2 Key concepts in psychodynamic theory

All psychodynamic models trace their roots back to Sigmund Freud (1856–1939), the founder of psychoanalysis, and his revolutionary ideas about the human mind. From his original framework, different schools of thought developed and extended his idea over the course of the twentieth century. Among the most significant contributors were Melanie Klein, Donald Winnicott and Freud’s youngest daughter, Anna Freud. This process is continuing in the twenty-first century, as leading thinkers revise and develop his concepts in the light of experience and research. Yet Freud’s fundamental ideas about human mental and emotional functioning remain the bedrock that underpins the psychodynamic approach.

This chapter does not provide a comprehensive or in-depth discussion of Freud’s ideas, or of the development of psychodynamic theory over the past 120 years. The purpose of this book is to bring the psychodynamic perspective alive in applied form in a non-therapeutic context and to demonstrate how, through skilful use, it can inform and enhance the practice of executive coaching. To this end, I have concentrated on providing a concise explanation of those key psychodynamic concepts that in my view have best stood the test of time and are widely regarded as most relevant to current thinking and practice.

The unconscious mind

Psychodynamic theory is concerned with understanding the inner world of human beings and its relationship with how we behave in the outer world and relate to other people, organizations and society. A central component of Freud’s theory was the contention that we all have an unconscious as well as a conscious part of our minds. He did not consider this unconscious part simply to be the place where things that are outside our awareness are permanently stored away. Rather, he argued that we each have a ‘dynamic internal world’
in which there is constant interaction between conscious and unconscious thoughts, feelings, wishes, urges and fantasies. Within this inner world, the role of emotions is considered central. Pivotal to understanding the interplay between the conscious and unconscious parts of the mind is the belief that human beings have the capacity to regulate their experience of their own emotions without being aware that they are doing so. This means that we tend to ban from our conscious minds those unpleasant, frightening or threatening feelings that we find too difficult to tolerate.

**Our defensive patterns**

This process takes place unconsciously through what Freud called ‘psychological defence mechanisms’. He and other psychoanalytic thinkers formulated a wide range of these mechanisms, some of which, such as repression, denial and rationalization, have become familiar expressions in everyday life. Psychodynamic theory regards these defences as a normal, helpful and indeed necessary aspect of mental functioning. Without the capacity to exclude some of our emotional experience from our conscious minds some of the time, we would be overwhelmed with anxiety and be unable to function. However, when psychological defences are used excessively, or in an immature or rigid fashion, they distort and damage our emotional wellbeing and exact a heavy price in terms of mental distress and dysfunctional behaviour. This price is paid by ourselves and by the other people with whom we interact. As an understanding of psychological defences is central to a psychodynamically oriented approach to coaching, I have illustrated several of the most common ones through client examples at the end of this chapter.

At the heart of psychodynamic theory is the belief that while all human beings use defence mechanisms to deal with difficult aspects of their internal life, individuals do not use them in either a random or universal fashion. Instead, each person’s internal dynamics take shape in response to their individual experiences since birth. Our early attachments and family relationships, in particular, powerfully mould the interplay between the conscious and unconscious parts of our minds. As we grow, this results in the creation of a unique inner landscape for each individual, namely a characteristic pattern of emotions, thoughts, behaviours and defences. These patterns colour the adults that we become.

One of Freud’s most important insights is that human beings have a strong unconscious tendency to retain these patterns during their lifetime, recreating over and over again the characteristic experiences of their inner world, whether they be positive or negative. Regardless of the discomfort or dysfunction they may cause, these experiences are reassuringly familiar, having been laid down early in life.
A striking example of this is when an abused child, despite suffering deeply, seeks out abusive relationships as an adult. A more everyday example is the woman whose critical mother left her feeling guilty and with low self-esteem and who, as an adult, responds in a similar fashion to a critical line-manager. Similarly, the man who grew up in a family with several siblings where parental attention was in short supply may demonstrate competitive behaviours at work to the detriment of his relationships with peer colleagues. In all these cases, the repeated pattern of behaviour – however painful or unsatisfying in practice – provides a degree of unconscious gratification and psychological safety through the powerful sense of familiarity that it provides. In addition, these behaviour patterns also function to protect the individual against the internal conflict and anxiety that confronting their issues at a conscious level would evoke.

It was in the context of these insights that psychoanalysis and psychotherapy developed as clinical treatments. They were – and still are – designed to help individuals modify the unconscious patterns that have become obstacles to their emotional and psychological health.

The neurological basis of the unconscious

Although at a superficial level the notion of the unconscious mind has been widely acknowledged within our culture, in practice it is not well understood and there is considerable scepticism even within the world of psychology as to its real significance. As this concept lies at the heart of the psychodynamic approach, it is interesting to note that recent research in the field of neuroscience has revealed evidence for both the existence of unconscious functioning and for the primacy of emotional life.

Within the different systems of the human brain is the primitive limbic system, sometimes called the ‘emotional brain’, which contains a structure called the amygdala, two almond-shaped groups of neurons that play an essential part in decoding emotions and in particular in responding to stimuli that are threatening to us as an organism. Many sensory paths from other parts of the brain converge in the amygdala and alert it of potential dangers in the environment. As Daniel Goleman highlighted in his groundbreaking work on emotional intelligence, the amygdala plays a central but unacknowledged role in driving human behaviour (Goleman, 1996). This is because when the amygdala picks up danger signals, it instantaneously floods the body with adrenaline and other chemicals, triggering immediate anxiety and an instinctive fight, flight or freeze reaction – before we are consciously aware of what is happening.

The neocortex, our much more recently evolved ‘rational brain’, contains the main sites for language, the capacity to reason and to regulate emotion
and behaviour. Although there is a myriad of neural pathways between the limbic brain and the neocortex, the neocortex reacts much more slowly to messages from the environment and takes much longer to process information. Experiments using sophisticated brain scanning have demonstrated that individuals react to stimuli via the amygdala – in ways that can be tracked and measured physiologically – before becoming consciously aware of them via the neocortex. This would seem to indicate the neurological basis for the existence of unconscious functioning and confirms the continuing and fundamental centrality of emotion for the human animal, despite the astonishing development and capabilities of the rational brain (Gladwell, 2006; LeDoux, 1999).

**Freud’s structural model of the mind**

To fully appreciate the ideas about the dynamics of the mind already described, it is necessary to understand Freud’s structural model, developed in 1921. In this model, he put forward a metaphorical mental framework consisting of three different components that interact with each other and create a constant two-way traffic between the conscious and unconscious parts of our minds. Although subsequent thinkers have modified significantly the way this model is seen to function, and some of the terminology is a little obscure, the essence of the structure described by Freud remains central to psychodynamic theory.

**The id**

The first element of the model is the *id* (the ‘it’ in Latin), which Freud saw as representing our most fundamental biological drives, especially the sexual and aggressive. He believed that, like other species within the animal kingdom, human beings have deep-rooted instincts that we are innately programmed to try and satisfy, regardless of the impact on others. The id is most clearly seen in action in babies and young children whose lives are dominated by their own needs, wishes and feelings. Only gradually do they learn to master their impulses, delay gratification and modify their behaviour to take other people – and social norms – into account.

The id’s powerful drives do not vanish as we grow older. However, they do become increasingly hidden from view as we strive, with variable success, to control them by burying their most unacceptable aspects in the unconscious part of our minds. The particular way in which each individual handles the reservoir of biologically driven urges, desires and emotions located in the id plays a crucial role in shaping their inner world.

For Freud, this insight was central, since he believed the suffering of his patients was caused mainly by the struggle to deal appropriately with their
underlying sexual and aggressive drives. Although subsequent psychodynamic theory places less emphasis on the centrality of these primal drives, the id is still seen as a significant part of mental functioning, playing as it does a crucial role in the development of the bond between children and their parents through driving the baby to attach itself to its carers and to satisfy its basic biological needs.

The ego
The second element of Freud's structural model is the ego (the ‘I’ in Latin). While colloquially the term ‘ego’ is used rather pejoratively as in ‘we have to flatter his ego’ or ‘the room was full of big egos’, in this model the emphasis is somewhat different. In contrast to the largely unconscious, instinct-driven id, the ego is the more conscious and rational part of the self. As a child grows older, it is the ego that engages with the everyday demands of the outside world. It is the seat of our capacity to learn, adapt, compromise, reflect, anticipate and plan, and it works hard to integrate the different parts of our emotional and cognitive selves. It is also, crucially, the source of our capacity to build successful relationships, as it is the ego that manages the ongoing balancing act between our own wishes and needs and those of other people.

It is also the ego that drives us to seek approval and praise from significant others. This is something that we all need, as children and as adults, but people vary in the degree to which they continue to need external approval throughout their adult lives, regardless of what they have objectively achieved. When the need for this sort of validation dominates an individual’s personality and they tend towards self-aggrandizement, they are described as ‘narcissistic’. Paradoxically, narcissistic individuals are both excessively involved with their own achievements and, consciously or unconsciously, painfully unsure of themselves. It is likely that their ego has not developed sufficiently to create a secure sense of self-esteem. This leaves them dependent on seeking an endless supply of external recognition to feel good about themselves.

A key goal is therefore the maturation of the ego. The more mature the ego, the more able we are to understand, accept and manage ourselves and to regulate our underlying drives. Crucially, a healthy ego enables us to acknowledge and tolerate painful emotions and to find appropriate ways of expressing them. This capacity to experience and express the full range of human emotions at a conscious level, rather than suppressing unpleasant feelings into our unconscious, is intimately linked to our capacity to form close attachments, understand other people’s feelings and nurture and care for them. Freud believed that young children’s earliest relationships with their parents were of crucial importance in the healthy development of the ego and this view remains a central tenet of psychodynamic thinking today. I shall return to this theme below.
**The superego**

The third element of the structural model is the *superego* (‘above the I’ in Latin), which Freud believed functions as our conscience, counter-balancing the expression of the id’s underlying aggressive and sexual instinctual drives. Like the ego, this normally develops during early childhood as we learn to take into account other people’s wishes, needs and opinions. Initially, we learn that our parents or carers expect certain types of behaviour from us and disapprove of other types of behaviour and, when young, we tend to conform to gain approval and acceptance. Over time, we develop and internalize our own version of what is right and acceptable and what is not.

People vary a good deal in how powerful and demanding a superego they develop. A weak superego results in individuals who lack a sufficient internal moral guide to prevent them from transgressing against social norms and satisfying their own needs at the expense of others. A strong superego leads to individuals who are vulnerable to being overpowered and controlled by an excessively harsh and demanding conscience. This latter group is prone to feeling easily guilty and self-critical. They tend to drive themselves – and others – extremely hard. In some cases, they suffer from a constant high level of unconscious guilt which leads to self-punishing or self-destructive behaviour and to repression of their own anger or other ‘unacceptable’ thoughts or feelings. In other cases, they may find their harsh superego so intolerable that they turn this voice outwards and persistently blame and attack others as well as themselves. Individuals also vary greatly in the extent to which they are consciously aware of their superego and in how successfully they are able to deal with its demands. Those with a healthier ego, whose development has supported self-awareness and self-acceptance, will be more able to recognize the superego as a powerful but manageable part of themselves and to negotiate with it to achieve a good balance between the two extremes.

**Internal conflict**

Thus Freud’s structural model of the mind suggests that our inner worlds are propelled by powerful ongoing tensions between the different parts of the human psyche. The primal urges of the id (for example, the wish to attack hated rivals), the reality-check provided by the ego (attacking them would not be appropriate) and the self-critical inner voice of the superego (feeling guilt for wishing to attack them) interact and drive the dynamic ebb and flow of thoughts, wishes and feelings between our conscious and unconscious minds. The *internal conflicts* that these interactions create are experienced as uncomfortable at best and intolerable at worst, depending on the individual and the situation. These conflicts, conscious and unconscious, trigger anxiety,
which Freud saw as an alarm call to the ego. In the face of this threat, we unconsciously mobilize psychological defence mechanisms in an attempt to resolve our emotional dilemmas and regain a sense of safety.

**How individuals develop psychologically**

As well as explaining how the mind is structured and the interaction of the three components, Freud’s mental model suggests that human beings face several *developmental tasks* if they are to achieve mental health. These can be encapsulated as follows:

- How to channel our more primitive urges, wishes and emotions into socially acceptable forms while not losing touch with them altogether. This last point is important if we are to retain the capacity to mobilize energy, emotion and creativity.
- How to develop a moral conscience that provides us with clear guidance without being excessively critical or punitive.
- How to evolve into a balanced and resilient individual, with a positive sense of self and others, who is able to tolerate ambiguity, and sustain intimate, social and work relationships successfully.

To understand the factors determining each individual’s success or otherwise in achieving these goals, we shall turn to Freud’s ideas about child development. He believed that the human infant and child goes through a succession of age-related stages, each of which brings its own psychological hurdles that must be resolved in a satisfactory way if mental health is to be achieved. Although later thinkers have modified aspects of Freud’s views in this area, the psychodynamic model retains at its core the view that our early life experiences – and especially our relationships with parents and other carers – have a fundamental impact on our long-term psychological health. These early experiences powerfully mould crucial aspects of the person that we become.

The psychodynamic view of child development is a huge and fascinating subject area. Here I can only highlight some of the most important dimensions and attempt to give a sense of how Freud’s structural model of the mind can help to explain the significance of our early experiences.

Babies and young children, up to approximately the first two years of life, are dominated by the biologically driven and forcefully expressed instincts of the id. At this age their emotions – whether love, hate, fear or joy – are all-encompassing and, in the moment, entirely colour their attitudes towards their carers. For example, when a child of this age is angry and tells his mother that he hates her, he really means it. However, a few minutes later, when his feelings have changed and he wants to cuddle her, the loving feelings that he
expresses are equally genuine. It is as if the young child experiences the mother as two people consecutively, one bad and one good. It is only gradually that he or she learns to recognize that she is one and the same person.

It is inevitable that even the most attentive and loving parent will sometimes be experienced as bad by the child and the process of learning to tolerate the frustration and disappointment this causes is a normal and important developmental milestone. It represents the early growth of the ego, which is beginning to modify and regulate the urgent demands of the id for immediate gratification.

As children become mobile and start using language, new horizons open up and they experience the excitement of discovering the world around them. Alongside this surge of curiosity and discovery, they have to cope with new experiences that are challenging and often frightening. These include learning to separate from their carers and to accept that they are not the only person at the centre of their parents’ lives. Learning to share their mother with their father or another partner, to relate to siblings and other children, to be part of a group and to take turns are all part of this process, as is discovering and coming to terms with the reality of birth, illness and death. It is the child’s growing ego that helps it to negotiate these tasks and to develop the vital capacity both to defer gratification and to compromise. This is accompanied by the development of the child’s inner moral guide or conscience in the form of the superego. In this way, the id – which at birth propels the development of the human infant – becomes modified by the influence of the other two components of the structural model.

The importance of our early attachments

How successful this developmental process is in creating a psychologically healthy individual is believed to depend a great deal on the early environmental influences on the child. The early relationship between children and their mothers, or mother-substitutes, is held to be particularly important. The roots of this belief lie in the biological realities of the human being as a species. Human infants are unique in the extent and duration of their dependence on parents or caretakers for survival and are therefore born with a powerful innate drive to form and evoke strong bonds with significant adults. From a psychodynamic perspective, a baby’s future capacity for mental and emotional health will depend on the extent to which he or she experiences the consistent presence of carers who tune in to its feelings, empathize and respond promptly and soothingly to its needs, so providing the vital conditions within which the healthy ego can grow. This kind of caretaking relationship is seen as providing much more than food, physical comfort, warmth and even affection – it also provides ‘containment’, a vital sense of psychological safety that enables
the baby to handle the anxiety that it will experience when its needs are not immediately or perfectly met (Bion, 1962). When the baby's caretakers do not succeed in providing what the eminent psychoanalyst and child development expert Donald Winnicott (1964) called ‘good enough’ care, it will suffer some level of psychological and emotional disruption as the bond to the key figures in its life is compromised. For Winnicott, ‘good enough’ care meant, in particular, the mother's capacity to tolerate the baby’s anger and neediness without being damaged or overwhelmed by it.

A relatively brief or minor disruption in the provision of good enough care, such as a temporary separation, will cause the child some anxiety and distress. However, it is when the child experiences long-term or severe rupture of the child–carer attachment that long-term consequences follow. This rupture can be caused by separation from or loss of a parent, or parental behaviour that is inadequate, ambivalent, neglectful or abusive. These situations will seriously weaken the development of the child’s ego and their capacity to form and sustain close and healthy relationships will be compromised, severely damaged or destroyed.

This is why psychodynamic theory holds that the experiences in the early months and years of our lives are particularly influential in determining our long-term psychological and emotional development, with the mother–baby relationship being regarded as especially important. Other relationships, however, especially with fathers, are regarded as very important too. A good relationship with one parent, for example, can do a great deal to offset the damage caused by a poor relationship with the other. Similarly, the nature of a child’s relationships with their siblings will have a powerful impact on the way in which they relate to peers later in life. Therefore, while good enough early parenting is an essential basis for mental wellbeing, events that occur later in childhood or adolescence must also be taken into account when understanding the way in which we evolve as individuals.

**Neuroscience and attachment theory**

Once again, modern neuroscience provides powerful confirmation of the fundamental importance of early attachment experiences on the individual’s psychological and emotional development, and also about the role of anxiety in mental functioning. One of the most interesting findings concerns the force with which early experiences are imprinted on the limbic system’s primitive brain. Experiments have shown that any signal from the environment that threatens separation from, loss of or rejection by the caretaking adult triggers the amygdala, the source of emotional arousal. The chemicals with which the amygdala floods the body seem to serve to imbue these earliest emotional memories – whether positive or negative – with great intensity and therefore
embed them for life into the individual's brain. Despite the fact that many of
these earliest emotional experiences have been shown to take place outside
conscious awareness and memory, they have a critically important influence
on our behaviour in adulthood (LeDoux, 1999).

Another fascinating finding is that the area of the brain that contains
the capacity to relate meaningfully to others has been shown to develop only
through the stimulation and sense of security a child receives from a consistent
and loving carer. Research into children unfortunate enough to be deprived of
this relationship, for example in the worst orphanages, not only fail to thrive,
even if their physical needs are met, but also risk failing to develop the abilities
needed to empathize with and love other human beings.

**An illustration**

To illustrate the theoretical concepts and processes explained so far, the
following is an example of the unconscious dynamics of a child whose parental
attachment was disrupted.

**Dominic**

The example concerns Dominic, a young boy whose father was prone to
angry and critical outbursts towards his son. This threw the child into painful
conflict. On the one hand, he felt a murderous rage against his bullying
father, while on the other, he longed for his approval and felt great love and
admiration for him. These mixed feelings created in Dominic a high level of
anxiety. Without being consciously aware of what he was doing, he used
three common psychological defences: splitting, denial and idealization.
This meant that he split off the negative aspects of his father's behaviour,
denied how hurtful and upsetting it was, and developed a rose-tinted view
of him, exaggerating his good qualities, and blaming himself for provoking
and deserving his bad temper and critical opinions. At a conscious level, this
enabled Dominic to:

- preserve a positive image of his father and protected him against
  acknowledging the absence of the father he longed to have;
- avoid some of the pain and grief at having a father whose behaviour was
  harsh and rejecting;
- protect his father from the imagined effects of his own rage;
- reduce his sense of guilt at being angry with the father whom he loved,
  needed and longed to please, as well as hated and feared.

However, Dominic paid a heavy price for this unconscious defensive
manoeuvre. His repressed feelings of hurt, grief, anger and guilt had not
dissipated but remained active below the surface, in the unconscious part of
his mind where they functioned as a kind of emotional toxin, distorting his psychological and emotional development in a number of ways.

In denying the pain his father caused and preserving an almost entirely good image of him, Dominic was forced to denigrate and blame himself. This created significantly low self-esteem and a weakened ego with a reduced capacity to develop a positive sense of self. He had a strong tendency to become anxious in conflict situations when his fear of his own and others’ anger eroded his ability to assert himself firmly when appropriate. He also developed a highly critical superego that functioned both to internalize his father’s voice, with which he had allied, and to punish him for his anger at his father as well as for the supposed failings that provoked it in the first place. As a consequence, he often withdrew from close emotional connections with others.

As an adult, Dominic struggled to fulfil his potential at work. He tended to feel excessively anxious around authority figures he experienced as prone to criticize or disapprove of him. He was also prey to unexplained episodes of depression. He married but found it difficult to communicate openly to his wife about his feelings and often expressed his dissatisfaction in passive aggressive ways such as critical remarks dressed up as jokes and sulky withdrawal. He loved his two sons but found it hard to be as close to them as he would have liked and was experienced by them as emotionally detached and critical. In these ways, Dominic, and those close to him, suffered the negative impact of his unresolved and unacknowledged feelings about his father, his unconscious defences having created psychological and emotional patterns that – without help – would continue to colour his adult life.

**Psychodynamic therapy**

It was in the context of the theory outlined above that Freud conceived psychoanalysis as a clinical treatment. He developed it as a technique to help patients who were suffering from all kinds of symptoms that he believed resulted from their inability to tolerate difficult and unpleasant memories, feelings and thoughts. He believed that if this unconscious material could be surfaced and understood, it would release its damaging hold on the individual’s psyche. He therefore saw the role of the analyst as working to make the unconscious conscious. To this end, he encouraged the patient to say whatever came to mind and to bring their dreams to the sessions as ways of accessing unconscious material.

Freud was particularly concerned to gain access to the patient’s id, as he saw the underlying instinctual drives as central to their problems. Later thinkers and clinicians have placed greater emphasis on working with the patient’s ego and superego. Despite this, and other significant developments in clinical theory and practice, this essential aim of liberating individuals from
negative unconscious patterns through helping them understand, experience and release unbearable thoughts and feelings remains valid for psychodynamic forms of therapy today.

**Transference and counter-transference**

An important aspect of the psychodynamic model that should be highlighted here is the view that the relationship between analyst and patient, or therapist and client, is of particular significance in the treatment process. Freud realized, from his early clinical work, that his patients had a tendency to relate to him in ways that seemed to have more to do with key figures from their past than with himself. This led him to believe that certain aspects of the analytic situation encouraged an unconscious transferring of the emotions involved in early relationships, positive or negative, onto the relationship with the analyst. This reflected his view that human beings have a powerful tendency to repeat early experiences throughout life without being consciously aware of what they are doing. Freud’s concept of transference was extended to include the idea of counter-transference, namely the equivalent unconscious response of the analyst to the patient.

The concepts of transference and counter-transference have been considerably extended and developed over time. Most psychodynamic psychotherapists believe that we all bring to our adult relationships, both inside and outside the therapeutic setting, many of the emotional and psychological patterns of our early relationships with parents, siblings and other key figures. This is regarded as valuable information for the therapeutic work rather than a block to it. Similarly, the counter-transference is seen as comprising both conscious and unconscious elements of the therapist’s own response to the client. It will reflect a mix of the therapist’s own inner landscape and that of the client. The counter-transference is also seen as a valuable additional source of data about clients and how they relate to other figures in their lives. It is of course essential that the therapist is sufficiently self-aware to be able to separate his or her own contribution to the counter-transference response from that of the client.

**Psychological defence mechanisms**

Before exploring, in the following chapters, how the psychodynamically oriented coach can use psychodynamic theory to enhance their practice, I shall examine more fully one of the central concepts of the model. This is the way in which the unconscious mind deploys a range of psychological defence mechanisms to protect itself from unbearable anxiety and pain. On the one hand, as already noted, these mechanisms are part of normal human
functioning. On the other hand, when the individual’s early experiences have not supported the development of a healthy ego, they easily become dysfunctional. Whether they are part of the problem or part of the solution depends on how extensively and rigidly these defences are used.

Common defences include repression, denial, splitting, idealization, displacement, rationalization, intellectualization, identification, projection and projective identification. Understanding and being able to recognize when and how these defences are being used is a central part of the psychodynamic approach. The definitions below are illustrated with examples from my practice of clients who have demonstrated these defences. How I identified and addressed these defences is discussed later in the book.

Repression

This is one of the simplest – and most powerful – forms of psychological defence, involving the wholesale banning of painful or unacceptable aspects of one’s experience, thoughts or feelings by pushing or keeping them deep into the unconscious part of the mind.

Nick

A coaching client who used repression was Nick. A senior HR manager, he did not feel comfortable expressing anger or resentment towards colleagues under any circumstances, even in the face of strong provocation. It was important for him to be liked, and to feel himself to be a kind and caring person and even thinking badly of other people made him feel guilty. As a result, he had pushed his aggressive feelings into the unconscious part of his mind and, at a conscious level, was genuinely convinced that they did not exist.

While repressing his aggressive side served to protect Nick from the discomfort and anxiety that acknowledging it would have evoked, this unconscious defence brought with it a cost. Although generally popular at work, Nick's colleagues would become frustrated at times with his refusal to take a firm stand on certain issues that were of concern to them. For example, when another department attempted to take all the credit for a joint project, he was seen as too understanding of their point of view and insufficiently determined to fight his own team’s corner. This stance created tension in his working relationships with his colleagues, who considered him to be ineffective. Interestingly, outside work Nick was an active member of an Animal Rights pressure group and some of his repressed aggression was indirectly expressed in the strength of his indignation and fury about how animals were treated by parts of the scientific community.
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Denial
This defence is similar to repression but instead of painful or threatening thoughts or feelings being entirely repressed, the individual who denies an aspect of reality often has some awareness of it, in a less conscious part of themselves, and experiences some anxiety as a result. So, typically, when an alcoholic angrily denies that their drinking is a problem, at another level they know that it is indeed a problem and one that they feel worried and ashamed about. Or, when a coaching client furiously rejects a piece of critical 360-degree feedback, their emotional reaction may indicate that below the surface the criticism has struck a chord. So denial often relates to an emotion, thought or piece of behaviour – one’s own or another person’s – that arises from or provokes anxiety, or intensifies the individual’s inner conflict about an issue.

Belinda
Belinda, a sales manager who sought coaching to help her build confidence and impact, struggled to acknowledge her anger and distress but had not repressed these emotions in the wholesale fashion that Nick had done. In her first coaching session, she described in detail her boss’s behaviour towards her. If the facts were true, his conduct amounted to serious bullying. Yet Belinda denied that the boss’s behaviour was upsetting her or angering her, insisting instead that she felt sorry for him.

The coach noted, however, that her breathing became shallow, her posture tense, her voice tight and a red rash spread from her chest to her neck when she talked about what was happening, indications that she felt much more anxious and agitated than she was admitting to herself – but also that these emotions were just below the surface. By denying these feelings, Belinda was attempting to avoid the painful implications involved in acknowledging her true situation, namely that an authority figure that she had trusted was attacking her.

It also enabled her to avoid taking responsibility for doing something about it. By denying the true impact of her boss’s behaviour, she could maintain her self-image as a reasonable, patient individual who could rise above this unpleasant situation with dignity and self-control. However, the price Belinda paid for her denial was a high one. As well as suffering from the physiological effects of anxiety, it made it impossible for her to mobilize herself to stand up to her boss, negotiate an alternative solution or seek help from others.

Splitting and idealization
This defence involves seeing oneself and other people in black and white terms, usually as all good or all bad, even when reality indicates otherwise.
James
I recently saw an example of *splitting* when James, a coaching client who had just started a new job, described his new boss in the most positive and glowing terms and every member of the team he had inherited in negative, critical terms. While the boss may well have been excellent and the team members lacking in many ways, it was the extreme character of both descriptions – and the early stage of these relationships – that made me feel something defensive was taking place.

This unconscious splitting functioned to help James manage the anxiety and uncertainty he felt when confronted with a difficult new role and a complex set of new relationships. Lacking self-confidence, he really wanted to have a boss whom he could look up to and depend on so there was also an element of wishful thinking here. In addition, he knew that he was expected to reduce headcount in his team and by seeing its members in negative, two-dimensional terms he protected himself from some of the pain involved in having to make people redundant. The downside of this defence of course was that he could only take truly effective decisions by seeing and acknowledging the specific combination of strengths and weaknesses in all his colleagues.

*Idealization* is closely associated with the defence of splitting, as it is the process of seeing another person, group or organization in excessively rose-tinted terms.

In the example above, James idealized his boss – unconsciously refusing to recognize his limitations or flaws – out of a powerful wish to have a senior figure on whose judgement he could rely entirely. Part of this dynamic emerged as a result of early life experiences in which he had depended heavily on a much-loved but dominating father who had always known the answers in any situation. The risk with idealization is not only that another person or group is not seen realistically, warts and all, but that the individual systemically underrates themselves as a result of locating all the good qualities in the idealized person.

Displacement
The defence of displacement is used when an individual directs strong but difficult feelings about a person or situation onto a different target that is easier to blame.

Giles
This defence is well illustrated by Giles, a finance manager who tended to become extremely anxious when asked to present figures to his boss’s executive committee. In the run-up to these meetings, he would complain
vociferously to his team colleagues about the limitations of the firm’s IT system. There was some basis to his complaints about the IT system, but the timing of his outbursts, together with the emotional charge he brought to them, were good indicators that he was unconsciously displacing his difficult emotions from one thing to another. A reserved, logical individual, Giles did not feel comfortable admitting even to himself that he might be irrationally anxious or angry at being put in what felt like an exposed position by his boss. As a result of this defence, Giles lacked insight into the real cause of his experience of stress, which cut him off from exploring ways to reduce or manage it better.

**Rationalization**

This common defence takes the form of explaining away a difficult emotional situation. It serves to enable the individual to avoid taking responsibility for uncomfortable feelings or behaviours.

*Karen*

Karen, the managing director of the division of a financial services company, came to coaching as a result of critical feedback from several members of her team who experienced her management style as abrasive and at times intimidating. Karen’s initial response to this painful feedback was to rationalize why her colleagues might have said these things, citing factors that lay entirely outside her control. Primarily, she argued, the people who had complained were unhappy because they were longstanding members of staff who would object to any MD who tried to modernize the company. The way in which she had gone about modernizing it was not relevant, she argued. She also claimed that they were blaming her for a pay freeze imposed by Head Office, simply to express their dissatisfaction. While there was an element of truth in Karen’s arguments, they entirely discounted her own contribution to the situation and the extent to which the negative feedback was the result of her own behaviour.

**Intellectualization**

Often confused with rationalization, this defence is more subtle. It appears as if the individual using this defence is engaging with an issue but in fact this engagement is at a purely intellectual, abstract level and functions as an alternative to taking action.

*Lawrence*

A coaching client called Lawrence was put in charge of a change management project. We discussed what action he could take to help staff members who
were struggling with anxieties and negative feelings about the change. Whenever we broached this topic, Lawrence would agree that it was important but would somehow never be willing to focus on practical steps. Instead, he would talk animatedly but at a general, theoretical level about the issue, telling me about several books that he had read on the subject, comparing three different change management models and so on. It is likely that Lawrence’s unacknowledged emotional discomfort around the question of staff anxiety was driving this defence, which functioned to keep his feelings at arm’s length. Unfortunately, it was also functioning to block him from taking appropriate action to help his staff.

Identification

As young children, part of our development naturally includes wishing to be like our parents, particularly the parent of the same gender. They are our role models as well as having a central part in caring for us and helping us learn and grow. Seeing oneself as becoming like them also helps us to cope with our sense of relative weakness and immaturity compared with the adult parent’s strength and competence. Identification can also function as a defence against uncomfortable feelings, however, when it is used in an excessive or inappropriate way.

Peter

A successful entrepreneur, Peter had been brought up by a father who did well in business but had been a failure in school and had become negative about academic learning and in particular people who had been to university. Peter, too, had struggled at school as a result of dyslexia that was diagnosed only later in life (and which had most likely also affected his father) and this had led to feelings of low self-esteem, frustration and shame. One of the ways in which he coped with these painful emotions was to identify not only with his father’s similarly painful experience but also with his rather extreme views. While at one level this strong identification helped to shore up his self-esteem, at another level it interfered with Peter’s ability to perceive the damaging consequences of his father’s attitudes and to develop his own, more balanced and constructive viewpoint.

Projection

This common defence mechanism takes place when we unconsciously export an aspect of ourselves that we are not able to tolerate consciously to another person or group, and then blame or criticize them for the fault. We are all prone to using projection in everyday life but those individuals who have low self-awareness and an intolerant inner voice or superego tend to use projection
a great deal, even in the face of evidence indicating that the other person does not fit the projection.

**Julia**

Julia, who worked as an executive in a well-known publishing house, was a good example of this. As the third of four girls in a family where her parents longed for a boy, she had grown up feeling overlooked and insufficiently acknowledged. In adult life, she had become a highly competitive individual who was critical of others – yet her punitive superego led to her feeling guilty about these aspects of herself. As a result, she unconsciously disowned them, projecting them onto her colleagues and experiencing them as unfailingly competitive and critical instead. In coaching, she described in a plausible fashion the behaviour of her boss and a peer as deplorably underhand and aggressive towards her. It was only over time, when this pattern was repeated, that the coach realized the extent of the projection and was able to help Julia begin to acknowledge and tolerate the competitive and critical parts of herself and to see others more realistically.

**Projective identification**

The final defence mechanism I shall outline here is projective identification. It is similar to projection in that it involves exporting unwanted or intolerable feelings into another person. However, there is an important difference which is best explained via an example.

**Charlie**

A good instance of this defence in action arose when I was supervising another coach. My colleague was an experienced coach who usually felt quite confident in her role. However, when she had started working with a recently promoted public sector manager called Charlie, she found herself feeling inadequate and deskilled: ‘It seems as if nothing I do is helpful. He has not expressed dissatisfaction with the coaching – in fact he seems quite positive – but I have this sense of not being good enough and not knowing how to move forward. I leave the sessions feeling rather useless.’

As we explored Charlie’s character and the issues he was facing, we both realized that he was likely to be feeling quite insecure in his new, more senior role. He was not the first choice for this job and it had been offered only after an external candidate decided not to take it. His new boss was not particularly supportive of Charlie and was giving him little positive feedback. Although clues to this had emerged in the coaching sessions, Charlie had not expressed any of this explicitly to his coach. Instead, he had maintained that everything was more or less fine and insisted that he was coping well. On reflection, the coach felt that these assertions lacked conviction.
We hypothesized that Charlie may unconsciously have been using projective identification to defend himself against the anxiety and insecurity that he was experiencing at work. Rather than simply projecting his sense of inadequacy onto the coach, and then criticizing her, he was evoking in her those feelings of inadequacy. This was achieved through subtle unconscious behaviour, for example through not acknowledging the value of any of her comments or suggestions. Therefore, the coach’s uncharacteristic feelings of uselessness were the result of an unconscious communication from the client, via the mechanism of projective identification, of how he was actually feeling himself. Once the coach realized this, her sense of being deskillied disappeared and we were able to discuss how she might address Charlie’s insecurity.

**Applying the psychodynamic model**

In this chapter, I have introduced the underlying framework of the psychodynamic model. My aim has been to make the key concepts as coherent and accessible as possible. Some of you will be interested in deepening your understanding of the theory. Others will be primarily concerned with the application of these ideas in a coaching context. In the following chapters, I shall build the bridge between concepts and practice.

**Note**

1. All Freud’s ideas can be found in the *Standard Edition* of his *Complete Works* edited by J. Strachey *et al.* (1953–1974) and in a wealth of books that provide a good introduction to the subject. See the Bibliography.