



PROJECTION—THE MAGIC MIRROR

PROJECTION, INTROJECTION, RE-COLLECTION, TRANSFERENCE, AND COUNTER-TRANSFERENCE IN THE PROFESSIONAL RELATIONSHIP

We are not regarding any part of us as being a villain, an enemy.

Chogyam Trungpa

Cutting Through Spiritual Materialism

Projection, introjection, transference, and counter-transference are present in all human interactions. In a clinical setting, these dynamics, if left unconscious, can sabotage the therapeutic relationship. In the *Medicine and Horsemanship* setting, these dynamics can be deliberately elicited and played with so they cease to be destructive in professional communication.

Projection is the act, usually unconscious, of attributing or blaming one's feelings, traits, circumstances, and attitudes to or on other people, racial or ethnic or religious groups, and animals. Humans may also project onto non-living forms such as an ink blot, as in the Rorschach test, or the weather. Projection as first described by Austrian neurologist and psychiatrist Sigmund Freud is a defense mechanism that serves to decrease anxiety by repressing unwanted thoughts and desires.

Everything we experience as *other*, external to ourselves, represents, in part, a projection of our internal states. We project onto others both characteristics that we admire, and believe we ourselves lack ("Wizard of Oz thinking"), and characteristics that we despise and have not yet come to terms with when we meet them in ourselves. The mirror principle says, what I see in you is also in me; if what I see were not already in me, I would not even recognize it in you. The folk concept is the pot calling the kettle black. A fundamental teaching from the Hindu Vedas is "tat tvam asi" – thou art that (I am you). Although in expression we are each unique, in essence we are all the same and all part of the collective consciousness, or the Divine. As equine-assisted psychotherapist Wyatt Webb says, "You spot it, you got it!"

The most reliable sign of projection is the strong emotion, such as love or hate, that accompanies an impression, observation, or judgment. These emotions are energies

invested in primal essence forms that Swiss psychiatrist Carl Jung called **archetypes**. Archetypes are the straight-from-central-casting roles that are represented across all cultures and societies—loving mother, wise old man, beautiful princess, knight in shining armor, evil fiend, god, goddess, cute baby animal.

All of these archetypes are present in all of us. To the extent that we have not acknowledged and embraced our “good” and “evil” and “masculine” and “feminine” parts, we will forever project them outward upon our mates, our parents, our children, our enemies, our heroes, and our animal companions. Archetypal dramas will come to us in dreams and in recurring patterns of life events that seem to just happen to us—triumphs, tragedies, lucky breaks, accidents, and illnesses. Myths, folk legends, and fairy tales—remarkably similar in all languages and cultures—are stories built around archetypal themes.

Important archetypes that we project onto others are:

- **Persona** – The mask or public face we show more or less consciously to the world, often projected onto our buddies and colleagues who are *just like me*. Persona projections are responsible for social groupings like high school cliques and good ol’ boys (and girls) networks.
- **Anima/Animus** (Consort) — The unconscious gender complement to our gender-based habits or prejudices, usually projected onto our romantic partners. In Jung’s original terms, insufficient to describe our current understanding of masculine and feminine identities, the **Anima** is the man’s Inner Female projected onto a woman; the **Animus** is the woman’s Inner Male, projected onto a man.
- **Shadow** — The unconscious Self projected onto love and hate interests. The **Dark Shadow** is the part of ourselves that we project onto our adversaries, enemies, “inferiors,” and people to whom we take an immediate dislike. These “axis of evil” entities hold qualities that we need to integrate if only we could identify their positive aspects. For example, we may hate aggressive people because we fear and disown our good, natural assertiveness. The **Bright Shadow** is the part of us that we project onto celebrities, heroes, role models, pets, and people toward whom we feel immediate affection. Those who are receptacles for our Bright Shadow projections personify the talents, gifts, and strengths that we fail to fully recognize or actualize in ourselves. But if you spot it, you got it!

In personal and professional development, Bright Shadow is often more difficult to integrate into one’s psyche than Dark Shadow. As the following quotation illustrates, it can be easier to spend years in psychotherapy dwelling in the comfortable if dysfunctional past, working on Dark Shadow, than to go forward in fulfillment of one’s Bright Shadow destiny.

Our deepest fear is not that we are inadequate. Our deepest fear is that we are powerful beyond measure. It is our light, not our darkness, that frightens us most. We ask ourselves, Who am I to be brilliant, gorgeous, talented, and famous? Actually, who are you not to be? Your playing small does not serve the world. There is nothing enlightened about shrinking so that people won’t feel insecure around you. It’s not just in some of us; it’s in all of us. And when we let our own light shine, we unconsciously give other people

permission to do the same. As we are liberated from our own fear, our presence automatically liberates others.

—*Attributed to Nelson Mandela quoting Marianne Williamson's Return to Love*

In addition to psychological archetypes, there are what I call **somarchetypes**, the primal essence forms of the physical, somatosensory body. Psychological projection is considered to arise from the brain and its mental processes. But muscles, bones, joints—indeed, all our cells—have projections, too. Somarchetypes are projections of our imagined, kinesthetic sensations of tallness and shortness, strength and weakness, skinniness and fatness, baldness and hairiness, even alternate genitalia, onto those who have those physical attributes. We project onto horses somarchetypes of strength, swiftness, grace, and boundless physical energy.

Most projections reflect some “objective” truth. They easily attach to what Jung called a *hook* in the object of one’s projection. We project creativity onto artists, evil onto people who do villainous deeds, and strength and majesty onto beings such as horses who “objectively” have those qualities. Just because it’s projection doesn’t mean it isn’t true, and if something is true “objectively,” it will draw projections out of us like a magnet. Our *emotional* response to “objective” qualities is the indicator of the presence and strength of our projections. We take out what we put in.

In medical practice, we tend to have the most difficulty with patients who are struggling with issues that we ourselves have not acknowledged or overcome—self-destructive behavior, repressed or non-normative sexuality, personality disorders and neuroses, addictions. These patients become the objects of our projections and, often, our disdain.

Horses draw our projections because they do not communicate in words, because their expression of physical form and energy is on such an expanded scale, and because their huge lustrous eyes evoke our deepest feelings. Horse myths from all over the world portray the strength and beauty, the magical, mystical, and even demonic qualities that we attribute to—project onto—horses. Horses remind us of ourselves, especially when they respond spontaneously and honestly to our unspoken attitudes, moods, and body language. Many people will complain, “the horse is stubborn,” or “the horse doesn’t like me.” But when we acknowledge our projections, and change our own stubbornness and self-loathing, the horse responds to us differently.

Introjection is the internalization of qualities that others project onto us. That is, we accept other people’s images of us. Introjection can be helpful or harmful. Internalizing Dark Shadow projections can result in guilt and self-recrimination. It can also allow us to soul search in the service of self-improvement. “Love thy enemies for they tell you your faults.” Internalizing Bright Shadow creates the problems so many depressed and drug-addled celebrities have in trying to live up to their impossibly star-struck public images. Bright Shadow identification can also, however, allow us to see the good that others see in us.

In professional development, care must be taken not to become inflated by our introjection of Bright Shadow projections from our patients and students. Inflation is a Jungian term describing the state of extreme egotism that detracts from one’s authenticity and leads to destructive patterns of conceit and arrogance. At the root of

such inflation is often deep feelings of inadequacy and insecurity about one's authentic Bright Shadow essence.

Re-collection is a dynamic described by Carl Jung's protégé and brilliant psychiatrist in her own right, Marie-Louise von Franz. It is the process of withdrawing our projections from their targets by owning up to possessing, or needing some aspect of, the traits we attribute to others. One of our biggest challenges is withdrawing Dark Shadow projections from their homes among our most bothersome Others. These people just irk us! But when we can own our projections and see them for what they are, we will react to all the mirrors of Self we meet in the world with compassion, tolerance, and understanding.

Transference and counter-transference entail the externalization of internal states based on learned *patterns of relating* to others. Transference and counter-transference become problematic when they are inappropriate for the scenario at hand, such as a doctor-patient encounter. In transference, the patient identifies the physician as, e.g., a parent, child, or spouse figure. The patient may then displace onto the physician the anger, distrust, or sexual attraction s/he felt in a past relationship. In counter-transference, the physician is provoked or seduced into responding to the patient in the role that s/he, the physician, has been placed in by the patient. The physician falls into the trap of enacting the parent, child, or lover role for the patient, based on the physician's own experience with these types of relationships.

In transactional analysis, as described by Eric Berne in the pop-psychology classic, *Games People Play*, the roles subject to transference and counter-transference are simplified to parent, adult, and child. With extremely ill or culturally deferential patients, the parent-child dynamic may be inevitable and in some instances, therapeutic. The healthcare provider may be thrust into the parental role until the patient is physically recovered enough or well enough informed to relate in a more autonomous, adult-adult fashion.

In medical practice, we are most vulnerable to transference/counter-transference dynamics from our own unresolved relationships, be they parental, authoritarian, or romantic.

Simply put, with projection, what gets projected are archetypes. With transference and counter-transference, what gets transferred are relationships.

Projection and transference/counter-transference are inevitable ingredients of all transactions and relationships, even fleeting ones. The important thing is to recognize them when they occur and balance the strong feelings they provoke with self-reflective processes that result in appropriate professional behaviors.