

Projection

By Ben Benjamin, PhD

Author's note: The following article is adapted from "The Ethics of Touch: The Hands-on Practitioners Guide To Creating a Professional, Safe and Enduring Practice," by Ben Benjamin and Cherie Sohnen-Moe.

Projection occurs when a person has a thought or feeling that he or she isn't comfortable with and then "projects" it onto others, or considers it the other person's issue.

For example, if a practitioner feels sad, he or she may be experiencing the client's sadness, and ask about it. When a practitioner is unaware of feeling angry, he or she may perceive the client as angry, or angry with the practitioner. The primary danger of projection is that the practitioner may not understand what the client is truly feeling, and will fail to help him or her in an appropriate way. Instead, the practitioner tries to help the client with issues and in ways that the practitioner needs. Keep in mind that projection mostly occurs on an unconscious level.

Example 1: A practitioner has recently lost a loved one and has been grieving for several weeks. A client comes in for a session and isn't as animated as usual. The practitioner makes an assumption that the client is feeling sad, and begins to offer words of comfort, such as "Don't worry, everything will be OK," or "It's OK to feel sad." The practitioner gives the client a reassuring pat on the shoulder. The client responds by saying, "What do you mean? I feel fine." The practitioner then says, "It's normal not to want to admit it when you feel down or sad, but this is a safe environment for you." The client is perplexed and leaves, wondering, "What was up with that practitioner?" and feels uncomfortable returning.

Example 2: A practitioner with a great deal of unresolved anger about a recent relationship sees a client for a session. Throughout the session, the client makes several requests for a change in the manner in which the treatment is carried out. After each request, the practitioner feels uneasy and concludes that the client is

dissatisfied and angry with the practitioner. The practitioner also feels hurt and uncomfortable after each request and begins to withdraw and become distant. As a result, the client becomes more demanding, and feels the practitioner is not present. The treatment ends with the client feeling dissatisfied with the quality of the practitioner's work and the practitioner feeling disrespected.

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