ID Check for CoCounselling:

Commonalities in Psychoanalysis and CoCounselling in Germany

1st Part - Source: Cecile Loetz and Jakob Müller, psychoanalysts at the University of Heidelberg / Interview ZEIT Magazin 12.01.2023

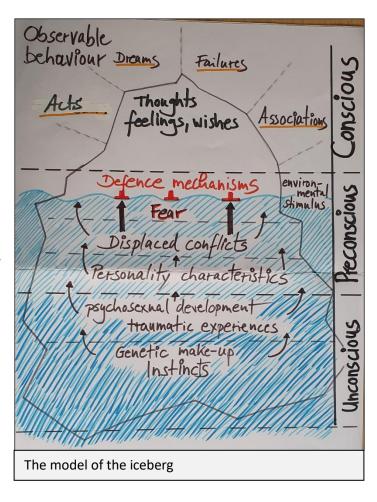
Part 2 - Notes on CoCounselling by Markus Papenberg May 2023

Part 1. Psychoanalysis

Exactly one hundred years ago, in 1923, Sigmund Freud published his work "The Ego and the Id". The model described there, which has become famous, assumes that the human psyche consists of the id, the ego and the superego. The term psychoanalysis stands for both the descriptive and explanatory model of the human psyche based on Freud's theories about the psychodynamics of the unconscious, and for analytical psychotherapy and psychoanalytic methodology, which is also concerned with the study of cultural phenomena. In all three aspects, psychoanalysis continues to be developed and modified by clinicians and researchers to this day. Thus, psychoanalysis as a medical-psychological discipline is characterised today by theoretical, methodological and therapeutic pluralism.

Today's approach to psychoanalysis therapy aims to move issues from the unconscious to conscious understanding. In some people, good approaches to behavioural change are sabotaged by unconscious processes of the psyche. In this case, it is first necessary to become aware of the processes, e.g. by asking the question: What am I actually doing?

An example from a modern psychoanalysis session begins with the question:



"Why do I have a great fear of loss towards my partner?"

"Why do I repeatedly manoeuvre myself into relationships that harm me?"

Unpleasant situations often repeat themselves in my life, and I am not aware of the processes involved - otherwise I would do things differently. But this is not fate, it has to do with my history and imprinting.

It can be a long search for clues, because the psyche doesn't make it easy for me. The unconscious can be, to use an image, like a squirrel. It scurries around in secret, sometimes darting by. Every now and then I find a nut that it has deposited somewhere. There are traces visible, the creature itself does not immediately jump on my lap because it is vulnerable and sensitive. That's why it can take longer in therapy (or counselling) to get to know the unconscious.

Comprehensive life themes

As an example, here is a man in a professional leadership position with the belief:

"I don't get enough love and recognition."

Interpretation: it is based on a deep childhood hurt where this person was given insufficient love and care by parents and relatives. Now this man runs after love all his life, the solutions are narcissistic solutions, a compulsion: The man attains a professional position of power in which others are



dependent on him so that he can no longer be abandoned. This man tries to force love and is always met with rejection. His drama repeats itself over and over again. The man is not aware of the drama caused by himself, there is a lack of clarity about the causes and his own motivation.

Explanation: It is often accompanied by great psychological pain to work through one's own defensive reactions in order to reach realisation. It can be a lengthy and small-scale process until such connections are internalised, reaching from the cognitive realisation to the gut. This is emotional learning, linking current situations with old experiences and imprints and becoming aware of personal responsibility. This process can be demanding and delicate; self-efficacy is promoted in the process.

The man may not want to hear what he himself is contributing to the situation, he will prefer to rant about the wife/husband, colleague or boss to relieve himself of the unpleasant feelings. This is where the example of this case ends.

Therapeutic skills and self-concept in psychoanalysis

In psychoanalysis, the therapist does not take the appropriate solution to the patient's problem out of the drawer and then practise the new behaviour together. Instead, the therapist looks at what the patient triggers in the analyst with his or her being. The analyst's own feelings that arise are the clues and the core of the therapy. The therapist is therefore able to perceive feelings. Then she can inwardly distance herself from her feelings and observe them. What the therapist triggers in the patient and what it triggers in herself is observed in a differentiated way. Transference and counter-transference are at the heart of this form of therapy, psychoanalysis.

It is important for psychoanalysts to learn not to bring their own issues into the psychoanalysis with the patient. Here the principle of "thinking under fire" is an important concept, to be able to continue to think about and reflect on the situation despite high emotional pressure.

What is happening in today's situations with patients are learned relationship patterns from the past, both in relation to themselves and to others. The patient's life story is brought into the here and now and the stressful behaviour patterns take on a form and can be addressed.

What is important here is a successful interaction between the patient and the therapist, a so-called "matching of the mind".

"Attachment is the stuff of the soul."

On the development of the psyche: A large part of our psyche, our mental structure, is formed from relational experiences. I learn who I am from other people. I get my name from others and children first internalise this like this: Markus is hungry!



The child speaks to itself as if in the voice of its caregivers, the parents. As a child, the first 10 years are a very sensitive phase, where a deep unconscious knowledge about myself and about important questions develops: Am I good the way I am? Am I wanted and protected?

The interpersonal bond is not something secondary, but vital for a child. All subsequent essential bonds influence and shape us deeply; love relationships, friendships, also relationship experiences in therapy. This is the stuff our souls are made of: Our relational and attachment experiences.

In psychoanalysis, the aim is to make the coagulated relational experiences fluid again. All the fears, the convictions, the reproaches, the anger felt towards parents or other attachment figures should become part of the therapeutic relationship and thus be able to be expressed and discussed at all.

It is about being as honest as possible with myself in the course of therapy and finding my own truth in order to understand myself better: What world did I grow up in? What conflicts did it produce in me at that time? What hardships did the people who cared for me have in my childhood? Where is this still active in

me today? It is about the whole package, finding all negative and positive memories, even lost longing and hope.

When the patient slowly opens up, not only knowledge but also new experience emerges: the new experience in therapy is not only experienced and remembered as knowledge but also as emotion. To get to this emotional level, the patient in psychoanalysis often has to go back to the difficult situation. However, it is different for him because he experiences support from the therapist.

Sometimes it is also a matter of allowing and enduring the unpleasant feelings in order to give them space with the analyst. Therefore, as an analyst, one is probably more sensitive to interpersonal issues. The patient can catch up on certain experiences in therapy and the change can come about through letting go. Grieving has a lot to do with acknowledging reality. Often someone rebels because they cannot accept reality, the defensive reactions against it are high.

It can be learned to bear sadness and after the grieving process a new space can emerge. Often these people have experienced having to suppress their own feelings. This tiredness can then turn into a deep sense of meaninglessness that leads to panic attacks, for example, or makes someone unable to get up in the morning.

It is an illusion of our self, we can plan, steer and control everything, it is difficult to endure: not knowing yet. In general, it is very difficult in our society to endure that something is not yet.

The technical term in psychoanalysis is called "negative capability". It means the therapist's ability to endure doubts, paradoxes, ambiguities, confusions and misunderstandings in the therapeutic relationship and to resist the pull to end this state of "not knowing" hastily by classifying it in interpretative terms or diagnostic

categories. This makes it possible for the therapist to allow emotional experiences unknown to him/her in a therapeutic process - which plays a special role in working with early disturbed, psychotic or traumatised patients - and opens the therapeutic method for creative processes and learning from the patient. In the opposite direction, psychoanalytic procedures try to admit the "negative side" of the patient in order to bring him or her closer to unconscious processes.

Therapy situation in Germany: Health insurance companies in Germany only pay for short-term therapies of 20 to 40 hours, which does not give a complex system like the soul the necessary time to be able to change. About half of all therapies are psychoanalyses in Germany. There is only one chair (professorship) for psychoanalysis left at a university in Germany.



Part 2. - ID Check between Psychoanalysis and Co-Counselling

In Part 1, aspects of psychoanalysis became clear which show parallels to the techniques in co-counselling, a long-term self-help procedure. An excerpt of the counselling techniques with background information will be presented in the following. The ID check on psychoanalysis is rich and revealing. This makes it clear how we as the CoCo training team at Haus Kloppenburg, Münster, teach this self-help procedure.

- a. "Value-free attention" is the basis for the setting between the counselling partners. Similar to the psychoanalyst, the attention-giving counsellor tries to give the client a turned and value-free attention the "matching of minds" is the most important basis of the sessions. The interaction between the two counsellors is of great importance. Only when I feel safe enough in the setting will I be able to express my hitherto hidden and unconscious thoughts. The CoCo contract and the adherence to the rules of confidentiality and (non-judgemental) "free attention" serve as the basis for this.
- b. There are further techniques: "Associative Speaking" and "First Thought" to loosen the control over my thoughts and words a little. To stay with the analytical image: The squirrel is sent out consciously and the nuts he hides can come to the surface and into my consciousness. By repeating a thought or sentence, I can trace the possibility of a deeper meaning, test it out for myself: What is it about the sentence that I spoke that makes me feel? What was in the remembered situation, why is it in my consciousness now? Does it have a more far-reaching meaning, also in an emotional dimension, than has become clear to me so far? Where are the resistances or fears of avoidance in me?

Here the possibility arises to open a similar space as in psychoanalysis therapy: I am allowed to name my unconscious thoughts and express them with feelings and without being judged or evaluated. In the "CCI Co-Counseling Manual" by Joke Stassen (NL) from 2019 (almost exactly how we use this in Coco sessions at Haus Kloppenburg, Germany), there is a precise description of how restimulation announces itself and what to watch out for: 1. it can lead to strong reactions 2. it can happen unconsciously 3. the feelings are overwhelming and disproportionate to the situation.

If I am able to perceive these symptoms and interpret them correctly, it is the opportune time for healing.

- c. Helpful here is the technique of "describing exactly", which can be used in the whole range. It can start with an exact description of the situation. Or it will be describing exactly what I felt and expressing this emotionally to make the feelings of that time come alive.
- d. In the two "role plays for relief" we follow this approach a bit more precisely, I see the parallel to psychoanalysis there as well: The sentence that is bothering me is said to me by the other CoCounselor and now a part of the transference and counter-transference already begins, which are also so important in the therapeutic psychoanalysis setting. In this case, my counterpart plays a person, e.g. my father, and tells me the sentence



that now reminds me and deeply hurt me as a child (to stay with the above example): "You are disturbing, be quiet and leave me alone, otherwise there will be beatings." In these role-plays, countertransference can occur if the role taken or the sentence triggers the CoCounseler.

In a variant of the role plays for relief, there is also the possibility that the CoCounseler plays the role of with the remark: "I am your father, what would you like to say to me?"

Here, in the role play between the two, it is possible to consciously address what is bothering or upsetting the counsellor and speak directly to this person.

- e. Through the techniques of "association" and "repetition", further content can be addressed that may have been tabooed or faded out so far. In this way it can be possible to get to the unconscious and to perceive the defensive reactions of the body and mind. The overcoming begins when I continue to trace it, it shows itself in the emotions that are awakened in me and which I am now allowed to express. Often, anger and shame or helplessness, possibly grief at the end, come to physical expression in this way.
- f. The processing of stressful situations serves the own realisation of defensive fears and self-damaging behaviour, which often takes place unconsciously. The aim of the "processing role play" is to re-enact and relive the remembered situations. It often takes a lot of inner effort to confront the stressful past state. The role play is divided into three steps:

1. how is the situation in my memory?

Replaying how it was in order to bring the situation and thus emotions back to life. In stressful situations, the "old" emotions are often reawakened. The first important and challenging step is to allow this to happen, to bear it and to accept that it was so stressful.

2. What do I most want to do and express?

Use the full range of what is available to me now in this situation and give free rein to the emotions and possibilities for action. The focus is on relieving the burden, but also on the possibility to reflect on the situation and, most importantly, to take action. It can be helpful to "disempower" the people who brought the disaster upon me. It is also important to formulate what I needed in this situation and to give it to myself.

3. What can I (realistically) do now and today?

Consider and use interactions that seem possible and socially acceptable to me. In this way I can open up an option for action for myself and practise what I did not think I could do before and which is now realistically available to me.

The ID check in co-counseling is of central importance here and should clarify what reminds me of the other person, it can be associated with the stressful parts and positive qualities of the person. At the same time, it becomes clearer what the differences are between the two persons, the remembered person and the now real person. This technique can be used in a special way to practise the comparable attitude of the psychoanalyst mentioned, who also becomes aware of his feelings under stress through transference and can apply reflected action. The result of this ID check with the "processing role play" can be to be able to act reflectively under stress without being constantly triggered by the past.

With other persons in the counselling sessions, transferences and counter-transferences can take place, similar to a psychoanalysis between patient and therapist. This can become the core of self-development in counselling. The active person can be involved in a transference and countertransference in a role play with the supportive co-person. Becoming aware of this interaction can be very helpful. The active person can, with the balance of attention, both be active and observe him/herself at the same time if he/she is skilled in this technique.

Through well-practised and successful mindfulness, the person is able to recognise both the link to past situations and their own contribution to the action in the situation in the unconscious act (e. g. scolding the boss). The result is self-efficacy through awareness of one's own part in the network of relationships. It can be very helpful as a basis for change and achieving new goals.

This is about one of the strongest forms of emotions, the unconscious feelings of guilt can have great influence. It is not from CoCounselling, it has helped me personally in self-awareness very much to recognize the following 5 solution blockages more clearly, since these are most frequent disturbance causes for the reorientation of my behavior. I got to know them in a therapy by an experienced psyochologist and and briefly present them for the sake of completeness:

Big 5 Solution Blocks

- Self-reproach "I should have known better" / "I need to take better care of myself" ...
- Foreign reproach "My father should have taken better care of me" / "My teacher always made me feel stupid"
- Expectation of others "My partner can quietly be a little more sensitive with me" / "My boss should praise me more" / "I expect XY to apologize to me"
- Age, competence, experience regression "When I have to speak my mind, I can't get a word out. I feel like I'm a school kid" / "In front of my boss, I feel like I'm 5 years old".
- Loyalty conflict "Our family has always had money troubles, then I can't be financially independent" / "My mother was never really happy, I can't live a happy life".

Since this process can sometimes take several counselling sessions, if not months or even years, CoCounselling is a valuable contribution to maintaining health, both during waiting periods for psychotherapy or after the end of psychotherapy, as well as for the self-responsible further development of mental health.

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