses some awareness of their possibilities that they are then confronted with unbearable anxiety, and in order to mitigate against this anguish human beings will have the tendency to flee into Bad Faith. Warnock states, 'Bad Faith is that device which protects us from the anguish of recognizing that we are freer then we like to think' (1970,p99)

'Bad Faith' then is seen as a denial of one's potential and possibilities and can also be seen as a denial of recognizing some of the primary givens of our existence, (Sartre refers to these givens as facticity) such as the circumstances of our birth, that we are born into a specific kind of family are either male or female and that we must die (these are givens). Nevertheless we are still free to take up a particular stance toward even the givens of life. The ethics of Sartre's thesis resides in his demand that human beings recognize their own responsibility. For Sartre freedom is also not about succeeding in our tasks but much more about the determination to recognize that 'the buck stops here' with the individual. Therefore my response to any given situation is my choice and in choosing I reveal what I value and so create myself. Allegiance to
this kind of a position of self-determination also has ramifications for our attitude
towards other people, for if I choose to be free in this way for myself I must also want
it for others. Solomon states; ‘Indeed with freedom at the heart of his philosophy we
can expect that in ethics or politics, whatever increases freedom will be a good thing,
and whatever decreases it will most likely be an example of bad faith’ 1988 p190).
Anxiety is almost guaranteed to arise on these rare occasions when we realise that we
can value anything, when we realise that we are not solidly constituted in ways that
objects are, not essentially anything specific, as just a therapist, or bank manager etc.
Human nature is then (from a Sartean perspective) essentially made up of nothing and
can be described only by its lack of completeness. We need bad faith to continually
disguise and deny this appalling and disturbing human state, we need to fill this void
and are often compelled to believe that we are more object like, in order to reduce our
anxiety.

Sartre continues his thesis by introducing the notion of absurdity, if we must
die and if there is no meaning or purpose to our lives other then what we decide to
value then clearly life is absurd and it becomes increasingly difficult to take ourselves
and our roles in life too seriously. However to experience the absurdity of life more
then momentarily is also unbearable, fortunately we have recourse again to escape into
Bad Faith and can then deceive ourselves that we are integral and important in the
scheme of things. Warnock reiterates this idea she states ‘The absurd is closely related
to the futile and the sense of futility is not felt by those who are sufficiently
self-important’ (1970: p109). Sartre’s third reaction to being in the world he refers to
as nausea or disgust, to be aware of the world and things in the physical world that are
beyond our control is disgusting. However much we may attempt to harness, arrange,
and operate on the world it is nevertheless dreadful and sickening to have the
knowledge that in many ways we cannot manage or control our environment and we
cannot manage or control other people; but we attempt to, in the same way as we take control of objects in the world.

**Being in the World with Others**

For Sartre the self-deceptive defence of Bad Faith which he considers to be ingrained into the human condition and is used as a means of denying the basic fluidity and ambiguity of being in the world, is also a necessary and vital ingredient in the way we relate to other people. Not only are we at variance with the reality of our situation in the world of things but this conflict also significantly influences our interactions with other people. This is precisely because we know that other people exist in some tangible way, as it is through other people that we are made aware of ourselves and this knowing that other people can describe and label us also enables us to specify ourselves. In this way we have a sense of being observed, exposed and estimated by other people in an object-like way. We are under the gaze of other people Sartre refers to this as ‘The look’. Sartre is noted for elucidating his sometimes rather obscure and unwieldy ideas through the medium of immediately recognizable and evocative anecdotal vignettes. His thumbnail sketch of the ‘man at the keyhole’ who becomes aware of being seen and observed by another person, in that moment realizes that he can be, objectively described and labeled as a snoop or eavesdropper, he is literally caught out and trapped by ‘the look’ of the other. Other people are therefore highly disturbing, the man at the keyhole experiences shame in response to being scrutinized externally and in that moment he is pigeonholed and pinned down by the look of the other and can also pigeonhole himself. Sartre pursues his argument by postulating that human interaction is compellingly predisposed by a need to control other people because they are a danger. If I can be relegated to the status of an object, cast in stone,
invariable and defined primarily by a visual piece of activity, a role, then I too will react in a similar vein. I will also attempt to trap and pin the other person down in order to relegate and stereotype them. Sartre concludes that this incessant interchange between people, this conflict which is based upon the struggle for control is the major and most prominent feature in all human interaction.

**Shame**

Shame is experienced by the individual as they become aware of being observed and negatively evaluated by another person. Shame therefore elicits a powerful sense of being exposed. Clifford Yorke in his paper on the psychoanalytic approach to shame asserts that ‘The awareness of an observer partly reflects a link between shame, pride and exhibitionism/voyeurism and the defenses against it that underlie the need to hide.’ (1990:p15) He also makes the connection between shame and disgust by proposing that feelings of disgust also relate to the intense dislike of locating the object of shame inside oneself. He further suggests that the sense of nakedness that accompanies shame implies a collapse of the boundary between self and other (p17). Freud (1905: p157) noted that shame inhibits scopophilia (pleasure in looking) and exhibitionism. Helen Block Lewis also observed that shame also inhibits pride (1971:p15). Scopophilia is a psychoanalytic term and refers to infantile curiosity and pleasure in looking. Rycroft (1972:p75) explains the link between classical psychoanalytic ideas which considers voyeurism to be a derivative of infantile scopophilia, in contrast to later developmental object relations theory, that stress the need to gain control over the observed object; accompanied by a denial of the observers involvement in the relationship. Although the aetiology of a psychoanalytic model of the mind is in many ways in direct opposition to Sartre’s ideas and to
existentialism which emphasizes the phenomenological method. Nevertheless these psychoanalytic statements seem to be very evocative of the Sartean notion of a being-in-itself and of the need to reduce the other person to an object in order to control them.

Sartre vividly describes other escape routes and aspects of bad faith that human beings often utilize to avoid the fundamental ambiguity, freedom and responsibility of the nothingness of the human condition. Therefore the person who takes up an attitude of false or exaggerated sincerity by admitting their inadequacies or weaknesses would still wish to cast themselves in stone so that they have no other choices then to be other then those descriptions of their defects. Sartre’s immediately identifiable portrayal of the overacting waiter is yet another example of Bad Faith and of how we may resort to playing out a role in a stylised or ritualistic way as if they were nothing else other then their designated role. Warnock (1970:p103) describes Sartre’s portrait of the overacting waiter as a game, and the game which he is playing is the game of being a waiter. It is a game because all his gestures and movements are exaggerated he plays out the role of a waiter to such a degree that it protects him from interacting on any other level with his customers in the cafe. He defines himself so clearly as a waiter rather like an object that he attempts to ensure that nothing, or no-one can disturb his equilibrium. He narrows down his possibilities to such an extent that he has no other choices available, he stereotypes himself and also encourages his customers to respond to him in this trite and banal way. By his behaviour he attempts to guarantee that his encounters with other people in the restaurant will remain under his control. In Sartre’s terminology he wishes to be a being-in-itself and to defend against the inherent conflict that is generated when we encounter the freedom of other people and our own freedom.
All political ideologies and therapeutic approaches are informed by an explicit or underlying theory of human nature and therefore rooted in philosophical assumptions about human nature and human interactions. Existentialism on the other hand has been referred to as ‘an attitude on the part of those involved in that relationship; a way of perceiving the “other” as a subject and not as an object, as a human being and not as a collection of symptoms’ (1990:p30). In the next part of this paper I will attempt to explain how this philosophical attitude may be deemed as indelibly ingrained within the communicative approach.

**Sartre and the Communicative Approach**

The communicative model of the mind which informs communicative practice is primarily defined and distinguished by its unique interpersonal focus. The approach also emphasizes the significant influence and terror of human mortality and its associated existential dreads of separation and isolation and which also underscores our need to be rid of it. The approach also recognizes that being-in-the world is fraught with anxieties that link to our essential finiteness as time limited and boundaried creatures and of our consistent need to defend against these feelings of helplessness and vulnerability by mobilising strategies of denial. Furthermore madness is considered as the most defensive manoeuvre and an attempt to withdraw and retreat from the recognition of these basic existential dreads. Madness or emotional disturbances is also seen as a crucial factor in our interactions with others. Other people’s inability, or unreadiness to acknowledge the ambiguities and boundaries of human existence are also seen as exerting a profound influence on our modes of interaction. Although the communicative approach does not refer to the concept of bad faith as an inevitable aspect of the human condition and human interaction, it does however recognize that
the therapist in relation to the patient will also be prone to respond to these essential human anxieties as they arise in the encounter by a denial of these givens, accompanied by a need to renounce their responsibility within the relationship. The intrinsic connection between freedom and responsibility which lies at the heart of Sartre’s philosophy is also highlighted in the communicative relationship on those occasions when the therapist is able and prepared to discern and acknowledge their own shortcomings and difficulties within the interaction which are indicated in the patients interpersonal derivatives. It is in this way that the therapist shoulders her responsibilities by accepting that the patient’s unconscious communications are authentic and trustworthy responses to her own interpersonal and existential anxieties.

The approach also endorses the substantial fluidity and incompleteness of human nature with the emphasis on the patient’s therapeutic capabilities to assist the therapist, paralleled with the therapist’s shifting and fluctuating disposition and need to also receive guidance from the patient. Furthermore the urge to seek some refuge from the meaningless, uncertainty and absurdity of life by immersing ourselves in a role, is also addressed and so called into question by the approach which hopefully to some extent may limit the therapist’s propensity to take themselves too seriously, nor to succumb to readily to delusions of grandeur. Betty Cannon in her book *Sartre and Psychoanalysis* interprets the notion of ‘bad faith’ as ‘inauthentic’, she states; ‘This man attempts to be a doctor or lawyer or clergyman or corporate executive (or cafe waiter to include a well known example of Sartre’s) as a table is a table. We may say colloquially that he is ‘full of himself’ in a derogatory sense because of the inflated nature of this stance’ (1991:p44). Although it is far less disturbing, risky and uncomfortable to be able to define and describe ourselves in an objective way nevertheless the knock-on-effect of this sedimented attitude is also likely to be reflected in our attitude towards other people. Communicative technique also calls
upon the practitioner to recognize and address the anxiety and discomfort that arises in response to the Sartean notions of nausea and disgust, we would prefer to believe that the physical world and our relationship to it is amenable to our control. However we are consistently required to confront and acknowledge with the patient that there are occasions when we are unable to either manage or harness the therapeutic environment. The communicative therapist also regularly exposes herself to the look of the patient and is in some way like Sartre’s man at the keyhole, is under the scrutiny of the patient’s unconscious perceptive eye. The look for Sartre denotes the ongoing struggle and almost unremitting conflict between people in their relations with each other and has also been likened to Hegel’s master/slave relationship, that is the need for recognition by either, enslaving or being enslaved, a relationship which is based upon an interaction between objects rather than subject to subject. A being-in-itself is therefore terrorised by the thought of their own and the others freedom and feels obliged to reduce this dilemma by resorting to a labelling process.

Sartre’s existential philosophy of human interaction seems to clarify and throw some light on the difficulties that are often encountered by communicative practitioners, as they are obliged to discern and acknowledge the patient’s subjective insightful comments about their (the therapist) personal and interpersonal difficulties that link to issues that relate to the denial of separateness. It may be said that communicative technique is based upon the persistent need for the therapist to address their powerlessness and vulnerability as it is revealed to them by the patient. Langs in his paper *Making Interpretations and Securing the Frame: Sources of Danger for Psychotherapists* also attests to the disabling, obstructive and somewhat unnatural stance of communicative work, when he states ‘As such this type of interpretation places an extraordinary demand upon the therapist and is likely to constitute an anxiety provoking danger situation that may disturb the therapist in areas where he is still
vulnerable to countertransference (therapist madness). Indeed, to this day therapists attempt to avoid this type of interpretation and prefer virtually any other activity to its utilization' (1984:p9) and further on he explains, 'Fears of loss of control and identity, of fragmentations of self and dread of the mobilized intraphysic conflicts, fantasies memories and perceptions abound. For the therapist the creation of a valid interpretation is indeed an anxiety-provoking measure' (1984:p9). Langs also proposes that ‘Such work often leads to temporary regressive and defensive reactions in the psychotherapist a flight from painful interactional truths’ (1984:p9). The communicative practitioner it seems therefore is in a somewhat similar position to Sartre’s man at the keyhole as we are obliged to constantly respond to the patient’s exposing and shaming perceptions of us, we are therefore regularly brought down a peg or two. It is therefore not surprising that there will be numerous occasions when the patient’s perceptions of the therapist are liable to fall on deaf ears. Langs endorses this idea in the latter part of his paper when he states ‘It is often extremely difficult for therapists to accept negative destructive (self demeaning and conflictual) unconscious perceptions, since they are at variance with the therapists own ideal self image’ (p15). this statement from Langs also seems to be in accord with the Sartrean notion of a being-in-itself, that we would prefer and mostly require to see ourselves and be seen by others in a secure fixed and positive light. Nevertheless as Sartre noted in his famous adage ‘Hell is other people’ because we are aware of other peoples freedom and of their ability to negatively stereotype and label us; this experience is humiliating and sometimes almost unbearable. In the earlier part of this paper I made the link between shame from a Sartrean and developmental psychoanalytic perspective. Our pride takes a fall as we experience ourselves being observed and therefore unmasked. Scopophilia the pleasure in looking which links the activity of objective curiosity to control,
becomes reversed and is instead replaced with its opposite, the proud observer now becomes the object under observation. These ideas seem very reminiscent of Sartre’s concept of Bad Faith that he maintains is incessantly played out between people in their relationships as the unremitting struggle for power and control. Communicative principles and practice may be seen as a consistent attempt to address this interpersonal struggle within the consulting room between both members of the dyad. However as Langs and Sartre point out it is personally disagreeable embarrassing and psychically painful for therapists to interact in this way. Nevertheless even though the communicative practitioner is committed to the principle of freedom for both the patient and themselves there still remains as Sartre’s thesis indicates a natural tendency to also oppose and hinder this procedure. Langs and Sartre also seem to concur on the paradoxical and ambiguous quality of human nature and human relations. To be seen by other people as inadequate is distressing, we experience intense anxiety under the gaze of other people and are likely to be drawn irresistibly into a mode of interaction which will offer some protection from these painful truths for example hiding behind a role as means of protection and escape. A number of authors have cogently noted the link between attraction to the profession of psychotherapy as a spurious way for gaining a sense of intimacy with others and the need for power and control.(Storr, 1979; Guggenbuhl-Craig, 1971; Goldberg, 1993.) These ideas may also be endorsed by the practitioners role, as well as the need to remain proud and distanced from the patient who may then be voyeuristically observed as an object under observation. It would also seem fair to say that some therapeutic approaches seem to encourage this particular stance. Although Sartre’s philosophy of human nature has been described as inherently pessimistic. Betty Cannon in her book on Sartre and Psychoanalysis speaks of the optimism and promise that is interwoven into Sartre’s later writing and in his
attitude towards his own life. She states 'Despite the dangers to oneself which self-revelations might pose, secrecy provides another kind of danger. Consequently Sartre points out that ‘this dark region that we have within ourselves, which is at once dark for me and dark for others, can only be illuminated for ourselves in trying to illuminate it for others (L/S:p12). This becomes clear when one understands that for Sartre the beginning of self-reflection lies to a great extent in the reflection of others on the self to which one can now add disclosure to others who see and (one hopes) comprehend oneself. One can probably do this only if one has previously undergone a ‘radical conversion’ to a philosophy of freedom - that is, if one can bear to have the other see oneself differently, from the way one would have wished’ (1991:p99-100)

**Conclusion**

This paper has attempted to show the connection between the Sartrean notion of ‘Bad Faith’ and the way in which this self-deceptive manoeuvre is seen as a persistent issue that is worthy of attention in the communicative relationship. Although the communicative paradigm with its focus on unconscious perception is at variance with a philosophy which emphasises consciousness, personal freedom and responsibility. It has however been posited, that the communicative practitioner’s willingness to address their interpersonal and existential concerns within the interaction, nevertheless reflects an attitude that hopefully relies on the significance of mutual respect for and acknowledgment of, the other.
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On Snowflakes and Psychotherapy

Over the last thirty years scientists and researchers from a variety of related and diverse disciplines (based on current knowledge and discoveries in the physical sciences) have become increasingly more attracted by the universal application of the principles that underly dynamically systems theory. The systems approach has aroused the interest of workers in areas such as computers, art, music, medicine, neurophysiology and psychology. Links have also been forged between these same ideas and their relationship to some of the more esoteric and so called less tangible philosophies, such as, the I Ching. A system has been defined on 'A group or combination of interrelated interdependent or interacting elements forming a collective entity'(Collins Dictionary p88) The term Dynamical refers to ‘energy or forces that produce motion.(ibid. p265)

In the early sixties a meteorologist Edward Lorenz made a startling discovery (now well documented) when he revealed the acute sensitivity of the weather system, by showing how an apparently insignificant event such as steam rising from the bonnet of a car, or the wind from the wings of a butterfly maybe sufficient to radically alter the activity of the weather. Lorenz’s discovery helped to explain how dynamical systems may suddenly become chaotic. This discovery and subsequent research showed that dynamical systems exhibited intense sensitivity to their initial conditions. These systems are also referred to as non-linear precisely because any small change in a part of the system can dramatically influence the entire system. Non-linear systems may behave in a simple, organized and stable way but when disturbed even minimally, will suddenly become chaotic and complex.

During the last thirty years scientists have focused their interest on the chaotic aspects of these systems and the paradoxes that emerge when a system is disturbed. To date their findings show that even when a system appears to be erratic, unstable, or chaotic there is nevertheless a hidden order that underlies the chaos as an in-separable element that is linked to both the onset and the decline of the disturbance. Some
scientists in order to explain the paradox of order within chaos have even resorted to the unexpected and rather aesthetic description of holism. As Briggs (1992) points out in his book *Patterns in Chaos*, ‘Paradoxically the study of chaos is also the study of wholeness’ (p21) On of the fundamental properties of dynamical systems resides in their sudden potential to become disordered and unstable, however research has also revealed that underlying the disturbance distinct patterns emerge as a record of the change that the system is undergoing. These patterns represent the activity of the system as it transforms itself into some new or possibly higher and more complex order.

Patterns that indicate chaos in a system and accompany change are known as Fractals, a term first identified by Benoit Mendelbroit in the 60's. Fractals images also display self-similarity on a variety of different scales. That is they reveal similar patterns within patterns rather like Russian dolls. Self similarity have been found to exist in many aspects of the natural world and have even been posited as a general or universal explanation of life itself. Fractals images have been identified in the human body and brain and in almost all organisational structures. Fractal patterns describe the incessant compositions of interwoven patterns on different scales. For example every segment of a cauliflower is self similar to the whole cauliflower, in the same way as a branch of a tree is self similar and a clear representation of the whole tree. Fractal scaling has also been discovered in mountain ranges and clouds. The distinctive pattern of a snowflake is a fractal pattern that can be reiterated on a computer to demonstrate it’s structural formation as it develops, and also reveals the dynamic process that exist between symmetry and chaos. An ice molecule has the proclivity to develop into a recognizable six sided snowflake form. This potential is however inherently connected to, and influenced by the atmospheric conditions of heat and moisture in the air that it encounters in the environment on its unstable journey through space and time. Briggs (1992) reinforces this idea in a more general way. He states ‘mixing symmetry and chaos is natures and - arts common strategy to create form, it is a tension that fires into existence trees, snowflakes, starfish and our own bodies, and engenders a world that
contains both marvelous variety and similarities at many scales’ (p94). On a more specific note he explains ‘Snowflakes are fractal records of the changing circumstances the ice encountered during its descent. No two falling snowflakes will meet precisely the same circumstances. Unique snowflakes demonstrate that the weather is a chaotic system in which all of the “parts” are sensitively dependent on their constantly changing circumstances’ (p95).

Research has also shown that non-linear systems are subject to different kinds of feedback, and it is feedback that influences their extreme sensitivity to even minor disturbances. The sudden explosion that occurs when a microphone is placed near its speaker, is an example of positive feedback. Negative feedback on the other hand (unlike its name suggests) is the mechanism which keeps the system in check. Rather like a thermostat in a heating system regulates the temperature to remain within certain parameters, or the immune system in the body. Research has also demonstrated how positive feedback can suddenly produce turbulent activity in an orderly system, while negative feedback in a chaotic system can enable the system to adjust and suddenly revert to a stable state. Feedback is therefore a distinguishing feature of non-linear systems and denotes the moments of passage from order to chaos and chaos to order. Feedback has also been shown to exist at every level of life, from the behaviour of birds and fish in the natural world to the activity of the human brain and in the cardiovascular system. A beautiful example of feedback has been captured in photographs of carp who appear to exhibit both intense avoidance and attraction behaviour with each other, and then just as suddenly through feedback their movements become structured and symmetrical. Similar behaviour has also been noted when groups of birds take flight. These and many other examples illustrate the way in which systems through their feedback have a tendency to revert to a balanced or organised state. Researchers in the area of dynamical systems have become particularly interested in the transition between order and chaos, as these are the critical moments that can propel the systems towards possible catastrophe or higher change and creativity. The example of the ice molecule serves to highlight the way in which it may
form itself into a snowflake given the appropriate conditions. The capacity of the molecule to transform itself into a snowflake structure is intimately related to the conditions in the environment. Chaotic and complex systems are therefore underscored by their sensitivity to environmental conditions. The chaos that emerges in a system is nevertheless always accompanied by a hidden order which resonates over and over again in a holistic fashion as worlds within worlds; like the pattern of a snowflake or the floret of a cauliflower which reveals it self-similarity. These are the repetitive patterns of fractal images. The chaotic activity of the carp and their capacity to abruptly exhibit highly organised behaviour is the product of feedback within the system.

Scientists have now mapped the movement of dynamical systems as they progress from chaos and instability and move towards, or into new order and transformation. The time periods between chaos and order and order and chaos has been described as noisy; The noise that reverberates from chaos is the result of the competing forces within the system as it is drawn or pulled about in a disordered fashion. The term strange-attractor has been ascribed to this movement in non-linear systems. Strange attractors represent the magnetic conflict that propels and disrupts a chaotic system. And strange attractors are characterized by images that are self-similar. A strange attractor is also framed and contained, that is, it can only move about within the parameters that define all the elements of that specific system. Strange attractors are fractal as they repeatedly display self-similarity and yet paradoxically these non-linear systems are also unpredictable. Briggs (1992) reinforces this enigma he states ‘Magnifying a small-scale portion inside a strange attractor reveals shapes similar to those seen on a larger scale. Because of the self-similar way they fill space, strange attractors are fractal, they are fingerprints of the chaotic dynamical systems they plot’ (p142). Fractal patterns and self-similarity are therefore natures elegant solution, and aesthetic alarm signal that warns the system of crisis. A crisis which also presents a sudden opportunity for the elements in the system to self organise and creatively transform itself.
Chaos and order are so intimately connected like night and day that we simply cannot have one without the other. Nevertheless although human beings have the ability to comprehend and conceptualize a non-linear and lateral, or holistic way of being the difficulty of implementing and integrating these ideas into our practical everyday lives, and in the world with other people may become apparent in some crisis situation that we may sometimes encounter. The instructions tell us that in order to rectify the chaotic position of a car which is skidding out of control we must drive into the skid. Nevertheless our natural tendency and anxiety under these disturbed conditions tend to compel us to infringe this holistic axiom, yet by trying to avoid the skid we are led further into the chaos. It seems that going with the flow is the most difficult response. Similar principles can also be seen in the teaching of many ancient oriental martial arts, such as Tai-chi and Akido. These skills are founded on the notions of surrendering in the face of resistance and opposition, and their philosophical origins can be traced back 2000 years. Yet their fundamental tenets also seem to clearly resonate with current scientific knowledge. Paul Crompton (1993) in his text the *Art of Tai-chi* expounds one of the axioms of this ancient art and which could be readily applied to chaos theory. He asserts ‘when any process reaches its extreme it begins to return or reverse...’ One of the attributes of a follower of the teachings of the Tao-Te ching is that he or she is alert, aware of, compliant with the presence of extremes’ (p2) These same teachings also stress the innate interconnections that exist in human interaction. ‘Push Hands’ is a Tai-Chi exercise that involves two people and is designed to enable them to understand and manage (physically, psychologically, and philosophically) the anxiety that accompanies unexpected change and that entails the realization, that both people are an integral and influential part of a changing pattern. This idea can also be found in the ancient symbol of Yin Yang which graphically illustrates the essential interdependence of opposite forces, passive and active both of which also contain elements and traces of each other. It may be said that going with the flow is ingrained in the self defense exercise of ‘push hands’. However by far the most obvious example of this golden rule of holism is the maxim that should be applied
when a swimmer is caught in a current. Although the truism tells us that the only way out is to go with the movement or pattern of the tide, which will initially take the swimmer further out to sea, but will eventually repeat its underlying fractal pattern by returning back to the shore (albeit further down the coastline). Nevertheless literally going with the flow is a frightening prospect that requires a great deal of inner strength and self containment. Not suprisingly the three examples included here to highlight the difficulties and resistance’s we encounter under chaotic conditions all relate to survival in a most crucial and obvious way. Driving a car that is spinning out of control, being caught in a current and also the martial arts exercise of ‘push hands’ are graphic descriptions that link to death anxiety, the most profound existential concern. These examples also clearly display the automatic defensive (often self defeating) maneuveres that come into play when our survival is threatened.

There is an abundance of scientific evidence to reinforce the idea that physical matter and all forms of animal and human life have developed from the tension between chaos and order. Current knowledge also suggests that our understanding and acknowledgment of the holism that is implied in patterns within chaos is a Key feature in the systems capacity for growth and creativity. Capra (1996) states ‘what we call a part is merely a pattern in an inseparable web of relationships’ (p37). Butz (1997) also strenuously endorses the impossibility of decontextualising he says; ‘Everything, every last thing is related and part of a larger whole’ (p86) Feedback loops enable the system to regulate and reorganize itself and self regulation is integral to a systems approach. The changes that occur through the mechanisms of feedback tend to be realized when the system is in a state of disorder.

During the past ten years some psychologists have been investigating both anxiety and depression from a systems perspective (Butz 1997) Their results have led them to posit that heightened anxiety denotes chaos in the human condition. The communicative approach to psychotherapy is underscored by its consistent systemic focus. The communicative model reinforces the incessant concerns of death anxiety issues for both members of the therapeutic dyad and is disclosed in the compulsion to
disturb the boundaries of the therapeutic system when anxiety levels are high. Extensive clinical research has also indicated that when levels of anxiety are high people will often shift from a direct mode of communication and revert instead to a narrative or derivative form of interaction in order to relate their interpersonal concerns in a less threatening manner. These communications that reflect the patient’s anxiety tend to relate to the patient’s concerns about the therapist’s management of the therapeutic system or environment. When the patient relates a number of stories that echo a similar theme the communicative therapist is expected to be alert to the unifying motif that is repeated or reiterated in the patient’s stories and that allude to the disturbed conditions of the therapeutic setting.

For example; A patient who’s session was curtailed by five minutes due to her therapist’s late arrival began by speaking about her boyfriend and his unreliability, which she said she found disturbing, this image was reflected in the ensuing story as she talked of her flat mate who had recently locked her out of their flat because she had forgotten to leave the key in its usual place. After a few minutes silence she recollected a childhood memory of waiting for her mother to collect her at the school gate and of her anxiety and distress when her mother arrived late.

This brief vignette appears to be an evocative illustration and a reflection of self-similarity that signifies disorder in a dynamical system. These fractal images of self-similarity that resonate within the here and now of the patient therapist system also reveal similar patterns at many different levels. The patient speaks of her current life outside of the therapy. this same pattern is reiterated and repeated in her interpersonal reference to her childhood experience of unreliability, while also reflecting the here and now disturbance in the therapy. This rippling effect will also be echoed again in the therapist’s own experience and anxieties that relate to time and interpersonal limits. Like the ripples that recur and reverberate over and over when a stone is tossed into a river this theme can be traced back further to the therapist’s late arrival. Prior to this session the therapist had presented clinical material in supervision with a supervisor who she had also had some social contact with, and surprize, surprize the supervisor
had run over time and ended their session late. The disturbance or chaos in the supervision and therapeutic system also displays its repeated patterning another reflection of the disorder and self similar images that link all the elements in these related systems, supervisor, therapist and patient. Chaos and complexity theory enable us to pin point those critical moments in the systems passage, these are also the moments of opportunity which may potentially lead to self organisation and growth.

Langs (1992) in his book *Science, Systems, and Psychoanalysis* explores these crucial passages in the evolution of the patient therapist system and in dynamical systems in general. He states 'In physics and in other physical and biological systems, there are moments in the trajectory (i.e., the unfolding over time) of a system called *bifurcation points* - moments at which a fateful ‘choice’ must be made among significant alternatives’ (p94). A major feature of non linear systems is their susceptibility to the opposing forces of both positive and negative feedback. A minor disturbance in one part of a system, such as a microphone being placed to near it’s speakers can send the whole system into disarray and is the result of positive feedback. Negative feedback can however not only rebalance the system but can also be responsible for new and creative forms of behaviour. The holistic principles that are implied in dynamical systems and contribute to our understanding of patterned chaos are also of central interest to the communicative practitioner. The communicative therapist is obliged to continuously focus on the patterns and themes that underly the patient’s communications that reflect and clarify the boundary disturbances in the system. She is then required to feedback these themes in order to rebalance and stabilise the system. Although the communicative method depends on a commitment to this holistic paradigm the communicative model of the mind and its underlying philosophy also identifies the practitioners inherent dilemma, that also inhibits their ability to respond holistically and to consider themselves as an intrinsic component of the system. This paradox is related to the opposing forces of the unconscious acceptance and need for boundaries and limits, in contrast to the conscious denial of
the existential terror and the need to defend against it. Like the swimmer caught in a
current, or the driver swerving into skid the only way out is to recognise and feedback
into the order that is implicit in the disorder and that is reiterated throughout the system.

I have often been asked by people who are unfamiliar with the approach how
can communicative therapy help the patient to change in their everyday life, if you only
feedback and respond to the patient's themes and advice that relate to the here and
now of the therapeutic conditions. The majority of psychotherapy research that has
explored the conditions that promote psychological health and emotional well being,
suggest that it is closely associated to the quality of the therapeutic relationship rather
then to any specific model or approach. The continuing developments in the area of
dynamical systems theory and its applications to psychotherapy may contain some
clues. Butz (1997) explains that 'One of the clear distinctions in chaos, complexity, and
the new physics is on the notion of time, that self organisation only occurs in the
present' (p140. Slife and Lanyon (1991) also reinforce the significance of addressing
the immediate issues as they arise. They propose 'that the process of being in the here
and now also alters an individual's temporal relationship with the outside world,
conceptualising the present as an open door through which both past, present and
future may be affected' (p179). It has also been noted (Butz 1997) that it is necessary
to have sufficient coherence in a system for adaptation and reorganisation to take place.
Therefore 'the more coherent the system the more likely it will be able to use chaos
and complexity as transformational states' (p199).

The ability to bring something new into existence has been defined as creativity.
The underlying fractal patterns that define the critical points in a chaotic system also
denote those moments of potential for new order, transformation and creativity.
Fractal images that have the tendency to repeat may therefore be compared to the
Freudian concept of the repetition compulsion. This innate tendency to retreat to
earlier and familiar patterns of behaviour may be viewed as a form of resistance to
change and new order. The achievement of new order and transformation on the other
hand clearly implies a creative leap and has been proposed by psychologists and
therapists as the equivalent of psychological health and emotional well being. The emergence of creativity from a Kleinian perspective is considered to arise in the depressive position as a form of reparation and has been described as the production of a unique form in contrast to repetition. Donald Winnicott (1971 has referred to creativity as a normal capability and as a primary characteristic of psychological well being. Christopher Bollas (1989) also suggests that creativity stirs and changes people in some way however small (p80). Enid Balint (p84) propounded the idea that health and well being are intimately connected to creativity and creativity is essentially related to a deep need to communicate accurate perceptions.

Anthony Storr in his book *The Dynamics of Creation* stresses the self regulatory capacity of the unconscious as the source of creative potential as well as concern with form and elegance as important creative features. Anton Ehrenzweig (1964) who lectured and wrote extensively on the links between psychoanalysis and art in the 50s, spoke of the close connections between anxiety, creativity and chaos. Ehrenzweig also placed unconscious modes of perception of form and shape at the helm of all creative work and is reported to have made the statement that 'to make someone love the unconscious that is art' (p244). Finally Bohm and Peat (1987 in *Science, Order and Creativity* assert that ‘Some reflections will show that our first notions of order depend upon our ability to perceive similarities and differences’ (p111). They also contend that the capacity for creativity is particularly associated with an acute sensitivity to change.

Robert Langs development of the Communicative Approach to Psychotherapy is not only ingenious, innovative and exceedingly elegant, it also reflects a clearly scientific, as well as highly creative, holistic and systemic approach to human interaction. I hope that some of the aforementioned ideas may help in some small way to explain the interpersonal feedback that is central to the communicative method. The communicative practitioner is committed to feeding back the patterns and unconscious images that are mirrored in the patient’s derivative material that tend to relate to the boundary disturbances of the here and now of the therapeutic system. These underlying
fractal patterns alert the therapist to the disorder in the system and of the need to listen to the unconscious advice from the patient's feedback that tend to relate to the stability of the system. If the therapist is able to contain their anxiety that tends to accompany chaos, and feedback and acknowledge these ongoing critical points that are disclosed as interwoven and repetitive patterns linking the past and the present to the here and now, they maybe able to offer the patient (and to some extent the therapist) uniquely creative moments. The potential for new order and the possibility for new patterns to emerge is considered to occur as the result of the therapist's ability to restructure the therapeutic environment in response to the unconscious feedback from the patient. This rebalancing through the mechanism of the systems feedback may then substantially influence the patient's capacity to develop new patterns of relating in other systems outside of the therapy.

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